



Vickie L Berry

Patient Health Summary, generated on May 09, 2025

Patient Demographics - Female; born Mar. 01, 1953

Patient Address	Patient Name	Communication
108 Western Avenue (Home) LOGANSPOUT, IN 46947	Vickie L Berry	574-721-6940 (Home) 574-721-6940 (Mobile) vickielynnberry@gmail.com
Former (Oct. 22, 2024 - Oct. 21, 2024): (Home)		
Language	Race / Ethnicity	Marital Status
English (Preferred)	White / Not Hispanic or Latino	Married

Note from Acumen Nephrology

This document contains information that was shared with Vickie L Berry. It may not contain the entire record from Acumen Nephrology.

Allergies

No known active allergies

Medications

<b>amLODIPine (NORVASC) 5 MG tablet</b> (Started 1/15/2020) Take 5 mg by mouth 1 (one) time each day
<b>clopidogrel (PLAVIX) 75 MG tablet</b> Take 75 mg by mouth 1 (one) time each day
<b>levothyroxine (SYNTHROID, LEVOTHROID) 100 MCG tablet</b> (Started 1/28/2020) Take 100 mcg by mouth 1 (one) time each day
<b>olmesartan (BENICAR) 40 MG tablet</b> (Started 9/25/2024) Take 40 mg by mouth 1 (one) time each day
<b>pravastatin (PRAVACHOL) 20 MG tablet</b> Take 20 mg by mouth 1 (one) time each day
<b>traZODone (DESYREL) 50 MG tablet</b> Take 50 mg by mouth every night
<b>venlafaxine XR (EFFEXOR-XR) 150 MG 24 hr capsule</b> Take 300 mg by mouth 1 (one) time each day
<b>omeprazole (PriLOSEC) 40 MG DR capsule</b> Take 40 mg by mouth 1 (one) time each day Do not crush or chew.
<b>lactulose (CHRONULAC) 10 GM/15ML solution</b> Take 20 g by mouth
<b>Calcium Carb-Cholecalciferol (CALCIUM 500 + D PO)</b> Take 1 tablet by mouth 1 (one) time each day

Active Problems

Problem	Noted Date	Diagnosed Date
<u>Vertigo</u>	12/23/2024	
<u>Other chronic pain</u>	12/23/2024	
<u>Mixed hyperlipidemia</u>	12/23/2024	
<u>Mixed anxiety and depressive disorder</u>	12/23/2024	
<u>Iron deficiency anemia</u>	12/23/2024	
<u>History of malignant basal cell neoplasm of skin</u>	12/23/2024	
<u>History of cerebrovascular accident without residual deficits</u>	12/23/2024	
<u>Hemorrhoid</u>	12/23/2024	
<u>Gastroesophageal reflux disease</u>	12/23/2024	
<u>Cough</u>	12/23/2024	
<u>Intracranial aneurysm</u>	12/23/2024	
<u>Bilateral cataracts</u>	12/23/2024	
<u>Essential hypertension</u>	12/23/2024	
<u>Aphasia</u>	12/23/2024	
<u>Carotid artery stenosis</u>	10/26/2023	
<u>Hypothyroidism</u>	03/18/2016	

Immunizations

<b>H1N1 All Forms</b> (Given 1/29/2010)
<b>Influenza, Unspecified</b> (Given 10/23/2015, 11/14/2014, 11/18/2013)
<b>Moderna SARS-COV-2</b> (Given 11/27/2021, 3/8/2021, 2/4/2021)
<b>Tdap</b> (Given 5/13/2022)

Social History

Tobacco Use	Types	Packs/Day	Years Used	Date
<u>Smoking Tobacco: Never</u>				
<u>Smokeless Tobacco: Never</u>				
<u>Alcohol Use</u>	Standard Drinks/Week			
<u>Never</u>	0 (1 standard drink = 0.6 oz pure alcohol)			
<u>Pregnant</u>	Comments			
<u>Unknown</u>				
Sex and Gender Information		Value	Date Recorded	
<u>Sex Assigned at Birth</u>		Not on file		
<u>Legal Sex</u>		Female	10/22/2024 1:40 PM EDT	
<u>Gender Identity</u>		Not on file		
<u>Sexual Orientation</u>		Not on file		

Last Filed Vital Signs

Vital Sign	Reading	Time Taken	Comments
<u>Blood Pressure</u>	146/80	01/13/2025 2:42 PM EST	
<u>Pulse</u>	103	01/13/2025 2:42 PM EST	
<u>Temperature</u>	-	-	
<u>Respiratory Rate</u>	16	01/13/2025 2:42 PM EST	
<u>Oxygen Saturation</u>	97%	01/13/2025 2:42 PM EST	
<u>Inhaled Oxygen Concentration</u>	-	-	
<u>Weight</u>	81.2 kg (179 lb)	01/13/2025 2:42 PM EST	
<u>Height</u>	162.6 cm (5' 4")	01/13/2025 2:42 PM EST	
<u>Body Mass Index</u>	30.73	01/13/2025 2:42 PM EST	

Results

GENERAL LABS - Final result (01/15/2025 10:25 AM EST)

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time	
			01/15/2025 10:25 AM EST	01/15/2025 10:25 AM EST	
Narrative					
<u>IHIE - 01/15/2025 1:16 PM EST</u>					
	Lab	Result	Units	Range	Flag
U Microalb/Creat					
	U Microalb	1	mg/dL		
	U Creatinine	168	mg/dL		
U Microalb/Creat Ratio					
		6	mg/g Cr	0-29	
Normal: 0 - 29 Moderately increased: 30 - 300 Severely increased: >300					
<u>Logansport Memorial Hospital 1101 Michigan Avenue Logansport, IN 46947</u>					
Authorizing Provider	Result Type		Result Status		
<u>Melissa Anderson</u>	<u>LAB HISTORICAL- CONVERSIONS- UNSOLICITED RESULTS</u>		<u>Final Result</u>		
Performing Organization	Address		City/State/ZIP Code	Phone Number	
<u>IHIE</u>				-	

GENERAL LABS - Final result (01/15/2025 10:25 AM EST)

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time	
			01/15/2025 10:25 AM EST	01/15/2025 10:25 AM EST	
Narrative					
IHIE - 01/15/2025 1:06 PM EST					
	Lab	Result	Units	Range	Flag
U Prot					
	U Protein	13			
Logansport Memorial Hospital 1101 Michigan Avenue Logansport, IN 46947					
Authorizing Provider	Result Type		Result Status		
Melissa Anderson	LAB HISTORICAL- CONVERSIONS- UNSOLICITED RESULTS		Final Result		
Performing Organization	Address		City/State/ZIP Code	Phone Number	
IHIE				-	

GENERAL LABS - Final result (01/15/2025 10:25 AM EST)

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time	
			01/15/2025 10:25 AM EST	01/15/2025 10:25 AM EST	
Narrative					
IHIE - 01/15/2025 12:02 PM EST					
	Lab	Result	Units	Range	Flag
UA Micro					
	UA WBC	0-2		None present	A
	UA RBC	0-2		None present	A
	UA Bacteria	1+		Negative	A
UA Squam Epithelial					
		Many		None present	A
Logansport Memorial Hospital 1101 Michigan Avenue Logansport, IN 46947					

Authorizing Provider		Result Type		Result Status					
Melissa Anderson		LAB HISTORICAL-CONVERSIONS-UNSOLICITED RESULTS		Final Result					
Performing Organization		Address		City/State/ZIP Code		Phone Number			
IHIE						-			
GENERAL LABS - Final result (01/15/2025 10:25 AM EST)									
Specimen (Source)		Anatomical Location / Laterality		Collection Method / Volume		Collection Time		Received Time	
						01/15/2025 10:25 AM EST		01/15/2025 10:25 AM EST	
Narrative									
IHIE - 01/15/2025 12:01 PM EST									
Lab		Result		Units		Range		Flag	
UA w Micro if Ind									
UA Appear		Slightly Cloudy							
UA Color		Yellow							
UA pH		5.5							
UA Spec Grav		1.025							
UA Glucose		Negative		mg/dL					
UA Ketones		Trace		mg/dL					
UA Leuk Est		Small							
UA Blood		Negative							
UA Nitrite		Negative							
UA Bili		Negative							
UA Protein		Negative							
UA Urobilinogen		0.2							
UA Micro Ind?		Yes				No		A	
UA Culture Indicated?		No				No			
Breakpoint		*****							
Logansport Memorial Hospital 1101 Michigan Avenue Logansport, IN 46947									
Authorizing Provider		Result Type		Result Status					
Melissa Anderson		LAB HISTORICAL-CONVERSIONS-UNSOLICITED RESULTS		Final Result					
Performing Organization		Address		City/State/ZIP Code		Phone Number			
IHIE						-			
GENERAL LABS - Final result (01/15/2025 10:19 AM EST)									
Specimen (Source)		Anatomical Location / Laterality		Collection Method / Volume		Collection Time		Received Time	
						01/15/2025 10:19 AM EST		01/15/2025 10:19 AM EST	
Narrative									
IHIE - 01/15/2025 11:02 AM EST									
Lab		Result		Units		Range		Flag	
Mg									
Magnesium Level		2.10		mg/dL		1.70-2.60			
Logansport Memorial Hospital 1101 Michigan Avenue Logansport, IN 46947									
Authorizing Provider		Result Type		Result Status					
Melissa Anderson		LAB HISTORICAL-CONVERSIONS-UNSOLICITED RESULTS		Final Result					
Performing Organization		Address		City/State/ZIP Code		Phone Number			
IHIE						-			

GENERAL LABS - Edited Result - FINAL (01/15/2025 10:19 AM EST)

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			01/15/2025 10:19 AM EST	01/15/2025 10:19 AM EST
Narrative				
<b>IHIE - 01/15/2025 11:02 AM EST</b>				
Lab	Result	Units	Range	Flag
<b>Renal Pnl</b>				
Albumin Level	4.6	g/dL	3.4-4.9	
Anion Gap	9			
BUN	22.0	mg/dL	6.0-20.0	H
Creatinine Level	1.03	mg/dL	0.51-0.95	H
eGFR AA	64	mL/min	>=60	
Glomerular Filtration Rate EstimationGFR >=60 ml/min/1.73 m sq (Expected Range)Stage 4 Severe Decrease 15-29Stage 5 Kidney Failure <15Patients>70 years of age have a normal range of 45-59mL/min/1.73m sq.*If patient is African American result must be multiplied by 1.21*GFR is increased during pregnancyReference: MDRD Equation, National Kidney Foundation				
eGFR Non-AA	53	mL/min	>=60	L
Glomerular Filtration Rate EstimationGFR >=60 ml/min/1.73 m sq (Expected Range)Stage 4 Severe Decrease 15-29Stage 5 Kidney Failure <15Patients>70 years of age have a normal range of 45-59mL/min/1.73m sq.*If patient is African American result must be multiplied by 1.21*GFR is increased during pregnancyReference: MDRD Equation, National Kidney Foundation				
Sodium Level	140.0	mEq/L	136.0-145.0	
Potassium Level	3.8	mEq/L	3.5-5.1	
Chloride Level	103	mEq/L	98-107	
CO2	28.0	mmol/L	22.0-29.0	
Glucose Level	98	mg/dL	74-109	
Calcium Level	9.5	mg/dL	8.8-10.2	
Phosphorus Level	3.3	mg/dL	2.5-4.5	
Logansport Memorial Hospital 1101 Michigan Avenue Logansport, IN 46947				

Authorizing Provider	Result Type	Result Status	
Melissa Anderson	LAB HISTORICAL- CONVERSIONS- UNSOLICITED RESULTS	Edited Result - Final	
Performing Organization	Address	City/State/ZIP Code	Phone Number
IHIE			-

# GENERAL LABS - Final result (01/15/2025 10:19 AM EST)

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			01/15/2025 10:19 AM EST	01/15/2025 10:19 AM EST
Narrative				
IHIE - 01/15/2025 10:35 AM EST				
Lab	Result	Units	Range	Flag
Auto Diff				
Neutro Auto	53.4	%		
Lymph Auto	36.7	%		
Mono Auto	6.9	%		
Eos, Auto	1.9	%		
Basophil Auto	1.1	%		
Neutro Absolute	4.30	3/mcL	1.67-8.47	
Lymph Absolute	3.00	3/mcL	1.03-4.84	
Mono Absolute	0.60	3/mcL	0.27-0.98	
Eos Absolute	0.20	3/mcL	0.11-0.55	
Baso Absolute	0.10	3/mcL	0.02-0.10	
Logansport Memorial Hospital 1101 Michigan Avenue Logansport, IN 46947				
Authorizing Provider	Result Type	Result Status		
Melissa Anderson	LAB HISTORICAL- CONVERSIONS- UNSOLICITED RESULTS	Final Result		
Performing Organization	Address	City/State/ZIP Code	Phone Number	
IHIE				

GENERAL LABS - Final result (01/15/2025 10:19 AM EST)

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			01/15/2025 10:19 AM EST	01/15/2025 10:19 AM EST

Narrative

IHIE - 01/15/2025 10:35 AM EST

Lab	Result	Units	Range	Flag
CBC w/ Diff				
WBC	8.1	3/mcL	4.0-10.8	
RBC	4.44	6/mcL	3.90-5.40	
Hgb	14.2	g/dL	12.0-16.0	
RDW	13.2	%	11.0-14.5	
Hct	42.0	%	36.0-47.0	
MCH	32.0	pg	27.0-34.0	
MCHC	33.8	g/dL	31.0-35.0	
MCV	94.6	fL	81.0-99.0	
MPV	9.1	fL	7.4-10.2	
Platelets	294	3/mcL	130-400	

Logansport Memorial Hospital 1101 Michigan Avenue Logansport, IN 46947

Authorizing Provider	Result Type	Result Status
Melissa Anderson	LAB HISTORICAL- CONVERSIONS- UNSOLICITED RESULTS	Final Result

Performing Organization	Address	City/State/ZIP Code	Phone Number
IHIE			-

URINALYSIS (EXT LAB ENTRY) - Final result (01/15/2025)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Color, Urine	Yellow					
Clarity, Urine	Slightly Cloudy					
Urine Specific Gravity	1.025					
pH Urine	5.5					
Leukocyte Esterase UA	Small					
Nitrite, Urine	Negative					
Protein, Urine	Negative					
Glucose, Urine	Negative					
Ketones, Urine	Trace					
Urobilinogen, Urine	0.2					
Bilirubin, Urine	Negative					
Blood, Urine	Negative					
WBC, Urine	0-2					
RBC, Urine	0-2					
Bacteria, Urine	1+					
Epithelial Cells, (Ext Lab Entry)	Many					

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
Urine			01/15/2025	

Narrative

-

Authorizing Provider	Result Type	Result Status
Historical Provider	LAB URINE ORDERABLES	Final Result

CBC (INCLUDES DIFF/PLT) (EXTERNAL LAB ENTRY) - Final result (01/15/2025)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC	8.1	K/uL				
Red Blood Cell Count	4.44					
Hemoglobin	14.2	g/dL				
Hematocrit	42.0	%				
MCV	94.6					
MCH	32.0					
MCHC	33.8					
RDW	13.2					
Platelet Count	294					
MPV	9.1					
Specimen (Source)	Anatomical Location / Laterality		Collection Method / Volume		Collection Time	Received Time
Blood					01/15/2025	
Narrative						
—						
Authorizing Provider	Result Type		Result Status			
Historical Provider	LAB BLOOD ORDERABLES		Final Result			

CBC (INCLUDES DIFF/PLT) (EXTERNAL LAB ENTRY) - Final result (01/15/2025)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC	8.1	K/uL				
Red Blood Cell Count	4.44					
Hemoglobin	14.2	g/dL				
Hematocrit	13.2	%				
MCV	42					
MCH	32					
MCHC	33.8					
RDW	94.6					
Platelet Count	9.1					
MPV	294					
Absolute Neutrophils	4.3					
Absolute Lymphocytes	3					
Absolute Monocytes	0.60					
Absolute Eosinophils	0.20					
Absolute Basophils	0.10					
Neutrophils	53.4	K/uL				
Lymphocytes	36.7					
Monocytes	6.9					
Eosinophils	1.9					
Basophils	1.1					
Specimen (Source)	Anatomical Location / Laterality		Collection Method / Volume	Collection Time	Received Time	
Blood				01/15/2025		
Narrative						
—						
Authorizing Provider	Result Type		Result Status			
Historical Provider	LAB BLOOD ORDERABLES		Final Result			

RENAL FUNCTION PANEL (EXTERNAL LAB ENTRY) - Final result (01/15/2025)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose	98	mg/dL				
BUN	22.0	mg/dL				
eGFR Non-Afr American	53					
eGFR African American	64					
Sodium	140	mEq/L				
Potassium	3.8	mEq/L				
Chloride	103					
Carbon Dioxide	28.0	mmol/L				
Calcium	9.5	mg/dL				
Phosphorus, Serum	3.3	mg/dL				
Albumin (Blood)	4.6	g/dL				
Creatinine	1.03	mg/dL				
Anion Gap	9					
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume		Collection Time		Received Time
Blood				01/15/2025		
Narrative	-					
Authorizing Provider	Result Type	Result Status				
Historical Provider	LAB BLOOD ORDERABLES	Final Result				

PROTEIN,TOTAL,URINE - Final result (01/15/2025)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Protein, Ur	13					
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume		Collection Time		Received Time
Urine				01/15/2025		
Narrative	-					
Authorizing Provider	Result Type	Result Status				
Historical Provider	LAB URINE ORDERABLES	Final Result				

ALBUMIN/CREAT URINE RATIO (URINE ALBUMIN / CREATININE RATIO) - Edited Result - FINAL (01/15/2025)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Albumin, Urine	1	mg/dL				
Creatinine, Urine Random	168	mg/dL				
Alb/Creat Ratio, Ur	6	mg/g Creat				
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume		Collection Time		Received Time
Urine (Urine, Clean Catch)				01/15/2025		
Narrative	-					



Authorizing Provider	Result Type	Result Status				
Historical Provider	LAB URINE ORDERABLES	Edited Result - Final				
MAGNESIUM - Final result (01/15/2025)						
Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Magnesium	2.10					
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume		Collection Time	Received Time	
Blood (Blood, Venous)				01/15/2025		
Narrative						
-						
Authorizing Provider	Result Type	Result Status				
Historical Provider	LAB BLOOD ORDERABLES	Final Result				

Care Teams				
Team Member	Relationship	Specialty	Start Date	End Date
<b>Olusina Akande</b> NPI: 1285096701 1201 MICHIGAN AVE STE 270 LOGANSPOORT, IN 46947 574-722-4921 (Work) 574-739-0520 (Fax)	PCP - General	Family Medicine	10/22/24	

Patient Contacts			
Contact Name	Contact Address	Communication	Relationship to Patient
Don Berry	Unknown	574-721-6940 (Mobile)	Spouse, Emergency Contact
Kyle Berry	1205 S Locke St KOKOMO, IN 46902	574-721-1666 (Mobile) 574-721-1666 (Home) kylematthewberry@gmail.com	Son, Emergency Contact
Kristen Berry/Calisto	Unknown	317-601-1501 (Mobile)	Daughter, Personal Relationship

Document Information		
Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>Olusina Akande</b> (Oct. 22, 2024 - Present) NPI: 1285096701 574-722-4921 (Work) 574-739-0520 (Fax) 1201 MICHIGAN AVE STE 270 LOGANSPOORT, IN 46947 Family Medicine <b>Indiana Kidney Specialists</b> 317-924-8425 (Work) 317-924-8424 (Fax) 3507 S LAFOUNTAIN ST KOKOMO, IN 46902-3804		Mar. 01, 1953 - May 09, 2025
Custodian Organization		
<b>Indiana Kidney Specialists</b> 317-924-8425 (Work) 3507 S LAFOUNTAIN ST KOKOMO, IN 46902-3804		



If you take your Lucy record on a thumb drive to a different doctor, he or she might be able to use his computer to read the file electronically. Your downloaded, machine-readable Personal Health Summary document is in a format called "CDA." If your doctor has a computer that understands CDA, your information is a folder on your thumb drive called **MachineReadable\_XDMFormat**. You might need to enter a password before your doctor can use this file.

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Patient Demographics - Female; born Mar. 01, 1953

Patient Address	Patient Name	Communication
108 Western Avenue (Home) LOGANSPOUT, IN 46947	Vickie L Berry	574-721-6940 (Home) 574-721-6940 (Mobile) vickielynnberry@gmail.com
Former (Oct. 22, 2024 - Oct. 21, 2024): (Home)		
Language	Race / Ethnicity	Marital Status
English (Preferred)	White / Not Hispanic or Latino	Married

Note from Acumen Nephrology

This document contains information that was shared with Vickie L Berry. It may not contain the entire record from Acumen Nephrology.

Reason for Referral

Imaging (Routine) - Closed

Specialty	Diagnoses / Procedures		Referred By Contact	Referred To Contact		
	<u>Diagnoses</u> Chronic kidney disease stage 2 Hypertension Anemia in chronic kidney disease		<u>Melissa Anderson</u> 5510 S EAST ST STE H INDIANAPOLIS, IN 46227 Phone: tel:+1-317-924-8425 fax:+1-317-924-8424	-		
	<u>Procedures</u> US RENAL COMPLETE					
Referral ID	Status	Reason	Start Date	Expiration Date	Visits Requested	Visits Authorized
2600833	Closed		1/13/2025	1/13/2026	1	1

Electronically signed by Melissa Anderson at 01/13/2025 3:34 PM EST

Encounter Details

Date	Type	Department	Care Team (Latest Contact Info)	Description
01/13/2025 2:40 PM EST	Office Visit	Indiana Kidney Specialists 3760 S REED RD KOKOMO, IN 46902-3829 317-924-8425	<b>Melissa Anderson</b> 5510 S EAST ST STE H INDIANAPOLIS, IN 46227 317-924-8425 (Work) 317-924-8424 (Fax)	

Allergies - documented as of this encounter (statuses as of 05/13/2025)  
No known active allergies

Medications - documented as of this encounter (statuses as of 05/13/2025)

Medication	Sig	Dispense Quantity	Refills	Last Filled	Start Date	End Date	Status
<u>amLODIPine (NORVASC) 5 MG tablet</u>	<u>Take 5 mg by mouth 1 (one) time each day</u>				01/15/2020		Active
<u>clopidogrel (PLAVIX) 75 MG tablet</u>	<u>Take 75 mg by mouth 1 (one) time each day</u>						Active
<u>levothyroxine (SYNTHROID, LEVOTHROID) 100 MCG tablet</u>	<u>Take 100 mcg by mouth 1 (one) time each day</u>				01/28/2020		Active
<u>olmesartan (BENICAR) 40 MG tablet</u>	<u>Take 40 mg by mouth 1 (one) time each day</u>				09/25/2024		Active
<u>pravastatin (PRAVACHOL) 20 MG tablet</u>	<u>Take 20 mg by mouth 1 (one) time each day</u>						Active
<u>traZODone (DESYREL) 50 MG tablet</u>	<u>Take 50 mg by mouth every night</u>						Active
<u>venlafaxine XR (EFFEXOR-XR) 150 MG 24 hr capsule</u>	<u>Take 300 mg by mouth 1 (one) time each day</u>						Active
<u>omeprazole (PriLOSEC) 40 MG DR capsule</u>	<u>Take 40 mg by mouth 1 (one) time each day Do not crush or chew.</u>						Active
<u>lactulose (CHRONULAC) 10 GM/15ML solution</u>	<u>Take 20 g by mouth</u>						Active
<u>Calcium Carb-Cholecalciferol (CALCIUM 500 + D PO)</u>	<u>Take 1 tablet by mouth 1 (one) time each day</u>						Active
<u>ferrous sulfate (FeroSul) 325 (65 Fe) MG tablet</u>	<u>Take 325 mg by mouth 1 (one) time each day with breakfast</u>				02/20/2020	01/13/2025	Discontinued (Med List Maintenance)
<u>ibuprofen (ADVIL,MOTRIN) 800 MG tablet</u>	<u>Take 800 mg by mouth</u>				05/04/2022	01/13/2025	Discontinued (Med List Maintenance)

Active Problems - documented as of this encounter (statuses as of 05/13/2025)

Problem	Noted Date	Diagnosed Date
<u>Vertigo</u>	12/23/2024	
<u>Other chronic pain</u>	12/23/2024	
<u>Mixed hyperlipidemia</u>	12/23/2024	
<u>Mixed anxiety and depressive disorder</u>	12/23/2024	
<u>Iron deficiency anemia</u>	12/23/2024	
<u>History of malignant basal cell neoplasm of skin</u>	12/23/2024	
<u>History of cerebrovascular accident without residual deficits</u>	12/23/2024	
<u>Hemorrhoid</u>	12/23/2024	
<u>Gastroesophageal reflux disease</u>	12/23/2024	
<u>Cough</u>	12/23/2024	
<u>Intracranial aneurysm</u>	12/23/2024	
<u>Bilateral cataracts</u>	12/23/2024	
<u>Essential hypertension</u>	12/23/2024	
<u>Aphasia</u>	12/23/2024	
<u>Carotid artery stenosis</u>	10/26/2023	
<u>Hypothyroidism</u>	03/18/2016	

Immunizations - documented as of this encounter

Immunization	Administration Dates	Next Due
<u>H1N1 All Forms</u>	<u>01/29/2010</u>	
<u>Influenza, Unspecified</u>	<u>10/23/2015, 11/14/2014, 11/18/2013</u>	
<u>Moderna SARS-COV-2</u>	<u>11/27/2021, 03/08/2021, 02/04/2021</u>	
<u>Tdap</u>	<u>05/13/2022</u>	

Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
<u>Smoking Tobacco: Never</u>				
<u>Smokeless Tobacco: Never</u>				
Alcohol Use	Standard Drinks/Week			
Never	0 (1 standard drink = 0.6 oz pure alcohol)			
Pregnant	Comments			
Unknown				
Sex and Gender Information		Value	Date Recorded	
Sex Assigned at Birth		Not on file		
<u>Legal Sex</u>		<u>Female</u>	<u>10/22/2024 1:40 PM EDT</u>	
Gender Identity		Not on file		
Sexual Orientation		Not on file		

Last Filed Vital Signs - documented in this encounter

Vital Sign	Reading	Time Taken	Comments
Blood Pressure	146/80	01/13/2025 2:42 PM EST	
Pulse	103	01/13/2025 2:42 PM EST	
Temperature	-	-	
Respiratory Rate	16	01/13/2025 2:42 PM EST	
Oxygen Saturation	97%	01/13/2025 2:42 PM EST	
Inhaled Oxygen Concentration	-	-	
Weight	81.2 kg (179 lb)	01/13/2025 2:42 PM EST	
Height	162.6 cm (5' 4")	01/13/2025 2:42 PM EST	
Body Mass Index	30.73	01/13/2025 2:42 PM EST	

Patient Instructions - documented in this encounter

Patient Instructions  
Melissa Anderson - 01/13/2025 2:40 PM EST  
Formatting of this note might be different from the original.  
Update me on blood pressure in a few weeks

Labs this week and 1 week prior to next visit

Kidney ultrasound in next few weeks  
Electronically signed by Melissa Anderson at 01/13/2025 3:46 PM EST

Progress Notes - documented in this encounter

Melissa Anderson - 01/13/2025 2:40 PM EST  
Formatting of this note is different from the original.  
Images from the original note were not included.

Initial Office Visit 1/13/2025  
With Melissa Anderson, MD

Patient: Vickie L Berry 3/1/1953  
History of Present Illness  
Vickie L Berry is a 71 y.o. female who was referred by PCP Akande, Olusina, MD for evaluation of CKD  
H/o HTN, CVA, insomnia, GERD  
Here due to concern about elevated cr  
No known h/o CKD  
Her son noticed rise in cr on her labs, requested referral for further eval  
Patient states she feels ok  
No edema--in fact, feels like her feet are shrinking/shoes getting larger

no urinary complaints  
no kidney stones, no recurrent UTI, no bladder procedures  
no incontinence

no renal biopsy no history of dialysis  
no h/o heavy NSAID use--has not used ibu in years

No DM--last A1c in 5s  
She has weaned her chronic ppi, doing well

Past Medical History:

Diagnosis Date

- Anemia
- Cerebral artery occlusion, unspecified, with cerebral infarction (HCC)
- Chronic kidney disease
- Esophageal reflux
- Essential hypertension
- Family history of colon polyp, not otherwise specified
- Hypothyroidism
- Insomnia
- Osteopenia
- Other and unspecified hyperlipidemia

History reviewed. No pertinent surgical history.

No Known Allergies

Current Outpatient Medications:

- amLODIPine (NORVASC) 5 MG tablet, Take 5 mg by mouth 1 (one) time each day, Disp: , Rfl:
- Calcium Carb-Cholecalciferol (CALCIUM 500 + D PO), Take 1 tablet by mouth 1 (one) time each day, Disp: , Rfl:
- clopidogrel (PLAVIX) 75 MG tablet, Take 75 mg by mouth 1 (one) time each day, Disp: , Rfl:
- lactulose (CHRONULAC) 10 GM/15ML solution, Take 20 g by mouth (Patient taking differently: Take 20 g by mouth 1 (one) time each day), Disp: , Rfl:
- levothyroxine (SYNTHROID, LEVOTHROID) 100 MCG tablet, Take 100 mcg by mouth 1 (one) time each day, Disp: , Rfl:
- olmesartan (BENICAR) 40 MG tablet, Take 40 mg by mouth 1 (one) time each day, Disp: , Rfl:
- omeprazole (PriLOSEC) 40 MG DR capsule, Take 40 mg by mouth 1 (one) time each day Do not crush or chew., Disp: , Rfl:
- pravastatin (PRAVACHOL) 20 MG tablet, Take 20 mg by mouth 1 (one) time each day, Disp: , Rfl:
- traZODone (DESYREL) 50 MG tablet, Take 50 mg by mouth every night, Disp: , Rfl:
- venlafaxine XR (EFFEXOR-XR) 150 MG 24 hr capsule, Take 300 mg by mouth 1 (one) time each day (Patient taking differently: Take 150 mg by mouth 1 (one) time each day), Disp: , Rfl:

Social History

Tobacco Use

- Smoking status: Never
- Smokeless tobacco: Never

Substance Use Topics

- Alcohol use: Never

Family History

Problem Relation Age of Onset

- Hypertension Mother
- Dementia Mother
- No Known Problems Father
- Hypertension Sister

ROS:

Constitutional: Negative for chills and fever.

HENT: Negative for congestion, ear pain, hearing loss and sore throat.

Eyes: Negative for pain and discharge.

Respiratory: Negative for cough, shortness of breath and wheezing.

Cardiovascular: Negative for chest pain, palpitations and leg swelling.

Gastrointestinal: Negative for abdominal pain, blood in stool, constipation, diarrhea, nausea and vomiting.

Genitourinary: Negative for dysuria, frequency, hematuria and urgency.

Musculoskeletal: Negative for back pain, myalgias and neck pain.

Skin: Negative for rash.

Neurological: Negative for dizziness, tremors and headaches.

Endo/Heme/Allergies: Negative for polydipsia. Does not bruise/bleed easily.

The following portions of the patient's chart were reviewed in this encounter and updated as appropriate: Tobacco | Allergies |  
Meds | Problems | Med Hx | Surg Hx | Fam Hx |

Physical Exam:

Vitals:

01/13/25 1442

BP: 146/80

Pulse: 103

Resp: 16

SpO2: 97%

Weight: 179 lb (81.2 kg)

Height: 5' 4" (1.626 m)

Vitals reviewed.

Constitutional: She is oriented to person, place, and time. She appears well-developed and well-nourished. No distress.

HEENT:

Head: Normocephalic and atraumatic. Mouth/Throat: Oropharynx is clear and moist.

Eyes: Conjunctivae and EOM are normal. Pupils are equal, round, and reactive to light.

Neck: Neck supple. No JVD present.

Cardiovascular: Normal rate, regular rhythm, normal heart sounds and intact distal pulses. Exam reveals no gallop and no friction rub.

No murmur heard. She exhibits no edema.

Pulmonary/Chest: Effort normal. No respiratory distress. She has no wheezes. She has no rales.

Abdominal: Soft. Bowel sounds are normal. She exhibits no distension. There is no abdominal tenderness. There is no guarding.

Musculoskeletal: She exhibits no tenderness.

Lymphadenopathy:

She has no cervical adenopathy.

Neurological: She is alert and oriented to person, place, and time.

Skin: Skin is warm and dry. No rash noted.

Psychiatric: She has a normal mood and affect.

All available labs reviewed

No lab exists for component: "BUN6", "LABALBU", "BKDNA"

No lab exists for component: "PTHINTACT"

No lab exists for component: "IRON SATURATION"

Assessment & Plan

1. Chronic kidney disease stage 2

2. Hypertension

3. Anemia in chronic kidney disease

CKD2. Remote cr 1, oct 2024 cr 1.2. +h/o HTN and PVD so suspect nephrosclerosis and age-related changes.

Repeat labs

Send for anatomy eval/RUS

F/u w labs 6w

HTN with PVD (carotid dz) and h/o CVA. BP fair today. Last echo a few y ago was normal/preserved EF. No known CAD.

Cont same CCB, arb (has chronic cough, did not change when acei switched to arb)

Start home monitoring, bring log to appt

They wonder about OSA--would be reasonable to get study though her survey was normal. Defer to pcp

Anemia in CKD. Does not tolerate oral fe well due to constipation (is on lactulose which she prefers as laxative). Will get f/u cbc to monitor

CVA and PVD. Very mild memory loss. Here w her son. Is on ac per PCP

Return in 6 weeks (on 2/24/2025) for Next scheduled follow-up. I asked patient to have labs drawn in advance of next visit so we may discuss in clinic.

Orders Placed This Encounter

• Ultrasound Renal Complete

• Renal function panel

• Urinalysis with microscopic

• Urine Albumin / Creatinine Ratio

• Urine Protein / creatinine ratio

• CBC

• Magnesium

• Magnesium

• Renal function panel

• Urine albumin / creatinine ratio

• Urinalysis

• Diet No Added Salt

As always, I sincerely appreciate the opportunity to help care for your patient.

Melissa Anderson, MD

Electronically signed by Melissa Anderson at 01/13/2025 3:46 PM EST



Plan of Treatment - documented as of this encounter

Upcoming Encounters

Date	Type	Department	Care Team (Latest Contact Info)	Description
06/02/2025 9:40 AM EDT	Office Visit	Indiana Kidney Specialists 3760 S REED RD KOKOMO, IN 46902-3829 317-924-8425	<b>Melissa Anderson</b> 5510 S EAST ST STE H INDIANAPOLIS, IN 46227 317-924-8425 (Work) 317-924-8424 (Fax)	

Scheduled Orders

Name	Type	Priority	Associated Diagnoses	Order Schedule
RENAL FUNCTION PANEL	Lab	Routine	Chronic kidney disease stage 2 Hypertension Anemia in chronic kidney disease	Expected: 01/13/2025, Expires: 02/13/2026
URINALYSIS AUTO W/SCOPE	Lab	Routine	Chronic kidney disease stage 2 Hypertension Anemia in chronic kidney disease	Expected: 01/13/2025, Expires: 02/13/2026
ALBUMIN/CREAT URINE RATIO	Lab	Routine	Chronic kidney disease stage 2 Hypertension Anemia in chronic kidney disease	Expected: 01/13/2025, Expires: 02/13/2026
PROTEIN/CREAT RATIO,URINE	Lab	Routine	Chronic kidney disease stage 2 Hypertension Anemia in chronic kidney disease	Expected: 01/13/2025, Expires: 02/13/2026
CBC	Lab	Routine	Chronic kidney disease stage 2 Hypertension Anemia in chronic kidney disease	Expected: 01/13/2025, Expires: 02/13/2026
MAGNESIUM	Lab	Routine	Chronic kidney disease stage 2 Hypertension Anemia in chronic kidney disease	Expected: 01/13/2025, Expires: 02/13/2026
US RENAL COMPLETE	Imaging	Routine	Chronic kidney disease stage 2 Hypertension Anemia in chronic kidney disease	Expected: 01/13/2025, Expires: 01/13/2026
MAGNESIUM	Lab	Routine	Chronic kidney disease stage 2 Hypertension Anemia in chronic kidney disease	Expected: 02/13/2025 (Approximate), Expires: 02/13/2026
RENAL FUNCTION PANEL	Lab	Routine	Chronic kidney disease stage 2 Hypertension Anemia in chronic kidney disease	Expected: 02/13/2025 (Approximate), Expires: 02/13/2026
ALBUMIN/CREAT URINE RATIO	Lab	Routine	Chronic kidney disease stage 2 Hypertension Anemia in chronic kidney disease	Expected: 02/13/2025 (Approximate), Expires: 02/13/2026
URINALYSIS AUTO ONLY	Lab	Routine	Chronic kidney disease stage 2 Hypertension Anemia in chronic kidney disease	Expected: 02/13/2025 (Approximate), Expires: 01/13/2026

Health Maintenance	Due Date	Last Done	Comments
Mammogram	03/01/1953		
Colonoscopy	03/01/2002		
Sigmoidoscopy	03/01/2002		
Stool Blood Test	03/01/2002		
Influenza Vaccine (Season Ended)	09/01/2025	10/23/2015, 11/14/2014, 11/18/2013	

Health Maintenance	Due Date	Last Done	Comments
Hepatitis B Vaccine	Aged Out	No longer eligible based on patient's age to complete this topic	

**Results** - documented in this encounter

Not on file

**Visit Diagnoses** - documented in this encounter

Diagnosis

Chronic kidney disease stage 2 - Primary

Hypertension

Anemia in chronic kidney disease

**Insurance** - documented as of this encounter

**Guarantor: Berry, Vickie L**

Account Type	Relation to Patient	Date of Birth	Phone	Billing Address
Personal/Family	Self	03/01/1953	574-721-6940 (Home)	108 Western Avenue LOGANSPOUT, IN 46947

UHC Medicare	
Member	Subscriber
Name: <u>Berry, Vickie L</u> Member ID: <u>922228691</u> Relation to Subscriber: <u>Self</u>	Name: <u>Berry, Vickie L</u> Subscriber ID: <u>922228691</u>
Plan / Payer (Effective 01/01/2024-Present)	
Payer ID: <u>707 (NAIC)</u> Group ID: <u>90782</u> Type: <u>Not on file</u> Phone: <u>877-842-3210</u> Address: <u>PO BOX 31362</u> <u>SALT LAKE CITY, UT 84131-0362</u>	

**Care Teams** - documented as of this encounter

Team Member	Relationship	Specialty	Start Date	End Date
<u><b>Olusina Akande</b></u> <u>NPI: 1285096701</u> <u>1201 MICHIGAN AVE</u> <u>STE 270</u> <u>LOGANSPOUT, IN 46947</u> <u>574-722-4921 (Work)</u> <u>574-739-0520 (Fax)</u>	<u>PCP - General</u>	<u>Family Medicine</u>	<u>10/22/24</u>	

**Patient Contacts**

Contact Name	Contact Address	Communication	Relationship to Patient
Don Berry	Unknown	574-721-6940 (Mobile)	Spouse, Emergency Contact
Kyle Berry	1205 S Locke St KOKOMO, IN 46902	574-721-1666 (Mobile) 574-721-1666 (Home) kylematthewberry@gmail.com	Son, Emergency Contact
Kristen Berry/Calisto	Unknown	317-601-1501 (Mobile)	Daughter, Personal Relationship

Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>Olusina Akande</b> (Oct. 22, 2024 - Present) NPI: 1285096701 574-722-4921 (Work) 574-739-0520 (Fax) 1201 MICHIGAN AVE STE 270 LOGANSPOORT, IN 46947 Family Medicine <b>Indiana Kidney Specialists</b> 317-924-8425 (Work) 317-924-8424 (Fax) 5510 S EAST ST STE H INDIANAPOLIS, IN 46227-1906		Jan. 13, 2025
Custodian Organization		
<b>Indiana Kidney Specialists</b> 317-924-8425 (Work) 5510 S EAST ST STE H INDIANAPOLIS, IN 46227-1906		
Encounter Providers	Encounter Date	
<b>Melissa Anderson</b> (Attending) NPI: 1871753152 317-924-8425 (Work) 317-924-8424 (Fax) 5510 S EAST ST STE H INDIANAPOLIS, IN 46227 Nephrology	Jan. 13, 2025	