$Primary \ C_{\rm omputer} A_{\rm ssisted} R_{\rm esource} \ E_{\rm nvironment}$



Age 73

2 kids

Employer: Retired 13 years Role: Manager, SDG&E

Married to Bonnie

Provider: Medicare ARP

James Barleywilde

Med Record#: BR549622.V

Allergies Penicillin



Health History

Rx Medication	<u>Dose</u>	Route	<u>Time</u>	Indication	Started	Prescriber
Lopressor	100mg	PO with meals	BID	HTN	2011	Cheryl Bennet, RN, NP
Metformin	500mg	PO	BID	Type II DM	2005	James Olsen, MD
Naproxen	500mg	PO with food	BID / PRN	Knee OA LBP	2005	Cheryl Bennet, RN, NP
Asprin	80mg	PO with food	AM	Cardiac health	2011	Cheryl Bennet, RN, NP
Centrum Silver						
Multivitamin	1	PO	AM	General health	2009	OTC Patient
Glucosamine and						
Chondroitin	1500mg	PO	AM	Knee OA LBP	2006	OTC Patient







Quit for 23yrs





Flu 2016

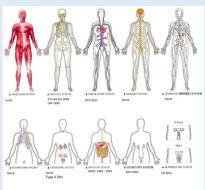






Mon: Alive 95 Type II DM, Breast CA Sibs: Type II DM, Prostrate CA,

		Resolved		
Date	Problem	/Active	Location	Current Treatment
			Fallbrook Family Health	
1/10/2005	Type II DM	Active	Center	Metformin 500mg BID
9/13/2011	HTN	Active	Center	Lopressor 100mg BID
			Fallbrook Family Health	
10/15/2005	Knee OA LBP	Active	Center	Naproxin PRN
			San Diego General Hospital	
2/12/2009	MVA, LOC, Back Pain	Resolved	Emergency Department	
2/12/2009 -				
2/13/2009	Observation	Resolved	San Diego General Hospital	

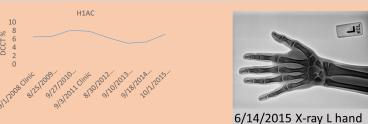


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Age 73 σ

James Barleywilde



Previous Health Care Visits

<u>Date</u>	Reason	<u>Facility</u>	<u>Provider</u>	Outcome
Primary Care				
		Fallbrook Family Health		
10/1/2015	Annual Visit	Center	Cheryl Bennet, RN, NP	Continue treatment
		Fallbrook Family Health		Sutures and tetanus
6/14/2015	L Hand laceration	Center	Charles Schabb, MD	shot
		Fallbrook Family Health		
9/18/2014	_Annual Visit	Center	Cheryl Bennet, RN, NP	Increased metformin
Additional Visits				
Speciality Refer	<u>rals</u>			
		Genitourinary Associates		Counseling, refused
12/11/2012	Erectile Dysfunction	of San Diego	Richard Tapper, MD	Viagra prescription
		Genitourinary Associates		
5/10/2006	BPH	of San Diego	Richard Tapper, MD	Counseling
Additional Visits	i e			
<u>ED</u>				
		San Diego General		
2/12/2009	MVA, LOC, Back Pain	Hospital	Staff	Admit for observation
Additional Visits				
Hospitalizations				
	Post MVA	San Diego General		Referral for ETOH
2/12/2009	observation	Hospital	Staff	counseling
Additional Visits				

Previous Diagnostic Tests

<u>Date</u>	<u>Tests</u>	Significant Finding
10/1/2015	Chem 12	Glu: 121 Ha1C: 8.8
10/1/2015	CBC	WNL
10/1/2015	EKG	WNL
6/14/2015	X-ray L hand	WNL
1/12/2013	Colonoscopy	WNL

$Primary \ C_{\rm omputer} A_{\rm ssisted} \ R_{\rm esource} \ E_{\rm nvironment}$



Age 73

James Barleywilde

T:101.3 P:82 BP:138/80

R: 18 Wt: 198 Ht: 68 BMI: 30.1

Current Visit 02/12/2016

CC: 🖓 "I've had a cold for 10 days, coughing, nose is blocked, feeling like crap and I haven't been able to sleep too well. "My grandkids visited a w weeks ago and they were sick."

	6	6
System	Physical Exam	Review of System
General:	Cooperative, oriented to place, person, and time, neatly groomed, gait steady, appropriate dress, speech clear,	·
Skin:	Fairlpink, cool, smooth,dry, clastic turgor,	
Hair:	Brown, Male/Female distribution, medium texture,	
Nails:	Nailbeds pink, brisk capillary refill, no clubbing, deformities, or change in color,	
Head:	Normocephalic, wio deformities, Scalp free of lesions, Facial features symmetrical. No frostal or maxillary sinus tendences. Salivary glarks non-lender, Temporal artery pulsations visible bilaterally, soft and non-tender to palgation, no TMJ crepitus or tendences	
Eyes:	Near vision 20/40/U, uncorrected, 20/20 w/ corrective Imass. Staffun 20/20 w/ corrective Imass. Visual fields intext. Extraocular movements inter (EDMI), no systagmas. Popils qual, round not reactive to light and accommodation (PERRIA), Comma light reflet symmetrial. Cover-converver—no deviation. Lida and jobs symmetrical. No oftens or lesions evident. Conjunctive pitk, schen clear. No discharge. Autorior clamber clear, Cornea clear. Red reflex is present bilaterally. Optic disc round, yellow, distin tanging, AV, with 25, no retital hormoralsy or exadelses.	
Ears, Nose & Throat:	Amirica aligned preports, No piran or tragas tradeness to adquisive Passes whiteper tear bil, Rime AC-90C, Weberr -baned bil, no fisceitazione. Eur canals clear, TiM pourly groy wi LiM and IR firstet. Nosal septum militar, morosa pith, no polypa, or discharge. Lips pide, Feeth in good spirat and alignment, no obvision caries, no inflammation of the game. Board inscoon morit & pith who lesions. Posterior pharpix pith, Tongue appropriate size, color & contours wi full movement. Turout clear, tonals +1 win necudents. Under the systemic relation in militine.	
Neck:	Traches midline. Thyroid palpable, smooth, not enlarged. No adencyathy, masses, nodules, or tendemess. Pull range of motion (ROM) w/o discomfort. No JVD or carotid bruits.	
Thorax & Lungs:	AP diameter 1.2 w/o hyploxis or distortions. Thencise expansion symmetric. Respirations regular at 18/min. Tactife freminas equal hilterally, precusation resourch throughour. Benefits sounds clear, free or desherations sounds. No areas of coronalisation. Disphaguastic excursion 3 cm bilarently. No friction m/s, stridor, or retractions. No tendemous over the ribs or other bony prominences.	
Heart:	Agical impulse palpable at PMI 2cm left of MCL. no lifts, heaves, or retractions. S1- S2 regular, no extra sounds or numures, so S3 or S4 and/lift, caronid pulsation visible, no caronid brains, No IVD. Radial, brackail, femeral, post-tribal, and polal pulse 2- or quali biliterality.	
♀ Breasts:	symmetrical, uniform; evoid in slape, no skin lesions, erythema, dimpling or retractions. Soft, nonender. No nobiles, masses on palaytion bilaterally. Nipples everted bilaterally, no discharge or lesions. No SC, IF, AX, IM, or epitrochicar nodes palayted bilaterally.	
Abdomen:	Flat, smooth, skin intert no lesions, seam, pulsations, or distention. BS heard in all 4 quadrants, No braits, ruth, or hums. Tympary to percussion with dallarse over organs, tever up and IACL Earn Soll, no pain on pulpation, no rebound undernoss, no organizagal? No CVA tradienses. Positive dobounted reflexes.	
MS:	normocurvature of spine, joints and muscles tone symmetrical bilaterally, 5+ strength bilaterally to upper and lower extremities, FROM, no deformities, no erythema, edema, or tendemess. No pain with SLR.	
♀ Genitalia/Anus:	Appropriate har distribution for que Labis majors, mison pisit, noist appromitical. No lexious, ulears, evolutionis, escentiator, ofenza, or nodelles. BCS — free of weelling, distalgue, replients or lexious. Peritaren smooth, film, no lexious, aprophage or bulging. Vagina monous pink, some derest discharge, no odes, Cerviti. NP pink, smooth, no lexious. Unters unifilms, anterweted, no CMA, dateast. Ownies publishe, notestides, no masses or enlargement. Rectard, datus intact, good tone. No hemorrheids, lesious, masses or former. Hem early experiments are destructed and the contraction of the cont	
ੈ Genitalia/Anus:	Appropriate distribution of lair for age, Penis circumstead, no discharge, explarms, Josicos, cerubers. Toriccules descended bishteatully, no testicular weeding, organism, issuicos, nodalos, cerusases. No inquiand or fement heavis, Judging, or traderness, Rectail, Anno intext with good toos, no hemoerholds, fisureus, masses, or lesions. Prostate streooth, rubbery; margins discrete, no nodolos, estigarenze, non tunder. Home: ceg	
Mental Status/Neuro:	Alert and oriented x3, gait stealy. & coordinated, 2 = DTR's supper and lower extremities, CN II — XII intact, Eight and pain sensation intact. Remberg negative, Finger to none, heel to falsa, alternating movements coordinated. Afte to stand on each foot, hop, do knew bends, and heel to not walk appropriately.	

	Dx1 &	Dx2 💪	Dx3 &
Problem	Upper Respiratory Infection	Type II Diabetes	Hypertension
ICD 10 Code	100-106.09		
Dx Tests	Swab culture: throat	Venous puncture: H1Ac	
Meds	Amorkellin 500 mg BID x 10 days		
Pt Education		2000 ADA diet	Medication Compliance Counseling
		Obesity Counseling Exercise Counseling	
Follow Up	If symptoms do not resolve in 10 days schedule a filow up appointemnt	Schedule follow up for 3 months	
Referral			
Billing Codes			
EM:			
CPT:			