

DUPUY, Stephen W (id #26690, dob: 11/17/1958)

Medical Records - CONFIDENTIAL

FROM: TN - Faculty Physicians

Tina W
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TO:

Name: DUPUY, STEPHEN W

DOB: 11/17/1958

Date Range: 01/01/2025 to 09/17/2025

This document contains the following records of the patient:

- **Encounters and Procedures**

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DUPUY, Stephen W (id #26690, dob: 11/17/1958)

Encounters and Procedures

Clinical Encounter Summaries

DUPUY, Stephen W (id #26690, dob: 11/17/1958)**Encounter Date: 05/27/2025****Patient**

Name	DUPUY, STEPHEN (66yo, M) ID# 26690	Appt. Date/Time	05/27/2025 08:00AM
DOB	11/17/1958	Service Dept.	LAFOLLETTE
Provider	PHILLIP HASLER, DPM		
Insurance	Med Contracts: OPTUM - VA COMMUNITY CARE NETWORK (VA CCN) Insurance # : 414172104 Prescription: EXPRESS SCRIPTS - Member is eligible. details Prescription: OPTUMRX - Member is eligible. details		

Chief Complaint

painful toenails

Patient's Care Team**Primary Care Provider:** S BROOKE LUCAS: 130 INDEPENDENCE LANE 3RD FLOOR, LAFOLLETTE, TN 37766, Ph (423) 563-7666, Fax (423) 562-5373**Podiatrist:** WILLIAM NORRIS, FNP-BC**Patient's Pharmacies****CVS/PHARMACY #7794 (ERX): 106 INDEPENDENCE LN, LAFOLLETTE, TN 37766, Ph (423) 562-9978, Fax (423) 562-5256**
MOUNTAIN HOME VAMC PHARMACY (ERX): SIDNEY AND LAMONT STREET, MOUNTAIN HOME, TN 37684, Ph (423) 979-3434, Fax (423) 979-3019**Vitals**

2025-05-27 08:17

Ht: 6 ft**Wt:** 230 lbs**BMI:** 31.2**Allergies**

Reviewed Allergies

PENICILLINS**Medications**

Reviewed Medications

amiodarone 200 mg tablet 02/09/24 filled
TAKE 2 TABLETS TWICE A DAY FOR 1 WEEK, THEN 1 TABLET TWICE A DAY THEREAFTER**amLODIPine 5 mg tablet** 02/09/24 filled
TAKE 1 TABLET EVERY DAY**atorvastatin 80 mg tablet** 01/20/24 filled
TAKE 1 TABLET BY MOUTH EVERY DAY**furosemide 20 mg tablet** 01/20/24 filled
TAKE 1 TABLET BY MOUTH EVERY DAY**Lantus Solostar U-100 Insulin 100 unit/mL (3 mL) subcutaneous pen** 01/20/24 filled
INJECT 20 UNITS UNDER THE SKIN ONCE DAILY FOR 30 DAYS**losartan 50 mg tablet** 01/09/24 filled
TAKE 1 TABLET BY MOUTH EVERY DAY**metoprolol succinate ER 50 mg tablet,extended release 24 hr** 01/20/24 filled
TAKE 1 TABLET BY MOUTH EVERY DAY

DUPUY, Stephen W (id #26690, dob: 11/17/1958)**Vaccines****Reviewed Vaccines**

Vaccine Type	Date	Amt.	Route	Site	NDC	Lot #	Mfr.	Exp. Date	VIS	VIS Given	Vaccinator
COVID-19											
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	04/01/21	0.5 mL				040A21A	Moderna US, Inc.	12/31/69			
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	03/03/21	0.5 mL				031L20A	Moderna US, Inc.	12/31/69			
Diphtheria, Tetanus											
Td (adult) preservative free	08/29/24	0.5 mL	Intramuscular			U8303AA	Sanofi Pasteur				
Influenza											
influenza, seasonal, injectable	03/02/18										
Zoster											
zoster recombinant	01/12/23	0.5 mL				23E5G	GlaxoSmithKline				

Problems**Reviewed Problems**

- Type 1 diabetes mellitus - Onset: 10/08/2024
- Essential hypertension - Onset: 10/08/2024
- Heart disease - Onset: 10/08/2024
- Cerebrovascular accident - Onset: 10/08/2024

Family History**Reviewed Family History**

Unspecified Relation

- Hypertensive disorder
- Heart disease
- Family history of stroke

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?: 05/27/2025

Has tobacco cessation counseling been provided?: No

What is your level of alcohol consumption?: None

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?: Occasional

Diet and Exercise

What is your exercise level?: None

Activities of Daily Living

Are you able to care for yourself?: Yes

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

Surgical & Procedure History**Reviewed Surgical & Procedure History**

- Cardiopulmonary bypass operation - 02/01/2024
- Appendectomy - 01/01/1968

Past Medical History**Reviewed Past Medical History**Diabetes: **Y**Dyslipidemia: **Y**Hypertension: **Y****HPI**

Patient is a pleasant controlled diabetic 66-year-old male here today for follow-up, states that he saw the wound care clinic here in town on Monday who dressed the wound with silver, states that he has kept the area clean dry dressed since, patient is finished with all oral antibiotics, patient denies erythema edema of his left foot does does admit to some clear drainage, patient states that he denied home health care that I ordered due to the state of his living situation, states that he has been wearing the surgical shoe as directed, denies nausea vomiting fever chills, patient has no other complaints at this time

Pleasant 66-year-old diabetic male presents today for follow-up on wound to his left foot. Patient reports the area has been dressed

DUPUY, Stephen W (id #26690, dob: 11/17/1958)

since last visit. He has been taking his oral clindamycin as directed. He is unable to have home health due to his living situation. He denies any increase in drainage from the area. He has been wearing his postop shoe as directed. He reports that he is unsure of his blood sugars as he does not check them. No other complaints at this time.

Here today follow-up the above-mentioned. He is doing well continuing clindamycin. We are seeing him 3 times a week for packing and dressing change. No signs of local erythema edema odor warmth or drainage. No systemic signs of infection. Wound continues to decrease in size.

Here today follow-up the above-mentioned. The wound is looking very good dry and stable. Wound continues to decrease in size. He did not miss his appointment on Friday for a dressing change and repacking of the wound there is a slight increase in moisture to the wound.

Very pleasant 66-year-old diabetic male who presents to clinic for continued evaluation of ulceration to the left forefoot. This has been present for several weeks. Patient was recently admitted to Tennova North for this where I&D was performed. Patient was subsequently put on IV antibiotics and has currently transition to oral clindamycin. Patient missed appointment earlier this week due to the weather.

Here today follow-up the above mention. Mr. Duby states that he is continuing to do well and is very appreciative of the work we are doing seeing him multiple times per week. He is optimistic and continues to be on board with the treatment plan. He still is unaware of his most recent A1c but did a fingerstick blood glucose today in office postprandial blood sugar in the low 200s. Further discussed the importance of blood sugar control for wound healing no new complaints today

Here today follow-up the above mention. He states he is doing well. Is continuing to do dry dressing changes 3 times a week as he is coming to the clinic. He has been approved for a skin graft will start skin graft on Friday with Hasler.

Very pleasant 66-year-old diabetic male who presents to clinic for continued evaluation of ulceration to the lateral aspect of the left forefoot. He is here today for graft application. Patient recently finished course of oral clindamycin per C&S results. Graft approval has been obtained from the VA for Inova matrix. Patient denies having any constitutional symptoms. He has been compliant with dressing changes and postop shoe.

Here today continued evaluation of ulceration to the left foot. Patient recently had graft placement this past Friday. He presents to clinic with dressing clean dry and intact. Just received paperwork from the VA including labs.

Here today for continued evaluation of ulceration left foot. Patient presents to clinic with dressing clean dry and intact. Postop shoe is in place. Received labs yesterday from Tennova. Hemoglobin A1c performed this week was noted to be 7.3. As such we are able to continue graft placement. He is here for graft #2 today.

Here today for dressing change. Patient reports site is doing well. He denies having any constitutional symptoms.

Very pleasant 66-year-old diabetic male who presents to clinic for continued evaluation of ulceration to the left foot. Patient presents to clinic for graft application #3 today. He denies having any constitutional symptoms. He has been compliant with dressing changes.

Here today continued evaluation ulceration left foot. He is here today for dressing change. Patient reports site is doing very well. He denies having any constitutional symptoms.

Very pleasant 66-year-old diabetic male who presents to clinic for continued evaluation of ulceration left foot. He is here for graft application #4 today. Patient reports site is doing very well.

Here today for dressing change due to ulceration left forefoot.

Here today continue evaluation ulceration left forefoot. He is here to today for graft application #5. Patient has been compliant with dressing changes and conservative treatment protocol. He denies have any constitutional symptoms today.

Here today graft application #6.

Here today for continued evaluation ulceration left forefoot as well as dressing change.

Here today continued valuation ulceration left forefoot. Patient reports site is doing well. He is here today for graft application.

Very pleasant 66-year-old diabetic male who presents to clinic for continued management of ulceration to the left forefoot. He is here today for dressing change and evaluation.

Very pleasant 66-year-old diabetic male who presents to clinic for continued management of ulceration to the left forefoot. Here today for graft application #8. Patient denies having any constitutional symptoms at this time.

Here today for dressing change and continued management of ulceration to the left forefoot.

Here today continue management ulceration left forefoot. He is here for graft application.

Very pleasant 66-year-old diabetic male who presents to clinic for continued management of ulceration left foot.

Here today continued management ulceration left foot. Patient reports site continues to feel better and improved. He has been

DUPUY, Stephen W (id #26690, dob: 11/17/1958)

compliant with postop shoe and dressing changes. Patient presents for possible graft application.

Here today continue management ulceration left foot. Very pleasant 66-year-old diabetic male with long history of infection status post I&D with resultant ulceration to the left forefoot. Treatment has consisted of graft application with significant improvement over the past couple of months. He presents for continued management of this ulceration. Patient denies having any constitutional symptoms at this time.

Very pleasant 66-year-old diabetic male who presents to clinic for continued management of ulceration left foot. Patient recently evaluated again by cardiology and is now wearing a heart monitor today. denies having any constitutional symptoms.

Here again today for continued evaluation of ulceration left forefoot. He presents with dressing clean, dry, and intact. Neg for signs of infection.

ROS

Patient reports **increased urinary frequency**. He reports **depression**.

Physical Exam

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

Cardiovascular: Arterial Pulses Right: **dorsalis pedis diminished** and **posterior tibialis diminished** and capillary refill test immediate. Arterial Pulses Left: **dorsalis pedis diminished** and **posterior tibialis diminished** and capillary refill test immediate. Edema Right: **edema**. Edema Left: **edema**. Varicosities Right: **varicosities**. Varicosities Left: **varicosities**.

Integumentary: Foot Right: no lesions, ulcers, skin rash, or subcutaneous nodules; **dry, atrophic, and hair absent**; and skin temperature normal. Foot Left: no lesions, ulcers, skin rash, or subcutaneous nodules; **dry, atrophic, and hair absent**; and skin temperature normal.

Neurological: Neurological Right: **paresthesias, gross sensation diminished, and pin prick sensation decreased**. Neurological Left: **paresthesias, gross sensation diminished, and pin prick sensation decreased**. Manual Muscle Test Right: plantarflexors 5/5 (movement against resistance), dorsiflexors 5/5 (movement against resistance), invertors 5/5 (movement against resistance), and evertors 5/5 (movement against resistance). Manual Muscle Test Left: plantarflexors 5/5 (movement against resistance), dorsiflexors 5/5 (movement against resistance), invertors 5/5 (movement against resistance), and evertors 5/5 (movement against resistance).

Musculoskeletal: Muscle Strength and Tone Right: normal and normal tone. Muscle Strength and Tone Left: normal and normal tone. Joints, Bones, and Muscles Right: **contractures, limited ROM, bony abnormalities, and pain to palpation**. Joints, Bones, and Muscles Left: **contractures, limited ROM, bony abnormalities, and pain to palpation**.

Class: Class B Right: **skin texture shiny and thin; dorsalis pedis pulse diminished, posterior tibial pulse diminished, advanced trophic changes, hair growth decrease, nail changes, and pigmentary changes**; and skin color normal and no redness. Class B Left: **skin texture shiny and thin; dorsalis pedis pulse diminished, posterior tibial pulse diminished, advanced trophic changes, hair growth decrease, nail changes, and pigmentary changes**; and skin color normal and no redness. Class C Right: **burning, paresthesias, edema, cold foot, and temperature changes** and no claudication. Class C Left: **burning, paresthesias, edema, cold foot, and temperature changes** and no claudication.

0.3cm x 0.2cm x 0.3cm full thickness ulceration of dorsal Left 5th MTP.

No erythema edema odor warmth or drainage today

A red/granular wound bed is noted throughout.

wound continues to decrease in size and improve in appearance

Procedure Documentation**Skin Graft-Innovamatrix:**

Skin Graft To advance wound healing, an appropriate skin substitute was selected and applied to wound after debridement.

Skin Substitute: InnovaMatrix AC

Size--2x2

Product ID--IMX-0202-01

Lot Number--061224-1

Expiration Date--6/12/2026

Application number--#13

Zero graft wastage

Assessment / Plan

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Ulcer of left foot with fat layer

1. exposed

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

Disorder of nervous system due to type 2 diabetes

2. mellitus

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

G98.8: Other disorders of nervous system

Antalgic

3. gait

R26.89: Other abnormalities of gait and mobility

Disability of

4. walking

R26.2: Difficulty in walking, not elsewhere classified

Discussion Notes

Very pleased with progress. Ulceration continues to decrease and size. Debridement was performed today with a curette after sterile prep.incident. Thorough wound bed preparation was performed. Graft application #13 was applied today with Inova matrix. Patient to continue offloading and dressing changes. He has been very compliant with this. Great progress has been made over the last 1 to 2 weeks. He is to call with any questions or concerns. I will see him back in 1 week.

Return to Office

- PHILLIP HASLER, DPM for ESTABLISHED PATIENT 15 at LAFOLLETTE on 06/03/2025 at 08:00 AM

Encounter Sign-Off

Encounter signed-off by PHILLIP HASLER, DPM, 05/27/2025.

Encounter performed and documented by PHILLIP HASLER, DPM

Encounter reviewed & signed by PHILLIP HASLER, DPM on 05/27/2025 at 08:31 AM

DUPUY, Stephen W (id #26690, dob: 11/17/1958)**Encounter Date: 05/20/2025**

Patient

Name	DUPUY, STEPHEN (66yo, M) ID# 26690	Appt. Date/Time	05/20/2025 08:00AM
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DOB	11/17/1958	Service Dept.	LAFOLLETTE
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Provider	PHILLIP HASLER, DPM
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Insurance	Med Contracts: OPTUM - VA COMMUNITY CARE NETWORK (VA CCN) Insurance # : 414172104 Prescription: EXPRESS SCRIPTS - Member is eligible. details Prescription: OPTUMRX - Member is eligible. details
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Chief Complaint

Wound Care Follow-up

Patient's Care Team

Primary Care Provider: S BROOKE LUCAS: 130 INDEPENDENCE LANE 3RD FLOOR, LAFOLLETTE, TN 37766, Ph (423) 563-7666, Fax (423) 562-5373**Podiatrist:** WILLIAM NORRIS, FNP-BC

Patient's Pharmacies

CVS/PHARMACY #7794 (ERX): 106 INDEPENDENCE LN, LAFOLLETTE, TN 37766, Ph (423) 562-9978, Fax (423) 562-5256
MOUNTAIN HOME VAMC PHARMACY (ERX): SIDNEY AND LAMONT STREET, MOUNTAIN HOME, TN 37684, Ph (423) 979-3434, Fax (423) 979-3019

Vitals

2025-05-20 08:18

Ht: 6 ft**Wt:** 230 lbs**BMI:** 31.2

Allergies

Reviewed Allergies

PENICILLINS

Medications

Reviewed Medications

amiodarone 200 mg tablet TAKE 2 TABLETS TWICE A DAY FOR 1 WEEK, THEN 1 TABLET TWICE A DAY THEREAFTER	02/09/24	filled
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amLODIPine 5 mg tablet TAKE 1 TABLET EVERY DAY	02/09/24	filled
--	----------	--------

atorvastatin 80 mg tablet TAKE 1 TABLET BY MOUTH EVERY DAY	01/20/24	filled
--	----------	--------

furosemide 20 mg tablet TAKE 1 TABLET BY MOUTH EVERY DAY	01/20/24	filled
--	----------	--------

Lantus Solostar U-100 Insulin 100 unit/mL (3 mL) subcutaneous pen INJECT 20 UNITS UNDER THE SKIN ONCE DAILY FOR 30 DAYS	01/20/24	filled
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losartan 50 mg tablet TAKE 1 TABLET BY MOUTH EVERY DAY	01/09/24	filled
--	----------	--------

metoprolol succinate ER 50 mg tablet,extended release 24 hr TAKE 1 TABLET BY MOUTH EVERY DAY	01/20/24	filled
--	----------	--------

DUPUY, Stephen W (id #26690, dob: 11/17/1958)

Vaccines

Reviewed Vaccines

Vaccine Type	Date	Amt.	Route	Site	NDC	Lot #	Mfr.	Exp. Date	VIS	VIS Given	Vaccinator
COVID-19											
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	04/01/21	0.5 mL				040A21A	Moderna US, Inc.	12/31/69			
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	03/03/21	0.5 mL				031L20A	Moderna US, Inc.	12/31/69			
Diphtheria, Tetanus											
Td (adult) preservative free	08/29/24	0.5 mL	Intramuscular			U8303AA	Sanofi Pasteur				
Influenza											
influenza, seasonal, injectable	03/02/18										
Zoster											
zoster recombinant	01/12/23	0.5 mL				23E5G	GlaxoSmithKline				

Problems

Reviewed Problems

- Type 1 diabetes mellitus - Onset: 10/08/2024
- Essential hypertension - Onset: 10/08/2024
- Heart disease - Onset: 10/08/2024
- Cerebrovascular accident - Onset: 10/08/2024

Family History

Reviewed Family History

Unspecified Relation

- Hypertensive disorder
- Heart disease
- Family history of stroke

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?: 05/20/2025

Has tobacco cessation counseling been provided?: No

What is your level of alcohol consumption?: None

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?: Occasional

Diet and Exercise

What is your exercise level?: None

Activities of Daily Living

Are you able to care for yourself?: Yes

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

Surgical & Procedure History

Reviewed Surgical & Procedure History

- Cardiopulmonary bypass operation - 02/01/2024
- Appendectomy - 01/01/1968

Past Medical History

Reviewed Past Medical History

Diabetes: **Y**Dyslipidemia: **Y**Hypertension: **Y**

Screening

Name	Score	Notes
Steady Fall Risk - 3 item	1	

HPI

DUPUY, Stephen W (id #26690, dob: 11/17/1958)

Patient is a pleasant controlled diabetic 66-year-old male here today for follow-up, states that he saw the wound care clinic here in town on Monday who dressed the wound with silver, states that he has kept the area clean dry dressed since, patient is finished with all oral antibiotics, patient denies erythema edema of his left foot does does admit to some clear drainage, patient states that he denied home health care that I ordered due to the state of his living situation, states that he has been wearing the surgical shoe as directed, denies nausea vomiting fever chills, patient has no other complaints at this time

Pleasant 66-year-old diabetic male presents today for follow-up on wound to his left foot. Patient reports the area has been dressed since last visit. He has been taking his oral clindamycin as directed. He is unable to have home health due to his living situation. He denies any increase in drainage from the area. He has been wearing his postop shoe as directed. He reports that he is unsure of his blood sugars as he does not check them. No other complaints at this time.

Here today follow-up the above-mentioned. He is doing well continuing clindamycin. We are seeing him 3 times a week for packing and dressing change. No signs of local erythema edema odor warmth or drainage. No systemic signs of infection. Wound continues to decrease in size.

Here today follow-up the above-mentioned. The wound is looking very good dry and stable. Wound continues to decrease in size. He did not miss his appointment on Friday for a dressing change and repacking of the wound there is a slight increase in moisture to the wound.

Very pleasant 66-year-old diabetic male who presents to clinic for continued evaluation of ulceration to the left forefoot. This has been present for several weeks. Patient was recently admitted to Tennova North for this where I&D was performed. Patient was subsequently put on IV antibiotics and has currently transition to oral clindamycin. Patient missed appointment earlier this week due to the weather.

Here today follow-up the above mention. Mr. Duby states that he is continuing to do well and is very appreciative of the work we are doing seeing him multiple times per week. He is optimistic and continues to be on board with the treatment plan. He still is unaware of his most recent A1c but did a fingerstick blood glucose today in office postprandial blood sugar in the low 200s. Further discussed the importance of blood sugar control for wound healing no new complaints today

Here today follow-up the above mention. He states he is doing well. Is continuing to do dry dressing changes 3 times a week as he is coming to the clinic. He has been approved for a skin graft will start skin graft on Friday with Hasler.

Very pleasant 66-year-old diabetic male who presents to clinic for continued evaluation of ulceration to the lateral aspect of the left forefoot. He is here today for graft application. Patient recently finished course of oral clindamycin per C&S results. Graft approval has been obtained from the VA for Inova matrix. Patient denies having any constitutional symptoms. He has been compliant with dressing changes and postop shoe.

Here today continued evaluation of ulceration to the left foot. Patient recently had graft placement this past Friday. He presents to clinic with dressing clean dry and intact. Just received paperwork from the VA including labs.

Here today for continued evaluation of ulceration left foot. Patient presents to clinic with dressing clean dry and intact. Postop shoe is in place. Received labs yesterday from Tennova. Hemoglobin A1c performed this week was noted to be 7.3. As such we are able to continue graft placement. He is here for graft #2 today.

Here today for dressing change. Patient reports site is doing well. He denies having any constitutional symptoms.

Very pleasant 66-year-old diabetic male who presents to clinic for continued evaluation of ulceration to the left foot. Patient presents to clinic for graft application #3 today. He denies having any constitutional symptoms. He has been compliant with dressing changes.

Here today continued evaluation ulceration left foot. He is here today for dressing change. Patient reports site is doing very well. He denies having any constitutional symptoms.

Very pleasant 66-year-old diabetic male who presents to clinic for continued evaluation of ulceration left foot. He is here for graft application #4 today. Patient reports site is doing very well.

Here today for dressing change due to ulceration left forefoot.

Here today continue evaluation ulceration left forefoot. He is here to today for graft application #5. Patient has been compliant with dressing changes and conservative treatment protocol. He denies have any constitutional symptoms today.

Here today graft application #6.

Here today for continued evaluation ulceration left forefoot as well as dressing change.

Here today continued valuation ulceration left forefoot. Patient reports site is doing well. He is here today for graft application.

Very pleasant 66-year-old diabetic male who presents to clinic for continued management of ulceration to the left forefoot. He is here today for dressing change and evaluation.

Very pleasant 66-year-old diabetic male who presents to clinic for continued management of ulceration to the left forefoot. Here today for graft application #8. Patient denies having any constitutional symptoms at this time.

DUPUY, Stephen W (id #26690, dob: 11/17/1958)

Here today for dressing change and continued management of ulceration to the left forefoot.

Here today continue management ulceration left forefoot. He is here for graft application.

Very pleasant 66-year-old diabetic male who presents to clinic for continued management of ulceration left foot.

Here today continued management ulceration left foot. Patient reports site continues to feel better and improved. He has been compliant with postop shoe and dressing changes. Patient presents for possible graft application.

Here today continue management ulceration left foot. Very pleasant 66-year-old diabetic male with long history of infection status post I&D with resultant ulceration to the left forefoot. Treatment has consisted of graft application with significant improvement over the past couple of months. He presents for continued management of this ulceration. Patient denies having any constitutional symptoms at this time.

Very pleasant 66-year-old diabetic male who presents to clinic for continued management of ulceration left foot. Patient recently evaluated again by cardiology and is now wearing a patient denies having any constitutional symptoms. Heart monitor today.

ROS

Patient reports **increased urinary frequency**. He reports **depression**.

Physical Exam

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

Cardiovascular: Arterial Pulses Right: **dorsalis pedis diminished** and **posterior tibialis diminished** and capillary refill test immediate. Arterial Pulses Left: **dorsalis pedis diminished** and **posterior tibialis diminished** and capillary refill test immediate. Edema Right: **edema**. Edema Left: **edema**. Varicosities Right: **varicosities**. Varicosities Left: **varicosities**.

Integumentary: Foot Right: no lesions, ulcers, skin rash, or subcutaneous nodules; **dry, atrophic**, and **hair absent**; and skin temperature normal. Foot Left: no lesions, ulcers, skin rash, or subcutaneous nodules; **dry, atrophic**, and **hair absent**; and skin temperature normal.

Neurological: Neurological Right: **paresthesias**, **gross sensation diminished**, and **pin prick sensation decreased**. Neurological Left: **paresthesias**, **gross sensation diminished**, and **pin prick sensation decreased**. Manual Muscle Test Right: plantarflexors 5/5 (movement against resistance), dorsiflexors 5/5 (movement against resistance), invertors 5/5 (movement against resistance), and evertors 5/5 (movement against resistance). Manual Muscle Test Left: plantarflexors 5/5 (movement against resistance), dorsiflexors 5/5 (movement against resistance), invertors 5/5 (movement against resistance), and evertors 5/5 (movement against resistance).

Musculoskeletal: Muscle Strength and Tone Right: normal and normal tone. Muscle Strength and Tone Left: normal and normal tone. Joints, Bones, and Muscles Right: **contractures**, **limited ROM**, **bony abnormalities**, and **pain to palpation**. Joints, Bones, and Muscles Left: **contractures**, **limited ROM**, **bony abnormalities**, and **pain to palpation**.

Class: Class B Right: **skin texture shiny** and **thin**; **dorsalis pedis pulse diminished**, **posterior tibial pulse diminished**, **advanced trophic changes**, **hair growth decrease**, **nail changes**, and **pigmentary changes**; and skin color normal and no redness. Class B Left: **skin texture shiny** and **thin**; **dorsalis pedis pulse diminished**, **posterior tibial pulse diminished**, **advanced trophic changes**, **hair growth decrease**, **nail changes**, and **pigmentary changes**; and skin color normal and no redness. Class C Right: **burning**, **paresthesias**, **edema**, **cold foot**, and **temperature changes** and no claudication. Class C Left: **burning**, **paresthesias**, **edema**, **cold foot**, and **temperature changes** and no claudication.

0.5cm x 0.2cm x 0.3cm full thickness ulceration of dorsal Left 5th MTP.

No erythema edema odor warmth or drainage today

A red/granular wound bed is noted throughout.

wound continues to decrease in size and improve in appearance

Procedure Documentation**Skin Graft-Innovamatrix:**

Skin Graft To advance wound healing, an appropriate skin substitute was selected and applied to wound after debridement.

Skin Substitute: InnovaMatrix AC

Size--2x2

Product ID--IMX-0202-01

Lot Number--052924-2

Expiration Date--5/29/2026

Application number--#12

Zero graft wastage

DUPUY, Stephen W (id #26690, dob: 11/17/1958)

Assessment / Plan

- Ulcer of left foot with fat layer
1. exposed
- L97.522: Non-pressure chronic ulcer of other part of left foot with fat layer exposed
- Disorder of nervous system due to type 2 diabetes
2. mellitus
- E11.69: Type 2 diabetes mellitus with other specified complication
- G98.8: Other disorders of nervous system
- Antalgic
3. gait
- R26.89: Other abnormalities of gait and mobility
- Disability of
4. walking
- R26.2: Difficulty in walking, not elsewhere classified

Discussion Notes

Graft application #12 of Inova matrix AC was applied today. Very pleased with overall progress of the wound. Ulceration was debrided thoroughly to red healthy granular base with a curette without incident. Negative for any signs of infection. Patient continues to use offloading device as prescribed. I will see him back next week. He is to call with any questions or concerns.

Return to Office

- PHILLIP HASLER, DPM for ESTABLISHED PATIENT 15 at LAFOLLETTE on 05/27/2025 at 08:00 AM

Encounter Sign-Off

Encounter signed-off by PHILLIP HASLER, DPM, 05/20/2025.

Encounter performed and documented by PHILLIP HASLER, DPM
Encounter reviewed & signed by PHILLIP HASLER, DPM on 05/20/2025 at 08:23 AM

DUPUY, Stephen W (id #26690, dob: 11/17/1958)**Encounter Date: 05/13/2025**

Patient

Name	DUPUY, STEPHEN (66yo, M) ID# 26690	Appt. Date/Time	05/13/2025 08:30AM
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DOB	11/17/1958	Service Dept.	LAFOLLETTE
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Provider	PHILLIP HASLER, DPM
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Insurance	Med Contracts: OPTUM - VA COMMUNITY CARE NETWORK (VA CCN) Insurance # : 414172104 Prescription: EXPRESS SCRIPTS - Member is eligible. details Prescription: OPTUMRX - Member is eligible. details
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Chief Complaint

Wound Care Follow-up

Patient's Care Team

Primary Care Provider: S BROOKE LUCAS: 130 INDEPENDENCE LANE 3RD FLOOR, LAFOLLETTE, TN 37766, Ph (423) 563-7666, Fax (423) 562-5373**Podiatrist:** WILLIAM NORRIS, FNP-BC

Patient's Pharmacies

CVS/PHARMACY #7794 (ERX): 106 INDEPENDENCE LN, LAFOLLETTE, TN 37766, Ph (423) 562-9978, Fax (423) 562-5256
MOUNTAIN HOME VAMC PHARMACY (ERX): SIDNEY AND LAMONT STREET, MOUNTAIN HOME, TN 37684, Ph (423) 979-3434, Fax (423) 979-3019

Vitals

2025-05-13 08:17

Ht: 6 ft**Wt:** 230 lbs**BMI:** 31.2

Allergies

Reviewed Allergies

PENICILLINS

Medications

Reviewed Medications

amiodarone 200 mg tablet TAKE 2 TABLETS TWICE A DAY FOR 1 WEEK, THEN 1 TABLET TWICE A DAY THEREAFTER	02/09/24 filled
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amLODIPine 5 mg tablet TAKE 1 TABLET EVERY DAY	02/09/24 filled
--	-----------------

atorvastatin 80 mg tablet TAKE 1 TABLET BY MOUTH EVERY DAY	01/20/24 filled
--	-----------------

furosemide 20 mg tablet TAKE 1 TABLET BY MOUTH EVERY DAY	01/20/24 filled
--	-----------------

Lantus Solostar U-100 Insulin 100 unit/mL (3 mL) subcutaneous pen INJECT 20 UNITS UNDER THE SKIN ONCE DAILY FOR 30 DAYS	01/20/24 filled
---	-----------------

losartan 50 mg tablet TAKE 1 TABLET BY MOUTH EVERY DAY	01/09/24 filled
--	-----------------

metoprolol succinate ER 50 mg tablet,extended release 24 hr TAKE 1 TABLET BY MOUTH EVERY DAY	01/20/24 filled
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DUPUY, Stephen W (id #26690, dob: 11/17/1958)**Vaccines****Reviewed Vaccines**

Vaccine Type	Date	Amt.	Route	Site	NDC	Lot #	Mfr.	Exp. Date	VIS	VIS Given	Vaccinator
COVID-19											
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	04/01/21	0.5 mL				040A21A	Moderna US, Inc.	12/31/69			
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	03/03/21	0.5 mL				031L20A	Moderna US, Inc.	12/31/69			
Diphtheria, Tetanus											
Td (adult) preservative free	08/29/24	0.5 mL	Intramuscular			U8303AA	Sanofi Pasteur				
Influenza											
influenza, seasonal, injectable	03/02/18										
Zoster											
zoster recombinant	01/12/23	0.5 mL				23E5G	GlaxoSmithKline				

Problems**Reviewed Problems**

- Type 1 diabetes mellitus - Onset: 10/08/2024
- Essential hypertension - Onset: 10/08/2024
- Heart disease - Onset: 10/08/2024
- Cerebrovascular accident - Onset: 10/08/2024

Family History**Reviewed Family History**

Unspecified Relation

- Hypertensive disorder
- Heart disease
- Family history of stroke

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?: 05/13/2025

Has tobacco cessation counseling been provided?: No

What is your level of alcohol consumption?: None

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?: Occasional

Diet and Exercise

What is your exercise level?: None

Activities of Daily Living

Are you able to care for yourself?: Yes

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

Surgical & Procedure History**Reviewed Surgical & Procedure History**

- Cardiopulmonary bypass operation - 02/01/2024
- Appendectomy - 01/01/1968

Past Medical History**Reviewed Past Medical History**Diabetes: **Y**Dyslipidemia: **Y**Hypertension: **Y****HPI**

Patient is a pleasant controlled diabetic 66-year-old male here today for follow-up, states that he saw the wound care clinic here in town on Monday who dressed the wound with silver, states that he has kept the area clean dry dressed since, patient is finished with all oral antibiotics, patient denies erythema edema of his left foot does does admit to some clear drainage, patient states that he denied home health care that I ordered due to the state of his living situation, states that he has been wearing the surgical shoe as directed, denies nausea vomiting fever chills, patient has no other complaints at this time

Pleasant 66-year-old diabetic male presents today for follow-up on wound to his left foot. Patient reports the area has been dressed

DUPUY, Stephen W (id #26690, dob: 11/17/1958)

since last visit. He has been taking his oral clindamycin as directed. He is unable to have home health due to his living situation. He denies any increase in drainage from the area. He has been wearing his postop shoe as directed. He reports that he is unsure of his blood sugars as he does not check them. No other complaints at this time.

Here today follow-up the above-mentioned. He is doing well continuing clindamycin. We are seeing him 3 times a week for packing and dressing change. No signs of local erythema edema odor warmth or drainage. No systemic signs of infection. Wound continues to decrease in size.

Here today follow-up the above-mentioned. The wound is looking very good dry and stable. Wound continues to decrease in size. He did not miss his appointment on Friday for a dressing change and repacking of the wound there is a slight increase in moisture to the wound.

Very pleasant 66-year-old diabetic male who presents to clinic for continued evaluation of ulceration to the left forefoot. This has been present for several weeks. Patient was recently admitted to Tennova North for this where I&D was performed. Patient was subsequently put on IV antibiotics and has currently transition to oral clindamycin. Patient missed appointment earlier this week due to the weather.

Here today follow-up the above mention. Mr. Duby states that he is continuing to do well and is very appreciative of the work we are doing seeing him multiple times per week. He is optimistic and continues to be on board with the treatment plan. He still is unaware of his most recent A1c but did a fingerstick blood glucose today in office postprandial blood sugar in the low 200s. Further discussed the importance of blood sugar control for wound healing no new complaints today

Here today follow-up the above mention. He states he is doing well. Is continuing to do dry dressing changes 3 times a week as he is coming to the clinic. He has been approved for a skin graft will start skin graft on Friday with Hasler.

Very pleasant 66-year-old diabetic male who presents to clinic for continued evaluation of ulceration to the lateral aspect of the left forefoot. He is here today for graft application. Patient recently finished course of oral clindamycin per C&S results. Graft approval has been obtained from the VA for Inova matrix. Patient denies having any constitutional symptoms. He has been compliant with dressing changes and postop shoe.

Here today continued evaluation of ulceration to the left foot. Patient recently had graft placement this past Friday. He presents to clinic with dressing clean dry and intact. Just received paperwork from the VA including labs.

Here today for continued evaluation of ulceration left foot. Patient presents to clinic with dressing clean dry and intact. Postop shoe is in place. Received labs yesterday from Tennova. Hemoglobin A1c performed this week was noted to be 7.3. As such we are able to continue graft placement. He is here for graft #2 today.

Here today for dressing change. Patient reports site is doing well. He denies having any constitutional symptoms.

Very pleasant 66-year-old diabetic male who presents to clinic for continued evaluation of ulceration to the left foot. Patient presents to clinic for graft application #3 today. He denies having any constitutional symptoms. He has been compliant with dressing changes.

Here today continued evaluation ulceration left foot. He is here today for dressing change. Patient reports site is doing very well. He denies having any constitutional symptoms.

Very pleasant 66-year-old diabetic male who presents to clinic for continued evaluation of ulceration left foot. He is here for graft application #4 today. Patient reports site is doing very well.

Here today for dressing change due to ulceration left forefoot.

Here today continue evaluation ulceration left forefoot. He is here to today for graft application #5. Patient has been compliant with dressing changes and conservative treatment protocol. He denies have any constitutional symptoms today.

Here today graft application #6.

Here today for continued evaluation ulceration left forefoot as well as dressing change.

Here today continued valuation ulceration left forefoot. Patient reports site is doing well. He is here today for graft application.

Very pleasant 66-year-old diabetic male who presents to clinic for continued management of ulceration to the left forefoot. He is here today for dressing change and evaluation.

Very pleasant 66-year-old diabetic male who presents to clinic for continued management of ulceration to the left forefoot. Here today for graft application #8. Patient denies having any constitutional symptoms at this time.

Here today for dressing change and continued management of ulceration to the left forefoot.

Here today continue management ulceration left forefoot. He is here for graft application.

Very pleasant 66-year-old diabetic male who presents to clinic for continued management of ulceration left foot.

Here today continued management ulceration left foot. Patient reports site continues to feel better and improved. He has been

DUPUY, Stephen W (id #26690, dob: 11/17/1958)

compliant with postop shoe and dressing changes. Patient presents for possible graft application.

Here today continue management ulceration left foot. Very pleasant 66-year-old diabetic male with long history of infection status post I&D with resultant ulceration to the left forefoot. Treatment has consisted of graft application with significant improvement over the past couple of months. He presents for continued management of this ulceration. Patient denies having any constitutional symptoms at this time.

ROS

Patient reports **increased urinary frequency**. He reports **depression**.

Physical Exam

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

Cardiovascular: Arterial Pulses Right: **dorsalis pedis diminished** and **posterior tibialis diminished** and capillary refill test immediate. Arterial Pulses Left: **dorsalis pedis diminished** and **posterior tibialis diminished** and capillary refill test immediate. Edema Right: **edema**. Edema Left: **edema**. Varicosities Right: **varicosities**. Varicosities Left: **varicosities**.

Integumentary: Foot Right: no lesions, ulcers, skin rash, or subcutaneous nodules; **dry, atrophic, and hair absent**; and skin temperature normal. Foot Left: no lesions, ulcers, skin rash, or subcutaneous nodules; **dry, atrophic, and hair absent**; and skin temperature normal.

Neurological: Neurological Right: **paresthesias, gross sensation diminished, and pin prick sensation decreased**. Neurological Left: **paresthesias, gross sensation diminished, and pin prick sensation decreased**. Manual Muscle Test Right: plantarflexors 5/5 (movement against resistance), dorsiflexors 5/5 (movement against resistance), invertors 5/5 (movement against resistance), and evertors 5/5 (movement against resistance). Manual Muscle Test Left: plantarflexors 5/5 (movement against resistance), dorsiflexors 5/5 (movement against resistance), invertors 5/5 (movement against resistance), and evertors 5/5 (movement against resistance).

Musculoskeletal: Muscle Strength and Tone Right: normal and normal tone. Muscle Strength and Tone Left: normal and normal tone. Joints, Bones, and Muscles Right: **contractures, limited ROM, bony abnormalities, and pain to palpation**. Joints, Bones, and Muscles Left: **contractures, limited ROM, bony abnormalities, and pain to palpation**.

Class: Class B Right: **skin texture shiny and thin; dorsalis pedis pulse diminished, posterior tibial pulse diminished, advanced trophic changes, hair growth decrease, nail changes, and pigmentary changes**; and skin color normal and no redness. Class B Left: **skin texture shiny and thin; dorsalis pedis pulse diminished, posterior tibial pulse diminished, advanced trophic changes, hair growth decrease, nail changes, and pigmentary changes**; and skin color normal and no redness. Class C Right: **burning, paresthesias, edema, cold foot, and temperature changes** and no claudication. Class C Left: **burning, paresthesias, edema, cold foot, and temperature changes** and no claudication.

0.6cm x 0.2cm x 0.3cm full thickness ulceration of dorsal Left 5th MTP.
No erythema edema odor warmth or drainage today
A red/granular wound bed is noted throughout.
wound continues to decrease in size and improve in appearance

Procedure Documentation**Skin Graft-Innovamatrix:**

Skin Graft To advance wound healing, an appropriate skin substitute was selected and applied to wound after debridement.

Skin Substitute: InnovaMatrix AC

Size--2x2

Product ID--IMX-0202-01

Lot Number--052924-1

Expiration Date--5/29/2026

Application number--#11

Zero graft wastage

Assessment / Plan**1. Corns and callus**

L84: Corns and callosities

Ulcer of left foot with fat layer

2. exposed

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

DUPUY, Stephen W (id #26690, dob: 11/17/1958)

Disorder of nervous system due to type 2 diabetes

3. mellitus

E11.69: Type 2 diabetes mellitus with other specified complication
G98.8: Other disorders of nervous system

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

Graft application #11 Inova matrix AC was applied today after thorough wound debridement and prep. Healthy granular wound bed appreciated. Negative for signs of infection. Patient to continue postop shoe. He is to keep site clean and dry at all times. I will see him back in 1 week. He is to call with any questions or concerns.

Return to Office

- PHILLIP HASLER, DPM for ESTABLISHED PATIENT 15 at LAFOLLETTE on 05/16/2025 at 08:00 AM

Encounter Sign-Off

Encounter signed-off by PHILLIP HASLER, DPM, 05/13/2025.

Encounter performed and documented by PHILLIP HASLER, DPM

Encounter reviewed & signed by PHILLIP HASLER, DPM on 05/13/2025 at 08:29 AM

Patient

Name	DUPUY, STEPHEN (66yo, M) ID# 26690	Appt. Date/Time	05/06/2025 08:00AM
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DOB	11/17/1958	Service Dept.	LAFOLLETTE
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Provider PHILLIP HASLER, DPM

Insurance	Med Contracts: OPTUM - VA COMMUNITY CARE NETWORK (VA CCN) Insurance # : 414172104 Prescription: EXPRESS SCRIPTS - Member is eligible. details Prescription: OPTUMRX - Member is eligible. details
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Chief Complaint

None recorded.

Patient's Care Team

Primary Care Provider: S BROOKE LUCAS: 130 INDEPENDENCE LANE 3RD FLOOR, LAFOLLETTE, TN 37766, Ph (423) 563-7666, Fax (423) 562-5373

Podiatrist: WILLIAM NORRIS, FNP-BC

Patient's Pharmacies

CVS/PHARMACY #7794 (ERX): 106 INDEPENDENCE LN, LAFOLLETTE, TN 37766, Ph (423) 562-9978, Fax (423) 562-5256
MOUNTAIN HOME VAMC PHARMACY (ERX): SIDNEY AND LAMONT STREET, MOUNTAIN HOME, TN 37684, Ph (423) 979-3434, Fax (423) 979-3019

Vitals

2025-05-06 08:21

Ht: 6 ft

Wt: 230 lbs

BMI: 31.2

Allergies

Reviewed Allergies

PENICILLINS

Medications

Reviewed Medications

amiodarone 200 mg tablet	02/09/24	filled
TAKE 2 TABLETS TWICE A DAY FOR 1 WEEK, THEN 1 TABLET TWICE A DAY THEREAFTER		

amLODIPine 5 mg tablet	02/09/24	filled
TAKE 1 TABLET EVERY DAY		

atorvastatin 80 mg tablet	01/20/24	filled
TAKE 1 TABLET BY MOUTH EVERY DAY		

furosemide 20 mg tablet TAKE 1 TABLET BY MOUTH EVERY DAY	01/20/24 filled
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Lantus Solostar U-100 Insulin 100 unit/mL (3 mL) subcutaneous pen INJECT 20 UNITS UNDER THE SKIN ONCE DAILY FOR 30 DAYS	01/20/24 filled
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losartan 50 mg tablet	01/09/24	filled
TAKE 1 TABLET BY MOUTH EVERY DAY		

metoprolol succinate ER 50 mg tablet,extended release 24 hr TAKE 1 TABLET BY MOUTH EVERY DAY	01/20/24	filled
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DUPUY, Stephen W (id #26690, dob: 11/17/1958)

Vaccines

Reviewed Vaccines

Vaccine Type	Date	Amt.	Route	Site	NDC	Lot #	Mfr.	Exp. Date	VIS	VIS Given	Vaccinator
COVID-19											
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	04/01/21	0.5 mL				040A21A	Moderna US, Inc.	12/31/69			
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	03/03/21	0.5 mL				031L20A	Moderna US, Inc.	12/31/69			
Diphtheria, Tetanus											
Td (adult) preservative free	08/29/24	0.5 mL	Intramuscular			U8303AA	Sanofi Pasteur				
Influenza											
influenza, seasonal, injectable	03/02/18										
Zoster											
zoster recombinant	01/12/23	0.5 mL				23E5G	GlaxoSmithKline				

Problems

Reviewed Problems

- Type 1 diabetes mellitus - Onset: 10/08/2024
- Essential hypertension - Onset: 10/08/2024
- Heart disease - Onset: 10/08/2024
- Cerebrovascular accident - Onset: 10/08/2024

Family History

Reviewed Family History

- Unspecified Relation
- Hypertensive disorder
 - Heart disease
 - Family history of stroke

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?: 05/06/2025

Has tobacco cessation counseling been provided?: No

What is your level of alcohol consumption?: None

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?: Occasional

Diet and Exercise

What is your exercise level?: None

Activities of Daily Living

Are you able to care for yourself?: Yes

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

Surgical & Procedure History

Reviewed Surgical & Procedure History

- Cardiopulmonary bypass operation - 02/01/2024
- Appendectomy - 01/01/1968

Past Medical History

Reviewed Past Medical History

Diabetes: Y

Dyslipidemia: Y

Hypertension: Y

HPI

Patient is a pleasant controlled diabetic 66-year-old male here today for follow-up, states that he saw the wound care clinic here in town on Monday who dressed the wound with silver, states that he has kept the area clean dry dressed since, patient is finished with all oral antibiotics, patient denies erythema edema of his left foot does does admit to some clear drainage, patient states that he denied home health care that I ordered due to the state of his living situation, states that he has been wearing the surgical shoe as directed, denies nausea vomiting fever chills, patient has no other complaints at this time

Pleasant 66-year-old diabetic male presents today for follow-up on wound to his left foot. Patient reports the area has been dressed

DUPUY, Stephen W (id #26690, dob: 11/17/1958)

since last visit. He has been taking his oral clindamycin as directed. He is unable to have home health due to his living situation. He denies any increase in drainage from the area. He has been wearing his postop shoe as directed. He reports that he is unsure of his blood sugars as he does not check them. No other complaints at this time.

Here today follow-up the above-mentioned. He is doing well continuing clindamycin. We are seeing him 3 times a week for packing and dressing change. No signs of local erythema edema odor warmth or drainage. No systemic signs of infection. Wound continues to decrease in size.

Here today follow-up the above-mentioned. The wound is looking very good dry and stable. Wound continues to decrease in size. He did not miss his appointment on Friday for a dressing change and repacking of the wound there is a slight increase in moisture to the wound.

Very pleasant 66-year-old diabetic male who presents to clinic for continued evaluation of ulceration to the left forefoot. This has been present for several weeks. Patient was recently admitted to Tennova North for this where I&D was performed. Patient was subsequently put on IV antibiotics and has currently transition to oral clindamycin. Patient missed appointment earlier this week due to the weather.

Here today follow-up the above mention. Mr. Duby states that he is continuing to do well and is very appreciative of the work we are doing seeing him multiple times per week. He is optimistic and continues to be on board with the treatment plan. He still is unaware of his most recent A1c but did a fingerstick blood glucose today in office postprandial blood sugar in the low 200s. Further discussed the importance of blood sugar control for wound healing no new complaints today

Here today follow-up the above mention. He states he is doing well. Is continuing to do dry dressing changes 3 times a week as he is coming to the clinic. He has been approved for a skin graft will start skin graft on Friday with Hasler.

Very pleasant 66-year-old diabetic male who presents to clinic for continued evaluation of ulceration to the lateral aspect of the left forefoot. He is here today for graft application. Patient recently finished course of oral clindamycin per C&S results. Graft approval has been obtained from the VA for Inova matrix. Patient denies having any constitutional symptoms. He has been compliant with dressing changes and postop shoe.

Here today continued evaluation of ulceration to the left foot. Patient recently had graft placement this past Friday. He presents to clinic with dressing clean dry and intact. Just received paperwork from the VA including labs.

Here today for continued evaluation of ulceration left foot. Patient presents to clinic with dressing clean dry and intact. Postop shoe is in place. Received labs yesterday from Tennova. Hemoglobin A1c performed this week was noted to be 7.3. As such we are able to continue graft placement. He is here for graft #2 today.

Here today for dressing change. Patient reports site is doing well. He denies having any constitutional symptoms.

Very pleasant 66-year-old diabetic male who presents to clinic for continued evaluation of ulceration to the left foot. Patient presents to clinic for graft application #3 today. He denies having any constitutional symptoms. He has been compliant with dressing changes.

Here today continued evaluation ulceration left foot. He is here today for dressing change. Patient reports site is doing very well. He denies having any constitutional symptoms.

Very pleasant 66-year-old diabetic male who presents to clinic for continued evaluation of ulceration left foot. He is here for graft application #4 today. Patient reports site is doing very well.

Here today for dressing change due to ulceration left forefoot.

Here today continue evaluation ulceration left forefoot. He is here to today for graft application #5. Patient has been compliant with dressing changes and conservative treatment protocol. He denies have any constitutional symptoms today.

Here today graft application #6.

Here today for continued evaluation ulceration left forefoot as well as dressing change.

Here today continued valuation ulceration left forefoot. Patient reports site is doing well. He is here today for graft application.

Very pleasant 66-year-old diabetic male who presents to clinic for continued management of ulceration to the left forefoot. He is here today for dressing change and evaluation.

Very pleasant 66-year-old diabetic male who presents to clinic for continued management of ulceration to the left forefoot. Here today for graft application #8. Patient denies having any constitutional symptoms at this time.

Here today for dressing change and continued management of ulceration to the left forefoot.

Here today continue management ulceration left forefoot. He is here for graft application.

Very pleasant 66-year-old diabetic male who presents to clinic for continued management of ulceration left foot.

Here today continued management ulceration left foot. Patient reports site continues to feel better and improved. He has been

DUPUY, Stephen W (id #26690, dob: 11/17/1958)

compliant with postop shoe and dressing changes. Patient presents for possible graft application.

ROS

Patient reports **increased urinary frequency**. He reports **depression**.

Physical Exam

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

Cardiovascular: Arterial Pulses Right: **dorsalis pedis diminished** and **posterior tibialis diminished** and capillary refill test immediate. Arterial Pulses Left: **dorsalis pedis diminished** and **posterior tibialis diminished** and capillary refill test immediate. Edema Right: **edema**. Edema Left: **edema**. Varicosities Right: **varicosities**. Varicosities Left: **varicosities**.

Integumentary: Foot Right: no lesions, ulcers, skin rash, or subcutaneous nodules; **dry, atrophic, and hair absent**; and skin temperature normal. Foot Left: no lesions, ulcers, skin rash, or subcutaneous nodules; **dry, atrophic, and hair absent**; and skin temperature normal.

Neurological: Neurological Right: **paresthesias, gross sensation diminished, and pin prick sensation decreased**. Neurological Left: **paresthesias, gross sensation diminished, and pin prick sensation decreased**. Manual Muscle Test Right: plantarflexors 5/5 (movement against resistance), dorsiflexors 5/5 (movement against resistance), invertors 5/5 (movement against resistance), and evertors 5/5 (movement against resistance). Manual Muscle Test Left: plantarflexors 5/5 (movement against resistance), dorsiflexors 5/5 (movement against resistance), invertors 5/5 (movement against resistance), and evertors 5/5 (movement against resistance).

Musculoskeletal: Muscle Strength and Tone Right: normal and normal tone. Muscle Strength and Tone Left: normal and normal tone. Joints, Bones, and Muscles Right: **contractures, limited ROM, bony abnormalities, and pain to palpation**. Joints, Bones, and Muscles Left: **contractures, limited ROM, bony abnormalities, and pain to palpation**.

Class: Class B Right: **skin texture shiny and thin; dorsalis pedis pulse diminished, posterior tibial pulse diminished, advanced trophic changes, hair growth decrease, nail changes, and pigmentary changes**; and skin color normal and no redness. Class B Left: **skin texture shiny and thin; dorsalis pedis pulse diminished, posterior tibial pulse diminished, advanced trophic changes, hair growth decrease, nail changes, and pigmentary changes**; and skin color normal and no redness. Class C Right: **burning, paresthesias, edema, cold foot, and temperature changes** and no claudication. Class C Left: **burning, paresthesias, edema, cold foot, and temperature changes** and no claudication.

0.2cm x 0.2cm x 0.3cm full thickness ulceration of dorsal Left 5th MTP.

No erythema edema odor warmth or drainage today

A red/granular wound bed is noted throughout.

wound continues to decrease in size and improve in appearance

Procedure Documentation**Skin Graft-Innovamatrix:**

Skin Graft To advance wound healing, an appropriate skin substitute was selected and applied to wound after debridement.

Skin Substitute: InnovaMatrix AC

Size--2x2

Product ID--IMX-0202-01

Lot Number--052924-2

Expiration Date--5/29/2026

Application number--#10

Zero graft wastage

Assessment / Plan**Ulcer of left foot with fat layer****1. exposed**

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

Disorder of nervous system due to type 2 diabetes**2. mellitus**

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

G98.8: Other disorders of nervous system

Antalgic**3. gait**

R26.89: Other abnormalities of gait and mobility

DUPUY, Stephen W (id #26690, dob: 11/17/1958)

Disability of

4. walking

R26.2: Difficulty in walking, not elsewhere classified

Discussion Notes

Debridement was performed with a curette after sterile prep without incident. Continue to be impressed with progression of the wound. Negative for signs of infection. Patient has been compliant with protocol. Graft application #10 of Inovamatrix AC was applied today without incident. Dry sterile dressing was placed. I will see him back in 1 week. He is to call with any questions or concerns.

Return to Office

- PHILLIP HASLER, DPM for ESTABLISHED PATIENT 15 at LAFOLLETTE on 05/13/2025 at 08:30 AM

Encounter Sign-Off

Encounter signed-off by PHILLIP HASLER, DPM, 05/06/2025.

Encounter performed and documented by PHILLIP HASLER, DPM

Encounter reviewed & signed by PHILLIP HASLER, DPM on 05/06/2025 at 08:37 AM