



# BAPTIST HEALTH

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**To:** McGrath Medical Wound Care

Company:

Fax: 859-399-6697

**From:** BHMG Primary Care Richmond - Lyndsey

Fax: 859-624-6493

Phone: 859-624-6366

## NOTES:

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**Date and time of transmission:** Tuesday, August 26, 2025 4:58:56 PM  
**Number of pages including this cover sheet:** 12

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8/26/25, 4:58 PM

Traylor, Kris (MRN: 8911165305) DOB: 7/29/1974

BAPTIST HEALTH MEDICAL GROUP PRIMARY CARE  
 107 MERIDIAN WAY STE 200  
 RICHMOND KY 40475-2878  
 Phone: 859-624-6366  
 Fax: 859-624-6367

Date: Aug 26, 2025

**Ambulatory Referral to Wound Clinic**

**Patient:** Kris Traylor  
 202 valley street  
 RICHMOND KY 40475  
 Phone: 831-776-1963

MRN: 8911165305  
 DOB: 7/29/1974  
 SSN: xxx-xx-0622  
 Sex: M

INSURANCE	PAYOR	PLAN	GROUP #	SUBSCRIBER ID
<b>Primary:</b>	HUMANA MEDICARE	1050177	Y0463001	H04190750
<b>Secondary:</b>	REPLACEMENT KENTUCKY MEDICAID	2000001		0040089731

**Referring Provider Information:**

MILLER, KELLY N

Phone: 859-624-6366

Fax: 859-624-6367

**Referral Information:**

# Visits: 1

Referral Type: Consultation [3]

Urgency: Urgent

Referral Reason: Specialty Services Required

Start Date: Aug 26, 2025

End Date: To be determined by Insurer

**Diagnosis:** *Venous ulcer of ankle, left (I83.023,L97.329)**Ulcer of foot, limited to breakdown of skin, unspecified laterality (L97.501)**Type 2 diabetes mellitus with left diabetic foot ulcer (E11.621,L97.529)*

Refer to Dept:

Refer to Provider:

Refer to Provider Phone:

Refer to Facility:

Dr athar c/o mcgraff medical wound care. 859 399 6697 fax

This document serves as a request of services and does not constitute Insurance authorization or approval of services. To determine eligibility, please contact the members Insurance carrier to verify and review coverage.

If you have medical questions regarding this request for services. Please contact BAPTIST HEALTH MEDICAL GROUP PRIMARY CARE at 859-624-6366 during normal business hours.

Authorizing Provider: Miller, Kelly N, APRN

Authorizing Provider's NPI: 1336757665

Order Entered By: Miller, Kelly N, APRN 8/26/2025 4:10 PM

Electronically signed by: Miller, Kelly N, APRN 8/26/2025 4:10 PM



BAPTIST HEALTH

BAPTIST HEALTH MEDICAL  
GROUP  
107 MERIDIAN WAY STE 200  
RICHMOND KY 40475-2878

Traylor, Kris

MRN: 8911165305, DOB: 7/29/1974, Legal Sex: M

**Patient****Demographics**

Name: Kris Traylor "Kris"

Address: 202 valley street RICHMOND KY 40475

Date of birth: 7/29/1974

SSN: xxx-xx-0622

Legal sex: Male

Email: kistraylor74@gmail.com

Language: English

Mobile: 831-776-1963

**Relationships**

Name	Relation to Patient	Phone Number
Begley, Brenda	Mother	Home: 859-629-5430 (primary)



BAPTIST HEALTH

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Traylor, Kris

MRN: 8911165305, DOB: 7/29/1974, Legal Sex: M

## Patient (continued)

Referral Patient Level Documents as of 8/26/2025

INSURANCE CARDS - SCAN as of 8/26/2025

Scan on 5/5/2025 2046: This coverage ID card document was provided by Humana. (expires 7/31/2026) as of 8/26/2025

Scan (below)

HUMANA DUAL SELECT (HMO D-SNP)  
A Medicare Health Plan with Prescription Drug Coverage

See Back for Dental CARD ISSUED: 03/12/2025

KRIS G TRAYLOR  
Member ID: H04190750

Plan (20040) 9140461501

RxBIN: 016601

RxPCN: 03200000

RxGRP: Y0463

MedicareRx  
CMS H5819 075



Set up your member account: [Humana.com/myaccount](https://www.humana.com/myaccount)  
Member/Provider Service: 1-800-457-4708 (TTY: 711)  
Suicide and Crisis Lifeline: 988  
Pharmacist/Physician Rx Inquiries: 1-800-865-8715

Primary Physician: ASHISH M PATEL MD

CLAIMS: PO BOX 14601 LEXINGTON KY 40512-4601

For Dental: [Humana.com/sb](https://www.humana.com/sb)  
Additional Benefits: DEN346 VIS698 HER945  
EyeMed Vision: 1-888-289-0595

## Current Medications

## Medications

ⓘ This report is for documentation purposes only. The patient should not follow medication instructions within. For accurate instructions regarding medications, the patient should instead consult their physician or after visit summary.

## Current Medications

## Alcohol Swabs (Easy Touch Alcohol Prep Medium) 70 % pads

Instructions: USE 1 DAILY

Authorized by: Myers, Lyle Christopher, MD

Start date: 5/7/2024

Refill: 12 refills by 5/7/2025

Ordered on: 5/7/2024

Quantity: 200 each

## amLODIPine (NORVASC) 10 MG tablet

Instructions: Take 1 tablet by mouth Daily.

Authorized by: Cook, Bryon Scott, MD

Start date: 3/27/2025

Ordered on: 3/27/2025

Quantity: 90 tablet



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### Patient (continued)

#### Current Medications (continued)

Refill: 3 refills by 3/27/2026

#### atorvastatin (LIPITOR) 80 MG tablet

Instructions: TAKE 1 TABLET BY MOUTH DAILY

Authorized by: Miller, Kelly N, APRN

Start date: 9/4/2024

Refill: 1 refill by 9/4/2025

Ordered on: 9/4/2024

Quantity: 90 tablet

#### benzonatate (Tessalon Perles) 100 MG capsule

Instructions: Take 1 capsule by mouth 3 (Three) Times a Day As Needed for Cough.

Authorized by: Miller, Kelly N, APRN

Start date: 4/15/2025

Refill: No refills remaining

Ordered on: 4/15/2025

Quantity: 30 capsule

#### bisacodyl (DULCOLAX) 10 MG suppository

Instructions: Insert 1 suppository into the rectum 1 (One) Time Per Week.

Authorized by: Chasteen, Sara, PA-C

Start date: 8/20/2024

Refill: 1 refill by 8/20/2025

Ordered on: 8/20/2024

Quantity: 30 each

#### Blood Glucose Monitoring Suppl w/Device kit

Instructions: Use 1 Device Take As Directed.

Authorized by: Miller, Kelly N, APRN

Start date: 9/18/2023

Quantity: 1 each

Ordered on: 9/18/2023

Informant: Self

Refill: No refills remaining

#### calcium polycarbophil (FiberCon) 625 MG tablet

Instructions: Take 2 capsules daily po twice daily with 8 oz of water

Authorized by: Miller, Kelly N, APRN

Start date: 8/25/2025

Refill: 5 refills by 8/25/2026

Ordered on: 8/25/2025

Quantity: 120 tablet

#### carvedilol (COREG) 25 MG tablet

Instructions: Take 1 tablet by mouth 2 (Two) Times a Day.

Entered by: Billups, Octavia R, MA

Entered on: 3/25/2025

#### chlorhexidine (PERIDEX) 0.12 % solution

Instructions: Apply 15 mL to the mouth or throat 2 (Two) Times a Day.

Authorized by: Miller, Kelly N, APRN

Start date: 8/25/2025

Refill: 5 refills by 8/25/2026

Ordered on: 8/25/2025

Quantity: 1893 mL

#### collagenase 250 UNIT/GM ointment

Instructions: Apply a finger-tip sized amount under dressing with wound care changes twice daily. Wound size 7cm x 7cm

Entered by: Billups, Octavia R, MA

Start date: 3/18/2025

Entered on: 3/25/2025

#### Diclofenac Sodium (Voltaren) 1 % gel gel

Instructions: Apply 4 g topically to the appropriate area as directed 4 (Four) Times a Day.

Authorized by: Adkins, Adam C, PA

Start date: 2/5/2025

Refill: 1 refill by 2/5/2026

Ordered on: 2/5/2025

Quantity: 350 g

#### famotidine (PEPCID) 40 MG tablet

Instructions: TAKE ONE TABLET BY MOUTH ONCE NIGHTLY AS NEEDED FOR HEARTBURN

Authorized by: Chasteen, Sara, PA-C

Start date: 11/21/2024

Refill: 1 refill by 11/21/2025

Ordered on: 11/21/2024

Quantity: 90 tablet



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### Patient (continued)

#### Current Medications (continued)

##### fluticasone (FLONASE) 50 MCG/ACT nasal spray

Instructions: Administer 2 sprays into the nostril(s) as directed by provider Daily.  
 Authorized by: Runnels, Laken N, APRN Ordered on: 1/9/2025  
 Start date: 1/9/2025 Quantity: 11.1 g  
 Refill: No refills remaining

##### furosemide (Lasix) 20 MG tablet

Instructions: Take 1 tablet by mouth Daily.  
 Authorized by: Brewer, Vernon D, DO Ordered on: 10/21/2024  
 Start date: 10/21/2024 Quantity: 30 tablet  
 Refill: 3 refills by 10/21/2025

##### gabapentin (NEURONTIN) 800 MG tablet

Instructions: TAKE 1 TABLET BY MOUTH 3 TIMES A DAY  
 Authorized by: Miller, Kelly N, APRN Ordered on: 6/18/2025  
 Start date: 6/18/2025 Quantity: 270 tablet  
 Refill: No refills remaining

##### hydrALAZINE (APRESOLINE) 10 MG tablet

Instructions: TAKE 1 TABLET BY MOUTH 3 TIMES A DAY  
 Authorized by: Cook, Bryon Scott, MD Ordered on: 7/25/2025  
 Start date: 7/25/2025 Quantity: 90 tablet  
 Refill: 3 refills by 7/25/2026

##### HYDROcodone-acetaminophen (NORCO) 7.5-325 MG per tablet

Instructions: Take 1 tablet by mouth As Needed for Moderate Pain.  
 Entered by: Parke, Stephanie, CMA Entered on: 12/12/2024  
 Start date: 11/27/2024

##### Insulin Disposable Pump (Omnipod 5 DexG7G6 Pods Gen 5) misc

Instructions: Use 1 each Daily. Pt has to change insulin daily due to high insulin use  
 Authorized by: Myers, Lyle Christopher, MD Ordered on: 4/16/2025  
 Start date: 4/16/2025 Quantity: 270 each  
 Refill: 3 refills by 4/16/2026

##### insulin regular CONCENTRATED (HUMULIN R) 500 UNIT/ML injection

Instructions: USE 500 UNITS VIA INSULIN PUMP PER DAY  
 Authorized by: Myers, Lyle Christopher, MD Ordered on: 7/3/2025  
 Start date: 7/3/2025 Quantity: 30 mL  
 Refill: 2 refills by 7/3/2026

##### ipratropium (ATROVENT) 0.03 % nasal spray

Instructions: Administer 2 sprays into the nostril(s) as directed by provider Every 12 (Twelve) Hours.  
 Authorized by: Miller, Kelly N, APRN Ordered on: 4/15/2025  
 Start date: 4/15/2025 Quantity: 30 mL  
 Refill: 1 refill by 4/15/2026

##### Jardiance 25 MG tablet tablet

Instructions: TAKE 1 TABLET BY MOUTH DAILY  
 Authorized by: Myers, Lyle Christopher, MD Ordered on: 10/23/2024  
 Start date: 10/23/2024 Quantity: 90 tablet  
 Refill: 2 refills by 10/23/2025

##### lamoTRigine (LaMICtal) 100 MG tablet

Instructions: Take 1 tablet by mouth 2 (Two) Times a Day.  
 Authorized by: Lewis, Madeline Bennett, APRN Ordered on: 6/5/2025  
 Start date: 6/5/2025 Quantity: 60 tablet



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**Patient (continued)****Current Medications (continued)**

Refill: 1 refill by 6/5/2026

**linaclotide (Linzess) 145 MCG capsule capsule**

Instructions: Take 1 capsule by mouth Every Morning Before Breakfast.

Entered by: Chasteen, Sara, PA-C

Entered on: 8/20/2024

**lisinopril (PRINIVIL,ZESTRIL) 40 MG tablet**

Instructions: TAKE 1 TABLET BY MOUTH DAILY

Authorized by: Miller, Kelly N, APRN

Ordered on: 3/3/2025

Start date: 3/3/2025

Quantity: 90 tablet

Refill: 1 refill by 3/3/2026

**LORazepam (ATIVAN) 1 MG tablet**

Instructions: TAKE 1 TABLET BY MOUTH 2 TIMES A DAY AS NEEDED FOR ANXIETY

Authorized by: Lewis, Madeline Bennett, APRN

Ordered on: 8/4/2025

Start date: 8/4/2025

Quantity: 60 tablet

Refill: No refills remaining

**Lurasidone HCl (LATUDA) 80 MG tablet tablet**

Instructions: Take 1 tablet by mouth Every Night.

Authorized by: Lewis, Madeline Bennett, APRN

Ordered on: 6/5/2025

Start date: 6/5/2025

Quantity: 30 tablet

Refill: 1 refill by 6/5/2026

**metFORMIN ER (GLUCOPHAGE-XR) 500 MG 24 hr tablet**

Instructions: Take 1 tablet by mouth Daily With Breakfast.

Authorized by: Myers, Lyle Christopher, MD

Ordered on: 4/16/2025

Start date: 4/16/2025

Quantity: 90 tablet

Refill: 3 refills by 4/16/2026

**methocarbamol (ROBAXIN) 500 MG tablet**

Instructions: Take 1 tablet by mouth 3 (Three) Times a Day As Needed for Muscle Spasms.

Authorized by: Foley, Courtney Elise, PA-C

Ordered on: 8/1/2025

Start date: 8/1/2025

Quantity: 90 tablet

Refill: 1 refill by 8/1/2026

**omeprazole (priLOSEC) 40 MG capsule**

Instructions: TAKE 1 CAPSULE BY MOUTH DAILY

Authorized by: Chasteen, Sara, PA-C

Ordered on: 3/3/2025

Start date: 3/3/2025

Quantity: 90 capsule

Refill: 1 refill by 3/3/2026

**ondansetron ODT (ZOFTRAN-ODT) 4 MG disintegrating tablet**

Instructions: Place 1 tablet on the tongue Every 8 (Eight) Hours As Needed for Nausea or Vomiting.

Authorized by: Miller, Kelly N, APRN

Ordered on: 5/12/2025

Start date: 5/12/2025

Quantity: 12 tablet

Refill: No refills remaining

**oxyCODONE (ROXICODONE) 10 MG tablet**

Instructions: Take 1 tablet by mouth.

Entered by: Billups, Octavia R, MA

Entered on: 3/25/2025

Start date: 3/18/2025

**polyethylene glycol (MIRALAX) 17 g packet**

Instructions: Take 17 g by mouth 2 (Two) Times a Day.

Authorized by: Miller, Kelly N, APRN

Ordered on: 8/25/2025

Start date: 8/25/2025

Quantity: 100 packet

Refill: 5 refills by 8/25/2026



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### Patient (continued)

#### Current Medications (continued)

##### promethazine (PHENERGAN) 12.5 MG tablet

Instructions: Take 1 tablet by mouth Every 6 (Six) Hours As Needed for Nausea or Vomiting.  
 Authorized by: Miller, Kelly N, APRN Ordered on: 10/15/2024  
 Start date: 10/15/2024 Quantity: 20 tablet  
 Refill: No refills remaining

##### promethazine-dextromethorphan (PROMETHAZINE-DM) 6.25-15 MG/5ML syrup

Instructions: Take 5 mL by mouth 4 (Four) Times a Day As Needed for Cough.  
 Authorized by: Runnels, Laken N, APRN Ordered on: 1/9/2025  
 Start date: 1/9/2025 Quantity: 473 mL  
 Refill: No refills remaining

##### silver sulfadiazine (SILVADENE, SSD) 1 % cream

Entered by: Billups, Octavia R, MA Entered on: 3/25/2025  
 Start date: 3/2/2025

##### temazepam (RESTORIL) 15 MG capsule

Instructions: TAKE 1 CAPSULE BY MOUTH ONCE NIGHTLY AS NEEDED FOR SLEEP  
 Authorized by: Lewis, Madeline Bennett, APRN Ordered on: 8/4/2025  
 Start date: 8/4/2025 Quantity: 30 capsule  
 Refill: No refills remaining

##### traMADol (ULTRAM) 50 MG tablet

Instructions: 1 tablet 3 TIMES DAILY (route: oral)  
 Entered by: Billups, Octavia R, MA Entered on: 8/25/2025  
 Start date: 8/13/2025

##### Medication Note

Billups, Octavia R, MA 8/25/2025 4:13 PM  
 >> Mon Aug 25, 2025 4:13 PM  
 Med Classification: Analgesic, Anti-inflammatory or Antipyretic

##### vitamin D3 (Vitamin D) 125 MCG (5000 UT) capsule capsule

Instructions: Take 1 capsule by mouth Daily.  
 Authorized by: Miller, Kelly N, APRN Ordered on: 10/6/2023  
 Start date: 10/6/2023 Informant: Self  
 Quantity: 90 capsule Refill: No refills remaining





BAPTIST HEALTH

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Traylor, Kris  
MRN: 8911165305, DOB: 7/29/1974, Legal Sex: M  
Visit date: 8/25/2025

### 08/25/2025 - Office Visit in BAPTIST HEALTH MEDICAL GROUP PRIMARY CARE

#### Clinical Notes

##### Progress Notes

###### Miller, Kelly N, APRN at 8/25/2025 1600

Author: Miller, Kelly N, APRN  
Filed: 08/25/25 1738  
Status: Signed

Service: —  
Encounter Date: 8/25/2025  
Editor: Miller, Kelly N, APRN (Nurse Practitioner)

Author Type: Nurse Practitioner  
Creation Time: 08/25/25 1713

Electronically signed by Miller, Kelly N, APRN at 08/25/25 1738

###### Miller, Kelly N, APRN at 8/25/2025 1600

Author: Miller, Kelly N, APRN  
Filed: 08/25/25 1738  
Status: Signed

Service: —  
Encounter Date: 8/25/2025  
Editor: Miller, Kelly N, APRN (Nurse Practitioner)

Author Type: Nurse Practitioner  
Creation Time: 08/25/25 1714

#### Transitional Care Follow Up Visit

##### Subjective

Kris Traylor is a 51 y.o. male who presents for a transitional care management visit.

Within 48 business hours after discharge our office contacted him via telephone to coordinate his care and needs.

I reviewed and discussed the details of that call along with the discharge summary, hospital problems, inpatient lab results, inpatient diagnostic studies, and consultation reports with Kris.

Current outpatient and discharge medications have been reconciled for the patient.

Reviewed by: Kelly N Miller, APRN

8/13/2025  
1:57 PM

##### Date of TCM Phone Call

Hospital	UK
Date of Admission	8/11/2025
Date of Discharge	8/13/2025
Discharge Disposition	Home or Self Care

**Risk for Readmission (LACE)** No data recorded

##### History of Present Illness

##### Course During Hospital Stay:

51-year-old male with a past medical history of bipolar 2, diabetes, neuropathy, amputation, foot ulcer, gastroparesis, hypertension, MRSA presented to UK good Samaritan emergency room as a transfer from Baptist Health Richmond due to intractable nausea. Patient was admitted from 8/2 - 8/8 with left lower extremity cellulitis and bacteremia. He was discharged home on p.o. Augmentin and Zyvox per ID recommendations. He had been unable to tolerate anything p.o. in bed dry and heaving for 4 days. CTAP with moderate stool burden but no ileus. ID and endocrine consulted. ID recommended to stop antibiotics as he already got the adequate antibiotic duration. ID plan to follow-up on 8/19 but patient could not make the appointment and has not followed up. He is getting wound care and seeing a wound PA at home currently. Vascular team wanted to follow-up with patient in 1 month.



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**08/25/2025 - Office Visit in BAPTIST HEALTH MEDICAL GROUP PRIMARY CARE (continued)**
**Clinical Notes (continued)**

He is requesting a referral to a different pain management clinic as he cannot get up with them to schedule an appointment

He is having some right upper gum irritation he would like me to look at

He is having issues with constipation and has an appointment with GI on 9/3, he has been using single use enemas at home

He would also like a referral to UK orthopedics for his right shoulder. Saw Baptist orthopedics last month and they did not want to do any surgical intervention and he has already tried injections so he is interested in a second opinion.

The following portions of the patient's history were reviewed and updated as appropriate: allergies, current medications, past family history, past medical history, past social history, past surgical history, and problem list.

Review of Systems- gum irritation, constipation, abdominal pain, nausea without vomiting, other systems negative

**Objective**

BP 140/80 | Pulse 91 | Temp 97.9 °F (36.6 °C) | SpO2 95%

**Physical Exam**

Vitals and nursing note reviewed.

**Constitutional:**

General: He is not in acute distress.

Appearance: He is well-developed. He is obese. He is not ill-appearing, toxic-appearing or diaphoretic.

**HENT:**

Head: Normocephalic and atraumatic.

Right Ear: External ear normal.

Left Ear: External ear normal.

**Eyes:**

General: No scleral icterus.

Extraocular Movements: Extraocular movements intact.

Conjunctiva/sclera: Conjunctivae normal.

Pupils: Pupils are equal, round, and reactive to light.

**Cardiovascular:**

Rate and Rhythm: Normal rate and regular rhythm.

Heart sounds: Normal heart sounds. No murmur heard.

No friction rub. No gallop.

**Pulmonary:**

Effort: Pulmonary effort is normal. No respiratory distress.

Breath sounds: Normal breath sounds. No wheezing, rhonchi or rales.

**Musculoskeletal:**

General: No tenderness or deformity. Normal range of motion.

Cervical back: Normal range of motion and neck supple.

Left lower leg: No edema. Dressing in place.

Right Lower Extremity: Right leg is amputated above knee.

**Abdomen:**

Bowel sounds present x 4, distended, soft, nontender

**Skin:**

Findings: Wound (Couple wounds left lower leg, unable to assess due to wound dressing) present.

**Neurological:**

Mental Status: He is alert and oriented to person, place, and time.

Cranial Nerves: No cranial nerve deficit.

Sensory: No sensory deficit.

Motor: No abnormal muscle tone.



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Visit date: 8/25/2025

**08/25/2025 - Office Visit in BAPTIST HEALTH MEDICAL GROUP PRIMARY CARE (continued)**
**Clinical Notes (continued)**

Coordination: Coordination normal.  
Gait: Gait abnormal (Wheelchair use).  
Deep Tendon Reflexes: Reflexes normal.

**Psychiatric:**

Mood and Affect: Mood normal.  
Behavior: Behavior normal.  
Thought Content: Thought content normal.  
Judgment: Judgment normal.

**Lab Results**

Component	Value	Date
HGBA1C	7.2 (H)	08/02/2025
HGBA1C	7.20 (H)	07/16/2025
HGBA1C	7.6 (H)	05/07/2025

**Assessment & Plan**

Diagnoses and all orders for this visit:

**1. Hospital discharge follow-up (Primary)**
**2. Intractable nausea and vomiting**
**3. Chronic idiopathic constipation**

- calcium polycarbophil (FiberCon) 625 MG tablet; Take 2 capsules daily po twice daily with 8 oz of water  
Dispense: 120 tablet; Refill: 5
- polyethylene glycol (MIRALAX) 17 g packet; Take 17 g by mouth 2 (Two) Times a Day. Dispense: 100 packet;  
Refill: 5

**4. Gum inflammation**

- chlorhexidine (PERIDEX) 0.12 % solution; Apply 15 mL to the mouth or throat 2 (Two) Times a Day.  
Dispense: 1893 mL; Refill: 5

**5. Chronic right shoulder pain**

- Ambulatory Referral to Orthopedic Surgery

**6. Impingement syndrome of right shoulder**

- Ambulatory Referral to Orthopedic Surgery

**7. Biceps tendinitis of right upper extremity**

- Ambulatory Referral to Orthopedic Surgery

**8. Bursitis of right shoulder**

- Ambulatory Referral to Orthopedic Surgery

Patient is able to tolerate p.o. without vomiting but still dealing with some nausea. Vitals stable. No acute abdomen on exam. He has antiemetics at home if needed.

Start FiberCon plus MiraLAX. Push greater than 64 fluid ounces of water plus electrolytes daily. Keep follow-up with GI on 9/3

Peridex solution sent in for gum inflammation. Make appointment with dentist.



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**08/25/2025 - Office Visit in BAPTIST HEALTH MEDICAL GROUP PRIMARY CARE (continued)**

**Clinical Notes (continued)**

Message sent to referrals regarding pain management referral, patient has been unable to get up with Dr. Ballard Wright's office and he would like referral sent elsewhere  
Referral placed to UK orthopedics for right shoulder issues for second opinion

Kelly Miller, APRN

Electronically signed by Miller, Kelly N, APRN at 08/25/25 1738

**\*\*\* END OF REPORT \*\*\***