

PATTERSON, Randy (Legal name: Jon Patterson) | (id #1688, dob: 11/05/1956)

Medical Records - CONFIDENTIAL

FROM: TN - Faculty Physicians

Tina W
1415 OLD WEISGARBER RD SUITE 350, KNOXVILLE, TN 37909-1381
Phone: (865) 588-1605
Fax: (865) 588-1608

TO:

Name: PATTERSON, JON

DOB: 11/05/1956

Date Range: 01/01/2025 to 09/24/2025

This document contains the following records of the patient:

- **Encounters and Procedures**

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PATTERSON, Randy (Legal name: Jon Patterson) | (id #1688, dob: 11/05/1956)

Encounters and Procedures

Clinical Encounter Summaries

PATTERSON, Randy (Legal name: Jon Patterson) | (id #1688, dob: 11/05/1956)**Encounter Date:** 09/22/2025**Patient**

Name	PATTERSON, JON (68yo, M) ID# 1688	Appt. Date/Time	09/22/2025 10:45AM
DOB	11/05/1956	Service Dept.	KNOXVILLE
Provider	CHRISTOPHER L. BOWLIN, DPM		
Insurance	Med Primary: MEDICARE-TN (MEDICARE) Insurance # : 8T46AN5AD84 Med Secondary: MEDICO INSURANCE COMPANY (MEDICARE SUPPLEMENT) Insurance # : 000M1M150968 Prescription: check now		

Chief Complaint

None recorded.

Patient's Care Team

Podiatrist: CHRISTOPHER L BOWLIN DPM: 1415 OLD WEISGARBER RD STE 350, KNOXVILLE, TN 37909, Ph (865) 588-1605, Fax (865) 588-1608 NPI: 1922311547
Primary Care Provider: NATHAN GRAY: 11808 KINGSTON PIKE STE 160, KNOXVILLE, TN 37934-3803, Ph (865) 966-3940, Fax (833) 908-2091 NPI: 1952347999

Patient's Pharmacies

WALGREENS DRUG STORE #05053 (ERX): 601 N CAMPBELL STATION RD, FARRAGUT, TN 37934, Ph (865) 675-2061, Fax (865) 675-0789

Vitals

2025-09-22 11:47

Ht: 6 ft**Allergies**

Reviewed Allergies

CODEINE: Nausea (Mild)**PENICILLINS****Medications**

PATTERSON, Randy (Legal name: Jon Patterson) | (id #1688, dob: 11/05/1956)

Reviewed Medications

ALPRAZolam 0.5 mg tablet TAKE 1/2 TABLET BY MOUTH DAILY AT BEDTIME AS NEEDED FOR SLEEP OR ANXIETY Internal Note: for sleep only	08/14/25	filled
BD LUER-LOK SYRINGE 3 ML 22 X 1 1/2" USE TO INJECT TESTOSTERONE	05/31/22	renewed
BD REGULAR BEVEL NEEDLES 18 GAUGE X 1" USE TO DRAW	05/02/22	renewed
clotrimazole 1 % topical cream APPLY TOPICALLY TWICE DAILY	12/07/23	filled
fluconazole 150 mg tablet TAKE 1 TABLET BY MOUTH EVERY DAY	12/16/23	filled
ibuprofen 800 mg tablet	02/19/24	filled
linezolid 600 mg tablet TAKE 1 TABLET BY MOUTH EVERY 12 HOURS FOR 10 DAYS	08/30/25	filled
lisinopril 10 mg-hydrochlorothiazide 12.5 mg tablet TAKE 1 TABLET BY MOUTH DAILY	11/02/24	filled
metFORMIN ER 500 mg tablet,extended release 24 hr TAKE 1 TABLET BY MOUTH EVERY DAY	01/20/25	filled
Mounjaro 10 mg/0.5 mL subcutaneous pen injector INJECT 10 MG UNDER THE SKIN ONE DAY A WEEK	04/21/25	filled
Mounjaro 12.5 mg/0.5 mL subcutaneous pen injector ADMINISTER 12.5 MG UNDER THE SKIN WEEKLY AS DIRECTED	09/08/25	filled
Ozempic 0.25 mg or 0.5 mg (2 mg/3 mL) subcutaneous pen injector INJECT 0.5 MG UNDER THE SKIN EVERY WEEK	12/29/23	filled
tamsulosin 0.4 mg capsule TAKE 2 CAPSULES BY MOUTH DAILY	08/02/25	filled
testosterone cypionate 200 mg/mL intramuscular oil ADMINISTER 1 ML IN THE MUSCLE 1 TIME WEEKLY	07/28/25	filled

Some medications listed in Documents: #1029408, #1032301, #1035456 could not be added to this patient's chart. Please review these documents and add these medications to the patient's chart manually as needed.

Vaccines

Reviewed Vaccines

PATTERSON, Randy (Legal name: Jon Patterson) | (id #1688, dob: 11/05/1956)

Vaccine Type	Date	Amt.	Route	Site	NDC	Lot #	Mfr.	Exp. Date	VIS	VIS Given	Vaccinator
COVID-19											
COVID-19 (SARS-COV-2) vaccine, unspecified	10/01/22										
COVID-19 vaccine, vector-nr, rS-Ad26, PF, 0.5 mL (Janssen)	12/23/21	0.5 mL	Intramuscular			1855191	Janssen				
COVID-19 vaccine, vector-nr, rS-Ad26, PF, 0.5 mL (Janssen)	04/08/21	0.5 mL	Intramuscular			042A21A	Janssen				
Influenza											
influenza, high dose seasonal	08/22/24	0.5 mL	Intramuscular	Arm, Left Upper		U8429CA	Sanofi Pasteur				
influenza, injectable, quadrivalent, preservative free	10/15/23	0.5 mL	Intramuscular			371610	Seqirus				
influenza nasal	10/01/22										
influenza, high-dose, quadrivalent	09/21/22	0.7 mL	Intramuscular			UT7715CA	Sanofi Pasteur				
Influenza, injectable, MDCK, preservative free, quadrivalent	10/02/21	0.5 mL	Intramuscular			308438	Seqirus				
influenza, injectable, quadrivalent, preservative free	08/15/20	0.5 mL	Intramuscular			UJ428AB	Sanofi Pasteur				
influenza, injectable, quadrivalent	08/05/20										
Pneumococcal											
Pneumococcal conjugate PCV20, polysaccharide CRM197 conjugate, adjuvant, PF	08/22/24	0.5 mL	Intramuscular	Arm, Right Upper		HH9323	Pfizer, Inc				
Zoster											
zoster recombinant	12/21/21	1 ML	Intramuscular			333TE	GlaxoSmithKline				
zoster recombinant	10/16/21	1 ML	Intramuscular			4273E	GlaxoSmithKline				

Problems**Reviewed Problems**

- Peripheral vascular disease - Onset: 05/12/2025
- Hormone replacement therapy - Onset: 06/03/2019
- Uncontrolled type 2 diabetes mellitus - Onset: 08/27/2019
- Family history of Cardiovascular disease - Onset: 08/27/2019
- Adult health examination - Onset: 06/03/2019
- Body mass index 30+ - obesity - Onset: 08/27/2019
- Neuropathy due to type 2 diabetes mellitus - Onset: 10/16/2019
- Degeneration of intervertebral disc - Onset: 06/03/2019
- Diabetes mellitus - Onset: 12/06/2018
- Primary hypogonadism - Onset: 06/03/2019
- Screening for malignant neoplasm of prostate - Onset: 06/03/2019
- Corns and callus - Onset: 05/12/2025
- Disorder of nervous system due to type 2 diabetes mellitus - Onset: 05/12/2025
- Foot callus - Onset: 05/12/2025
- Walking disability - Onset: 05/12/2025
- Onychomycosis - Onset: 05/12/2025
- Antalgic gait - Onset: 05/12/2025
- Ulcer of toe due to type 2 diabetes mellitus - Onset: 05/12/2025
- Ulcer of left foot due to type 2 diabetes mellitus - Onset: 08/27/2025
- Wound cellulitis - Onset: 08/27/2025
- Ulcer of midfoot due to diabetes mellitus - Onset: 09/22/2025

Family History**Reviewed Family History**

Father - Diabetes mellitus

Social History**Reviewed Social History****POD Social History**

Do you have a living will?: No

Alcohol Use:: Yes

Number of drinks per day:: 0

Number of drinks per week:: 0

Tobacco use:: No

Cigarettes (pack/day):: 0

PATTERSON, Randy (Legal name: Jon Patterson) | (id #1688, dob: 11/05/1956)

Cigars/pipe per day:: 0

Dip/chew per day:: 0

Advance Directive

Do you have an advance directive?: No

Do you have a medical power of attorney?: No

Substance Use

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

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

What was the date of your most recent tobacco screening?: 06/30/2025

Has tobacco cessation counseling been provided?: Yes

On what date was tobacco cessation counseling provided?: 06/30/2025

What is your level of alcohol consumption?: Occasional

How many times per week do you consume alcohol?: Less than 1 time per week

How many years have you consumed alcohol?: 30

How many days in the past year have you consumed 5 or more drinks? : 0

Have you ever been counseled for unhealthy alcohol use?: No

Do you use any illicit or recreational drugs?: No

How many times in the past year have you used an illegal drug or used a prescription medication for nonmedical reasons?: 0

What is your level of caffeine consumption?: Moderate

Diet and Exercise

What is your exercise level?: Occasional

How many times per week do you exercise?: 5-7 times per week

Activities of Daily Living

Are you able to care for yourself independently?: Yes

Are you able to walk independently without assistance or assistive devices?: Yes: walks without restrictions

Surgical & Procedure History

Reviewed Surgical & Procedure History

- Implantation of penile prosthesis

Past Medical History

Reviewed Past Medical History

Arthritis: **Y**Hypertension: **Y****HPI**

Here today follow-up left lower extremity subleft fifth metatarsal phalangeal joint ulcer status post skin graft application removal skin graft today.

Here today with wife.

He has some transfer pressure to the lateral aspect of the wound to the lateral aspect of his left foot with some pressure necrosis from 3:00 to 6:00. There is sloughing as well. He acknowledges that the boot has come off possibly more than once at night while in bed asleep and that the pressure would have come from that since he is a left-sided sleeper. He says that he is controlling the things that he can control

Here today follow-up of the above mentioned had a good weekend no detriment to the wound left subfifth ulceration continuing to heal.

ROS

Patient reports no fever, no night sweats, no significant weight gain, no significant weight loss, no exercise intolerance, no chills, and no malaise. He reports no dry eyes, no vision change, no irritation, and no eye disease/injury. He reports no difficulty hearing and no ear pain. He reports no frequent nosebleeds, no nose problems, and no sinus problems. He reports no sore throat, no bleeding gums, no snoring, no dry mouth, no mouth ulcers, no oral abnormalities, no teeth problems, no ringing in the ears, and no sinusitis. He reports no chest pain, no arm pain on exertion, no shortness of breath when walking, no shortness of breath when lying down, no palpitations, no known heart murmur, and no ankle swelling. He reports no cough, no wheezing, no shortness of breath, no coughing up blood, and no sleep apnea. He reports no abdominal pain, no nausea, no vomiting, no constipation, normal appetite, no diarrhea, not vomiting blood, no dyspepsia, and no GERD. He reports no incontinence, no difficulty urinating, no hematuria, and no increased frequency. He reports no muscle aches, no muscle weakness, no arthralgias/joint pain, no back pain, no swelling in the extremities, no neck pain, no difficulty walking, no cramps, no osteoporosis, and no fractures. He reports no abnormal mole, no jaundice, no rashes, no laceration, no non-healing areas, no changes in hair/nails, no psoriasis, no change in skin color, and no breast lump. He reports no loss of consciousness, no weakness, no numbness, no seizures, no dizziness, no migraines, no headaches, no tremor, no gait dysfunction, and no paralysis. He reports no depression, no sleep disturbances, feeling safe in a relationship, no alcohol abuse, no anxiety, no hallucinations, no suicidal thoughts, no mood swings, no memory loss, no agitation, no dementia, and no delirium. He reports no fatigue. He reports no swollen glands, no bruising, no excessive bleeding, no anemia, and no phlebitis. He reports no runny nose, no sinus pressure, no itching, no hives, and no frequent sneezing.

Physical Exam

Constitutional: General Appearance: well-developed. Level of Distress: NAD.

Cardiovascular: Arterial Pulses Right: **dorsalis pedis diminished** and **posterior tibialis diminished**. Arterial Pulses Left: **dorsalis pedis diminished** and **posterior tibialis diminished**. Varicosities Right: **varicosities**. Varicosities Left: **varicosities**.

PATTERSON, Randy (Legal name: Jon Patterson) | (id #1688, dob: 11/05/1956)

Integumentary: Foot Right: **dry** and **atrophic**. Foot Left: **dry** and **atrophic**. Great Toe Nail Right: **pain with and without pressure**. Great Toe Nail Left: **pain with and without pressure**.

Neurological: Neurological Right: **gross sensation diminished**. Neurological Left: **gross sensation diminished**.

Musculoskeletal: Muscle Strength and Tone Right: **hypotonicity**. Muscle Strength and Tone Left: **hypotonicity**. Joints, Bones, and Muscles Right: **contractures** and **limited ROM**. Joints, Bones, and Muscles Left: **contractures** and **limited ROM**.

Class: Class B Right: **dorsalis pedis pulse diminished, posterior tibial pulse diminished, hair growth decrease, nail changes, pigmentary changes, and skin texture thin**. Class B Left: **dorsalis pedis pulse diminished, posterior tibial pulse diminished, hair growth decrease, nail changes, pigmentary changes, and skin texture thin**.

No signs of infection, wound is healing.

The wound sits today postsurgical 2 cm circumferential full-thickness.

Procedure Documentation**DR 11042 - Debridment of Open Wound, Subcutaneous:**

After obtaining informed consent, all wounds and wound edges were sharply debrided to level of subcutaneous tissue using a 15 blade scalpel and curette, removing all nonviable/necrotic tissue. Following debridement, punctate bleeding was noted with healthy granular margins. Hemostasis was maintained utilizing manual compression and silver nitrate as necessary. A dry sterile compressive dressing was applied.

Assessment / Plan**Diabetic ulcer of left midfoot associated with type 2 diabetes mellitus, with fat layer****1. exposed**

E11.621: Type 2 diabetes mellitus with foot ulcer

L97.422: Non-pressure chronic ulcer of left heel and midfoot with fat layer exposed

2. Corns and callus

L84: Corns and callosities

3. Postoperative visit

Z09: Encounter for follow-up examination after completed treatment for conditions other than malignant neoplasm

Antalgic**4. gait**

R26.89: Other abnormalities of gait and mobility

Disability of**5. walking**

R26.2: Difficulty in walking, not elsewhere classified

Discussion Notes

Patient is continuing offload he has blood flow he has dressing change instructions as well as a controlled glycemic index. We have also discussed and he is eating 90 g of protein a day.

Return to Office

- Christopher L. Bowlin, DPM for ESTABLISHED PATIENT 15 at KNOXVILLE on 09/29/2025 at 10:45 AM

Encounter Sign-Off

Encounter signed-off by Christopher L. Bowlin, DPM, 09/22/2025.

Encounter performed and documented by Christopher L. Bowlin, DPM

Encounter reviewed & signed by Christopher L. Bowlin, DPM on 09/22/2025 at 03:12 PM

PATTERSON, Randy (Legal name: Jon Patterson) | (id #1688, dob: 11/05/1956)**Encounter Date: 09/16/2025****Patient**

Name	PATTERSON, JON (68yo, M) ID# 1688	Appt. Date/Time	09/16/2025 11:30AM
DOB	11/05/1956	Service Dept.	KNOXVILLE
Provider	CHRISTOPHER L. BOWLIN, DPM		
Insurance	Med Primary: MEDICARE-TN (MEDICARE) Insurance # : 8T46AN5AD84 Med Secondary: MEDICO INSURANCE COMPANY (MEDICARE SUPPLEMENT) Insurance # : 000M1M150968 Prescription: check now		

Chief Complaint

post-op check, Wound Care Follow-up

Patient's Care Team

Podiatrist: CHRISTOPHER L BOWLIN DPM: 1415 OLD WEISGARBER RD STE 350, KNOXVILLE, TN 37909, Ph (865) 588-1605, Fax (865) 588-1608 NPI: 1922311547
Primary Care Provider: NATHAN GRAY: 11808 KINGSTON PIKE STE 160, KNOXVILLE, TN 37934-3803, Ph (865) 966-3940, Fax (833) 908-2091 NPI: 1952347999

Patient's Pharmacies

WALGREENS DRUG STORE #05053 (ERX): 601 N CAMPBELL STATION RD, FARRAGUT, TN 37934, Ph (865) 675-2061, Fax (865) 675-0789

Vitals

2025-09-16 12:08

Ht: 6 ft**Allergies**

Reviewed Allergies

CODEINE: Nausea (Mild)**PENICILLINS****Medications**

PATTERSON, Randy (Legal name: Jon Patterson) | (id #1688, dob: 11/05/1956)

Reviewed Medications

ALPRAZolam 0.5 mg tablet TAKE 1/2 TABLET BY MOUTH DAILY AT BEDTIME AS NEEDED FOR SLEEP OR ANXIETY Internal Note: for sleep only	08/14/25	filled
BD LUER-LOK SYRINGE 3 ML 22 X 1 1/2" USE TO INJECT TESTOSTERONE	05/31/22	renewed
BD REGULAR BEVEL NEEDLES 18 GAUGE X 1" USE TO DRAW	05/02/22	renewed
clotrimazole 1 % topical cream APPLY TOPICALLY TWICE DAILY	12/07/23	filled
fluconazole 150 mg tablet TAKE 1 TABLET BY MOUTH EVERY DAY	12/16/23	filled
ibuprofen 800 mg tablet	02/19/24	filled
linezolid 600 mg tablet TAKE 1 TABLET BY MOUTH EVERY 12 HOURS FOR 10 DAYS	08/30/25	filled
lisinopril 10 mg-hydrochlorothiazide 12.5 mg tablet TAKE 1 TABLET BY MOUTH DAILY	11/02/24	filled
metFORMIN ER 500 mg tablet,extended release 24 hr TAKE 1 TABLET BY MOUTH EVERY DAY	01/20/25	filled
Mounjaro 10 mg/0.5 mL subcutaneous pen injector INJECT 10 MG UNDER THE SKIN ONE DAY A WEEK	04/21/25	filled
Mounjaro 12.5 mg/0.5 mL subcutaneous pen injector ADMINISTER 12.5 MG UNDER THE SKIN WEEKLY AS DIRECTED	09/08/25	filled
Ozempic 0.25 mg or 0.5 mg (2 mg/3 mL) subcutaneous pen injector INJECT 0.5 MG UNDER THE SKIN EVERY WEEK	12/29/23	filled
tamsulosin 0.4 mg capsule TAKE 2 CAPSULES BY MOUTH DAILY	08/02/25	filled
testosterone cypionate 200 mg/mL intramuscular oil ADMINISTER 1 ML IN THE MUSCLE 1 TIME WEEKLY	07/28/25	filled

Some medications listed in Documents: #1029408, #1032301, #1035456 could not be added to this patient's chart. Please review these documents and add these medications to the patient's chart manually as needed.

Vaccines

Reviewed Vaccines

PATTERSON, Randy (Legal name: Jon Patterson) | (id #1688, dob: 11/05/1956)

Vaccine Type	Date	Amt.	Route	Site	NDC	Lot #	Mfr.	Exp. Date	VIS	VIS Given	Vaccinator
COVID-19											
COVID-19 (SARS-COV-2) vaccine, unspecified	10/01/22										
COVID-19 vaccine, vector-nr, rS-Ad26, PF, 0.5 mL (Janssen)	12/23/21	0.5 mL	Intramuscular			1855191	Janssen				
COVID-19 vaccine, vector-nr, rS-Ad26, PF, 0.5 mL (Janssen)	04/08/21	0.5 mL	Intramuscular			042A21A	Janssen				
Influenza											
influenza, high dose seasonal	08/22/24	0.5 mL	Intramuscular	Arm, Left Upper		U8429CA	Sanofi Pasteur				
influenza, injectable, quadrivalent, preservative free	10/15/23	0.5 mL	Intramuscular			371610	Seqirus				
influenza nasal	10/01/22										
influenza, high-dose, quadrivalent	09/21/22	0.7 mL	Intramuscular			UT7715CA	Sanofi Pasteur				
Influenza, injectable, MDCK, preservative free, quadrivalent	10/02/21	0.5 mL	Intramuscular			308438	Seqirus				
influenza, injectable, quadrivalent, preservative free	08/15/20	0.5 mL	Intramuscular			UJ428AB	Sanofi Pasteur				
influenza, injectable, quadrivalent	08/05/20										
Pneumococcal											
Pneumococcal conjugate PCV20, polysaccharide CRM197 conjugate, adjuvant, PF	08/22/24	0.5 mL	Intramuscular	Arm, Right Upper		HH9323	Pfizer, Inc				
Zoster											
zoster recombinant	12/21/21	1 ML	Intramuscular			333TE	GlaxoSmithKline				
zoster recombinant	10/16/21	1 ML	Intramuscular			4273E	GlaxoSmithKline				

Problems**Reviewed Problems**

- Peripheral vascular disease - Onset: 05/12/2025
- Hormone replacement therapy - Onset: 06/03/2019
- Uncontrolled type 2 diabetes mellitus - Onset: 08/27/2019
- Family history of Cardiovascular disease - Onset: 08/27/2019
- Adult health examination - Onset: 06/03/2019
- Body mass index 30+ - obesity - Onset: 08/27/2019
- Neuropathy due to type 2 diabetes mellitus - Onset: 10/16/2019
- Degeneration of intervertebral disc - Onset: 06/03/2019
- Diabetes mellitus - Onset: 12/06/2018
- Primary hypogonadism - Onset: 06/03/2019
- Screening for malignant neoplasm of prostate - Onset: 06/03/2019
- Corns and callus - Onset: 05/12/2025
- Disorder of nervous system due to type 2 diabetes mellitus - Onset: 05/12/2025
- Foot callus - Onset: 05/12/2025
- Walking disability - Onset: 05/12/2025
- Onychomycosis - Onset: 05/12/2025
- Antalgic gait - Onset: 05/12/2025
- Ulcer of toe due to type 2 diabetes mellitus - Onset: 05/12/2025
- Ulcer of left foot due to type 2 diabetes mellitus - Onset: 08/27/2025
- Wound cellulitis - Onset: 08/27/2025

Family History**Reviewed Family History**

Father - Diabetes mellitus

Social History**Reviewed Social History****POD Social History**

Do you have a living will?: No

Alcohol Use:: Yes

Number of drinks per day:: 0

Number of drinks per week:: 0

Tobacco use:: No

Cigarettes (pack/day):: 0

Cigars/pipe per day:: 0

PATTERSON, Randy (Legal name: Jon Patterson) | (id #1688, dob: 11/05/1956)

Dip/chew per day:: 0

Advance Directive

Do you have an advance directive?: No

Do you have a medical power of attorney?: No

Substance Use

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

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

What was the date of your most recent tobacco screening?: 06/30/2025

Has tobacco cessation counseling been provided?: Yes

On what date was tobacco cessation counseling provided?: 06/30/2025

What is your level of alcohol consumption?: Occasional

How many times per week do you consume alcohol?: Less than 1 time per week

How many years have you consumed alcohol?: 30

How many days in the past year have you consumed 5 or more drinks? : 0

Have you ever been counseled for unhealthy alcohol use?: No

Do you use any illicit or recreational drugs?: No

How many times in the past year have you used an illegal drug or used a prescription medication for nonmedical reasons?: 0

What is your level of caffeine consumption?: Moderate

Diet and Exercise

What is your exercise level?: Occasional

How many times per week do you exercise?: 5-7 times per week

Activities of Daily Living

Are you able to care for yourself independently?: Yes

Are you able to walk?: Yes: walks without restrictions

Surgical & Procedure History

Reviewed Surgical & Procedure History

- Implantation of penile prosthesis

Past Medical History

Reviewed Past Medical History

Arthritis: **Y**Hypertension: **Y****HPI**

Here today follow-up left lower extremity subleft fifth metatarsal phalangeal joint ulcer status post skin graft application removal skin graft today.

Here today with wife.

He has some transfer pressure to the lateral aspect of the wound to the lateral aspect of his left foot with some pressure necrosis from 3:00 to 6:00. There is sloughing as well. He acknowledges that the boot has come off possibly more than once at night while in bed asleep and that the pressure would have come from that since he is a left-sided sleeper. He says that he is controlling the things that he can control "

ROS

Patient reports no fever, no night sweats, no significant weight gain, no significant weight loss, no exercise intolerance, no chills, and no malaise. He reports no dry eyes, no vision change, no irritation, and no eye disease/injury. He reports no difficulty hearing and no ear pain. He reports no frequent nosebleeds, no nose problems, and no sinus problems. He reports no sore throat, no bleeding gums, no snoring, no dry mouth, no mouth ulcers, no oral abnormalities, no teeth problems, no ringing in the ears, and no sinusitis. He reports no chest pain, no arm pain on exertion, no shortness of breath when walking, no shortness of breath when lying down, no palpitations, no known heart murmur, and no ankle swelling. He reports no cough, no wheezing, no shortness of breath, no coughing up blood, and no sleep apnea. He reports no abdominal pain, no nausea, no vomiting, no constipation, normal appetite, no diarrhea, not vomiting blood, no dyspepsia, and no GERD. He reports no incontinence, no difficulty urinating, no hematuria, and no increased frequency. He reports no muscle aches, no muscle weakness, no arthralgias/joint pain, no back pain, no swelling in the extremities, no neck pain, no difficulty walking, no cramps, no osteoporosis, and no fractures. He reports no abnormal mole, no jaundice, no rashes, no laceration, no non-healing areas, no changes in hair/nails, no psoriasis, no change in skin color, and no breast lump. He reports no loss of consciousness, no weakness, no numbness, no seizures, no dizziness, no migraines, no headaches, no tremor, no gait dysfunction, and no paralysis. He reports no depression, no sleep disturbances, feeling safe in a relationship, no alcohol abuse, no anxiety, no hallucinations, no suicidal thoughts, no mood swings, no memory loss, no agitation, no dementia, and no delirium. He reports no fatigue. He reports no swollen glands, no bruising, no excessive bleeding, no anemia, and no phlebitis. He reports no runny nose, no sinus pressure, no itching, no hives, and no frequent sneezing.

Physical Exam

Constitutional: General Appearance: well-developed. Level of Distress: NAD.

Cardiovascular: Arterial Pulses Right: **dorsalis pedis diminished** and **posterior tibialis diminished**. Arterial Pulses Left: **dorsalis pedis diminished** and **posterior tibialis diminished**. Varicosities Right: **varicosities**. Varicosities Left: **varicosities**.

Integumentary: Foot Right: **dry** and **atrophic**. Foot Left: **dry** and **atrophic**. Great Toe Nail Right: **pain with and without pressure**. Great Toe Nail Left: **pain with and without pressure**.

Neurological: Neurological Right: **gross sensation diminished**. Neurological Left: **gross sensation diminished**.

PATTERSON, Randy (Legal name: Jon Patterson) | (id #1688, dob: 11/05/1956)

Musculoskeletal: Muscle Strength and Tone Right: **hypotonicity**. Muscle Strength and Tone Left: **hypotonicity**. Joints, Bones, and Muscles Right: **contractures** and **limited ROM**. Joints, Bones, and Muscles Left: **contractures** and **limited ROM**.

Class: Class B Right: **dorsalis pedis pulse diminished, posterior tibial pulse diminished, hair growth decrease, nail changes, pigmentary changes**, and **skin texture thin**. Class B Left: **dorsalis pedis pulse diminished, posterior tibial pulse diminished, hair growth decrease, nail changes, pigmentary changes**, and **skin texture thin**.

Full-thickness graft in place No signs of infection

Procedure Documentation**DR 11042 - Debridement of Open Wound, Subcutaneous:**

After obtaining informed consent, all wounds and wound edges were sharply debrided to level of subcutaneous tissue using a 15 blade scalpel and curette, removing all nonviable/necrotic tissue. Following debridement, punctate bleeding was noted with healthy granular margins. Hemostasis was maintained utilizing manual compression and silver nitrate as necessary. A dry sterile compressive dressing was applied.

Assessment / Plan**Diabetic ulcer of left midfoot associated with type 2 diabetes mellitus, with fat layer****1. exposed**

E11.621: Type 2 diabetes mellitus with foot ulcer

L97.422: Non-pressure chronic ulcer of left heel and midfoot with fat layer exposed

2. Corns and callus

L84: Corns and callosities

3. Postoperative visit

Z09: Encounter for follow-up examination after completed treatment for conditions other than malignant neoplasm

Antalgic**4. gait**

R26.89: Other abnormalities of gait and mobility

Disability of**5. walking**

R26.2: Difficulty in walking, not elsewhere classified

Discussion Notes

Today we spent significant time in the room with wife I had to providers with me also I have gone over all the methodologies to offload and make sure that we protect this foot at all times and I am even having them not put any compression with an Ace wrap on. He is going stir crazy he acknowledges that to me but this is not even halfway healed absolute nonweightbearing and pressure have been the 1 thing that has been the culprit from the beginning and I have gone over the fact that he has complete loss of protective sensation and that we just have to be diligent diligent diligent he knows to call with any questions or concerns change the dressing daily with some Adaptic it is okay to change it every other day it is not infected no compression with Ace wrap he has knee scooter and offloads I have a boot with the left subfifth excavated offload but is not time for that because I am afraid to put the boot on his foot for transfer lesions my advice is also for him not to go out of town because of his inability to protect his extremity

Return to Office

- Christopher L. Bowlin, DPM for ESTABLISHED PATIENT 15 at KNOXVILLE on 09/23/2025 at 11:15 AM

Encounter Sign-Off

Encounter signed-off by Christopher L. Bowlin, DPM, 09/16/2025.

Encounter performed and documented by Christopher L. Bowlin, DPM

Encounter reviewed & signed by Christopher L. Bowlin, DPM on 09/16/2025 at 03:44 PM

PATTERSON, Randy (Legal name: Jon Patterson) | (id #1688, dob: 11/05/1956)

Encounter Date: 09/11/2025

Patient

Name	PATTERSON, JON (68yo, M) ID# 1688	Appt. Date/Time	09/11/2025 09:45AM
DOB	11/05/1956	Service Dept.	KNOXVILLE
Provider	MITCHELL PEARCE, PA		
Insurance	Med Primary: MEDICARE-TN (MEDICARE) Insurance # : 8T46AN5AD84 Med Secondary: MEDICO INSURANCE COMPANY (MEDICARE SUPPLEMENT) Insurance # : 000M1M150968 Prescription: OPTUMRX - Member is eligible. details		

Chief Complaint

post-op check, Wound Care Follow-up

Patient's Care Team

Podiatrist: CHRISTOPHER L BOWLIN DPM: 1415 OLD WEISGARBER RD STE 350, KNOXVILLE, TN 37909, Ph (865) 588-1605, Fax (865) 588-1608 NPI: 1922311547
Primary Care Provider: NATHAN GRAY: 11808 KINGSTON PIKE STE 160, KNOXVILLE, TN 37934-3803, Ph (865) 966-3940, Fax (833) 908-2091 NPI: 1952347999

Patient's Pharmacies

WALGREENS DRUG STORE #05053 (ERX): 601 N CAMPBELL STATION RD, FARRAGUT, TN 37934, Ph (865) 675-2061, Fax (865) 675-0789

Vitals

2025-09-11 10:05
Ht: 6 ft

Allergies

Reviewed Allergies
CODEINE: Nausea (Mild)
PENICILLINS

Medications

PATTERSON, Randy (Legal name: Jon Patterson) | (id #1688, dob: 11/05/1956)

Reviewed Medications

ALPRAZolam 0.5 mg tablet TAKE 1/2 TABLET BY MOUTH DAILY AT BEDTIME AS NEEDED FOR SLEEP OR ANXIETY Internal Note: for sleep only	08/14/25	filled
BD LUER-LOK SYRINGE 3 ML 22 X 1 1/2" USE TO INJECT TESTOSTERONE	05/31/22	renewed
BD REGULAR BEVEL NEEDLES 18 GAUGE X 1" USE TO DRAW	05/02/22	renewed
ciprofloxacin 750 mg tablet TAKE 1 TABLET BY MOUTH EVERY 12 HOURS FOR 10 DAYS	08/30/25	filled
clotrimazole 1 % topical cream APPLY TOPICALLY TWICE DAILY	12/07/23	filled
fluconazole 150 mg tablet TAKE 1 TABLET BY MOUTH EVERY DAY	12/16/23	filled
ibuprofen 800 mg tablet	02/19/24	filled
linezolid 600 mg tablet TAKE 1 TABLET BY MOUTH EVERY 12 HOURS FOR 10 DAYS	08/30/25	filled
lisinopriL 10 mg-hydrochlorothiazide 12.5 mg tablet TAKE 1 TABLET BY MOUTH DAILY	11/02/24	filled
metFORMIN ER 500 mg tablet,extended release 24 hr TAKE 1 TABLET BY MOUTH EVERY DAY	01/20/25	filled
Mounjaro 10 mg/0.5 mL subcutaneous pen injector INJECT 10 MG UNDER THE SKIN ONE DAY A WEEK	04/21/25	filled
Mounjaro 12.5 mg/0.5 mL subcutaneous pen injector ADMINISTER 12.5 MG UNDER THE SKIN WEEKLY AS DIRECTED	09/08/25	filled
Ozempic 0.25 mg or 0.5 mg (2 mg/3 mL) subcutaneous pen injector INJECT 0.5 MG UNDER THE SKIN EVERY WEEK	12/29/23	filled
tamsulosin 0.4 mg capsule TAKE 2 CAPSULES BY MOUTH DAILY	08/02/25	filled
testosterone cypionate 200 mg/mL intramuscular oil ADMINISTER 1 ML IN THE MUSCLE 1 TIME WEEKLY	07/28/25	filled

Some medications listed in Documents: #1029408, #1032301, #1035456 could not be added to this patient's chart. Please review these documents and add these medications to the patient's chart manually as needed.

Vaccines

Reviewed Vaccines

PATTERSON, Randy (Legal name: Jon Patterson) | (id #1688, dob: 11/05/1956)

Vaccine Type	Date	Amt.	Route	Site	NDC	Lot #	Mfr.	Exp. Date	VIS	VIS Given	Vaccinator
COVID-19											
COVID-19 (SARS-COV-2) vaccine, unspecified	10/01/22										
COVID-19 vaccine, vector-nr, rS-Ad26, PF, 0.5 mL (Janssen)	12/23/21	0.5 mL	Intramuscular			1855191	Janssen				
COVID-19 vaccine, vector-nr, rS-Ad26, PF, 0.5 mL (Janssen)	04/08/21	0.5 mL	Intramuscular			042A21A	Janssen				
Influenza											
influenza, high dose seasonal	08/22/24	0.5 mL	Intramuscular	Arm, Left Upper		U8429CA	Sanofi Pasteur				
influenza, injectable, quadrivalent, preservative free	10/15/23	0.5 mL	Intramuscular			371610	Seqirus				
influenza nasal	10/01/22										
influenza, high-dose, quadrivalent	09/21/22	0.7 mL	Intramuscular			UT7715CA	Sanofi Pasteur				
Influenza, injectable, MDCK, preservative free, quadrivalent	10/02/21	0.5 mL	Intramuscular			308438	Seqirus				
influenza, injectable, quadrivalent, preservative free	08/15/20	0.5 mL	Intramuscular			UJ428AB	Sanofi Pasteur				
influenza, injectable, quadrivalent	08/05/20										
Pneumococcal											
Pneumococcal conjugate PCV20, polysaccharide CRM197 conjugate, adjuvant, PF	08/22/24	0.5 mL	Intramuscular	Arm, Right Upper		HH9323	Pfizer, Inc				
Zoster											
zoster recombinant	12/21/21	1 ML	Intramuscular			333TE	GlaxoSmithKline				
zoster recombinant	10/16/21	1 ML	Intramuscular			4273E	GlaxoSmithKline				

Problems

Reviewed Problems

- Peripheral vascular disease - Onset: 05/12/2025
- Hormone replacement therapy - Onset: 06/03/2019
- Uncontrolled type 2 diabetes mellitus - Onset: 08/27/2019
- Family history of Cardiovascular disease - Onset: 08/27/2019
- Adult health examination - Onset: 06/03/2019
- Body mass index 30+ - obesity - Onset: 08/27/2019
- Neuropathy due to type 2 diabetes mellitus - Onset: 10/16/2019
- Degeneration of intervertebral disc - Onset: 06/03/2019
- Diabetes mellitus - Onset: 12/06/2018
- Primary hypogonadism - Onset: 06/03/2019
- Screening for malignant neoplasm of prostate - Onset: 06/03/2019
- Corns and callus - Onset: 05/12/2025
- Disorder of nervous system due to type 2 diabetes mellitus - Onset: 05/12/2025
- Foot callus - Onset: 05/12/2025
- Walking disability - Onset: 05/12/2025
- Onychomycosis - Onset: 05/12/2025
- Antalgic gait - Onset: 05/12/2025
- Ulcer of toe due to type 2 diabetes mellitus - Onset: 05/12/2025
- Ulcer of left foot due to type 2 diabetes mellitus - Onset: 08/27/2025
- Wound cellulitis - Onset: 08/27/2025

Family History

Reviewed Family History

Father - Diabetes mellitus

Social History

Reviewed Social History

Advance Directive

Do you have an advance directive?: No

Do you have a medical power of attorney?: No

Substance Use

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

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

What was the date of your most recent tobacco screening?: 06/30/2025

Has tobacco cessation counseling been provided?: Yes

PATTERSON, Randy (Legal name: Jon Patterson) | (id #1688, dob: 11/05/1956)

On what date was tobacco cessation counseling provided?: 06/30/2025

What is your level of alcohol consumption?: Occasional

How many times per week do you consume alcohol?: Less than 1 time per week

How many years have you consumed alcohol?: 30

How many days in the past year have you consumed 5 or more drinks? : 0

Have you ever been counseled for unhealthy alcohol use?: No

Do you use any illicit or recreational drugs?: No

How many times in the past year have you used an illegal drug or used a prescription medication for nonmedical reasons?: 0

What is your level of caffeine consumption?: Moderate

Diet and Exercise

What is your exercise level?: Occasional

How many times per week do you exercise?: 5-7 times per week

Activities of Daily Living

Are you able to care for yourself independently?: Yes

Are you able to walk?: Yes: walks without restrictions

Surgical & Procedure History

Reviewed Surgical & Procedure History

- Implantation of penile prosthesis

Past Medical History

Reviewed Past Medical History

Arthritis: **Y**Hypertension: **Y****HPI**

68-year-old neuropathic male here today for follow-up. Doing good other than he has been barefoot doing some tai chi/karate on a hardwood floor. He has a concerning ecchymotic bruise left subfifth MTP. He also has callus to the right subfifth MTP to a lesser degree. Just conversation today on it is probably not a good idea to do any barefoot activity as we discussed before. He does have a history of significant callus deposition with loss of protective sensation that is given his wounds. My recommendation was very clear that we just cannot do barefoot on hardwood floor. It is just going to cause hyperkeratosis. Shown that wife the picture of his foot during my clinical examination today. I just need to get him on some inserts. Otherwise everything is within normal limits and they look fantastic with activity.

Here today spotcheck before vacation doing well no breaks to the skin.

Here today acute sick visit blowup left foot fifth toe MTP wound reulceration. Had a day of barefoot in the pool. Continue walking and no offload wound has worsened since then. He presents today with pain erythema edema fever chills with some streaking up his lower leg.

Here today status post hospital discharge doing well needs to be n.p.o. tonight 2 OR tomorrow debridement skin graft as well as negative pressure wound therapy.

Here today postop visit full-thickness graft and wound VAC he looks fantastic.

Here today follow-up the above mentioned here today for wound VAC dressing change left subfifth metatarsal phalangeal joint graft intact final dose of linezolid and Cipro are today has knee scooter here today with wife still has some GI distress but last day of antibiotics are today

Here today for evaluation we have full graft take today for staples intact looks good no concerns.

ROS

Patient reports no fever, no night sweats, no significant weight gain, no significant weight loss, no exercise intolerance, no chills, and no malaise. He reports no dry eyes, no vision change, no irritation, and no eye disease/injury. He reports no difficulty hearing and no ear pain. He reports no frequent nosebleeds, no nose problems, and no sinus problems. He reports no sore throat, no bleeding gums, no snoring, no dry mouth, no mouth ulcers, no oral abnormalities, no teeth problems, no ringing in the ears, and no sinusitis. He reports no chest pain, no arm pain on exertion, no shortness of breath when walking, no shortness of breath when lying down, no palpitations, no known heart murmur, and no ankle swelling. He reports no cough, no wheezing, no shortness of breath, no coughing up blood, and no sleep apnea. He reports no abdominal pain, no nausea, no vomiting, no constipation, normal appetite, no diarrhea, not vomiting blood, no dyspepsia, and no GERD. He reports no incontinence, no difficulty urinating, no hematuria, and no increased frequency. He reports no muscle aches, no muscle weakness, no arthralgias/joint pain, no back pain, no swelling in the extremities, no neck pain, no difficulty walking, no cramps, no osteoporosis, and no fractures. He reports no abnormal mole, no jaundice, no rashes, no laceration, no non-healing areas, no changes in hair/nails, no psoriasis, no change in skin color, and no breast lump. He reports no loss of consciousness, no weakness, no numbness, no seizures, no dizziness, no migraines, no headaches, no tremor, no gait dysfunction, and no paralysis. He reports no depression, no sleep disturbances, feeling safe in a relationship, no alcohol abuse, no anxiety, no hallucinations, no suicidal thoughts, no mood swings, no memory loss, no agitation, no dementia, and no delirium. He reports no fatigue. He reports no swollen glands, no bruising, no excessive bleeding, no anemia, and no phlebitis. He reports no runny nose, no sinus pressure, no itching, no hives, and no frequent sneezing.

Physical Exam

Constitutional: General Appearance: well-developed. Level of Distress: NAD.

PATTERSON, Randy (Legal name: Jon Patterson) | (id #1688, dob: 11/05/1956)

Cardiovascular: Arterial Pulses Right: **dorsalis pedis diminished** and **posterior tibialis diminished**. Arterial Pulses Left: **dorsalis pedis diminished** and **posterior tibialis diminished**. Varicosities Right: **varicosities**. Varicosities Left: **varicosities**.

Integumentary: Foot Right: **dry** and **atrophic**. Foot Left: **dry** and **atrophic**. Great Toe Nail Right: **pain with and without pressure**. Great Toe Nail Left: **pain with and without pressure**.

Neurological: Neurological Right: **gross sensation diminished**. Neurological Left: **gross sensation diminished**.

Musculoskeletal: Muscle Strength and Tone Right: **hypotonicity**. Muscle Strength and Tone Left: **hypotonicity**. Joints, Bones, and Muscles Right: **contractures** and **limited ROM**. Joints, Bones, and Muscles Left: **contractures** and **limited ROM**.

Class: Class B Right: **dorsalis pedis pulse diminished, posterior tibial pulse diminished, hair growth decrease, nail changes, pigmentary changes, and skin texture thin**. Class B Left: **dorsalis pedis pulse diminished, posterior tibial pulse diminished, hair growth decrease, nail changes, pigmentary changes, and skin texture thin**.

Full-thickness graft in place No signs of infection

Assessment / Plan**1. Postoperative visit**

Z09: Encounter for follow-up examination after completed treatment for conditions other than malignant neoplasm

Diabetic ulcer of other part of left foot associated with type 2 diabetes mellitus, with fat layer

2. exposed

E11.621: Type 2 diabetes mellitus with foot ulcer

L97.522: Non-pressure chronic ulcer of other part of left foot with fat layer exposed

3. Corns and callus

L84: Corns and callosities

Antalgic

4. gait

R26.89: Other abnormalities of gait and mobility

Disability of

5. walking

R26.2: Difficulty in walking, not elsewhere classified

6. Onychomycosis

B35.1: Tinea unguium

Disorder of nervous system due to type 2 diabetes

7. mellitus

E11.69: Type 2 diabetes mellitus with other specified complication

G98.8: Other disorders of nervous system

8. Peripheral vascular disease

I73.9: Peripheral vascular disease, unspecified

Callus of

9. foot

L84: Corns and callosities

Discussion Notes

Done with antibiotics full graft take looks great 4 staples intact. Dressing changed today follow-up with Dr. Bowlin next week.

Return to Office

- Christopher L. Bowlin, DPM for ESTABLISHED PATIENT 15 at KNOXVILLE on 09/16/2025 at 11:30 AM

Encounter Sign-Off

Encounter signed-off by MITCHELL PEARCE, PA, 09/11/2025.

Encounter performed and documented by MITCHELL PEARCE, PA

Encounter reviewed & signed by MITCHELL PEARCE, PA on 09/11/2025 at 10:14 AM

PATTERSON, Randy (Legal name: Jon Patterson) | (id #1688, dob: 11/05/1956)**Encounter Date: 09/08/2025****Patient**

Name	PATTERSON, JON (68yo, M) ID# 1688	Appt. Date/Time	09/08/2025 09:00AM
DOB	11/05/1956	Service Dept.	KNOXVILLE
Provider	CHRISTOPHER L. BOWLIN, DPM		
Insurance	Med Primary: MEDICARE-TN (MEDICARE) Insurance # : 8T46AN5AD84 Med Secondary: MEDICO INSURANCE COMPANY (MEDICARE SUPPLEMENT) Insurance # : 000M1M150968 Prescription: OPTUMRX - Member is eligible. details		

Chief Complaint

post-op check, Wound Care Follow-up

Patient's Care Team

Podiatrist: CHRISTOPHER L BOWLIN DPM: 1415 OLD WEISGARBER RD STE 350, KNOXVILLE, TN 37909, Ph (865) 588-1605, Fax (865) 588-1608 NPI: 1922311547
Primary Care Provider: NATHAN GRAY: 11808 KINGSTON PIKE STE 160, KNOXVILLE, TN 37934-3803, Ph (865) 966-3940, Fax (833) 908-2091 NPI: 1952347999

Patient's Pharmacies

WALGREENS DRUG STORE #05053 (ERX): 601 N CAMPBELL STATION RD, FARRAGUT, TN 37934, Ph (865) 675-2061, Fax (865) 675-0789

Vitals

2025-09-08 09:33

Ht: 6 ft**Allergies**

Reviewed Allergies

CODEINE: Nausea (Mild)**PENICILLINS****Medications**

PATTERSON, Randy (Legal name: Jon Patterson) | (id #1688, dob: 11/05/1956)

Reviewed Medications

ALPRAZolam 0.5 mg tablet TAKE 1/2 TABLET BY MOUTH DAILY AT BEDTIME AS NEEDED FOR SLEEP OR ANXIETY Internal Note: for sleep only	08/14/25	filled
BD LUER-LOK SYRINGE 3 ML 22 X 1 1/2" USE TO INJECT TESTOSTERONE	05/31/22	renewed
BD REGULAR BEVEL NEEDLES 18 GAUGE X 1" USE TO DRAW	05/02/22	renewed
ciprofloxacin 750 mg tablet TAKE 1 TABLET BY MOUTH EVERY 12 HOURS FOR 10 DAYS	08/30/25	filled
clotrimazole 1 % topical cream APPLY TOPICALLY TWICE DAILY	12/07/23	filled
fluconazole 150 mg tablet TAKE 1 TABLET BY MOUTH EVERY DAY	12/16/23	filled
HYDROcodone 5 mg-acetaminophen 325 mg tablet TAKE 1 TABLET BY MOUTH EVERY 6 HOURS X 3 DAYS AS NEEDED FOR PAIN	08/30/25	filled
ibuprofen 800 mg tablet	02/19/24	filled
linezolid 600 mg tablet TAKE 1 TABLET BY MOUTH EVERY 12 HOURS FOR 10 DAYS	08/30/25	filled
lisinopriL 10 mg-hydrochlorothiazide 12.5 mg tablet TAKE 1 TABLET BY MOUTH DAILY	11/02/24	filled
metFORMIN ER 500 mg tablet,extended release 24 hr TAKE 1 TABLET BY MOUTH EVERY DAY	01/20/25	filled
Mounjaro 10 mg/0.5 mL subcutaneous pen injector INJECT 10 MG UNDER THE SKIN ONE DAY A WEEK	04/21/25	filled
Ozempic 0.25 mg or 0.5 mg (2 mg/3 mL) subcutaneous pen injector INJECT 0.5 MG UNDER THE SKIN EVERY WEEK	12/29/23	filled
tamsulosin 0.4 mg capsule TAKE 2 CAPSULES BY MOUTH DAILY	08/02/25	filled
testosterone cypionate 200 mg/mL intramuscular oil ADMINISTER 1 ML IN THE MUSCLE 1 TIME WEEKLY	07/28/25	filled

Some medications listed in Documents: #1029408, #1032301 could not be added to this patient's chart. Please review these documents and add these medications to the patient's chart manually as needed.

Vaccines

Reviewed Vaccines

PATTERSON, Randy (Legal name: Jon Patterson) | (id #1688, dob: 11/05/1956)

Vaccine Type	Date	Amt.	Route	Site	NDC	Lot #	Mfr.	Exp. Date	VIS	VIS Given	Vaccinator
COVID-19											
COVID-19 (SARS-COV-2) vaccine, unspecified	10/01/22										
COVID-19 vaccine, vector-nr, rS-Ad26, PF, 0.5 mL (Janssen)	12/23/21	0.5 mL	Intramuscular			1855191	Janssen				
COVID-19 vaccine, vector-nr, rS-Ad26, PF, 0.5 mL (Janssen)	04/08/21	0.5 mL	Intramuscular			042A21A	Janssen				
Influenza											
influenza, high dose seasonal	08/22/24	0.5 mL	Intramuscular	Arm, Left Upper		U8429CA	Sanofi Pasteur				
influenza, injectable, quadrivalent, preservative free	10/15/23	0.5 mL	Intramuscular			371610	Seqirus				
influenza nasal	10/01/22										
influenza, high-dose, quadrivalent	09/21/22	0.7 mL	Intramuscular			UT7715CA	Sanofi Pasteur				
Influenza, injectable, MDCK, preservative free, quadrivalent	10/02/21	0.5 mL	Intramuscular			308438	Seqirus				
influenza, injectable, quadrivalent, preservative free	08/15/20	0.5 mL	Intramuscular			UJ428AB	Sanofi Pasteur				
influenza, injectable, quadrivalent	08/05/20										
Pneumococcal											
Pneumococcal conjugate PCV20, polysaccharide CRM197 conjugate, adjuvant, PF	08/22/24	0.5 mL	Intramuscular	Arm, Right Upper		HH9323	Pfizer, Inc				
Zoster											
zoster recombinant	12/21/21	1 ML	Intramuscular			333TE	GlaxoSmithKline				
zoster recombinant	10/16/21	1 ML	Intramuscular			4273E	GlaxoSmithKline				

Problems**Reviewed Problems**

- Peripheral vascular disease - Onset: 05/12/2025
- Hormone replacement therapy - Onset: 06/03/2019
- Uncontrolled type 2 diabetes mellitus - Onset: 08/27/2019
- Family history of Cardiovascular disease - Onset: 08/27/2019
- Adult health examination - Onset: 06/03/2019
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- Primary hypogonadism - Onset: 06/03/2019
- Screening for malignant neoplasm of prostate - Onset: 06/03/2019
- Corns and callus - Onset: 05/12/2025
- Disorder of nervous system due to type 2 diabetes mellitus - Onset: 05/12/2025
- Foot callus - Onset: 05/12/2025
- Walking disability - Onset: 05/12/2025
- Onychomycosis - Onset: 05/12/2025
- Antalgic gait - Onset: 05/12/2025
- Ulcer of toe due to type 2 diabetes mellitus - Onset: 05/12/2025
- Ulcer of left foot due to type 2 diabetes mellitus - Onset: 08/27/2025
- Wound cellulitis - Onset: 08/27/2025

Family History**Reviewed Family History**

Father - Diabetes mellitus

Social History**Reviewed Social History****Advance Directive**

Do you have an advance directive?: No

Do you have a medical power of attorney?: No

Substance Use

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

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

What was the date of your most recent tobacco screening?: 06/30/2025

Has tobacco cessation counseling been provided?: Yes

PATTERSON, Randy (Legal name: Jon Patterson) | (id #1688, dob: 11/05/1956)

On what date was tobacco cessation counseling provided?: 06/30/2025

What is your level of alcohol consumption?: Occasional

How many times per week do you consume alcohol?: Less than 1 time per week

How many years have you consumed alcohol?: 30

How many days in the past year have you consumed 5 or more drinks? : 0

Have you ever been counseled for unhealthy alcohol use?: No

Do you use any illicit or recreational drugs?: No

How many times in the past year have you used an illegal drug or used a prescription medication for nonmedical reasons?: 0

What is your level of caffeine consumption?: Moderate

Diet and Exercise

What is your exercise level?: Occasional

How many times per week do you exercise?: 5-7 times per week

Activities of Daily Living

Are you able to care for yourself independently?: Yes

Are you able to walk?: Yes: walks without restrictions

Surgical & Procedure History

Reviewed Surgical & Procedure History

- Implantation of penile prosthesis

Past Medical History

Reviewed Past Medical History

Arthritis: **Y**Hypertension: **Y****HPI**

68-year-old neuropathic male here today for follow-up. Doing good other than he is on been barefoot doing some tai chi/karate a on a hardwood floor he has a concerning ecchymotic bruise left subfifth MTP he also has callus to the right subfifth MTP to a lesser degree just conversation today on it is probably not a good idea to do any barefoot activity as we discussed before he does have a history of significant callus deposition with loss of protective sensation that is given his wounds. My recommendation was very clear that we just cannot do barefoot on hardwood floor it is just going to cause hyperkeratosis shown that wife the picture of his foot during my clinical examination today I just need to get him on some inserts otherwise everything is within normal limits and they look fantastic with activity.

Here today spotcheck before vacation doing well no breaks to the skin.

Here today acute sick visit blowup left foot fifth toe MTP wound reulceration. Had a day of barefoot in the pool continue walking and no offload wound has worsened since then. He presents today with pain erythema edema fever chills with some streaking up his lower leg.

Here today status post hospital discharge doing well needs to be n.p.o. tonight 2 OR tomorrow debridement skin graft as well as negative pressure wound therapy.

Here today postop visit full-thickness graft and wound VAC he looks fantastic.

Here today follow-up the above mentioned here today for wound VAC dressing change left subfifth metatarsal phalangeal joint graft intact final dose of linezolid and Cipro are today has knee scooter here today with wife still has some GI distress but last day of antibiotics are today

ROS

Patient reports no fever, no night sweats, no significant weight gain, no significant weight loss, no exercise intolerance, no chills, and no malaise. He reports no dry eyes, no vision change, no irritation, and no eye disease/injury. He reports no difficulty hearing and no ear pain. He reports no frequent nosebleeds, no nose problems, and no sinus problems. He reports no sore throat, no bleeding gums, no snoring, no dry mouth, no mouth ulcers, no oral abnormalities, no teeth problems, no ringing in the ears, and no sinusitis. He reports no chest pain, no arm pain on exertion, no shortness of breath when walking, no shortness of breath when lying down, no palpitations, no known heart murmur, and no ankle swelling. He reports no cough, no wheezing, no shortness of breath, no coughing up blood, and no sleep apnea. He reports no abdominal pain, no nausea, no vomiting, no constipation, normal appetite, no diarrhea, not vomiting blood, no dyspepsia, and no GERD. He reports no incontinence, no difficulty urinating, no hematuria, and no increased frequency. He reports no muscle aches, no muscle weakness, no arthralgias/joint pain, no back pain, no swelling in the extremities, no neck pain, no difficulty walking, no cramps, no osteoporosis, and no fractures. He reports no abnormal mole, no jaundice, no rashes, no laceration, no non-healing areas, no changes in hair/nails, no psoriasis, no change in skin color, and no breast lump. He reports no loss of consciousness, no weakness, no numbness, no seizures, no dizziness, no migraines, no headaches, no tremor, no gait dysfunction, and no paralysis. He reports no depression, no sleep disturbances, feeling safe in a relationship, no alcohol abuse, no anxiety, no hallucinations, no suicidal thoughts, no mood swings, no memory loss, no agitation, no dementia, and no delirium. He reports no fatigue. He reports no swollen glands, no bruising, no excessive bleeding, no anemia, and no phlebitis. He reports no runny nose, no sinus pressure, no itching, no hives, and no frequent sneezing.

Physical Exam

Constitutional: General Appearance: well-developed. Level of Distress: NAD.

Cardiovascular: Arterial Pulses Right: **dorsalis pedis diminished** and **posterior tibialis diminished**. Arterial Pulses Left: **dorsalis**

PATTERSON, Randy (Legal name: Jon Patterson) | (id #1688, dob: 11/05/1956)

pedis diminished and posterior tibialis diminished. Varicosities Right: **varicosities**. Varicosities Left: **varicosities**.

Integumentary: Foot Right: **dry** and **atrophic**. Foot Left: **dry** and **atrophic**. Great Toe Nail Right: **pain with and without pressure**. Great Toe Nail Left: **pain with and without pressure**.

Neurological: Neurological Right: **gross sensation diminished**. Neurological Left: **gross sensation diminished**.

Musculoskeletal: Muscle Strength and Tone Right: **hypotonicity**. Muscle Strength and Tone Left: **hypotonicity**. Joints, Bones, and Muscles Right: **contractures** and **limited ROM**. Joints, Bones, and Muscles Left: **contractures** and **limited ROM**.

Class: Class B Right: **dorsalis pedis pulse diminished, posterior tibial pulse diminished, hair growth decrease, nail changes, pigmentary changes, and skin texture thin**. Class B Left: **dorsalis pedis pulse diminished, posterior tibial pulse diminished, hair growth decrease, nail changes, pigmentary changes, and skin texture thin**.

Full-thickness graft in place No signs of infection

Assessment / Plan

1. Postoperative visit

Z09: Encounter for follow-up examination after completed treatment for conditions other than malignant neoplasm

Diabetic ulcer of other part of left foot associated with type 2 diabetes mellitus, with fat layer

2. exposed

E11.621: Type 2 diabetes mellitus with foot ulcer

L97.522: Non-pressure chronic ulcer of other part of left foot with fat layer exposed

3. Corns and callus

L84: Corns and callosities

Antalgic

4. gait

R26.89: Other abnormalities of gait and mobility

Disability of

5. walking

R26.2: Difficulty in walking, not elsewhere classified

6. Onychomycosis

B35.1: Tinea unguium

Disorder of nervous system due to type 2 diabetes

7. mellitus

E11.69: Type 2 diabetes mellitus with other specified complication

G98.8: Other disorders of nervous system

8. Peripheral vascular disease

I73.9: Peripheral vascular disease, unspecified

Callus of

9. foot

L84: Corns and callosities

Discussion Notes

Wound VAC vacation today back on Thursday for dressing change and we will decide whether or not to do the VAC at that time

Return to Office

- MITCHELL PEARCE, PA for ESTABLISHED PATIENT 15 at KNOXVILLE on 09/11/2025 at 09:45 AM
- Christopher L. Bowlin, DPM for ESTABLISHED PATIENT 15 at KNOXVILLE on 09/15/2025 at 09:45 AM

Encounter Sign-Off

Encounter signed-off by Christopher L. Bowlin, DPM, 09/08/2025.

Encounter performed and documented by Christopher L. Bowlin, DPM

Encounter reviewed & signed by Christopher L. Bowlin, DPM on 09/08/2025 at 10:09 AM