

**HUTCHESON, Herman (id #27, dob: 03/27/1936)**

This fax may contain sensitive and confidential personal health information that is being sent for the sole use of the intended recipient. Unintended recipients are directed to securely destroy any materials received. You are hereby notified that the unauthorized disclosure or other unlawful use of this fax or any personal health information is prohibited. To the extent patient information contained in this fax is subject to 42 CFR Part 2, this regulation prohibits unauthorized disclosure of these records.

If you received this fax in error, please visit [www.athenahealth.com/NotMyFax](http://www.athenahealth.com/NotMyFax) to notify the sender and confirm that the information will be destroyed. If you do not have internet access, please call 1-888-482-8436 to notify the sender and confirm that the information will be destroyed. Thank you for your attention and cooperation. [ID:12025-H-30847]

## Referral Order

06/25/2025

To Provider	From Provider
<b>MCGRATH PODIATRY AND WOUND CARE</b>  <b>1648 ALEXANDRIA DRIVE</b> <b>LEXINGTON, KY 40503</b> <b>Phone:</b> <b>Phone: (859) 559-5484</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>	<ul style="list-style-type: none"><li>• <b>Type 2 diabetes mellitus</b> <b>ICD-10: E11.9: Type 2 diabetes mellitus without complications</b></li></ul>
<b>Order Name</b>	<b>Orders included: 1</b>  <b>Type 2 diabetes mellitus</b> <b>ICD-10: E11.9: Type 2 diabetes mellitus without complications</b> <ul style="list-style-type: none"><li>• <b>PODIATRIST REFERRAL</b> <b>Schedule Within: provider's discretion</b></li></ul> <b>Place of service: OFFICE</b> <b>Procedure code: 99499</b> <b>Authorization: Medicare-KY (Medicare)   NOTREQUIRED   Not Required for 99499</b> <b>Authorization: Humana (Medicare Supplement)   NOTREQUIRED   Not Required for 99499</b>
<b>Notes</b>	

### Patient Information

<b>Patient Name</b>	<b>HUTCHESON, HERMAN</b>
<b>Sex - DOB - Age</b>	<b>M 03/27/1936 89yo</b>
<b>Address</b>	<b>108 BOYLES DR</b> <b>RUSSELLVILLE, KY 42276-8838</b>
<b>Phone</b>	<b>H: (270) 726-4187</b>
<b>Primary Insurance</b>	<b>Medicare-KY (Medicare)</b> <b>ID: 1VG9GM6FK22</b> <b>Policy Holder: HUTCHESON, HERMON B</b>
<b>Secondary Insurance</b>	<b>Humana (Medicare Supplement)</b> <b>ID: H45296408</b> <b>Policy Holder: HUTCHESON, HERMAN B</b>

Electronically Signed by: LAUREN CASEY, APRN

*Lauren Casey, APRN*

---

LAUREN CASEY, APRN

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

HUTCHESON, Herman (id #27, dob: 03/27/1936)

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

HUTCHESON, Herman (id #27, dob: 03/27/1936)



## 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: 06/25/2025

RE: Herman Hutcheson, DOB: 03/27/1936, PT ID #27

Dear McGrath 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 Herman Hutcheson

### Encounter Details

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

## Table of Contents

[Demographics](#)  
[Reason for Referral](#)  
[Reason for Visit](#)  
[Assessment](#)  
[Plan of Treatment](#)  
[Results](#)  
[Problems](#)  
[Procedures](#)  
[Medical Equipment](#)  
[Allergies](#)  
[Medications](#)  
[History of Present Illness](#)  
[Physical Exam](#)  
[Review of Systems](#)  
[Vitals](#)  
[Social History](#)  
[Functional Status](#)  
[Mental Status](#)  
[Family History](#)  
[Medical History](#)  
[Immunizations](#)  
[Past Encounters](#)  
[Goals Section](#)  
[Health Concerns Section](#)  
[Notes](#)  
[Payers](#)

---

### Demographics

<b>Sex:</b>	Male	<b>Ethnicity:</b>	Not Hispanic or Latino
<b>DOB:</b>	03/27/1936	<b>Race:</b>	White
<b>Preferred language:</b>	English	<b>Marital status:</b>	Married
<b>Previous Name:</b>			

**Contact:** 108 BOYLES DR, RUSSELLVILLE, KY 42276-8838, USA, Ph. tel: +1-(270) 726-4187 (Primary Home)

**Other Addresses:** 108 BOYLES DR, RUSSELLVILLE, KY 42276-8838, USA (Current Billing Address)  
108 BOYLES DRIVE, RUSSELLVILLE, KY 42276, USA (Previous Home Address)  
108 BOYLES DRIVE, RUSSELLVILLE, KY 42276, USA (Previous Billing Address)

---

### Reason for Referral

#### Reason for Visit

None recorded.

---

### Assessment

No assessment recorded.

---

HUTCHESON, Herman (id #27, dob: 03/27/1936)

Plan of Treatment

Reminders		Order Date	Submit Date	Provider	Last Modified By	Organization Details	Last Modified Time	Details
Appointments FOLLOW UP 30		06/25/2025 10:30AM		LAUREN CASEY, APRN	Not available	Not available	Not available	

Lab None recorded.

Referral	podiatrist referral	06/25/2025	06/25/2025	ATHENAFAX	McGrath Podiatry and Wound Care, 1648 Alexandria Drive, LEXINGTON, KY, 40503, Ph (859) 559-5484	06/25/2025 11:41:03	
----------	---------------------	------------	------------	-----------	---	---------------------	--

Procedures None recorded.

Surgeries None recorded.

Imaging None recorded.

Medication Orders	cyanocobalamin (vit B-12) 1,000 mcg/mL injection solution	06/25/2025	06/25/2025	lcasey39	Alford's Pharmacy & Drive-Thru, 210 S Main St, Suite 100 Main St Center, Brownsville, KY, 42210, Ph (270) 597-1044	06/25/2025 10:57:27	
-------------------	---	------------	------------	----------	--	---------------------	--

Patient Targets No targets recorded.  
Patient Instructions No instructions recorded.

Results

None recorded.

**Problems**

Name	Problem SNOMED Code	Status	Onset Date	Resolution Date	Notes	Provider Name and Address	Organization Details	Recorded Time
Moderate dementia	430771000124100	Active	09/09/2024			LAUREN CASEY, APRN 255 Overlook Lane, Smiths Grove, KY, 42171-8322, US	KY - Alford's Care2U LLC	09/09/2024 09:04:50
Chronic obstructive pulmonary disease	13645005	Active	09/09/2024			LAUREN CASEY, APRN 255 Overlook Lane, Smiths Grove, KY, 42171-8322, US	KY - Alford's Care2U LLC	09/09/2024 09:05:01
Type 2 diabetes mellitus	44054006	Active	09/09/2024			LAUREN CASEY, APRN 255 Overlook Lane, Smiths Grove, KY, 42171-8322, US	KY - Alford's Care2U LLC	09/09/2024 09:05:16
Benign prostatic hyperplasia without outflow obstruction	254902007	Active	09/09/2024			LAUREN CASEY, APRN 255 Overlook Lane, Smiths Grove, KY, 42171-8322, US	KY - Alford's Care2U LLC	09/09/2024 09:05:38

**Problem Notes**

None recorded.

**Procedures****Surgical History**

None recorded.

**Imaging Results**

None recorded.

**Procedure Notes**

None recorded.

**HUTCHESON, Herman (id #27, dob: 03/27/1936)**

**Medical Equipment**

None Reported.

---

**Allergies**

No known drug allergies

---

**HUTCHESON, Herman (id #27, dob: 03/27/1936)**
**Medications**

Name	Sig	Start Date	Stop Date	Status	NoteLastModified by	OrganizationDetails	LastModified Time
BD Luer-Lok Syringe 3 mL 23 x 1"	USE TO INJECT B12 MONTHLY			active	INTERFACE	Not Available	Not Available
donepezil 5 mg tablet	TAKE ONE TABLET BY MOUTH EVERY EVENING			active	API-1839	Not Available	Not Available
enalapril maleate 10 mg tablet	TAKE ONE TABLET BY MOUTH TWICE DAILY			active	INTERFACE	Not Available	Not Available
enalapril maleate 5 mg tablet	Take 1 tablet twice a day by oral route for 90 days.		01/16/2025	completed	lcasey39	Not Available	01/16/2025 00:00:00
azithromycin 250 mg tablet	TAKE 2 TABLETS BY MOUTH TODAY, THEN 1 TABLET BY MOUTH DAILY FOR THE NEXT 4 DAYS		01/16/2025	completed	lcasey39	Not Available	01/16/2025 00:00:00
theophylline ER 400 mg tablet, extended release 24 hr	TAKE 1/2 TABLET BY MOUTH EVERY MORNING			active	API-1839	Not Available	Not Available
metoprolol succinate ER 50 mg tablet, extended release 24 hr	Take 1 tablet twice a day by oral route.			active	lcasey39	Not Available	Not Available
allopurinol 100 mg tablet	TAKE ONE TABLET BY MOUTH TWICE DAILY			active	API-1839	Not Available	Not Available
folic acid 400 mcg tablet	TAKE ONE TABLET BY MOUTH EVERY MORNING			active	API-1839	Not Available	Not Available
SPS (with sorbitol) 15 gram-20 gram/60 mL oral suspension	TAKE 60ML BY MOUTH AS ONE DOSE			active	INTERFACE	Not Available	Not Available
tamsulosin 0.4 mg capsule	TAKE ONE CAPSULE BY MOUTH EVERY EVENING			active	API-1839	Not Available	Not Available
cyanocobalamin (vit B-12) 1,000 mcg/mL injection solution	Inject 1 mL every month by subcutaneous route.	06/25/2025		active	lcasey39	Not Available	06/25/2025 00:00:00
ferrous sulfate 325 mg (65 mg iron) tablet	TAKE ONE TABLET BY MOUTH TWICE DAILY			active	API-1839	Not Available	Not Available
methylprednisolone 4 mg tablets in a dose pack	TAKE PER PACKAGE INSTRUCTIONS		01/16/2025	completed	lcasey39	Not Available	01/16/2025 00:00:00
VanishPoint Syringe 3 mL 25 gauge x 1"	USE TO INJECT b-12 MONTHLY			active	API-1839	Not Available	Not Available
metformin ER 750 mg tablet, extended release 24 hr	Take 1 tablet every day by oral route in the evening for 90 days.			active	lcasey39	Not Available	Not Available
cyanocobalamin (vit B-12) 1,000 mcg/mL injection kit	Inject 1 mL every month by subcutaneous route.		11/11/2024	completed	lcasey39	Not Available	11/11/2024 00:00:00



History of Present Illness

Herman was seen today in his home at Russellville Hometown Manor for a routine follow up appointment. He reports that he is doing well and denies any current concerns. He denies anymore choking episodes and reports that he is breathing well. He is due for his monthly B12 injection. He also would like to be seen by podiatry.

Physical Exam

**Notes: Constitutional:** General Appearance: healthy-appearing and cachectic . Level of Distress: no acute distress and chronically ill . Ambulation: ambulation with walker . **Psychiatric:** Insight: good judgement. Mental Status: normal mood and affect and active and alert. Orientation: oriented to time, place, and person. **Head:** Head: normocephalic and atraumatic. **Eyes:** Lids and Conjunctivae: no discharge or pallor and non-injected. Pupils: PERRLA. EOM: EOMI. **ENMT:** Ears: no lesions on external ear. Nose: no lesions on external nose or sinus tenderness and nares patent. Lips, Teeth, and Gums: no mouth or lip ulcers. Oropharynx: moist mucous membranes. **Neck:** Neck: supple and trachea midline. **Lungs:** Respiratory effort: no dyspnea. Auscultation: decreased breath sounds and diminished air movement . **Cardiovascular:** Heart Auscultation: normal S1 and S2 and RRR and no murmurs. **Abdomen:** Bowel Sounds: RUQ normal, RLQ normal, LUQ normal, and LLQ normal. Inspection and Palpation: soft, non-distended, and no tenderness. **Musculoskeletal::** Motor Strength and Tone: normal tone and motor strength. Joints, Bones, and Muscles: no contractures or bony abnormalities and normal movement of all extremities. Extremities: no cyanosis or edema. **Neurologic:** Gait and Station: normal station. Cranial Nerves: grossly intact. Sensation: grossly intact. **Skin:** Inspection and palpation: no rash, lesions, or abnormal nevi. **Back:** Thoracolumbar Appearance: normal curvature.

Review of Systems

None recorded.

Vitals

Date Recorded	Body height	Heart rate	Respiratory rate	Body temperature	Oxygen saturations	Oxygen saturation in Arterial blood by Pulse oximetry	Systolic blood pressure	Diastolic blood pressure	Provider Name and Address	Organization Details	Last Updated Date/Time
06/25/2025	182.88 cm	53 /min	16 /min	97.8 [degF]	93 %	93 %	104 mm[Hg]	50 mm[Hg]	LAUREN CASEY, APRN 255 Overlook Lane, Smiths Grove, KY, 42171-8322,	KY - Alford's Care2U LLC	06/25/2025 11:39:04

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

HUTCHESON, Herman (id #27, dob: 03/27/1936)

Social History

Question	Answer	Notes	LastModified by	Organization Details	LastModified Time
Are You Sexually Active?	No		lcasey39	Information not available	04/11/2025
Do You Or Your Partner(s) Currently Have Other Sex Partners?	No		lcasey39	Information not available	04/11/2025
Have You Or Any Of Your Partners Used Drugs?	No		lcasey39	Information not available	04/11/2025
Have You Received HPV, Hepatitis A, And/or Hepatitis B Shots?	No		lcasey39	Information not available	04/11/2025
Have You Been Diagnosed With STI In The Past?	No		lcasey39	Information not available	04/11/2025

Birth Sex: Unknown

Functional Status

None recorded.

Mental Status

None recorded.

Family History

Nothing Reported.

Medical History

No medical history recorded.

Immunizations

None recorded.

Past Encounters

Encounter ID	Performer	Location	Encounter Start Date	Encounter Closed Date	Diagnosis/Indication	Diagnosis SNOMED-CT Code	Diagnosis ICD10 Code	Diagnosis Note
1958	LAUREN CASEY, APRN	Alford's Care2U 255 OVERLOOK LN SMITHS GROVE, KY 42171-8322	05/28/2025 08:59:19	05/28/2025 12:04:45	Benign prostatic hyperplasia without outflow obstruction	254902007	N40.0	
					Chronic obstructive pulmonary disease	13645005	J44.9	
					Moderate dementia	430771000124100	F03.B0	
					Type 2 diabetes mellitus	44054006	E11.9	
					Vitamin B12 deficiency (non anemic)	64117007	E53.8	
					Hyperkalemia	14140009	E87.5	

HUTCHESON, Herman (id #27, dob: 03/27/1936)

Goals Section

None Recorded

Health Concerns Section

Related Observation	LastModified by		Organization Details	LastModified Time
None Recorded				
Concern	Status	LastModified by	Organization Details	LastModified Time
None Recorded				

Notes

None Recorded

Payers

Encounter Date	Sequence	Insurance Name	Policy Number	Policy Holder	Covered Member ID	Holder Member ID	Guarantor Name
06/25/2025	2	HUMANA (MEDICARE SUPPLEMENT)		Herman B Hutcheson	H45296408		Herman Hutcheson
06/25/2025	1	MEDICARE-KY (MEDICARE)		Hermon B Hutcheson	1VG9GM6FK22	1VG9GM6FK22	Herman Hutcheson