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**CAVE, Joseph (Legal name: Joe Cave) | (id #502500, dob: 06/30/1936)**

## Medical Records - CONFIDENTIAL

**FROM:** NC - Blue Ridge Community Health Service

Omar D  
709 N Justice St Ste B, Hendersonville, NC 28791-3455  
Phone: 828-696-1234  
Fax: (833) 963-0843

**TO:**

**Name:** CAVE, JOE

**DOB:** 06/30/1936

**Date Range:** 04/01/2025 to 05/08/2025

**This document contains the following records of the patient:**

- **Facesheet**
- **Encounters and Procedures**

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[ID:502500-A-21884]

**CAVE, Joseph (Legal name: Joe Cave) | (id #502500, dob: 06/30/1936)**

## Facesheet

### Demographics

Patient Name	CAVE, JOE
Sex	M
DOB	06/30/1936
Address	36 YALE LN
City/State/Zip	BREVARD, NC 28712
Home Phone	(828) 884-6011
Mobile Phone	(828) 884-6011
Insurance	Med Primary: MEDICARE-NC (MEDICARE) Insurance # : 8R39Q81UU37 Med Secondary: BCBS-NC Insurance # : YPZ11158077400 Policy/Group # : M0000002 Med : MEDICARE-NC - RHC-FQHC - PART A (MEDICARE) Insurance # : 8R39Q81UU37 Prescription: check now
Default Pharmacy	INGLES PHARMACY #067 (ERX) 684 NORTH BROAD STREET BREVARD NC 28712 Ph (828) 883-2358 Fax (828) 883-9576
Preferred Imaging Facility	PARDEE - ROUTINE RADIOLOGY KAYDEN AND HOSPITAL 807 N JUSTICE ST HENDERSONVILLE Ph (828) 698-7979 Fax (828) 696-1076
Portal Registration	Portal declined 06/15/2023--does not have an email.

### Height / Weight / BMI / BP

Height	6 ft 2 in	04/24/2025
Weight	232 lbs 6 oz	04/24/2025
BMI	29.8	04/24/2025
Blood Pressure	152 / 74	04/24/2025

### Problems

- Onychomycosis - Onset: 01/22/2015 - (B35.1)Onychomycosis
- Essential tremor - Onset: 06/26/2017 - (G25.0)Tremor, essential
- Stricture of colon - Onset: 05/14/2013 - (8543007)COLONIC STRICTURE. Notes:Imported from CCD: Pardee Hendersonville Family Health Center Qvera (29-Dec-2014 at 10:22:53 AM)
- Patellofemoral osteoarthritis - Onset: 07/09/2019 - (M17.12)Osteoarthritis of left knee
- Knee pain - Onset: 12/04/2012 - (30989003)KNEE PAIN. Notes:Imported from CCD: Pardee Hendersonville Family Health Center Qvera (29-Dec-2014 at 10:22:53 AM)
- SNOMED CT Concept - Onset: 01/22/2015 - (Z00.00)Well adult exam

### Surgical & Procedure History

None recorded.

### Medications

**CAVE, Joseph (Legal name: Joe Cave) | (id #502500, dob: 06/30/1936)****Voltaren Arthritis Pain 1 % topical gel**

10/10/24 prescribed

APPLY 2 GRAMS TO THE AFFECTED AREA(S) BY TOPICAL ROUTE 4 TIMES PER DAY

12/04/2012: B COMPLEX CAPS, SIG:1 daily | 12/04/2012: EQL FISH OIL 1000 MG CAPS, SIG:1 daily | 12/04/2012: CVS GLUCOSAMINE SULFATE 1000 MG CAPS, SIG:2 daily

**Vaccines**

Vaccine Type	Date	Amt.	Route	Site	NDC	Lot #	Mfr.	Exp. Date	VIS Date	VIS Given	Vaccinator
Influenza											
influenza	10/01/15										
influenza	11/21/13										

**Allergies / Adverse Reactions**

NKDA

**Past Medical History**

(none recorded)

**Social History****Substance Use**

Do you or have you ever smoked tobacco?: Never smoker

Do you or have you ever used any other forms of tobacco or nicotine?: No

What was the date of your most recent tobacco screening?: 04/24/2025

Has tobacco cessation counseling been provided?: Yes

On what date was tobacco cessation counseling provided?: 10/10/2024

What is your level of alcohol consumption?: Moderate (Notes: 3 beers a night)

Do you use any illicit or recreational drugs?: No

What is your level of caffeine consumption?: Moderate

**Gender Identity and LGBTQ Identity**

Gender identity: Identifies as Male

Assigned sex at birth: Male

Pronouns: he/him

First name used: Joseph

Sexual orientation: Choose not to disclose

10/29/2020: Working Artist, Children 2-,

**Family History**

MOTHER, FATHER

**Patient History - Other**

None recorded.

**Screening**

PHQ-2/PHQ-9 0 04/24/2025

**Encounters and Procedures**

Clinical Encounter Summaries

**CAVE, Joseph (Legal name: Joe Cave) | (id #502500, dob: 06/30/1936)****Encounter Date: 04/24/2025**

Patient

**Name**

CAVE, JOE (88yo, M) ID# 502500

**Appt. Date/Time**

04/24/2025 10:15AM

**DOB**

06/30/1936

**Service Dept.**

HFHC - Medical

**Provider**

BRYAN K HODGE, DO

**Insurance**

Med Primary: MEDICARE-NC (MEDICARE)

Insurance # : 8R39Q81UU37

Med Secondary: BCBS-NC

Insurance # : YPZ11158077400

Policy/Group # : M0000002

Med : MEDICARE-NC - RHC-FQHC - PART A (MEDICARE)

Insurance # : 8R39Q81UU37

Prescription: SURESCRIPTS LLC - This member could not be found in the payer's files. Please verify coverage and all member demographic information. details

**Chief Complaint**

None recorded.

**Patient's Pharmacies****INGLES PHARMACY #067 (ERX): 684 NORTH BROAD STREET, BREVARD, NC 28712, Ph (828) 883-2358, Fax (828) 883-9576****Vitals****Ht:** 6 ft 2 in (187.96 cm) 04/24/2025 10:38 am**Wt:** 232 lbs 6 oz With clothes (105.4 kg) 04/24/2025 10:38 am**BMI:** 29.8 04/24/2025 10:38 am**T:** 98.5 F° temporal artery (36.94 C) 04/24/2025 10:38 am**Pulse:** 60 bpm regular 04/24/2025 10:38 am**RR:** 17 04/24/2025 10:39 am**O2Sat:** 97% Room Air at Rest 04/24/2025 10:39 am**BP:** 152/74 sitting R arm 04/24/2025 10:39 am**BP Cuff Size:** adult 04/24/2025 10:39 am**Allergies**

Allergies not reviewed (last reviewed 10/10/2024)

NKDA

**Medications****Reviewed Medications****Voltaren Arthritis Pain 1 % topical gel**

10/10/24 prescribed

APPLY 2 GRAMS TO THE AFFECTED AREA(S) BY TOPICAL ROUTE 4 TIMES PER DAY

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**Vaccines**

Vaccines not reviewed (last reviewed 06/15/2023)

Vaccine Type	Date	Amt.	Route	Site	NDC	Lot #	Mfr.	Exp. Date	VIS Date	VIS Given	Vaccinator
Influenza											
influenza	10/01/15										
influenza	11/21/13										

**Problems****Reviewed Problems**

- Onychomycosis - Onset: 01/22/2015 - (B35.1)Onychomycosis
- Essential tremor - Onset: 06/26/2017 - (G25.0)Tremor, essential

**CAVE, Joseph (Legal name: Joe Cave) | (id #502500, dob: 06/30/1936)**

- Stricture of colon - Onset: 05/14/2013 - (8543007)COLONIC STRICTURE. Notes:Imported from CCD: Pardee Hendersonville Family Health Center Qvera (29-Dec-2014 at 10:22:53 AM)
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- SNOMED CT Concept - Onset: 01/22/2015 - (Z00.00)Well adult exam

**Family History**

Family History not reviewed (last reviewed 06/15/2023)

MOTHER, FATHER

**Social History**

Reviewed Social History

**Substance Use**

Do you or have you ever smoked tobacco?: Never smoker

Do you or have you ever used any other forms of tobacco or nicotine?: No

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Gender identity: Identifies as Male

Assigned sex at birth: Male

Pronouns: he/him

First name used: Joseph

Sexual orientation: Choose not to disclose

10/29/2020: Working Artist, Children 2-,

**Surgical & Procedure History**

Surgical & Procedure History not reviewed (last reviewed 06/15/2023)

**Past Medical History**

Past Medical History not reviewed (last reviewed 06/15/2023)

**Screening**

Name	Score	Notes
PHQ-2/PHQ-9	0 (for the PHQ-2), Finding: Negative	

**HPI**

88 yo male comes in feeling well for hospital f/u.  
He presented with dizziness and he has a pacer.  
He was in Transylvania and recieved hydration with IVF.  
His symptoms imprved.  
He denies overexerting himself.

His left knee pain is improved

Left ring finger trigger finger  
comes and goes for months

**ROS****ROS as noted in the HPI****Physical Exam**

Physical Exam

General: well developed, well nourished, NAD

Lungs: No respiratory distress, CTA, no wheeze, rubs or rhonchi

CV: RRR no murmur audible

ABD: soft, ND, NABS, no masses

EXT: no c/c/e

LEFT finger: + crepetus and locking

Psych Normal affect, cooperative, normal speech

**Assessment / Plan****1. Postural dizziness with presyncope**

improving

no palpitations

stav hydrating

**CAVE, Joseph (Legal name: Joe Cave) | (id #502500, dob: 06/30/1936)**

monitoring heart with zol

R42: Dizziness and giddiness

R55: Syncope and collapse

**2. Osteoarthritis of left knee joint -**

improving with PT

voltaren

tylenol

M17.12: Unilateral primary osteoarthritis, left knee

**3. Overweight**

E66.3: Overweight

**4. Hernia of anterior abdominal wall -**

watchful waiting

K43.9: Ventral hernia without obstruction or gangrene

**5. Trigger finger, left ring finger**

discussed course

activity modification

voltaren

injection if persists

education and picture drawn

M65.342: Trigger finger, left ring finger

**Return to Office**

- to see Bryan K Hodge, DO for Continuity of Care at HFHC - Medical on or around 10/24/2025

**Encounter Sign-Off**

Encounter signed-off by Bryan K Hodge, DO, 04/24/2025.

Encounter performed and documented by Bryan K Hodge, DO

Encounter reviewed & signed by Bryan K Hodge, DO on 04/24/2025 at 11:20 AM



Date: 04/24/2025

Joe Cave

Patient DOB: 06/30/1936

Phone: 8288846011

Address: 36 Yale Ln, BREVARD, NC 28712

## Patient Health Questionnaire (PHQ-2/9)

Over the last two weeks, how often have you been bothered by any of the following problems?

Question	Patient Response	Score
1. Little interest or pleasure in doing things	Not at all	0
2. Feeling down, depressed, or hopeless	Not at all	0
<b>Total Score</b>		<b>0</b>