

CONFIDENTIAL FAX

UT Neurology

1233 Fremont Road Suite 200
Chattanooga, TN 37321

Phone: 421-771-9001 Fax: 421-771-843

Date:	Attention:
4-8-23	
To: Foresight Health	From: UT Neurology Angela Nicole NPC /Catherine CMA
Phone:	Fax: 1-244-345-8459
Re: Amy Chen	# of pages(including cover)

Urgent Please Reply Please Review Referral For Your Records

Confidentiality Notice

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EverGrande Health System-Confidential Information
1233 Fremont Road, Chattanooga, TN 37321 (ATTN: Health Information Management)

Patient Information

Patient Name Chen, Amy	Date of Birth 05/23/1983	Age 39 y.o.	Social Security Number xxx-xx-8110
Sex Female	Language English		
Admitting Provider	Admission Date/Time	Expected Length of Stay Never Admitted	Length of Stay 0h
Discharge Provider	Discharge Date	Discharge Disposition	Discharge Destination
Attending Provider: (none) Allergies: No Known Allergies	Isolation: None Infection: None Code Status: Not on file	Ht: -- Wt: 50.9 kg	Admission Cmt: None Principal Problem: None

Demographics

Address 2751 Market DR HILLCREST TN <u>37253-2973</u>	Phone Numbers Hm: 615-593-1048 Cell: 615-593-1048	Social Security Number xxx-xx-8110	Insurance Information ABS OF TN	Religion Unknown
				Date of Birth 05/23/1983

Basic Information

Date Of Birth 5/23/1983	Gender Identity Female	Race Asian	Ethnic Group Not Hispanic, Latino/a, or Spanish origin	Preferred Language English, Mandarin	Preferred Written Language English, Mandarin
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Hospital Account

Not on file

Medical Problems**Problem List**

Migraines
Difficulty falling or staying asleep
Altitude sickness preventative measures
Neck pain

Noted2/15/20162/23/20189/3/20183/1/2023**END OF REPORT**

Chen, Amy (MRN 01051001) DOB: 05/23/1983

Encounter Date: 04/01/2023

Chen, Amy

MRN: 01051001

Procedure visit

4/1/2023 EMG Neurology

Provider: Angela Nicole, NP (Neurology)

Primary diagnosis: Intractable chronic migraine without aura and with status migrainosus

Reason for Visit: Botulinum Toxin Injection

Progress Notes

Angela Nicole, NP (Nurse Practitioner) • Neurology

Chronic Migraine Botox Injection Procedure

Name: Amy Chen

MRN: 01051001

DOB: 5/23/1983

PROCEDURE:

Botox for chronic migraine

HISTORY:

The patient presents with a history of chronic migraines for Botox injections. Prior to the procedure, the consent process was completed, including a discussion of the overall benefits and addressing any questions. The patient confirmed their understanding and expressed readiness to proceed with the injections.

PROCEDURE:

Each vial of botulinum toxin type A (BOTOX) was diluted with 1.5 cc of preservative-free saline, and a 32-gauge, 0.5-inch needle was used for the injections. The patient was positioned comfortably in an upright seated posture. Each injection site was cleansed with alcohol, and a topical numbing spray was applied to anesthetize the area.

10 units into the right frontalis (administered as two 5-unit injections)**10 units into the left frontalis (administered as two 5-unit injections)****5 units into the right corrugator****5 units into the left corrugator****10 units into the right occipitalis (in 3 5 unit injections)****10 units into the left occipitalis (in 3 5 units injections)****5 units into the right cervical paraspinal muscles (in 2 5 unit injections)****5 units into the left cervical paraspinal muscles (in 2 5 unit injections)**

Chen, Amy (MRN 01051001) DOB: 05/23/1983

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30 units into the right trapezius (in 3 10 unit injections)
30 units into the left trapezius (in 3 10 unit injections)

SAMPLE

A total of 190 units were drawn up and utilized and there was a total wastage of 10 units.
Lot #:C1801AC1
Expiration Date: 04/2025

Patient tolerated the procedure well and was discharged from clinic.

Angela Nicole, NP

Progress Notes

Amy Rains, NP (Nurse Practitioner) • Neurology

Subjective:

Patient ID: Amy Chen is a 39 y.o. female.

INTERVAL HISTORY

Patient was last seen 2/24/2023 via telemedicine with Dr. Fazal at which time she was to continue Zomig PRN and Nurtec every other day. She is here today to restart Botox for prevention.

Today she reports she had been off Aimovig since December. She had some improvement with Botox/cosmetic. The last few month have been difficult: back to chronic daily HA.

Nurtec: every other day (preventive)

Zomig: stopped keeping track: increased frequency/severity

Vyepti: she would like to do this vs. Botox

She continues klonopin for sleep.

INITIAL HPI

The patient has a longstanding history of migraine headaches. Under my care in the general neurology clinic, she has been managing chronic migraines, experiencing more than 15 headache days per month prior to initiating Botox therapy. Her headaches are predominantly unilateral, typically occurring on the left side, and are sometimes accompanied by a burning sensation in the face. She also experiences intermittent nausea, along with sensitivity to light, sound, and occasionally certain smells.

Her medical history includes a brain MRI from 2010, which was reportedly normal. A follow-up brain MRI conducted in early 2017 revealed mild white matter changes consistent with migraine.

She is tried multiple medications as outlined below:

Propranolol

Verapamil

Topiramate (Topamax)

Nortriptyline

Venlafaxine (Effexor)

Gabapentin

Chen, Amy (MRN 01051001) DOB: 05/23/1983

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Skelaxin with indomethacin
Nerve blocks
Oral contraceptives
Magnesium
Feverfew
Butterburr

Abortives:

Zomig
Frova
Imitrex
Fioricet
Zofran

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

Musculoskeletal: Positive for arthralgias.
Neurological: Positive for headaches.
Psychiatric/Behavioral: Positive for agitation.
All other systems reviewed and are negative.
ROS reviewed. See pertinent positives and negatives above.

Objective:

Neurologic Exam

Mental Status

Oriented to person, place, and time.
Oriented to person.
Oriented to place.
Attention: normal. Concentration: normal.
Speech: speech is normal
Level of consciousness: alert
Knowledge: good.
Normal comprehension.

Cranial Nerves

Cranial nerves II through XII intact.

CN III, IV, VI

Pupils are equal, round, and reactive to light.

Motor Exam

Muscle bulk: normal Moves all extremities symmetrically

Gait, Coordination, and Reflexes

Chen, Amy (MRN 01051001) DOB: 05/23/1983

Encounter Date: 04/01/2023

Gait

Gait: normal

Coordination

Finger to nose coordination: normal

Physical Exam

Vitals reviewed.

Constitutional:

Appearance: Normal appearance. She is well-developed.

HENT:

Head: Normocephalic and atraumatic.

Eyes:

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

Pulmonary:

Effort: Pulmonary effort is normal.

Musculoskeletal:

General: Normal range of motion.

Skin:

General: Skin is warm and dry.

Neurological:

General: No focal deficit present.

Mental Status: She is alert and oriented to person, place, and time. Mental status is at baseline.

Cranial Nerves: Cranial nerves 2-12 are intact.

Coordination: Finger-Nose-Finger Test normal.

Gait: Gait is intact.

Psychiatric:

Mood and Affect: Mood normal.

Speech: Speech normal.

Behavior: Behavior normal.

Thought Content: Thought content normal.

Assessment/Plan:

Assessment

Diagnoses and all orders for this visit:

Intractable chronic migraine without aura and with status migrainosus

- ketorolac (TORADOL) injection 30 mg

Primary insomnia

Cervicalgia

She has been using Nutrec more for prevention with some improvement along with cosmetic botox. She has had more migraines the last few weeks. She is taking Zomig PRN. She would like to consider adding Vycepi (over Botox) if the insurance will approve.

Chen, Amy (MRN 01051001) DOB: 05/23/1983

Encounter Date: 04/01/2023

Botox today: SAMPLE Used

For prevention:

--nutrec 75 mg every other day

Future: consider restart of Aimovig

Work on Vycepi infusion approval: prefers close to home

For acute headaches:

Headache stoplight:

--Green light (can go with headache): alleve, caffeine, sugar

--Yellow light (slowing down with headache): Nutrec 75 mg at onset. Can repeat in 24 hours. If she has already taken Nutrec, she could use Naproxen at this phase.

--Red light (stopped): zomig 2.5-5 mg at onset. Can repeat in 4 hours if needed.

She can continue medrol dosepack if in status migrainosus; can consider depakote bridge

Continue Naproxen 550 mg prn for neck pain.

For insomnia, continue klonopin 0.25 mg at bedtime.

RTC in August

Total time: 35 minutes

Instructions

Return in about 5 months (around 9/1/2023).

We will call you regarding the Vycepi infusion

Botox: will peak in 2 weeks

Return in 5 months

After Visit Summary

Additional Documentation

Vitals: BP 107/50 ! (Abnormal) (BP Location: Right arm, Patient Position: Sitting, BP Cuff Size: Adult)

Pulse 73 Temp 37.4 °C (Forehead) Wt 50.9 kg BMI 21.85 kg/m² BSA 1.63 m² Pain Sc 0-No pain**Communications**

Chart Routed to Ellen Valadez, MD

Administrations This Visit

Chen, Amy (MRN 01051001) DOB: 05/23/1983

Encounter Date: 04/01/2023

ketorolac (TORADOL) injection 30 mg

Admin Date 04/01/2023	Action Given	Dose 30 mg	Route intramuscular	Administered By Cynthia Cagle, LPN
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Billing Information

Medication ketorolac 30 mg/mL (1 mL) solution	NDC 0358- 23072-65	Lot# 10000181	Expiration Date 10/30/2024	Manufacturer BAXTER HEALTHCA	Admin Qty	Waste Qty	Pack Size mL	Billing Code

Orders Placed

None

Medication Changes

As of 4/1/2023 9:22 AM

	Refills	Start Date	End Date
Added: eptinezumab-jjmr (VYEPTI) 100 mg/mL solution	0	4/1/2023	4/1/2023

Infuse 1 mL (100 mg total) into a venous catheter once for 1 dose. - intravenous

Prior authorization: Approved

Medication List at End of Visit

As of 4/1/2023 9:22 AM

	Refills	Start Date	End Date
clonazePAM (KlonopIN) 0.5 mg tablet	5	09/23/2022	
TAKE 1 TABLET(0.5 MG) BY MOUTH EVERY NIGHT			

eptinezumab-jjmr (VYEPTI) 100 mg/mL solution	0	5/1/2023	5/1/2023
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Infuse 1 mL (100 mg total) into a venous catheter once for 1 dose. - intravenous

Prior authorization: Approved

methylPREDNISolone (MEDROL DOSEPACK) 4 mg tablet	0	6/15/2022
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FOLLOW PACKAGE DIRECTIONS

naproxen sodium

naproxen sodium (ANAPROX) 550 mg tablet	11	12/9/2021
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TAKE 1 TABLET BY MOUTH TWICE DAILY AS NEEDED

naproxen sodium (ANAPROX) 550 mg tablet	11	12/9/2021
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TAKE 1 TABLET BY MOUTH TWICE DAILY AS NEEDED

rimegepant (Nurtec ODT) 75 mg tablet,disintegrating	11	10/20/2022
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Take 75 mg by mouth as needed (migraine. Max 1 in 24 hours). - oral

No prior authorization was found for this prescription.

Found prior authorization for another prescription for the same medication: Closed - Prior

Authorization not required for patient/medication

Chen, Amy (MRN 01051001) DOB: 05/23/1983

Encounter Date: 04/01/2023

	Refills	Start Date	End Date
ZOLMitriptan (ZOMIG) 5 mg tablet	11	3/18/2023	

TAKE 1 TABLET BY MOUTH AT ONSET OF MIGRAINE. MAY REPEAT 1 TIME IN 4 HOURS IF NO RELIEF

Medications Administered

ketorolac tromethamine 30 mg

Visit Diagnoses

Primary: Intractable chronic migraine without aura and with status migrainosus G43.711

Primary insomnia F51.01

Cervicalgia M54.2