

**HOWARD, Karen S (id #2527, dob: 12/09/1947)**

## **Medical Records - CONFIDENTIAL**

**FROM:** FL - Prime MD Of Naples - Startup

Jeniser A  
2515 NORTHBROOK PLAZA DR STE 200, NAPLES, FL 34119-8088  
Phone: (239) 325-6955  
Fax: (833) 963-2177

**TO:**

**Name: HOWARD, KAREN S**

**DOB: 12/09/1947**

**Date Range: to 11/01/2024**

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

- Admin Documents
- Encounters and Procedures

This fax may contain sensitive and confidential personal health information that is being sent for the sole use of the intended recipient. Unintended recipients are directed to securely destroy any materials received. You are hereby notified that the unauthorized disclosure or other unlawful use of this fax or any personal health information is prohibited. To the extent patient information contained in this fax is subject to 42 CFR Part 2, this regulation prohibits unauthorized disclosure of these records.

If you received this fax in error, please visit [www.athenahealth.com/NotMyFax](http://www.athenahealth.com/NotMyFax) to notify the sender and confirm that the information will be destroyed. If you do not have internet access, please call 1-888-482-8436 to notify the sender and confirm that the information will be destroyed. Thank you for your attention and cooperation.  
[ID:2527-A-22143]

**Admin Documents**

**HOWARD, Karen S (id #2527, dob: 12/09/1947)**



## **“Our Mutual Patient”**

***-Urgent Request-***

### **PRISM HEALTHCURE INCORPORATED.**

430 W MERRICK RD STE 1 VALLEY STREAM, NY 11580

PHONE: (508) 492-6170, FAX: (318) 413-3018 // (540) 380-0089

To: Dr. Andre Nye, MD

Fax: 8339632177

Date: 10-31-2024

Patient: KAREN HOWARD

D.O.B. 12-09-1947

### **Dear Physician**

Our mutual patient is requesting a signed prescription form, please review, sign and send it back as soon as possible, kindly add the last 6 months of visit chartnotes in order to support the necessity of the DME.

As soon as possible FAX: (318) 413-3018  
(540) 380-0089

Confidential Protected Health Information Enclosed

Protected Health Information (PHI) is personal and sensitive information related to a person's health care. It is being faxed to you after appropriate authorization from the patient or under circumstances that do not require patient authorization. You, the recipient, are obligated to maintain it in a safe, secure and confidential manner. Re-disclosure without additional patient consent or as permitted by law is prohibited. Unauthorized re-disclosure or failure to maintain confidentiality could subject you to penalties described in federal and state law.

**IMPORTANT WARNING:** This document is intended for the use of the person or entity to which it is addressed and may contain information that is privileged and confidential, the disclosure of which is governed by applicable law. If the reader of this document is not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this information is Strictly Prohibited. If you have received this document in error, please notify the sender immediately and arrange for the return or destruction of these documents.

HOWARD, Karen S (id #2527, dob: 12/09/1947)

## PRIOR AUTHORIZATION PRESCRIPTION REQUEST FORM FOR LUMBAR ORTHOSIS

Please Send RX Form &amp; Pertinent Chart Notes      Fax No: (318) 413-3018

PLEASE SEND THIS FORM BACK IN 3 BUSINESS DAYS

Date: 10-31-2024	Last: HOWARD	Physician Name: Dr. Andre Nye, MD
First: KAREN		NPI: 1912077538
DOB: 12-09-1947		Address: 2515 Northbrooke Plaza Dr Ste 200
Address: 782 Eagle Creek Dr		City: Naples
City: Naples		State: FL
State: FL		Postal code: 34119
Postal Code: 34113		Phone Number: 2393256955
Patient Phone Number: 5188579189		Fax Number: 8339632177
Primary Ins: PPO	Policy #: H42942945	
Private Ins: Medicare	Policy #: 4MG9JP4VY23	
Height: 5'5	Weight: 150	

*This patient is being treated under a comprehensive plan of care for back pain.**I, the undersigned, certify that the prescribed orthosis is medically necessary for the patient's overall well-being. This patient has suffered an injury or undergone surgery. In my opinion, the following back orthosis products are both reasonable and necessary in reference to reducing pain by restricting mobility of the trunk. My patient has been in my care regarding the diagnosis below. This is the treatment I see fit for this patient at this time. I certify that this information is true and correct.***DIAGNOSIS:** Provider can simply cut off the diagnosis which they don't find appropriate

Lumbar/Lumbosacral intervertebral Disc Degeneration (M51.36)  
 Other intervertebral disc degeneration, lumbosacral region (M51.37)  
 Spinal Stenosis, lumbar region without neurogenic claudication (M48.061)  
 Spinal Stenosis, lumbosacral region (M48.07)  
 Other intervertebral disc disorders, lumbosacral region (M51.87)  
 Low back pain (M54.50)  
 Unspecified osteoarthritis, unspecified site (M19.90)  
 Other /Explain: \_\_\_\_\_



Scan for recording

*Our evaluation of the above patient has determined that providing the following back pain orthosis product will benefit this patient:***DISPENSE:**

L0651: LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, RIGID SHELL(S)/PANEL(S), POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO XYPHOID, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, OVERALL STRENGTH IS PROVIDED BY OVERLAPPING RIGID MATERIAL AND STABILIZING CLOSURES, INCLUDES STRAPS, CLOSURES, MAY INCLUDE SOFT INTERFACE, PENDULOUS ABDOMEN DESIGN, PREFABRICATED, OFF-THE-SHELF.

Length of need is 99 unless otherwise specified: \_\_\_\_\_ 6 - 99 (99= LIFETIME)

Physician Signature: \_\_\_\_\_

Andre Nye, MD

10-31-2024

Date signed: \_\_\_\_\_

NPI: 1912077538

Physician Name: \_\_\_\_\_

## Encounters and Procedures

Clinical Encounter Summaries

**HOWARD, Karen S (id #2527, dob: 12/09/1947)****Encounter Date:** 10/30/2024

Patient

**Name**HOWARD, KAREN (76yo, F) ID# 2527 **Appt. Date/Time** 10/30/2024 01:00PM**DOB**

12/09/1947

**Service Dept.**

PRIME MD OF NAPLES PLLC-Main Office

**Provider**

ANDRE NYE, MD

**Insurance**Med Primary: HUMANA (MEDICARE REPLACEMENT/ADVANTAGE - PPO)  
Insurance #: H42942945  
Prescription: DST PHARMACY SOLUTIONS DIRECT - Member is eligible. details

## Chief Complaint

**Transition of Care Encounter**

follow up chronic conditions

home health question

## Patient's Care Team

**Endocrinologist:** JOSEPHINE JASPER MD: 40 S HEATHWOOD DR STE E, MARCO ISLAND, FL 34145, Ph (239) 315-8271, Fax (239) 259-8167 NPI: 1962571752

## Patient's Pharmacies

**CVS/PHARMACY #7899 (ERX): 6800 COLLIER BLVD, NAPLES, FL 34114, Ph (239) 417-6651, Fax (239) 417-6653**

PUBlix #0516 FREEDOM SQUARE (ERX): 12663 TAMiami TRAIL EAST, NAPLES, FL 34113, Ph (239) 775-7703, Fax (239) 775-1126

## Vitals

**Ht:** 5 ft 4 in (162.56 cm) 10/30/2024 01:12 pm**Pain Scale:** 0 10/30/2024 01:15 pm**Pulse:** 70 bpm regular 10/30/2024 01:15 pm**T:** 99 F° temporal artery (37.22 C) 10/30/2024 01:16 pm**Wt:** 165.6 lbs With clothes (75.11 kg) 10/30/2024 01:13 pm**BMI:** 28.4 10/30/2024 01:13 pm**BP:** 132/84 standing L arm 10/30/2024 01:15 pm**O2Sat:** 98% Room Air at Rest 10/30/2024 01:15 pm

## Allergies

Reviewed Allergies

**NO KNOWN ALLERGIES**

NKDA

## Medications

**HOWARD, Karen S (id #2527, dob: 12/09/1947)**

## Reviewed Medications

<b>amLODIPine 10 mg tablet</b> 10 mg.	07/03/24 entered
<b>aspirin 81 mg tablet,delayed release</b> TAKE 1 TABLET BY MOUTH EVERY DAY	08/21/22 filled
<b>atorvastatin 40 mg tablet</b> TAKE 1 TABLET BY MOUTH EVERY DAY	10/28/24 filled
<b>carBAMazepine ER 200 mg tablet,extended release,12 hr</b> TAKE 1 TABLET BY MOUTH EVERY 12 HOURS	10/29/24 renewed
<b>diazepam 5 mg tablet</b> Take 2 tabs at bedtime.	10/30/24 prescribed
<b>DULoxetine 30 mg capsule,delayed release</b> TAKE 1 CAPSULE BY MOUTH EVERY DAY	10/28/24 filled
<b>folic acid 1 mg tablet</b> TAKE 1 TABLET BY MOUTH EVERY DAY	08/19/24 filled
<b> gabapentin 300 mg capsule</b> TAKE 1 CAPSULE BY MOUTH EVERY DAY	09/16/24 filled
<b>Klor-Con 10 mEq tablet,extended release</b>	06/11/23 filled
<b>losartan 25 mg tablet</b> TAKE 1 TABLET BY MOUTH TWICE A DAY	09/06/24 filled
<b>meloxicam 7.5 mg tablet</b> TAKE 1 TABLET BY MOUTH EVERY DAY	09/16/24 filled
<b>metoprolol succinate ER 50 mg tablet,extended release 24 hr</b> TAKE 1 TABLET BY MOUTH TWICE A DAY	09/17/24 filled
<b>omeprazole 20 mg capsule,delayed release</b> TAKE 1 CAPSULE TWICE A DAY BY ORAL ROUTE BEFORE MEAL(S) FOR 30 DAYS.	10/21/24 filled
<b>omeprazole magnesium 20 mg tablet,delayed release</b> 20 mg.	07/03/24 entered
<b>ondansetron 8 mg disintegrating tablet</b> 8 mg every 8 hours.	07/03/24 entered
<b>rosuvastatin 40 mg tablet</b> TAKE 1 TABLET BY MOUTH EVERY DAY	08/12/24 renewed
<b>solifenacain 5 mg tablet</b> TAKE ONE TABLET BY MOUTH ONE TIME DAILY	08/12/24 filled

**HOWARD, Karen S (id #2527, dob: 12/09/1947)****Vaccines****Reviewed Vaccines**

Vaccine Type	Date	Amt.	Route	Site	NDC	Lot #	Mfr.	Exp. Date	VIS Given	Vaccinator
<b>Diphtheria, Tetanus</b>										
Td (adult), adsorbed	10/28/21									
Td (adult)	10/28/21	0.5 mL			A133B	Other manufacturer				

**Problems****Reviewed Problems**

- Hypercalcemia - Onset: 05/22/2024
- Hyponatremia - Onset: 05/21/2024
- Hypokalemia - Onset: 05/26/2023
- Generalized anxiety disorder - Onset: 08/10/2023
- Benzodiazepine dependence
- Insomnia
- Neuropathy
- Idiopathic peripheral neuropathy - Onset: 05/26/2023
- Visual impairment - Onset: 10/26/2023
- Essential hypertension
- Allergic rhinitis
- Irritable bowel syndrome
- Chronic kidney disease stage 3
- Kidney stone
- Urinary tract infectious disease - Onset: 09/26/2022
- Pain of breast
- Solar degeneration - Onset: 02/23/2024
- Psoriasis
- Spinal stenosis of lumbar region
- Osteopenia - Onset: 12/18/2023
- Dizziness - Onset: 05/02/2024
- Ataxia - Onset: 05/09/2024
- Nausea and vomiting - Onset: 05/02/2024
- Urge incontinence of urine
- Chronic insomnia - Onset: 05/26/2023
- Bilateral cramp of muscle of lower limbs - Onset: 05/26/2023
- Colorectal cancer detected by DNA-based stool screening - Onset: 07/10/2023
- Chronic back pain - Onset: 05/05/2022
- Hypertensive disorder - Onset: 05/05/2022
- Coronary arteriosclerosis - Onset: 05/05/2022
- Spasm of urinary bladder - Onset: 05/05/2022
- Gastroesophageal reflux disease - Onset: 05/05/2022
- Hyperlipidemia - Onset: 05/05/2022

Some problems listed in Documents: #578984, #579016, #586613 could not be added to this patient's chart. Please review these documents and add these problems to the patient's chart manually as needed.

**Family History****Reviewed Family History****Social History****Reviewed Social History****Substance Use**

What was the date of your most recent tobacco screening?: 07/03/2024

Do you or have you ever smoked tobacco?: Former smoker

How many years have you smoked tobacco?: 10

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

What is your level of alcohol consumption?: Moderate

What is your level of caffeine consumption?: Occasional

Do you use any illicit or recreational drugs?: No

**Advance Directive**

Do you have an advance directive?: Yes

What is your code status?: DNR

**Activities of Daily Living**

Are you able to care for yourself?: Yes

Are you blind or do you have difficulty seeing?: No

Are you deaf or do you have serious difficulty hearing? : No

Do you have difficulty concentrating, remembering or making decisions?: No

Do you have difficulty walking or climbing stairs?: No

Do you have difficulty dressing or bathing?: No

Do you have difficulty doing errands alone?: No

Are you able to walk?: Yes: walks with assistive device(s)

Do you have transportation difficulties?: No

**HOWARD, Karen S (id #2527, dob: 12/09/1947)****Marriage and Sexuality**

What is your relationship status?: Divorced

How many children do you have?: 2 (Notes: She owned 2 marinas in NY)

**Gender Identity and LGBTQ Identity**

Gender identity: Identifies as Female

Assigned sex at birth: Female

Pronouns: she/her

First name used: KAREN

Sexual orientation: Straight or heterosexual

**Surgical History**

Surgical History not reviewed (last reviewed 07/03/2024)

**GYN History**

GYN History not reviewed (last reviewed 07/03/2024)

**Obstetric History**

Obstetric History not reviewed (last reviewed 05/21/2024)

**Past Medical History**

Past Medical History not reviewed (last reviewed 07/03/2024)

**HPI**

Karen presented with concerns about neuropathy in her feet and inquired about potential treatments. She has a history of poor circulation, a previous stroke, and recent foot surgeries. She is currently on multiple medications, including carbamazepine and gabapentin for neuropathy, and diazepam for sleep. A referral to Dr. Zamora, a vascular surgeon, was made for further evaluation of her foot circulation issues. Karen declined the flu shot during this visit.

**1. Chief Complaint:**

- The patient's chief complaint is neuropathy in the feet.

**2. Medical History:**

- The patient has a history of poor circulation and a previous stroke.  
- The patient has a history of high calcium levels.  
- The patient has a history of skin cancer.  
- The patient recently had foot surgeries.

**3. Symptoms:**

- The patient reports neuropathy in the feet.

**4. Additional Notes:**

- The patient reports a recent experience with a scam call and mentions a previous loss of \$52,000 due to a scam.  
- The patient inquires about potential treatments for neuropathy, including a \$10,000 procedure involving needles.  
- The patient is currently taking Integrator for neuropathy management.  
- The patient has been using diazepam for sleep, particularly after recent foot surgeries.  
- The patient is on multiple medications, including amlodipine, atorvastatin, aspirin, carbamazepine, gabapentin, omeprazole, losartan, potassium, meloxicam, duloxetine, and folic acid.  
- The patient discontinued a magnesium supplement.  
- The patient declines a flu shot during this visit.  
- The patient's foot surgeries were performed by Dr. Wanamaker and his assistant Louie.  
- The patient was referred to Dr. Wanamaker by dermatologist Jean Marie Tremont.  
- The patient was previously seeing Dr. Jarvis for management of high calcium levels.

**ROS**

**Additionally reports: 12 system review was performed and it was negative with the exception of what was mentioned in HPI or below**

**Physical Exam**

Gen: NAD, alert and pleasant

HEENT: EOMI, no conjunctival erythema, PERRLA, no throat erythema or exudates

Neck: no masses, no LAD

Chest: CTABL, no wheezing or rales

Heart: RRR, normal S1,S2, no murmurs

Abd: soft, normal BS, non tender, non distended, no guarding

**HOWARD, Karen S (id #2527, dob: 12/09/1947)**

Extremities: no edema, no cyanosis, good peripheral pulses

Musculoskeletal: no bony deformities, no joint swelling

Skin: no rash, no jaundice, no open wounds

Neuro: alert, awake, no gross deficits noted

Psych: pleasant, good mood, no delirium

**Assessment / Plan****1. Neuropathy**

- Patient is currently on carbamazepine and gabapentin for neuropathic pain management.

- Plan:

- a. Continue current medications: carbamazepine and gabapentin.
- b. Refer to Dr. Zamora, a vascular surgeon, for evaluation and management of foot circulation issues, considering options such as medication, stent, or bypass.

**2. Insomnia**

- Plan:

- a. Refill diazepam prescription: 60 tablets, 2 tablets at bedtime as needed for sleep.

**3. Hypertension**

- Plan:

- a. Continue current medications: amlodipine, losartan, and potassium.

**4. Hyperlipidemia**

- Plan:

- a. Continue current medication: atorvastatin.

**5. Gastroesophageal reflux disease (GERD)**

- Plan:

- a. Continue current medication: omeprazole.

**6. Osteoarthritis**

- Plan:

- a. Continue current medication: meloxicam.

**7. Depression and anxiety**

- Plan:

- a. Continue current medication: duloxetine.

**8. Vitamin supplementation**

- Plan:

- a. Continue current medication: folic acid.
- b. Discontinue magnesium supplementation.

**9. High calcium levels**

- Plan:

- a. Follow up with Dr. Jarvis for further evaluation and management.

**10. Stroke history**

- Plan:

- a. Continue current medication: aspirin.

**11. Skin cancer history**

- Plan:

- a. Continue follow-up with dermatologist, Dr. Jean Marie Tremont, as needed.

**12. Laboratory tests**

- Plan:

- a. Order blood work to monitor patient's numbers, including calcium levels.

**13. Influenza vaccination**

- Patient declined flu shot at this time.

**1. Essential hypertension -**

At target

I10: Essential (primary) hypertension

- HIGH BLOOD PRESSURE: CARE INSTRUCTIONS
- LEARNING ABOUT HIGH BLOOD PRESSURE
- COMP. METABOLIC PANEL (14)-322000-P
- CBC WITH DIFFERENTIAL/PLATELET
- LIPID PANEL-303756-P
- LIPID PANEL-303756-P

**HOWARD, Karen S (id #2527, dob: 12/09/1947)**

- HEMOGLOBIN A1C-001453-P

**2. Hyperlipidemia -**

LDL 106 on 5/27/22. Check lipids.  
E78.5: Hyperlipidemia, unspecified  
• HIGH CHOLESTEROL: CARE INSTRUCTIONS

**3. Neuropathy -**

Doing well with gabapentin and Tegretol and Duloxetine

Start nitrobid

- G62.9: Polyneuropathy, unspecified
- NEUROPATHIC PAIN: CARE INSTRUCTIONS
  - VASCULAR SURGEON REFERRAL - Schedule Within: provider's discretion Note to Provider: PVD

**4. Benzodiazepine dependence -**

Currently on diazepam

F13.20: Sedative, hypnotic or anxiolytic dependence, uncomplicated

**5. Chronic insomnia -**

uses valium for this

- F51.04: Psychophysiological insomnia
- diazepam 5 mg tablet - Take 2 tabs at bedtime. Qty: (60) tablet Refills: 0 Pharmacy: CVS/PHARMACY #7899

**6. Hypercalcemia -**

check labs

- E83.52: Hypercalcemia
- HYPERCALCEMIA: CARE INSTRUCTIONS
  - PTH INTACT+CALCIUM, IONIZED

**7. Active or passive immunization -**

Declined

Z23: Encounter for immunization

**Patient Instructions**

Dear Karen,

Thank you for visiting us today. We appreciate your commitment to managing your health and addressing your concerns. Here is a summary of the key instructions from today's consultation:

- Referrals:
  - Referral to Dr. Zamora, a vascular surgeon, to explore treatment options for your foot circulation issues, which may include medication, a stent, or a bypass.
- Medications and Treatments:
  - Diazepam: Prescription refilled for 60 tablets, to be taken two at bedtime.
  - Continue current medications: amlodipine, atorvastatin, aspirin, gabapentin, omeprazole, losartan, potassium, atorvastatin, meloxicam, carbamazepine, duloxetine, folic acid.
  - Discontinue magnesium.
  - Carbamazepine: Continue for neuropathy as it has been effective.
- Tests and Procedures:
  - Laboratory Tests: Blood work to check various health parameters.
- Monitoring and Management:
  - No flu shot as per your preference.

Please feel free to reach out if you have any questions or need further clarification on your treatment plan.

Best regards,

Andre Nye, MD  
Medical Director, Family Medicine

**Return to Office**

Patient will return to the office as needed.

**Encounter Sign-Off**

Encounter signed-off by Andre Nye, MD, 10/30/2024.

**HOWARD, Karen S (id #2527, dob: 12/09/1947)**

Encounter performed and documented by Andre Nye, MD  
Encounter reviewed & signed by Andre Nye, MD on 10/30/2024 at 2:09pm

**HOWARD, Karen S (id #2527, dob: 12/09/1947)**

**HOWARD, Karen S (id #2527, dob: 12/09/1947)****Encounter Date: 07/03/2024**

Patient

**Name** HOWARD, KAREN (76yo, F) ID# 2527 **Appt. Date/Time** 07/03/2024 03:15PM**DOB** 12/09/1947 **Service Dept.** PRIME MD OF NAPLES PLLC-Main Office**Provider** ANDRE NYE, MD**Insurance** Med Primary: HUMANA (MEDICARE REPLACEMENT/ADVANTAGE - PPO)  
Insurance #: H42942945  
Prescription: DST PHARMACY SOLUTIONS DIRECT - Member is eligible. details

## Chief Complaint

**Transition of Care Encounter**

Medicare annual wellness visit

## Patient's Care Team

**Endocrinologist:** JOSEPHINE JASPER MD: 40 S HEATHWOOD DR STE E, MARCO ISLAND, FL 34145, Ph (239) 315-8271, Fax (239) 259-8167 NPI: 1962571752

## Patient's Pharmacies

**PUBlix #0516 FREEDOM SQUARE (ERX): 12663 TAMiami TRAIL EAST, NAPLES, FL 34113, Ph (239) 775-7703, Fax (239) 775-1126**

CVS/PHARMACY #7899 (ERX): 6800 COLLIER BLVD, NAPLES, FL 34114, Ph (239) 417-6651, Fax (239) 417-6653

## Vitals

**Ht:** 5 ft 4 in (162.56 cm) 07/03/2024 04:11 pm**Pain Scale:** 0 07/03/2024 04:12 pm**Pulse:** 71 bpm regular 07/03/2024 04:15 pm**T:** 98.9 F° temporal artery (37.17 C) 07/03/2024 04:15 pm**Wt:** 161 lbs With clothes (73.03 kg) 07/03/2024 04:12 pm**BMI:** 27.6 07/03/2024 04:12 pm**BP:** 122/64 sitting L arm 07/03/2024 04:16 pm**O2Sat:** 97% Room Air at Rest 07/03/2024 04:15 pm

## Allergies

Reviewed Allergies

**NO KNOWN ALLERGIES**

NKDA

## Medications

**HOWARD, Karen S (id #2527, dob: 12/09/1947)**

## Reviewed Medications

<b>amLODIPine 10 mg tablet</b> 10 mg.	07/03/24 entered
<b>aspirin 81 mg tablet,delayed release</b> TAKE 1 TABLET BY MOUTH EVERY DAY	08/21/22 filled
<b>atorvastatin 40 mg tablet</b> TAKE 1 TABLET BY MOUTH EVERY DAY	04/30/24 filled
<b>carBAMazepine ER 200 mg capsule,extended release mphase12hr</b> 200 mg twice a day.	07/03/24 entered
<b>carBAMazepine ER 200 mg tablet,extended release,12 hr</b> TAKE ONE TABLET BY MOUTH EVERY 12 HOURS	05/25/24 filled
<b>clindamycin HCL 150 mg capsule</b>	07/02/24 filled
<b>diazePAM 5 mg tablet</b> 10 mg.	07/03/24 entered
<b>DULoxetine 30 mg capsule,delayed release</b> 30 mg.	07/03/24 entered
<b>folic acid 1 mg tablet</b> TAKE 1 TABLET BY MOUTH EVERY DAY	01/08/24 filled
<b>Klor-Con 10 mEq tablet,extended release</b>	06/11/23 filled
<b>losartan 25 mg tablet</b> 25 mg twice a day.	07/03/24 entered
<b>losartan 50 mg tablet</b>	02/13/24 filled
<b>meloxicam 7.5 mg tablet</b> 7.5 mg., stop 05/18/2024	07/03/24 entered
<b>metoprolol succinate ER 50 mg tablet,extended release 24 hr</b> 50 mg twice a day., start 03/13/2014	03/13/14 started
<b>Nitro-Bid 2 % transdermal ointment</b> 1/2 inch to the affected area bid prn	07/03/24 prescribed
<b>omeprazole 20 mg capsule,delayed release</b> TAKE 1 CAPSULE TWICE A DAY BY ORAL ROUTE BEFORE MEAL(S) FOR 30 DAYS.	06/28/24 filled
<b>omeprazole magnesium 20 mg tablet,delayed release</b> 20 mg.	07/03/24 entered
<b>ondansetron 8 mg disintegrating tablet</b>	07/03/24 entered

**HOWARD, Karen S (id #2527, dob: 12/09/1947)**

8 mg every 8 hours.

**rosuvastatin 40 mg tablet**

07/03/24 entered

40 mg.

**solifenacin 5 mg tablet**

07/03/24 entered

5 mg.

**Vaccines****Reviewed Vaccines**

Vaccine Type	Date	Amt.	Route	Site	NDC	Lot #	Mfr.	Exp. Date	VIS	VIS Given	Vaccinator
Diphtheria, Tetanus											
Td (adult), adsorbed	10/28/21										
Td (adult)	10/28/21	0.5 mL			A133B		Other manufacturer				

**Problems****Reviewed Problems**

- Hypercalcemia - Onset: 05/22/2024
- Hyponatremia - Onset: 05/21/2024
- Hypokalemia - Onset: 05/26/2023
- Generalized anxiety disorder - Onset: 08/10/2023
- Benzodiazepine dependence
- Insomnia
- Neuropathy
- Idiopathic peripheral neuropathy - Onset: 05/26/2023
- Visual impairment - Onset: 10/26/2023
- Essential hypertension
- Allergic rhinitis
- Irritable bowel syndrome
- Chronic kidney disease stage 3
- Kidney stone
- Urinary tract infectious disease - Onset: 09/26/2022
- Pain of breast
- Solar degeneration - Onset: 02/23/2024
- Psoriasis
- Spinal stenosis of lumbar region
- Osteopenia - Onset: 12/18/2023
- Dizziness - Onset: 05/02/2024
- Ataxia - Onset: 05/09/2024
- Nausea and vomiting - Onset: 05/02/2024
- Urge incontinence of urine
- Chronic insomnia - Onset: 05/26/2023
- Bilateral cramp of muscle of lower limbs - Onset: 05/26/2023
- Colorectal cancer detected by DNA-based stool screening - Onset: 07/10/2023
- Chronic back pain - Onset: 05/05/2022
- Hypertensive disorder - Onset: 05/05/2022
- Coronary arteriosclerosis - Onset: 05/05/2022
- Spasm of urinary bladder - Onset: 05/05/2022
- Gastroesophageal reflux disease - Onset: 05/05/2022
- Hyperlipidemia - Onset: 05/05/2022

Some problems listed in Documents: #578984, #579016, #586613 could not be added to this patient's chart. Please review these documents and add these problems to the patient's chart manually as needed.

**Family History****Reviewed Family History****Social History****Reviewed Social History****Substance Use**

What was the date of your most recent tobacco screening?: 07/03/2024

Do you or have you ever smoked tobacco?: Former smoker

How many years have you smoked tobacco?: 10

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

What is your level of alcohol consumption?: Moderate

What is your level of caffeine consumption?: Occasional

Do you use any illicit or recreational drugs?: No

**Advance Directive**

Do you have an advance directive?: Yes

**HOWARD, Karen S (id #2527, dob: 12/09/1947)**

What is your code status?: DNR

**Activities of Daily Living**

Are you able to care for yourself?: Yes

Are you blind or do you have difficulty seeing?: No

Are you deaf or do you have serious difficulty hearing?: No

Do you have difficulty concentrating, remembering or making decisions?: No

Do you have difficulty walking or climbing stairs?: No

Do you have difficulty dressing or bathing?: No

Do you have difficulty doing errands alone?: No

Are you able to walk?: Yes: walks with assistive device(s)

Do you have transportation difficulties?: No

**Marriage and Sexuality**

What is your relationship status?: Divorced

How many children do you have?: 2 (Notes: She owned 2 marinas in NY)

**Gender Identity and LGBTQ Identity**

Gender identity: Identifies as Female

Assigned sex at birth: Female

Pronouns: she/her

First name used: KAREN

Sexual orientation: Straight or heterosexual

**Surgical History**

Reviewed Surgical History

**GYN History**

Reviewed GYN History

**Obstetric History**

Obstetric History not reviewed (last reviewed 05/21/2024)

**Past Medical History**

Reviewed Past Medical History

**Screening**

Name	Score	Notes
PHQ-2/PHQ-9	0 (for the PHQ-9)	
Morse Fall Scale	50	

**HPI****Medicare Annual Wellness Visit**

Reported by patient.

Diet and Nutrition: healthy diet

Fracture Risk: no history of fractures; no recent explained fracture; no sudden unexplained fractures; no previous musculoskeletal injuries

Physical Activity: exercises on a regular basis; recent increase in physical activity; good physical condition

Depression Risk: never feels sad, empty, or tearful; no loss of interest in activities; no significant changes in weight; no sleep disturbances or insomnia; no agitation; no loss of energy; no feelings of worthlessness or guilt; no thoughts of suicide; no history of depression; no history of mood disorders

Orientation: no disorientation to time; no disorientation to date; no disorientation to place

Concentration and Memory: no decreased concentrating ability; no memory lapses or loss; does not forget words

Speech/Motor difficulties: no speech difficulties; no difficulty expressing formulated concepts; no difficulty with fine manipulative tasks; no difficulty writing/copying; no slowed reaction time; does not knock things over when trying to pick them up

Hearing: no loss of hearing

Vision: no vision problems

Activities of Daily Living: able to bathe with limited or no assistance; able to control urination and bowels; able to dress with limited or no assistance; able to feed self with limited or no assistance; able to get out of chair or bed with limited or no assistance; able to groom with limited or no assistance; able to toilet with limited or no assistance

Instrumental Activities of Daily Living: able to do house work with limited or no assistance; able to grocery shop with limited or no assistance; able to manage medications with limited or no assistance; able to manage money with limited or no assistance; able to prepare meals with limited or no assistance; able to use the phone with limited or no assistance

Falls Risk Assessment: no frequent falls while walking; no fall in the past year; no fall since last visit; no dizziness/vertigo

Home Safety: no unsafe flooring hazards; no unsafe stairs; no unsafe gas appliances; working smoke/CO detectors; wears protective head gear for biking/high velocity; use of seatbelts; practicing 'safer sex'; no vision or hearing loss while driving; no fire arms; has hand bars in the bathroom/shower; good lighting in the home

**HOWARD, Karen S (id #2527, dob: 12/09/1947)**

The patient, who recently experienced a minor car accident without injury, reports ongoing neuropathy in the right foot, particularly in the big toe at night, and uses a cane for ambulation. They are currently taking Tegretol and Duloxetine for neuropathy and will trial Nitrobid transdermal ointment for additional pain relief. Preventive care is up to date, including colorectal and breast cancer screenings, and shingles and pneumococcal vaccinations. The patient has an advanced directive and living will, with their son as the decision-maker. They report occasional alcohol use and have declined the flu shot. Follow-up is scheduled to assess the effectiveness of the new treatment and revisit vaccine recommendations.

**1. Chief Complaint:**

- The patient reports a recent car accident, but states that there was no significant damage to either vehicle involved.

**2. Medical History:**

- The patient lives alone in a multi-story residence with an elevator and is able to afford their medications.  
- The patient mentions a recent change in insurance that has reduced the cost of one of their medications to zero.  
- The patient has completed colorectal cancer screening with a negative Cologuard result and is up to date on breast cancer screening and cholesterol testing.  
- The patient has received shingles and pneumonia vaccines.

**3. Symptoms:**

- The patient experiences neuropathy, primarily in their right foot, with pain in their big toe that is worse at night.  
- The patient is currently taking Tegretol and Duloxetine for neuropathy, but is unsure if these medications are helping.

**4. Additional Notes:**

- The patient admits to consuming alcohol but denies drinking and driving.  
- The patient rates their health as similar to others their age, with the exception of neuropathy and back issues.  
- The patient uses a cane and denies any recent falls, except for an incident involving a nurse.  
- The patient has an advanced directive and a living will, with their son designated as the decision-maker in case of an emergency.  
- The patient declines flu shots.  
- The patient has been using Gets Decent cream for pain relief but is open to trying Nitrobid transdermal ointment as an alternative treatment.

**ROS****Additionally reports:**

**a review of 12 systems was performed and was negative with the exception of what was mentioned below or in HPI**

**Physical Exam**

Gen: NAD, alert and pleasant

HEENT: EOMI, no conjunctival erythema, PERRLA, no throat erythema or exudates

Neck: no masses, no LAD

Chest: CTABL, no wheezing or rales

Heart: RRR, normal S1,S2, no murmurs

Abd: soft, normal BS, non tender, non distended, no guarding

Extremities: no edema, no cyanosis, good peripheral pulses

Musculoskeletal: no bony deformities, no joint swelling

Skin: no rash, no jaundice, no open wounds

Neuro: alert, awake, no gross deficits noted

Psych: pleasant, good mood, no delirium

**Procedure Documentation****AWV:**

Medicare Annual Wellness Visit

HEALTH RISK ASSESSMENT  
Lifestyle Review

**HOWARD, Karen S (id #2527, dob: 12/09/1947)**

Lives with: alone  
Type or residence: single family # of stories: single  
DME use: none  
Able to afford medications: yes  
Transportation provided by : private car - patient driver

**Nutrition and Activity Review**

Weight change in the last 6 months? no  
BMI screening: noted no follow up suggested  
How much physical activity/exercise do you get? regular at least 3 times a week 30 minutes at once

**Personal Habits/Hygiene**

Tobacco use assessment: never smoked  
Alcohol use assessment: no alcohol use  
If uses alcohol: How often do you have drinks containing alcohol? \_\_0  
How many drinks containing alcohol do you have on a typical day of drinking? \_\_0\_\_  
How often do you have more than 5 drink on one occasion? never

**Self Assessment on Health**

In general, how would you rate your health compared to others your age? same  
How is your health today compared to last year? better

**Depression Screening**

PHQ2/PHQ9 performed, additional 15 minutes spent for staff scoring and provider review for completion of chart, see screening SCORE - 0

**FUNCTIONAL STATUS ASSESSMENT****Fall Risk Screening**

Use of ambulatory aid : cane  
Have you had any falls in the past year? no falls  
In the past 3 months have you had a fall? no  
Fall risk assessment: low

**Cognitive Impairment Screening**

Do you or people around you have concerns about your memory? no  
Oriented x3 person, place, time  
Remembers 3 unrelated words? (uncued words 2 pts, cued words 1 pt, must score 4 or more to pass) -->  
Score \_\_6\_\_  
Is there clinical evidence of cognitive impairment? no

ADLs and IADLs Screening done in HPI section

**Advanced Care Planning**

Do you have an "Advanced Directive" of any kind? yes  
Provider has discussed advanced care planning with patient or POA/Health Care Proxy: yes including a living will  
Healthcare surrogate in case of emergency is: \_\_Son\_\_\_\_

**SCREENING AND VACCINATIONS SCHEDULE**

Colorectal Cancer Screening: UTD  
Breast Cancer Screening: UTD  
Cardiovascular Risk Screening  
-Blood pressure checks: at every office visit and if recommended at home  
-Lipid screening: annually  
-AAA screening: not recommended  
-DEXA scan last time was done: \_\_UTD\_\_  
Vaccines Recommendations for ages 65 or greater (<65 yo see CDC guidelines)  
Influenza Vaccine: annually declines  
Pneumovax (PPSV23) : recommended X1 after age 65, if greater than 5 yrs since previous and greater than 12 months since Prevnar (PCV13) up to date  
Prevnar (PCV20): recommended 1 time after age 65, if greater than 12 months since Pneumovax up to date  
Shingles Vaccine: Shingrix recommended series (2 doses) after age 50 up to date  
Tetanus Vaccine (Tdap): recommended every 10 years up to date

RSV vaccine: Recommended after age 60 declines

**Assessment / Plan****1. Neuropathy**

- Continue Tegretol and Duloxetine as prescribed.
- Plan:
  - a. Trial of Nitrobid transdermal ointment for recalcitrant neuropathy. Instruct the patient to apply a half-inch amount of the cream to the affected toe during episodes of pain. Monitor for any side effects, such as headache or hypotension.

**HOWARD, Karen S (id #2527, dob: 12/09/1947)****2. Back issues**

- No specific intervention mentioned during this visit. Continue monitoring and managing as per previous plans.

**3. Medication cost and insurance**

- Patient reports a significant reduction in copay for their medication with new insurance. Encourage the patient to continue taking medications as prescribed.

**4. Preventive care**

- Colorectal cancer screening: Up to date with a negative Cologuard test.
- Breast cancer screening: Up to date.
- Cholesterol screening: Up to date.
- Immunizations:
  - a. Flu shot declined by the patient.
  - b. Pneumovax and shingles vaccines up to date.
  - c. Prevnar and RSV vaccines recommended but deferred by the patient due to upcoming burn and scrape treatment.

**5. Advanced directive and living will**

- Patient has an advanced directive and living will in place, with their son as the designated decision-maker.

**6. Alcohol consumption**

- Patient reports occasional alcohol use. Advised not to drink and drive.

**7. General health and mood**

- Patient rates their health as the same as others their age, with the exception of neuropathy and back issues. Mood is reported as good. No signs of cognitive impairment.

**Follow-up****- Plan:**

- a. Schedule a follow-up appointment to discuss the effectiveness of the Nitrobid transdermal ointment for neuropathy.
- b. Readdress the recommendation for Prevnar and RSV vaccines after the patient's burn and scrape treatment.

**1. Adult health examination** - A preventative care plan was created and discussed with the patient: including preventative screening as well as immunization schedule. Education was provided on healthy nutrition, including a diet rich in fruits and vegetables, minimizing simple carbohydrates, salt, and saturated fats. Encouraged regular cardiovascular exercise such as walking at least 30 minutes daily, 5 times per week. Emphasized preventive health measures and educated pt on fall prevention and community-based lifestyle interventions to help reduce health risks and promote healthy living.

\*Patient was screened for depression using PHQ9, score as outlined above.

\*Tobacco screening performed

\* Alcohol screening performed

\*Fall risk screening performed using MORSE fall scale

\*Functional status assessed

\* Patient was screened for cardiovascular disorder, recommended healthy lifestyle modification including 30 minutes of exercise at least five days a week.

Z00.00: Encounter for general adult medical examination without abnormal findings

Z13.31: Encounter for screening for depression

Z71.89: Other specified counseling

Z13.39: Encounter for screening examination for other mental health and behavioral disorders

Z13.6: Encounter for screening for cardiovascular disorders

• HEARING LOSS: CARE INSTRUCTIONS

• A HEALTHY HEART: CARE INSTRUCTIONS

• PREVENTING FALLS: CARE INSTRUCTIONS

**2. Advance care planning** - Advance care planning was addressed during this visit. I have discussed with patient/POA and explained about completing a five wishes form, a Living will and delegating a family member or a healthcare proxy to make decisions when they're not able to. Also, decided if they desire to receive full treatment in case of medical emergency versus DNR. Face-to-face discussion lasted for a duration of 10 minutes. Patient code status updated.

Z71.89: Other specified counseling

• ADVANCE CARE PLANNING: CARE INSTRUCTIONS

**3. Essential hypertension -**

At target

I10: Essential (primary) hypertension

• HIGH BLOOD PRESSURE: CARE INSTRUCTIONS

• LEARNING ABOUT HIGH BLOOD PRESSURE

**4. Coronary arteriosclerosis -**

We will check baseline labs and if necessary refer to cardiology

I25.10: Atherosclerotic heart disease of native coronary artery without angina pectoris

**HOWARD, Karen S (id #2527, dob: 12/09/1947)****5. Gastroesophageal reflux disease -**

Controlled on PPI

K21.9: Gastro-esophageal reflux disease without esophagitis

- GASTROESOPHAGEAL REFLUX DISEASE (GERD): CARE INSTRUCTIONS

**6. Generalized anxiety disorder -**

Stable

F41.1: Generalized anxiety disorder

**7. Hyperlipidemia -**

LDL 106 on 5/27/22. Check lipids.

E78.5: Hyperlipidemia, unspecified

- HIGH CHOLESTEROL: CARE INSTRUCTIONS

**8. Hypertensive disorder -**

Blood pressure at target no side effects with current medication regimen

I10: Essential (primary) hypertension

**9. Chronic kidney disease stage 3 -**

Stable

N18.30: Chronic kidney disease, stage 3 unspecified

- MEDICINES TO AVOID WITH KIDNEY DISEASE: CARE INSTRUCTIONS

**10. Active or passive immunization -**

declined

Z23: Encounter for immunization

**11. Neuropathy -**

Doing well with gabapentin and Tegretol and Duloxetine

Start nitrobid

G62.9: Polyneuropathy, unspecified

- NEUROPATHIC PAIN: CARE INSTRUCTIONS
- Nitro-Bid 2 % transdermal ointment - 1/2 inch to the affected area bid prn   Qty: (1) 30 gram tube   Refills: 6   Pharmacy: PUBLIX #0516 FREEDOM SQUARE

**Patient Instructions**

Date: July 3, 2024

Dear Karen,

Thank you for visiting us today. We appreciate your commitment to maintaining and improving your health. Here is a summary of the key points from our discussion:

- Medication Adjustments:

- Continue using Tegretol and Duloxetine for neuropathy. Monitor effectiveness.

- Begin using Nitrobid transdermal ointment for neuropathic pain in your toe. Apply a half-inch amount to the affected area as needed.

- Vaccinations:

- Recommended the RSV vaccine due to your age and neurological condition. Decision to defer until after your upcoming medical treatments.

- Screenings and Tests:

- Colorectal cancer screening with Cologuard was negative. Continue annual screenings.

- Breast cancer and cholesterol screenings are up to date.

- Immunizations for flu and pneumococcal diseases are up to date.

- Lifestyle Advice:

- Advised against drinking and driving.

- Continue to manage your health independently, as you are doing well with current living arrangements and healthcare management.

- Follow-Up:

- Please monitor the effectiveness of the new Nitrobid ointment and report any significant changes or concerns.

- We will revisit the discussion about the RSV vaccine at your next appointment.

Thank you for trusting us with your care. Please do not hesitate to contact our office if you have any questions or need further assistance.

Sincerely,

Dr. Andre Nye

Medical Director, Family Medicine

**HOWARD, Karen S (id #2527, dob: 12/09/1947)**

**Return to Office**

Patient will return to the office as needed.

**Encounter Sign-Off**

Encounter signed-off by Andre Nye, MD, 07/03/2024.

Encounter performed and documented by Andre Nye, MD

Encounter reviewed & signed by Andre Nye, MD on 07/03/2024 at 5:19pm