

Queens Medical Office, P.C.
40-46 74th Street ELMHURST NY 11373
Tel: (718)457-7000 Fax: (718)457-0651

Chart #
63108740

MRN	SSN	Title	Last Name	First Name	MI	Suffix	Age
1004102	124-70-5015	-	Zapata	Felicia	-	-	59 years 10 months 24 days

PERSONAL INFORMATION

MRN :	1004102	Language :	Spanish
DOb :	5/1/1957	Category :	Primary Care
Gender :	Female	Marital Status :	Single
Siblings :	-	Ethnicity :	Hispanic or Latino
Referring Physician :	-	Referring Physician Contact :	-
Primary Care Physician :	Alberto Roza, D.O	Other :	-
Race :	Hispanic or Latino	Additional Race :	Hispanic or Latino,
Communication Preference :	Cell Phone		

CONTACT INFORMATION

Address1 :	90 04 SIVEN ROAD		
Address2 :	Apt 1		
City :	OZONE PARK	State :	NY
Phone :	(347)233-2230	Zip :	11417
Cell :	(646)945-4365	Fax :	-
Email :	-		

eRx Pharmacy

Pharmacy :	Three J's Pharmacy		
Address1 :	9012 Elmhurst Ave		
Address2 :			
City :	Jackson Heights	State :	NY
Phone :	7188982211	Zip :	113727936
Email :		Fax :	7188987613

EMERGENCY CONTACT INFORMATION

Name :	Luz Rosario		
Address1 :	-		
Address2 :	-		
City :	-	State :	-
Phone :	(347)615-6419	Zip :	-
Relation :	Daughter	Cell :	(347)615-6419
Email :	-		

PRIMARY INSURANCE CARRIER

Carrier :	United Healthcare Community Plan Medicaid
Address :	Po Box 5240
City :	KINGSTON
Phone :	(866)362-3368
Plan :	-
ID No :	87726
Copay :	0.00
Subscriber :	Patient
Do Not Balance Bill :	No
EMR Insurance Id :	244
Incentive Type :	-
Program Plan Type :	-
Capitation Agreement with Payer :	No
Note :	-

PRIMARY GUARANTOR

Name :	-
Address :	-
City :	-
Phone :	-
Cell :	-
Relation :	-
D O B :	-
Email :	-
Gender :	-

Queens Medical Office, P.C.

40-46 74th Street 31-41 45th Street 90-33 Elmhurst Avenue 86-15 Forest Parkway 35-24 78th St, B14
ELMHURST NY 11373 ASTORIA NY 11103 JACKSON HEIGHTS NY 11372 WOODHAVEN NY 11421 JACKSON HEIGHTS NY 11372
Tel: (718)457- Tel: (718)274- Tel: 7184577000 Fax: Tel: 7188461414 Fax: Tel: (718)639-
7000 Fax: (718)457- 2600 Fax: 2600 Fax: (718)639-3065
0651

Established Patient Visit

Physician: Alberto Roza, DO

Attending Physician: Gabriel Zayat, MD

Visit Date: March 29th 2016

Patient: Felicia Zapata - [MRN: 1004102]

Date Of Birth: May 1st 1957

Zapata, Felicia is a 58 Year(s) 10 Month(s) 28 Day(s) old Female

Service Location: Queens Medical Office, P.C.-Jackson Heights

ALLERGIES/MEDICATION REACTIONS:

claritin d (DRUG allergy), Reaction - Drug: Known reactions related to the onset of these allergies are dizziness, rapid drop in blood pressure .

Omega-3 Fatty Acids (DRUG allergy), Reaction - pruritus

History collected from: Care Giver

Patient has no known food allergies.

CHIEF COMPLAINT/HISTORY OF PRESENT ILLNESS:

Medication refill

Diabetes follow up

PAST MEDICAL HISTORY:

ICD10 Not Available

(250.02 - DIAB W/O COMP TYPE II UNCONTRL),

ICD10 Not Available

(272.2 - MIXED HYPERLIPIDEMIA)

ICD10 Not Available

(402.10 - BEN HYPERT HRT DIS,W/O HRT FAI)

ICD10 Not Available

(278.01 - MORBID OBESITY)

ICD10 Not Available

(V85.42 - BODY MASS INDEX 45.0-49.9, ADULT)

PAST SURGICAL HISTORY:

Significant For: C-Section in 1989,

FAMILY HISTORY:

Father: Positive for paralysis, deceased at the age of 62.

Mother: Positive for no known medical problems , deceased at the age of 45.

Brother: Positive for hypertension, living

SOCIAL HISTORY/HABITS:

Alcohol: Alcohol Status: Nondrinker.

Caffeine intake: Admits to taking caffeinated beverages. The patient drinks 1 to 2 cups of coffee daily

Illicit drugs: The patient has no history of drug abuse.

Zapata, Felicia 5/1/1957 Female

Visit Date: March 29th 2016

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Smoking: Smoking status: Never smoked.
Smoking Status: Never smoker

OB-GYN HISTORY:

Last Pap smear: 10/03/2014

Last Mammogram: 10/01/2014

Comments: referred gyn & mammogram today - 3/29/2016.

PROBLEM HISTORY:

1. E782 - Mixed hyperlipidemia Chronic
2. I119 - Hypertensive heart disease without heart failure Chronic
3. E1165 - Type 2 diabetes mellitus with hyperglycemia Chronic
4. ICD10 Not Available
(443.9 - PERIPHERAL VASCULAR DISEASE NOS) Acute
5. ICD10 Not Available
(719.49 - JOINT PAIN-MULT JTS) Acute
6. ICD10 Not Available
(268.9 - VITAMIN D DEFICIENCY NOS) Finding
7. ICD10 Not Available
(008.8 - VIRAL ENTERITIS NOS) Acute
8. E6601 - Morbid (severe) obesity due to excess calories Finding
9. ICD10 Not Available
(278.02 - OVERWEIGHT) Finding
10. ICD10 Not Available
(724.2 - LUMBAGO) Acute

MEDICATION HISTORY:

- HYDROCHLOROTHIAZIDE 12.5 mg TABLET GEO, take 1 tablet (12.5 mg) by oral route once daily; 90 Days; Refill - 5; COURSE COMPLETE (12th Feb 2015 - 4th Aug 2016)
- LISINAPRIL 20 mg TABLET GEO, take 1 tablet (20 mg) by oral route once daily; 90 Days; Refill - 5; COURSE COMPLETE (12th Feb 2015 - 4th Aug 2016)
- GLUCOPHAGE 500 mg TABLET GEO, take 1 tablet (500 mg) by oral route 2 times per day with morning and evening meals; 90 Days; Refill - 5; COURSE COMPLETE (12th Feb 2015 - 4th Aug 2016)
- SIMVASTATIN 20 mg TABLET GEO, take 1 tablet (20 mg) by oral route once daily in the evening; 90 Days; Refill - 5; COURSE COMPLETE (12th Feb 2015 - 4th Aug 2016)
- GLUCOSTIX 1 Unit STRIP GEO, to check blood glucose twice daily.; 90 Days; Refill - 3; COURSE COMPLETE (7th Jul 2015 - 30th Jun 2016)
- PROBIOTIC 10 billion cells CAPSULE (HARD, SOFT, ETC.) GEO, take one tablet twice daily.; 90 Days; Refill - 3; COURSE COMPLETE (7th Jul 2015 - 30th Jun 2016)

PHYSICAL EXAMINATION:

Vitals: BP Systolic: 140 mmHg, BP Diastolic: 95 mmHg, Pulse Rate: 104 beats/min, Weight: 157 lbs, Height: 49 in, BMI: 46.0, Triage performed by: : Laura .

General: The patient is well-developed, well-nourished, and in no acute distress.

HEENT: Head is normocephalic and atraumatic. Pupils are equally round and reactive to light and accommodation. Extraocular movements are intact. Sclerae are anicteric. TMs are clear bilaterally. Nasal mucosa and turbinates are normal. Oropharynx is clear without erythema or exudate.

Zapata, Felicia 5/1/1957 Female

Visit Date: March 29th 2016

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Neck: Supple. No JVD. No lymphadenopathy. No thyromegaly.
 Cardiovascular: Regular rate and rhythm without S3, S4. No murmurs, rubs, or gallops.
 Respiratory: Clear to auscultation bilaterally. No wheezes, rales or rhonchi.
 Thorax and Back: Thorax and Back- Symmetrical expansion with respiration. No spinal tenderness, no CVA (costovertebral angle) tenderness.
 Gastrointestinal: The abdomen is soft, nontender, and nondistended with positive bowel sounds. No hepatomegaly, splenomegaly, masses, or bruits.
 Musculoskeletal: Normal strength in all muscle groups. Normal range of motion of all joints. No joint effusions. No muscle masses. No clubbing, cyanosis, or edema.
 Skin: No apparent rashes, lesions, or ulcers. On palpation, there are no evident indurations, masses, or subcutaneous nodules.
 Neurologic: Cranial nerves II through XII are grossly intact. Motor strength is 5/5 and equal in all four extremities. Deep tendon reflexes are +2/4 and equal bilaterally. No focal neurological deficit.

ASSESSMENT/IMPRESSION:

PROBLEM#1: E1165 - Type 2 diabetes mellitus with hyperglycemia
 PROBLEM#2: Z6841 - Body mass index (BMI) 40.0-44.9, adult
 PROBLEM#3: Z0000 - Encntr for general adult medical exam w/o abnormal findings
 PROBLEM#4: E782 - Mixed hyperlipidemia
 PROBLEM#5: E6601 - Morbid (severe) obesity due to excess calories
 PROBLEM#6: I119 - Hypertensive heart disease without heart failure

ORDERS/LABS:

1. Rad: RADIOLOGY-Mammogram, Both Breasts, SCREENING, 77057 - MAMMOGRAM, SCREENING
 2. Gen: EKG, 93000 - ELECTROCARDIOGRAM, COMPLETE

ELECTRONIC LAB:

1. Vendor: Bioreference Physician: Gabriel Zayat
 0053-9 - CBC w/DIFF, PLATELET CT.
 Accession Number: Y500012990 OrderDateTime: 3/29/2016 2:21:49 PM
 Printed: No Viewed: No

 2. Vendor: Bioreference Physician: Gabriel Zayat
 3427-2 - COMPREHENSIVE METABOLIC
 Accession Number: Y500012990 OrderDateTime: 3/29/2016 2:21:49 PM
 Printed: No Viewed: No

 3. Vendor: Bioreference Physician: Gabriel Zayat
 0102-4 - HEMOGLOBIN A1c (glycohgb)
 Accession Number: Y500012990 OrderDateTime: 3/29/2016 2:21:49 PM
 Printed: No Viewed: No

 4. Vendor: Bioreference Physician: Gabriel Zayat
 0009-1 - LIPID SCREEN (CORONARY RISK I)
 Accession Number: Y500012990 OrderDateTime: 3/29/2016 2:21:50 PM
 Printed: No Viewed: No

Zapata, Felicia 5/1/1957 Female

Visit Date: March 29th 2016

5. Vendor: Bioreference Physician: Gabriel Zayat
0228-7 - MICROALBUMIN/CREATININE,RAND
Accession Number: Y500012990 OrderDateTime: 3/29/2016 2:21:50 PM
Printed: No Viewed: No

6. Vendor: Bioreference Physician: Gabriel Zayat
0159-4 - URINALYSIS, ROUTINE
Accession Number: Y500012990 OrderDateTime: 3/29/2016 2:21:50 PM
Printed: No Viewed: No

7. Vendor: Bioreference Physician: Gabriel Zayat
0153-7 - TSH Thyroid Stimulating Hormone
Accession Number: Y500012990 OrderDateTime: 3/29/2016 2:21:50 PM
Printed: No Viewed: No

8. Vendor: Bioreference Physician: Gabriel Zayat
0206-5 - VITAMIN D, 25-HYDROXY, SERUM
Accession Number: Y500012990 OrderDateTime: 3/29/2016 2:21:50 PM
Printed: No Viewed: No

PROCEDURES/CPT:

1. 3017F - COLORECTAL CA SCREEN DOC REV, Colorectal cancer screening results are documented and reviewed, done 10/2014.
2. 93000 - EKG
3. 3080F - DIAST BP >= 90 MM HG
4. 1159F - MEDICATION LIST DOCUMENTED
5. 3077F - SYST BP >= 140 MM HG6 IT
6. 1160F - REVIEW ALL MEDICATIONS
7. 4010F - ACE/ARB PRESCRIPTION
8. 99213 - OFFICE VISIT, EST PAT EXTENDED
9. 99396 - PREV VISIT, EST, AGE 40-64
10. -

ELECTRONIC Rx:

1. GLUCOPHAGE TABLET 500 mg (take 1 tablet (500 mg) 2 times per day with morning and evening meals)
Qty: 180 Refills: 5
2. LISINOPRIL TABLET 20 mg (take 1 tablet (20 mg) once daily)
Qty: 90 Refills: 5
3. SIMVASTATIN TABLET 20 mg (take 1 tablet (20 mg) once daily in the evening)
Qty: 90 Refills: 5
4. AMARYL TABLET 2 mg (take 1 tablet (2 mg) once daily)
Qty: 90 Refills: 3
5. NAPROSYN TABLET 375 mg (take 1 tablet (375 mg) 2 times per day with food)
Qty: 60 Refills: 3
6. HYDROCHLOROTHIAZIDE TABLET 12.5 mg (take 1 tablet (12.5 mg) once daily)
Qty: 90 Refills: 5

Zapata, Felicia 5/1/1957 Female

Visit Date: March 29th 2016

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PLAN:

Risks and benefits of treatment and alternative therapies were reviewed with patient. Follow-up recommendations given.

Patient Referral:

Need is:

Referral To: Gynecology

For/Reason: pap smear

Need is:

Referral To: Ophthalmology

For/Reason: annual vision visit

Alberto Rozo, DO #1295796464

Electronically signed.

THIS DOCUMENT HAS BEEN ELECTRONICALLY SIGNED
Signed By: Alberto Rozo, DO on 6th Apr, 2016

QUEENS MEDICAL OFFICE, PC
E/M VISIT ENCOUNTER FORM

HPI		
Location, quality, severity, duration, timing, context, modifying factors, associated signs and symptoms.		
ROS	WNL	See note
Const	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Eyes	<input checked="" type="checkbox"/>	<input type="checkbox"/>
ENT/mouth	<input checked="" type="checkbox"/>	<input type="checkbox"/>
CV	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Resp	<input checked="" type="checkbox"/>	<input type="checkbox"/>
GI	<input checked="" type="checkbox"/>	<input type="checkbox"/>
GU	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Musc	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Skin/breasts	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Neuro	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Psych	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Endo	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hem/lymph	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Allergy/immun	<input checked="" type="checkbox"/>	<input type="checkbox"/>
No noteworthy changes since last visit. See note dated: 1/1		
PFSH	No Chng	See note
Past	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Family	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Social	<input checked="" type="checkbox"/>	<input type="checkbox"/>
No noteworthy changes since last visit. See note dated: 1/1		
Exam	WNL	See note
Const	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Eyes	<input checked="" type="checkbox"/>	<input type="checkbox"/>
ENT/mouth	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Neck	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Resp	<input checked="" type="checkbox"/>	<input type="checkbox"/>
CV	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Chest (breasts)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
GI (abdomen)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lymph	<input checked="" type="checkbox"/>	<input type="checkbox"/>
GU	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Musc	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Skin	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Neuro	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Psych	<input checked="" type="checkbox"/>	<input type="checkbox"/>
No v: no review/exam		

GABRIEL ZAYAT, M.D.

Date: 3/29/2016

Patient Name: Zapata, Felicia

DOB: 5/1/1957

H: 49 W: 157 T: P: 104 BP: 140/95 R:

BMI: 46.0

cc: Medication Refill / Diabetes follow-up

HPI:

Overweight
↑ Chol.
↑ BP

Allergies:

ABNORMAL ROS:

ABNORMAL PHYSICAL EXAM FINDINGS:

Hypertension

ASSESSMENT AND PLAN

1. NIDDM
2. Hypertension
3. Hyperlipidemia
4. Overweight

MEDICATIONS: See BHI for Complete List

Medication list reviewed/documentated

1. wants same Med.

- 2.
- 3.
- 5.
- 6.

- ☐ New Pt 99203 ☒ Estab Pt 99214
- ☐ Preventive Visit
- ☐ New ☐ Estab Age: _____

- ☐ EKG ☐ PFT ☐ Complete PFT
- ☐ Aorta Scan ☐ ABI ☐ Hearing
- ☐ Other: _____

LABS: ☒ CBC ☒ CMP ☒ TFT's ☒ LFT's ☒ UA ☐ Other: _____

ORDERS: X-ray of _____ Sonogram of _____

CT Scan of _____ MRI of _____

REFERRALS TO: ☐ Cardio ☐ GI ☐ URO ☐ Neuro ☐ GYN ☐ OPHTHAL

☐ Neuro ☐ Other: _____

☐ Medication risk, benefits, costs and alternatives were discussed with patient.

☐ Advance care planning was discussed with the patient.

F/U: _____ days _____ weeks _____ months _____ other: _____

Physician Signature: _____

Date: 3/29/16

Queens Medical Office, P.C.

40-46 74th Street 31-41 45th Street 90-33 Elmhurst Avenue 86-15 Forest Parkway 35-24 78th St, B14
ELMHURST NY 11373 ASTORIA NY 11103 JACKSON HEIGHTS NY 11372 WOODHAVEN NY 11421 JACKSON HEIGHTS NY 11372
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7000 Fax: (718)457- 2600 Fax: 2600 Fax: (718)639-3065
0651

Follow-up Visit

Physician: Alberto Roza, DO
Attending Physician: Gabriel Zayat, MD
Visit Date: April 14th 2016

Patient: Felicia Zapata - [MRN: 1004102]
Date Of Birth: May 1st 1957

Zapata, Felicia is a 58 Year(s) 11 Month(s) 13 Day(s) old Female
Service Location: Queens Medical Office, P.C.-Jackson Heights

ALLERGIES/MEDICATION REACTIONS:

claritin d (DRUG allergy), Reaction - Drug: Known reactions related to the onset of these allergies are dizziness, rapid drop in blood pressure .

Omega-3 Fatty Acids (DRUG allergy), Reaction - pruritus

History collected from: Care Giver

Patient has no known food allergies.

CHIEF COMPLAINT/HISTORY OF PRESENT ILLNESS:

lab & mammogram review

PAST MEDICAL HISTORY:

ICD10 Not Available

(250.02 - DIAB W/O COMP TYPE II UNCONTRL),

ICD10 Not Available

(272.2 - MIXED HYPERLIPIDEMIA)

ICD10 Not Available

(402.10 - BEN HYPERT HRT DIS,W/O HRT FAI)

ICD10 Not Available

(278.01 - MORBID OBESITY)

ICD10 Not Available

(V85.42 - BODY MASS INDEX 45.0-49.9, ADULT)

PAST SURGICAL HISTORY:

Significant For: C-Section in 1989,

FAMILY HISTORY:

Father: Positive for paralysis, deceased at the age of 62.

Mother: Positive for no known medical problems , deceased at the age of 45.

Brother: Positive for hypertension, living

SOCIAL HISTORY/HABITS:

Alcohol: Alcohol Status: Nondrinker.

Caffeine intake: Admits to taking caffeinated beverages. The patient drinks 1 to 2 cups of coffee daily

Illicit drugs: The patient has no history of drug abuse.

Smoking: Smoking status: Never smoked.

Zapata, Felicia 5/1/1957 Female

Visit Date: April 14th 2016

Page 1 of 4

Smoking Status: Never smoker

OB-GYN HISTORY:

Last Pap smear: 10/03/2014

Last Mammogram: 10/01/2014

Comments: referred gyn & mammogram today - 3/29/2016.

PROBLEM HISTORY:

1. E782 - Mixed hyperlipidemia Chronic
2. I119 - Hypertensive heart disease without heart failure Chronic
3. E1165 - Type 2 diabetes mellitus with hyperglycemia Chronic
4. ICD10 Not Available
(443.9 - PERIPHERAL VASCULAR DISEASE NOS) Acute
5. ICD10 Not Available
(719.49 - JOINT PAIN-MULT JTS) Acute
6. ICD10 Not Available
(268.9 - VITAMIN D DEFICIENCY NOS) Finding
7. ICD10 Not Available
(008.8 - VIRAL ENTERITIS NOS) Acute
8. E6601 - Morbid (severe) obesity due to excess calories Finding
9. ICD10 Not Available
(278.02 - OVERWEIGHT) Finding
10. ICD10 Not Available
(724.2 - LUMBAGO) Acute
11. Z6841 - Body mass index (BMI) 40.0-44.9, adult Finding
12. Z0000 - Encntr for general adult medical exam w/o abnormal findings

MEDICATION HISTORY:

- HYDROCHLOROTHIAZIDE 12.5 mg TABLET GEQ, take 1 tablet (12.5 mg) by oral route once daily; 90 Days; Refill - 5; COURSE COMPLETE (12th Feb 2015 - 4th Aug 2016)
- LISINAPRIL 20 mg TABLET GEQ, take 1 tablet (20 mg) by oral route once daily; 90 Days; Refill - 5; COURSE COMPLETE (12th Feb 2015 - 4th Aug 2016)
- GLUCOPHAGE 500 mg TABLET GEQ, take 1 tablet (500 mg) by oral route 2 times per day with morning and evening meals; 90 Days; Refill - 5; COURSE COMPLETE (12th Feb 2015 - 4th Aug 2016)
- SIMVASTATIN 20 mg TABLET GEQ, take 1 tablet (20 mg) by oral route once daily in the evening; 90 Days; Refill - 5; COURSE COMPLETE (12th Feb 2015 - 4th Aug 2016)
- GLUCOSTIX 1 Unit STRIP GEQ, to check blood glucose twice daily.; 90 Days; Refill - 3; COURSE COMPLETE (7th Jul 2015 - 30th Jun 2016)
- PROBIOTIC 10 billion cells CAPSULE (HARD, SOFT, ETC.) GEQ, take one tablet twice daily.; 90 Days; Refill - 3; COURSE COMPLETE (7th Jul 2015 - 30th Jun 2016)
- HYDROCHLOROTHIAZIDE TABLET 12.5 mg GEQ, take 1 tablet (12.5 mg) once daily; 90 Days; Refill - 5; COURSE COMPLETE (29th Mar 2016 - 26th Jun 2016)
- SIMVASTATIN TABLET 20 mg GEQ, take 1 tablet (20 mg) once daily in the evening; 90 Days; Refill - 5; COURSE COMPLETE (29th Mar 2016 - 26th Jun 2016)
- LISINAPRIL TABLET 20 mg GEQ, take 1 tablet (20 mg) once daily; 90 Days; Refill - 5; COURSE COMPLETE (29th Mar 2016 - 26th Jun 2016)
- GLUCOPHAGE TABLET 500 mg GEQ, take 1 tablet (500 mg) 2 times per day with morning and evening meals; 90

Zapata, Felicia 5/1/1957 Female

Visit Date: April 14th 2016

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Days; Refill - 5; COURSE COMPLETE (29th Mar 2016 - 26th Jun 2016)

* NAPROSYN TABLET 375 mg GEQ, take 1 tablet (375 mg) 2 times per day with food; 90 Days; Refill - 3; COURSE COMPLETE (29th Mar 2016 - 27th Apr 2016)

* ANARYL TABLET 2 mg GEQ, take 1 tablet (2 mg) once daily; 90 Days; Refill - 3; COURSE COMPLETE (29th Mar 2016 - 27th Apr 2016)

PHYSICAL EXAMINATION:

Vitals: BP Systolic: 122 mmHg, BP Diastolic: 82 mmHg, Pulse Rate: 101 beats/min, Weight: 153 lbs, Height: 49 in, BMI: 44.8, Triage performed by: : Laura .

General: The patient is well-developed, well-nourished, and in no acute distress.

HEENT: Head is normocephalic and atraumatic. Pupils are equally round and reactive to light and accommodation. Extraocular movements are intact. Sclerae are anicteric. TMs are clear bilaterally. Nasal mucosa and turbinates are normal. Oropharynx is clear without erythema or exudate.

Neck: Supple. No JVD. No lymphadenopathy. No thyromegaly.

Cardiovascular: Regular rate and rhythm without S3, S4. No murmurs, rubs, or gallops.

Respiratory: Clear to auscultation bilaterally. No wheezes, rales or rhonchi.

Gastrointestinal: The abdomen is soft, nontender, and nondistended with positive bowel sounds. No hepatomegaly, splenomegaly, masses, or bruits.

Musculoskeletal: Normal strength in all muscle groups. Normal range of motion of all joints. No joint effusions. No muscle masses. No clubbing, cyanosis, or edema. Tenderness both knees

Neurologic: Cranial nerves II through XII are grossly intact. Motor strength is 5/5 and equal in all four extremities. Deep tendon reflexes are +2/4 and equal bilaterally. No focal neurological deficit.

ASSESSMENT/IMPRESSION:

PROBLEM#1: M150 - Primary generalized (osteo)arthritis

PROBLEM#2: E1165 - Type 2 diabetes mellitus with hyperglycemia

PROBLEM#3: I119 - Hypertensive heart disease without heart failure

PROBLEM#4: E782 - Mixed hyperlipidemia

PROCEDURES/CPT:

- 3045F - HG A1C LEVEL 7.0-9.0%
- 3048F - LDL-C <100 MG/DL
- 3014F - SCREEN MAMMO DOC REV, Screening Mammography results documented and reviewed. done 4/2016.
- 3061F - NEG MICROALBUMINURIA REV
- 3074F - SYST BP LT 130 MM HG
- 3079F - DIAST BP 80-89 MM HG
- 99213 - OFFICE VISIT, EST PAT EXTENDED

ELECTRONIC Rx:

- MELOXICAM 15 mg TABLET (take 1 tablet (15 mg) once daily only when necessary for pain)
Qty: 30 Refills: 3

PLAN:

Risks and benefits of treatment and alternative therapies were reviewed with patient. Follow-up recommendations given.

Follow-up Visit: after 4 months

Zapata, Felicia 5/1/1957 Female

Visit Date: April 14th 2016

Page 3 of 4

Alberto Rozo, DO #1295796464
Electronically signed.

THIS DOCUMENT HAS BEEN ELECTRONICALLY SIGNED
Signed By: Alberto Rozo, DO on 20th Apr, 2016

Zapata, Felicia 5/1/1957 Female

Visit Date: April 14th 2016

Page 4 of 4

E/M VISIT ENCOUNTER FORM

HPI		
Location, quality, severity, duration, timing, context, modifying factors, associated signs and symptoms.		
ROS	WNL	See note
Const	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Eyes	<input checked="" type="checkbox"/>	<input type="checkbox"/>
ENT/mouth	<input checked="" type="checkbox"/>	<input type="checkbox"/>
CV	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Resp	<input checked="" type="checkbox"/>	<input type="checkbox"/>
GI	<input checked="" type="checkbox"/>	<input type="checkbox"/>
GU	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Musc	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Skin/breasts	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Neuro	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Psych	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Endo	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hem/lymph	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Allergy/immun	<input checked="" type="checkbox"/>	<input type="checkbox"/>
No noteworthy changes since last visit. See note dated: 1/1		
PFSH	No Chng	See note
Past	<input checked="" type="checkbox"/>	
Family	<input checked="" type="checkbox"/>	
Social	<input checked="" type="checkbox"/>	
No noteworthy changes since last visit. See note dated: 1/1		
Exam	WNL	See note
Const		<input checked="" type="checkbox"/>
Eyes	<input checked="" type="checkbox"/>	
ENT/mouth	<input checked="" type="checkbox"/>	
Neck	<input checked="" type="checkbox"/>	
Resp	<input checked="" type="checkbox"/>	
CV	<input checked="" type="checkbox"/>	
Chest (breasts)	<input checked="" type="checkbox"/>	
GI (abdomen)	<input checked="" type="checkbox"/>	
Lymph	<input checked="" type="checkbox"/>	
GU	<input checked="" type="checkbox"/>	
Musc		<input checked="" type="checkbox"/>
Skin	<input checked="" type="checkbox"/>	
Neuro	<input checked="" type="checkbox"/>	
Psych	<input checked="" type="checkbox"/>	
No ✓: no review/exam		

Date: 4/14/2016
 Patient Name: Zapata, Felicia DOB: 5/1/1957
 H: 49 W: 153 T: P: 101 BP: 122/82 R: BMT: 44.8

CC: Lab Review / Mammogram review
 HPI: Doc consult with pt.
 Vit D3 213 pl 145

Allergies:

ABNORMAL ROS:

ABNORMAL PHYSICAL EXAM FINDINGS:

tenderness both knees

ASSESSMENT AND PLAN

- OVERLY
- D.A.
- RIDDIM
-

MEDICATIONS: See EHI for Complete List

Medication list reviewed/document

- Cont. 2nd Med.
-
-
-
-
-

☐ New Pt 99203 ☒ Estab Pt 99213

☐ EKG ☐ PFT ☐ Complete PFT

☐ Preventive Visit

☐ Aorta Scan ☐ ABI ☐ Hearing

☐ New ☐ Estab Age: _____

☐ Other: _____

LABS: CBC CMP TFP's LFT's UA Other: _____

ORDERS: X-ray of _____, Sonogram of _____
 CT Scan of _____ MRI of _____

REFERRALS TO: Cardio GI URO Neuro GYN OPHTHAL
 Neuro Other: _____

☐ Medication risk, benefits, costs and alternatives were discussed with patient.

☐ Advance care planning was discussed with the patient.

F/U: _____ days _____ weeks _____ months other: _____

Physician Signature: _____

Date: 4/14/16

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ELMHURST NY 11373 ASTORIA NY 11103 JACKSON HEIGHTS NY 11372 WOODHAVEN NY 11421 JACKSON HEIGHTS NY 11372
Tel: (718)457- Tel: (718)274- Tel: 7184577000 Fax: Tel: 7188461414 Fax: Tel: (718)639-
7000 Fax: (718)457- 2600 Fax: 2600 Fax: (718)639-3065
0651

Established Patient Visit

Physician: Alberto Roza, DO

Attending Physician: Gabriel Zayat, MD

Visit Date: May 27th 2016

Patient: Felicia Zapata - [MRN: 1004102]

Date Of Birth: May 1st 1957

Zapata, Felicia is a 59 Year(s) 26 Day(s) old Female

Service Location: Queens Medical Office, P.C.-Jackson Heights

ALLERGIES/MEDICATION REACTIONS:

claritin d (DRUG allergy), Reaction - Drug: Known reactions related to the onset of these allergies are dizziness, rapid drop in blood pressure .

Omega-3 Fatty Acids (DRUG allergy), Reaction - pruritus

History collected from: Care Giver

Patient has no known food allergies.

CHIEF COMPLAINT/HISTORY OF PRESENT ILLNESS:

neck pain right side

headaches

blisters inside her mouth

PAST MEDICAL HISTORY:

ICD10 Not Available

(272.2 - MIXED HYPERLIPIDEMIA),

K120 - Recurrent oral aphthae

E1165 - Type 2 diabetes mellitus with hyperglycemia

E6601 - Morbid (severe) obesity due to excess calories

Z6842 - Body mass index (BMI) 45.0-49.9, adult

I119 - Hypertensive heart disease without heart failure

E784 - Other hyperlipidemia

PAST SURGICAL HISTORY:

Significant For: C-Section in 1989,

FAMILY HISTORY:

Father: Positive for paralysis, deceased at the age of 62.

Mother: Positive for no known medical problems , deceased at the age of 45.

Brother: Positive for hypertension, living

SOCIAL HISTORY/HABITS:

Alcohol: Alcohol Status: Nondrinker.

Caffeine intake: Admits to taking caffeinated beverages. The patient drinks 1 to 2 cups of coffee daily

Illicit drugs: The patient has no history of drug abuse.

Smoking: Smoking status: Never smoked.

Zapata, Felicia 5/1/1957 Female

Visit Date: May 27th 2016

Page 1 of 4

Smoking Status: Never smoker

OB-GYN HISTORY:

Last Pap smear: 10/03/2014

Last Mammogram: 10/01/2014

Comments: referred gyn & mammogram today - 3/29/2016.

PROBLEM HISTORY:

1. E782 - Mixed hyperlipidemia Chronic
2. I119 - Hypertensive heart disease without heart failure Chronic
3. E1165 - Type 2 diabetes mellitus with hyperglycemia Chronic
4. ICD10 Not Available
(443.9 - PERIPHERAL VASCULAR DISEASE NOS) Acute
5. ICD10 Not Available
(268.9 - VITAMIN D DEFICIENCY NOS) Finding
6. ICD10 Not Available
(008.8 - VIRAL ENTERITIS NOS) Acute
7. E6601 - Morbid (severe) obesity due to excess calories Finding
8. ICD10 Not Available
(278.02 - OVERWEIGHT) Finding
9. ICD10 Not Available
(724.2 - LUMBAGO) Acute
10. Z6841 - Body mass index (BMI) 40.0-44.9, adult Finding
11. Z0000 - Encntr for general adult medical exam w/o abnormal findings
12. M150 - Primary generalized (osteo)arthritis
13. K120 - Recurrent oral aphthae
14. Z6842 - Body mass index (BMI) 45.0-49.9, adult
15. E784 - Other hyperlipidemia

MEDICATION HISTORY:

- HYDROCHLOROTHIAZIDE 12.5 mg TABLET GEQ, take 1 tablet (12.5 mg) by oral route once daily; 90 Days; Refill - 5; COURSE COMPLETE (12th Feb 2015 - 4th Aug 2016)
- LISINAPRIL 20 mg TABLET GEQ, take 1 tablet (20 mg) by oral route once daily; 90 Days; Refill - 5; COURSE COMPLETE (12th Feb 2015 - 4th Aug 2016)
- GLUCOPHAGE 500 mg TABLET GEQ, take 1 tablet (500 mg) by oral route 2 times per day with morning and evening meals; 90 Days; Refill - 5; COURSE COMPLETE (12th Feb 2015 - 4th Aug 2016)
- SIMVASTATIN 20 mg TABLET GEQ, take 1 tablet (20 mg) by oral route once daily in the evening; 90 Days; Refill - 5; COURSE COMPLETE (12th Feb 2015 - 4th Aug 2016)
- GLUCOSTIX 1 Unit STRIP GEQ, to check blood glucose twice daily.; 90 Days; Refill - 3; COURSE COMPLETE (7th Jul 2015 - 30th Jun 2016)
- PROBIOTIC 10 billion cells CAPSULE (HARD, SOFT, ETC.) GEQ, take one tablet twice daily.; 90 Days; Refill - 3; COURSE COMPLETE (7th Jul 2015 - 30th Jun 2016)
- HYDROCHLOROTHIAZIDE TABLET 12.5 mg GEQ, take 1 tablet (12.5 mg) once daily; 90 Days; Refill - 5; COURSE COMPLETE (29th Mar 2016 - 26th Jun 2016)
- SIMVASTATIN TABLET 20 mg GEQ, take 1 tablet (20 mg) once daily in the evening; 90 Days; Refill - 5; COURSE COMPLETE (29th Mar 2016 - 26th Jun 2016)

Zapata, Felicia 5/1/1957 Female

Visit Date: May 27th 2016

Page 2 of 4

• LISINAPRIL TABLET 20 mg GEQ, take 1 tablet (20 mg) once daily; 90 Days; Refill - 5; COURSE COMPLETE (29th Mar 2016 - 26th Jun 2016)

• GLUCOPHAGE TABLET 500 mg GEQ, take 1 tablet (500 mg) 2 times per day with morning and evening meals; 90 Days; Refill - 5; COURSE COMPLETE (29th Mar 2016 - 26th Jun 2016)

PHYSICAL EXAMINATION:

Vitals: BP Systolic: 135 mmHg, BP Diastolic: 79 mmHg, Pulse Rate: 102 beats/min, Respiratory Rate: 18 bpm, Body Temperature: 98.2 °F, Weight: 154 lbs, Height: 49 in, BMI: 45.1, Triage performed by: : Yanirap .

General: The patient is well-developed, well-nourished, and in no acute distress.

HEENT: Head is normocephalic and atraumatic. Pupils are equally round and reactive to light and accommodation. Extraocular movements are intact. Sclerae are anicteric. TMs are clear bilaterally. Nasal mucosa and turbinates are normal. Oropharynx is clear without erythema or exudate.

Neck: Supple. No JVD. No lymphadenopathy. No thyromegaly.

Cardiovascular: Regular rate and rhythm without S3, S4. No murmurs, rubs, or gallops.

Respiratory: Clear to auscultation bilaterally. No wheezes, rales or rhonchi.

Thorax and Back: Thorax and Back- Symmetrical expansion with respiration. No spinal tenderness, no CVA (costovertebral angle) tenderness.

Gastrointestinal: The abdomen is soft, nontender, and nondistended with positive bowel sounds. No hepatomegaly, splenomegaly, masses, or bruits.

Musculoskeletal: Normal strength in all muscle groups. Normal range of motion of all joints. No joint effusions. No muscle masses. No clubbing, cyanosis, or edema.

Skin: No apparent rashes, lesions, or ulcers. On palpation, there are no evident indurations, masses, or subcutaneous nodules.

Neurologic: Cranial nerves II through XII are grossly intact. Motor strength is 5/5 and equal in all four extremities. Deep tendon reflexes are +2/4 and equal bilaterally. No focal neurological deficit.

ASSESSMENT/IMPRESSION:

PROBLEM#1: K120 - Recurrent oral aphthae

PROBLEM#2: E1165 - Type 2 diabetes mellitus with hyperglycemia

PROCEDURES/CPT:

1. 99213 - OFFICE VISIT, EST PAT EXTENDED

ELECTRONIC RX:

1. CVS PROBIOTIC 20 BIL CELL CAPS (take one tablet twice daily.)

Qty: 180 Refills: 3

2. CLARITIN 10 MG TABLET (take 1 tablet (10 mg) once daily)

Qty: 30 Refills: 3

3. ZITHROMAX 250 MG TABLET (take 2 tablets (500 mg) once daily for 1 day then 1 tablet (250 mg) once daily for 4 days)

Qty: 6

4. TRIAMCINOLONE 0.1% PASTE (place a small amount to the affected area by mucous membrane route 2-3 times daily after meals)

Qty: 10 Refills: 2

DIAGNOSTIC DATA:

HEALTH MAINTENANCE:

FEMALE PREVENTIVE MAINTENANCE

Last Mammogram: 4/5/16

Zapata, Felicia 5/1/1957 Female

Visit Date: May 27th 2016

Page 3 of 4

Last Breast Ultrasound:
Last Pap:
Last Colonoscopy:11/20/14 pt. has referral
Last Eye Exam:
Last Podiatry visit:

LAB PROCEDURES ORDERED
CBC:3/29/16
CMP:3/29/16
Glycohemoglobin:3/29/16
Lipid Profile:3/29/16
Microalbumin:3/29/16
Hemocult:

VACCINES ADMINISTERED
Hepatitis B:
Herpes Zoster:
HPV:
Influenza:
MMR:
Pneumovax:
Tetanus (Td):

IN-HOUSE PROCEDURES
ABI:5/22/15
Allergy Testing:
Aorta Scan:
Bone Density:6/9/15
Complete PFT:
Echocardiogram:
EKG:4/1/16
Hearing Exam:
Holter Monitoring:
Spirometry:

PLAN:
Risks and benefits of treatment and alternative therapies were reviewed with patient. Follow-up recommendations given.

Follow-up Visit: after 2 weeks

Alberto Rozo, DO #1295796464

Electronically signed.

THIS DOCUMENT HAS BEEN ELECTRONICALLY SIGNED
Signed By: Alberto Rozo, DO on 2nd Jun, 2016

QUEENS MEDICAL OFFICE, PC

E/M VISIT ENCOUNTER FORM

HPI		
Location, quality, severity, duration, timing, context, modifying factors, associated signs and symptoms.		
ROS	WNL	See note
Const	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Eyes	<input checked="" type="checkbox"/>	<input type="checkbox"/>
ENT/mouth	<input type="checkbox"/>	<input checked="" type="checkbox"/>
CV	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Resp	<input checked="" type="checkbox"/>	<input type="checkbox"/>
GI	<input checked="" type="checkbox"/>	<input type="checkbox"/>
GU	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Musc	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Skin/breasts	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Neuro	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Psych	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Endo	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hem/lymph	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Allergy/immun	<input checked="" type="checkbox"/>	<input type="checkbox"/>
No noteworthy changes since last visit. See note dated: 1/1		
PESH	No Chng	See note
Past	<input checked="" type="checkbox"/>	
Family	<input checked="" type="checkbox"/>	
Social	<input checked="" type="checkbox"/>	
No noteworthy changes since last visit. See note dated: 1/1		
Exam	WNL	See note
Const		<input checked="" type="checkbox"/>
Eyes	<input checked="" type="checkbox"/>	
ENT/mouth		<input checked="" type="checkbox"/>
Neck	<input checked="" type="checkbox"/>	
Resp	<input checked="" type="checkbox"/>	
CV	<input checked="" type="checkbox"/>	
Chest (breasts)	<input checked="" type="checkbox"/>	
GI (abdomen)	<input checked="" type="checkbox"/>	
Lymph	<input checked="" type="checkbox"/>	
GU	<input checked="" type="checkbox"/>	
Musc	<input checked="" type="checkbox"/>	
Skin	<input checked="" type="checkbox"/>	
Neuro	<input checked="" type="checkbox"/>	
Psych	<input checked="" type="checkbox"/>	
No ✓: no review/exam		

GABRIEL ZAYAT, M.D.

Date: 5-27-16

Patient Name: Zayata, Felicia

DOB: 5/1/57

H: 49" W: 154 T: 98.2 P: 102

BP: 135/79 R: 18

BMI = 45.1

CC: Suck pain on (RT) side
headaches
blisters inside her mouth

HPI: NIDDM

Allergies:

ABNORMAL ROS:	ABNORMAL PHYSICAL EXAM FINDINGS:
	buccal aphthons over xps

ASSESSMENT AND PLAN

- BUCCAL APHTONS
- MORBID OBESITY
- NIDDM
-

MEDICATIONS: See EHI for Complete List Medication list reviewed/documentated

- PROBiotic cap 1
-
-
-
-
-

<input type="checkbox"/> New Pt 99203 <input checked="" type="checkbox"/> Estab Pt 99213	<input type="checkbox"/> EKG <input type="checkbox"/> PFT <input type="checkbox"/> Complete PFT
<input type="checkbox"/> Preventive Visit	<input type="checkbox"/> Aorta Scan <input type="checkbox"/> ABI <input type="checkbox"/> Hearing
<input type="checkbox"/> New <input type="checkbox"/> Estab Age: _____	<input type="checkbox"/> Other: _____

LABS: CBC CMP TFT's LFT's UA Other: _____

ORDERS: X-ray of _____ Sonogram of _____
CT Scan of _____ MRI of _____

REFERRALS TO: Cardio GI URO Neuro GYN OPHTHAL
Neuro Other: _____

☐ Medication risk, benefits, costs and alternatives were discussed with patient.

☐ Advance care planning was discussed with the patient.

F/U: _____ days 2 weeks _____ months _____ other: _____

Physician Signature: [Signature] Date: 5/27/16

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7000 Fax: (718)457- 2600 Fax: 2600 Fax: (718)639-3065
0651

Established Patient Visit

Physician: Alberto Roza, DO

Attending Physician: Gabriel Zayat, MD

Visit Date: October 15th 2016

Patient: Felicia Zapata - [MRN: 1004102]

Date Of Birth: May 1st 1957

Zapata, Felicia is a 59 Year(s) 5 Month(s) 14 Day(s) old Female

Service Location: Queens Medical Office, P.C.-Jackson Heights

ALLERGIES/MEDICATION REACTIONS:

claritin d (DRUG allergy), Reaction - Drug: Known reactions related to the onset of these allergies are dizziness, rapid drop in blood pressure .

Omega-3 Fatty Acids (DRUG allergy), Reaction - pruritus

History collected from: Care Giver

Patient has no known food allergies.

CHIEF COMPLAINT/HISTORY OF PRESENT ILLNESS:

Follow up Cholesterol, Diabetes and Hypertension

Patient c/o recurrent dizziness

PAST MEDICAL HISTORY:

K120 - Recurrent oral aphthae,

E1165 - Type 2 diabetes mellitus with hyperglycemia

E6601 - Morbid (severe) obesity due to excess calories

Z6842 - Body mass index (BMI) 45.0-49.9, adult

I119 - Hypertensive heart disease without heart failure

E784 - Other hyperlipidemia

R42 - Dizziness and giddiness

PAST SURGICAL HISTORY:

Significant For: C-Section in 1989,

FAMILY HISTORY:

Father: Positive for paralysis, deceased at the age of 62.

Mother: Positive for no known medical problems , deceased at the age of 45.

Brother: Positive for hypertension, living

SOCIAL HISTORY/HABITS:

Alcohol: Alcohol Status: Nondrinker.

Caffeine intake: Admits to taking caffeinated beverages. The patient drinks 1 to 2 cups of coffee daily

Illicit drugs: The patient has no history of drug abuse.

Smoking: Smoking status: Never smoked.

Smoking Status: Never smoker

Zapata, Felicia 5/1/1957 Female

Visit Date: October 15th 2016

Page 1 of 5

OB-GYN HISTORY:

Last Pap smear: 10/03/2014

Last Mammogram: 10/01/2014

Comments: referred gyn & mammogram today - 3/29/2016.

PROBLEM HISTORY:

1. E782 - Mixed hyperlipidemia Chronic
2. I119 - Hypertensive heart disease without heart failure Chronic
3. E1165 - Type 2 diabetes mellitus with hyperglycemia Chronic
4. ICD10 Not Available
(443.9 - PERIPHERAL VASCULAR DISEASE NOS) Acute
5. E559 - Vitamin D deficiency, unspecified Finding
6. ICD10 Not Available
(008.8 - VIRAL ENTERITIS NOS) Acute
7. E6601 - Morbid (severe) obesity due to excess calories Finding
8. E663 - Overweight Finding
9. ICD10 Not Available
(724.2 - LUMBAGO) Acute
10. Z6841 - Body mass index (BMI) 40.0-44.9, adult Finding
11. Z0000 - Encntr for general adult medical exam w/o abnormal findings
12. M150 - Primary generalized (osteo)arthritis
13. K120 - Recurrent oral aphthae
14. Z6842 - Body mass index (BMI) 45.0-49.9, adult
15. E784 - Other hyperlipidemia
16. K120 - Recurrent oral aphthae
17. R42 - Dizziness and giddiness

PHYSICAL EXAMINATION:

Vitals: BP Systolic: 132 mmHg, BP Diastolic: 79 mmHg, Pulse Rate: 83 beats/min, Weight: 156 lbs, Height: 49 in, BMI: 45.7, Triage performed by: : Yadira .

General: The patient is well-developed, well-nourished, and in no acute distress.

HEENT: Head is normocephalic and atraumatic. Pupils are equally round and reactive to light and accommodation. Extraocular movements are intact. Sclerae are anicteric. TMs are clear bilaterally. Nasal mucosa and turbinates are normal. Oropharynx is clear without erythema or exudate.

Neck: Supple. No JVD. No lymphadenopathy. No thyromegaly.

Cardiovascular: Regular rate and rhythm without S3, S4. No murmurs, rubs, or gallops.

Respiratory: Clear to auscultation bilaterally. No wheezes, rales or rhonchi.

Thorax and Back: Thorax and Back- Symmetrical expansion with respiration. No spinal tenderness, no CVA (costovertebral angle) tenderness.

Gastrointestinal: The abdomen is soft, nontender, and nondistended with positive bowel sounds. No hepatomegaly, splenomegaly, masses, or bruits.

Musculoskeletal: Normal strength in all muscle groups. Normal range of motion of all joints. No joint effusions. No muscle masses. No clubbing, cyanosis, or edema.

Skin: No apparent rashes, lesions, or ulcers. On palpation, there are no evident indurations, masses, or subcutaneous nodules.

Neurologic: Cranial nerves II through XII are grossly intact. Motor strength is 5/5 and equal in all four extremities. Deep tendon reflexes are +2/4 and equal bilaterally. No focal neurological deficit.

Zapata, Felicia 5/1/1957 Female

Visit Date: October 15th 2016

Page 2 of 5

ASSESSMENT/IMPRESSION:

PROBLEM#1: R42 - Dizziness and giddiness
PROBLEM#2: Z1389 - Encounter for screening for other disorder
PROBLEM#3: E784 - Other hyperlipidemia
PROBLEM#4: E1165 - Type 2 diabetes mellitus with hyperglycemia

ORDERS/LABS:

1. Gen: ABI, 93923 - EXTREMITY STUDY
Notes: Schedule patient for this test

ELECTRONIC LAB:

1. Vendor: Bioreference Physician: Gabriel Zayat
0053-9 - CBC w/DIFF, PLATELET CT.
Accession Number: Y500017438 OrderDateTime: 10/15/2016 9:43:00 AM
Printed: No Viewed: No

2. Vendor: Bioreference Physician: Gabriel Zayat
3427-2 - COMPREHENSIVE METABOLIC
Accession Number: Y500017438 OrderDateTime: 10/15/2016 9:43:00 AM
Printed: No Viewed: No

3. Vendor: Bioreference Physician: Gabriel Zayat
0102-4 - HEMOGLOBIN A1c (glycohgb)
Accession Number: Y500017438 OrderDateTime: 10/15/2016 9:43:00 AM
Printed: No Viewed: No

4. Vendor: Bioreference Physician: Gabriel Zayat
0009-1 - LIPID SCREEN (CORONARY RISK I)
Accession Number: Y500017438 OrderDateTime: 10/15/2016 9:43:00 AM
Printed: No Viewed: No

5. Vendor: Bioreference Physician: Gabriel Zayat
0228-7 - MICROALBUMIN/CREATININE,RAND
Accession Number: Y500017438 OrderDateTime: 10/15/2016 9:43:00 AM
Printed: No Viewed: No

6. Vendor: Bioreference Physician: Gabriel Zayat
0159-4 - URINALYSIS, ROUTINE
Accession Number: Y500017438 OrderDateTime: 10/15/2016 9:43:00 AM
Printed: No Viewed: No

PROCEDURES/CPT:

1. 36415 - ROUTINE VENIPUNCTURE
2. 99213 - OFFICE VISIT, EST PAT EXTENDED
3. G8510 - Depression Screening NEGATIVE

Zapata, Felicia 5/1/1957 Female

Visit Date: October 15th 2016

Page 3 of 5

ELECTRONIC Rx:

1. HYDROCHLOROTHIAZIDE 12.5 MG TB (take 1 tablet (12.5 mg) by oral route once daily)
Qty: 90 Refills: 5
2. LISINAPRIL 20 MG TABLET (take 1 tablet (20 mg) by oral route once daily)
Qty: 90 Refills: 5
3. GLUCOPHAGE 500 MG TABLET (take 1 tablet (500 mg) by oral route 2 times per day with morning and evening meals)
Qty: 180 Refills: 5
4. SIMVASTATIN 20 MG TABLET (take 1 tablet (20 mg) by oral route once daily in the evening)
Qty: 90 Refills: 5
5. CLARITIN 10 MG TABLET (take 1 tablet (10 mg) once daily)
Qty: 90 Refills: 3
6. AMARYL 2 MG TABLET (take 1 tablet (2 mg) once daily)
Qty: 90 Refills: 3
7. ANTIVERT 12.5 MG TABLET (take one tablet 3 times per day only when needed for dizziness.)
Qty: 40 Refills: 3
8. ASPIR EC 81 MG TABLET (take 1 tablet (81 mg) once daily)
Qty: 90 Refills: 3
9. TRIAMCINOLONE 0.1% PASTE (place a small amount to the affected area by mucous membrane route 2-3 times daily after meals)
Qty: 10 Refills: 2

DIAGNOSTIC DATA:

HEALTH MAINTENANCE:

FEMALE PREVENTIVE MAINTENANCE

Last Mammogram: 4/5/16
Last Breast Ultrasound:
Last Pap: apt 10/22/2016
Last Colonoscopy: 11/20/14
Last Eye Exam: 09/2016 Dr. Jacqueline Dauhja
Last Podiatry visit:

LAB PROCEDURES ORDERED 10/15/2016

CBC: 3/29/16
CMP: 3/29/16
Glycohemoglobin: 3/29/16
Lipid Profile: 3/29/16
Microalbumin: 3/29/16
Hemocult:

VACCINES ADMINISTERED

Hepatitis B:
Herpes Zoster:
HPV:
Influenza: will ask dr
MMR:
Pneumovax:
Tetanus (Td):

IN-HOUSE PROCEDURES

ABI: 5/22/15 referred
Allergy Testing:
Aorta Scan:
Bone Density: 6/9/15
Complete PFT:
Echocardiogram:
EKG: 4/1/16

Zapata, Felicia 5/1/1957 Female

Visit Date: October 15th 2016

Page 4 of 5

Hearing Exam:
Holter Monitoring:
Spirometry:
Depression Screening:10/15/2016 neg

PLAN:

Risks and benefits of treatment and alternative therapies were reviewed with patient. Follow-up recommendations given.

Follow-up Visit: after 2 weeks

ENCOUNTER TOOL:

DEPRESSION SCREENING:

• Over the last 2 weeks, How often have you been bothered by any of the following problems?: -
negative

Nine Symptom Checklist:

• Monitor 1-2 weeks x 8 weeks: -

Alberto Rozo, DO #1295796464

Electronically signed.

THIS DOCUMENT HAS BEEN ELECTRONICALLY SIGNED
Signed By: Alberto Rozo, DO on 20th Oct, 2016

QUEENS MEDICAL OFFICE, PC

E/M VISIT ENCOUNTER FORM

HPI		
Location, quality, severity, duration, timing, context, modifying factors, associated signs and symptoms.		
ROS	WNL	See note
Const	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Eyes	<input checked="" type="checkbox"/>	<input type="checkbox"/>
ENT/mouth	<input checked="" type="checkbox"/>	<input type="checkbox"/>
CV	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Resp	<input checked="" type="checkbox"/>	<input type="checkbox"/>
GI	<input checked="" type="checkbox"/>	<input type="checkbox"/>
GU	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Musc	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Skin/breasts	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Neuro	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Psych	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Endo	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hem/lymph	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Allergy/immun	<input checked="" type="checkbox"/>	<input type="checkbox"/>
No noteworthy changes since last visit. See note dated: 1/1		
PFSH	No Chng	See note
Past	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Family	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Social	<input checked="" type="checkbox"/>	<input type="checkbox"/>
No noteworthy changes since last visit. See note dated: 1/1		
Exam	WNL	See note
Const	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Eyes	<input checked="" type="checkbox"/>	<input type="checkbox"/>
ENT/mouth	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Neck	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Resp	<input checked="" type="checkbox"/>	<input type="checkbox"/>
CV	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Chest (breasts)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
GI (abdomen)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lymph	<input checked="" type="checkbox"/>	<input type="checkbox"/>
GU	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Musc	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Skin	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Neuro	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Psych	<input checked="" type="checkbox"/>	<input type="checkbox"/>
No ✓: no review/exam		

GABRIEL ZAYAT, M.D.

Date: 10/13/16

Patient Name: Zapata, Felicia

DOB: 06/01/1957

H: 49 W: 156 T: P: 100 BP: 129/87 R: BMI: 45.2

CC: Follow up cholesterol, Diabetes & hypertension

HPI: NIDDM
↑ BP ↑ chol.
Recurrent Dizziness

Allergies:

ABNORMAL ROS:

ABNORMAL PHYSICAL EXAM FINDINGS:

ASSESSMENT AND PLAN

- OVERWGT.
- DIZZINESS R42
- NIDDM
- Hyperlipidemia.

MEDICATIONS: See EHI for Complete List

Medication list reviewed/document

- cont. some med
-
-

- ☐ New Pt: 99203 ☒ Estab Pt: 99214
☐ Preventive Visit
☐ New ☐ Estab Age: _____

- ☐ EKG ☐ PFT ☐ Complete PFT
☐ Aorta Scan ☐ ABI ☐ Hearing
☐ Other: _____

LABS: CBC CMP LFT's LFT's UA Other: _____

ORDERS: X-ray of _____ Sonogram of _____
CT Scan of _____ MRI of _____

REFERRALS TO: _____ Cardio _____ GI _____ URO _____ Neuro _____ GYN _____ OPHTHAL
Neuro _____ Other: _____

☐ Medication risk, benefits, costs and alternatives were discussed with patient.

☐ Advance care planning was discussed with the patient.

P/U: _____ days 2 weeks _____ months _____ other: _____

Physician Signature: _____

Date: 10/15/16

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7000 Fax: (718)457- 2600 Fax: 2600 Fax: (718)639-3065
0651

Established Patient Visit

Physician: Alberto Roza DO

Attending Physician: Jarensy Fernandez, PA

Visit Date: December 12th 2016

Patient: Felicia Zapata - [MRN: 1004102]

Date Of Birth: May 1st 1957

Zapata, Felicia is a 59 Year(s) 7 Month(s) 11 Day(s) old Female

Service Location: Queens Medical Office, P.C.-Jackson Heights

ALLERGIES/MEDICATION REACTIONS:

claritin d (DRUG allergy), Reaction - Drug: Known reactions related to the onset of these allergies are dizziness, rapid drop in blood pressure.

Omega-3 Fatty Acids (DRUG allergy), Reaction - pruritus

History collected from: Care Giver

Patient has no known food allergies.

CHIEF COMPLAINT/HISTORY OF PRESENT ILLNESS:

cough: The patient presents to the office complaining of cough since 3 days. The other signs and symptoms accompanying cough are sore throat, phlegm, chest congestion, wheezing.

PAST MEDICAL HISTORY:

K120 - Recurrent oral aphthae,

E1165 - Type 2 diabetes mellitus with hyperglycemia

E6601 - Morbid (severe) obesity due to excess calories

I119 - Hypertensive heart disease without heart failure

E784 - Other hyperlipidemia

R42 - Dizziness and giddiness

PAST SURGICAL HISTORY:

Significant For: C-Section in 1989,

FAMILY HISTORY:

Father: Positive for paralysis, deceased at the age of 62.

Mother: Positive for no known medical problems, deceased at the age of 45.

Brother: Positive for hypertension, living

SOCIAL HISTORY/HABITS:

Alcohol: Alcohol Status: Nondrinker.

Caffeine intake: Admits to taking caffeinated beverages. The patient drinks 1 to 2 cups of coffee daily

Illicit drugs: The patient has no history of drug abuse.

Smoking: Smoking status: Never smoked.

Smoking Status: Never smoker

Zapata, Felicia 5/1/1957 Female

Visit Date: December 12th 2016

Page 1 of 4

OB-GYN HISTORY:

Last Pap smear: 10/03/2014

Last Mammogram: 10/01/2014

Comments: referred gyn & mammogram today - 3/29/2016.

PROBLEM HISTORY:

1. E782 - Mixed hyperlipidemia Chronic
2. I119 - Hypertensive heart disease without heart failure Chronic
3. E1165 - Type 2 diabetes mellitus with hyperglycemia Chronic
4. ICD10 Not Available
(443.9 - PERIPHERAL VASCULAR DISEASE NOS) Acute
5. E559 - Vitamin D deficiency, unspecified Finding
6. ICD10 Not Available
(008.8 - VIRAL ENTERITIS NOS) Acute
7. E6601 - Morbid (severe) obesity due to excess calories Finding
8. E663 - Overweight Finding
9. ICD10 Not Available
(724.2 - LUMBAGO) Acute
10. Z6841 - Body mass index (BMI) 40.0-44.9, adult Finding
11. Z0000 - Encntr for general adult medical exam w/o abnormal findings Finding
12. M150 - Primary generalized (osteo)arthritis
13. K120 - Recurrent oral aphthae
14. Z6842 - Body mass index (BMI) 45.0-49.9, adult Finding
15. E784 - Other hyperlipidemia Chronic
16. K120 - Recurrent oral aphthae
17. Z1389 - Encounter for screening for other disorder Finding
18. R42 - Dizziness and giddiness
19. R42 - Dizziness and giddiness

MEDICATION HISTORY:

- AMARVL 2 mg GEQ, take 1 tablet (2 mg) once daily; 90 Days; Refill - 3; COURSE COMPLETE (15th Oct 2016 - 12th Jan 2017)
- SIMVASTATIN 20 mg GEQ, take 1 tablet (20 mg) by oral route once daily in the evening; 90 Days; Refill - 5; COURSE COMPLETE (15th Oct 2016 - 12th Jan 2017)
- GLUCOPHAGE 500 mg GEQ, take 1 tablet (500 mg) by oral route 2 times per day with morning and evening meals; 90 Days; Refill - 5; COURSE COMPLETE (15th Oct 2016 - 12th Jan 2017)
- LISINAPRIL 20 mg GEQ, take 1 tablet (20 mg) by oral route once daily; 90 Days; Refill - 5; COURSE COMPLETE (15th Oct 2016 - 12th Jan 2017)
- HYDROCHLOROTHIAZIDE 12.5 mg GEQ, take 1 tablet (12.5 mg) by oral route once daily; 90 Days; Refill - 5; COURSE COMPLETE (15th Oct 2016 - 12th Jan 2017)
- ASPIR 81 81 mg TABLET, DELAYED RELEASE (DR/EC) GEQ, take 1 tablet (81 mg) once daily; 90 Days; Refill - 3; COURSE COMPLETE (15th Oct 2016 - 14th Nov 2016)
- ANTIVERT 12.5 mg TABLET GEQ, take one tablet 3 times per day only when needed for dizziness.; 30 Days; Refill - 3; COURSE COMPLETE (15th Oct 2016 - 14th Nov 2016)

REVIEW OF SYSTEMS:

Constitutional: Negative: Fevers, chills, night sweats, weight loss, fatigue, weakness, Other

Zapata, Felicia 5/1/1957 Female

Visit Date: December 12th 2016

Page 2 of 4

Eyes:	Negative: eye pain, eye discharge, eye redness, visual change, Other
ENMT:	Positive: sore throat Negative: hearing loss, hoarseness, epistaxis, sinus symptoms, tinnitus, Other
Neck:	Negative: thyroid enlargement, neck pain
Cardiovascular:	Negative: chest pain, irregular heartbeats, palpitations, edema, PND, orthopnea, claudication, Other
Respiratory:	Positive: wheezing, cough Negative: Shortness of breath, snoring, Other Notes: chest congestion,

PHYSICAL EXAMINATION:

Vitals:	BP Systolic: 127 mmHg, BP Diastolic: 86 mmHg, Pulse Rate: 111 beats/min, Body Temperature: 98.9 °F, Weight: 156 lbs, Height: 49 in, BMI: 45.7 , Triage performed by: Katherine0 .
General:	The patient is well-developed, well-nourished, and in no acute distress.
HEENT:	Head is normocephalic and atraumatic. Pupils are equally round and reactive to light and accommodation. Extraocular movements are intact. Sclerae are anicteric. TMs are clear bilaterally. Nasal mucosa and turbinates are normal. Oropharynx is clear without erythema or exudate.
Neck:	Supple. No JVD. No lymphadenopathy. No thyromegaly.
Cardiovascular:	Regular rate and rhythm without S3, S4. No murmurs, rubs, or gallops.
Respiratory:	Clear to auscultation bilaterally. No wheezes, rales or rhonchi. + chest congestion, cough.

ASSESSMENT/IMPRESSION:

PROBLEM#1: J069 - Acute upper respiratory infection, unspecified
prescribed z pack, Phenergan syrup and prednisone 10 mg

PROBLEM#2: E782 - Mixed hyperlipidemia
HYPERLIPIDEMIA:Advised to continue low cholesterol diet

PROBLEM#3: I119 - Hypertensive heart disease without heart failure
HYPERTENSION:Advised to Continue Low salt diet
HYPERTENSION:Advised to continue present medication(s)

PROBLEM#4: E1165 - Type 2 diabetes mellitus with hyperglycemia
DIABETES:Advised to continue 1800 cal ADA diet
DIABETES:Continue present medications

Reviewed Allergies;

PROCEDURES/CPT:

- 99213 - OFFICE VISIT, EST PAT EXTENDED
- 3015F - CERVICAL CANCER SCREEN DOC REV, done on 10/25/16

ELECTRONIC Rx:

- ZITHROMAX 250 MG TABLET (take 2 tablets (500 mg) by oral route once daily for 1 day then 1 tablet (250 mg) by oral route once daily for 4 days)
Qty: 6
- PROMETHAZINE 6.25 MG/5 ML SYRP (take 20 milliliters (25 mg) by oral route once daily at bedtime as needed)
Qty: 240
- PREDNISONE 10 MG TABLET (1 tab po BID)
Qty: 10

DIAGNOSTIC DATA:

Zapata, Felicia 5/1/1957 Female

Visit Date: December 12th 2016

Page 3 of 4

HEALTH MAINTENANCE:
FEMALE PREVENTIVE MAINTENANCE
Last Mammogram: 4/5/16
Last Breast Ultrasound:
Last Pap: apt 10/22/2016
Last Colonoscopy: 11/20/14
Last Eye Exam: 09/2016 Dr. Jacqueline Dauhja
Last Podiatry visit:

LAB PROCEDURES ORDERED 10/15/2016
CBC: 10/15/2016
CMP: 10/15/2016
Glycohemoglobin: 10/15/2016
Lipid Profile: 10/15/2016
Microalbumin: 10/15/2016
Hemoccult:

VACCINES ADMINISTERED
Hepatitis B:
Herpes Zoster:
HPV:
Influenza: will ask dr
MMR:
Pneumovax:
Tetanus (Td):

IN-HOUSE PROCEDURES
ABI: 5/22/15 referred
Allergy Testing:
Aorta Scan:
Bone Density: 6/9/15
Complete PFT:
Echocardiogram:
EKG: 4/1/16
Hearing Exam:
Holter Monitoring:
Spirometry:
Depression Screening: 10/15/2016 neg

PLAN:
Risks and benefits of treatment and alternative therapies were reviewed with patient. Follow-up recommendations given.
The patient was provided with written educational materials and care plans.

Follow-up Visit: after 1 week

Alberto Roza DO #1295796464

Electronically signed.

THIS DOCUMENT HAS BEEN ELECTRONICALLY SIGNED
Signed By: Alberto Roza DO on 12th Dec, 2016

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7000 Fax: (718)457- 2600 Fax: 2600 Fax: (718)639-3065
0651

Established Patient Visit

Physician: Alberto Roza, DO

Attending Physician: Gabriel Zayat, MD

Visit Date: December 22nd 2016

Patient: Felicia Zapata - [MRN: 1004102]

Date Of Birth: May 1st 1957

Zapata, Felicia is a 59 Year(s) 7 Month(s) 21 Day(s) old Female

Service Location: Queens Medical Office, P.C.-Jackson Heights

ALLERGIES/MEDICATION REACTIONS:

claritin d (DRUG allergy), Reaction - Drug: Known reactions related to the onset of these allergies are dizziness, rapid drop in blood pressure .

Omega-3 Fatty Acids (DRUG allergy), Reaction - pruritus

History collected from: Care Giver

Patient has no known food allergies.

CHIEF COMPLAINT/HISTORY OF PRESENT ILLNESS:

patient continues to complain of cough and congestion

ABI results

PAST MEDICAL HISTORY:

E1165 - Type 2 diabetes mellitus with hyperglycemia,
I119 - Hypertensive heart disease without heart failure
E784 - Other hyperlipidemia

PAST SURGICAL HISTORY:

Significant For: C-Section in 1989,

FAMILY HISTORY:

Father: Positive for paralysis, deceased at the age of 62.

Mother: Positive for no known medical problems , deceased at the age of 45.

Brother: Positive for hypertension, living

SOCIAL HISTORY/HABITS:

Alcohol: Alcohol Status: Nondrinker.

Caffeine intake: Admits to taking caffeinated beverages. The patient drinks 1 to 2 cups of coffee daily

Illicit drugs: The patient has no history of drug abuse.

Smoking: Smoking status: Never smoked.

Smoking Status: Never smoker

OB-GYN HISTORY:

Last Pap smear: 10/03/2014

Zapata, Felicia 5/1/1957 Female

Visit Date: December 22nd 2016

Page 1 of 4

Last Mammogram: 10/01/2014

Comments: referred gyn & mammogram today - 3/29/2016.

PROBLEM HISTORY:

1. E782 - Mixed hyperlipidemia Chronic
2. I119 - Hypertensive heart disease without heart failure Chronic
3. E1165 - Type 2 diabetes mellitus with hyperglycemia Chronic
4. E559 - Vitamin D deficiency, unspecified Finding
5. E6601 - Morbid (severe) obesity due to excess calories Chronic
6. M150 - Primary generalized (osteo)arthritis Condition
7. Z6842 - Body mass index (BMI) 45.0-49.9, adult Finding
8. Z1389 - Encounter for screening for other disorder Finding
9. I739 - Peripheral vascular disease, unspecified Finding

MEDICATION HISTORY:

- AMARYL 2 mg GEQ, take 1 tablet (2 mg) once daily; 90 Days; Refill - 3; COURSE COMPLETE (15th Oct 2016 - 12th Jan 2017)
- SIMVASTATIN 20 mg GEQ, take 1 tablet (20 mg) by oral route once daily in the evening; 90 Days; Refill - 5; COURSE COMPLETE (15th Oct 2016 - 12th Jan 2017)
- GLUCOPHAGE 500 mg GEQ, take 1 tablet (500 mg) by oral route 2 times per day with morning and evening meals; 90 Days; Refill - 5; COURSE COMPLETE (15th Oct 2016 - 12th Jan 2017)
- LISINAPRIL 20 mg GEQ, take 1 tablet (20 mg) by oral route once daily; 90 Days; Refill - 5; COURSE COMPLETE (15th Oct 2016 - 12th Jan 2017)
- HYDROCHLOROTHIAZIDE 12.5 mg GEQ, take 1 tablet (12.5 mg) by oral route once daily; 90 Days; Refill - 5; COURSE COMPLETE (15th Oct 2016 - 12th Jan 2017)
- ASPIR 81 81 mg TABLET, DELAYED RELEASE (DR/EC) GEQ, take 1 tablet (81 mg) once daily; 90 Days; Refill - 3; COURSE COMPLETE (15th Oct 2016 - 14th Nov 2016)
- ANTIVERT 12.5 mg TABLET GEQ, take one tablet 3 times per day only when needed for dizziness.; 30 Days; Refill - 3; COURSE COMPLETE (15th Oct 2016 - 14th Nov 2016)

REVIEW OF SYSTEMS:

ENMT: Positive: sore throat, sinus symptoms
Negative: hearing loss, hoarseness, epistaxis, tinnitus, Other

PHYSICAL EXAMINATION:

Vitals: BP Systolic: 126 mmHg, BP Diastolic: 81 mmHg, Pulse Rate: 93 beats/min, Weight: 156 lbs, Height: 49 in, BMI: 45.7, Triage performed by: : xenia .

General: The patient is well-developed, well-nourished, and in no acute distress.

HEENT: Head is normocephalic and atraumatic. Pupils are equally round and reactive to light and accommodation. Extraocular movements are intact. Sclerae are anicteric. TMs are clear bilaterally. Nasal mucosa and turbinates are normal. Oropharynx is clear without erythema or exudate.

Neck: Supple. No JVD. No lymphadenopathy. No thyromegaly.

Cardiovascular: Regular rate and rhythm without S3, S4. No murmurs, rubs, or gallops.

Respiratory: Clear to auscultation bilaterally. No wheezes, rales or rhonchi.

Thorax and Back: Thorax and Back- Symmetrical expansion with respiration. No spinal tenderness, no CVA (costovertebral angle) tenderness.

Gastrointestinal: The abdomen is soft, nontender, and nondistended with positive bowel sounds. No hepatomegaly, splenomegaly, masses, or bruits.

Zapata, Felicia 5/1/1957 Female

Visit Date: December 22nd 2016

Page 2 of 4

Musculoskeletal:	Normal strength in all muscle groups. Normal range of motion of all joints. No joint effusions. No muscle masses. No clubbing, cyanosis, or edema.
Skin:	No apparent rashes, lesions, or ulcers. On palpation, there are no evident indurations, masses, or subcutaneous nodules.
Neurologic:	Cranial nerves II through XII are grossly intact. Motor strength is 5/5 and equal in all four extremities. Deep tendon reflexes are +2/4 and equal bilaterally. No focal neurological deficit.
 ASSESSMENT/IMPRESSION:	
PROBLEM#1: J069 - Acute upper respiratory infection, unspecified	
PROBLEM#2: E1165 - Type 2 diabetes mellitus with hyperglycemia	
 PROCEDURES/CPT:	
1. 99213 - OFFICE VISIT, EST PAT EXTENDED	
 ELECTRONIC Rx:	
1. MEDROL 4 MG DOSEPAK (use as directed) Qty: 21 Refills: 1	
2. PROMETHAZINE 6.25 MG/5 ML SYRP (take 20 milliliters (25 mg) once daily at bedtime as needed) Qty: 200 Refills: 2	
3. VIT C-ROSE HIPS TR 1,000 MG (take one tablet twice daily) Qty: 60 Refills: 3	
4. ACCU-CHEK AVIVA TEST STRIPS (use twice daily) Qty: 60 Refills: 3	
 DIAGNOSTIC DATA:	
HEALTH MAINTENANCE:	
FEMALE PREVENTIVE MAINTENANCE	
Last Mammogram: 4/5/16	
Last Breast Ultrasound:	
Last Pap: apt 10/22/2016	
Last Colonoscopy: 11/20/14	
Last Eye Exam: 09/2016 Dr. Jacqueline Dauhje	
Last Podiatry visit:	
 LAB PROCEDURES ORDERED 10/15/2016	
CBC: 10/15/2016	
CMP: 10/15/2016	
Glycohemoglobin: 10/15/2016	
Lipid Profile: 10/15/2016	
Microalbumin: 10/15/2016	
Hemocult:	
 VACCINES ADMINISTERED	
Hepatitis B:	
Herpes Zoster:	
HPV:	
Influenza: will ask dr	
MMR:	
Pneumovax:	
Tetanus (Td):	
 IN-HOUSE PROCEDURES	
ABI: 5/22/15 referred	
Allergy Testing:	
Aorta Scan:	
Bone Density: 6/9/15	

Zapata, Felicia 5/1/1957 Female

Visit Date: December 22nd 2016

Page 3 of 4

Complete PFT:
Echocardiogram:
EKG:4/1/16
Hearing Exam:
Holter Monitoring:
Spirometry:
Depression Screening:10/15/2016 neg

PLAN:
ABT results discussed with the patient, wnl.
Reviewed Treatment Care Plan and Treatment Goals. Assessed and addressed potential barriers to meeting treatment goals. Printout of Care plan and progress note was given to patient. Patient acknowledged understanding of prescribed medications and treatment care plan.

Alberto Rozo, DO #1295796464

Electronically signed.

THIS DOCUMENT HAS BEEN ELECTRONICALLY SIGNED
Signed By: Alberto Rozo, DO on 9th Jan, 2017

QUEENS MEDICAL OFFICE, PC

E/M VISIT ENCOUNTER FORM

GABRIEL ZAYAT, M.D.

Date: 12/22/2016

Patient Name: Felicia Zapata

DOB: 05/01/1957

H: 49 W: 156 T: P: 93 BP: 126/81 R: BMI: 45.7

HPI		
Location, quality, severity, duration, timing, context, modifying factors, associated signs and symptoms.		
ROS	WNL	See note
Const	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Eyes	<input checked="" type="checkbox"/>	<input type="checkbox"/>
ENT/mouth	<input type="checkbox"/>	<input checked="" type="checkbox"/>
CV	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Resp	<input checked="" type="checkbox"/>	<input type="checkbox"/>
GI	<input checked="" type="checkbox"/>	<input type="checkbox"/>
GU	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Musc	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Skin/breasts	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Neuro	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Psych	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Endo	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hem/lymph	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Allergy/immun	<input checked="" type="checkbox"/>	<input type="checkbox"/>
No noteworthy changes since last visit. See note dated: 1/1/16		
PFSH	No Chng	See note
Past	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Family	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Social	<input checked="" type="checkbox"/>	<input type="checkbox"/>
No noteworthy changes since last visit. See note dated: 1/1/16		
Exam	WNL	See note
Const	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Eyes	<input checked="" type="checkbox"/>	<input type="checkbox"/>
ENT/mouth	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Neck	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Resp	<input checked="" type="checkbox"/>	<input type="checkbox"/>
CV	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Chest (breasts)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
GI (abdomen)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lymph	<input checked="" type="checkbox"/>	<input type="checkbox"/>
GU	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Musc	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Skin	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Neuro	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Psych	<input checked="" type="checkbox"/>	<input type="checkbox"/>
No ✓: no review/exam		

CC: Patient continues to complain of cough & congestion; ABI results discussed with pt. Normal

HPI:

Allergies:

ABNORMAL ROS:

ABNORMAL PHYSICAL EXAM FINDINGS:

ASSESSMENT AND PLAN

- OVER Wt
- ACUTE
- AC LARYNGITIS
- NDDM

MEDICATIONS: See EHI for Complete List Medication list reviewed/documentated

-
-
-
-
-
-

☐ New Pt 99203 ☒ Estab Pt: 99214 ☐ EKG ☐ PFT ☐ Complete PFT

☐ Preventive Visit ☐ Aorta Scan ☐ ABI ☐ Hearing

☐ New ☐ Estab Age: ☐ Other:

LABS: CBC CMP TFT's LFT's UA Other:

ORDERS: X-ray of Sonogram of CT Scan of MRI of

REFERRALS TO: Cardio GI URO Neuro GYN OPHTHAL Neuro Other:

☒ Medication risk, benefits, costs and alternatives were discussed with patient.

☐ Advance care planning was discussed with the patient.

F/U: days weeks months other:

Physician Signature:

Date: 12/22/16

JACQUELINE DAUHAJRE, MD
CONSULTATION REPORT

PATIENT NAME: Felicia Zapata REFERRING PHYSICIAN: Dr. [unclear]
DATE OF BIRTH: 5-1-57 DATE OF EXAM: 8-24-16
INITIAL CONSULT: _____ FOLLOW UP EVALUATION: ✓

EXAMINATION

VISUAL ACTIVITY: 20/60 OD 20/60 OS
INTRAOCULAR PRESSURE: OD: 16 mmHg OS: 18 mmHg

SLIT LAMP EXAMINATION:

OD: Cataract
OS: Glaucoma

FUNDUS EXAMINATION:

OD: unclear
OS: _____

IMPRESSION:

GLAUCOMA:	<input checked="" type="checkbox"/> PRESENT	<input type="checkbox"/> NOT PRESENT
DIABETIC RETINOPATHY:	<input type="checkbox"/> PRESENT	<input checked="" type="checkbox"/> NOT PRESENT
DRY EYE SYNDROME:	<input type="checkbox"/> PRESENT	<input checked="" type="checkbox"/> NOT PRESENT
HYPERTENSIVE RETINOPATHY:	<input type="checkbox"/> PRESENT	<input checked="" type="checkbox"/> NOT PRESENT

RECOMMENDATIONS:

No diabetic Refractive
Continue Cosopt for glaucoma
RETURN VISIT: 6 months

THANK YOU FOR ALLOWING ME TO PARTICIPATE IN THE CARE OF YOUR PATIENT. IF YOU HAVE ANY QUESTIONS OR REQUIRE FURTHER INFORMATION, PLEASE DO NOT HESITATE TO CONTACT ME.

SINCERELY,

JACQUELINE DAUHAJRE, MD