

BERRY, Vickie (id #57298986, dob: 03/01/1953)



**Ascension
St. Vincent**

Ascension Medical Group
313 S Berkley Rd, Suite 120
KOKOMO, IN 46901-5114
Phone: (765) 236-8750, Fax: (765) 236-8760

Date: 12/13/2024

Dear Vickie Berry,

The following is a summary of your visit today. If you have any questions, please contact our office.

Sincerely,

Katiri Elkins, NP

I acknowledge that I may receive a referral to a health care provider who does not contract with my health insurance company or participate in my insurance plan's network (an "Out of Network Provider") and that different coverage and payment limitations may apply to Out of Network Providers. I understand that I may contact my health insurance company for assistance, including identification of health care providers currently in my insurance plan's network, prior to obtaining items and services from an Out of Network Provider.

Patient Care Summary for Vickie Berry

Most Recent Encounter

12/13/2024 Katiri Elkins: 313 S Berkley Rd, Suite 120, Kokomo, IN 46901-5114, Ph. tel:+1-765-2368750

Reason for Visit

FOLLOW UP

Assessment and Plan

The following list includes any diagnoses that were discussed at your visit.

1. Bilateral stenosis of carotid arteries

Discussion Note: None recorded.

Patient educational handouts: No information available.

Plan of Care

Reminders			Provider
Appointments	Carotid Duplex 45	06/18/2025 9:00AM	Ind_smg_kvs_lab
	Follow-Up w/Vascular Test 15	06/18/2025 9:45AM	Krystin Sheridan, NP
Lab	None recorded.		
Referral	None recorded.		
Procedures	None recorded.		
Surgeries	None recorded.		
Imaging	None recorded.		

Current Medications

Your medical record indicates you are on the following medicine. If this list is not consistent with the medications you are currently taking, or if you are taking additional over-the-counter medicines, please inform your provider.

Name	Prescribed Date	Start Date
amlodipine 5 mg tablet Take 1 tablet every day by oral route.		
cefuroxime axetil 500 mg tablet TAKE 1 TABLET BY MOUTH TWICE A DAY FOR 7 DAYS		
clopidogrel 75 mg tablet Take 1 tablet every day by oral route.		
Feosol 325 mg (65 mg iron) tablet Take 1 tablet every other day by oral route.		
ipratropium bromide 21 mcg (0.03 %) nasal spray SPRAY 1 SPRAY INTO EACH NOSTRIL TWICE A DAY FOR 10 DAYS		
lactulose 10 gram/15 mL oral solution TAKE 15 ML BY MOUTH DAILY AS NEEDED FOR CONSTIPATION		
levothyroxine 100 mcg tablet TAKE 1 TABLET BY MOUTH ONCE DAILY FOR 14 DAYS		
lisinopril 40 mg tablet Take 1 tablet every day by oral route.		
olmesartan 40 mg tablet TAKE 1 TABLET BY MOUTH EVERY DAY		
pravastatin 20 mg tablet Take 1 tablet every day by oral route.		
trazodone 50 mg tablet Take 4 tablets every day by oral route as needed.		
venlafaxine ER 150 mg capsule,extended release 24 hr Take 1 capsule every day by oral route.		

Medications Administered

None recorded.

Vitals

Height	Weight	Blood Pressure	Pulse	O2 Saturation
Stated	176 lbs	143/80 mm[Hg]	111 bpm	98%

Results

Lab Results

None recorded.

Allergies

Please review your allergy list for accuracy. Contact your provider if this list needs to be updated.

Code	Code System	Name	Reaction	Severity	Onset
NKDA					

Problems

Name	Status	Onset Date	Source
Carotid Artery Stenosis	Active	10/26/2023	
Hypothyroidism	Active		
Mixed Hyperlipidemia	Active		
Iron Deficiency Anemia	Active		
Depressive Disorder	Active		
Hypertensive Disorder	Active		
Aneurysm	Active		
Gastroesophageal Reflux Disease	Active		
History of Cerebrovascular Accident	Active		

Procedures

Date	Name	Performed by
	Foot Surgery	Information not available
12/13/2024	US, Duplex, Carotid Artery	Amg - Vascular Imaging - Kokomo (Penvasc) 313 S Berkley Rd Ste 120 Kokomo, IN 46901 (765) 236-8750 (Work Place)

Vaccine List

Here is a copy of your most up-to-date vaccination list.

None recorded.

Tobacco Smoking Status

Tobacco Smoking Status Never Smoker

Past Encounters

Encounter Date	Diagnosis	Provider
12/13/2024	Bilateral Stenosis of Carotid Arteries	Katiri Elkins, NP: 313 S Berkley Rd, Suite 120, Kokomo, IN 46901-5114, Ph. (765) 236-8750

Demographics

Sex: Female Ethnicity: Not Hispanic or Latino
DOB: 03/01/1953 Race: White
Preferred language: English Marital status: Married

Contact: 108 Western Ave, Logansport, IN 46947-4203, Ph. tel:+1-574-7216940

Care Team Members

Primary Care Provider

Olusina V Akande MD

1201 Michigan Ave, Ste 270, Logansport, IN 46947, Ph. tel:+1-574-7224921

Internal Medicine

Cheng Du MD

1201 Michigan Ave, Ste 170, Logansport, IN 46947, Ph. tel:+1-574-7224331

Note: Patients are solely responsible for maintaining the privacy and security of all information printed from the Patient Portal.
