

**PAIN RELIEF CENTERS**  
**5129 Dixie Hwy, Suite 201**  
**Louisville, KY 40216**  
**PHONE: (502) 430-6223, FAX: 502-369-5229**

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**FOLLOW-UP VISIT via**

**In-Office**

**PATIENT NAME:** MICHAEL HUNTER  
**DATE OF BIRTH:** 04/02/1968  
**DATE OF EVALUATION:** 07/22/2025  
**DATE OF DICTATION:** 07/22/2025  
**PHYSICIAN:** Robert Klickovich, M.D

**Provider:** Taja Elder, APRN  
**Referring Physician:** Gunn  
**Insurance:** Humana, Medicaid

**Location:** Louisville  
**CMA:** Tammy  
**Room #:** 2

**CHIEF COMPLAINT:** The patients worst pain complaint today is located in their low back, neck in addition to their other bilateral hip pain complaints and presents today to the clinic today for a routine f/u of their usual pain complaints and/or medication refill; flare up of known pain complaints especially pain in the low back.

**HISTORY OF PRESENT ILLNESS:** Since their last visit, the:

**Pain** is: Less tolerable  
**Activity** level/functioning is: Worse  
**Social** Relationships are: The same  
**Job** Performance is (if working): The same  
**Sleep** Patterns are: Worse

**CHARACTERISTICS OF PAIN INCLUDE:**

**Temporally** it is: continuous baseline pain with frequent painful exacerbations.  
**Qualitatively** it is: Burning, Stabbing, Numb, Tingling, Aching, Throbbing, Deep, Crampy  
**Numeric** Scale rating of (?/10): Average: 4/10. Best: 4/10. W/meds: 1/10. W/o meds: 9/10.

**Social Hx** significant for:  
**Working status** of: Disabled

**REVIEW OF SYSTEMS:**

**ALLERGIC SYMPTOMS INCLUDE:**

Allergies to new Meds/Foods: No.  
Hives and Itchy skin: No.  
Sneezing: No.  
Hay fever: No.  
Red Itchy eyes: No.

**NEUROLOGICAL SYMPTOMS INCLUDE:**

Worsening Weakness in limbs: No.  
Worsening Sensation in limbs: No.  
Numbness/tingling sensations: No.  
Loss of Bowel or Bladder: No.  
New convulsions or seizures: No.

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**Patient Compliance with Treatment Plan**

	Yes	No	N.A.	Comments
U-tox and/or Pill Count O.K.?		No		06/24/2025 positive THC
KASPER report O.K.?	Yes			06/25/2025 LFD
Participates in PT or home exercise prgm	Yes			HEP 3 times per week. Number of sessions done: Ongoing
Ordered imaging studies completed			NA	
Participated in Weight Loss Prgm		No		Increased 2 lbs. BMI: 26.5. Weight: Gain
Participated with Counselor if recommended	Yes			Whitten

**PHYSICAL EXAMINATION:**

**Vitals:** BP: \_\_. Ht: \_\_ feet \_\_ inches. Wt: \_\_ lbs. BMI: \_\_

**General appearance** is: Well groomed and content

**Orientation** to person, place, and time is: Correct

**Mood and Affect** are: Appropriate

**Gait** is: and with No assistive device, Antalgic

**Station** (stance) is: within normal limits and steady

**Cardiovascularly** ankle swelling is: Not present

**Lymphadenopathy** in the cervical and or inguinal lymph node chain is? Not present

**Coordination and Balance** shows Romberg test is: Negative

**Motor Function:** No stated and observed change in motor and/or sensory function since last visit.

Date: 07/22/2025

Pre-existing

CC: Low back

Palpation revealed:

Positive muscle tenderness

Positive joint tenderness

R.O.M. revealed:

Positive decrease in gross movement

**The following findings of ESTABLISHED complaints were positive:**

Cervical spine tenderness of paraspinal muscles bilaterally

Traps/levator scapula tenderness bilaterally

Pain (worst) with extension.

Cervical facet loading signs bilaterally at C5-T1

Lumbar spine tenderness of paraspinal and or quadratus muscles bilaterally

Gluteal tenderness bilaterally

Quadrant test bilaterally

Lumbar facet loading signs at bilaterally at L2-L5

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Slump/SLR bilaterally  
Patrick test bilaterally  
SIJ tenderness bilaterally

(hip) Squat test  
Trochanteric bursa tenderness bilaterally  
ROM is grossly decreased bilaterally  
Patrick's test. bilaterally  
FADIR (flexion, adduction and medial hip rotation) bilaterally

**ASSESSMENT:**

1. Facet Arthropathy – M46.92
2. Spondylosis-Cervical – M47.812
3. Cervicalgia – M54.2
4. Facet Arthropathy, Lumbar – M46.96
5. Facet Spondylosis – M47.816
6. Lumbago NOS/Low Back Pain – M54.50
7. Hip Trochanteric Bursitis Right – M70.61
8. Hip Trochanteric Bursitis Left – M70.62
9. Hip DJD Right – M16.11
10. Hip DJD Left – M16.12
11. Anxiety – F41.9
12. Chronic Pain – G89.29
13. Depression – F32.9
14. Myalgia (Myofascial) Pain – M79.18
15. Neuropathy – Peripheral – G60.9

**Follow-Up Plan:**

F/u severity of non-compliance per history is: None

F/u Review completed for: U-Tox/ORT, KASPER Report, Medication list, Nursing/chart notes, Treatment goals, plan and U-Tox log.

As discussed during the initial consultation with the patient and as monitored during subsequent clinic visits, the patient will:

1. Engage physical therapy with an initial evaluation and then learn their recommended treatment exercises. The learned exercises will continue at the patient home as part of a home based exercise program. Additionally, if spinal column problems exist then learning and implementing the McKenzie stabilization exercises is consistently recommended.
2. Participate in a weight loss program if their BMI=30. This includes learning the Myfitnesspal.com free application for which user instructions were given to the patient during the initial visit. A consultation with a dietician was also recommended initially if they are diabetic.
3. Participate in a behavioral health program if diagnosed with either depression, bipolar, or other mental disorders with an emphasis on learning coping skill. Specifically, mastery of the techniques employing distraction and guided-imagery is encouraged.
4. Unless noted elsewhere, all other problems (diagnosis) have been stable/addressed and current treatment is to continue (eg O.A., D.M., BMI, Neuropathy)

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If the patient received 50% pain relief from their last procedure, then this intervention will be continued. Otherwise, the current treatment plan and procedures will be changed as appropriate

**F/u Orders:**

Will not order a Urine Drug Test (UDT)

**MEDICATION MANAGEMENT:**

1. Due to acceptable ADL, efficacy tolerance the C.S. dosing was unchanged (or no additional C.S.).
2. Celebrex 100 mg, b.i.d, p.r.n.
3. Continue Norco 7.5 mg, q.i.d, p.r.n. #120 (50% pain relief obtained)
4. Continue Lyrica 150 mg, b.i.d. #60 (50% pain relief obtained)
5. Continue cymbalta 30 mg, q.d. #30 (50% pain relief obtained)
6. Continue Tizanidine 4 mg, 1-2 tabs, q.h.s, p.r.n. #60 (50% pain relief obtained)

**INJECTIONS:**

1. Later schedule trigger point injection at p.r.n

For the planned procedure(s), if any, considerable time was spent explaining the risks, benefits and alternatives. All questions were answered including common complications to planned procedure along with remedies for the potential complications. Handouts were also given to the patient as appropriate including procedure and educational videos at [www.tinyurl.com/PROCEDURE-Oct2022](http://www.tinyurl.com/PROCEDURE-Oct2022). if applicable, the patient was told to stop taking all anti coagulant medications for 3-5 days. The specific cessation interval depends on both the anti coagulants they are on and the type of procedure scheduled.

Once the patient has fully engaged and completed the initial treatment plan as documented over the course of multiple clinic visits, then Maximum Medical Improvement (MMI) will be achieved. Additionally, if the patient is taking narcotics, then this will be tapered down over a 3-6 month period as tolerated by patient.

**Follow-up Appointment in:** Four weeks

Taja Elder, APRN personally performed today's follow-up evaluation and treatment plan of the patient, while Dr. Robert Klickovich (or different Physician noted/documented above) provided direct supervision of the APRN and was immediately available to assist if needed during today's follow-up patient encounter. A clinic physician had previously performed the initial service evaluation of the patient while Dr. Robert Klickovich currently remains actively involved in the patient's progress and treatment plan including approving changes in medication type, strength, or dosing interval or any other aspect of their care plan.

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This document(s) was dictated, transcribed, but not read and is subject to review and confirmation. Please contact the author if you have any concerns/clarifications.

Robert Klickovich, MD

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RK/

07/23/2025