

BARAN, Joseph J (id #21023, dob: 12/12/1951)

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: BARAN, JOSEPH J

DOB: 12/12/1951

Date Range: 01/01/2024 to 09/17/2025

This document contains the following records of the patient:

- **Encounters and Procedures**

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BARAN, Joseph J (id #21023, dob: 12/12/1951)

Encounters and Procedures

Clinical Encounter Summaries

BARAN, Joseph J (id #21023, dob: 12/12/1951)

Encounter Date: 06/21/2024

Patient

Name	BARAN, JOSEPH (72yo, M) ID# 21023	Appt. Date/Time	06/21/2024 11:00AM
DOB	12/12/1951	Service Dept.	TAZEWELL
Provider	KYLER DALTON, PA-C		
Insurance	Med Primary: PALMETTO GBA - MEDICARE-RAILROAD RETIREMENT BOARD (MEDICARE) Insurance # : 2KU2YG9JF80 Med Secondary: MUTUAL OF OMAHA (MEDICARE SUPPLEMENT) Insurance # : 715419-92 Med Durable Medical Equipment: CGS (MEDICARE DME REGION C) Insurance # : 2KU2YG9JF80 Prescription: CVS CAREMARK - Member is eligible. details		

Chief Complaint

Wound Care

Patient's Care Team

Primary Care Provider: NICOLE SHIELDS MD: 424 N BROAD ST, NEW TAZEWELL, TN 37825, Ph (423) 259-5700, Fax (865) 374-2200 NPI: 1992979454

Patient's Pharmacies

WALMART PHARMACY 1159 (ERX): 432 SOUTH BROAD STREET, NEW TAZEWELL, TN 37825, Ph (423) 626-6555, Fax (423) 626-1498

Vitals

2024-06-21 12:16

Ht: 6 ft 1 in

Allergies

Reviewed Allergies

STATINS-HMG-COA REDUCTASE INHIBITORS: Muscle cramps

Medications

Reviewed Medications		
amiodarone 200 mg tablet TAKE 1 TABLET BY MOUTH ONCE DAILY	04/22/24	filled
Basaglar KwikPen U-100 Insulin 100 unit/mL (3 mL) subcutaneous INJECT 60 UNITS SUBCUTANEOUSLY ONCE DAILY	04/18/24	filled
Brilinta 90 mg tablet TAKE 1 TABLET BY MOUTH TWICE DAILY	11/26/23	filled
celecoxib 200 mg capsule TAKE 1 CAPSULE BY MOUTH TWICE DAILY	05/24/24	filled
clopidogreL 75 mg tablet TAKE 1 TABLET BY MOUTH ONCE DAILY	03/21/24	filled
Contour Next Test Strips USE 1 STRIP TO CHECK GLUCOSE THREE TIMES DAILY	12/19/22	filled

BARAN, Joseph J (id #21023, dob: 12/12/1951)

Fiasp FlexTouch U-100 Insulin 100 unit/mL (3 mL) subcutaneous pen INJECT 12 UNITS SUBCUTANEOUSLY THREE TIMES DAILY	02/24/24	filled
furosemide 40 mg tablet TAKE 1 TABLET BY MOUTH ONCE DAILY	10/27/23	filled
HYDROcodone 10 mg-acetaminophen 325 mg tablet TAKE 1 TABLET BY MOUTH EVERY 6 HOURS AS NEEDED	02/07/24	filled
HYDROcodone 5 mg-acetaminophen 325 mg tablet TAKE 2 TABLETS BY MOUTH EVERY 6 HOURS AS NEEDED FOR PAIN FOR 3 DAYS . DO NOT EXCEED 6 PER 24 HOURS	06/07/23	filled
Levemir FlexPen 100 unit/mL (3 mL) solution subcutaneous insulin pen INJECT 60 UNITS SUBCUTANEOUSLY TWICE DAILY	08/16/23	filled
levothyroxine 150 mcg tablet TAKE 1 TABLET BY MOUTH ON MONDAYS, TUESDAYS, WEDNESDAYS, THURSDAYS, FRIDAYS, AND SATURDAYS	03/07/24	filled
linezolid 600 mg tablet TAKE 1 TABLET BY MOUTH TWICE DAILY	12/19/23	filled
lisinopril 2.5 mg tablet TAKE 1 TABLET BY MOUTH TWICE DAILY	04/12/24	filled
metoprolol succinate ER 25 mg tablet,extended release 24 hr	09/07/22	filled
nitroglycerin 0.4 mg sublingual tablet DISSOLVE ONE TABLET UNDER THE TONGUE EVERY 5 MINUTES AS NEEDED FOR CHEST PAIN. DO NOT EXCEED A TOTAL OF 3 DOSES IN 15 MINUTES	01/25/24	filled
NovoLOG Flexpen U-100 Insulin aspart 100 unit/mL (3 mL) subcutaneous INJECT 12 UNITS SUBCUTANEOUSLY THREE TIMES DAILY BEFORE MEAL(S)	07/25/23	filled
nystatin 100,000 unit/gram topical powder APPLY POWDER TOPICALLY TWICE DAILY	03/21/24	filled
pantoprazole 40 mg tablet,delayed release	06/20/24	filled
pen needle, diabetic 31 gauge x 15/64" USE 1 THREE TIMES DAILY	03/25/24	filled
potassium chloride ER 20 mEq tablet,extended release(part/cryst) TAKE 1 TABLET BY MOUTH TWICE DAILY	10/27/23	filled
Praluent Pen 75 mg/mL subcutaneous pen injector INJECT 1 ML SUBCUTANEOUSLY EVERY TWO WEEKS, ROTATE INJECTION SITES	04/12/23	filled

BARAN, Joseph J (id #21023, dob: 12/12/1951)

prasugreL 10 mg tablet	04/19/24	filled
TAKE 3 TABLETS BY MOUTH ONCE, THEN DECREASE TO 1 TABLET BY MOUTH ONCE DAILY		
tamsulosin 0.4 mg capsule	04/10/24	filled
TAKE 1 CAPSULE BY MOUTH ONCE DAILY		

Vaccines

None recorded.

Problems

- Reviewed Problems
- Hypertensive disorder - Onset: 07/18/2023
 - Type 2 diabetes mellitus - Onset: 07/18/2023

Family History

- Reviewed Family History
- Unspecified Relation
- Diabetes mellitus
 - Heart disease

Social History

Reviewed Social History

Advance Directive

Do you have an advance directive?: Yes

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?: 05/28/2024

Has tobacco cessation counseling been provided?: Yes

On what date was tobacco cessation counseling provided?: 05/28/2024

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?: 1

What is your level of caffeine consumption?: Moderate

Diet and Exercise

What is your exercise level?: Occasional

How many times per week do you exercise?: 1-2 times per week

Activities of Daily Living

Are you able to care for yourself?: Yes

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

Surgical History

- Reviewed Surgical History
- Knee Surgery
 - Cabg vein three
- Right Knee Replacement

Past Medical History

Reviewed Past Medical History

Screening

Name	Score	Notes
Falls Efficacy Scale	Not scored	

HPI

Here today for follow-up above-mentioned here today and ready for skin graft of his lower extremity. Wound dressing changes have been performed and there is decrease size to the wounds

ROS

Patient reports **exercise intolerance** but reports no fever, no night sweats, no significant weight gain, no significant weight loss, no chills, and no malaise. He reports **dry eyes** but reports no vision change, no irritation, and no eye disease/injury. He reports **abdominal pain** but reports no nausea, no vomiting, no constipation, normal appetite, no diarrhea, not vomiting blood, no dyspepsia, and no GERD. He reports **muscle aches and arthralgias/joint pain** but reports no muscle weakness, no back pain, no swelling in the extremities, no neck pain, no difficulty walking, no cramps, no osteoporosis, and no fractures. He reports **itching** but

BARAN, Joseph J (id #21023, dob: 12/12/1951)

reports no abnormal mole, no jaundice, no rashes, no laceration, no non-healing areas, no changes in hair/nails, no psoriasis, no change in skin color, and no breast lump. He reports **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. He reports **fatigue**. He reports **runny nose and itching** but reports no sinus pressure, no hives, and no frequent sneezing. He reports no difficulty hearing and no ear pain. He reports no frequent nosebleeds, no nose problems, and no sinus problems. He reports no sore throat, no bleeding gums, no snoring, no dry mouth, no mouth ulcers, no oral abnormalities, no teeth problems, no ringing in the ears, and no sinusitis. He reports no chest pain, no arm pain on exertion, no shortness of breath when walking, no shortness of breath when lying down, no palpitations, no known heart murmur, and no ankle swelling. He reports no cough, no wheezing, no shortness of breath, no coughing up blood, and no sleep apnea. He reports no incontinence, no difficulty urinating, no hematuria, and no increased frequency. He reports no depression, no sleep disturbances, feeling safe in a relationship, no alcohol abuse, no anxiety, no hallucinations, no suicidal thoughts, no mood swings, no memory loss, no agitation, no dementia, and no delirium. He reports no swollen glands, no bruising, no excessive bleeding, no anemia, and no phlebitis.

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.

Toenails 1 through 5 are thickened, discolored, dystrophic, clinically mycotic, and not elongated bilaterally.

Subungual hematoma noted to right third digit and left hallux toenail.

Full-thickness ulceration noted left plantar foot at first metatarsal head. It measures approximately 0.5 cm x 0.5 cm x 0.2 cm. Wound bed is granular. Minimal surrounding hyperkeratosis.

Full-thickness ulceration noted left plantar hallux. It measures approximately 0.2 cm x 0.2 cm x 0.2 cm. Wound bed is granular.

Minimal surrounding hyperkeratosis.

Bilateral pes planus with midfoot collapse on left foot.

DP, PT palpable bilaterally.

6-5-24

Wounds have decreased approximately 50%.

6-21-24

Full-thickness ulceration noted left plantar foot at first metatarsal head. It measures approximately 0.3 cm x 0.3 cm x 0.2 cm. Wound bed is granular. Minimal surrounding hyperkeratosis.

Full-thickness ulceration noted left plantar hallux- dry eschar

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-- 2 cm x 2 cm

Product ID-- IMX-0202-01

Lot Number-- 072623-1

Expiration Date-- 2025-07-26

Application number-- 4

Zero graft wastage.

Assessment / Plan

BARAN, Joseph J (id #21023, dob: 12/12/1951)

1. Open wound of left foot -

Additional diagnosis detail: Open wound of left foot, subsequent encounter
S91.302D: Unspecified open wound, left foot, subsequent encounter

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

E11.49: Type 2 diabetes mellitus with other diabetic neurological complication

3. Acquired pes planus of left foot

M21.42: Flat foot [pes planus] (acquired), left foot

4. Acquired pes planus of right foot

M21.41: Flat foot [pes planus] (acquired), right foot

5. Walking disability

R26.2: Difficulty in walking, not elsewhere classified

6. Antalgic gait

R26.89: Other abnormalities of gait and mobility

7. Peripheral vascular disease

I73.9: Peripheral vascular disease, unspecified

Discussion Notes

Patient evaluated today and a physical examination was performed.

Discussed diagnosis, etiology, and treatment options with patient.

Sharp debridement of full thickness ulceration to level of subcutaneous tissue was performed today without incident. Into the matrix skin graft added to wounds today. Foot was then dressed with Adaptic gauze, Steri-Strips, dry gauze dressing. Patient to change dressing in 72 hours but leave Adaptic gauze in place. Patient verbalized understanding.

Discussed importance of glycemic index and tight blood sugar control.

Patient is to avoid barefoot walking.

Continue daily foot inspections.

Continue offloaded insert at all times.

If patient develops any concerning pedal changes or possible signs of infection, patient instructed to contact office immediately for urgent evaluation.

Patient to follow-up in 1 week for wound care.

Return to Office

- Kyler Dalton, PA-C for NEW PATIENT 15 at TAZEWEILL on 06/28/2024 at 08:45 AM
- Pedorthist One Schedule, TECH for PROSTHETIC 15 at TAZEWEILL on 07/03/2024 at 09:30 AM

Encounter Sign-Off

Encounter signed-off by Kyler Dalton, PA-C, 06/21/2024.

Encounter performed and documented by Kyler Dalton Vogel, PA-C

Encounter reviewed & signed by Kyler Dalton Vogel, PA-C on 06/21/2024 at 12:41 PM

BARAN, Joseph J (id #21023, dob: 12/12/1951)

Encounter Date: 06/14/2024

Patient

Name	BARAN, JOSEPH (72yo, M) ID# 21023	Appt. Date/Time	06/14/2024 11:15AM
DOB	12/12/1951	Service Dept.	TAZEWELL
Provider	KYLER DALTON, PA-C		
Insurance	Med Primary: PALMETTO GBA - MEDICARE-RAILROAD RETIREMENT BOARD (MEDICARE) Insurance # : 2KU2YG9JF80 Med Secondary: MUTUAL OF OMAHA (MEDICARE SUPPLEMENT) Insurance # : 715419-92 Med Durable Medical Equipment: CGS (MEDICARE DME REGION C) Insurance # : 2KU2YG9JF80 Prescription: CVS CAREMARK - Member is eligible. details		

Chief Complaint

Wound Care

Patient's Care Team

Primary Care Provider: NICOLE SHIELDS MD: 424 N BROAD ST, NEW TAZEWELL, TN 37825, Ph (423) 259-5700, Fax (865) 374-2200 NPI: 1992979454

Patient's Pharmacies

WALMART PHARMACY 1159 (ERX): 432 SOUTH BROAD STREET, NEW TAZEWELL, TN 37825, Ph (423) 626-6555, Fax (423) 626-1498
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Vitals

None recorded.

Allergies

Allergies not reviewed (last reviewed 06/05/2024)
STATINS-HMG-COA REDUCTASE INHIBITORS: Muscle cramps

Medications

Reviewed Medications	
amiodarone 200 mg tablet TAKE 1 TABLET BY MOUTH ONCE DAILY	04/22/24 filled
Basaglar KwikPen U-100 Insulin 100 unit/mL (3 mL) subcutaneous INJECT 60 UNITS SUBCUTANEOUSLY ONCE DAILY	04/18/24 filled
Brilinta 90 mg tablet TAKE 1 TABLET BY MOUTH TWICE DAILY	11/26/23 filled
celecoxib 200 mg capsule TAKE 1 CAPSULE BY MOUTH TWICE DAILY	05/24/24 filled
clopidogreL 75 mg tablet TAKE 1 TABLET BY MOUTH ONCE DAILY	03/21/24 filled
Contour Next Test Strips USE 1 STRIP TO CHECK GLUCOSE THREE TIMES DAILY	12/19/22 filled
Fiasp FlexTouch U-100 Insulin 100 unit/mL (3 mL) subcutaneous pen INJECT 12 UNITS SUBCUTANEOUSLY THREE TIMES DAILY	02/24/24 filled

BARAN, Joseph J (id #21023, dob: 12/12/1951)

furosemide 40 mg tablet TAKE 1 TABLET BY MOUTH ONCE DAILY	10/27/23	filled
HYDROcodone 10 mg-acetaminophen 325 mg tablet TAKE 1 TABLET BY MOUTH EVERY 6 HOURS AS NEEDED	02/07/24	filled
HYDROcodone 5 mg-acetaminophen 325 mg tablet TAKE 2 TABLETS BY MOUTH EVERY 6 HOURS AS NEEDED FOR PAIN FOR 3 DAYS . DO NOT EXCEED 6 PER 24 HOURS	06/07/23	filled
Levemir FlexPen 100 unit/mL (3 mL) solution subcutaneous insulin pen INJECT 60 UNITS SUBCUTANEOUSLY TWICE DAILY	08/16/23	filled
levothyroxine 150 mcg tablet TAKE 1 TABLET BY MOUTH ON MONDAYS, TUESDAYS, WEDNESDAYS, THURSDAYS, FRIDAYS, AND SATURDAYS	03/07/24	filled
linezolid 600 mg tablet TAKE 1 TABLET BY MOUTH TWICE DAILY	12/19/23	filled
lisinopriL 2.5 mg tablet TAKE 1 TABLET BY MOUTH TWICE DAILY	04/12/24	filled
metoprolol succinate ER 25 mg tablet,extended release 24 hr	09/07/22	filled
nitroglycerin 0.4 mg sublingual tablet DISSOLVE ONE TABLET UNDER THE TONGUE EVERY 5 MINUTES AS NEEDED FOR CHEST PAIN. DO NOT EXCEED A TOTAL OF 3 DOSES IN 15 MINUTES	01/25/24	filled
NovoLOG Flexpen U-100 Insulin aspart 100 unit/mL (3 mL) subcutaneous INJECT 12 UNITS SUBCUTANEOUSLY THREE TIMES DAILY BEFORE MEAL(S)	07/25/23	filled
nystatin 100,000 unit/gram topical powder APPLY POWDER TOPICALLY TWICE DAILY	03/21/24	filled
pen needle, diabetic 31 gauge x 15/64" USE 1 THREE TIMES DAILY	03/25/24	filled
potassium chloride ER 20 mEq tablet,extended release(part/cryst) TAKE 1 TABLET BY MOUTH TWICE DAILY	10/27/23	filled
Praluent Pen 75 mg/mL subcutaneous pen injector INJECT 1 ML SUBCUTANEOUSLY EVERY TWO WEEKS, ROTATE INJECTION SITES	04/12/23	filled
prasugreL 10 mg tablet TAKE 3 TABLETS BY MOUTH ONCE, THEN DECREASE TO 1 TABLET BY MOUTH ONCE DAILY	04/19/24	filled
tamsulosin 0.4 mg capsule TAKE 1 CAPSULE BY MOUTH ONCE DAILY	04/10/24	filled

BARAN, Joseph J (id #21023, dob: 12/12/1951)

None recorded.

Problems

Problems not reviewed (last reviewed 06/05/2024)

- Hypertensive disorder - Onset: 07/18/2023
- Type 2 diabetes mellitus - Onset: 07/18/2023

Family History

Family History not reviewed (last reviewed 06/05/2024)

Unspecified Relation

- Diabetes mellitus

- Heart disease

Social History

Social History not reviewed (last reviewed 06/05/2024)

Advance Directive

Do you have an advance directive?: Yes

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?: 05/28/2024

Has tobacco cessation counseling been provided?: Yes

On what date was tobacco cessation counseling provided?: 05/28/2024

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?: 1

What is your level of caffeine consumption?: Moderate

Diet and Exercise

What is your exercise level?: Occasional

How many times per week do you exercise?: 1-2 times per week

Activities of Daily Living

Are you able to care for yourself?: Yes

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

Surgical History

Surgical History not reviewed (last reviewed 06/05/2024)

- Knee Surgery
- Cabg vein three

Right Knee Replacement

Past Medical History

Past Medical History not reviewed (last reviewed 06/05/2024)

HPI

Here today for follow-up above-mentioned here today and ready for skin graft of his lower extremity. Wound dressing changes have been performed and there is decrease size to the wounds

ROS

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

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

BARAN, Joseph J (id #21023, dob: 12/12/1951)

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.

Toenails 1 through 5 are thickened, discolored, dystrophic, clinically mycotic, and not elongated bilaterally.

Subungual hematoma noted to right third digit and left hallux toenail.

Full-thickness ulceration noted left plantar foot at first metatarsal head. It measures approximately 0.5 cm x 0.5 cm x 0.2 cm. Wound bed is granular. Minimal surrounding hyperkeratosis.

Full-thickness ulceration noted left plantar hallux. It measures approximately 0.2 cm x 0.2 cm x 0.2 cm. Wound bed is granular. Minimal surrounding hyperkeratosis.

Bilateral pes planus with midfoot collapse on left foot.

DP, PT palpable bilaterally.

6-5-24

Wounds have decreased approximately 50%.

6-14-24

Full-thickness ulceration noted left plantar foot at first metatarsal head. It measures approximately 0.3 cm x 0.3 cm x 0.2 cm. Wound bed is granular. Minimal surrounding hyperkeratosis.

Full-thickness ulceration noted left plantar hallux- dry eschar

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-- 2 cm x 2 cm

Product ID-- IMX-0202-01

Lot Number-- 060723-1

Expiration Date-- 2025-06-07

Application number-- 3

Zero graft wastage.

Assessment / Plan

1. Open wound of left foot -

Additional diagnosis detail: Open wound of left foot, subsequent encounter

S91.302D: Unspecified open wound, left foot, subsequent encounter

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

E11.49: Type 2 diabetes mellitus with other diabetic neurological complication

3. Acquired pes planus of left foot

M21.42: Flat foot [pes planus] (acquired), left foot

4. Acquired pes planus of right foot

M21.41: Flat foot [pes planus] (acquired), right foot

5. Walking disability

R26.2: Difficulty in walking, not elsewhere classified

BARAN, Joseph J (id #21023, dob: 12/12/1951)

6. Antalgic gait

R26.89: Other abnormalities of gait and mobility

7. Peripheral vascular disease

I73.9: Peripheral vascular disease, unspecified

Discussion Notes

Patient evaluated today and a physical examination was performed.

Discussed diagnosis, etiology, and treatment options with patient.

Sharp debridement of full thickness ulceration to level of subcutaneous tissue was performed today without incident. Into the matrix skin graft added to wounds today. Foot was then dressed with Adaptic gauze, Steri-Strips, dry gauze dressing. Patient to change dressing in 72 hours but leave Adaptic gauze in place. Patient verbalized understanding.

Discussed importance of glycemic index and tight blood sugar control.

Patient is to avoid barefoot walking.

Continue daily foot inspections.

Continue offloaded insert at all times.

If patient develops any concerning pedal changes or possible signs of infection, patient instructed to contact office immediately for urgent evaluation.

Patient to follow-up in 1 week for wound care.

Return to Office

- Kyler Dalton, PA-C for ESTABLISHED PATIENT 15 at TAZEWell on 06/21/2024 at 11:00 AM
- Pedorthist One Schedule, TECH for PROSTHETIC 15 at TAZEWell on 07/03/2024 at 09:30 AM

Encounter Sign-Off

Encounter signed-off by Kyler Dalton, PA-C, 06/14/2024.

Encounter performed and documented by Kyler Dalton Vogel, PA-C

Encounter reviewed & signed by Kyler Dalton Vogel, PA-C on 06/14/2024 at 12:31 PM

BARAN, Joseph J (id #21023, dob: 12/12/1951)

Encounter Date: 06/05/2024

Patient

Name	BARAN, JOSEPH (72yo, M) ID# 21023	Appt. Date/Time	06/05/2024 01:00PM
DOB	12/12/1951	Service Dept.	TAZEWELL
Provider	CHRISTOPHER L. BOWLIN, DPM		
Insurance	Med Primary: PALMETTO GBA - MEDICARE-RAILROAD RETIREMENT BOARD (MEDICARE) Insurance # : 2KU2YG9JF80 Med Secondary: MUTUAL OF OMAHA (MEDICARE SUPPLEMENT) Insurance # : 715419-92 Med Durable Medical Equipment: CGS (MEDICARE DME REGION C) Insurance # : 2KU2YG9JF80 Prescription: CVS CAREMARK - Member is eligible. details		

Chief Complaint

Left Wound Care

Patient's Care Team

Primary Care Provider: NICOLE SHIELDS MD: 424 N BROAD ST, NEW TAZEWELL, TN 37825, Ph (423) 259-5700, Fax (865) 374-2200 NPI: 1992979454

Patient's Pharmacies

WALMART PHARMACY 1159 (ERX): 432 SOUTH BROAD STREET, NEW TAZEWELL, TN 37825, Ph (423) 626-6555, Fax (423) 626-1498

Vitals

2024-06-05 13:25

Ht: 6 ft 1 in

Allergies

Reviewed Allergies

STATINS-HMG-COA REDUCTASE INHIBITORS: Muscle cramps

Medications

Reviewed Medications		
amiodarone 200 mg tablet TAKE 1 TABLET BY MOUTH ONCE DAILY	04/22/24	filled
Basaglar KwikPen U-100 Insulin 100 unit/mL (3 mL) subcutaneous INJECT 60 UNITS SUBCUTANEOUSLY ONCE DAILY	04/18/24	filled
Brilinta 90 mg tablet TAKE 1 TABLET BY MOUTH TWICE DAILY	11/26/23	filled
celecoxib 200 mg capsule TAKE 1 CAPSULE BY MOUTH TWICE DAILY	05/24/24	filled
clopidogreL 75 mg tablet TAKE 1 TABLET BY MOUTH ONCE DAILY	03/21/24	filled
Contour Next Test Strips USE 1 STRIP TO CHECK GLUCOSE THREE TIMES DAILY	12/19/22	filled

BARAN, Joseph J (id #21023, dob: 12/12/1951)

Fiasp FlexTouch U-100 Insulin 100 unit/mL (3 mL) subcutaneous pen INJECT 12 UNITS SUBCUTANEOUSLY THREE TIMES DAILY	02/24/24	filled
furosemide 40 mg tablet TAKE 1 TABLET BY MOUTH ONCE DAILY	10/27/23	filled
HYDROcodone 10 mg-acetaminophen 325 mg tablet TAKE 1 TABLET BY MOUTH EVERY 6 HOURS AS NEEDED	02/07/24	filled
HYDROcodone 5 mg-acetaminophen 325 mg tablet TAKE 2 TABLETS BY MOUTH EVERY 6 HOURS AS NEEDED FOR PAIN FOR 3 DAYS . DO NOT EXCEED 6 PER 24 HOURS	06/07/23	filled
Levemir FlexPen 100 unit/mL (3 mL) solution subcutaneous insulin pen INJECT 60 UNITS SUBCUTANEOUSLY TWICE DAILY	08/16/23	filled
levothyroxine 150 mcg tablet TAKE 1 TABLET BY MOUTH ON MONDAYS, TUESDAYS, WEDNESDAYS, THURSDAYS, FRIDAYS, AND SATURDAYS	03/07/24	filled
linezolid 600 mg tablet TAKE 1 TABLET BY MOUTH TWICE DAILY	12/19/23	filled
lisinopril 2.5 mg tablet TAKE 1 TABLET BY MOUTH TWICE DAILY	04/12/24	filled
metoprolol succinate ER 25 mg tablet,extended release 24 hr	09/07/22	filled
nitroglycerin 0.4 mg sublingual tablet DISSOLVE ONE TABLET UNDER THE TONGUE EVERY 5 MINUTES AS NEEDED FOR CHEST PAIN. DO NOT EXCEED A TOTAL OF 3 DOSES IN 15 MINUTES	01/25/24	filled
NovoLOG Flexpen U-100 Insulin aspart 100 unit/mL (3 mL) subcutaneous INJECT 12 UNITS SUBCUTANEOUSLY THREE TIMES DAILY BEFORE MEAL(S)	07/25/23	filled
nystatin 100,000 unit/gram topical powder APPLY POWDER TOPICALLY TWICE DAILY	03/21/24	filled
pen needle, diabetic 31 gauge x 15/64" USE 1 THREE TIMES DAILY	03/25/24	filled
potassium chloride ER 20 mEq tablet,extended release(part/cryst) TAKE 1 TABLET BY MOUTH TWICE DAILY	10/27/23	filled
Praluent Pen 75 mg/mL subcutaneous pen injector INJECT 1 ML SUBCUTANEOUSLY EVERY TWO WEEKS, ROTATE INJECTION SITES	04/12/23	filled
prasugrel 10 mg tablet TAKE 3 TABLETS BY MOUTH ONCE, THEN DECREASE TO 1 TABLET BY MOUTH ONCE DAILY	04/19/24	filled

BARAN, Joseph J (id #21023, dob: 12/12/1951)

tamsulosin 0.4 mg capsule
 TAKE 1 CAPSULE BY MOUTH ONCE DAILY

04/10/24 filled

Vaccines

None recorded.

Problems

Reviewed Problems

- Type 2 diabetes mellitus - Onset: 07/18/2023
- Hypertensive disorder - Onset: 07/18/2023

Family History

Reviewed Family History

Unspecified Relation - Diabetes mellitus
 - Heart disease

Social History

Reviewed Social History

Advance Directive

Do you have an advance directive?: Yes

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?: 05/28/2024

Has tobacco cessation counseling been provided?: Yes

On what date was tobacco cessation counseling provided?: 05/28/2024

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?: 1

What is your level of caffeine consumption?: Moderate

Diet and Exercise

What is your exercise level?: Occasional

How many times per week do you exercise?: 1-2 times per week

Activities of Daily Living

Are you able to care for yourself?: Yes

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

Surgical History

Reviewed Surgical History

- Knee Surgery
- Cabg vein three

Right Knee Replacement

Past Medical History

Reviewed Past Medical History

HPI

Pleasant 72-year-old diabetic male presents today for follow-up on wound to the bottom of his left foot. Patient reports he has been dressing the wound daily with a dry gauze and a Band-Aid. He reports that his wife has been placing collagen gauze on the bottom as well. He reports he has been wearing his offloaded insert at all times. No other complaints at this time.

Here today for follow-up above-mentioned here today and ready for skin graft of his lower extremity. Wound dressing changes have been performed and there is decrease size to the wounds

ROS

Patient reports **exercise intolerance** but reports no fever, no night sweats, no significant weight gain, no significant weight loss, no chills, and no malaise. He reports **dry eyes** but reports no vision change, no irritation, and no eye disease/injury. He reports **abdominal pain** but reports no nausea, no vomiting, no constipation, normal appetite, no diarrhea, not vomiting blood, no dyspepsia, and no GERD. He reports **muscle aches and arthralgias/joint pain** but reports no muscle weakness, no back pain, no swelling in the extremities, no neck pain, no difficulty walking, no cramps, no osteoporosis, and no fractures. He reports **itching** 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. He 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. He reports **fatigue**. He reports **runny nose and itching** but reports no sinus pressure, no hives, and no frequent sneezing. He reports no difficulty hearing and no ear pain. He reports no frequent nosebleeds, no nose problems, and no sinus problems. He reports no sore throat, no bleeding gums, no snoring, no dry mouth, no mouth ulcers, no oral abnormalities, no teeth problems, no ringing in the ears, and no

BARAN, Joseph J (id #21023, dob: 12/12/1951)

sinusitis. He reports no chest pain, no arm pain on exertion, no shortness of breath when walking, no shortness of breath when lying down, no palpitations, no known heart murmur, and no ankle swelling. He reports no cough, no wheezing, no shortness of breath, no coughing up blood, and no sleep apnea. He reports no incontinence, no difficulty urinating, no hematuria, and no increased frequency. He reports no depression, no sleep disturbances, feeling safe in a relationship, no alcohol abuse, no anxiety, no hallucinations, no suicidal thoughts, no mood swings, no memory loss, no agitation, no dementia, and no delirium. He reports no swollen glands, no bruising, no excessive bleeding, no anemia, and no phlebitis.

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.

Toenails 1 through 5 are thickened, discolored, dystrophic, clinically mycotic, and not elongated bilaterally.

Subungual hematoma noted to right third digit and left hallux toenail.

Full-thickness ulceration noted left plantar foot at first metatarsal head. It measures approximately 0.5 cm x 0.5 cm x 0.2 cm. Wound bed is granular. Minimal surrounding hyperkeratosis.

Full-thickness ulceration noted left plantar hallux. It measures approximately 0.2 cm x 0.2 cm x 0.2 cm. Wound bed is granular.

Minimal surrounding hyperkeratosis.

Bilateral pes planus with midfoot collapse on left foot.

DP, PT palpable bilaterally.

6-5-24

Wounds have decreased approximately 50%.

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--2cmx2cm

Product ID--IMX-0202-01

Lot Number--060723-1

Expiration Date--2025-06-07

Application number--2

Zero graft wastage.

Assessment / Plan**1. Open wound of left foot -**

Additional diagnosis detail: Open wound of left foot, subsequent encounter

S91.302D: Unspecified open wound, left foot, subsequent encounter

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

E11.49: Type 2 diabetes mellitus with other diabetic neurological complication

3. Acquired pes planus of left foot

M21.42: Flat foot [pes planus] (acquired), left foot

BARAN, Joseph J (id #21023, dob: 12/12/1951)

4. Acquired pes planus of right foot

M21.41: Flat foot [pes planus] (acquired), right foot

5. Walking disability

R26.2: Difficulty in walking, not elsewhere classified

6. Antalgic gait

R26.89: Other abnormalities of gait and mobility

7. Peripheral vascular disease

I73.9: Peripheral vascular disease, unspecified

Return to Office

- Kyler Dalton, PA-C for ESTABLISHED PATIENT 15 at TAZEWELL on 06/14/2024 at 11:15 AM
- Pedorthist One Schedule, TECH for PROSTHETIC 15 at TAZEWELL on 07/03/2024 at 09:30 AM

Encounter Sign-Off

Encounter signed-off by Christopher L. Bowlin, DPM, 06/06/2024.

Encounter performed and documented by Christopher L. Bowlin, DPM

Encounter reviewed & signed by Christopher L. Bowlin, DPM on 06/06/2024 at 10:15 AM

BARAN, Joseph J (id #21023, dob: 12/12/1951)

Encounter Date: 05/28/2024

Patient

Name	BARAN, JOSEPH (72yo, M) ID# 21023	Appt. Date/Time	05/28/2024 09:45AM
DOB	12/12/1951	Service Dept.	TAZEWELL
Provider	KYLER DALTON, PA-C		
Insurance	Med Primary: PALMETTO GBA - MEDICARE-RAILROAD RETIREMENT BOARD (MEDICARE) Insurance # : 2KU2YG9JF80 Med Secondary: MUTUAL OF OMAHA (MEDICARE SUPPLEMENT) Insurance # : 715419-92 Med Durable Medical Equipment: CGS (MEDICARE DME REGION C) Insurance # : 2KU2YG9JF80 Prescription: CVS CAREMARK - Member is eligible. details		

Chief Complaint

Left Wound Care

Patient's Care Team

Primary Care Provider: NICOLE SHIELDS MD: 424 N BROAD ST, NEW TAZEWELL, TN 37825, Ph (423) 259-5700, Fax (865) 374-2200 NPI: 1992979454

Patient's Pharmacies

WALMART PHARMACY 1159 (ERX): 432 SOUTH BROAD STREET, NEW TAZEWELL, TN 37825, Ph (423) 626-6555, Fax (423) 626-1498
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Vitals

2024-05-28 09:41

Ht: 6 ft 1 in

Wt: 300 lbs

BMI: 39.6

Allergies

Reviewed Allergies
STATINS-HMG-COA REDUCTASE INHIBITORS: Muscle cramps

Medications

Reviewed Medications	
amiodarone 200 mg tablet TAKE 1 TABLET BY MOUTH ONCE DAILY	04/22/24 filled
Basaglar KwikPen U-100 Insulin 100 unit/mL (3 mL) subcutaneous INJECT 60 UNITS SUBCUTANEOUSLY ONCE DAILY	04/18/24 filled
Brilinta 90 mg tablet TAKE 1 TABLET BY MOUTH TWICE DAILY	11/26/23 filled
celecoxib 200 mg capsule TAKE 1 CAPSULE BY MOUTH TWICE DAILY	05/24/24 filled
clopidogreL 75 mg tablet TAKE 1 TABLET BY MOUTH ONCE DAILY	03/21/24 filled
Contour Next Test Strips USE 1 STRIP TO CHECK GLUCOSE THREE TIMES DAILY	12/19/22 filled

BARAN, Joseph J (id #21023, dob: 12/12/1951)

Fiasp FlexTouch U-100 Insulin 100 unit/mL (3 mL) subcutaneous pen INJECT 12 UNITS SUBCUTANEOUSLY THREE TIMES DAILY	02/24/24	filled
furosemide 40 mg tablet TAKE 1 TABLET BY MOUTH ONCE DAILY	10/27/23	filled
HYDROcodone 10 mg-acetaminophen 325 mg tablet TAKE 1 TABLET BY MOUTH EVERY 6 HOURS AS NEEDED	02/07/24	filled
HYDROcodone 5 mg-acetaminophen 325 mg tablet TAKE 2 TABLETS BY MOUTH EVERY 6 HOURS AS NEEDED FOR PAIN FOR 3 DAYS . DO NOT EXCEED 6 PER 24 HOURS	06/07/23	filled
Levemir FlexPen 100 unit/mL (3 mL) solution subcutaneous insulin pen INJECT 60 UNITS SUBCUTANEOUSLY TWICE DAILY	08/16/23	filled
levothyroxine 150 mcg tablet TAKE 1 TABLET BY MOUTH ON MONDAYS, TUESDAYS, WEDNESDAYS, THURSDAYS, FRIDAYS, AND SATURDAYS	03/07/24	filled
linezolid 600 mg tablet TAKE 1 TABLET BY MOUTH TWICE DAILY	12/19/23	filled
lisinopril 2.5 mg tablet TAKE 1 TABLET BY MOUTH TWICE DAILY	04/12/24	filled
metoprolol succinate ER 25 mg tablet,extended release 24 hr	09/07/22	filled
nitrofurantoin macrocrystal 50 mg capsule TAKE 1 CAPSULE BY MOUTH AT BEDTIME	05/24/24	filled
nitroglycerin 0.4 mg sublingual tablet DISSOLVE ONE TABLET UNDER THE TONGUE EVERY 5 MINUTES AS NEEDED FOR CHEST PAIN. DO NOT EXCEED A TOTAL OF 3 DOSES IN 15 MINUTES	01/25/24	filled
NovoLOG Flexpen U-100 Insulin aspart 100 unit/mL (3 mL) subcutaneous INJECT 12 UNITS SUBCUTANEOUSLY THREE TIMES DAILY BEFORE MEAL(S)	07/25/23	filled
nystatin 100,000 unit/gram topical powder APPLY POWDER TOPICALLY TWICE DAILY	03/21/24	filled
pen needle, diabetic 31 gauge x 15/64" USE 1 THREE TIMES DAILY	03/25/24	filled
potassium chloride ER 20 mEq tablet,extended release(part/cryst) TAKE 1 TABLET BY MOUTH TWICE DAILY	10/27/23	filled
Praluent Pen 75 mg/mL subcutaneous pen injector INJECT 1 ML SUBCUTANEOUSLY EVERY TWO WEEKS, ROTATE INJECTION SITES	04/12/23	filled

BARAN, Joseph J (id #21023, dob: 12/12/1951)**prasugreL 10 mg tablet**

04/19/24 filled

TAKE 3 TABLETS BY MOUTH ONCE, THEN DECREASE TO 1 TABLET BY MOUTH ONCE DAILY

tamsulosin 0.4 mg capsule

04/10/24 filled

TAKE 1 CAPSULE BY MOUTH ONCE DAILY

Vaccines

None recorded.

Problems

Reviewed Problems

- Hypertensive disorder - Onset: 07/18/2023
- Type 2 diabetes mellitus - Onset: 07/18/2023

Family History

Reviewed Family History

Unspecified Relation

- Diabetes mellitus

- Heart disease

Social History

Reviewed Social History

Advance Directive

Do you have an advance directive?: Yes

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?: 05/28/2024

Has tobacco cessation counseling been provided?: Yes

On what date was tobacco cessation counseling provided?: 05/28/2024

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?: 1

What is your level of caffeine consumption?: Moderate

Diet and Exercise

What is your exercise level?: Occasional

How many times per week do you exercise?: 1-2 times per week

Activities of Daily Living

Are you able to care for yourself?: Yes

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

Surgical History

Reviewed Surgical History

- Knee Surgery
- Cabg vein three

Right Knee Replacement

Past Medical History

Reviewed Past Medical History

HPI

Pleasant 72-year-old diabetic male presents today for follow-up on wound to the bottom of his left foot. Patient reports he has been dressing the wound daily with a dry gauze and a Band-Aid. He reports that his wife has been placing collagen gauze on the bottom as well. He reports he has been wearing his offloaded insert at all times. No other complaints at this time.

ROS

Patient reports **exercise intolerance** but reports no fever, no night sweats, no significant weight gain, no significant weight loss, no chills, and no malaise. He reports **dry eyes** but reports no vision change, no irritation, and no eye disease/injury. He reports **abdominal pain** but reports no nausea, no vomiting, no constipation, normal appetite, no diarrhea, not vomiting blood, no dyspepsia, and no GERD. He reports **muscle aches and arthralgias/joint pain** but reports no muscle weakness, no back pain, no swelling in the extremities, no neck pain, no difficulty walking, no cramps, no osteoporosis, and no fractures. He reports **itching** 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. He 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. He reports **fatigue**. He reports **runny nose and itching** but reports no sinus pressure, no hives, and no frequent sneezing. He reports no difficulty hearing and no ear pain. He reports no frequent nosebleeds, no nose problems, and no sinus problems. He reports no sore throat, no

BARAN, Joseph J (id #21023, dob: 12/12/1951)

bleeding gums, no snoring, no dry mouth, no mouth ulcers, no oral abnormalities, no teeth problems, no ringing in the ears, and no sinusitis. He reports no chest pain, no arm pain on exertion, no shortness of breath when walking, no shortness of breath when lying down, no palpitations, no known heart murmur, and no ankle swelling. He reports no cough, no wheezing, no shortness of breath, no coughing up blood, and no sleep apnea. He reports no incontinence, no difficulty urinating, no hematuria, and no increased frequency. He reports no depression, no sleep disturbances, feeling safe in a relationship, no alcohol abuse, no anxiety, no hallucinations, no suicidal thoughts, no mood swings, no memory loss, no agitation, no dementia, and no delirium. He reports no swollen glands, no bruising, no excessive bleeding, no anemia, and no phlebitis.

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.

Toenails 1 through 5 are thickened, discolored, dystrophic, clinically mycotic, and not elongated bilaterally.

Subungual hematoma noted to right third digit and left hallux toenail.

Full-thickness ulceration noted left plantar foot at first metatarsal head. It measures approximately 0.5 cm x 0.5 cm x 0.2 cm. Wound bed is granular. Minimal surrounding hyperkeratosis.

Full-thickness ulceration noted left plantar hallux. It measures approximately 0.2 cm x 0.2 cm x 0.2 cm. Wound bed is granular.

Minimal surrounding hyperkeratosis.

Bilateral pes planus with midfoot collapse on left foot.

DP, PT palpable bilaterally.

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

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

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-- 2 cm x 2 cm

Product ID-- IMX-0202-01

Lot Number-- 060723-1

Expiration Date-- 2025-06-07

Application number-- 1

Zero graft wastage.

Assessment / Plan**1. Open wound of left foot -**

Additional diagnosis detail: Open wound of left foot, subsequent encounter

S91.302D: Unspecified open wound, left foot, subsequent encounter

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

E11.49: Type 2 diabetes mellitus with other diabetic neurological complication

BARAN, Joseph J (id #21023, dob: 12/12/1951)

3. Acquired pes planus of left foot

M21.42: Flat foot [pes planus] (acquired), left foot

4. Acquired pes planus of right foot

M21.41: Flat foot [pes planus] (acquired), right foot

5. Walking disability

R26.2: Difficulty in walking, not elsewhere classified

6. Antalgic gait

R26.89: Other abnormalities of gait and mobility

7. Peripheral vascular disease

I73.9: Peripheral vascular disease, unspecified

Discussion Notes

Patient evaluated today and a physical examination was performed.

Discussed diagnosis, etiology, and treatment options with patient.

Sharp debridement of full thickness ulceration to level of subcutaneous tissue was performed today without incident. Into the matrix skin graft added to wounds today. Foot was then dressed with Adaptic gauze, Steri-Strips, dry gauze dressing. Patient to change dressing in 72 hours but leave Adaptic gauze in place. Patient verbalized understanding.

Discussed importance of glycemic index and tight blood sugar control.

Patient is to avoid barefoot walking.

Continue daily foot inspections.

Continue offloaded insert at all times. ***Patient to see pedorthist for further modification.

If patient develops any concerning pedal changes or possible signs of infection, patient instructed to contact office immediately for urgent evaluation.

Patient to follow-up in 1 week for wound care.

Return to Office

- Pedorthist One Schedule, TECH for PROSTHETIC 15 at TAZEWELL on 05/29/2024 at 09:45 AM
- Christopher L. Bowlin, DPM for ESTABLISHED PATIENT 15 at TAZEWELL on 06/05/2024 at 01:00 PM

Encounter Sign-Off

Encounter signed-off by Kyler Dalton, PA-C, 05/28/2024.

Encounter performed and documented by Kyler Dalton Vogel, PA-C

Encounter reviewed & signed by Kyler Dalton Vogel, PA-C on 05/28/2024 at 03:43 PM