

** PROGRESS NOTES *****

LOCAL TITLE: PRIMARY CARE SECURE MESSAGING
STANDARD TITLE: PRIMARY CARE SECURE MESSAGING

DATE OF NOTE:

AUTHOR:

INSTITUTION:

DIVISION:

URGENCY:

-----Original Message-----

Sent: 03/03/2016 03:30 PM

From:

To: *

Subject:

Dr. [REDACTED]

[REDACTED] a prescription renewal of Omeprazole (20mg) should have noted that I did increase the dosage from 1 per day to 2 per day as you recommended during our last discussion (if 1 per day did not improve my swallowing difficulties). So, the new prescription should reflect this increase.

-----Original Message-----

Sent: 03/04/2016 04:06 PM

RN STAFF

Signed: 03/04/2016 16:06

Receipt Acknowledged By:

03/05/2016 18:05

/es/ [REDACTED]

LOCAL TITLE: PRIMARY CARE SECURE MESSAGING
STANDARD TITLE: PRIMARY CARE SECURE MESSAGING

DATE OF NOTE: MAR 03, 2016@15:01:29 ENTRY DATE: MAR 03, 2016@15:01:31

CLIN DOC: Multi-Document

System: VISTA.WASHINGTON.MED.VA.GOV

Page: 1

Printed on: Apr 05, 2016 10:05:15 am

Division: 688

AUTHOR: [REDACTED] EXP COSIGNER:
INSTITUTION: FORT BELVOIR VA CLINIC
DIVISION: ALEXANDRIA CBOC
URGENCY: STATUS: COMPLETED

-----Original Message-----

Sent: 03/02/2016 04:14 PM

[REDACTED]
Subject: Medication Refills

[REDACTED]
I have requested me last refills of Omeprazole (20mg), Hydrochlorothiazide (12.5mg), and Metoprolol Tartrate (100mg). Please provide additional refills for these medications, or advise if I need an appointment to do this.

[REDACTED]
-----Original Message-----

Sent: 03/03/2016 03:01 PM

[REDACTED]
Subject: Medication Refills

Forwarding your request for medication renewal to [REDACTED]

Please make a [REDACTED] at your earliest convenience. D [REDACTED] 15.

[REDACTED]
RN STAFF
Signed: 03/03/2016 15:01

Receipt Acknowledged By:
03/03/2016 16:39 /es/ [REDACTED]
MD

LOCAL TITLE: PRIMARY CARE SECURE MESSAGING
STANDARD TITLE: PRIMARY CARE SECURE MESSAGING
DATE OF NOT [REDACTED] MAR 03, 2016@14:57:37
AUTHO [REDACTED]
INSTITUTIO [REDACTED]
DIVISION: ALEXANDRIA CBOC
URGENCY: STATUS: COMPLETED

CLIN DOC: Multi-Document

[REDACTED]
System: VISTA.WASHINGTON.MED.VA.GOV

Page: 2
Printed on: Apr 05, 2016 10:05:15 am
Division: 688

-----Original Message-----

Sent: 03/02/2016 04:30 PM

[REDACTED]

[REDACTED]

[REDACTED] regarding my depression in September 2015, and she provided
[REDACTED] for Duloxetine (60mg/l per day). This is a medication I
[REDACTED] VA health services. I have an appointment with Dr.
[REDACTED] but I will be out of the prescription before then. I
didn't know that I wouldn't have the option to communicate my needs, or renew
prescriptions except with an appointment with her until now. Are you able to
help at all with this circumstance? Please advise how you think I should
proceed.

-----Original Message-----

Sent: 03/03/2016 02:57 PM

From: [REDACTED]

To: [REDACTED]

Subject: [REDACTED]

Forwarding your concerns [REDACTED]

[REDACTED]

Signed: 03/03/2016 14:57

Receipt Acknowledged By:

03/03/2016 16:41 /es/ [REDACTED]

MD

03/07/2016 06:06 /es/ [REDACTED]

NURSE PRACTITIONER

LOCAL TITLE: PCC - TELEPHONE NOTE

STANDARD TITLE: PRIMARY CARE TELEPHONE ENCOUNTER NOTE

DATE OF NOTE: NOV 25, 2015@16:51 ENTRY DATE: NOV 25, 2015@16:51:53

AUTHOR: [REDACTED] EXP COSIGNER:

INSTITUTION: FORT BELVOIR VA CLINIC

DIVISION: ALEXANDRIA CBOC

URGENCY:

STATUS: COMPLETED

Reason for call/Assessment/Plan:

Renewed BP meds.
Discussed in detail endoscopy findings, bx report and GI recommendations for further f/u. He will contact me in 4 weeks with progress of sx of dysphagia on QDaily PPI.

Signed: 11/25/2015 16:53

LOCAL TITLE: GASTROENTEROLOGY BIOPSY RESULTS LETTER
STANDARD TITLE: GASTROENTEROLOGY LETTERS
DATE OF NOTE: NOV 02, 2015@11:33 ENTRY DATE: NOV 02, 2015@11:33:37
AUTHOR: EXP COSIGNER:
INSTITUTION: WASHINGTON
DIVISION: WASHINGTON VAMC
URGENCY: STATUS: COMPLETED

The biopsy obtained during your endoscopic exam on Oct 29,2015:
Did not reveal any sign of cancer., Showed:
DIAGNOSIS

1. ESOPHAGUS, 40 CM, BIOPSY:
GASTRIC MUCOSA WITH CHRONIC INFLAMMATION AND REACTIVE
CHANGES.

NO EVIDENCE OF INTESTINAL METAPLASIA OR DYSPLASIA.

2. PROXIMAL ESOPHAGUS, BIOPSY:
SQUAMOUS MUCOSA, NO SIGNIFICANT HISTOPATHOLOGIC
ABNORMALITY.

3. DISTAL ESOPHAGUS, BIOPSY:
CHRONIC ESOPHAGITIS CONSISTENT WITH REFLUX.

MINUTE SUPERFICIAL STRIPS OF BENIGN GASTRIC GLANDULAR
EPITHELIUM.

These findings are consistent with acid reflux.
Take the medication we prescribed and follow up with primary care.

ATTENDING
Signed: 11/02/2015 11:36

Receipt Acknowledged By:
11/02/2015 12:12 /es/ Assistant