



PMS ID: Sex: DOB: Phone: MRN: 116247PAT000057506 Male 02/28/1977 (952) 239-4234 53122

Allergies

prednisone - Other: Avascular Necrosis

Medications

atorvastatin 10 mg Oral - tablet Frequency: Daily

Medical History

Podiatric Foot/Ankle Disease History

Podiatric Foot/Ankle Surgical History

Podiatric Foot/Ankle Family History

Surgical History

Total replacement of left hip joint: June 4th, 2012 Total replacement of right hip joint: March 26, 2012

Social History

Patient feels safe at home

EtOH less than 1 drink per day Occupation: Business Broker. Work mostly out of my home. Place of Residence: My home. Smoking status - Unspecified Driving status: Drives in the Daytime Drives at Night

Chief Complaint: Toenail Dystrophy

HPI: This is a 46 year old male who is being seen for a chief complaint of a toenail dystrophy, located on the right great toe (T5). The affected toenail(s) are discolored, dystrophic, thickened, and yellow and moderate in severity. He has had toenail problems for 2 months.

Exam:

Foot

Peripheral Pulses:

Right Dorsalis Pedis: Normal +3 dorsalis pedis pulse Right Posterior Tibial: Normal +3 posterior tibial pulse

Right Capillary Refill: Normal CFT

Right Vascular Skin Trophic Changes: No Skin trophic

changes of vascular nature Right Edema: No Edema

Right Venous Exam: Normal Venous Findings

Sensation:

Right LE: Normal peripheral nerve sensation

Skin

Right Foot: skin intact, no rashes or lesions.

Toenails:

Right: nail discoloration, nail dystrophy, nail incurvation, nail separating from nail bed, nail thickening, onycholysis, painful toenails, discolored toenails, and thickened dystrophic nail(s) with subungual debris

Foot ROM:

ROM: Normal

Inspection:

Right Hindfoot: Normal alignment, no deformity, no

tenderness, no warmth, no masses

Right Midfoot: Normal alignment, no deformity, no

tenderness, no warmth, no masses

Right Forefoot: Normal alignment, no deformity, no

tenderness, no warmth, no masses

Right Foot Eversion: Strength: 5/5, normal muscle tone.

Right Foot Inversion: Strength: 5/5, normal muscle tone.

Peripheral Pulses:

Left Dorsalis Pedis: Normal +3 dorsalis pedis pulse Left Posterior Tibial: Normal +3 posterior tibial pulse

Left Capillary Refill: Normal CFT

Left Vascular Skin Trophic Changes: No Skin trophic

changes of vascular nature Left Edema: No Edema

Left Venous Exam: No Venous Insufficiency

Sensation:

Left LE: Normal peripheral nerve sensation

Skin:

Left Foot: skin intact, no rashes or lesions.

Toenails:

Left: Normal

Foot ROM: ROM: Normal

Inspection:

Left Hindfoot: Normal alignment, no deformity, no tenderness, no warmth, no masses

Left Midfoot Inspection: Normal alignment, no deformity,

Left Forefoot Inspection: Normal alignment, no deformity,

no tenderness, no warmth, no masses

no tenderness, no warmth, no masses

Left Foot Eversion: Strength: 5/5, normal muscle tone.

Left Foot Inversion: Strength: 5/5, normal muscle tone.

Additional Exam Findings: painful elongated toenails discolored nails with onycholysis and subungual debris dark discoloration yellow discoloration subungual hyperkeratosis onycholysis with splitting of the nail plate thickened and elongated nails rough texture

Impression/Plan:

1. Onychomycosis

Tinea unguium (B35.1)

located on the right great toenail bed (T5).

Plan: Counseling - Onychomycosis.

I counseled the patient regarding the following:

Skin care: Onychomycosis rarely responds to prolonged use of topical anti-fungal agents. Oral antifungal agents offer a higher cure rate, but relapses occur in 50% of patients.

Expectations: Onychomycosis is a fungal infection of the nail plate. Oral therapy is more effective than topical therapy, but serious side effects such as liver toxicity, bone marrow depression and severe rashes may ensue with systemic treatment.

Contact office if: Patient develops a side effect from treatment.





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Lamisil: Lamisil (terbinafine) Counseling: Patient counseling regarding adverse effects of lamisil including but not limited to headache, diarrhea, rash, upset stomach, liver function test abnormalities, itching, taste/smell disturbance, nausea, abdominal pain, and flatulence. There is a rare possibility of liver failure that can occur when taking lamisil. The patient understands that a baseline LFT and kidney function test may be required. The patient verbalized understanding of the proper use and possible adverse effects of lamisil. All of the patient's questions and concerns were addressed.

OTC Medication: tea tree oil, Keresal

After discussing the risks, benefits and alternatives, we decided on the following plan: CONSERVATIVE MANAGEMENT AND DEBRIDEMENTS and KERESAL.

MIPS

1. MIPS

Plan: MIPS Quality.

Quality 130 (Documentation of Current Medications in the Medical Record): Current Medications Documented

Staff:

Brian P Hutcheson (Primary Provider) (Bill Under)

Electronically Signed By: Brian P Hutcheson, 02/22/2024 09:17 AM MST

(520) 881-8640 Work