

## FAX COVER SHEET



PLEASE DELIVER TO: ATTN: Nick      DATE: 8/25/2025 3:49:48 PM  
RECIPIENT'S PHONE: \_\_\_\_\_      FAX: 918593996697  
SENDER: \_\_\_\_\_      DEPT: \_\_\_\_\_  
SENDER'S PHONE: \_\_\_\_\_      FAX: \_\_\_\_\_  
SUBJECT: \_\_\_\_\_

---

The following document(s) are transmitted for delivery to the above named individual  
and consist of 5 page(s), including the cover sheet.

---

NOTES:

***If you have any questions, please contact the above sender.***

---

The information contained in this facsimile message is intended only for the personal and confidential use of the designated recipient(s) named above. This message may be attorney-client or hospital-patient communication, and as such is privileged and confidential. If the reader of this message is not the intended recipient, or any agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error, and that any review, dissemination, distribution, or copying of this message is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone and destroy the original message or return it to us by mail. Thank you.

1105 Sixth Street      (231) 935-5000  
Traverse City, Michigan  
49684-2386

GRAHAM, Lawrence DOB: 02/05/1957 (66 yo M) Acc No. 91165 DOS: 01/30/2024



## Graham, Lawrence

66 Y old Male, DOB: 02/05/1957

Account Number: 91165

2121 W US Highway 10, Ludington, MI-49431

Home: 231-690-3952

Guarantor: Graham, Lawrence Insurance: PRIORITY

HEALTH MEDICARE Payer ID: C7459

PCP: Allan Nelson

Appointment Facility: MHM Wound and Hyperbaric

01/30/2024

Progress Notes: Elizabeth Foster

### Current Medications

#### Taking

- hydroCHLORothiazide 12.5 MG Tablet  
1 tablet Orally Once a day
  - Benadryl 25 MG Tablet 1 tablet at  
bedtime as needed Orally Once a day
  - Lidocaine HCl 4 % Cream as directed  
Externally with dressing changes
  - Metoprolol Succinate ER 25 MG Tablet  
Extended Release 24 Hour 1 tablet  
Orally Once a day
  - aspirin 81 mg 1 daily
  - Meloxicam 15 MG Tablet 1 tablet Orally  
Once a day
  - Cyanocobalamin 1000 MCG/15ML  
Liquid 15 mL Orally Once every 3  
months
  - Vitamin D 3 1000 IU Soft Gel 1tablet  
PO Once a day
  - Magnesium 400 MG Capsule 1 tablet  
with a meal Orally Once a day
  - Atorvastatin Calcium 80 MG Tablet 1  
tablet Orally Once a day
  - Clobetasol Propionate 0.05 %  
Ointment 1 application Externally  
Twice a day
- Medication List reviewed and  
reconciled with the patient

### Past Medical History

Back Trouble: Disc.  
Sleep Apnea/ CPAP.  
Claustrophobia.  
High Cholesterol.  
Leg Ulcer.

### Surgical History

cataract surgery  
Hernia Surgery - 1957 & 2002  
Colonoscopy- 2007, 2017 & 2022  
heart catheterization 06/23  
vein ablation on the left lower  
extremity 8/17/23

### Family History

Father: deceased  
Mother: alive

### Reason for Appointment

- Left lower leg chronic ulcer

### History of Present Illness

#### Wound care:

This 66 year old male presents today for followup, evaluation and management of non-healing stasis ulcers to LLL. Pt reports the wounds started in October 2022 and he's been seeing Dr. Richley for treatment with Mupirocin ointment. States he does normally wear compression on a daily basis. Pt has Hx of compound fracture to LLL in 2006 and has had wounds on LLL in the past that reportedly took over a year to heal. Pt has been using an other the counter bacitracin/zinc ointment which has helped. Patient had another vein procedure (sclerotherapy) done on 10/12/23. No acute concerns in regards to wound care at today's encounter.

1/30/24 Pt reports his leg started getting irritated around the wound and he started the Clobetasol to the surrounding the skin.

### Vital Signs

BP: **128/60 mm Hg**, Ht: 71 in, Ht-cm: 180.34 cm, Wt: **269.5 lbs**, Wt-kg: **122.24 kg**, BMI: **37.58 Index**, Temp: **98.0 F**, HR: **72 /min**, RR: **18**, Oxygen sat %: **96 %**, Pain scale: **0 1-10**.

### Examination

#### Wound Care::

##### Wound 1

Wound Type *stasis ulcer*

Wound Location *LLL lateral distal*

Epithelialization Pre procedure *Large 67-100%*

Wound Status *stable, improved*

Classification *Full thickness without exposed support structure*

Signs of Infection *no*

Exudate Amount *None present*

Foul Odor after Cleansing *No*

Texture *No Abnormality*

Moisture *No Abnormality*

Color *No Abnormality*

Temperature *No Abnormality (Patient Warm)*

Tenderness on Palpation *No*

#### General Examination:

GENERAL APPEARANCE: Alert and no acute distress. Well

GRAHAM, Lawrence DOB: 02/05/1957 (66 yo M) Acc No. 91165 DOS: 01/30/2024

Daughter(s): alive  
Son(s): alive  
Paternal Grand Father: deceased  
Paternal Grand Mother: deceased  
Maternal Grand Father: deceased  
Maternal Grand Mother: deceased  
Siblings: alive  
2 brother(s) , 6 sister(s) , 2 son(s) , 1 daughter(s) .  
Family History of Heart Disease and Diabetes.

### Social History

#### Abuse and Neglect Screen:

Abuse and Neglect Screen

Screening Date: 01/15/2024

Do you ever feel unsafe in your home or neighborhood? No

Information Obtained From:

Patient

Type of visit: Established Patient

Has anyone physically harmed you?

No

Has anyone emotionally harmed you? No

Is there anyone you are uncomfortable being around? No

Do you have any family/friends that abuse drugs or alcohol? No

Does anyone force you to do things you do not want to do? No

Is there someone who takes your things without permission? No

### Allergies

Band-Aid: skin irritation

Lisinopril: Anaphylaxis - Allergy -

Criticality High - Onset Date

07/02/2023

Bee Sting: Anaphylaxis - Allergy -

Criticality High - Onset Date

07/02/2023

### Hospitalization/Major

#### Diagnostic Procedure

No Hospitalization History.

### Review of Systems

#### General/Constitutional:

Denies Chills. Denies Fever.

#### Allergy/Immunology:

Admits Blistering of skin.

Admits Itching.

#### Endocrine:

Denies Frequent urination.

#### Respiratory:

Shortness of breath Denies.

Denies Cough.

#### Cardiovascular:

Chest pain Denies.

Denies Palpitations.

#### Gastrointestinal:

Denies Abdominal pain.

Denies Blood in stool.

#### Genitourinary:

Denies Blood in urine.

Denies Difficulty urinating.

nourished, well developed.

HEAD: Normocephalic, face symmetric.

EYES: Conjunctiva clear, no discharge .

NOSE: Nares patent, no discharge.

CARDIAC: Regular rate and rhythm. .

LUNGS: normal respiratory effort.

MUSCULOSKELETAL: Normal strength and tone. .

Extremities Trace pitting edema lower extremities.

PERIPHERAL PULSES: Good capillary refill.

NEUROLOGIC: Alert and Oriented.

PSYCH: Mood/affect within normal limits.

SKIN: No rashes.

WOUND See wound care documentation.

### Assessments

1. Chronic venous hypertension (idiopathic) with ulcer of left lower extremity - I87.312 (Primary)
2. Non-pressure chronic ulcer of other part of left lower leg with fat layer exposed - L97.822
3. Other atopic dermatitis - L20.89
4. Dietary counseling and surveillance - Z71.3

### Treatment

#### 1. Chronic venous hypertension (idiopathic) with ulcer of left lower extremity

Notes: Patient with a history of venous stasis edema to bilateral lower extremities. Patient has since had multiple encounters with vascular for sclerotherapy to veins in left lower leg.

#### 2. Non-pressure chronic ulcer of other part of left lower leg with fat layer exposed

Notes: Upon evaluation at today's encounter, patient has stable chronic ulcer noted to the left lower extremity which is healed. I discussed with patient and significant other the plan of care to be as follows and both agreeable. No further dressings required at this time, can leave open to air. Discussed with patient to utilize clobetasol to the red irritated area twice daily until resolved and then can use as needed. No future appointment required at this time unless questions or concerns arise. Patient and significant other both state understanding and agree with this plan of care, all questions asked at today's encounter were answered.

#### 3. Other atopic dermatitis

Notes: Improvements in erythema to the surrounding tissue. Patient states understanding and agrees with this plan of care.

#### 4. Dietary counseling and surveillance

Notes: Reiterated the importance of supplementation of protein in diet during wound and/or ulcer healing time period. Discussed with patient during this healing process additional supplementation of protein may be needed to ensure patient reaches their goal of 1 gram per kilogram of body weight. Encouraged patient to refer back to handouts provided which included supplemental protein foods to continue/add into diet.

### Procedures

GRAHAM, Lawrence DOB: 02/05/1957 (66 yo M) Acc No. 91165 DOS: 01/30/2024

Musculoskeletal:

Denies Assistive Devices.  
Admits Painful joints.

Peripheral Vascular:

Denies Decreased sensation in  
extremities.

Skin:

Rashes Denies. Admits Ulcers.

Wound Care:

Wound 1: LLL lateral distal.

Wound Debridement

Wound Condition: *Stable Chronic*

Wound Size: *Healed*

Type of Debridment: *No debridement required*

Dressing: *Applied Eucerin lotion to leg. Pt to use Clobetasol to  
site 2 x daily to help minimize redness and irritation. No dressings  
needed.*

Compression: *Pt to wear his own compression*

Return Visit: *No further visits as needed*

**Procedure Codes**

99212 OFFICE VISIT, FAC FEE, EST PT, LEVEL 2

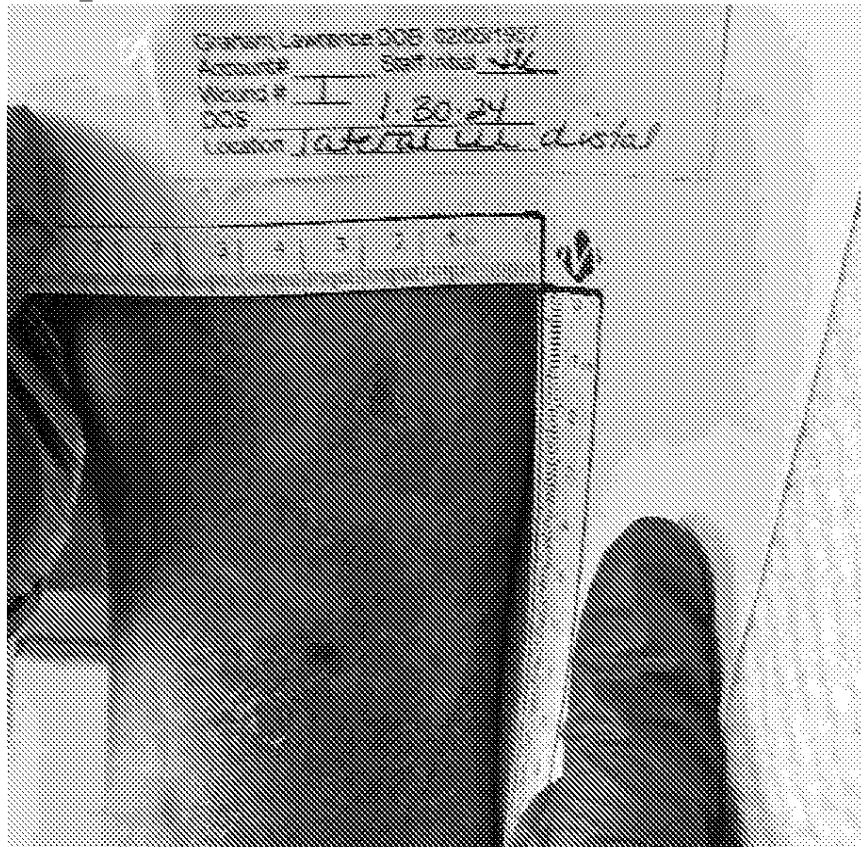
99212 OFFICE VISIT, PROF FEE, EST PT, LEVEL 2

**Follow Up**

prn (Reason: future wound care needs)

**Images**

mobile\_01/30/2024 11:13:15



**Progress Note: Elizabeth Foster 01/30/2024**

Note generated by eClinicalWorks EMR/PM Software (www.eClinicalWorks.com)

GRAHAM, Lawrence DOB: 02/05/1957 (66 yo M) Acc No. 91165 DOS: 01/30/2024



**Electronically signed by Elizabeth Foster on 01/30/2024 at  
11:43 AM EST**

**Sign off status: Completed**

---

**MHM Wound and Hyperbaric  
1293 E Parkdale Ave  
Manistee, MI 49660-8904  
Tel: 231-398-1780  
Fax: 231-398-1789**

---

**Progress Note: Elizabeth Foster 01/30/2024**

*Note generated by eClinicalWorks EMR/PM Software (www.eClinicalWorks.com)*