

Name: BERRY, VICKIE L

MRN / FIN: 10502 6493896

DOB / Age: 3/1/1953 72 years

Sex / Birth Sex: Female Female

Admit Date: 4/4/2022

Discharge Date: 4/4/2022

Attending: Akande MD, Olusina

Copy to: CareAware Oauth, LOGN_IN

Office Clinic Notes

Document Type:

Service Date/Time:

Result Status:

Office Clinic Note Physician

4/4/2022 10:15 EDT

Auth (Verified)

BERRY, VICKIE L

DOB: 03/01/1953

Age: 69 years

Sex: Female

MRN: 10502

Registration Date: 04/04/2022

Primary Care Physician:

Akande MD, Olusina

Chief Complaint

6 month follow up

History of Present Illness

HTN

Controlled

BPs at home are not measured.

Contributing/CAD risk factors: HLD, hypothyroidism.

Medications: Amlodipine, lisinopril. Side effects include none. Compliant

Associated sx's: Denies CP, sudden increase in floaters, orthopnea, peripheral edema, urinary changes, decreased exercise tolerance, sudden weakness, dysarthria.

CVA

Had CVA around 2016

No residual deficits.

On on statin, aspirin, and Plavix. Compliant.

No recent falls.

Blood pressure controlled.

Hypothyroidism

Pt is on levothyroxine.

Complaint with medication.

Side effects: None

Denies any fatigue, weight gain, cold intolerance, constipation, or dry skin.

GERD

Chronic reflux controlled with PPI.

Denies cough, SOB, sore throat, changes of taste.

No dysphagia.

No chest pain.

Problem List/Past Medical History

Ongoing

Aneurysm, cerebral

Constipation, unspecified

Depression with anxiety

Disease caused by 2019 novel coronavirus

Essential hypertension

Gastro-esophageal reflux disease without esophagitis

Hemorrhoids

History of colon polyps

History of CVA (cerebrovascular accident) without residual deficits

Hypothyroidism, acquired, autoimmune

Iron deficiency anemia

Keratoconus

Mixed hyperlipidemia

Other chronic pain

Historical

No qualifying data

Procedure/Surgical History

- Colonoscopy (04/14/2008)

- Stroke

- Tonsillectomy

Medications

amlodipine 5 mg oral tablet, 5 mg= 1 tab,
Oral, Daily, 4 refills

aspirin 81 mg oral tablet, 81 mg= 1 tab, Oral,
Daily

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HLD
Compliant with statin.
No side effects.
Following a low-cholesterol diet.

Keratoconus
Has keratoconus a condition where her cornea is shaped like a cone instead of a sphere.
Continues to follow-up with ophthalmology in order to get especially made contacts.

Aneurysms
Patient states that on head imaging she was recently found to have 2 aneurysms. States that she did have a follow-up appointment with Dr. Reibold however she did not like him.
She was told that the aneurysms were small and she did not need to follow-up with him for 5 years.
She would like a another opinion to see if this is true.

Review of Systems

Constitutional: No fevers, chills, sweats
Eye: No recent visual problems
ENT: No ear pain, nasal congestion, sore throat
Respiratory: No shortness of breath, cough
Cardiovascular: No Chest pain, palpitations, syncope
Gastrointestinal: No nausea, vomiting, diarrhea
Genitourinary: No hematuria
Hema/Lymph: Negative for bruising tendency, swollen lymph glands
Endocrine: Negative for excessive thirst, excessive hunger
Musculoskeletal: No back pain, neck pain, joint pain, muscle pain, decreased range of motion
Integumentary: No rash, pruritus, abrasions
Neurologic: Alert & oriented X 4
Psychiatric: No anxiety, depression

Physical Exam

Vitals & Measurements

T: 36.5 °C (Oral) HR: 107(Peripheral) RR: 16 BP: 114/76 SpO2: 99%
HT: 162.56 cm WT: 79.9 kg BMI: 30

General: NAD, awake and conversant
Eyes: Normal conjunctiva, anicteric, round symmetric pupils
ENT: Hearing grossly intact, no nasal discharge
Neck: Neck is supple, no masses or thyromegaly
Pulm: Respirations are nonlabored, no wheezing
CV: No lower extremity edema
MSK: Normal ambulation, no clubbing or cyanosis
Skin: Warm, no rashes or ulcers
Neuro: Sensation and CN II - XII grossly normal
Psych: Alert and oriented, cooperative, appropriate mood and affect, normal judgment

Assessment/Plan

1. Aneurysm, cerebral I67.1
Chronic, stable.
Referral provided for second opinion with Dr. Du.
Ordered:

Bactrim DS 800 mg-160 mg oral tablet, 1 tab, Oral, every 12 hr
clopidogrel 75 mg oral tablet, 1 tab, Oral, Daily
FeroSul 325 mg (65 mg elemental iron) oral tablet, TAKE 1 TABLET BY MOUTH EVERY OTHER DAY
levothyroxine 100 mcg (0.1 mg) oral tablet, 1 tab, Oral, Daily
lisinopril 40 mg oral tablet, 1 tab, Oral, Daily
omeprazole 40 mg oral delayed release capsule, 40 mg= 1 cap, Oral, Daily, 3 refills
pravastatin 20 mg oral tablet, 1 tab, Oral, Daily
Pyridium 100 mg oral tablet, 100 mg= 1 tab, Oral, TID
traZODone 50 mg oral tablet, 4 tab, Oral, every day at bedtime, PRN
venlafaxine 150 mg oral capsule, extended release, 300 mg= 2 cap, Oral, Daily, 1 refills

Allergies

No Known Allergies
No Known Medication Allergies

Social History

Alcohol

Past

Electronic Cigarette/Vaping

Electronic Cigarette Use: Never.

Employment/School

Work/School description: home health aide.

Exercise

Physical Activity Intensity: Light. Sleep number of hours per night: 6. Self assessment: Fair condition.

Home/Environment

Marital Status of Patient if Patient Independent Adult: Married.-
Comments: Children: yes 3

Nutrition/Health

Diet: Vegetarian. Wants to lose weight: Yes.

Substance Use

Never

Tobacco

Tobacco Use: Are you a: nonsmoker.
Exposure to Secondhand Smoke: No.
Smokeless Tobacco Use: Never.

Family History

Congestive heart failure: Mother.
Fire: Child.
Healthy adult: Sister and Brother.
Hypertension: Mother and Father.

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Referral Ambulatory, Neurology, aneurysm, Du MD, Cheng, 04/04/22 10:13:00 EDT, Overdose: Child.
Aneurysm, cerebral

2. Essential hypertension I10

Chronic, controlled.

Complicated by nothing.

Meds: No change in management

Labs: Future labs sent.

Imaging: EKG not on file

Counseled on lifestyle changes such as low salt diet, activity, and excess alcohol.

Ordered:

Basic Metabolic Panel, Blood, Routine, *Est. 10/04/23 +/- 28 days, Once, Lab Collect, Order for future visit, Essential hypertension | Hypothyroidism, acquired, autoimmune | Mixed hyperlipidemia | History of CVA (cerebrovascular accident) without residual deficits

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Immunizations

Vaccine	Date	Status
SARS-CoV-2 (COVID-19) mRNA-1273 vaccine	11/27/2021	Recorded
SARS-CoV-2 (COVID-19) mRNA-1273 vaccine	03/08/2021	Recorded
SARS-CoV-2 (COVID-19) mRNA-1273 vaccine	02/04/2021	Recorded
influenza, unspecified formulation	10/23/2015	Recorded
influenza, unspecified formulation	11/14/2014	Recorded
influenza, unspecified formulation	11/18/2013	Recorded
Novel Influenza-H1N1-09, all formulation	01/29/2010	Recorded

Health Maintenance

Pending (in the next year)

OverDue

Colorectal Cancer Screening
due 04/14/18 and every 10 years
Aspirin Therapy for Prevention of CVD
due 09/16/21 and every 1 years
Breast Cancer Screening
due 02/10/22 and every 2 years

Due

Alcohol Use Screening
due 04/04/22 and every 1 years
Bone Density Screening
due 04/04/22 and every 2 years
Glaucoma Screening
due 04/04/22 and every 1 years
Hepatitis C Screening
due 04/04/22 One-time only

Initial Preventative Physical Examination (Medicare)
due 04/04/22 One-time only

Refused

Influenza Vaccine due 09/02/22 and every 1 years

Due In Future

Adult Wellness Exam not due until 10/04/22 and every 1 years

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3. Hypothyroidism, acquired, autoimmune E06.3

Chronic, stable

Labs: TSH sent.

Meds: Continue current medication.

Counseled on healthy activity and diet.

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Depression Screening not due until 10/04/22 and every 1 years

Fall Risk Screening not due until 10/04/22 and every 1 years

Annual Wellness Visit (Medicare) not due until 10/04/22 and every 1 years
Satisfied (in the past 1 year)

Satisfied

Adult Wellness Exam on 10/04/21.

Annual Wellness Visit (Medicare) on 10/04/21. Satisfied by Akande MD, Olusina

Body Mass Index

on 04/04/22. Satisfied by Roller, Steph

COVID-19 Vaccine - Moderna Dose 3 Booster on 11/27/21. Satisfied by Mullins CMA, Lindsey

Depression Screening

on 10/04/21. Satisfied by Munoz, Jasmen

Fall Risk Screening

on 10/04/21. Satisfied by Munoz, Jasmen

High Blood Pressure Screening

on 04/04/22. Satisfied by Roller, Steph

Refused

Influenza Vaccine

on 03/08/22. Recorded by Mullins CMA, Lindsey Reason: Patient Refuses

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4. Keratoconus H18.609

Chronic, controlled.

Pt to continue following up with ophthalmology.

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5. Mixed hyperlipidemia E78.2

Chronic, stable.

Most likely due to genetic expression.

ASCVD: Pending labs

Meds: No changes in management

Imaging: None.

Discussed healthy lifestyle.

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Mixed hyperlipidemia | History of CVA (cerebrovascular accident) without residual deficits

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6. History of CVA (cerebrovascular accident) without residual deficits Z86.73

Chronic, stable.

No current changes in medication management.

Continue to work towards optimal BP and glycemic control.

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7. Gastro-esophageal reflux disease without esophagitis K21.9

Chronic, stable.

Meds: Continue PPI therapy

No suspected reflux complications (barret/stricture).

Lifestyle: wt loss, avoid meals 2-3 hrs before bed.

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Future Orders

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CBC w/o Differential, Blood, Routine, *Est. 04/04/22 +/- 28 days, Once, Lab Collect, Order for future visit, Essential hypertension | Hypothyroidism, acquired, autoimmune | Mixed hyperlipidemia | History of CVA (cerebrovascular accident) without residual deficits

CBC w/o Differential, Blood, Routine, *Est. 10/04/22 +/- 28 days, Once, Lab Collect, Order for future visit, Essential hypertension | Hypothyroidism, acquired, autoimmune | Mixed hyperlipidemia | History of CVA (cerebrovascular accident) without residual deficits

CBC w/o Differential, Blood, Routine, *Est. 04/04/23 +/- 28 days, Once, Lab Collect, Order for future visit, Essential hypertension | Hypothyroidism, acquired, autoimmune | Mixed hyperlipidemia | History of CVA (cerebrovascular accident) without residual deficits

CBC w/o Differential, Blood, Routine, *Est. 10/04/23 +/- 28 days, Once, Lab Collect, Order for future visit, Essential hypertension | Hypothyroidism, acquired, autoimmune | Mixed hyperlipidemia | History of CVA (cerebrovascular accident) without residual deficits

Lipid Panel, Blood, Routine, *Est. 04/04/22 +/- 28 days, Once, Lab Collect, Order for future visit, Essential hypertension | Hypothyroidism, acquired, autoimmune | Mixed hyperlipidemia | History of CVA (cerebrovascular accident) without residual deficits

Lipid Panel, Blood, Routine, *Est. 10/04/22 +/- 28 days, Once, Lab Collect, Order for future visit, Essential hypertension | Hypothyroidism, acquired, autoimmune | Mixed hyperlipidemia | History of CVA (cerebrovascular accident) without residual deficits

Lipid Panel, Blood, Routine, *Est. 04/04/23 +/- 28 days, Once, Lab Collect, Order for future visit, Essential hypertension | Hypothyroidism, acquired, autoimmune | Mixed hyperlipidemia | History of CVA (cerebrovascular accident) without residual deficits

Lipid Panel, Blood, Routine, *Est. 10/04/23 +/- 28 days, Once, Lab Collect, Order for future visit, Essential hypertension | Hypothyroidism, acquired, autoimmune | Mixed hyperlipidemia | History of CVA (cerebrovascular accident) without residual deficits

Microalbumin/Creatinine Ratio Urine, Urine, Routine Collect, *Est. 04/04/22 +/- 28 days, Once, Lab Collect, Print Label, Order for future visit, Essential hypertension | Hypothyroidism, acquired, autoimmune | Mixed hyperlipidemia | History of CVA (cerebrovascular accident) without residu...

Microalbumin/Creatinine Ratio Urine, Urine, Routine Collect, *Est. 10/04/22 +/- 28 days, Once, Lab Collect, Print Label, Order for future visit, Essential hypertension

Logansport Family

Name: BERRY, VICKIE L

MRN / FIN: 10502

6493896

Office Clinic Notes

| Hypothyroidism, acquired, autoimmune | Mixed hyperlipidemia | History of CVA (cerebrovascular accident) without residu...
Microalbumin/Creatinine Ratio Urine, Urine, Routine Collect, *Est. 04/04/23 +/- 28 days, Once, Lab Collect, Print Label, Order for future visit, Essential hypertension
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| Hypothyroidism, acquired, autoimmune | Mixed hyperlipidemia | History of CVA (cerebrovascular accident) without residu...
Thyroid Stimulating Hormone, Blood, Routine, *Est. 04/04/22 +/- 28 days, Once, Lab Collect, Order for future visit, Essential hypertension | Hypothyroidism, acquired, autoimmune | Mixed hyperlipidemia | History of CVA (cerebrovascular accident) without residual deficits
Thyroid Stimulating Hormone, Blood, Routine, *Est. 04/04/23 +/- 28 days, Once, Lab Collect, Order for future visit, Essential hypertension | Hypothyroidism, acquired, autoimmune | Mixed hyperlipidemia | History of CVA (cerebrovascular accident) without residual deficits

Referral Orders

Referral Ambulatory, Neurology, aneurysm, Du MD, Cheng, 04/04/22 10:13:00 EDT, Aneurysm, cerebral

Follow Up Instructions

No qualifying data available

Electronically Signed on 04/04/22 10:15 AM

Akande MD, Olusina