

**MILLER, Delila (id #29508, dob: 11/21/1942)**

## **Medical Records - CONFIDENTIAL**

**FROM:** TN - Faculty Physicians

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

**Name:** MILLER, DELILA

**DOB:** 11/21/1942

**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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MILLER, Delila (id #29508, dob: 11/21/1942)

Encounters and Procedures

Clinical Encounter Summaries

**MILLER, Delila (id #29508, dob: 11/21/1942)****Encounter Date: 06/25/2025****Patient**

<b>Name</b>	MILLER, DELILA (82yo, F) ID# 29508	<b>Appt. Date/Time</b>	06/25/2025 03:15PM
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<b>DOB</b>	11/21/1942	<b>Service Dept.</b>	LAFOLLETTE
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<b>Provider</b>	WILLIAM NORRIS, FNP-BC
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<b>Insurance</b>	Med Primary: MEDICARE-TN (MEDICARE) Insurance # : 8NG6Y51JQ65 Med Secondary: UMR (MEDICARE SUPPLEMENT) Insurance # : 334000329640 Policy/Group # : 76413423 Prescription: OPTUMRX - Member is eligible. details
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**Chief Complaint**

Wound Care Follow-up

**Patient's Care Team****Primary Care Provider:** TIMOTHY SMITH MD: 950 BAKER HWY STE 4, HUNTSVILLE, TN 37756, Ph (844) 655-1100, Fax (833) 449-4377 NPI: 1720021660**Patient's Pharmacies****ROARK'S PHARMACY (ERX): 19118 ALBERTA ST, ONEIDA, TN 37841, Ph (423) 569-9000, Fax (423) 569-2402****Vitals**

2025-06-25 11:29

**Ht:** 5 ft**Wt:** 140 lbs**BMI:** 27.3**Allergies**

Reviewed Allergies

NKDA

**Medications**

**MILLER, Delila (id #29508, dob: 11/21/1942)**

## Reviewed Medications

**azelastine 137 mcg (0.1 %) nasal spray** 04/15/25 filled  
instill ONE spray in each nostril TWICE DAILY

**colestipol 1 gram tablet** 04/15/25 filled  
TAKE ONE TABLET BY MOUTH EVERY DAY

**estradiol 0.01% (0.1 mg/gram) vaginal cream** 11/20/24 filled  
APPLY ONE APPLICATORFUL VAGINALLY 3 TIMES WEEKLY

**HYDROcodone 7.5 mg-acetaminophen 325 mg tablet** 05/30/25 filled  
TAKE ONE TABLET BY MOUTH EVERY 6 HOURS AS NEEDED

**metoprolol tartrate 25 mg tablet** 01/29/25 filled  
TAKE 1/2 TABLET BY MOUTH TWICE DAILY

**ofloxacin 0.3 % ear drops** 08/02/24 filled  
instill FOUR DROPS into each ear TWICE DAILY FOR 7 DAYS

**Stiolto Respimat 2.5 mcg-2.5 mcg/actuation solution for inhalation** 04/15/25 filled  
INHALE 2 PUFFS BY MOUTH ONCE DAILY

**traMADol 50 mg tablet** 03/10/25 filled  
TAKE TWO TABLETS BY MOUTH THREE TIMES DAILY

## Vaccines

## Reviewed Vaccines

Vaccine Type	Date	Amt.	Route	Site	NDC	Lot #	Mfr.	Exp. Date	VIS	VIS Given	Vaccinator
<b>COVID-19</b>											
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	02/08/21					010M20A	Moderna US, Inc.	12/31/69			
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	01/05/21					025L20A	Moderna US, Inc.	06/25/21			
<b>Diphtheria, Tetanus, Pertussis</b>											
Tdap	06/29/19										
<b>Influenza</b>											
influenza, injectable, quadrivalent, preservative free	11/14/23	0.5 mL	Intramuscular	Deltoid, Left		9CE79	GlaxoSmithKline				
influenza, injectable, quadrivalent, preservative free	10/10/22	0.5 mL	Intramuscular	Deltoid, Right		M3R5B	GlaxoSmithKline				
influenza, high-dose, quadrivalent	12/30/21	0.7 mL	Intramuscular	Arm, Left Upper		UJ64AC	Sanofi Pasteur				
influenza, high-dose, quadrivalent	10/22/20	0.7 mL	Intramuscular	Arm, Left Upper		UJ535AB	Sanofi Pasteur				
influenza, high dose seasonal	11/21/19	0.5 mL	Intramuscular	Arm, Left Upper		UJ308AA	Sanofi Pasteur				
influenza, high dose seasonal	12/21/18	0.5 mL	Intramuscular	Arm, Right Upper		UJ052AB	Sanofi Pasteur				
<b>Pneumococcal</b>											
pneumococcal polysaccharide PPV23	01/23/20	0.5 mL	Intramuscular	Arm, Left Upper		S029265	Merck and Co., Inc.				
pneumococcal conjugate PCV 13	12/21/18	0.5 mL	Intramuscular	Arm, Left Upper		X11327	Pfizer, Inc				

## Problems

**MILLER, Delila (id #29508, dob: 11/21/1942)**

Reviewed Problems

## Family History

Reviewed Family History

## 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?: Current every day 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?: 06/25/2025

Has tobacco cessation counseling been provided?: Yes

On what date was tobacco cessation counseling provided?: 06/25/2025

What is your level of alcohol consumption?: None

**Activities of Daily Living**

Are you able to care for yourself?: Yes

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

## Surgical &amp; Procedure History

Reviewed Surgical &amp; Procedure History

## Past Medical History

Reviewed Past Medical History

## HPI

Very pleasant 82-year-old female nondiabetic patient here to establish care with a chief complaint of a wound on the anterior aspect of her right lower leg. She states that on Easter Sunday she lost consciousness in church and kicked to the front of her right shin with her left heel. She states that it turned into a blister that then turned into a scab that had bubbling and draining. She did see her primary care doctor roughly a week afterwards and was put on doxycycline and has been receiving some wound care intermittently since then. She was given instructions to keep this open to the air and do not dress this. She presents today with a dry stable eschar to the top 50% of the wound with a loose eschar on the bottom 50%. Local erythema and some edema odor of necrosis little to no drainage or warmth. Upon exam a roughly 1 to 1 cm circumferential dry stable eschar noted to the anterior aspect of the left lower extremity as well.

Here today f/u the above mentioned. She does state that She is in fact diabetic but states that she does not take any medication for this and her hemoglobin A1C continues to be monitored and stays under six. Graft application #1 today.

Here today follow-up the above-mentioned. She did state that she has a granddaughter who is a nurse who told her that we are doing all of the wrong things and she is never going to heal on its likely she is can lose her foot or her leg if she does not seek new treatment. Ms. Delilah is a pleasure and states that she does not even want us to talk to her about it and she is not concerned. Ms. Delilah is thrilled with the care she is provided and receiving and she is eager to come back and see us again next week Graft application #2 today

Here today follow-up the above-mentioned. She states she did 1 dressing change since our last visit. Presents today Adaptic in place with dry gauze dressing on top. 100% graft take. Graft application #3 today

Here today follow-up the above-mentioned. She states she has been doing well she did 1 dressing change this weekend and we placed Adaptic and dry gauze dressing secured with rolled gauze. That she has been doing well continuing to increase her protein intake. Graft application #4 today

## ROS

Patient reports **difficulty hearing** but reports no ear pain. She reports **nose problems and sinus problems** but reports no frequent nosebleeds. She reports **snoring, dry mouth, and teeth abnormalities** but reports no sore throat, no bleeding gums, no mouth ulcers, no ringing in the ears, and no sinusitis. She reports **shortness of breath when walking** but reports no chest pain, no arm pain on exertion, no shortness of breath when lying down, no palpitations, no known heart murmur, and no ankle swelling. She reports **frequent diarrhea** but reports no abdominal pain, no nausea, no vomiting, no constipation, normal appetite, not vomiting blood, no dyspepsia, and no GERD. She reports **urinary loss of control and increased urinary frequency** but reports no difficulty urinating and no hematuria. She reports **muscle aches, muscle weakness, arthralgias/joint pain, back pain, and swelling in the extremities** but reports no neck pain, no difficulty walking, no cramps, no osteoporosis, and no fractures. She reports **dry skin** but 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. She reports **loss of consciousness, numbness, dizziness, and restless legs** but reports no weakness, no seizures, no migraines, no headaches, no tremor, no gait dysfunction, and no paralysis. She reports **fatigue, hair loss, and cold intolerance**. She reports **easy bruising** but reports no swollen glands, no excessive bleeding, no anemia, and no phlebitis. She reports **itching and hives** but reports no runny nose, no sinus pressure, and no frequent sneezing. She reports no fever, no night sweats, no significant weight gain, no significant weight loss, no exercise intolerance, no chills, and no malaise. She reports no dry eyes, no vision change, no irritation, and no eye disease/injury. She reports no cough, no wheezing, no shortness of breath, no coughing up blood, and no sleep apnea. She 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

**MILLER, Delila (id #29508, dob: 11/21/1942)**

dementia, and no delirium.

**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**.**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**.

We now have roughly a 2 x 1 cm and a 1 x 1-1/2 cm wound in a vertical orientation separated by a new skin Peninsula in the middle-local erythema-negative for edema odor warmth and drainage

0.8 cm tunneling at the 7 o'clock position

**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-- 2x2cm, 2x2cm

Product ID-- IMX-0202-01, IMX-0202-01

Lot Number-- 061924-2, 061924-2

Expiration Date-- 2026-06-19, 2026-06-19

Application number-- 4

Zero graft wastage.

**Assessment / Plan****Traumatic ulcer of right lower extremity with necrosis of****1. muscle**

L97.913: Non-pressure chronic ulcer of unspecified part of right lower leg with necrosis of muscle

**Antalgic****2. gait**

R26.89: Other abnormalities of gait and mobility

**Disability of****3. walking**

R26.2: Difficulty in walking, not elsewhere classified

**Disorder of nervous system due to type 2 diabetes****4. mellitus**

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

G98.8: Other disorders of nervous system

**Discussion Notes**

1 dressing change on Sunday - leave adaptic in place - dressing supplies provided

15 to 20 mmHg compression at all times to right lower extremity via Ace wrap or compression sock

Elevation if not ambulating

Call with any questions or concerns

**Return to Office**

- WILLIAM NORRIS, FNP-BC for ESTABLISHED PATIENT 15 at LAFOLLETTE on 07/02/2025 at 03:15 PM

**MILLER, Delila (id #29508, dob: 11/21/1942)**

Encounter Sign-Off

Encounter signed-off by WILLIAM NORRIS, FNP-BC, 06/25/2025.

Encounter performed and documented by WILLIAM NORRIS, FNP-BC

Encounter reviewed & signed by WILLIAM NORRIS, FNP-BC on 06/25/2025 at 12:29 PM

**MILLER, Delila (id #29508, dob: 11/21/1942)****Encounter Date: 06/18/2025****Patient**

<b>Name</b>	MILLER, DELILA (82yo, F) ID# 29508	<b>Appt. Date/Time</b>	06/18/2025 03:15PM
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<b>DOB</b>	11/21/1942	<b>Service Dept.</b>	LAFOLLETTE
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<b>Provider</b>	WILLIAM NORRIS, FNP-BC
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<b>Insurance</b>	Med Primary: MEDICARE-TN (MEDICARE) Insurance # : 8NG6Y51JQ65 Med Secondary: UMR (MEDICARE SUPPLEMENT) Insurance # : 334000329640 Policy/Group # : 76413423 Prescription: OPTUMRX - Member is eligible. details
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**Chief Complaint**

Wound Care Follow-up

**Patient's Care Team****Primary Care Provider:** TIMOTHY SMITH MD: 950 BAKER HWY STE 4, HUNTSVILLE, TN 37756, Ph (844) 655-1100, Fax (833) 449-4377 NPI: 1720021660**Patient's Pharmacies****ROARK'S PHARMACY (ERX): 19118 ALBERTA ST, ONEIDA, TN 37841, Ph (423) 569-9000, Fax (423) 569-2402****Vitals**

2025-06-18 14:46

**Ht:** 5 ft**Wt:** 140 lbs**BMI:** 27.3**Allergies**

Reviewed Allergies

NKDA

**Medications**



**MILLER, Delila (id #29508, dob: 11/21/1942)**

## Reviewed Medications

**azelastine 137 mcg (0.1 %) nasal spray** 04/15/25 filled  
instill ONE spray in each nostril TWICE DAILY

**colestipol 1 gram tablet** 04/15/25 filled  
TAKE ONE TABLET BY MOUTH EVERY DAY

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APPLY ONE APPLICATORFUL VAGINALLY 3 TIMES WEEKLY

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**traMADol 50 mg tablet** 03/10/25 filled  
TAKE TWO TABLETS BY MOUTH THREE TIMES DAILY

## Vaccines

## Reviewed Vaccines

Vaccine Type	Date	Amt.	Route	Site	NDC	Lot #	Mfr.	Exp. Date	VIS	VIS Given	Vaccinator
<b>COVID-19</b>											
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	02/08/21					010M20A	Moderna US, Inc.	12/31/69			
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	01/05/21					025L20A	Moderna US, Inc.	06/25/21			
<b>Diphtheria, Tetanus, Pertussis</b>											
Tdap	06/29/19										
<b>Influenza</b>											
influenza, injectable, quadrivalent, preservative free	11/14/23	0.5 mL	Intramuscular	Deltoid, Left		9CE79	GlaxoSmithKline				
influenza, injectable, quadrivalent, preservative free	10/10/22	0.5 mL	Intramuscular	Deltoid, Right		M3R5B	GlaxoSmithKline				
influenza, high-dose, quadrivalent	12/30/21	0.7 mL	Intramuscular	Arm, Left Upper		UJ64AC	Sanofi Pasteur				
influenza, high-dose, quadrivalent	10/22/20	0.7 mL	Intramuscular	Arm, Left Upper		UJ535AB	Sanofi Pasteur				
influenza, high dose seasonal	11/21/19	0.5 mL	Intramuscular	Arm, Left Upper		UJ308AA	Sanofi Pasteur				
influenza, high dose seasonal	12/21/18	0.5 mL	Intramuscular	Arm, Right Upper		UJ052AB	Sanofi Pasteur				
<b>Pneumococcal</b>											
pneumococcal polysaccharide PPV23	01/23/20	0.5 mL	Intramuscular	Arm, Left Upper		S029265	Merck and Co., Inc.				
pneumococcal conjugate PCV 13	12/21/18	0.5 mL	Intramuscular	Arm, Left Upper		X11327	Pfizer, Inc				

## Problems

**MILLER, Delila (id #29508, dob: 11/21/1942)**

Reviewed Problems

## Family History

Reviewed Family History

## 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?: Current every day 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?: 06/18/2025

Has tobacco cessation counseling been provided?: Yes

On what date was tobacco cessation counseling provided?: 06/18/2025

What is your level of alcohol consumption?: None

**Activities of Daily Living**

Are you able to care for yourself?: Yes

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

## Surgical &amp; Procedure History

Reviewed Surgical &amp; Procedure History

## Past Medical History

Reviewed Past Medical History

## HPI

Very pleasant 82-year-old female nondiabetic patient here to establish care with a chief complaint of a wound on the anterior aspect of her right lower leg. She states that on Easter Sunday she lost consciousness in church and kicked to the front of her right shin with her left heel. She states that it turned into a blister that then turned into a scab that had bubbling and draining. She did see her primary care doctor roughly a week afterwards and was put on doxycycline and has been receiving some wound care intermittently since then. She was given instructions to keep this open to the air and do not dress this. She presents today with a dry stable eschar to the top 50% of the wound with a loose eschar on the bottom 50%. Local erythema and some edema odor of necrosis little to no drainage or warmth. Upon exam a roughly 1 to 1 cm circumferential dry stable eschar noted to the anterior aspect of the left lower extremity as well.

Here today f/u the above mentioned. She does state that She is in fact diabetic but states that she does not take any medication for this and her hemoglobin A1C continues to be monitored and stays under six. Graft application #1 today.

Here today follow-up the above-mentioned. She did state that she has a granddaughter who is a nurse who told her that we are doing all of the wrong things and she is never going to heal on its likely she is can lose her foot or her leg if she does not seek new treatment. Ms. Delilah is a pleasure and states that she does not even want us to talk to her about it and she is not concerned. Ms. Delilah is thrilled with the care she is provided and receiving and she is eager to come back and see us again next week Graft application #2 today

Here today follow-up the above-mentioned. She states she did 1 dressing change since our last visit. Presents today Adaptic in place with dry gauze dressing on top. 100% graft take. Graft application #3 today

## ROS

Patient reports **difficulty hearing** but reports no ear pain. She reports **nose problems and sinus problems** but reports no frequent nosebleeds. She reports **snoring, dry mouth, and teeth abnormalities** but reports no sore throat, no bleeding gums, no mouth ulcers, no ringing in the ears, and no sinusitis. She reports **shortness of breath when walking** but reports no chest pain, no arm pain on exertion, no shortness of breath when lying down, no palpitations, no known heart murmur, and no ankle swelling. She reports **frequent diarrhea** but reports no abdominal pain, no nausea, no vomiting, no constipation, normal appetite, not vomiting blood, no dyspepsia, and no GERD. She reports **urinary loss of control and increased urinary frequency** but reports no difficulty urinating and no hematuria. She reports **muscle aches, muscle weakness, arthralgias/joint pain, back pain, and swelling in the extremities** but reports no neck pain, no difficulty walking, no cramps, no osteoporosis, and no fractures. She reports **dry skin** but 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. She reports **loss of consciousness, numbness, dizziness, and restless legs** but reports no weakness, no seizures, no migraines, no headaches, no tremor, no gait dysfunction, and no paralysis. She reports **fatigue, hair loss, and cold intolerance**. She reports **easy bruising** but reports no swollen glands, no excessive bleeding, no anemia, and no phlebitis. She reports **itching and hives** but reports no runny nose, no sinus pressure, and no frequent sneezing. She reports no fever, no night sweats, no significant weight gain, no significant weight loss, no exercise intolerance, no chills, and no malaise. She reports no dry eyes, no vision change, no irritation, and no eye disease/injury. She reports no cough, no wheezing, no shortness of breath, no coughing up blood, and no sleep apnea. She 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.

## Physical Exam

**MILLER, Delila (id #29508, dob: 11/21/1942)****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**.**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**.

3.5 x 2.5 cm full-thickness ulceration to the anterior aspect of middle third right shin-no erythema edema odor warmth or drainage-Red granular base appreciated after debridement

1 cm tunneling at the 7 o'clock position

**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-- 4x4cm  
 Product ID-- IMX-0404-01  
 Lot Number-- 102924-1  
 Expiration Date-- 2026-10-29  
 Application number-- 3  
 Zero graft wastage.

**Assessment / Plan****Traumatic ulcer of right lower extremity with necrosis of****1. muscle**

L97.913: Non-pressure chronic ulcer of unspecified part of right lower leg with necrosis of muscle

**Antalgic****2. gait**

R26.89: Other abnormalities of gait and mobility

**Disability of****3. walking**

R26.2: Difficulty in walking, not elsewhere classified

**Disorder of nervous system due to type 2 diabetes****4. mellitus**

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

**Discussion Notes**

1 dressing change on Sunday - leave adaptic in place - dressing supplies provided

Dry gauze dressing change with 15-20 mmHG compression from foot to tibial tuberosity to RLE  
 dry gauze dressing change to LLE every other day  
 dressing supplies provided today  
 Wash with dial soap  
 Elevation if not ambulating  
 Call with any questions or concerns

**Return to Office**

Patient will return to the office as needed.

**MILLER, Delila (id #29508, dob: 11/21/1942)**

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Encounter Sign-Off

Encounter signed-off by WILLIAM NORRIS, FNP-BC, 06/18/2025.

Encounter performed and documented by WILLIAM NORRIS, FNP-BC

Encounter reviewed & signed by WILLIAM NORRIS, FNP-BC on 06/18/2025 at 04:15 PM

**MILLER, Delila (id #29508, dob: 11/21/1942)**

**Encounter Date: 06/11/2025**

**MILLER, Delila (id #29508, dob: 11/21/1942)**

(Last amended by WILLIAM NORRIS, FNP-BC on 06/30/2025 at 11:19am)

## Patient

<b>Name</b>	MILLER, DELILA (82yo, F) ID# 29508	<b>Appt. Date/Time</b>	06/11/2025 02:45PM
<b>DOB</b>	11/21/1942	<b>Service Dept.</b>	LAFOLLETTE
<b>Provider</b>	WILLIAM NORRIS, FNP-BC		
<b>Insurance</b>	Med Primary: MEDICARE-TN (MEDICARE) Insurance # : 8NG6Y51JQ65 Med Secondary: UMR (MEDICARE SUPPLEMENT) Insurance # : 334000329640 Policy/Group # : 76413423 Prescription: check now		

## Chief Complaint

Wound Care Follow-up

## Patient's Care Team

**Primary Care Provider:** TIMOTHY SMITH MD: 950 BAKER HWY STE 4, HUNTSVILLE, TN 37756, Ph (844) 655-1100, Fax (833) 449-4377 NPI: 1720021660

## Patient's Pharmacies

**ROARK'S PHARMACY (ERX): 19118 ALBERTA ST, ONEIDA, TN 37841, Ph (423) 569-9000, Fax (423) 569-2402**

## Vitals

2025-06-11 14:28

**Ht:** 5 ft**Wt:** 140 lbs**BMI:** 27.3

## Allergies

Reviewed Allergies

## Medications

**MILLER, Delila (id #29508, dob: 11/21/1942)**

## Reviewed Medications

**azelastine 137 mcg (0.1 %) nasal spray** 04/15/25 filled  
instill ONE spray in each nostril TWICE DAILY

**colestipol 1 gram tablet** 04/15/25 filled  
TAKE ONE TABLET BY MOUTH EVERY DAY

**estradiol 0.01% (0.1 mg/gram) vaginal cream** 11/20/24 filled  
APPLY ONE APPLICATORFUL VAGINALLY 3 TIMES WEEKLY

**HYDROcodone 7.5 mg-acetaminophen 325 mg tablet** 05/30/25 filled  
TAKE ONE TABLET BY MOUTH EVERY 6 HOURS AS NEEDED

**metoprolol tartrate 25 mg tablet** 01/29/25 filled  
TAKE 1/2 TABLET BY MOUTH TWICE DAILY

**ofloxacin 0.3 % ear drops** 08/02/24 filled  
instill FOUR DROPS into each ear TWICE DAILY FOR 7 DAYS

**Stiolto Respimat 2.5 mcg-2.5 mcg/actuation solution for inhalation** 04/15/25 filled  
INHALE 2 PUFFS BY MOUTH ONCE DAILY

**traMADol 50 mg tablet** 03/10/25 filled  
TAKE TWO TABLETS BY MOUTH THREE TIMES DAILY

## Vaccines

## Reviewed Vaccines

Vaccine Type	Date	Amt.	Route	Site	NDC	Lot #	Mfr.	Exp. Date	VIS	VIS Given	Vaccinator
<b>COVID-19</b>											
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	02/08/21					010M20A	Moderna US, Inc.	12/31/69			
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	01/05/21					025L20A	Moderna US, Inc.	06/25/21			
<b>Diphtheria, Tetanus, Pertussis</b>											
Tdap	06/29/19										
<b>Influenza</b>											
influenza, injectable, quadrivalent, preservative free	11/14/23	0.5 mL	Intramuscular	Deltoid, Left		9CE79	GlaxoSmithKline				
influenza, injectable, quadrivalent, preservative free	10/10/22	0.5 mL	Intramuscular	Deltoid, Right		M3R5B	GlaxoSmithKline				
influenza, high-dose, quadrivalent	12/30/21	0.7 mL	Intramuscular	Arm, Left Upper		UJ64AC	Sanofi Pasteur				
influenza, high-dose, quadrivalent	10/22/20	0.7 mL	Intramuscular	Arm, Left Upper		UJ535AB	Sanofi Pasteur				
influenza, high dose seasonal	11/21/19	0.5 mL	Intramuscular	Arm, Left Upper		UJ308AA	Sanofi Pasteur				
influenza, high dose seasonal	12/21/18	0.5 mL	Intramuscular	Arm, Right Upper		UJ052AB	Sanofi Pasteur				
<b>Pneumococcal</b>											
pneumococcal polysaccharide PPV23	01/23/20	0.5 mL	Intramuscular	Arm, Left Upper		S029265	Merck and Co., Inc.				
pneumococcal conjugate PCV 13	12/21/18	0.5 mL	Intramuscular	Arm, Left Upper		X11327	Pfizer, Inc				

## Problems

**MILLER, Delila (id #29508, dob: 11/21/1942)**

Reviewed Problems

**Family History**

Reviewed Family History

**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?: Current every day 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?: 06/11/2025

Has tobacco cessation counseling been provided?: Yes

On what date was tobacco cessation counseling provided?: 06/11/2025

What is your level of alcohol consumption?: 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 &amp; Procedure History

**Past Medical History**

Reviewed Past Medical History

**Screening**

Name	Score	Notes
Steady Fall Risk - 3 item	0	

**HPI**

Very pleasant 82-year-old female nondiabetic patient here to establish care with a chief complaint of a wound on the anterior aspect of her right lower leg. She states that on Easter Sunday she lost consciousness in church and kicked to the front of her right shin with her left heel. She states that it turned into a blister that then turned into a scab that had bubbling and draining. She did see her primary care doctor roughly a week afterwards and was put on doxycycline and has been receiving some wound care intermittently since then. She was given instructions to keep this open to the air and do not dress this. She presents today with a dry stable eschar to the top 50% of the wound with a loose eschar on the bottom 50%. Local erythema and some edema odor of necrosis little to no drainage or warmth. Upon exam a roughly 1 to 1 cm circumferential dry stable eschar noted to the anterior aspect of the left lower extremity as well.

Here today f/u the above mentioned. She does state that She is in fact diabetic but states that she does not take any medication for this and her hemoglobin A1C continues to be monitored and stays under six. Graft application #1 today.

Here today follow-up the above-mentioned. She did state that she has a granddaughter who is a nurse who told her that we are doing all of the wrong things and she is never going to heal on its likely she is can lose her foot or her leg if she does not seek new treatment. Ms. Delilah is a pleasure and states that she does not even want us to talk to her about it and she is not concerned. Ms. Delilah is thrilled with the care she is provided and receiving and she is eager to come back and see us again next week Graft application #2 today

**ROS**

Patient reports **difficulty hearing** but reports no ear pain. She reports **nose problems and sinus problems** but reports no frequent nosebleeds. She reports **snoring, dry mouth, and teeth abnormalities** but reports no sore throat, no bleeding gums, no mouth ulcers, no ringing in the ears, and no sinusitis. She reports **shortness of breath when walking** but reports no chest pain, no arm pain on exertion, no shortness of breath when lying down, no palpitations, no known heart murmur, and no ankle swelling. She reports **frequent diarrhea** but reports no abdominal pain, no nausea, no vomiting, no constipation, normal appetite, not vomiting blood, no dyspepsia, and no GERD. She reports **urinary loss of control and increased urinary frequency** but reports no difficulty urinating and no hematuria. She reports **muscle aches, muscle weakness, arthralgias/joint pain, back pain, and swelling in the extremities** but reports no neck pain, no difficulty walking, no cramps, no osteoporosis, and no fractures. She reports **dry skin** but 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. She reports **loss of consciousness, numbness, dizziness, and restless legs** but reports no weakness, no seizures, no migraines, no headaches, no tremor, no gait dysfunction, and no paralysis. She reports **fatigue, hair loss, and cold intolerance**. She reports **easy bruising** but reports no swollen glands, no excessive bleeding, no anemia, and no phlebitis. She reports **itching and hives** but reports no runny nose, no sinus pressure, and no frequent sneezing. She reports no fever, no night sweats, no significant weight gain, no significant weight loss, no exercise intolerance, no chills, and no malaise. She reports no dry eyes, no vision change, no irritation, and no eye disease/injury. She reports no cough, no wheezing, no shortness of breath, no coughing up blood, and no sleep apnea. She 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



**MILLER, Delila (id #29508, dob: 11/21/1942)**

dementia, and no delirium.

**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**.**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 ulceration noted to the anterior middle 3rd of right low leg - 5x3.5cm - Local erythema, no edema warmth odor or drainage

Red granular base appreciated after debridement

Today-4 x 3 cm local erythema negative for edema odor warmth and drainage-Red granular base appreciated after debridement

**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-- 2x2cm, 2x2cm

Product ID-- IMX-0202-01, IMX-0202-01

Lot Number-- 061224-1, 061224-1

Expiration Date-- 2026-06-12, 2026-06-12

Application number-- 2

Zero graft wastage.

**Assessment / Plan****Traumatic ulcer of right lower extremity with necrosis of****1. muscle**

L97.913: Non-pressure chronic ulcer of unspecified part of right lower leg with necrosis of muscle

**Antalgic****2. gait**

R26.89: Other abnormalities of gait and mobility

**Disability of****3. walking**

R26.2: Difficulty in walking, not elsewhere classified

**Disorder of nervous system due to type 2 diabetes****4. mellitus**

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

G98.8: Other disorders of nervous system

**Discussion Notes**

1 dressing change on Sunday - leave adaptic in place - dressing supplies provided

Dry gauze dressing change with 15-20 mmHG compression from foot to tibial tuberosity to RLE

dry gauze dressing change to LLE every other day

dressing supplies provided today

Wash with dial soap

Elevation if not ambulating

Call with any questions or concerns

**MILLER, Delila (id #29508, dob: 11/21/1942)**

Return to Office

Patient will return to the office as needed.

**Amendment Sign-Off**

Encounter signed-off by WILLIAM NORRIS, FNP-BC, 06/30/2025.

Encounter performed and documented by WILLIAM NORRIS, FNP-BC

Encounter reviewed & signed by WILLIAM NORRIS, FNP-BC on 06/12/2025 at 12:29 PM

Amendment closed by WILLIAM NORRIS, FNP-BC on 06/30/2025 at 11:19 AM

**MILLER, Delila (id #29508, dob: 11/21/1942)****Encounter Date: 06/04/2025****Patient**

<b>Name</b>	MILLER, DELILA (82yo, F) ID# 29508	<b>Appt. Date/Time</b>	06/04/2025 03:00PM
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<b>DOB</b>	11/21/1942	<b>Service Dept.</b>	LAFOLLETTE
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<b>Provider</b>	WILLIAM NORRIS, FNP-BC
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<b>Insurance</b>	Med Primary: MEDICARE-TN (MEDICARE) Insurance # : 8NG6Y51JQ65 Med Secondary: UMR (MEDICARE SUPPLEMENT) Insurance # : 334000329640 Policy/Group # : 76413423 Prescription: OPTUMRX - Member is eligible. details
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**Chief Complaint**

New Wound Care

**Patient's Care Team****Primary Care Provider:** TIMOTHY SMITH MD: 950 BAKER HWY STE 4, HUNTSVILLE, TN 37756, Ph (844) 655-1100, Fax (833) 449-4377 NPI: 1720021660**Patient's Pharmacies****ROARK'S PHARMACY (ERX): 19118 ALBERTA ST, ONEIDA, TN 37841, Ph (423) 569-9000, Fax (423) 569-2402****Vitals**

2025-06-04 15:33

**Ht:** 5 ft**Allergies**

Reviewed Allergies

**Medications**

**MILLER, Delila (id #29508, dob: 11/21/1942)**

## Reviewed Medications

<b>amoxicillin 500 mg capsule</b> TAKE ONE CAPSULE BY MOUTH EVERY 8 HOURS UNTIL GONE	05/30/25	filled
<b>azelastine 137 mcg (0.1 %) nasal spray</b> instill ONE spray in each nostril TWICE DAILY	04/15/25	filled
<b>azithromycin 250 mg tablet</b> TAKE TWO TABLETS BY MOUTH 30-60 MINUTES BEFORE DENTAL PROCEDURE.	10/04/24	filled
<b>chlorhexidine gluconate 0.12 % mouthwash</b> Rinse mouth with 15 ml (1 capful) for 30 seconds every morning and evening after brushing teeth. Spit after rinsing. Do not swallow.	10/21/24	filled
<b>colestipol 1 gram tablet</b> TAKE ONE TABLET BY MOUTH EVERY DAY	04/15/25	filled
<b>doxycycline hyclate 100 mg capsule</b> TAKE ONE CAPSULE BY MOUTH TWICE DAILY FOR 7 DAYS	05/19/25	filled
<b>doxycycline hyclate 100 mg tablet</b> TAKE ONE TABLET BY MOUTH TWICE DAILY FOR 5 DAYS	05/03/25	filled
<b>estradiol 0.01% (0.1 mg/gram) vaginal cream</b> APPLY ONE APPLICATORFUL VAGINALLY 3 TIMES WEEKLY	11/20/24	filled
<b>HYDROcodone 5 mg-acetaminophen 325 mg tablet</b> TAKE ONE TABLET BY MOUTH EVERY 6 HOURS AS NEEDED	10/21/24	filled
<b>HYDROcodone 7.5 mg-acetaminophen 325 mg tablet</b> TAKE ONE TABLET BY MOUTH EVERY 6 HOURS AS NEEDED	05/30/25	filled
<b>metoprolol tartrate 25 mg tablet</b> TAKE 1/2 TABLET BY MOUTH TWICE DAILY	01/29/25	filled
<b>ofloxacin 0.3 % ear drops</b> instill FOUR DROPS into each ear TWICE DAILY FOR 7 DAYS	08/02/24	filled
<b>Stiolto Respimat 2.5 mcg-2.5 mcg/actuation solution for inhalation</b> INHALE 2 PUFFS BY MOUTH ONCE DAILY	04/15/25	filled
<b>traMADol 50 mg tablet</b> TAKE TWO TABLETS BY MOUTH THREE TIMES DAILY	03/10/25	filled

## Vaccines

## Reviewed Vaccines

**MILLER, Delila (id #29508, dob: 11/21/1942)**

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)	02/08/21					010M20A	Moderna US, Inc.	12/31/69			
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	01/05/21					025L20A	Moderna US, Inc.	06/25/21			
Diphtheria, Tetanus, Pertussis											
Tdap	06/29/19										
Influenza											
influenza, injectable, quadrivalent, preservative free	11/14/23	0.5 mL	Intramuscular	Deltoid, Left		9CE79	GlaxoSmithKline				
influenza, injectable, quadrivalent, preservative free	10/10/22	0.5 mL	Intramuscular	Deltoid, Right		M3R5B	GlaxoSmithKline				
influenza, high-dose, quadrivalent	12/30/21	0.7 mL	Intramuscular	Arm, Left Upper		UJ64AC	Sanofi Pasteur				
influenza, high-dose, quadrivalent	10/22/20	0.7 mL	Intramuscular	Arm, Left Upper		UJ535AB	Sanofi Pasteur				
influenza, high dose seasonal	11/21/19	0.5 mL	Intramuscular	Arm, Left Upper		UJ308AA	Sanofi Pasteur				
influenza, high dose seasonal	12/21/18	0.5 mL	Intramuscular	Arm, Right Upper		UJ052AB	Sanofi Pasteur				
Pneumococcal											
pneumococcal polysaccharide PPV23	01/23/20	0.5 mL	Intramuscular	Arm, Left Upper		S029265	Merck and Co., Inc.				
pneumococcal conjugate PCV 13	12/21/18	0.5 mL	Intramuscular	Arm, Left Upper		X11327	Pfizer, Inc				

**Problems**

Reviewed Problems

**Family History**

Reviewed Family History

**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?: Current every day 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?: 05/29/2025

Has tobacco cessation counseling been provided?: Yes

On what date was tobacco cessation counseling provided?: 05/29/2025

What is your level of alcohol consumption?: 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 &amp; Procedure History

**Past Medical History**

Reviewed Past Medical History

**HPI**

Very pleasant 82-year-old female nondiabetic patient here to establish care with a chief complaint of a wound on the anterior aspect of her right lower leg. She states that on Easter Sunday she lost consciousness in church and kicked to the front of her right shin with her left heel. She states that it turned into a blister that then turned into a scab that had bubbling and draining. She did see her primary care doctor roughly a week afterwards and was put on doxycycline and has been receiving some wound care intermittently since then. She was given instructions to keep this open to the air and do not dress this. She presents today with a dry stable eschar to the top 50% of the wound with a loose eschar on the bottom 50%. Local erythema and some edema odor of necrosis little to no drainage or warmth. Upon exam a roughly 1 to 1 cm circumferential dry stable eschar noted to the anterior aspect of the left lower extremity as well.

Here today f/u the above mentioned. She does state that She is in fact diabetic but states that she does not take any medication for

**MILLER, Delila (id #29508, dob: 11/21/1942)**

this and her hemoglobin A1C continues to be monitored and stays under six. Graft application #1 today.

**ROS**

Patient reports **difficulty hearing** but reports no ear pain. She reports **nose problems and sinus problems** but reports no frequent nosebleeds. She reports **snoring, dry mouth, and teeth abnormalities** but reports no sore throat, no bleeding gums, no mouth ulcers, no ringing in the ears, and no sinusitis. She reports **shortness of breath when walking** but reports no chest pain, no arm pain on exertion, no shortness of breath when lying down, no palpitations, no known heart murmur, and no ankle swelling. She reports **frequent diarrhea** but reports no abdominal pain, no nausea, no vomiting, no constipation, normal appetite, not vomiting blood, no dyspepsia, and no GERD. She reports **urinary loss of control and increased urinary frequency** but reports no difficulty urinating and no hematuria. She reports **muscle aches, muscle weakness, arthralgias/joint pain, back pain, and swelling in the extremities** but reports no neck pain, no difficulty walking, no cramps, no osteoporosis, and no fractures. She reports **dry skin** but 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. She reports **loss of consciousness, numbness, dizziness, and restless legs** but reports no weakness, no seizures, no migraines, no headaches, no tremor, no gait dysfunction, and no paralysis. She reports **fatigue, hair loss, and cold intolerance**. She reports **easy bruising** but reports no swollen glands, no excessive bleeding, no anemia, and no phlebitis. She reports **itching and hives** but reports no runny nose, no sinus pressure, and no frequent sneezing. She reports no fever, no night sweats, no significant weight gain, no significant weight loss, no exercise intolerance, no chills, and no malaise. She reports no dry eyes, no vision change, no irritation, and no eye disease/injury. She reports no cough, no wheezing, no shortness of breath, no coughing up blood, and no sleep apnea. She 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.

**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**.**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 ulceration noted to the anterior middle 3rd of right low leg - 5x3.5cm - Local erythema, no edema warmth odor or drainage

Red granular base appreciated after debridement

**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-- 4x4cm  
 Product ID-- IMX-0404-01  
 Lot Number-- 061924-1  
 Expiration Date-- 2026-06-19  
 Application number-- 1  
 Zero graft wastage.

**Assessment / Plan****Traumatic ulcer of right lower extremity with necrosis of****1. muscle**

L97.913: Non-pressure chronic ulcer of unspecified part of right lower leg with necrosis of muscle

**Antalgic****2. gait**

R26.89: Other abnormalities of gait and mobility

**Disability of****3. walking**

R26.2: Difficulty in walking, not elsewhere classified

**MILLER, Delila (id #29508, dob: 11/21/1942)**

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

**4. mellitus**

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

G98.8: Other disorders of nervous system

**Discussion Notes**

1 dressing change on Sunday - leave adaptic in place - dressing supplies provided

Dry gauze dressing change with 15-20 mmHG compression from foot to tibial tuberosity to RLE

dry gauze dressing change to LLE every other day

dressing supplies provided today

Wash with dial soap

Elevation if not ambulating

Call with any questions or concerns

**Return to Office**

Patient will return to the office as needed.

**Encounter Sign-Off**

Encounter signed-off by WILLIAM NORRIS, FNP-BC, 06/05/2025.

Encounter performed and documented by WILLIAM NORRIS, FNP-BC

Encounter reviewed & signed by WILLIAM NORRIS, FNP-BC on 06/05/2025 at 06:35 AM