

Crystal Run Healthcare Physicians LLP155 Crystal Run Road
Middletown, NY 10941-4028USA
(845) 703-6999**PATIENT INFORMATION**

NAME (Last, First Middle) Abramson, Luis		MRN 233709	SSN# ###-##-9281	BIRTHDATE 06/25/1979	LANGUAGE English	SEX M
LOCAL ADDRESS 22 Wawayanda Road		SECONDARY/BILLING ADDRESS (if Applicable)			ETHNICITY Hispanic Or Latino	
CITY, STATE, ZIP Warwick, NY 10990-3...		HOME PHONE (845) 248-5570	CITY, STATE, ZIP		SECONDARY HOME PHONE	RACE Declined to spec.
PRIMARY CARE PHYSICIAN Massih MD, Shawkat		REFERRING PHYSICIAN Han MD, Christopher S		CONTACT NAME		CONTACT HOME PHONE
SEXUAL ORIENTATION	PREFERRED PRONOUN	GENDER IDENTITY				
PRIMARY EMPLOYER NYPD Central Office		SECONDARY EMPLOYER (if Applicable)				
ADDRESS 1 Police Plaza		ADDRESS				
CITY, STATE, ZIP New York, NY 10038		CITY, STATE, ZIP				
WORK PHONE		WORK PHONE				

RESPONSIBLE PARTY INFORMATION (if Different than above)

NAME (Last, First Middle)		SSN#	BIRTHDATE	LANGUAGE	SEX
LOCAL ADDRESS		SECONDARY/BILLING ADDRESS (if Applicable)			
CITY, STATE, ZIP		CITY, STATE, ZIP			
HOME PHONE		SECONDARY HOME PHONE			
RELATIONSHIP TO PATIENT					

PRIMARY INSURANCE

NAME OF INSURANCE COMPANY HIP		POLICY# K1013541901	
NAME OF INSURED Abramson, Luis		GROUP#	
ADDRESS OF INSURANCE COMPANY P O Box 2845		COPAY AMT \$0.00	
CITY, STATE, ZIP New York, NY 10116-2845		DEDUCTIBLE	
RELATIONSHIP TO PATIENT SELF		EFFECTIVE DATE	EXPIRATION DATE

SECONDARY INSURANCE (if Applicable)

NAME OF INSURANCE COMPANY		POLICY#	
NAME OF INSURED		SSN#	BIRTHDATE
		GROUP#	
ADDRESS OF INSURANCE COMPANY		COPAY AMT	
CITY, STATE, ZIP		DEDUCTIBLE	
RELATIONSHIP TO PATIENT		EFFECTIVE DATE	EXPIRATION DATE

*All returned checks are subject to a \$25.00 check fee.


I authorize the release of any medical or other information necessary to process claims. I also authorize government benefits to the provider who accepts assignment and authorize payment to the physician/supplier for services provided. I understand and agree that, regardless of my insurance status, I am ultimately responsible for the balance on my account for any professional services rendered. I have read all the information on this sheet and have completed the above answers. I certify that this information is true and correct to the best of my knowledge. I will notify you of any changes in the above information.

SIGNATURE OF PATIENT/GUARDIAN

DATE


Insurance Card - Abramson, Luis

Front:

 **THE CITY OF NEW YORK**
EmblemHealth **HIP HMO BENEFITS PROGRAM**

MEMBER: Luis G Abramson
ID NUMBER: K1013C41901 **Customer Service:** 833-CNY-Gol

Network: Prime
PCP Name: Dr. Shawkat G Massih
PCP Phone: 845-703-8999
Copay: PCP \$10 SPEC \$10 Urgent Care: \$50 ER \$150 Rx NA/NA
Rx BIN#: 400023

ConnectCare 


Back:

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MEMBERS
Customer Service: 833-CNY-GOLD (833-269-4553)
Behavioral Health Services: 888-447-2526

PROVIDERS
Provider Services: 866-447-9717
Behavioral Health claims: EmblemHealth Behavioral Health Services
PO Box 1850, Hicksville, NY 11802
All other claims: emblemhealth.com

For TTY: 711


Underwritten by Health Insurance Plan of Greater New York



155 Crystal Run Road
Middletown, NY 10941

845-703-6999
www.crystalrunhealthcare.com

PATIENT NAME: Luis Abramson
DOB: 06/25/1979

VISIT DATE: 02/12/2020 4:12 PM

Active Medication List as provided by patient to Crystal Run:

Start Date	Generic Name	Brand Name	Dose	Drug Usage	Refills	Quant	Prescribed Else
04/25/2016	fexofenadine/pseudo ephedrine	ALLEGRA-D 24 HOUR	180 mg-240 mg	take 1 tablet by oral route every day on an empty stomach with a glass of water	5	30	N
09/13/2019	clotrimazole/betamethasone dip	CLOTRIMAZOLE-BETAMETHASON E	1 %-0.05 %	apply by topical route 2 times every day for 4 weeks to the affected and surrounding areas of skin in the morning and evening	2	60	N
	pregabalin	LYRICA	100 mg	take 1 capsule (100MG) by oral route 3 times every day	0		Y
	naproxen	NAPROXEN	UNKNOWN	take 1 tablet by oral route 2 times every day with food	0		Y
09/13/2019	esomeprazole magnesium	NEXIUM	40 mg	take 1 capsule by oral route every day	5	30	N
09/13/2019	montelukast sodium	SINGULAIR	10 mg	take 1 tablet by oral route every day in the evening	5	30	N
09/13/2019	triamcinolone acetonide	TRIAMCINOLONE ACETONIDE	0.1 %	apply by topical route 2 times every day a thin layer to the back	0	60	N

All Unresolved Allergies:

Ingredient	Reaction (Severity)	Medication Name	Comment
APPLE			
AVOCADO			
BANANA	Nausea/Vomiting		
VENOM-HONEY BEE			

We keep track of when your health maintenance tests were done. On a review, it looks like you may be due for the following tests/exams:

Patient Name: Luis Abramson DOB: 06/25/1979
Encounter Date: 02/12/2020 4:12 PM

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Test/Exam

FLU SHOT

Date Due

10/31/2013

Future Appointments

<u>Date</u>	<u>Time</u>	<u>Appt Event</u>	<u>Provider</u>	<u>Location</u>
02/14/2020	3:30 PM	Medical Clearance (Pre-Op)	Massih MD, Shawkat	Middletown 155
03/06/2020	3:45 PM	New Pt	Pomykala DO, Matthew	Middletown 155

Date Run: 02/12/2020

Created by: Verna L. Heureux

Patient Name: Luis Abramson DOB: 06/25/1979

Encounter Date: 02/12/2020 4:12 PM

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155 Crystal Run Road
Middletown, NY 10941

845-703-6999
www.crystalrunhealthcare.com

Patient: Luis Abramson
Date of Birth: 06/25/1979
Date: 02/11/2020 11:37 AM
Visit Type: Consult
Document Type: Consult Note

Emmanuel Schenkman MD
155 Crystal Run Road
Crystal Run Healthcare
Middletown, NY 10941-4028

Re: Luis Abramson
DOB: 06/25/1979
Age: 40 years
Gender: Male

I had the pleasure of participating in the care of your patient at request for a consultation.

This 40 year old male presents for Prostate cancer.

History of Present Illness:

1. Prostate cancer

The patient is here today for an initial visit. He was initially seen on 02/11/2020. The patient's status is stable. The patient's recent Gleason score was 3+4. His highest Gleason score was 3+4. The patient denies abdominal pain, chills, dysuria, a fever, headache, hematuria, nausea, nocturia, suprapubic pain, urinary frequency, urinary incontinence, urinary retention, urinary urgency or vomiting. Pertinent history includes a family history of prostate cancer.

Chronic Conditions Addressed Today:

Diagnosis Description	Code	Status	HPI Comments
Malignant neoplasm of prostate	C61		

PAST MEDICAL/SURGICAL HISTORY (Reviewed, no changes)

Disease/disorder	Onset Date	Management	Date	Comments
Lasik	2011			
MVA	11/2009			
Sp mva, torn ligament and meniscal tear left knee		arthroscopy X 2		

Medications (Started, Stopped or Renewed this visit)

Started	Medication	Directions	Instruction	Stopped
04/25/2016	Allegra-D 24 Hour 180 mg-240 mg tablet, extended release	take 1 tablet by oral route every day on an empty stomach with a glass of water		
09/13/2019	clotrimazole-betam ethasone 1 %-0.05 % topical cream	apply by topical route 2 times every day for 4 weeks to the affected and surrounding areas of skin in the morning and evening		
	Lyricea 100 mg capsule	take 1 capsule (100MG) by oral route 3 times every day		
	naproxen	take 1 tablet by oral route 2 times every day with food		
09/13/2019	Nexium 40 mg capsule, delayed release	take 1 capsule by oral route every day		
09/13/2019	Singulair 10 mg tablet	take 1 tablet by oral route every day in the evening		
09/13/2019	triamcinolone acetonide 0.1 % topical cream	apply by topical route 2 times every day a thin layer to the back		

Allergies

Ingredient	Reaction (Severity)	Medication Name	Comment
APPLE			
AVOCADO			
BANANA	Nausea/Vomiting		
VENOM-HONEY BEE			
Reviewed, no changes.			

Family History (Reviewed, no changes)

Relationship	Family Member Name	Deceased	Age at Death	Condition	Onset Age	Cause of Death
Family h/o				Cancer - prostate		

Father		Hypertension	N
Maternal grandmother		Coronary artery disease	N
Maternal grandmother		Stroke	N
Mother		Hypertension	N
Mother	N	Sickle cell disease	N
Paternal uncle		Cancer, colon	N

Social History:

Reviewed, no changes. Last detailed document date: 02/05/2020.

Review of Systems

System	Neg/Pos	Details
Constitutional	Negative	Chills and Fever.
Respiratory	Negative	Dyspnea.
Cardio	Negative	Chest pain and Irregular heartbeat/palpitations.
GI	Negative	Abdominal pain, Nausea and Vomiting.
GU	Negative	Dysuria, Hematuria, Nocturia, Suprapubic pain, Urgency, Urinary frequency, Urinary incontinence and Urinary retention.
Neuro	Negative	Headache.
Psych	Negative	Psychiatric symptoms.
Integumentary	Negative	Rash.
MS	Negative	Back pain.
Allergic/Immuno	Negative	Food allergies.
Reproductive	Negative	Penile discharge.

Vital Signs

Time	BP mm/Hg	Pulse /min	Resp /min	Temp F	Ht ft	Ht in	Ht cm	Wt lb	Wt kg	BMI kg/m2	BSA m2	O2 Sat%
10:34 AM					5.0	6.00	167.64	220.00	99.790	35.51		

Measured By

Time	Measured by
10:34 AM	Stacey Baldock LPN

Physical Exam

Exam	Findings	Details
Constitutional	Normal	No acute distress.
Head/Face	Normal	Facial features - Normal.

Neck Exam	Normal	Inspection - Normal. Range of motion - Normal.
Lymph Detail	Normal	Inguinal.
Respiratory	Normal	Inspection - Normal. Cough - Absent. Effort - Normal.
Cardiovascular	Normal	Extremities - No edema.
Abdomen	Normal	Inspection - Normal. Anterior palpation - Normal, No guarding, No rebound. CVA tenderness - None. Umbilicus - Normal.
Genitourinary	Normal	Penis - Normal. Urethral meatus - Normal. Scrotum - Normal. No CVA Tenderness. No suprapubic tenderness.
Musculoskeletal	Normal	Gait - Normal.
Extremity	Normal	No Edema.
Neurological	Normal	Level of consciousness - Normal. Orientation - Normal. Balance & gait - Normal.
Psychiatric	Normal	Orientation - Oriented to time, place, person & situation.

Assessment/Plan

#	Detail Type	Description
1.	Assessment Impression	<p>Malignant neoplasm of prostate (C61), chronic cT1c PSA: 9.6 PBx: G3+4 in 4 of 12 cores; GG2, up to 50% core, +PNI Volume: gm on TRUS AUAss: n/a but no voiding complaints SHIM: n/a but no ED MSKCC Normogram: ECE 56%, LN 3%, SV 4% Staging w/u: none indicated per NCCN guideline PSH: no intraabdominal surgery</p> <p>favorable intermediate risk group PCa</p> <p>I discussed the treatment options including active surveillance, radiation therapy with/without ADT, and robotic radical prostatectomy with bilateral pelvic lymph node dissection. The risks and benefits of each procedure were discussed in detail. Pt understands and wishes to proceed with RALP with b/l PLND. pt discussed about his social situation at home/work (autistic son, being involved with autistic organizations, etc.) as well for his decision making rationale.</p> <p>The risks of infection, bleeding, injury to surrounding structures (including bowel, bladder, ureter, blood vessels, or rectum which may require colostomy), urinary incontinence requiring pads/diapers or surgery, erectile dysfunction, lymphedema, and need for adjuvant XRT and/or ADT were discussed. We also discussed the potential adjuvant therapy either immediately or following local/systemic recurrences were discussed.</p> <p>I offered him to see a radiation oncologist to be fully informed of his alternative options. Pt declined.</p> <p>- medical clearance - PAT/CXR</p>

- will schedule for RALP with b/l PLND.

Counseling / Educational Factors:

Counseling / educational factors reviewed.

The patient was counseled today by Christopher Han MD on dx/tx...

Greater than 50% of the time was spent counseling the patient and/or coordinating care.

This is a visit of 80 minutes. 60 minutes were spent counseling.

Thank you for the opportunity to evaluate this interesting patient. Please feel free to contact our office with any questions.

Provider:

Han MD, Christopher S 02/11/2020 11:37 AM

Crystal Run Healthcare, LLP

Electronically signed by Christopher S. Han MD on 02/11/2020 03:57 PM