

**TwelveStone Health Partners**

Fax Referral To: (800) 223-4063

Email: intake@12stonehealth.com

Direct Phone: (615) 278-3350

Toll Free: (844) 893-0012

**SKYRIZI ORDER FORM**

Date: <u>05/30/2024</u>	ICD-10 Code: <u>K50.11 Crohn's</u>	Therapy Status
Patient Name: <u>AKram M Abdelwahed</u>	Allergies: <u>ibuprofen, acetaminophen</u>	<input checked="" type="checkbox"/> New Start
Date of Birth: <u>02/17/1983</u>	Weight: <u>195</u> lbs OR _____ kg	<input type="checkbox"/> Continuing Therapy: Last Dose: _____

**PROVIDER INFORMATION**

Ordering Provider: <u>Robert D. Lafsky, MD</u>	Provider Fax: <u>703-858-3061</u>
Provider NPI: <u>1336124163</u>	Provider Address: <u>19450 Deerfield Ave Ste. 265</u>
Provider Phone: <u>703-858-3060</u>	<u>Leesburg VA 20176</u>

**MEDICATION ORDER**

Skyrizi	<input checked="" type="checkbox"/> Crohn's Disease Induction Phase: Administer Skyrizi 600mg IV at week 0, week 4 and week 8 per protocol.	Refills x one year from date of signature unless indicated below.  <input checked="" type="checkbox"/> <u>1YR</u> Refills	Please include the following lab results required for infusion. If no results are available, the following labs will be drawn prior to first infusion:  <input checked="" type="checkbox"/> Negative TB Quantiferon Gold, or TB Skin Test within the last 12 months. <input checked="" type="checkbox"/> ALT/AST at baseline (within the past 60 days). <input checked="" type="checkbox"/> Bilirubin at baseline (within 60 days).
	<input checked="" type="checkbox"/> Crohn's Disease Maintenance Phase: Administer Skyrizi: <input type="checkbox"/> 180mg SQ at week 12 and every 8 weeks thereafter. <input checked="" type="checkbox"/> 360mg SQ at week 12 and every 8 weeks thereafter.		

**PRE-MEDICATIONS**

<b>Oral</b> <input type="checkbox"/> Acetaminophen: _____ 325mg _____ 500mg _____ 650mg <input type="checkbox"/> Loratadine: 10mg <input type="checkbox"/> Cetirizine: 10mg <input type="checkbox"/> Diphenhydramine: _____ 25mg _____ 50mg <input type="checkbox"/> Famotidine: _____ 20mg _____ 40mg <input type="checkbox"/> Ibuprofen: _____ 200mg _____ 400mg _____ 600mg <input type="checkbox"/> Ondansetron: _____ 4mg _____ 8mg <input type="checkbox"/> Other: _____	<b>IV</b> <input type="checkbox"/> Dexamethasone: _____ 4mg _____ 8mg <input type="checkbox"/> Diphenhydramine: _____ 25mg _____ 50mg <input type="checkbox"/> Famotidine: _____ 20mg _____ 40mg <input type="checkbox"/> Methylprednisolone: 125mg <input type="checkbox"/> Hydrocortisone: 100mg <input type="checkbox"/> Ondansetron: _____ 4mg _____ 8mg <input type="checkbox"/> Other: _____
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**LAB ORDERS** (please indicate any labs to be drawn and frequency)

(Please fax this signed order form, along with the following documents to 800-223-4063)

- History & Physical, Last Office Visit Note
- Patient Demographics and Insurance Information
- Medication List
- Recent Lab Work

\*Surveillance lab ordering and monitoring is the responsibility of the prescriber\*\*

By signing below, I certify that the above therapy is medically necessary. **Prescriber's Signature (SIGN BELOW)**

Dispense as Written:

Substitution Allowed:

Prescriber Name

Date

Prescriber Name

Date

ABDELWAHED, Akram M DOB: 02/17/1983 (41 yo M) Acc No. E955152 DOS:  
05/29/2024



## Abdelwahed, Akram M

41 Y old Male, DOB: 02/17/1983

Account Number: E955152

13100 Chapel Hill Dr, Fredericksburg, VA-22407

Home: 571-559-6773

Guarantor: Abdelwahed, Akram M Insurance: Aetna

Better Health of Virginia Payer ID: 128VA

PCP: DOCTOR UNKNOWN

Appointment Facility: Loudoun Gastroenterology

05/29/2024

Progress Notes: Robert D Lafsky, MD

**Current Medications**

**Infliximab**  
 1. Infliximab 875-125 MG tablet tablet orally every 24hrs  
 2. Mesalamine 500 MG tablet orally three times a day  
 3. Prednisone 20 MG tablet orally twice a day  
 No refilling/PRN

**Medical**  
 1. Acyclovir 800 MG tablet as needed orally every 4 hrs stop date 06/04/2024  
 Discontinued

**Acyclovir 800 MG tablet**  
 1. Acyclovir 800 MG tablet orally twice a day  
 2. Rinvoq 30 MG tablet Extended Release 24 Hour tablet orally once a day stop date 06/24/2024 Notes: Maintenance Dose

**Mesalamine 500 MG tablet**  
 1. Mesalamine 500 MG tablet orally 4 times a day with 2 ounces of water and take by mouth 4 times a day orally  
 2. One prolo 40 MG capsule orally 4 times a day capsules by mouth 4 times a day orally  
 3. Prednisone 5 MG tablet take 4 tablets a day 7 days 1 tab/4x7d 2 tab/4x7d 1 tab/4x7d then stop Oral Medication List reviewed and reconciled with the patient

**Past Medical History**  
 Medical History Verified

### Reason for Appointment

1. Discussion - in person

### History of Present Illness

#### History of Present Illness:

5/29/24 Deteriorated with increasing abdominal pain and increasing mouth sores. He has been to Reston and then to fair Oaks. CT shows left-sided colitis, similar to before. Markedly increased sed rate at Inova. Discharged a couple days ago on prednisone and antibiotics.

2/23/24 We put him on Rinvoq and the abdominal pain has improved considerably along with diarrhea. He still has the anal tags bothering him and he has had a significant outbreak of herpes in the general area confirmed by lab testing. The mouth ulcers bother him less but are still present. Diarrhea is reduced. Acyclovir is somewhat helpful for the genital outbreak but has not eliminated it. He also has a swelling noted in the left middle finger.

11/17/2023 This 40-year-old male seeks another opinion about bloody diarrhea and anal problems. It sounds like he originally presented with perforated appendicitis 2 years ago but since then he has had frequent stools with blood and severe anal pain with protrusions. He also suffers from mouth ulcers. Work-up has shown proliferative anal disease typical for Crohn's and a fairly mild inflammatory findings in the rectosigmoid and ascending colon. Deep fissuring ulcers and skip areas are not described. The pathologist described mild focally active colitis. Serologic testing was negative for viral hepatitis, immunity to A not B, ASCA 167, ACCA 113 and ALCA 68, all 3 elevated, suggestive of Crohn's. Mild CRP at 1.3. The patient has received mesalamine without much benefit and prednisone has not been helpful either. After appropriate work-up including negative QuantiFERON he received induction and 1 maintenance dose of infliximab without any response; trough levels were ordered but not done. His main

Progress Note: Robert D Lafsky, MD 05/29/2024

ABDELWAHED, Akram M DOB: 02/17/1983 (41 yo M) Acc No. E955152 DOS:  
05/29/2024

### Surgical History

Appendectomy

Prostatectomy

Hand surgery

### Family History

Father: diverticulitis hemorrhoids

dmr liver

Mom: lung cancer death

### Allergies

Cefamandole Allergy

### Hospitalization/Major

### Diagnostic Procedure

Dukes Path Hospitalization

### Review of Systems

#### MGROS

EYE: No cataracts, no vision loss, no glaucoma, no other eye diseases. ENT: Good hearing, no tinnitus. ENT: Oral ulcers No nasal congestion, sinus problems. Lungs: No asthma, no cough, no breathing trouble. Heart: No chest pain, no abnormal rhythm, no stent, no bypass. Renal: Gen herpes outbreak No leakage, no stream problems, no infection, no blood, no stones, no known kidney failure. Back: No back pain. Joints: No arthritis, no other limb pain. Neuro: No stroke, no seizures, no memory loss, no movement disorder. Psych: No depression, no sleep disorder, no ADD, no other psych problems. Endo: No thyroid problems, no other glandular/hormone problems. Heme: No anemia, no other blood diseases. Skin: No skin cancers, no active rash.

complaint is ongoing anal pain as well as the mouth ulcers. He has been very frustrated with previous caregivers and seeks another opinion now. He denies joint pains or ophthalmologic problems. He denies other medical problems.

A verbal consent was obtained by patient to perform telemedicine. Telemedicine platform used with patient: telephone.

Patient located in the state of Virginia at home. Confirmed providers license is within the state documented by patient. [x] Yes [ ] No.

### Vital Signs

Ht: 73 in, Wt: 190 lbs, Temp: 97.7 F, BMI: 25.06 Index, WC: -8 lbs, BSA: 2.1, Wt-kg: 86.18 kg.

### Examination

#### General Examination:

GENERAL APPEARANCE: awake, alert, in no acute distress, did not appear uncomfortable.

PSYCH: mood was euthymic.

HEAD: normal.

LUNGS: normal respiration, rhythm, and depth, normal and symmetric excursion.

NEUROLOGIC: alert and oriented to time, place, and person.

### Assessments

1. Crohn's disease of colon with rectal bleeding - K50.111

Very problematic case, apparently a poor response to Rinvoq. Reasonable to try Skyrizi if we can get him approved for that.

### Treatment

#### 1. Crohn's disease of colon with rectal bleeding

Refill predniSONE Tablet, 20 MG, 1 tablet, Orally, twice a day, 7 days, 14 Tablet, Refills 0

Notes: Reasonable to continue steroid for now. Finish the antibiotics as well. I am concerned that he may reach a point where surgery is the only option and given the severe anal disease, AP resection would likely be necessary as part of that.

#### 2. Others

##### Notes:

This patient encounter is appropriate and reasonable under the circumstances given the patient's particular presentation at this time. The patient has been advised of the potential risks and limitations of this mode of treatment (including, but not limited to, the absence of in-person examination) and has agreed to be treated in a remote fashion in spite of them.

Any and all of the patient's/patient's family's questions on this issue have been answered, and I have made no promises or guarantees to the

Progress Note: Robert D Lafsky, MD 05/29/2024

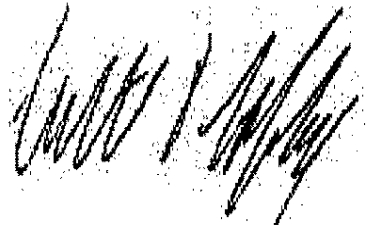
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ABDELWAHED, Akram M DOB: 02/17/1983 (41 yo M) Acc No. E955152 DOS:  
05/29/2024

patient. The patient has also been advised to contact this office for worsening conditions or problems, and seek emergency medical treatment and/or call 911 if the patient deems either necessary.

**Visit Codes**

99213 Level 3 Office Visit.



Electronically signed by Robert Lafsky, MD, 0101031988  
on 05/30/2024 at 10:52 AM EDT

Sign off status: Pending

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Loudoun Gastroenterology  
19450 Deerfield Ave  
Suite 265  
Leesburg, VA 201765179  
Tel: 703-858-3060  
Fax: 703-858-3061

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Progress Note: Robert D Lafsky, MD 05/29/2024

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Abdelwahed, Akram M, 41 Y, M, 02/17/1983

571-559-6773

## CUMULATIVE REPORTS

## Lipid Panel 303756

COLLECTION DATE	04/02/2024
Order Date	04/02/2024
Result Date	04/03/2024
Ordering Physician	Lafsky, Robert
Triglycerides	112 0-149 mg/dL
HDL Cholesterol	37L >39 mg/dL
Cholesterol, Total	176 100-199 mg/dL
VLDL Cholesterol Cal	20 5-40 mg/dL
LDL Chol Calc (NIH)	119H 0-99 mg/dL
Comment:	NP

## Sedimentation Rate-Westergren 005215

COLLECTION DATE	04/02/2024
Order Date	04/02/2024
Result Date	04/03/2024
Ordering Physician	Lafsky, Robert
Sedimentation Rate-Westergren	19H 0-15 mm/hr

**\*CBC With Differential/Platelet 005009**

COLLECTION DATE	04/02/2024
Order Date	04/02/2024
Result Date	04/03/2024
Ordering Physician	Lafsky, Robert
Hemoglobin	13.7 13.0-17.7 g/dL
Hematocrit	43.5 37.5-51.0 %
Platelets	349 150-450 x10E3/uL
WBC	6.1 3.4-10.8 x10E3/uL
RBC	5.54 4.14-5.80 x10E6/uL
Hematology Comments:	NP
Immature Grans (Abs)	0.0 0.0-0.1 x10E3/uL
NRBC	NP
Immature Granulocytes	0 Not Estab. %
Baso (Absolute)	0.0 0.0-0.2 x10E3/uL
Monocytes	13 Not Estab. %
MCH	24.7L 26.6-33.0 pg
Basos	0 Not Estab. %
MCV	79 79-97 fL
Eos (Absolute)	0.0 0.0-0.4 x10E3/uL
MCHC	31.5 31.5-35.7 g/dL
RDW	14.9 11.6-15.4 %
Monocytes(Absolute)	0.8 0.1-0.9 x10E3/uL
Neutrophils	74

**\*CBC With Differential/Platelet 005009**

COLLECTION DATE	04/02/2024
Lymphs	12 Not Estab. %
Eos	1 Not Estab. %
Immature Cells	NP
Neutrophils (Absolute)	4.5 1.4-7.0 x10E3/uL
Lymphs (Absolute)	0.7 0.7-3.1 x10E3/uL

**C-Reactive Protein, Quant 006627**

COLLECTION DATE	04/02/2024
Order Date	04/02/2024
Result Date	04/03/2024
Ordering Physician	Lafsky, Robert
C-Reactive Protein, Quant	23H 0-10 mg/L

**\*Comp. Metabolic Panel (14) 322000**

COLLECTION DATE	04/02/2024
Order Date	04/02/2024
Result Date	04/03/2024
Ordering Physician	Lafsky, Robert
Calcium, Serum	9.5 8.7-10.2 mg/dL
Protein, Total, Serum	8.2 6.0-8.5 g/dL
ALT (SGPT)	21 0-44 IU/L
AST (SGOT)	23 0-40 IU/L
Alkaline Phosphatase, S	120 44-121 IU/L
Bilirubin, Total	0.4 0.0-1.2 mg/dL
A/G Ratio	1.2 1.2-2.2
Globulin, Total	3.7 1.5-4.5 g/dL
Albumin, Serum	4.5 4.1-5.1 g/dL
Carbon Dioxide, Total	25 20-29 mmol/L
Glucose, Serum	73 70-99 mg/dL
Chloride, Serum	101 96-106 mmol/L
Potassium, Serum	4.2 3.5-5.2 mmol/L
Sodium, Serum	140 134-144 mmol/L
BUN/Creatinine Ratio	19 9-20
Creatinine, Serum	0.78 0.76-1.27 mg/dL
BUN	15 6-24 mg/dL
eGFR	115 >59 mL/min/1.73





Aetna Better Health of Virginia

Member ABDELWAHEB AKRAM

Member Number ID# 350410782078 DOB 02/17/1983 Sex M

Language ENGLISH

POP 00441078

POP Phone 1-703-476-1050

Effective Date 01/01/2024

Rx# 016591 R/PON ADV RXGRP4RX8837

Pharmacist Use Only 1-866-386-7882

NCIS Careline

Aetna Better Health.com/Virginia

THIS IS NOT A GUARANTEE OF ELIGIBILITY ENROLLMENT OR PAYMENT

AVATED

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Submit your request to

Aetna Better Health of Virginia

Aetna Better Health of Virginia

PO Box 1234

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**LOUDOUN MEDICAL GROUP - DEMOGRAPHICS****Patient Information:**

Last Name: Abdelwahed, Akram M  
Patient's DOB: 02/17/1983      Age: 41 Y      Sex: male  
Patient Address: 13100 Chapel Hill Dr  
Fredericksburg VA 22407  
Home Phone: 571-559-6773  
Cell Phone: 571-559-6773  
Email: akwahed@gmail.com

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**Patient Insurance:**

Primary Insurance: Aetna Better Health of Virginia  
Telephone #: 866-827-2710  
Policy #: 350410732018  
Name of Insured: Abdelwahed, Akram M  
Relationship: Self - patient is the insured  
DOB: 02/17/1983