

**smith Connor**

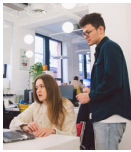
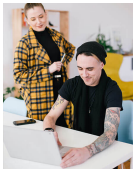
**Date of Birth** 22-Jul-1993 **Sex** Male **Age** 31  
**Encounter Date** 22-Jul-2024 **Encounter Type** Health Progress

## Progress Note

### Wound Evaluation

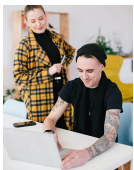
Wound Details

<b>Location</b>	leg	<b>Width (cm)</b>	.10
<b>Wound Type</b>	.11	<b>Length (cm)</b>	12
<b>Status</b>		<b>Depth (cm)</b>	
<b>Stage</b>		<b>Area (cm<sup>2</sup>)</b>	



<b>Exudate Amount</b>	<b>Undermining</b>	<b>Epithelialization</b>	
<b>Exudate Type</b>	<b>Tunneling</b>	<b>Pain Level</b>	0/10
<b>Granulation Tissue</b>	<b>Sinus Tract (cm)</b>	<b>Odor</b>	
<b>Fibrous Tissue</b>	<b>Exposed Structures</b>	<b>Infection</b>	
<b>Necrotic Tissue</b>	<b>Periound Color</b>	<b>Clinical Signs of Infection</b>	
<b>Wound Bed</b>	<b>Wound Edges</b>	<b>Wound Duration</b>	

<b>Location</b>	hand	<b>Width (cm)</b>	.22
<b>Wound Type</b>	.22	<b>Length (cm)</b>	.22
<b>Status</b>		<b>Depth (cm)</b>	
<b>Stage</b>		<b>Area (cm<sup>2</sup>)</b>	



<b>Exudate Amount</b>	<b>Undermining</b>	<b>Epithelialization</b>	
<b>Exudate Type</b>	<b>Tunneling</b>	<b>Pain Level</b>	0/10
<b>Granulation Tissue</b>	<b>Sinus Tract (cm)</b>	<b>Odor</b>	
<b>Fibrous Tissue</b>	<b>Exposed Structures</b>	<b>Infection</b>	
<b>Necrotic Tissue</b>	<b>Periound Color</b>	<b>Clinical Signs of Infection</b>	
<b>Wound Bed</b>	<b>Wound Edges</b>	<b>Wound Duration</b>	

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Vascular		Neurology	
Pulses	Skin Temperature	Pin Prick	Monofilament
Right DP:	Right	Right	Right
Right PT:	Left	Left	Left
Left DP:			
Left PT:			

Wound Evaluation

Wound History

Peri Wound

Drainage Amount

Drainage Color

Treatment Order

ASSESSMENTS/CARE PLAN

Code: I10. Description: Essential (primary) hypertension

Procedure

Code: 19330 Description: Removal of mammary implant material