

HAZLEWOOD, Betty B (id #160, dob: 02/18/1929)

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Referral Order

06/23/2025

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

Referral Order Information

Diagnosis	Type 2 diabetes mellitus without complication, unspecified whether long term insulin use ICD-10: E11.9: Type 2 diabetes mellitus without complications
Order Name	Orders included: 1 Type 2 diabetes mellitus without complication, unspecified whether long term insulin use ICD-10: E11.9: Type 2 diabetes mellitus without complications • PODIATRIST REFERRAL Schedule Within: provider's discretion Place of service: OFFICE Procedure code: 99499 Authorization: Humana (Medicare Replacement/Advantage - PPO) NOTREQUIRED Not Required for 99499
Notes	

Patient Information

Patient Name	HAZLEWOOD, BETTY B
Sex - DOB - Age	F 02/18/1929 96yo
Address	101 HAWKINS ST #4 LAWRENCEBURG, KY 40342-1343
Phone	H: (502) 839-3253 M: (727) 804-6220
Primary Insurance	Humana (Medicare Replacement/Advantage - PPO) ID: H79449347 Group: 80840 Policy Holder: HAZLEWOOD, BETTY B
Secondary Insurance	None recorded.

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HAZLEWOOD, Betty B (id #160, dob: 02/18/1929)

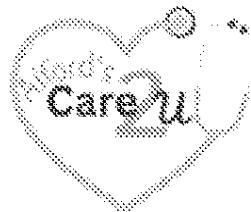
Electronically Signed by: LAUREN CASEY, APRN

Lauren Casey, APRN

LAUREN CASEY, APRN

HAZLEWOOD, Betty B (id #160, dob: 02/18/1929)

Alford's Care2U • 255 OVERLOOK LN, SMITHS GROVE KY 42171-8322
HAZLEWOOD, Betty B (id #160, dob: 02/18/1929)



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: Betty Hazlewood, DOB: 02/18/1929, PT ID #160

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 Betty B Hazlewood

Encounter Details

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

HAZLEWOOD Betty B (id #160, dob: 02/18/1929)

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Demographics

Sex: Female **Ethnicity:** Not Hispanic or Latino
DOB: 02/18/1929 **Race:** White
Preferred language: English **Marital status:** Widowed
Previous Name:

Contact: 101 HAWKINS ST #4, LAWRENCEBURG, KY 40342-1343, USA, Ph. tel:+1-(502) 839-3253 (Primary Home) tel:+1-(727) 804-6220 (Mobile)

Other Addresses: 101 HAWKINS ST #4, LAWRENCEBURG, KY 40342-1343, USA (Current Billing Address)
410 FORREST DR, LAWRENCEBURG, KY 40342-1343, USA (Previous Home Address)
410 FORREST DR, LAWRENCEBURG, KY 40342-1343, USA (Previous Billing Address)

Care Team Members

Primary Care Provider

LAUREN CASEY 255 OVERLOOK LANE, SMITHS GROVE, KY 42171, Ph. tel: (270) 780-4755

Reason for Referral

Reason for Visit

None recorded.

Assessment

No assessment recorded.

HAZLEWOOD, Betty B (id #160, dob: 02/18/1929)**Plan of Treatment**

Reminders	Order Date	Submit Date	Provider	Last Modified By	Organization Details	Last Modified Time	Details
Appointments	FOLLOW UP 30	07/14/2025 08:00AM	LAUREN CASEY, APRN		Not available Not available		Not available
Lab							
	None recorded.						
Referral	podiatrist referral	06/23/2025	06/23/2025	ATHENAFAK	McGrath Podiatry and Wound Care, 1648 Alexandria Drive, Lexington, KY, 40504, Ph (859) 285-9562	06/23/2025 13:53:48	
Procedures							
	None recorded.						
Surgeries							
	None recorded.						
Imaging							
	None recorded.						
Medication Orders							
	None recorded.						

Patient Targets No targets recorded.

Patient Instructions No instructions recorded.

Results

Created Date	ObservationName Date	DescriptionValue	UnitRangeAbnormalFlag	Note	LastModifiedBy	Organization Detail	LastModifiedTime
06/21/2025	06/21/2025 XR, chest, 2 view	No observation recorded.		Icasey39	Express Mobile Diagnostic Services 2030 Ader Rd, Jeannette, PA, 15644, Ph (877) 602-2847		06/23/2025 09:47:50

Result Notes

None recorded.

HAZLEWOOD, Betty B (id #160, dob: 02/18/1929)**Problems**

Name	Problem SNOMED Code	Status Onset Date	Resolution Date	Notes	Provider Name and Address	Organization Details	Recorded Time
Essential hypertension	59621000	Active 10/24/2024			LAUREN CASEY, APRN	KY - Alford's Care2U LLC	10/24/2024 13:30:34
					255 Overlook Lane, Smiths Grove, KY, 42171-8322, US		
Vitamin D deficiency	34713006	Active 10/24/2024			LAUREN CASEY, APRN	KY - Alford's Care2U LLC	10/24/2024 13:31:37
					255 Overlook Lane, Smiths Grove, KY, 42171-8322, US		
Hyperlipidemia	55822004	Active 10/24/2024			LAUREN CASEY, APRN	KY - Alford's Care2U LLC	10/24/2024 13:31:42
					255 Overlook Lane, Smiths Grove, KY, 42171-8322, US		
Gastroesophageal reflux disease without esophagitis	266435005	Active 10/24/2024			LAUREN CASEY, APRN	KY - Alford's Care2U LLC	10/24/2024 13:31:49
					255 Overlook Lane, Smiths Grove, KY, 42171-8322, US		
Dementia	52448006	Active 10/24/2024			LAUREN CASEY, APRN	KY - Alford's Care2U LLC	10/24/2024 13:32:07
					255 Overlook Lane, Smiths Grove, KY, 42171-8322, US		
Dry eyes	162290004	Active 10/24/2024			LAUREN CASEY, APRN	KY - Alford's Care2U LLC	10/24/2024 13:32:19
					255 Overlook Lane, Smiths Grove, KY, 42171-8322, US		
Vitamin deficiency	85670002	Active 10/24/2024			LAUREN CASEY, APRN	KY - Alford's Care2U LLC	10/24/2024 13:32:45
					255 Overlook Lane, Smiths Grove,		

HAZLEWOOD, Betty B (id #160, dob: 02/18/1929)

			KY, 42171-8322, US
Hyponatremia	89627008	Active 03/11/2025	LAUREN CASEY, APRN KY - Alford's 03/11/2025 Care2U LLC 16:38:53
			255 Overlook Lane, Smiths Grove,
			KY, 42171-8322, US
Type 2 diabetes mellitus	44054006	Active 03/11/2025	LAUREN CASEY, APRN KY - Alford's 03/11/2025 Care2U LLC 16:39:13
			255 Overlook Lane, Smiths Grove,
			KY, 42171-8322, US
Iron deficiency	35240004	Active 03/11/2025	LAUREN CASEY, APRN KY - Alford's 03/11/2025 Care2U LLC 16:39:21
			255 Overlook Lane, Smiths Grove,
			KY, 42171-8322, US

Problem Notes

None recorded.

Procedures**Surgical History**

None recorded.

Imaging Results

None recorded.

Procedure Notes

None recorded.

Medical Equipment

None Reported.

Allergies

No known drug allergies

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HAZLEWOOD, Betty B (id #160, dob: 02/18/1929)**Medications**

Name	Sig	Start Date	Stop Date	Status	Note by	Last Modified Details	Organization	Last Modified Time
Delsym 12 hour 30 mg/5 mL oral suspension,extended release	Take 10 mL twice a day by oral route as needed for 10 days, for cough.	06/20/2025		active	ATHENA	Not Available	06/20/2025 00:00:00	
carvedilol 12.5 mg tablet	TAKE ONE TABLET BY MOUTH TWICE DAILY			active	API-1839	Not Available	Not Available	
pravastatin 40 mg tablet	TAKE ONE TABLET BY MOUTH IN THE EVENING			active	API-1839	Not Available	Not Available	
benzonatate 200 mg capsule	TAKE 1 CAPSULE BY MOUTH THREE TIMES DAILY FOR 10 DAYS AS NEEDED		03/10/2025 completed		Icasey39	Not Available	03/10/2025 00:00:00	
ondansetron HCl 4 mg tablet	TAKE 1 TABLET BY MOUTH EVERY 8 HOURS FOR 7 DAYS AS NEEDED		03/10/2025 completed		Icasey39	Not Available	03/10/2025 00:00:00	
amlodipine 5 mg tablet	TAKE ONE TABLET BY MOUTH EVERY DAY	06/23/2025		active	ATHENA	Not Available	06/23/2025 00:00:00	
amlodipine 10 mg tablet	TAKE ONE TABLET BY MOUTH EVERY MORNING		03/10/2025 completed		Icasey39	Not Available	03/10/2025 00:00:00	
ferrous sulfate 325 mg (65 mg iron) tablet	TAKE ONE TABLET BY MOUTH EVERY DAY	06/23/2025		active	ATHENA	Not Available	06/23/2025 00:00:00	
ibuprofen 200 mg tablet	Take 1 tablet every 6 hours by oral route as needed for 90 days.			active	Icasey39	Not Available	Not Available	
omeprazole 20 mg capsule,delayed release	TAKE ONE CAPSULE BY MOUTH EVERY MORNING			active	API-1839	Not Available	Not Available	
Tylenol 325 mg tablet	Take 2 tablets every 6 hours by oral route as needed for 90 days.			active	Icasey39	Not Available	Not Available	
losartan 100 mg tablet	TAKE ONE TABLET BY MOUTH EVERY MORNING			active	API-1839	Not Available	Not Available	
doxycycline hyclate 100 mg tablet	Take 1 tablet twice a day by oral route for 10 days.	06/23/2025		active	ATHENA	Not Available	06/23/2025 00:00:00	
ipratropium bromide 21 mcg (0.03 %) nasal spray				active	INTERFACE	Not Available	Not Available	
esomeprazole magnesium 20 mg capsule,delayed release	TAKE 1 CAPSULE BY MOUTH EVERY MORNING BEFORE		10/24/2024 completed		Icasey39	Not Available	10/24/2024 00:00:00	

HAZLEWOOD, Betty B (id #160, dob: 02/18/1929)**BREAKFAST**

memantine 10 mg tablet	TAKE ONE TABLET BY MOUTH IN THE EVENING	active	API-1839	Not Available	Not Available
cholecalciferol (vitamin D3) 50 mcg (2,000 unit) tablet	TAKE ONE TABLET BY MOUTH EVERY MORNING	active	API-1839	Not Available	Not Available
Adult Multivitamin Gummies	2 gummies every day	active	Icasey39	Not Available	Not Available
Robitussin Cough-Chest Congestion DM 5 mg-100 mg/5 mL oral liquid	Take 10 mL every 4 hours by oral route as needed for 7 days.	06/20/2025	active	ATHENA	Not Available 06/20/2025 00:00:00
Systane Complete 0.6 % eye drops	INSTILL 1 DROP IN EACH EYE DAILY	active	API-1839	Not Available	Not Available

History of Present Illness

None recorded.

Physical Exam

Notes: None recorded.

Review of Systems

None recorded.

Vitals

None Recorded

Social History

Question	Answer	Notes	Last Modified by	Organization Details	Last Modified Time
Are You Sexually Active?	No		tmayfield8	Information not available	11/22/2024
Do You Or Your Partner(s) Currently Have Other Sex Partners?	No		tmayfield8	Information not available	11/22/2024
Have You Or Any Of Your Partners Used Drugs?	No		tmayfield8	Information not available	11/22/2024
Have You Received HPV, Hepatitis A, And/or Hepatitis B Shots?	No		tmayfield8	Information not available	11/22/2024
Have You Been Diagnosed With STI In The Past?	No		tmayfield8	Information not available	11/22/2024
Did You Get Treatment?	No		tmayfield8	Information not available	11/22/2024
Are You Or Your Partner Using Contraception Or Practicing Any Form Of Birth Control?	No		tmayfield8	Information not available	11/22/2024

Birth Sex: Female

HAZLEWOOD, Betty B (id #160, dob: 02/18/1929)**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 O P 0 0 0

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
2047	LAUREN CASEY, APRN	Alford's Care2U 255 OVERLOOK LN SMITHS GROVE, KY 42171-8322	06/09/2025 08:11:02	06/09/2025 09:46:41	Dementia	52448006	F03.90	
					Essential hypertension	59621000	I10	
					Predabetes	714628002	R73.03	
					Hyperlipidemia	55822004	E78.5	
					Vitamin deficiency	85670002	E56.9	
					Dry eyes	162290004	H04.123	
					Gastroesophageal reflux disease without esophagitis	266435005	K21.9	
					Vitamin D deficiency	34713006	E55.9	

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				

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Notes

None Recorded

Payers

None recorded.