

- Telemedicine in

(continued)

Progress Notes (continued)

- Vitamin D deficiency
- Hyperparathyroidism (CMS/HCC)
- Obstructive sleep apnea
- Esotropia of right eye
- Amblyopia of right eye
- Refractive error

PAST MEDICAL HISTORY

has a past medical history of Anxiety, Disease of thyroid gland, Migraine, Obstructive sleep apnea, and Prediabetes.

She has no past medical history of Angina pectoris (CMS/HCC), Arthritis, Asthma, Atrial fibrillation (CMS/HCC), Awareness under anesthesia, Basal cell carcinoma, Cancer (CMS/HCC), Chronic kidney disease, Chronic pain disorder, Chronic renal failure, COPD (chronic obstructive pulmonary disease) (CMS/HCC), Deep vein thrombosis (CMS/HCC), Delayed emergence from general anesthesia, Depression, Diabetes mellitus type I (CMS/HCC), Diabetic retinopathy (CMS/HCC), Dry eyes, Epilepsy (CMS/HCC), Eye trauma, GERD (gastroesophageal reflux disease), Glaucoma, Hard to intubate, Heart disease, Heart murmur, Hiatal hernia, HIV disease (CMS/HCC), Hypertension, Hypertensive retinopathy, Infectious viral hepatitis, Macular degeneration, Malignant hyperthermia, Melanoma (CMS/HCC), Mitral valve prolapse, Motion sickness, Myocardial infarction (CMS/HCC), Parkinson's disease (CMS/HCC), Peptic ulceration, PONV (postoperative nausea and vomiting), Pseudocholinesterase deficiency, Pulmonary arterial hypertension (CMS/HCC), Pulmonary embolism (CMS/HCC), Seizures (CMS/HCC), Sickle cell anemia (CMS/HCC), Spinal headache, Squamous cell skin cancer, Stroke (CMS/HCC), TIA (transient ischemic attack), Tuberculosis, Type 2 diabetes mellitus (CMS/HCC), or Valvular disease.

PAST SURGICAL HISTORY

Past Surgical History:

Procedure	Laterality	Date
• PR EXPLORE PARATHYROID GLANDS <i>Procedure: NECK EXPLORATION WITH PARATHYROIDECTOMY; Surgeon: ; Location: SHGH OR LOC (); Service: ENT</i>	N/A	
• PR STABISMUS SURG,TWO HORIZ MUSCLE <i>Procedure: STRABISMUS SURGERY, RIGHT EYE; Surgeon: ; Location: SCCR ASC OR LOC ; Service: Ophthalmology</i>	Right	
• PR TRANSPOSITION ANY EXTRAOCUL MUSC <i>Procedure: STRABISMUS SURGERY, RIGHT EYE; Surgeon: ; Location: SCCR ASC OR LOC); Service: Ophthalmology</i>	Right	
• SKIN GRAFT <i>suffered burns and skin grafts from truck explosion</i>		
• TUBAL LIGATION		

SOCIAL HISTORY

reports that she has been smoking cigarettes. She has quit using smokeless tobacco. She reports current alcohol use of about 3.0 standard drinks of alcohol per week. She reports that she does not use drugs.

Social History

Social History Narrative

- Telemedicine in

(continued)

Progress Notes (continued)

Exercise: Walking
Exercise: Walking
Exercise- occasional 1 per week
Caffeine: 2 cups per day

FAMILY HISTORY

Family History

Problem	Relation	Age of Onset
• No Known Problems	Other	
• Hypothyroidism	Mother	
• Hypothyroidism	Sister	
• Hypothyroidism	Child	
• Glaucoma	Neg Hx	
• Macular degeneration	Neg Hx	

ALLERGIES

Allergies

Allergen	Reactions
• Sulfa (Sulfonamide Antibiotics)	

MEDICATIONS

- atorvastatin (LIPITOR) 20 mg tablet, Take 1 tablet (20 mg total) by mouth daily., Disp: 100 tablet, Rfl: 2
- cholecalciferol (VITAMIN D3) 1,250 mcg (50,000 unit) capsule, Take 1 capsule (50,000 Units total) by mouth 1 (one) time every week., Disp: 12 capsule, Rfl: 0
- levothyroxine (SYNTHROID) 175 mcg tablet, Take 1 tablet (175 mcg total) by mouth daily., Disp: 90 tablet, Rfl: 0
- LORazepam (ATIVAN) 0.5 mg tablet, TAKE 1 TO 2 TABLETS BY MOUTH EVERY 6 HOURS AS NEEDED FOR ANXIETY, Disp: 30 tablet, Rfl: 0
- sertraline (ZOLOFT) 100 mg tablet, Take 1 tablet (100 mg total) by mouth daily., Disp: 90 tablet, Rfl: 2
- HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet, Take 1 tablet by mouth every 6 (six) hours as needed for pain., Disp: 15 tablet, Rfl: 0
- LORazepam (ATIVAN) 0.5 mg tablet, Take 1-2 tablets (0.5-1 mg total) by mouth every 6 (six) hours as needed for anxiety, Disp: 30 tablet, Rfl: 0
- magnesium 30 mg tablet, Take 30 mg by mouth daily. , Disp: , Rfl:
- naloxone (Narcan) 4 mg/actuation nasal spray, 1 spray into nostril for opioid overdose. May repeat every 2 minutes as needed, alternating nostrils, Disp: 2 each, Rfl: 0

REVIEW OF SYSTEMS

Review of Systems

Constitutional: Negative.
Respiratory: Negative.
Cardiovascular: Negative.
Gastrointestinal: Negative.

- Telemedicine in

(continued)

Progress Notes (continued)

As well as what is noted in HPI

**@OBJECTIVE@
OBJECTIVE**

VITALS

Patient performed vitals:

There were no vitals filed for this visit.

VIDEO EXAM VIA TELEMEDICINE

Physical Exam

General: well appearing. does not appear to be in acute distress.

Eyes: Conjunctivae clear.

Cardiac: Well perfused skin, no flushing, none cyanosis noted

Pulmonary: Pulmonary effort regular, no distress. Speaking in full sentences without respiratory distress. Cough was not audible during video visit.

Neuro: alert and oriented times 3. Patient is answering questions appropriately

ASSESSMENT & PLAN

Generalized anxiety disorder (Primary)

- LORazepam; TAKE 1 TO 2 TABLETS BY MOUTH EVERY 6 HOURS AS NEEDED FOR ANXIETY Dispense: 30 tablet; Refill: 0

Hypothyroidism, unspecified type

Prediabetes

____-year old with generalized anxiety disorder. Refill lorazepam.

–Hypothyroid–continue levothyroxine

–Prediabetes–check hemoglobin A1c

Medication(s) use, benefits, and side effects reviewed. If symptoms persists, make a follow up appointment. For worsening or new onset of symptoms, go to Urgent Care or Emergency room.

ER precautions advised. Patient verbalized understanding and is agreeable to plan of care. Patient's question(s) were answered.

FOLLOW UP

No follow-ups on file.

SIGNATURE

I saw this patient via interactive audio and video telecommunications system.

Progress Notes (continued)

Electronically signed by _____ at _____

END OF DOCUMENT

MRN: , DOB: , Sex: F

Patient

Patient Alias:

Demographics

Name:
Address:
Date of birth: Sex: Gender identity: Female
Ethnicity: Race: Language: English
Email: Mobile:

Relationships

Name	Relation to Patient	Phone Number
	Daughter	Mobile:

- Telemedicine in

Progress Notes

Progress Notes

at

PROGRESS NOTE

PATIENT:

REASON FOR VISIT: Video Visit -

Chief Complaint

Patient presents with

- Follow-up

@SUBJECTIVE@

SUBJECTIVE

HISTORY OF PRESENT ILLNESS

is a y.o. female seen today via interactive audio and video for a medication refill. She needs a refill on lorazepam for her anxiety. She continues to take sertraline. She states overall she has been doing well. She quit smoking cigarettes 3-1/2 months ago. Her weight has been stable. She is looking forward to a trip to to see her mom next week.

ACTIVE PROBLEM LIST

Patient Active Problem List

Diagnosis

- Hypothyroidism
- Right shoulder pain
- Dyslipidemia
- Generalized anxiety disorder
- Rash
- Prediabetes