

**GREENWELL, Martha (id #7, dob: 09/23/1945)**

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## Referral Order

06/23/2025

To Provider	From Provider
<b>MCGARTH PODIATRY AND WOUND CARE</b>  <b>1648 ALEXANDRIA DRIVE</b> <b>LEXINGTON, KY 40504</b> <b>Phone:</b> <b>Phone: (859) 285-9562</b> <b>Fax:</b> <b>Fax: (859) 399-6697</b>	<b>LAUREN CASEY, APRN</b> <b>Alford's Care2U</b> <b>255 OVERLOOK LN</b> <b>SMITHS GROVE, KY 42171-8322</b> <b>Phone: (270) 780-4755</b> <b>Fax: (833) 973-3689</b>

### Referral Order Information

<b>Diagnosis</b>	<b>Thickened nails</b> <b>ICD-10: L60.2: Onychogryphosis</b>
<b>Order Name</b>	<b>Orders included: 1</b>  <b>Thickened nails</b> <b>ICD-10: L60.2: Onychogryphosis</b> <b>• PODIATRIST REFERRAL</b> <b>Schedule Within: provider's discretion</b>  <b>Place of service: OFFICE</b> <b>Procedure code: 99499</b> <b>Authorization: Humana (Medicare Replacement/Advantage - PPO)  </b> <b>NOTREQUIRED   Not Required for 99499</b>
<b>Notes</b>	

### Patient Information

<b>Patient Name</b>	<b>GREENWELL, MARTHA</b>
<b>Sex - DOB - Age</b>	<b>F 09/23/1945 79yo</b>
<b>Address</b>	<b>74 MACK WALTERS RD</b> <b>SHELBYVILLE, KY 40065-1738</b>
<b>Phone</b>	<b>H: (502) 437-0814</b>
<b>Primary Insurance</b>	<b>Humana (Medicare Replacement/Advantage - PPO)</b> <b>ID: H55529269</b> <b>Policy Holder: GREENWELL, MARTHA</b>
<b>Secondary Insurance</b>	<b>None recorded.</b>

Electronically Signed by: LAUREN CASEY, APRN

*Lauren Casey, APRN*

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LAUREN CASEY, APRN

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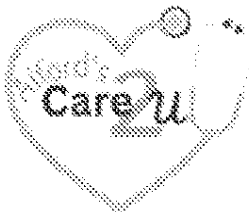
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Alford's Care2U • 255 OVERLOOK LN, SMITHS GROVE KY 42171-8322

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## **Alford's Care2U, LLC**

255 Overlook Lane  
Smiths Grove, KY 42171  
(270) 780-4755

Alford's Care2U, LLC  
255 OVERLOOK LN  
SMITHS GROVE, KY 42171-8322  
Phone: (270) 780-4755, Fax: (833) 973-3689

Date: 06/23/2025

RE: Martha Greenwell, DOB: 09/23/1945, PT ID #7

Dear McGarth Podiatry And Wound Care,

The following is a summary of the care this patient has received at our practice. If you have questions, please contact our office.

Sincerely,

Electronically Signed by: LAUREN CASEY, APRN

*Lauren Casey, APRN*

## **Referral Note for Martha Greenwell**

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### **Encounter Details**

Lauren Casey: 255 OVERLOOK LN , SMITHS GROVE, KY 42171-8322, USA, Ph. tel: (270) 780-4755

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### Demographics

<b>Sex:</b>	Female	<b>Ethnicity:</b>	Not Hispanic or Latino
<b>DOB:</b>	09/23/1945	<b>Race:</b>	White
<b>Preferred language:</b>	English	<b>Marital status:</b>	Information not available
<b>Previous Name:</b>			

**Contact:** 1344 AUDUBON DR, SHEPHERDSVILLE, KY 40165-8886, USA, Ph. tel:+1-(502) 437-0814 (Primary Home)

**Other Addresses:** 74 MACK WALTERS RD, SHELBYVILLE, KY 40065-1738, USA (Current Home Address)  
74 MACK WALTERS RD, SHELBYVILLE, KY 40065-1738, USA (Previous Billing Address)  
74 MACK WALTERS ROAD, SHELBYVILLE, KY 40065, USA (Previous Home Address)

### Reason for Referral

### Reason for Visit

None recorded.

### Assessment

No assessment recorded.

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## Plan of Treatment

Reminders	Order Date	Submit Date	Provider	Last Modified By	Organization Details	Last Modified Time	Details
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<b>Appointments</b>	FOLLOW UP 30	06/23/2025 11:30AM	LAUREN CASEY, APRN	Not available	Not available	Not available	
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	FOLLOW UP 30	07/28/2025 01:00PM	LAUREN CASEY, APRN	Not available	Not available	Not available	
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**Lab** None recorded.

<b>Referral</b>	podiatrist referral	06/23/2025 06/23/2025	ATHENAFAX	McGarth Podiatry and Wound Care, 1648 Alexandria Drive, Lexington, KY, 40504, Ph (859) 285-9562	06/23/2025 13:13:37
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**Procedures** None recorded.

**Surgeries** None recorded.

**Imaging** None recorded.

**Medication Orders** None recorded.

Patient Targets No targets recorded.

Patient Instructions No instructions recorded.

## Results

None recorded.

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**Problems**

Name	Problem SNOMED Code	Status	Onset Date	Resolution Date	Notes	Provider Name and Address	Organization Details	Recorded Time
Severe dementia	428351000124105	Active	10/08/2024			LAUREN CASEY, APRN 255 Overlook Lane, Smiths Grove, KY, 42171-8322, US	KY - Alford's Care2U LLC	10/08/2024 17:02:45
Peripheral vascular disease	400047006	Active	10/08/2024			LAUREN CASEY, APRN 255 Overlook Lane, Smiths Grove, KY, 42171-8322, US	KY - Alford's Care2U LLC	10/08/2024 17:02:53
Hypothyroidism	40930008	Active	10/08/2024			LAUREN CASEY, APRN 255 Overlook Lane, Smiths Grove, KY, 42171-8322, US	KY - Alford's Care2U LLC	10/08/2024 17:03:00
Seasonal allergy	444316004	Active	10/08/2024			LAUREN CASEY, APRN 255 Overlook Lane, Smiths Grove, KY, 42171-8322, US	KY - Alford's Care2U LLC	10/08/2024 17:03:08
Hyperlipidemia	55822004	Active	10/08/2024			LAUREN CASEY, APRN 255 Overlook Lane, Smiths Grove, KY, 42171-8322, US	KY - Alford's Care2U LLC	10/08/2024 17:03:15
Vitamin D deficiency	34713006	Active	10/08/2024			LAUREN CASEY, APRN 255 Overlook Lane, Smiths Grove, KY, 42171-8322, US	KY - Alford's Care2U LLC	10/08/2024 17:03:22

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Vitamin B12 deficiency (non anemic)	64117007	Active 10/08/2024	LAUREN CASEY, APRN	KY - Alford's Care2U LLC	10/08/2024 17:03:30
			255 Overlook Lane, Smiths Grove,		
			KY, 42171-8322, US		
Insomnia disorder related to another mental disorder	24121004	Active 10/08/2024	LAUREN CASEY, APRN	KY - Alford's Care2U LLC	10/08/2024 17:03:41
			255 Overlook Lane, Smiths Grove,		
			KY, 42171-8322, US		
Thiamine deficiency	399357009	Active 10/08/2024	LAUREN CASEY, APRN	KY - Alford's Care2U LLC	10/08/2024 17:03:49
			255 Overlook Lane, Smiths Grove,		
			KY, 42171-8322, US		
Mental disorder	74732009	Active 10/08/2024	LAUREN CASEY, APRN	KY - Alford's Care2U LLC	10/08/2024 17:04:02
			255 Overlook Lane, Smiths Grove,		
			KY, 42171-8322, US		
Polyarthropathy	36186002	Active 10/08/2024	LAUREN CASEY, APRN	KY - Alford's Care2U LLC	10/08/2024 17:04:10
			255 Overlook Lane, Smiths Grove,		
			KY, 42171-8322, US		
Primary malignant neoplasm of left lung	890528009	Active 10/08/2024	LAUREN CASEY, APRN	KY - Alford's Care2U LLC	10/08/2024 17:04:23
			255 Overlook Lane, Smiths Grove,		
			KY, 42171-8322, US		

**Problem Notes**

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None recorded.

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**Procedures**

Surgical History

None recorded.

Imaging Results

None recorded.

Procedure Notes

None recorded.

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**Medical Equipment**

None Reported.

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**Allergies**

No known drug allergies

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**Medications**

Name	Sig	Start Date	Stop Date	Status	NoteLastModified by	Organization Details	LastModified Time
prednisone 10 mg tablet	TAKE ONE TABLET BY MOUTH EVERY MORNING FOR 5 DAYS		02/24/2025	completed	lcasey39	Not Available	02/24/2025 00:00:00
atorvastatin 20 mg tablet	TAKE ONE TABLET BY MOUTH AT BEDTIME			active	API-1839	Not Available	Not Available
cetirizine 10 mg tablet	TAKE ONE TABLET BY MOUTH AT BEDTIME			active	API-1839	Not Available	Not Available
cyanocobalamin (vit B-12) 1,000 mcg tablet	TAKE ONE TABLET BY MOUTH IN THE MORNING			active	API-1839	Not Available	Not Available
thiamine HCl (vitamin B1) 100 mg tablet	TAKE ONE TABLET BY MOUTH EVERY MORNING			active	API-1839	Not Available	Not Available
risperidone 0.25 mg tablet	TAKE ONE TABLET BY MOUTH EVERY MORNING and TAKE ONE TABLET AT BEDTIME			active	API-1839	Not Available	Not Available
clopidogrel 75 mg tablet	TAKE ONE TABLET BY MOUTH IN THE MORNING			active	API-1839	Not Available	Not Available
trazodone 100 mg tablet	TAKE TWO TABLETS BY MOUTH AT BEDTIME	06/16/2025		active	ATHENA	Not Available	06/16/2025 00:00:00
trazodone 150 mg tablet	Take 12 tablets every day by oral route at bedtime for 90 days.		02/24/2025	completed	lcasey39	Not Available	02/24/2025 00:00:00
divalproex 125 mg tablet, delayed release	TAKE ONE TABLET BY MOUTH EVERY MORNING and TAKE ONE TABLET BY MOUTH NOON and TAKE ONE TABLET BY MOUTH AT BEDTIME			active	API-1839	Not Available	Not Available
ergocalciferol (vitamin D2) 1,250 mcg (50,000 unit) capsule	TAKE ONE CAPSULE BY MOUTH SUNDAY			active	API-1839	Not Available	Not Available
fluticasone propionate 50 mcg/actuation nasal spray, suspension	INSTILL 1 SPRAY IN EACH NOSTRIL DAILY			active	API-1839	Not Available	Not Available
levothyroxine 112 mcg tablet	TAKE ONE TABLET BY MOUTH NOON			active	API-1839	Not Available	Not Available
ropinirole 4 mg tablet	TAKE ONE TABLET BY MOUTH IN THE MORNING and TAKE ONE TABLET BY MOUTH NOON and TAKE ONE TABLET BY MOUTH AT BEDTIME			active	API-1839	Not Available	Not Available
Vitamin B1	Take 1 tablet every day by		02/24/2025	completed	lcasey39	Not	02/24/2025

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(Thiamine) 100 mg tablet	oral route for 90 days.			Available	00:00:00
escitalopram 10 mg tablet	TAKE ONE TABLET BY MOUTH IN THE MORNING	active	API-1839	Not Available	Not Available
cyclobenzaprine 5 mg tablet	TAKE 1 TO 2 TABLETS BY MOUTH EVERY 8 HOURS AS NEEDED	02/24/2025 completed	lcasey39	Not Available	02/24/2025 00:00:00
memantine 5 mg tablet	TAKE ONE TABLET BY MOUTH IN THE MORNING and TAKE ONE TABLET BY MOUTH AT BEDTIME	active	API-1839	Not Available	Not Available
melatonin 5 mg tablet	TAKE ONE TABLET BY MOUTH AT BEDTIME	active	API-1839	Not Available	Not Available
iHealth COVID-19 Antigen Rapid Home Test kit	USE TO TEST FOR COVID-19 AS NEEDED	active	INTERFACE	Not Available	Not Available

**History of Present Illness**

None recorded.

**Physical Exam**

**Notes:** None recorded.

**Review of Systems**

None recorded.

**Vitals**

Date Recorded	Body height	Heart rate	Respiratory rate	Body temperature	Oxygen saturation	Oxygen saturation in Arterial blood by Pulse oximetry	Provider Name and Address	Organization Details	Last Updated Date/Time
06/23/2025	160.02 cm	70 /min	16 /min	98.1 [degF]	97 %	97 %	LAUREN CASEY, APRN 255 Overlook Lane, Smiths Grove, KY, 42171-8322,	KY - Alford's Care2U LLC	06/23/2025 10:47:28

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Social History

Question	Answer	Notes	Last Modified by	Organization Details	Last Modified Time
Are You Sexually Active?	No		lcasey39	Information not available	11/15/2024
Do You Or Your Partner(s) Currently Have Other Sex Partners?	No		lcasey39	Information not available	11/15/2024
Have You Or Any Of Your Partners Used Drugs?	No		lcasey39	Information not available	11/15/2024
Have You Received HPV, Hepatitis A, And/or Hepatitis B Shots?	No		lcasey39	Information not available	11/15/2024
Have You Been Diagnosed With STI In The Past?	No		lcasey39	Information not available	11/15/2024
Did You Get Treatment?	No		lcasey39	Information not available	11/15/2024
Are You Or Your Partner Using Contraception Or Practicing Any Form Of Birth Control?	No		lcasey39	Information not available	11/15/2024

Birth Sex: Unknown

Functional Status

None recorded.

Mental Status

None recorded.

Family History

Nothing Reported.

Medical History

No medical history recorded.

Gynecological History No gynecological history recorded.

Obstetrics History

GPAL:  
G 0 P 0 0 0 0

Immunizations

None recorded.

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**Past Encounters**

Encounter ID	Performer	Location	Encounter Start Date	Encounter Closed Date	Diagnosis/Indication	Diagnosis SNOMED-CT Code	Diagnosis ICD10 Code	Diagnosis Note
1937	LAUREN CASEY, APRN	Alford's Care2U 255 OVERLOOK LN SMITHS GROVE, KY 42171-8322	05/27/2025 08:41:36	05/27/2025 11:00:18	Mental disorder	74732009	F99	
					Severe dementia	428351000124105	F03.C0	
					Primary malignant neoplasm of left lung	890528009	C34.92	
					Insomnia disorder related to another mental disorder	24121004	F51.05	
					Peripheral vascular disease	400047006	I73.9	
					Hyperlipidemia	55822004	E78.5	
					Hypothyroidism	40930008	E03.9	
					Polyarthropathy	36186002	M13.0	
					Seasonal allergy	444316004	J30.2	
					Thiamine deficiency	399357009	E51.9	
					Vitamin B12 deficiency (non anemic)	64117007	E53.8	
					Vitamin D deficiency	34713006	E55.9	
					Assisted living facility patient	11762561000119103	Z76.89	
2204	LAUREN CASEY, APRN	Alford's Care2U 255 OVERLOOK LN SMITHS GROVE, KY 42171-8322	06/23/2025 09:21:50	06/23/2025 13:01:06	Mental disorder	74732009	F99	
					Severe dementia	428351000124105	F03.C0	
					Primary malignant neoplasm of left lung	890528009	C34.92	
					Insomnia disorder related to another mental disorder	24121004	F51.05	
					Peripheral vascular disease	400047006	I73.9	
					Hyperlipidemia	55822004	E78.5	

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Hypothyroidism	40930008	E03.9
Polyarthropathy	36186002	M13.0
Seasonal allergy	444316004	J30.2
Thiamine deficiency	399357009	E51.9
Vitamin B12 deficiency (non anemic)	64117007	E53.8
Vitamin D deficiency	34713006	E55.9
Assisted living facility patient	11762561000119103	Z76.89

**Goals Section**

Goal	Description	Progress	Status	Start Date	Last Modified by	Organization Details	Last Modified Time
Quality of Life	Reports satisfaction with quality of life	None	active	10/23/2024	Lauren Casey	Information not available	10/23/2024 21:55:12
Activities of Daily Living	Performs activities of daily living independently or with minimal assistance	None	active	10/23/2024	Lauren Casey	Information not available	10/23/2024 21:55:12
Family and Social Support	Reports family and/or social support needs are met	None	active	10/23/2024	Lauren Casey	Information not available	10/23/2024 21:55:12
Follow-up Appointment(s)	Attends referral and/or follow-up appointment(s) as per care team recommendation(s)	None	active	10/23/2024	Lauren Casey	Information not available	10/23/2024 21:55:12
Self-Advocacy	Advocates effectively for self by communicating desires, feelings and concerns to care team	None	active	10/23/2024	Lauren Casey	Information not available	10/23/2024 21:55:12
Caregiver Education and/or Support	Reports being supported in caregiver role	None	active	10/23/2024	Lauren Casey	Information not available	10/23/2024 21:55:12
Medication Regimen	Follows medication regimen as per care team recommendation(s)	None	active	10/23/2024	Lauren Casey	Information not available	10/23/2024 21:55:12
Home/Environment Safety	Reports having a safe environment that promotes independence and prevents injury	None	active	10/23/2024	Lauren Casey	Information not available	10/23/2024 21:55:12
Cognitive Awareness	Maintains baseline level of cognitive awareness	None	active	10/23/2024	Lauren Casey	Information not available	10/23/2024 21:55:12
Diet Adherence	Follows prescribed or recommended diet	None	active	10/23/2024	Lauren Casey	Information not available	10/23/2024 21:55:12
Adequate Sleep	Achieves adequate, well-rested sleep with minimal disruption	None	active	10/23/2024	Lauren Casey	Information not available	10/23/2024 21:55:12

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Health Concerns Section

Related Observation	LastModified by	Organization Details	LastModified Time
Chronic sick	Not Available	Not Available	Not Available
Concern	Status	LastModified by	Organization Details
Severe dementia	Active	Lauren Casey	Not Available
Primary malignant neoplasm of left lung	Active	Lauren Casey	Not Available

Notes

Date	Note Type	Note	Provider Name and Address	Organization Details	Recorded Time
06/23/2025	text/html	Martha was seen today in her home at Shelbyville Hometown Manor for a routine follow up appointment. She reports that she is doing well and denies any current concerns. Staff also reports that she is doing well and they do not voice any concerns at this time.	LAUREN CASEY, APRN	KY - Alford's Care2U LLC	06/23/2025 12:59:17

Payers

None recorded.