



# Mary Sue Lark

Patient Health Summary, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Allergies

**Statins-Hmg-Coa Reductase Inhibitors** (Other (See Comments)) - Low Severity

## Medications

**escitalopram (LEXAPRO) 10 MG tablet** (Started 7/31/2020)

Take 10 mg by mouth Daily.

**cyclobenzaprine (FLEXERIL) 5 MG tablet** (Started 1/15/2021)

Take 1 tablet (5 mg total) by mouth 3 (three) times daily as needed for Muscle spasms.

**lisinopril (PRINIVIL,ZESTRIL) 20 MG tablet** (Started 2/10/2021)

TAKE 1 TABLET BY MOUTH EVERY NIGHT

1 refill by 5/11/2022

**estradiol (ESTRACE) 0.01 % (0.1 mg/gram) vaginal cream** (Started 3/16/2021)

apply 1g vaginally three times a week

**sucralfate (CARAFATE) 1 gram tablet** (Started 4/9/2021)

TAKE 1 TABLET BY MOUTH 4 TIMES DAILY FOR 14 DAYS

**atorvastatin (LIPITOR) 10 MG tablet** (Started 4/13/2021)

TAKE ONE TABLET BY MOUTH ONE TIME DAILY

3 refills by 7/12/2022

**levothyroxine (SYNTHROID) 50 MCG tablet** (Started 6/2/2021)

TAKE 1 TABLET (50 MCG TOTAL) BY MOUTH EVERY DAY

2 refills by 8/31/2022

**omeprazole (PRILOSEC) 40 MG capsule** (Started 6/25/2021)

Take 1 capsule (40 mg total) by mouth Daily.

## Ended Medications

**omeprazole (PRILOSEC) 40 MG capsule** (Started 3/18/2021) (**Expired**)

Take 1 capsule (40 mg total) by mouth Daily.

## Active Problems

**Acquired hypothyroidism** (Noted 1/22/2018)

**Atrophic vaginitis** (Noted 7/31/2019)

**Colon cancer screening declined** (Noted 8/2/2019)

**Essential hypertension** (Noted 10/2/2020)

**Excessive drinking of alcohol** (Noted 7/31/2019)

**Hyperlipidemia, mixed** (Noted 1/22/2018)

**Impaired fasting blood sugar** (Noted 6/19/2020)

**Obesity (BMI 30.0-34.9)** (Noted 1/22/2018)

## Resolved Problems

**Chronic fatigue** (Noted 1/22/2018)

**GERD without esophagitis** (Noted 1/22/2018)

**Injury of left ankle** (Noted 9/24/2018)

**Primary insomnia** (Noted 1/22/2018)

## Immunizations

**COVID-19 (Pfizer) SARS-COV-2 mRNA MDV Vaccine** (Given 4/9/2021, 3/19/2021)

**INFLUENZA (AFLURIA QUAD)>OR=3YO PF** (Given 11/1/2019, 10/2/2017)

**INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)** (Given 10/2/2017)

**INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD) >OR=6MO PF** (Given 9/29/2020, 11/1/2019, 10/4/2019, 10/2/2017)

**Tdap** (Given 7/31/2019)

**Zoster (Shingrix)** (Given 2/10/2020, 10/4/2019)

## Implants

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfi 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
<b>Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-26 / AR-8835-26 / 1-092518-2
<b>Implant Knotless Syndesmosis Tightrope Xp Stainless Steel Ar-8925ss - Sar-8925ss</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL, UHMWPE MEDIAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8925SS / AR-8925SS / 10224713
<b>Screw Low Profile 2.7x14mm Locking Ss Ar-8827l-14 - Sar-8827l-14</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2
<b>Screw Low Profile 2.7x12mm Locking Ss Ar-8827l-12 - Sar-8827l-12</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-12 / AR-8827L-12 / 1-092518-2
<b>Screw Low Profile 2.7x16mm Locking Ss Ar-8827l-16 - Sar-8827l-16</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-16 / AR-8827L-16 / 1-092518-2
<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-12 / AR-8835-12 / 1-092518-2
<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b> Implanted: Qty: 2 on 09/25/2018 by Neary,	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-14 / AR-8835-14 /

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

<b>Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-22 / AR-8835-22 / 1-092518-2
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Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

<b>Screw Low Profile 4x46 Cannulated Long Thread Stainless Steel Ar-8840cl-46 - Sar-8840cl-46</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL	OTHER IMPLANTS	Left: Ankle	ARTHREX INC	AR-8840CL-46 / AR-8840CL-46 / 1-092518-2
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Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
MEDIAL SIDE.

Explanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Screw Low Profile 2.7x14mm Locking Ss Ar-8827l-14 - Sar-8827l-14</b> Explanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2
<b>Screw Low Profile 2.7x14mm Non-Locking Cortical Ar-8827-14 - Sar-8827-14</b> Explanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827-14 / AR-8827-14 / 1-092518-2
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.					
<b>SPLINT APPLICATION</b> (Performed 9/18/2018)					

## Procedures

**ANESTHESIA PERIPHERAL BLOCK** (Performed 9/25/2018)

**ANESTHESIA PERIPHERAL BLOCK** (Performed 9/25/2018)

**ANESTHESIA PERIPHERAL BLOCK** (Performed 9/25/2018)

**OPEN REDUCTION INTERNAL FIXATION ANKLE** (Performed 9/25/2018)

Performed for Injury of left ankle, initial encounter

**SPLINT APPLICATION** (Performed 9/18/2018)

## Results

BI SCREENING MAMMOGRAM BILATERAL - Final result (06/01/2021 3:01 PM MDT)

Specimen

### Impressions

BI-RADS Category 0: Needs additional imaging evaluation. Additional imaging evaluation beginning with ultrasound then followed by diagnostic mammography, at the discretion of the interpreting radiologist, is recommended.

Performed At

POWERSCRIBE PACS  
ASOBGYN

If additional imaging is requested based on imaging or physical findings described above, we will contact the patient to schedule follow-up imaging.

Patient information entered into a reminder system with a target due date for the next mammogram.

### Narrative

BILATERAL DIGITAL MAMMOGRAM WITH COMPUTER AIDED DETECTION

Performed At

POWERSCRIBE PACS  
ASOBGYN

HISTORY: Screening.

PATIENT CONCERNS: None

RISK FACTORS: No family history of breast cancer.

COMPARISON: 03/28/2016, 02/03/2014, 09/21/2012

MAMMOGRAM: Interpretation is performed utilizing computer-aided detection. Standard digital Bilateral CC and MLO views were obtained. There are scattered areas of fibroglandular density.

Right breast:

No suspicious mass, suspicious calcifications or unexpected architectural distortion.

Left breast:

8 mm mass 2-3 o'clock 7 cm from the nipple

Performing Organization	Address	City/State/ZIP Code	Phone Number
POWERSCRIBE PACS ASOBGYN			

#### TSH (TSH, 3RD GEN) - Final result (02/16/2021 9:11 AM MST)

Component	Value	Ref Range	Performed At	Pathologist Signature
TSH, 3RD GEN	1.65	0.47 - 4.68 uIU/mL	SLHS CORE LAB	

#### Specimen

Blood - Entire blood vessel (body structure)

Narrative	Performed At
Biotin supplements have shown the potential to produce negatively biased TSH values by immunoassay. If there is suspicion for patient biotin use, please re-test after cessation.	SLHS CORE LAB

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	

#### HEPATIC FUNCTION PANEL - Final result (02/16/2021 9:11 AM MST)

Component	Value	Ref Range	Performed At	Pathologist Signature
PROTEIN TOTAL	7.0	6.3 - 8.2 g/dL	SLHS CORE LAB	
ALBUMIN	4.2	3.5 - 5.0 g/dL	SLHS CORE LAB	
TOTAL BILIRUBIN	0.8	0.2 - 1.3 mg/dL	SLHS CORE LAB	
DIRECT BILIRUBIN	0.3	0.0 - 0.4 mg/dL	SLHS CORE LAB	
ALK PHOS	62	38 - 126 U/L	SLHS CORE LAB	
AST(SGOT)	26	15 - 46 U/L	SLHS CORE LAB	
ALT(SGPT)	28	<35 U/L	SLHS CORE LAB	

#### Specimen

Blood - Entire blood vessel (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	

#### LIPID PANEL - Final result (02/16/2021 9:11 AM MST)

Component	Value	Ref Range	Performed At	Pathologist Signature
CHOLESTEROL	147	<=200 mg/dL	SLHS CORE LAB	

Comment:  
Total cholesterol risk ranges:  
Desirable: <200mg/dL  
Borderline: 200-240 mg/dL  
High: >240 mg/dL

TRIGLYCERIDES	91	<=150 mg/dL	SLHS CORE LAB
HDL CHOLESTEROL	<b>44 (L)</b>	>=60 mg/dL	SLHS CORE LAB
	Comment:		
	Reference Ranges:		
	Increased Risk for CHD:		
	<35 mg/dL		
	Intermediate Result:	35-	
	60 mg/dL		
	Decreased risk for CHD:		
	>60 mg/dL		
	Correlation with other lipoprotein and clinical parameters is suggested to assess overall risk for CHD.		

CHOL/HDL RATIO	3	<=5	SLHS CORE LAB
LDL CALCULATED (LIPID PANEL)	84.8	<100 mg/dL	SLHS CORE LAB
DIRECT LDL CHOLESTEROL			SLHS CORE LAB
VLDL CHOLESTEROL	18.2	0 - 40 mg/dL	SLHS CORE LAB

#### Specimen

Blood - Entire blood vessel (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	

#### BASIC METABOLIC PANEL - Final result (11/16/2020 1:04 PM MST)

Component	Value	Ref Range	Performed At	Pathologist Signature
SODIUM	137	135 - 144 mmol/L	SLHS CORE LAB	
POTASSIUM	4.6	3.5 - 5.5 mmol/L	SLHS CORE LAB	
CHLORIDE	105	98 - 107 mmol/L	SLHS CORE LAB	
TOTAL CO2	23	22 - 32 mmol/L	SLHS CORE LAB	
ANION GAP	9	7 - 15 mmol/L	SLHS CORE LAB	
GLUCOSE	<b>110 (H)</b>	60 - 100 mg/dL	SLHS CORE LAB	
CALCIUM	9.3	8.4 - 10.6 mg/dL	SLHS CORE LAB	
BUN	16	7 - 17 mg/dL	SLHS CORE LAB	
CREATININE	0.69	0.52 - 1.04 mg/dL	SLHS CORE LAB	
GFR IF AFRICAN AMERICAN	>90	>=60 ml/min/1.73m <sup>2</sup>	SLHS CORE LAB	
GFR	86	>=60 ml/min/1.73m <sup>2</sup>	SLHS CORE LAB	

#### Specimen

Blood - Entire blood vessel (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	

#### POCT PERFORM URINE DIPSTICK (POCT URINALYSIS DIPSTICK) - Final result (09/29/2020 12:30 PM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
COLOR UA	yellow		PORTE ADA MEDICAL ASSOCIATES	

CLARITY UA	cloudy		PORTE ADA MEDICAL ASSOCIATES
GLUCOSE UA	neg	NEG mg/dl	PORTE ADA MEDICAL ASSOCIATES
BILIRUBIN UA	neg	NEG	PORTE ADA MEDICAL ASSOCIATES
KETONES UA	neg	NEG	PORTE ADA MEDICAL ASSOCIATES
SPECIFIC GRAVITY UA	1.020	1.001 - 1.035	PORTE ADA MEDICAL ASSOCIATES
RBC UA	Trace-Intact	NEG	PORTE ADA MEDICAL ASSOCIATES
PH UA	7.0	5 - 9	PORTE ADA MEDICAL ASSOCIATES
PROTEIN UA	neg	NEG	PORTE ADA MEDICAL ASSOCIATES
UROBILINOGEN UA	0.2	0 - 1 mg/dl	PORTE ADA MEDICAL ASSOCIATES
NITRITES UA	positive	NEG	PORTE ADA MEDICAL ASSOCIATES
LEUKOCYTES EST	2+	NEG	PORTE ADA MEDICAL ASSOCIATES
URINE SENT FOR CULTURE?	Yes		PORTE ADA MEDICAL ASSOCIATES
URINE SOURCE, POC	Clean Catch Urine		PORTE ADA MEDICAL ASSOCIATES

#### Specimen

Urine

Performing Organization	Address	City/State/ZIP Code	Phone Number
PORTE ADA MEDICAL ASSOCIATES	3399 E LOUISE DRIVE SUITE 100	Meridian, ID 83642-5047	208-288-2255

#### URINE CULTURE - Final result (09/29/2020 12:30 PM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
URINE CULTURE	<b>20,000-30,000 CFU/mL Mixed periurethral flora present (A)</b>		SLHS CORE LAB	

#### Specimen

Urine - Urine specimen collection, clean catch (procedure)

Narrative	Performed At
Mixed periurethral flora present. Probable contamination. Susceptibilities not indicated. Suggest repeat specimen if patient's symptoms suggest a urinary tract infection.	SLHS CORE LAB

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	

### TSH (TSH, 3RD GEN) - Final result (06/19/2020 10:33 AM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
TSH, 3RD GEN	2.54	0.47 - 4.68 uIU/mL	SLHS CORE LAB	

#### Specimen

Blood - Entire blood vessel (body structure)

Narrative	Performed At
Biotin supplements have shown the potential to produce negatively biased TSH values by immunoassay. If there is suspicion for patient biotin use, please re-test after cessation.	SLHS CORE LAB

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	

### LIPID PANEL - Final result (06/19/2020 10:33 AM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
CHOLESTEROL	<b>261 (H)</b>	<=200 mg/dL	SLHS CORE LAB	

#### Comment:

Total cholesterol risk ranges:

Desirable: <200mg/dL

Borderline: 200-240 mg/dL

High: >240 mg/dL

TRIGLYCERIDES	138	<=150 mg/dL	SLHS CORE LAB
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HDL CHOLESTEROL	<b>47 (L)</b>	>=60 mg/dL	SLHS CORE LAB
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#### Comment:

Reference Ranges:

Increased Risk for CHD:

<35 mg/dL

Intermediate Result: 35-

60 mg/dL

Decreased risk for CHD:

>60 mg/dL

Correlation with other lipoprotein and clinical parameters is suggested to assess overall risk for CHD.

CHOL/HDL RATIO	<b>6 (H)</b>	<=5	SLHS CORE LAB
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LDL CALCULATED (LIPID PANEL)	<b>186.4 (H)</b>	<100 mg/dL	SLHS CORE LAB
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DIRECT LDL CHOLESTEROL			SLHS CORE LAB
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VLDL CHOLESTEROL	27.6	0 - 40 mg/dL	SLHS CORE LAB
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#### Specimen

Blood - Entire blood vessel (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	

## COMPREHENSIVE METABOLIC PANEL (COMPREHENSIVE METABOLIC) - Final result (06/19/2020 10:33 AM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
SODIUM	141	135 - 144 mmol/L	SLHS CORE LAB	
POTASSIUM	4.4	3.5 - 5.5 mmol/L	SLHS CORE LAB	
CHLORIDE	<b>108 (H)</b>	98 - 107 mmol/L	SLHS CORE LAB	
TOTAL CO2	24	22 - 32 mmol/L	SLHS CORE LAB	
ANION GAP	9	7 - 15 mmol/L	SLHS CORE LAB	
GLUCOSE	<b>104 (H)</b>	60 - 100 mg/dL	SLHS CORE LAB	
CALCIUM	9.0	8.4 - 10.6 mg/dL	SLHS CORE LAB	
BUN	<b>20 (H)</b>	7 - 17 mg/dL	SLHS CORE LAB	
CREATININE	0.72	0.52 - 1.04 mg/dL	SLHS CORE LAB	
GFR IF AFRICAN AMERICAN	>90	>=60 ml/min/1.73m <sup>2</sup>	SLHS CORE LAB	
GFR	82	>=60 ml/min/1.73m <sup>2</sup>	SLHS CORE LAB	
PROTEIN TOTAL	7.4	6.3 - 8.2 g/dL	SLHS CORE LAB	
ALBUMIN	4.1	3.5 - 5.0 g/dL	SLHS CORE LAB	
TOTAL BILIRUBIN	0.6	0.2 - 1.3 mg/dL	SLHS CORE LAB	
ALK PHOS	80	38 - 126 U/L	SLHS CORE LAB	
AST(SGOT)	23	15 - 46 U/L	SLHS CORE LAB	
ALT(SGPT)	21	<35 U/L	SLHS CORE LAB	

## Specimen

Blood - Entire blood vessel (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	

## URINE CULTURE - Final result (05/15/2020 12:12 PM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
URINE CULTURE	No Growth 16 hrs		SLHS CORE LAB	

## Specimen

Urine - Urine specimen collection, clean catch (procedure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	

## POCT PERFORM URINE DIPSTICK (POCT URINALYSIS DIPSTICK) - Final result (05/15/2020 11:38 AM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
COLOR UA	yellow		PORTE ADA MEDICAL ASSOCIATES	
CLARITY UA	slightly cloudy		PORTE ADA MEDICAL ASSOCIATES	
GLUCOSE UA	neg	NEG mg/dl	PORTE ADA MEDICAL ASSOCIATES	
BILIRUBIN UA	neg	NEG	PORTE ADA MEDICAL ASSOCIATES	
KETONES UA	neg	NEG	PORTE ADA MEDICAL ASSOCIATES	
SPECIFIC GRAVITY	1.010	1.001 - 1.035	PORTE ADA	

UA			MEDICAL ASSOCIATES
RBC UA	neg	NEG	PORTE ADA MEDICAL ASSOCIATES
PH UA	6.0	5 - 9	PORTE ADA MEDICAL ASSOCIATES
PROTEIN UA	neg	NEG	PORTE ADA MEDICAL ASSOCIATES
UROBILINOGEN UA	0.2	0 - 1 mg/dl	PORTE ADA MEDICAL ASSOCIATES
NITRITES UA	neg	NEG	PORTE ADA MEDICAL ASSOCIATES
LEUKOCYTES EST	trace	NEG	PORTE ADA MEDICAL ASSOCIATES
URINE SENT FOR CULTURE?	Yes		PORTE ADA MEDICAL ASSOCIATES
URINE SOURCE, POC	Clean Catch Urine		PORTE ADA MEDICAL ASSOCIATES

Specimen

Urine

Performing Organization	Address	City/State/ZIP Code	Phone Number
PORTE ADA MEDICAL ASSOCIATES	3399 E LOUISE DRIVE SUITE 100	Meridian, ID 83642-5047	208-288-2255

POCT INFLUENZA A/B - Final result (03/02/2020 12:57 PM MST)

Component	Value	Ref Range	Performed At	Pathologist Signature
RAPID INFLUENZA A AGN	Negative	Negative	PORTE ADA MEDICAL ASSOCIATES	
RAPID INFLUENZA B AGN	Negative	Negative	PORTE ADA MEDICAL ASSOCIATES	
INFLUENZA TEST LOT#	8,315,849		PORTE ADA MEDICAL ASSOCIATES	
EXPIRATION DATE	11/11/2021		PORTE ADA MEDICAL ASSOCIATES	
CONTROLS OKAY? Yes			PORTE ADA MEDICAL ASSOCIATES	

Specimen

Upper Resp/Eye/Ear

Performing Organization	Address	City/State/ZIP Code	Phone Number
PORTE ADA MEDICAL ASSOCIATES	3399 E LOUISE DRIVE SUITE 100	Meridian, ID 83642-5047	208-288-2255

## URINE CULTURE - Final result (01/21/2020 7:07 PM MST)

Component	Value	Ref Range	Performed At	Pathologist Signature
URINE CULTURE	<b>&gt;100,000 CFU/mL Mixed periurethral flora present (A)</b>		SLHS REFERENCE LAB	
Specimen				
Urine - Urine specimen collection, clean catch (procedure)				
Narrative			Performed At	
Mixed periurethral flora present. Probable contamination. Susceptibilities not indicated. Suggest repeat specimen if patient's symptoms suggest a urinary tract infection.			SLHS REFERENCE LAB	
Performing Organization	Address	City/State/ZIP Code	Phone Number	
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705		
SLHS REFERENCE LAB	3176 S. DENVER WAY	BOISE, ID 83705, USA		

## POCT URINALYSIS AUTOMATED - Final result (01/21/2020 6:57 PM MST)

Component	Value	Ref Range	Performed At	Pathologist Signature
COLOR UA	Yellow	Yellow	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	
CLARITY UA	<b>Cloudy (A)</b>	Clear	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	
SPECIFIC GRAVITY UA	1.025	>1.002- <1.030	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	
PH UA	6.0	4.5 - 8.0	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	
GLUCOSE UA	Negative	Negative	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	
PROTEIN UA	<b>2+ (A)</b>	Negative	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	
KETONES UA	Negative	Negative	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	
BILIRUBIN UA	Negative	Negative	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	
OCCULT BLOOD UA	<b>3+ (A)</b>	Negative	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	
LEUKOCYTES UA	<b>2+ (A)</b>	Negative	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	

NITRITES UA

Negative

Negative

SLHS EMC SL  
EAGLE MEDICAL  
PLAZA DRAW  
STATION

## Specimen

Urine

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	3101 E STATE STREET	EAGLE, ID 83616-6232	208-473-3020

## HEMAGRAM (HEMOGRAM) - Final result (06/24/2019 10:56 AM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
WBC COUNT	6.27	3.80 - 11.00 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	
RBC COUNT	4.99	3.50 - 5.50 10 <sup>6</sup> /uL	SLHS REFERENCE LAB	
HEMOGLOBIN	15.6	11.2 - 15.7 g/dL	SLHS REFERENCE LAB	
HEMATOCRIT	46.4	33.0 - 48.0 %	SLHS REFERENCE LAB	
MCV	93.0	79.0 - 101.0 fL	SLHS REFERENCE LAB	
MCH	31.3	25.0 - 35.0 pg	SLHS REFERENCE LAB	
MCHC	33.6	31.0 - 37.0 g/dL	SLHS REFERENCE LAB	
RDW-CV	13.2	11.0 - 16.0 %	SLHS REFERENCE LAB	
MPV	10.6	9.4 - 12.4 fL	SLHS REFERENCE LAB	
PLATELET COUNT	237	150 - 420 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	
NRBC %	0	0 - 0 %	SLHS REFERENCE LAB	
NRBC #	<0.01	0.00 - 0.12 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	

## Specimen

Blood - Entire blood vessel (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	
SLHS REFERENCE LAB	3176 S. DENVER WAY	BOISE, ID 83705, USA	

## TSH (TSH, 3RD GEN) - Final result (06/24/2019 10:56 AM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
TSH, 3RD GEN	2.94	0.47 - 4.68 uIU/mL	SLHS REFERENCE LAB	

## Specimen

Blood - Entire blood vessel (body structure)

Narrative	Performed At
Biotin supplements have shown the potential to produce negatively biased TSH values by immunoassay. If there is suspicion for patient biotin use, please re-test after cessation.	SLHS REFERENCE LAB

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	
SLHS REFERENCE LAB	3176 S. DENVER WAY	BOISE, ID 83705, USA	

### COMPREHENSIVE METABOLIC PANEL (COMPREHENSIVE METABOLIC) - Final result (06/24/2019 10:56 AM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
SODIUM	141	135 - 144 mmol/L	SLHS REFERENCE LAB	
POTASSIUM	4.9	3.5 - 5.5 mmol/L	SLHS REFERENCE LAB	
CHLORIDE	107	98 - 107 mmol/L	SLHS REFERENCE LAB	
TOTAL CO2	27	22 - 32 mmol/L	SLHS REFERENCE LAB	
ANION GAP	7	7 - 15 mmol/L	SLHS REFERENCE LAB	
GLUCOSE	<b>101 (H)</b>	60 - 100 mg/dL	SLHS REFERENCE LAB	
CALCIUM	9.5	8.4 - 10.6 mg/dL	SLHS REFERENCE LAB	
BUN	<b>18 (H)</b>	7 - 17 mg/dL	SLHS REFERENCE LAB	
CREATININE	0.73	0.52 - 1.04 mg/dL	SLHS REFERENCE LAB	
GFR IF AFRICAN AMERICAN	>90	>=60 ml/min/1.73m <sup>2</sup>	SLHS REFERENCE LAB	
GFR	81	>=60 ml/min/1.73m <sup>2</sup>	SLHS REFERENCE LAB	
PROTEIN TOTAL	7.8	6.3 - 8.2 g/dL	SLHS REFERENCE LAB	
ALBUMIN	4.4	3.5 - 5.0 g/dL	SLHS REFERENCE LAB	
TOTAL BILIRUBIN	0.5	0.2 - 1.3 mg/dL	SLHS REFERENCE LAB	
ALK PHOS	76	38 - 126 U/L	SLHS REFERENCE LAB	
AST(SGOT)	22	15 - 46 U/L	SLHS REFERENCE LAB	
ALT(SGPT)	17	<35 U/L	SLHS REFERENCE LAB	

### Specimen

Blood - Entire blood vessel (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	
SLHS REFERENCE LAB	3176 S. DENVER WAY	BOISE, ID 83705, USA	

### XR ANKLE 3+ VW (XR ANKLE 3 OR MORE VW LEFT) - Final result (12/12/2018 9:21 AM MST)

#### Specimen

#### Impressions

Unchanged alignment and interval progression towards healing of the trimalleolar ankle fracture. Hardware is intact.

#### Performed At

POWERSCRIBE PACS  
ASOBGYN

Narrative

Performed At  
POWERSCRIBE PACS  
ASOBGYN

HISTORY: Post-operative state.

COMPARISON: November 12 and October 18, 2018

TECHNIQUE: Left ankle, 3 views.

FINDINGS: Unchanged alignment of the distal fibula fracture. Lateral fixation plate and cortical screws are intact. The fracture is slightly less conspicuous suggesting callus formation. Unchanged alignment of the medial malleolus fracture with intact fixation screw. Increasing callus formation at the medial malleolus fracture. Unchanged alignment of the posterior malleolus fracture with callus formation. Syndesmotic graft noted. Ankle mortise is congruent. Talar dome is intact. Disuse osteopenia of the ankle and foot.

Procedure Note

**Edi, Rad Results - 12/12/2018 9:59 AM MST**

Formatting of this note might be different from the original.

HISTORY: Post-operative state.

COMPARISON: November 12 and October 18, 2018

TECHNIQUE: Left ankle, 3 views.

FINDINGS: Unchanged alignment of the distal fibula fracture. Lateral fixation plate and cortical screws are intact. The fracture is slightly less conspicuous suggesting callus formation. Unchanged alignment of the medial malleolus fracture with intact fixation screw. Increasing callus formation at the medial malleolus fracture. Unchanged alignment of the posterior malleolus fracture with callus formation. Syndesmotic graft noted. Ankle mortise is congruent. Talar dome is intact. Disuse osteopenia of the ankle and foot.

IMPRESSION:

Unchanged alignment and interval progression towards healing of the trimalleolar ankle fracture. Hardware is intact.

Performing Organization

Address

City/State/ZIP Code

Phone Number

POWERSCRIBE PACS ASOBGYN

**XR ANKLE 3+ VW (XR ANKLE 3 OR MORE VW LEFT) - Final result (11/12/2018 7:55 AM MST)**

Specimen

Impressions

Unchanged alignment and interval progression towards healing of the trimalleolar ankle fracture. Hardware is intact.

Performed At

POWERSCRIBE PACS  
ASOBGYN

Narrative

Performed At

HISTORY: Post-operative state.

POWERSCRIBE PACS  
ASOBGYN

COMPARISON: October 18; September 24, 2018

TECHNIQUE: Left ankle, 3 views.

FINDINGS: Unchanged alignment of the oblique distal fibula fracture. Lateral fixation plate and cortical screws are intact. Unchanged alignment of the medial malleolus fracture, fixation screws intact. Unchanged alignment of the nondisplaced posterior malleolus fracture. Old fractures are less conspicuous suggesting increasing callus formation. Syndesmotic repair are noted. Ankle mortise is congruent. Joint spaces are preserved.

Procedure Note

**Edi, Rad Results - 11/12/2018 8:31 AM MST**

Formatting of this note might be different from the original.

HISTORY: Post-operative state.

COMPARISON: October 18; September 24, 2018

TECHNIQUE: Left ankle, 3 views.

**FINDINGS:** Unchanged alignment of the oblique distal fibula fracture. Lateral fixation plate and cortical screws are intact. Unchanged alignment of the medial malleolus fracture, fixation screws intact. Unchanged alignment of the nondisplaced posterior malleolus fracture. Old fractures are less conspicuous suggesting increasing callus formation. Syndesmotic repair are noted. Ankle mortise is congruent. Joint spaces are preserved.

**IMPRESSION:**

Unchanged alignment and interval progression towards healing of the trimalleolar ankle fracture. Hardware is intact.

Performing Organization	Address	City/State/ZIP Code	Phone Number
POWERSCRIBE PACS ASOBGYN			

**XR ANKLE 3+ VW (XR ANKLE 3 OR MORE VW LEFT) - Final result (10/18/2018 10:36 AM MDT)**

Specimen

Impressions

1. Open reduction internal fixation of the trimalleolar left ankle fracture with progression towards healing. The hardware is intact.

Performed At

POWERSCRIBE PACS ASOBGYN

Narrative

**HISTORY:** Post-operative state.

Performed At

POWERSCRIBE PACS ASOBGYN

**COMPARISON:** September 24, 2018.

**TECHNIQUE:** Left ankle, 3 views.

**FINDINGS:** Postoperative changes are present consistent with open reduction internal fixation of the distal fibula and medial malleolus fractures. The posterior malleolus fracture is in near-anatomic alignment. A syndesmotic button screws present.

Procedure Note

**Edi, Rad Results - 10/18/2018 11:34 AM MDT**

Formatting of this note might be different from the original.

**HISTORY:** Post-operative state.

**COMPARISON:** September 24, 2018.

**TECHNIQUE:** Left ankle, 3 views.

**FINDINGS:** Postoperative changes are present consistent with open reduction internal fixation of the distal fibula and medial malleolus fractures. The posterior malleolus fracture is in near-anatomic alignment. A syndesmotic button screws present.

**IMPRESSION:**

1. Open reduction internal fixation of the trimalleolar left ankle fracture with progression towards healing. The hardware is intact.

Performing Organization	Address	City/State/ZIP Code	Phone Number
POWERSCRIBE PACS ASOBGYN			

**FLUORO > 1 HOUR (FLUOROSCOPY GREATER THAN 1 HOUR) - Final result (09/25/2018 5:48 PM MDT)**

Specimen

Narrative

This study was not interpreted by a St. Luke's radiologist.

Performed At

IMAGING

Please see the note from the performing clinician.

**Performing Clinician:** NEARY, KAITLIN C  
**Exam Date:** 09/25/2018 1748

Performing Organization	Address	City/State/ZIP Code	Phone Number
IMAGING			

## CBC (PACKAGE) - Final result (09/24/2018 2:38 PM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
WBC COUNT	6.86	3.80 - 11.00 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	
RBC COUNT	4.92	3.50 - 5.50 10 <sup>6</sup> /uL	SLHS REFERENCE LAB	
HEMOGLOBIN	14.6	11.2 - 15.7 g/dL	SLHS REFERENCE LAB	
HEMATOCRIT	43.8	33.0 - 48.0 %	SLHS REFERENCE LAB	
MCV	89.0	79.0 - 101.0 fL	SLHS REFERENCE LAB	
MCH	29.7	25.0 - 35.0 pg	SLHS REFERENCE LAB	
MCHC	33.3	31.0 - 37.0 g/dL	SLHS REFERENCE LAB	
RDW-CV	13.1	11.0 - 16.0 %	SLHS REFERENCE LAB	
PLATELET COUNT	245	150 - 420 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	
MPV	10.6	9.4 - 12.4 fL	SLHS REFERENCE LAB	
NEUTROPHIL #	5.13	1.90 - 8.00 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	
NRBC %	0	0 - 0 %	SLHS REFERENCE LAB	
NRBC #	<0.01	0.00 - 0.12 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	
NEUTROPHIL %	74.7	40.0 - 76.0 %	SLHS REFERENCE LAB	
IMMATURE GRANULOCYTES %	0.3	0.0 - 1.0 %	SLHS REFERENCE LAB	
LYMPHOCYTE %	<b>13.7 (L)</b>	20.0 - 44.0 %	SLHS REFERENCE LAB	
MONOCYTE %	9.2	5.0 - 13.0 %	SLHS REFERENCE LAB	
EOSINOPHIL %	1.5	0.0 - 6.0 %	SLHS REFERENCE LAB	
BASOPHIL %	0.6	0.0 - 2.0 %	SLHS REFERENCE LAB	
NEUTROPHIL #	5.13	1.90 - 8.00 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	
IMMATURE GRANULOCYTES #	<0.03	0.00 - 0.04 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	
LYMPHOCYTE #	<b>0.94 (L)</b>	1.40 - 4.80 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	
MONOCYTE #	0.63	0.10 - 0.80 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	
EOSINOPHIL #	0.10	0.00 - 0.50 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	
BASOPHIL #	0.04	0.00 - 1.00 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	

Specimen

Blood - Entire blood vessel (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	
SLHS REFERENCE LAB	3176 S. DENVER WAY	BOISE, ID 83705, USA	

#### MRSA AND SA SCREEN BY PCR (MRSA AND MSSA SCREEN BY PCR) - Final result (09/24/2018 2:38 PM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
MRSA SCREEN BY PCR	Negative	Negative	SLHS REFERENCE LAB	
S. AUREUS SCREEN BY PCR	<b>Positive (A)</b>	Negative	SLHS REFERENCE LAB	

#### Specimen

Upper Resp/Eye/Ear - Both anterior nares (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	
SLHS REFERENCE LAB	3176 S. DENVER WAY	BOISE, ID 83705, USA	

#### HEMOGLOBIN A1C (GLYCOHEMOGLOBIN A1C (INCLUDING EAG)) - Final result (09/24/2018 2:38 PM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
GLYCOHEMOGLOBIN A1C	5.1	4.0 - 6.0 %	SLHS REFERENCE LAB	

Comment:

Non-Diabetic 4.0-  
6.0%  
Diagnostic of Diabetes  
>=6.5%  
Controlled Diabetic  
<7.0%

The reference range is  
standardized in accordance with  
the National Glycohemoglobin  
Standardization program.

EST. AVERAGE GLUCOSE	99.7	SLHS REFERENCE LAB
	Comment:	

The American Diabetic Association (ADA) recommends reporting of calculated estimated average glucose (eAG) along with Hemoglobin A1c values. Calculated estimated average glucose converts Hgb A1c values into the same units as personal blood glucose meters, facilitating easy interpretation.

#### Specimen

Blood - Entire blood vessel (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	

## COMPREHENSIVE METABOLIC PANEL (COMPREHENSIVE METABOLIC) - Final result (09/24/2018 2:38 PM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
SODIUM	141	135 - 144 mmol/L	SLHS REFERENCE LAB	
POTASSIUM	4.9	3.5 - 5.5 mmol/L	SLHS REFERENCE LAB	
CHLORIDE	106	98 - 107 mmol/L	SLHS REFERENCE LAB	
TOTAL CO2	26	22 - 32 mmol/L	SLHS REFERENCE LAB	
ANION GAP	9	7 - 15 mmol/L	SLHS REFERENCE LAB	
GLUCOSE	<b>112 (H)</b>	60 - 100 mg/dL	SLHS REFERENCE LAB	
CALCIUM	9.7	8.4 - 10.6 mg/dL	SLHS REFERENCE LAB	
BUN	<b>27 (H)</b>	7 - 17 mg/dL	SLHS REFERENCE LAB	
CREATININE	0.82	0.52 - 1.04 mg/dL	SLHS REFERENCE LAB	
GFR IF AFRICAN AMERICAN	>60	>=60 ml/min/1.73m <sup>2</sup>	SLHS REFERENCE LAB	
GFR	>60	>=60 ml/min/1.73m <sup>2</sup>	SLHS REFERENCE LAB	
PROTEIN TOTAL	7.5	6.3 - 8.2 g/dL	SLHS REFERENCE LAB	
ALBUMIN	4.3	3.5 - 5.0 g/dL	SLHS REFERENCE LAB	
TOTAL BILIRUBIN	0.6	0.2 - 1.3 mg/dL	SLHS REFERENCE LAB	
ALK PHOS	69	38 - 126 U/L	SLHS REFERENCE LAB	
AST(SGOT)	32	15 - 46 U/L	SLHS REFERENCE LAB	
ALT(SGPT)	19	<35 U/L	SLHS REFERENCE LAB	

## Specimen

Blood - Entire blood vessel (body structure)

## Narrative

PLEASE NOTE THAT STARTING MARCH 6, 2018, THE REFERENCE RANGE OF THE ALT TEST HAS CHANGED.

## Performed At

SLHS REFERENCE LAB

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	
SLHS REFERENCE LAB	3176 S. DENVER WAY	BOISE, ID 83705, USA	

## XR ANKLE 3+ VW (XR ANKLE 3 OR MORE VW LEFT) - Final result (09/24/2018 1:18 PM MDT)

## Specimen

## Impressions

1. Interval improvement in alignment of the distal fibula fracture.
2. Unchanged alignment of the medial and posterior malleolus fractures.
3. Subtle widening of the medial ankle clear space which could represent medial

## Performed At

POWERSCRIBE PACS  
ASOBGYN

Ligamentous injury.

Narrative

HISTORY: Injury of left ankle, initial encounter.

Performed At

POWERSCRIBE PACS  
ASOBGYN

COMPARISON: Left ankle radiographs September 18, 2018. Left ankle CT September 21, 2018

TECHNIQUE: Left ankle, 3 views.

FINDINGS: Decreased posterior displacement of the distal fibula fracture when compared with prior exam. The medial malleolus fracture remains nondisplaced. Posterior malleolus fracture is grossly unchanged in alignment. No significant callus formation at the fractures. No new fractures. There is subtle, asymmetric widening of the medial ankle clear space. No new fractures.

Procedure Note

**Edi, Rad Results - 09/24/2018 2:27 PM MDT**

Formatting of this note might be different from the original.

HISTORY: Injury of left ankle, initial encounter.

COMPARISON: Left ankle radiographs September 18, 2018. Left ankle CT September 21, 2018

TECHNIQUE: Left ankle, 3 views.

FINDINGS: Decreased posterior displacement of the distal fibula fracture when compared with prior exam. The medial malleolus fracture remains nondisplaced. Posterior malleolus fracture is grossly unchanged in alignment. No significant callus formation at the fractures. No new fractures. There is subtle, asymmetric widening of the medial ankle clear space. No new fractures.

IMPRESSION:

1. Interval improvement in alignment of the distal fibula fracture.
2. Unchanged alignment of the medial and posterior malleolus fractures.
3. Subtle widening of the medial ankle clear space which could represent medial ligamentous injury.

Performing Organization

Address

City/State/ZIP Code

Phone Number

POWERSCRIBE PACS ASOBGYN

**CT ANKLE LEFT WO CONTRAST - Final result (09/21/2018 1:11 PM MDT)**

Specimen

Impressions

1. Trimalleolar ankle fracture as detailed above.
2. Mildly displaced and rotated, subcentimeter fracture at the anterolateral aspect of the tibial plafond.
3. The tibialis posterior and flexor digitorum longus tendons closely approximate the posterior malleolus fracture without frank entrapment.

Performed At

POWERSCRIBE PACS  
ASOBGYN

Narrative

HISTORY: Closed trimalleolar fracture of left ankle, initial encounter

Performed At

POWERSCRIBE PACS  
ASOBGYN

COMPARISON: Left ankle radiographs September 18, 2018

TECHNIQUE: Helical CT imaging was performed through the left ankle at a scan width of 2-mm. Coronal and sagittal reformats were created. DICOM format image data have been securely sent to the Idaho Health Data Exchange (IHDE) and are available to nonaffiliated external healthcare facilities or entities on a secure, media free, reciprocally searchable basis with patient authorization for at least 12-months following the study. For more information visit <http://www.idahohde.org>

FINDINGS:

Osseous: Negative for dislocation. There is a comminuted, oblique fracture of the distal fibula (Weber B) with up to 5 mm posterior displacement of the distal fracture fragment. There is a comminuted fracture of the posterior malleolus with up to 4 mm posterior displacement of the distal fracture fragment. There is up to 4 mm depression at the posterior articular surface medially (series 5, image 38). The posterior malleolus fracture extends into the posterior aspect of the medial malleolus (series 7,

image 71 and series 5, image 42). There is up to 2 mm distraction along this fracture (series 3, image 43).

There is a fracture at the anterolateral aspect of the tibial plafond and with fracture fragment measuring up to 9 x 8 x 6 mm, displaced by up to 4 mm. This fracture fragment appears to be rotated approximately 90 degrees (series 7, image 71 and series 3, image 30). No additional fractures appreciated.

Unfused accessory navicular noted. Tiny cysts line the synchondrosis.

**Soft tissue/muscles:** The medial flexor or, extensor or, peroneal, and Achilles tendons are limited in assessment but normal in contour. The tibialis posterior and flexor digitorum longus tendons closely approximate the medial margin of the posterior malleolus fracture without frank entrapment (series 2, image 66). There is moderate subcutaneous edema/hematoma at the level of the ankle.

#### Procedure Note

##### **Edi, Rad Results - 09/21/2018 1:49 PM MDT**

Formatting of this note might be different from the original.

**HISTORY:** Closed trimalleolar fracture of left ankle, initial encounter

**COMPARISON:** Left ankle radiographs September 18, 2018

**TECHNIQUE:** Helical CT imaging was performed through the left ankle at a scan width of 2-mm. Coronal and sagittal reformats were created. DICOM format image data have been securely sent to the Idaho Health Data Exchange (IHDE) and are available to nonaffiliated external healthcare facilities or entities on a secure, media free, reciprocally searchable basis with patient authorization for at least 12-months following the study. For more information visit <http://www.idahoehde.org>

#### FINDINGS:

**Osseous:** Negative for dislocation. There is a comminuted, oblique fracture of the distal fibula (Weber B) with up to 5 mm posterior displacement of the distal fracture fragment. There is a comminuted fracture of the posterior malleolus with up to 4 mm posterior displacement of the distal fracture fragment. There is up to 4 mm depression at the posterior articular surface medially (series 5, image 38). The posterior malleolus fracture extends into the posterior aspect of the medial malleolus (series 7, image 71 and series 5, image 42). There is up to 2 mm distraction along this fracture (series 3, image 43).

There is a fracture at the anterolateral aspect of the tibial plafond and with fracture fragment measuring up to 9 x 8 x 6 mm, displaced by up to 4 mm. This fracture fragment appears to be rotated approximately 90 degrees (series 7, image 71 and series 3, image 30). No additional fractures appreciated.

Unfused accessory navicular noted. Tiny cysts line the synchondrosis.

**Soft tissue/muscles:** The medial flexor or, extensor or, peroneal, and Achilles tendons are limited in assessment but normal in contour. The tibialis posterior and flexor digitorum longus tendons closely approximate the medial margin of the posterior malleolus fracture without frank entrapment (series 2, image 66). There is moderate subcutaneous edema/hematoma at the level of the ankle.

#### IMPRESSION:

1. Trimalleolar ankle fracture as detailed above.
2. Mildly displaced and rotated, subcentimeter fracture at the anterolateral aspect of the tibial plafond.
3. The tibialis posterior and flexor digitorum longus tendons closely approximate the posterior malleolus fracture without frank entrapment.

Performing Organization	Address	City/State/ZIP Code	Phone Number
POWERSCRIBE PACS ASOBGYN			

#### **XR ANKLE 3+ VW (XR ANKLE 3 OR MORE VW LEFT) - Final result (09/18/2018 6:51 PM MDT)**

Specimen

Impressions	Performed At
Trimalleolar fracture as described.	POWERSCRIBE PACS ASOBGYN

Narrative	Performed At
HISTORY: Pain.	POWERSCRIBE PACS ASOBGYN

COMPARISON: None.

TECHNIQUE: Left ankle, 3 views.

FINDINGS: There is an oblique fracture through the distal fibular diaphysis. Minimally displaced medial malleolus fracture. Mildly displaced posterior malleolus fracture. Circumferential soft tissue edema.

#### Procedure Note

##### **Edi, Rad Results - 09/18/2018 7:12 PM MDT**

Formatting of this note might be different from the original.

HISTORY: Pain.

COMPARISON: None.

TECHNIQUE: Left ankle, 3 views.

FINDINGS: There is an oblique fracture through the distal fibular diaphysis. Minimally displaced medial malleolus fracture. Mildly displaced posterior malleolus fracture. Circumferential soft tissue edema.

#### IMPRESSION:

Trimalleolar fracture as described.

Performing Organization	Address	City/State/ZIP Code	Phone Number
POWERSCRIBE PACS ASOBGYN			

#### CBC (PACKAGE) - Final result (01/22/2018 10:58 AM MST)

Component	Value	Ref Range	Performed At	Pathologist Signature
WBC COUNT	6.19	3.80 - 11.00 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	
RBC COUNT	5.10	3.50 - 5.50 10 <sup>6</sup> /uL	SLHS REFERENCE LAB	
HEMOGLOBIN	15.3	11.2 - 15.7 g/dL	SLHS REFERENCE LAB	
HEMATOCRIT	45.8	33.0 - 48.0 %	SLHS REFERENCE LAB	
MCV	89.8	79.0 - 101.0 fL	SLHS REFERENCE LAB	
MCH	30.0	25.0 - 35.0 pg	SLHS REFERENCE LAB	
MCHC	33.4	31.0 - 37.0 g/dL	SLHS REFERENCE LAB	
RDW-CV	13.0	11.0 - 16.0 %	SLHS REFERENCE LAB	
PLATELET COUNT	221	150 - 420 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	
MPV	10.0	9.4 - 12.4 fL	SLHS REFERENCE LAB	
NEUTROPHIL #	3.76	1.90 - 8.00 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	
NRBC %	0	0 - 0 %	SLHS REFERENCE LAB	
NRBC #	<0.01	0.00 - 0.12 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	
NEUTROPHIL %	60.7	40.0 - 76.0 %	SLHS REFERENCE LAB	
IMMATURE GRANULOCYTES %	0.3	0.0 - 1.0 %	SLHS REFERENCE LAB	
LYMPHOCYTE %	24.9	20.0 - 44.0 %	SLHS REFERENCE LAB	

MONOCYTE %	10.2	5.0 - 13.0 %	SLHS REFERENCE LAB
EOSINOPHIL %	3.1	0.0 - 6.0 %	SLHS REFERENCE LAB
BASOPHIL %	0.8	0.0 - 2.0 %	SLHS REFERENCE LAB
NEUTROPHIL #	3.76	1.90 - 8.00 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
IMMATURE GRANULOCYTES #	<0.03	0.00 - 0.04 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
LYMPHOCYTE #	1.54	1.40 - 4.80 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
MONOCYTE #	0.63	0.10 - 0.80 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
EOSINOPHIL #	0.19	0.00 - 0.50 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
BASOPHIL #	0.05	0.00 - 1.00 10 <sup>3</sup> /uL	SLHS REFERENCE LAB

Specimen

Blood - Entire blood vessel (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	
SLHS REFERENCE LAB	3176 S. DENVER WAY	BOISE, ID 83705, USA	

TSH (TSH, 3RD GEN) - Final result (01/22/2018 10:58 AM MST)

Component	Value	Ref Range	Performed At	Pathologist Signature
TSH, 3RD GEN	3.12	0.47 - 4.68 mIU/L	SLHS REFERENCE LAB	

Specimen

Blood - Entire blood vessel (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	
SLHS REFERENCE LAB	3176 S. DENVER WAY	BOISE, ID 83705, USA	

OUTSIDE IMAGES BREAST MG - Final result (03/28/2016 12:00 AM MDT)

Specimen

Narrative

These images were uploaded from an outside source and an interpretation was not performed by a St. Luke's radiologist.

Performed At

IMAGING

Performing Organization	Address	City/State/ZIP Code	Phone Number
IMAGING			

OUTSIDE IMAGES BREAST MG - Final result (02/03/2014 12:00 AM MST)

Specimen

Narrative

These images were uploaded from an outside source and an interpretation was not performed by a St. Luke's radiologist.

Performed At

IMAGING

Performing Organization	Address	City/State/ZIP Code	Phone Number
IMAGING			

**OUTSIDE IMAGES BREAST MG - Final result (09/21/2012 12:00 AM MDT)**  
Specimen

Narrative	Performed At		
These images were uploaded from an outside source and an interpretation was not performed by a St. Luke's radiologist.	IMAGING		
Performing Organization	Address	City/State/ZIP Code	Phone Number
IMAGING			

### OUTSIDE IMAGES BREAST MG - Final result (12/17/2009 12:00 AM MST)

Narrative	Performed At		
These images were uploaded from an outside source and an interpretation was not performed by a St. Luke's radiologist.	IMAGING		
Performing Organization	Address	City/State/ZIP Code	Phone Number
IMAGING			

## Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

## Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712	<b>MD Lisa M. Parrillo, MD</b> (Physician (Non Attending)) 208-639-4900 (Work) 208-639-4901 (Fax) 2855 E Magic View Dr Meridian, ID 83642 Urology	Sep. 18, 1956 - Jul. 14, 2021
Custodian Organization		
<b>St. Luke's Health System</b> Boise, ID 83712		

If you take your Lucy record on a thumb drive to a different doctor, he or she might be able to use his computer to read the file electronically. Your downloaded, machine-readable Personal Health Summary document is in a format called "CDA." If your doctor has a computer that understands CDA, your information is a folder on your thumb drive called **MachineReadable\_XDMFormat**. You might need to enter a password before your doctor can use this file.



# Mary Sue Lark

Continuity of Care Document, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Encounters - from 06/01/2017 to 07/14/2021

Date	Type	Specialty	Care Team
06/01/2021	Hospital Encounter	Radiology	Laky, Devin M., MD
04/09/2021	Immunization	Internal Medicine	McGeorge, Laura A., MD
03/19/2021	Immunization	Internal Medicine	McGeorge, Laura A., MD
03/04/2021	Office Visit	Family Medicine	Laky, Devin M., MD Landry, Jennifer M., PA-C
01/15/2021	Office Visit	Family Medicine	Laky, Devin M., MD Landry, Jennifer M., PA-C
12/16/2020	Office Visit	Family Medicine	Laky, Devin M., MD
11/16/2020	Office Visit	Family Medicine	Laky, Devin M., MD
09/29/2020	Office Visit	Family Medicine	Laky, Devin M., MD
05/15/2020	Office Visit	Family Medicine	Laky, Devin M., MD
03/02/2020	Travel		
03/02/2020	Office Visit	Family Medicine	Laky, Devin M., MD
01/21/2020	Hospital Encounter	Urgent Care	Borst, Alicia R., PA-C
07/31/2019	Office Visit	Family Medicine	Laky, Devin M., MD
12/12/2018	Hospital Encounter	Radiology	Neary, Kaitlin C., MD
12/12/2018	Office Visit	Orthopedic Surgery	Neary, Kaitlin C., MD
11/12/2018	Hospital Encounter	Radiology	Neary, Kaitlin C., MD
11/12/2018	Office Visit	Orthopedic Surgery	Neary, Kaitlin C., MD
10/18/2018	Hospital Encounter	Radiology	Neary, Kaitlin C., MD
10/18/2018	Office Visit	Orthopedic Surgery	Neary, Kaitlin C., MD
10/04/2018	Office Visit	Orthopedic Surgery	Neary, Kaitlin C., MD
09/25/2018 - 09/26/2018	Emergency	Emergency Medicine	Kartel, Douglas S., MD
09/25/2018	Anesthesia Event	Orthopedic Surgery	Bailey, Jeanne S., MD
09/25/2018	Surgery: OPEN REDUCTION INTERNAL FIXATION ANKLE	Orthopedic Surgery	Neary, Kaitlin C., MD
09/25/2018	Hospital Encounter	Orthopedic Surgery	Neary, Kaitlin C., MD
09/24/2018	Hospital Encounter	Radiology	Neary, Kaitlin C., MD
09/24/2018	Office Visit	Orthopedic Surgery	Neary, Kaitlin C., MD
09/21/2018	Hospital Encounter	Radiology	Kemp, Travis J., MD
09/18/2018	Emergency	Emergency Medicine	Warner, Tyson H., PA-C
01/22/2018	Office Visit	Family Medicine	Laky, Devin M., MD

## Allergies - from 06/01/2017 to 07/14/2021

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - from 06/01/2017 to 07/14/2021

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
escitalopram (LEXAPRO) 10 MG tablet	Take 10 mg by mouth Daily.		0	07/31/2020		Active
cyclobenzaprine (FLEXERIL) 5 MG tablet	Take 1 tablet (5 mg total) by mouth 3 (three) times daily as needed for Muscle spasms.	15 tablet	0	01/15/2021		Active
lisinopriL (PRINIVIL,ZESTRIL) 20 MG tablet	TAKE 1 TABLET BY MOUTH EVERY NIGHT	90 tablet	1	02/10/2021		Active
estradiol (ESTRACE) 0.01 % (0.1 mg/gram) vaginal cream	apply 1g vaginally three times a week	42.5 g	0	03/16/2021		Active
sucralfate (CARAFATE) 1 gram tablet	TAKE 1 TABLET BY MOUTH 4 TIMES DAILY FOR 14 DAYS	56 tablet	0	04/09/2021		Active
atorvaSTATin (LIPITOR) 10 MG tablet	TAKE ONE TABLET BY MOUTH ONE TIME DAILY	90 tablet	3	04/13/2021		Active
levothyroxine (SYNTHROID) 50 MCG tablet	TAKE 1 TABLET (50 MCG TOTAL) BY MOUTH EVERY DAY	90 tablet	2	06/02/2021		Active
omeprazole (PRILOSEC) 40 MG capsule	Take 1 capsule (40 mg total) by mouth Daily.	90 capsule	0	06/25/2021	06/25/2022	Active
levothyroxine (SYNTHROID) 25 MCG tablet	Take 25 mcg by mouth Every morning before breakfast.		0		01/22/2018	Discontinued (Reorder)
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019	Discontinued (Patient stopped taking)
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019	Expired
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.		0	01/22/2018	04/09/2018	Discontinued (Reorder)
hydroOXYzine HCl (ATARAX) 25 MG tablet	Take 1 tablet (25 mg total) by mouth nightly as needed for Other (insomnia).	30 tablet	0	01/22/2018	11/11/2019	Discontinued (Reorder)
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.	90 tablet	2	04/09/2018	12/03/2018	Discontinued (Reorder)
HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	10 tablet	0	09/18/2018	09/28/2018	Expired
cephalexin (KEFLEX) 500 MG capsule	Take 1 capsule (500 mg total) by mouth 4 (four) times daily for 3 days.	12 capsule	0	09/24/2018	09/27/2018	Expired
hydrOXYzine (VISTARIL) 50 MG capsule	Take 1 capsule (50 mg total) by mouth 3 (three) times daily as needed for Itching or Other (nausea).	30 capsule	0	09/24/2018	10/04/2018	Expired
oxyCODONE (ROXICODONE) 5 MG immediate release tablet	Take 1-2 tablets (5-10 mg total) by mouth every 4 (four) hours as needed for severe pain.	60 tablet	0	09/24/2018	09/25/2018	Discontinued (Stop Taking at Discharge)
traMADol (ULTRAM) 50 mg tablet	Take 1 tablet (50 mg total) by mouth every 6 (six) hours as needed for Pain.	30 tablet	0	09/24/2018	10/04/2018	Discontinued (Reorder)
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1-2 tablets by mouth every 4 (four) hours as needed for Pain.	60 tablet	0	09/25/2018	10/04/2018	Discontinued (Reorder)
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	30 tablet	0	10/04/2018	10/11/2018	Discontinued (Reorder)

traMADol (ULTRAM) 50 mg tablet	Take 1 tablet (50 mg total) by mouth every 6 (six) hours as needed for Pain.	30 tablet	0	10/04/2018	10/14/2018	Expired
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	40 tablet	0	10/11/2018	07/31/2019	Discontinued (Patient stopped taking)
estradiol 10 mcg Tab	Place 10 mcg vaginally 2 (two) times a week.		0	05/31/2018	03/02/2020	Discontinued (Reorder)
nitrofurantoin, macrocrystal-monohydrate, (MACROBID) 100 MG capsule	TK 1 C PO Q 12 H WF FOR 7 DAYS		0	08/08/2018	07/31/2019	Discontinued (Patient stopped taking)
terbinafine HCl (LAMISIL) 250 mg tablet	TK 1 T PO QD		2	09/29/2018	07/31/2019	Discontinued (Patient stopped taking)
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Daily. Appointment due for lab and refill.	90 tablet	0	12/04/2018	02/21/2019	Discontinued (Reorder)
levothyroxine (SYNTHROID) 50 MCG tablet	TAKE 1 TABLET BY MOUTH EVERY DAY.	30 tablet	0	02/22/2019	04/02/2019	Discontinued (Reorder)
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Daily. Due for labs and annual visit for refill.	90 tablet	0	04/02/2019	06/25/2019	Discontinued (Reorder)
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Daily.	90 tablet	3	06/26/2019	03/02/2020	Discontinued (Reorder)
varicella-zoster gE-AS01B, PF, (SHINGRIX) 50 mcg/0.5 mL SusR injection	Inject 0.5 mLs into the muscle once for 1 dose. Repeat dose in 2-6 months.	0.5 mL	0	07/31/2019	07/31/2019	Expired
hydrOXYzine HCl (ATARAX) 25 MG tablet	Take 1 tablet (25 mg total) by mouth nightly as needed for Other (insomnia).	30 tablet	0	11/11/2019	11/21/2019	Expired
nitrofurantoin, macrocrystal-monohydrate, (MACROBID) 100 MG capsule	Take 1 capsule (100 mg total) by mouth 2 (two) times daily for 7 days.	14 capsule	0	01/21/2020	01/28/2020	Expired
phenazopyridine (PYRIDIUM) 200 MG tablet	Take 1 tablet (200 mg total) by mouth 3 (three) times daily as needed for Pain.	10 tablet	0	01/21/2020	12/16/2020	Discontinued (Patient stopped taking)
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Daily.	90 tablet	1	03/02/2020	08/31/2020	Discontinued
amoxicillin-clavulanate (AUGMENTIN) 875-125 mg per tablet	Take 1 tablet by mouth 2 (two) times daily for 7 days.	14 tablet	0	03/02/2020	03/09/2020	Expired
benzonatate 100 MG capsule	Take 1-2 capsules (100-200 mg total) by mouth 3 (three) times daily as needed for Cough.	20 capsule	0	03/02/2020	03/22/2020	Expired
progesterone micronized (PROMETRIUM) 200 MG capsule	Take 1 capsule (200 mg total) by mouth Daily.	90 capsule	1	03/02/2020	05/15/2020	Discontinued (Therapy completed)
estradiol 10 mcg Tab	Place 10 mcg vaginally 2 (two) times a week.	24 tablet	1	03/02/2020	05/15/2020	Discontinued (Therapy completed)
estradiol (ESTRACE) 0.01 % (0.1 mg/gram) vaginal cream	Apply intravaginally 2 grams every day for 2 weeks, then reduce to 3 days per week.	42.5 each	0	05/15/2020	06/04/2020	Discontinued
estradiol (ESTRACE) 0.01 % (0.1 mg/gram) vaginal cream	Place 1 g vaginally 3 (three) times a week. Apply intravaginally 2 grams every	42.5 g	0	06/05/2020	06/04/2020	Discontinued (Reorder)

	day for 2 weeks, then reduce to 3 days per week.					
estradiol (ESTRACE) 0.01 % (0.1 mg/gram) vaginal cream	Place 1 g vaginally 3 (three) times a week.	42.5 g	0	06/05/2020	06/29/2020	Discontinued (Reorder)
estradiol (ESTRACE) 0.01 % (0.1 mg/gram) vaginal cream	Place 1 g vaginally 3 (three) times a week.	42.5 g	1	06/29/2020	03/15/2021	Discontinued
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Daily.	90 tablet	2	08/31/2020	06/02/2021	Discontinued
sulfamethoxazole-trimethoprim (BACTRIM DS) 800-160 mg per tablet	Take 1 tablet by mouth 2 (two) times daily for 3 days.	6 tablet	0	09/29/2020	10/02/2020	Expired
lisinopril (PRINIVIL,ZESTRIL) 5 MG tablet	Take 1 tablet (5 mg total) by mouth nightly for 7 days, THEN 2 tablets (10 mg total) nightly for 28 days.	63 tablet	0	10/16/2020	11/16/2020	Discontinued (Reorder)
atorvastatin (LIPITOR) 10 MG tablet	Take half tab 5mg orally every other day x 1 month, then 1 tab 10mg orally every other day x 1 month, then 10mg daily.	90 tablet	0	10/23/2020	01/25/2021	Discontinued
lisinopril (PRINIVIL,ZESTRIL) 20 MG tablet	Take 1 tablet (20 mg total) by mouth nightly.	90 tablet	0	11/16/2020	02/10/2021	Discontinued
naltrexone (DEPADE) 50 mg tablet	Take 50 mg by mouth Daily.		0		01/15/2021	Discontinued (Patient stopped taking)
atorvastatin (LIPITOR) 10 MG tablet	Take 1 tablet (10 mg total) by mouth Daily.	90 tablet	0	01/25/2021	04/13/2021	Discontinued
sucralfate (CARAFATE) 1 gram tablet	Take 1 tablet (1 g total) by mouth 4 (four) times daily for 14 days.	56 tablet	0	03/04/2021	03/30/2021	Discontinued (Reorder)
omeprazole (PRILOSEC) 40 MG capsule	Take 1 capsule (40 mg total) by mouth Daily.	90 capsule	0	03/18/2021	06/16/2021	Expired
sucralfate (CARAFATE) 1 gram tablet	Take 1 tablet (1 g total) by mouth 4 (four) times daily for 14 days.	56 tablet	0	03/30/2021	04/09/2021	Discontinued

## Active Problems - from 06/01/2017 to 07/14/2021

Problem	Noted Date
Essential hypertension	10/02/2020
Impaired fasting blood sugar	06/19/2020
Colon cancer screening declined	08/02/2019
Atrophic vaginitis	07/31/2019
Excessive drinking of alcohol	07/31/2019
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - from 06/01/2017 to 07/14/2021

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - from 06/01/2017 to 07/14/2021

Name	Administration Dates	Next Due
COVID-19 (Pfizer) SARS-COV-2 mRNA MDV Vaccine	04/09/2021, 03/19/2021	
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	11/01/2019, 10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULALVAL, FLUARIX, FLUZONE QUAD)>OR=6MO PF	09/29/2020, 11/01/2019, 10/04/2019, 10/02/2017	
Tdap	07/31/2019	
Zoster (Shingrix)	02/10/2020, 10/04/2019	



## Social History - from 06/01/2017 to 07/14/2021

### Smoking Status as of 06/01/2021

Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985

Smokeless Tobacco: Never Used

### Smoking Status as of 03/04/2021

Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985

Smokeless Tobacco: Never Used

### Smoking Status as of 01/15/2021

Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985

Smokeless Tobacco: Never Used

### Smoking Status as of 12/20/2020

Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985

Smokeless Tobacco: Never Used

### Smoking Status as of 11/16/2020

Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985

Smokeless Tobacco: Never Used

### Smoking Status as of 10/04/2020

Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985

Smokeless Tobacco: Never Used

### Smoking Status as of 09/29/2020

Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985

Smokeless Tobacco: Never Used

### Smoking Status as of 05/18/2020

Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985

Smokeless Tobacco: Never Used

### Smoking Status as of 05/15/2020

Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985
Smokeless Tobacco: Never Used				
<b>Smoking Status as of 01/21/2020</b>				
Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985
Smokeless Tobacco: Never Used				
<b>Smoking Status as of 08/02/2019</b>				
Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985
Smokeless Tobacco: Never Used				
<b>Smoking Status as of 07/31/2019</b>				
Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985
Smokeless Tobacco: Never Used				
<b>Smoking Status as of 12/12/2018</b>				
Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
<b>Smoking Status as of 10/18/2018</b>				
Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
<b>Smoking Status as of 10/04/2018</b>				
Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
<b>Smoking Status as of 09/26/2018</b>				
Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
<b>Smoking Status as of 09/25/2018</b>				
Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
<b>Smoking Status as of 09/24/2018</b>				
Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
<b>Smoking Status as of 09/18/2018</b>				
Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
<b>Smoking Status as of 01/22/2018</b>				
Tobacco Use	Types	Packs/Day	Years Used	Date

Never Smoker

Smokeless Tobacco: Never Used

### Alcohol Use as of 06/01/2021

Alcohol Use	Standard Drinks/Week	Date Recorded
Yes	0 (1 standard drink = 0.6 oz pure alcohol)	
Alcohol Habits	Answer	Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week	08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked	
How often do you have six or more drinks on one occasion?	Daily or almost daily	08/02/2019
Physical Activity	Answer	Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days	08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked	
Sex Assigned at Birth	Date Recorded	
Not on file		

### Last Filed Vital Signs - from 06/01/2017 to 07/14/2021

Vital Sign	Reading	Time Taken	Comments
Blood Pressure	106/72	03/04/2021 12:21 PM MST	
Pulse	63	03/04/2021 12:21 PM MST	
Temperature	36.2 °C (97.1 °F)	03/04/2021 12:21 PM MST	
Respiratory Rate	16	01/21/2020 6:49 PM MST	
Oxygen Saturation	95%	03/04/2021 12:21 PM MST	
Inhaled Oxygen Concentration	-	-	
Weight	90.7 kg (199 lb 15.3 oz)	03/04/2021 12:21 PM MST	
Height	165.1 cm (5' 5")	03/04/2021 12:21 PM MST	
Body Mass Index	33.27	03/04/2021 12:21 PM MST	

### Plan of Treatment - from 06/01/2017 to 07/14/2021

Not on file

### Implants - from 06/01/2017 to 07/14/2021

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfi 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
<b>Screw Low Profile 2.7x14mm Locking Ss Ar- 8827l-14 - Sar-8827l-14</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2
<b>Screw Low Profile 2.7x12mm Locking Ss Ar- 8827l-12 - Sar-8827l-12</b> Implanted: Qty: 1 on 09/25/2018 by Neary,	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-12 / AR-8827L-12 / 1-092518-2

Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.

LATERAL SIDE

<b>Screw Low Profile 2.7x16mm Locking Ss Ar-8827l-16 - Sar-8827l-16</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8827L-16 / AR-8827L-16 / 1-092518-2
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Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-12 / AR-8835-12 / 1-092518-2
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Implanted: Qty: 2 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-14 / AR-8835-14 / 1-092518-2
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Implanted: Qty: 2 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

<b>Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-22 / AR-8835-22 / 1-092518-2
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Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

<b>Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-26 / AR-8835-26 / 1-092518-2
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Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

<b>Implant Knotless Syndesmosis Tightrope Xp Stainless Steel Ar-8925ss - Sar-8925ss</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8925SS / AR-8925SS / 10224713
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Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL, UHMWPE  
MEDIAL SIDE.

<b>Screw Low Profile 4x46 Cannulated Long Thread Stainless Steel Ar-8840cl-46 - Sar-8840cl-46</b>	OTHER IMPLANTS	Left: Ankle	ARTHREX INC	AR-8840CL-46 / AR-8840CL-46 / 1-092518-2
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Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
MEDIAL SIDE.

## Procedures - from 06/01/2017 to 07/14/2021

Procedure Name	Priority	Date/Time	Associated Diagnosis	Comments
ANESTHESIA PERIPHERAL BLOCK	Routine	09/25/2018 3:56 PM MDT		
ANESTHESIA PERIPHERAL BLOCK	Routine	09/25/2018 3:56 PM MDT		
ANESTHESIA PERIPHERAL BLOCK	Routine	09/25/2018 3:53 PM MDT		
OPEN REDUCTION INTERNAL FIXATION ANKLE		09/25/2018 3:07 PM MDT	Injury of left ankle, initial encounter	
SPLINT APPLICATION	Routine	09/18/2018 7:45 PM MDT		

## Results - from 06/01/2017 to 07/14/2021

### BI SCREENING MAMMOGRAM BILATERAL - Final result (06/01/2021 3:01 PM MDT)

Specimen

Impressions	Performed At
BI-RADS Category 0: Needs additional imaging evaluation. Additional imaging evaluation beginning with ultrasound then followed by diagnostic mammography, at the discretion of the interpreting radiologist, is recommended.	POWERSCRIBE PACS ASOBGYN

If additional imaging is requested based on imaging or physical findings described above, we will contact the patient to schedule follow-up imaging.

Patient information entered into a reminder system with a target due date for the next mammogram.

Narrative	Performed At
BILATERAL DIGITAL MAMMOGRAM WITH COMPUTER AIDED DETECTION	POWERSCRIBE PACS ASOBGYN

HISTORY: Screening.

PATIENT CONCERNS: None

RISK FACTORS: No family history of breast cancer.

COMPARISON: 03/28/2016, 02/03/2014, 09/21/2012

MAMMOGRAM: Interpretation is performed utilizing computer-aided detection. Standard digital Bilateral CC and MLO views were obtained. There are scattered areas of fibroglandular density.

Right breast:

No suspicious mass, suspicious calcifications or unexpected architectural distortion.

Left breast:

8 mm mass 2-3 o'clock 7 cm from the nipple

Performing Organization	Address	City/State/ZIP Code	Phone Number
POWERSCRIBE PACS ASOBGYN			

### TSH (TSH, 3RD GEN) - Final result (02/16/2021 9:11 AM MST)

Component	Value	Ref Range	Performed At	Pathologist Signature
TSH, 3RD GEN	1.65	0.47 - 4.68 uIU/mL	SLHS CORE LAB	

Specimen

Blood - Entire blood vessel (body structure)

Narrative	Performed At
Biotin supplements have shown the potential to produce negatively biased TSH values by immunoassay. If there is suspicion for patient biotin use, please re-test after cessation.	SLHS CORE LAB

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	

### HEPATIC FUNCTION PANEL - Final result (02/16/2021 9:11 AM MST)

Component	Value	Ref Range	Performed At	Pathologist Signature
PROTEIN TOTAL	7.0	6.3 - 8.2 g/dL	SLHS CORE LAB	
ALBUMIN	4.2	3.5 - 5.0 g/dL	SLHS CORE LAB	
TOTAL BILIRUBIN	0.8	0.2 - 1.3 mg/dL	SLHS CORE LAB	
DIRECT BILIRUBIN	0.3	0.0 - 0.4 mg/dL	SLHS CORE LAB	
ALK PHOS	62	38 - 126 U/L	SLHS CORE LAB	
AST(SGOT)	26	15 - 46 U/L	SLHS CORE LAB	
ALT(SGPT)	28	<35 U/L	SLHS CORE LAB	

#### Specimen

Blood - Entire blood vessel (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	

### LIPID PANEL - Final result (02/16/2021 9:11 AM MST)

Component	Value	Ref Range	Performed At	Pathologist Signature
CHOLESTEROL	147	<=200 mg/dL	SLHS CORE LAB	
	Comment: Total cholesterol risk ranges: Desirable: <200mg/dL Borderline: 200-240 mg/dL High: >240 mg/dL			
TRIGLYCERIDES	91	<=150 mg/dL	SLHS CORE LAB	
HDL CHOLESTEROL	<b>44 (L)</b>	>=60 mg/dL	SLHS CORE LAB	
	Comment: Reference Ranges: Increased Risk for CHD: <35 mg/dL Intermediate Result: 35- 60 mg/dL Decreased risk for CHD: >60 mg/dL Correlation with other lipoprotein and clinical parameters is suggested to assess overall risk for CHD.			

CHOL/HDL RATIO	3	<=5	SLHS CORE LAB
LDL CALCULATED (LIPID PANEL)	84.8	<100 mg/dL	SLHS CORE LAB
DIRECT LDL CHOLESTEROL			SLHS CORE LAB
VLDL CHOLESTEROL	18.2	0 - 40 mg/dL	SLHS CORE LAB

#### Specimen

Blood - Entire blood vessel (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	

## BASIC METABOLIC PANEL - Final result (11/16/2020 1:04 PM MST)

Component	Value	Ref Range	Performed At	Pathologist Signature
SODIUM	137	135 - 144 mmol/L	SLHS CORE LAB	
POTASSIUM	4.6	3.5 - 5.5 mmol/L	SLHS CORE LAB	
CHLORIDE	105	98 - 107 mmol/L	SLHS CORE LAB	
TOTAL CO2	23	22 - 32 mmol/L	SLHS CORE LAB	
ANION GAP	9	7 - 15 mmol/L	SLHS CORE LAB	
GLUCOSE	<b>110 (H)</b>	60 - 100 mg/dL	SLHS CORE LAB	
CALCIUM	9.3	8.4 - 10.6 mg/dL	SLHS CORE LAB	
BUN	16	7 - 17 mg/dL	SLHS CORE LAB	
CREATININE	0.69	0.52 - 1.04 mg/dL	SLHS CORE LAB	
GFR IF AFRICAN AMERICAN	>90	>=60 ml/min/1.73m <sup>2</sup>	SLHS CORE LAB	
GFR	86	>=60 ml/min/1.73m <sup>2</sup>	SLHS CORE LAB	

## Specimen

Blood - Entire blood vessel (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	

## POCT PERFORM URINE DIPSTICK (POCT URINALYSIS DIPSTICK) - Final result (09/29/2020 12:30 PM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
COLOR UA	yellow		PORTE ADA MEDICAL ASSOCIATES	
CLARITY UA	cloudy		PORTE ADA MEDICAL ASSOCIATES	
GLUCOSE UA	neg	NEG mg/dl	PORTE ADA MEDICAL ASSOCIATES	
BILIRUBIN UA	neg	NEG	PORTE ADA MEDICAL ASSOCIATES	
KETONES UA	neg	NEG	PORTE ADA MEDICAL ASSOCIATES	
SPECIFIC GRAVITY UA	1.020	1.001 - 1.035	PORTE ADA MEDICAL ASSOCIATES	
RBC UA	Trace-Intact	NEG	PORTE ADA MEDICAL ASSOCIATES	
PH UA	7.0	5 - 9	PORTE ADA MEDICAL ASSOCIATES	
PROTEIN UA	neg	NEG	PORTE ADA MEDICAL ASSOCIATES	
UROBILINOGEN UA	0.2	0 - 1 mg/dl	PORTE ADA MEDICAL ASSOCIATES	
NITRITES UA	positive	NEG	PORTE ADA MEDICAL ASSOCIATES	

LEUKOCYTES EST	2+	NEG	PORTE ADA MEDICAL ASSOCIATES
URINE SENT FOR CULTURE?	Yes		PORTE ADA MEDICAL ASSOCIATES
URINE SOURCE, POC	Clean Catch Urine		PORTE ADA MEDICAL ASSOCIATES

Specimen

Urine

Performing Organization	Address	City/State/ZIP Code	Phone Number
PORTE ADA MEDICAL ASSOCIATES	3399 E LOUISE DRIVE SUITE 100	Meridian, ID 83642-5047	208-288-2255

URINE CULTURE - Final result (09/29/2020 12:30 PM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
URINE CULTURE	<b>20,000-30,000 CFU/mL Mixed periurethral flora present (A)</b>		SLHS CORE LAB	

Specimen

Urine - Urine specimen collection, clean catch (procedure)

Narrative	Performed At
Mixed periurethral flora present. Probable contamination. Susceptibilities not indicated. Suggest repeat specimen if patient's symptoms suggest a urinary tract infection.	SLHS CORE LAB

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	

TSH (TSH, 3RD GEN) - Final result (06/19/2020 10:33 AM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
TSH, 3RD GEN	2.54	0.47 - 4.68 uIU/mL	SLHS CORE LAB	

Specimen

Blood - Entire blood vessel (body structure)

Narrative	Performed At
Biotin supplements have shown the potential to produce negatively biased TSH values by immunoassay. If there is suspicion for patient biotin use, please re-test after cessation.	SLHS CORE LAB

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	

LIPID PANEL - Final result (06/19/2020 10:33 AM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
CHOLESTEROL	<b>261 (H)</b>	<=200 mg/dL	SLHS CORE LAB	

Comment:

Total cholesterol risk ranges:

Desirable: <200mg/dL

Borderline: 200-240 mg/dL

High: >240 mg/dL

TRIGLYCERIDES	138	<=150 mg/dL	SLHS CORE LAB
HDL CHOLESTEROL	<b>47 (L)</b>	>=60 mg/dL	SLHS CORE LAB
	Comment: Reference Ranges: Increased Risk for CHD: <35 mg/dL Intermediate Result: 35- 60 mg/dL Decreased risk for CHD: >60 mg/dL Correlation with other lipoprotein and clinical parameters is suggested to assess overall risk for CHD.		
CHOL/HDL RATIO	<b>6 (H)</b>	<=5	SLHS CORE LAB
LDL CALCULATED (LIPID PANEL)	<b>186.4 (H)</b>	<100 mg/dL	SLHS CORE LAB
DIRECT LDL CHOLESTEROL			SLHS CORE LAB
VLDL CHOLESTEROL	27.6	0 - 40 mg/dL	SLHS CORE LAB

#### Specimen

Blood - Entire blood vessel (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	

#### COMPREHENSIVE METABOLIC PANEL (COMPREHENSIVE METABOLIC) - Final result (06/19/2020 10:33 AM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
SODIUM	141	135 - 144 mmol/L	SLHS CORE LAB	
POTASSIUM	4.4	3.5 - 5.5 mmol/L	SLHS CORE LAB	
CHLORIDE	<b>108 (H)</b>	98 - 107 mmol/L	SLHS CORE LAB	
TOTAL CO2	24	22 - 32 mmol/L	SLHS CORE LAB	
ANION GAP	9	7 - 15 mmol/L	SLHS CORE LAB	
GLUCOSE	<b>104 (H)</b>	60 - 100 mg/dL	SLHS CORE LAB	
CALCIUM	9.0	8.4 - 10.6 mg/dL	SLHS CORE LAB	
BUN	<b>20 (H)</b>	7 - 17 mg/dL	SLHS CORE LAB	
CREATININE	0.72	0.52 - 1.04 mg/dL	SLHS CORE LAB	
GFR IF AFRICAN AMERICAN	>90	>=60 ml/min/1.73m <sup>2</sup>	SLHS CORE LAB	
GFR	82	>=60 ml/min/1.73m <sup>2</sup>	SLHS CORE LAB	
PROTEIN TOTAL	7.4	6.3 - 8.2 g/dL	SLHS CORE LAB	
ALBUMIN	4.1	3.5 - 5.0 g/dL	SLHS CORE LAB	
TOTAL BILIRUBIN	0.6	0.2 - 1.3 mg/dL	SLHS CORE LAB	
ALK PHOS	80	38 - 126 U/L	SLHS CORE LAB	
AST(SGOT)	23	15 - 46 U/L	SLHS CORE LAB	
ALT(SGPT)	21	<35 U/L	SLHS CORE LAB	

#### Specimen

Blood - Entire blood vessel (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	

## URINE CULTURE - Final result (05/15/2020 12:12 PM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
URINE CULTURE	No Growth 16 hrs		SLHS CORE LAB	
<b>Specimen</b>				
Urine - Urine specimen collection, clean catch (procedure)				
Performing Organization	Address	City/State/ZIP Code	Phone Number	
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705		

## POCT PERFORM URINE DIPSTICK (POCT URINALYSIS DIPSTICK) - Final result (05/15/2020 11:38 AM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
COLOR UA	yellow		PORTE ADA MEDICAL ASSOCIATES	
CLARITY UA	slightly cloudy		PORTE ADA MEDICAL ASSOCIATES	
GLUCOSE UA	neg	NEG mg/dl	PORTE ADA MEDICAL ASSOCIATES	
BILIRUBIN UA	neg	NEG	PORTE ADA MEDICAL ASSOCIATES	
KETONES UA	neg	NEG	PORTE ADA MEDICAL ASSOCIATES	
SPECIFIC GRAVITY UA	1.010	1.001 - 1.035	PORTE ADA MEDICAL ASSOCIATES	
RBC UA	neg	NEG	PORTE ADA MEDICAL ASSOCIATES	
PH UA	6.0	5 - 9	PORTE ADA MEDICAL ASSOCIATES	
PROTEIN UA	neg	NEG	PORTE ADA MEDICAL ASSOCIATES	
UROBILINOGEN UA	0.2	0 - 1 mg/dl	PORTE ADA MEDICAL ASSOCIATES	
NITRITES UA	neg	NEG	PORTE ADA MEDICAL ASSOCIATES	
LEUKOCYTES EST	trace	NEG	PORTE ADA MEDICAL ASSOCIATES	
URINE SENT FOR CULTURE?	Yes		PORTE ADA MEDICAL ASSOCIATES	
URINE SOURCE, POC	Clean Catch Urine		PORTE ADA MEDICAL ASSOCIATES	

Specimen

Urine

Performing Organization	Address	City/State/ZIP Code	Phone Number
PORTE ADA MEDICAL ASSOCIATES	3399 E LOUISE DRIVE SUITE 100	Meridian, ID 83642-5047	208-288-2255

#### POCT INFLUENZA A/B - Final result (03/02/2020 12:57 PM MST)

Component	Value	Ref Range	Performed At	Pathologist Signature
RAPID INFLUENZA A AGN	Negative	Negative	PORTE ADA MEDICAL ASSOCIATES	
RAPID INFLUENZA B AGN	Negative	Negative	PORTE ADA MEDICAL ASSOCIATES	
INFLUENZA TEST LOT#	8,315,849		PORTE ADA MEDICAL ASSOCIATES	
EXPIRATION DATE	11/11/2021		PORTE ADA MEDICAL ASSOCIATES	
CONTROLS OKAY?	Yes		PORTE ADA MEDICAL ASSOCIATES	

#### Specimen

Upper Resp/Eye/Ear

Performing Organization	Address	City/State/ZIP Code	Phone Number
PORTE ADA MEDICAL ASSOCIATES	3399 E LOUISE DRIVE SUITE 100	Meridian, ID 83642-5047	208-288-2255

#### URINE CULTURE - Final result (01/21/2020 7:07 PM MST)

Component	Value	Ref Range	Performed At	Pathologist Signature
URINE CULTURE	>100,000 CFU/mL Mixed periurethral flora present (A)		SLHS REFERENCE LAB	

#### Specimen

Urine - Urine specimen collection, clean catch (procedure)

Narrative	Performed At
Mixed periurethral flora present. Probable contamination. Susceptibilities not indicated. Suggest repeat specimen if patient's symptoms suggest a urinary tract infection.	SLHS REFERENCE LAB

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	
SLHS REFERENCE LAB	3176 S. DENVER WAY	BOISE, ID 83705, USA	

#### POCT URINALYSIS AUTOMATED - Final result (01/21/2020 6:57 PM MST)

Component	Value	Ref Range	Performed At	Pathologist Signature
COLOR UA	Yellow	Yellow	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	
CLARITY UA	Cloudy (A)	Clear	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	
SPECIFIC GRAVITY	1.025	>1.002-<1.030	SLHS EMC SL	

UA			EAGLE MEDICAL PLAZA DRAW STATION
PH UA	6.0	4.5 - 8.0	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION
GLUCOSE UA	Negative	Negative	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION
PROTEIN UA	<b>2+ (A)</b>	Negative	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION
KETONES UA	Negative	Negative	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION
BILIRUBIN UA	Negative	Negative	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION
OCCULT BLOOD UA	<b>3+ (A)</b>	Negative	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION
LEUKOCYTES UA	<b>2+ (A)</b>	Negative	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION
NITRITES UA	Negative	Negative	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION

Specimen

Urine

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	3101 E STATE STREET	EAGLE, ID 83616-6232	208-473-3020

**HEMAGRAM (HEMOGRAM) - Final result (06/24/2019 10:56 AM MDT)**

Component	Value	Ref Range	Performed At	Pathologist Signature
WBC COUNT	6.27	3.80 - 11.00 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	
RBC COUNT	4.99	3.50 - 5.50 10 <sup>6</sup> /uL	SLHS REFERENCE LAB	
HEMOGLOBIN	15.6	11.2 - 15.7 g/dL	SLHS REFERENCE LAB	
HEMATOCRIT	46.4	33.0 - 48.0 %	SLHS REFERENCE LAB	
MCV	93.0	79.0 - 101.0 fL	SLHS REFERENCE LAB	
MCH	31.3	25.0 - 35.0 pg	SLHS REFERENCE LAB	
MCHC	33.6	31.0 - 37.0 g/dL	SLHS REFERENCE LAB	
RDW-CV	13.2	11.0 - 16.0 %	SLHS REFERENCE	

MPV	10.6	9.4 - 12.4 fL	LAB SLHS REFERENCE LAB
PLATELET COUNT	237	150 - 420 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
NRBC %	0	0 - 0 %	SLHS REFERENCE LAB
NRBC #	<0.01	0.00 - 0.12 10 <sup>3</sup> /uL	SLHS REFERENCE LAB

Specimen

Blood - Entire blood vessel (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	
SLHS REFERENCE LAB	3176 S. DENVER WAY	BOISE, ID 83705, USA	

TSH (TSH, 3RD GEN) - Final result (06/24/2019 10:56 AM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
TSH, 3RD GEN	2.94	0.47 - 4.68 uIU/mL	SLHS REFERENCE LAB	

Specimen

Blood - Entire blood vessel (body structure)

Narrative	Performed At
Biotin supplements have shown the potential to produce negatively biased TSH values by immunoassay. If there is suspicion for patient biotin use, please re-test after cessation.	SLHS REFERENCE LAB
Performing Organization	Address
SLHS CORE LAB	3176 S. DENVER WAY
SLHS REFERENCE LAB	3176 S. DENVER WAY
City/State/ZIP Code	Phone Number
BOISE, ID 83705	
BOISE, ID 83705, USA	

COMPREHENSIVE METABOLIC PANEL (COMPREHENSIVE METABOLIC) - Final result (06/24/2019 10:56 AM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
SODIUM	141	135 - 144 mmol/L	SLHS REFERENCE LAB	
POTASSIUM	4.9	3.5 - 5.5 mmol/L	SLHS REFERENCE LAB	
CHLORIDE	107	98 - 107 mmol/L	SLHS REFERENCE LAB	
TOTAL CO <sub>2</sub>	27	22 - 32 mmol/L	SLHS REFERENCE LAB	
ANION GAP	7	7 - 15 mmol/L	SLHS REFERENCE LAB	
GLUCOSE	<b>101 (H)</b>	60 - 100 mg/dL	SLHS REFERENCE LAB	
CALCIUM	9.5	8.4 - 10.6 mg/dL	SLHS REFERENCE LAB	
BUN	<b>18 (H)</b>	7 - 17 mg/dL	SLHS REFERENCE LAB	
CREATININE	0.73	0.52 - 1.04 mg/dL	SLHS REFERENCE LAB	
GFR IF AFRICAN AMERICAN	>90	>=60 ml/min/1.73m <sup>2</sup>	SLHS REFERENCE LAB	
GFR	81	>=60 ml/min/1.73m <sup>2</sup>	SLHS REFERENCE	

PROTEIN TOTAL	7.8	6.3 - 8.2 g/dL	LAB SLHS REFERENCE LAB
ALBUMIN	4.4	3.5 - 5.0 g/dL	SLHS REFERENCE LAB
TOTAL BILIRUBIN	0.5	0.2 - 1.3 mg/dL	SLHS REFERENCE LAB
ALK PHOS	76	38 - 126 U/L	SLHS REFERENCE LAB
AST(SGOT)	22	15 - 46 U/L	SLHS REFERENCE LAB
ALT(SGPT)	17	<35 U/L	SLHS REFERENCE LAB

#### Specimen

Blood - Entire blood vessel (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	
SLHS REFERENCE LAB	3176 S. DENVER WAY	BOISE, ID 83705, USA	

#### XR ANKLE 3+ VW (XR ANKLE 3 OR MORE VW LEFT) - Final result (12/12/2018 9:21 AM MST)

#### Specimen

#### Impressions

Unchanged alignment and interval progression towards healing of the trimalleolar ankle fracture. Hardware is intact.

Performed At

POWERSCRIBE PACS  
ASOBGYN

#### Narrative

HISTORY: Post-operative state.

Performed At

POWERSCRIBE PACS  
ASOBGYN

COMPARISON: November 12 and October 18, 2018

TECHNIQUE: Left ankle, 3 views.

FINDINGS: Unchanged alignment of the distal fibula fracture. Lateral fixation plate and cortical screws are intact. The fracture is slightly less conspicuous suggesting callus formation. Unchanged alignment of the medial malleolus fracture with intact fixation screw. Increasing callus formation at the medial malleolus fracture. Unchanged alignment of the posterior malleolus fracture with callus formation. Syndesmotic graft noted. Ankle mortise is congruent. Talar dome is intact. Disuse osteopenia of the ankle and foot.

#### Procedure Note

##### Edi, Rad Results - 12/12/2018 9:59 AM MST

Formatting of this note might be different from the original.

HISTORY: Post-operative state.

COMPARISON: November 12 and October 18, 2018

TECHNIQUE: Left ankle, 3 views.

FINDINGS: Unchanged alignment of the distal fibula fracture. Lateral fixation plate and cortical screws are intact. The fracture is slightly less conspicuous suggesting callus formation. Unchanged alignment of the medial malleolus fracture with intact fixation screw. Increasing callus formation at the medial malleolus fracture. Unchanged alignment of the posterior malleolus fracture with callus formation. Syndesmotic graft noted. Ankle mortise is congruent. Talar dome is intact. Disuse osteopenia of the ankle and foot.

#### IMPRESSION:

Unchanged alignment and interval progression towards healing of the trimalleolar ankle fracture. Hardware is intact.

Performing Organization	Address	City/State/ZIP Code	Phone Number
POWERSCRIBE PACS ASOBGYN			

## XR ANKLE 3+ VW (XR ANKLE 3 OR MORE VW LEFT) - Final result (11/12/2018 7:55 AM MST)

Specimen

Impressions	Performed At
Unchanged alignment and interval progression towards healing of the trimalleolar ankle fracture. Hardware is intact.	POWERSCRIBE PACS ASOBGYN
Narrative	Performed At
HISTORY: Post-operative state.	POWERSCRIBE PACS ASOBGYN
COMPARISON: October 18; September 24, 2018	
TECHNIQUE: Left ankle, 3 views.	
FINDINGS: Unchanged alignment of the oblique distal fibula fracture. Lateral fixation plate and cortical screws are intact. Unchanged alignment of the medial malleolus fracture, fixation screws intact. Unchanged alignment of the nondisplaced posterior malleolus fracture. Old fractures are less conspicuous suggesting increasing callus formation. Syndesmotic repair are noted. Ankle mortise is congruent. Joint spaces are preserved.	

### Procedure Note

#### **Edi, Rad Results - 11/12/2018 8:31 AM MST**

Formatting of this note might be different from the original.

HISTORY: Post-operative state.

COMPARISON: October 18; September 24, 2018

TECHNIQUE: Left ankle, 3 views.

FINDINGS: Unchanged alignment of the oblique distal fibula fracture. Lateral fixation plate and cortical screws are intact. Unchanged alignment of the medial malleolus fracture, fixation screws intact. Unchanged alignment of the nondisplaced posterior malleolus fracture. Old fractures are less conspicuous suggesting increasing callus formation. Syndesmotic repair are noted. Ankle mortise is congruent. Joint spaces are preserved.

#### IMPRESSION:

Unchanged alignment and interval progression towards healing of the trimalleolar ankle fracture. Hardware is intact.

Performing Organization	Address	City/State/ZIP Code	Phone Number
POWERSCRIBE PACS ASOBGYN			

## XR ANKLE 3+ VW (XR ANKLE 3 OR MORE VW LEFT) - Final result (10/18/2018 10:36 AM MDT)

Specimen

Impressions	Performed At
1. Open reduction internal fixation of the trimalleolar left ankle fracture with progression towards healing. The hardware is intact.	POWERSCRIBE PACS ASOBGYN
Narrative	Performed At
HISTORY: Post-operative state.	POWERSCRIBE PACS ASOBGYN
COMPARISON: September 24, 2018.	
TECHNIQUE: Left ankle, 3 views.	
FINDINGS: Postoperative changes are present consistent with open reduction internal fixation of the distal fibula and medial malleolus fractures. The posterior malleolus fracture is in near-anatomic alignment. A syndesmotic button screws present.	

## Procedure Note

**Edi, Rad Results - 10/18/2018 11:34 AM MDT**

Formatting of this note might be different from the original.

HISTORY: Post-operative state.

COMPARISON: September 24, 2018.

TECHNIQUE: Left ankle, 3 views.

FINDINGS: Postoperative changes are present consistent with open reduction internal fixation of the distal fibula and medial malleolus fractures. The posterior malleolus fracture is in near-anatomic alignment. A syndesmotic button screws present.

## IMPRESSION:

1. Open reduction internal fixation of the trimalleolar left ankle fracture with progression towards healing. The hardware is intact.

Performing Organization	Address	City/State/ZIP Code	Phone Number
POWERSCRIBE PACS ASOBGYN			

**FLUORO > 1 HOUR (FLUOROSCOPY GREATER THAN 1 HOUR) - Final result (09/25/2018 5:48 PM MDT)**

Specimen

Narrative	Performed At
This study was not interpreted by a St. Luke's radiologist.	IMAGING

Please see the note from the performing clinician.

Performing Clinician: NEARY, KAITLIN C

Exam Date: 09/25/2018 1748

Performing Organization	Address	City/State/ZIP Code	Phone Number
IMAGING			

**CBC (PACKAGE) - Final result (09/24/2018 2:38 PM MDT)**

Component	Value	Ref Range	Performed At	Pathologist Signature
WBC COUNT	6.86	3.80 - 11.00 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	
RBC COUNT	4.92	3.50 - 5.50 10 <sup>6</sup> /uL	SLHS REFERENCE LAB	
HEMOGLOBIN	14.6	11.2 - 15.7 g/dL	SLHS REFERENCE LAB	
HEMATOCRIT	43.8	33.0 - 48.0 %	SLHS REFERENCE LAB	
MCV	89.0	79.0 - 101.0 fL	SLHS REFERENCE LAB	
MCH	29.7	25.0 - 35.0 pg	SLHS REFERENCE LAB	
MCHC	33.3	31.0 - 37.0 g/dL	SLHS REFERENCE LAB	
RDW-CV	13.1	11.0 - 16.0 %	SLHS REFERENCE LAB	
PLATELET COUNT	245	150 - 420 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	
MPV	10.6	9.4 - 12.4 fL	SLHS REFERENCE LAB	
NEUTROPHIL #	5.13	1.90 - 8.00 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	
NRBC %	0	0 - 0 %	SLHS REFERENCE LAB	

NRBC #	<0.01	0.00 - 0.12 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
NEUTROPHIL %	74.7	40.0 - 76.0 %	SLHS REFERENCE LAB
IMMATURE GRANULOCYTES %	0.3	0.0 - 1.0 %	SLHS REFERENCE LAB
LYMPHOCYTE %	<b>13.7 (L)</b>	20.0 - 44.0 %	SLHS REFERENCE LAB
MONOCYTE %	9.2	5.0 - 13.0 %	SLHS REFERENCE LAB
EOSINOPHIL %	1.5	0.0 - 6.0 %	SLHS REFERENCE LAB
BASOPHIL %	0.6	0.0 - 2.0 %	SLHS REFERENCE LAB
NEUTROPHIL #	5.13	1.90 - 8.00 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
IMMATURE GRANULOCYTES #	<0.03	0.00 - 0.04 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
LYMPHOCYTE #	<b>0.94 (L)</b>	1.40 - 4.80 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
MONOCYTE #	0.63	0.10 - 0.80 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
EOSINOPHIL #	0.10	0.00 - 0.50 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
BASOPHIL #	0.04	0.00 - 1.00 10 <sup>3</sup> /uL	SLHS REFERENCE LAB

#### Specimen

Blood - Entire blood vessel (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	
SLHS REFERENCE LAB	3176 S. DENVER WAY	BOISE, ID 83705, USA	

#### MRSA AND SA SCREEN BY PCR (MRSA AND MSSA SCREEN BY PCR) - Final result (09/24/2018 2:38 PM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
MRSA SCREEN BY PCR	Negative	Negative	SLHS REFERENCE LAB	
S. AUREUS SCREEN BY PCR	<b>Positive (A)</b>	Negative	SLHS REFERENCE LAB	

#### Specimen

Upper Resp/Eye/Ear - Both anterior nares (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	
SLHS REFERENCE LAB	3176 S. DENVER WAY	BOISE, ID 83705, USA	

#### HEMOGLOBIN A1C (GLYCOHEMOGLOBIN A1C (INCLUDING EAG)) - Final result (09/24/2018 2:38 PM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
GLYCOHEMOGLOBIN A1C	5.1	4.0 - 6.0 %	SLHS REFERENCE LAB	
	Comment:			
	Non-Diabetic 6.0%	4.0-		
	Diagnostic of Diabetes =>6.5%			

Controlled Diabetic  
<7.0%

The reference range is  
standardized in accordance with  
the National Glycohemoglobin  
Standardization program.

EST. AVERAGE GLUCOSE	99.7 Comment:  The American Diabetic Association (ADA) recommends reporting of calculated estimated average glucose (eAG) along with Hemoglobin A1c values. Calculated estimated average glucose converts Hgb A1c values into the same units as personal blood glucose meters, facilitating easy interpretation.	SLHS REFERENCE LAB
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#### Specimen

Blood - Entire blood vessel (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	
SLHS REFERENCE LAB	3176 S. DENVER WAY	BOISE, ID 83705, USA	

#### COMPREHENSIVE METABOLIC PANEL (COMPREHENSIVE METABOLIC) - Final result (09/24/2018 2:38 PM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
SODIUM	141	135 - 144 mmol/L	SLHS REFERENCE LAB	
POTASSIUM	4.9	3.5 - 5.5 mmol/L	SLHS REFERENCE LAB	
CHLORIDE	106	98 - 107 mmol/L	SLHS REFERENCE LAB	
TOTAL CO2	26	22 - 32 mmol/L	SLHS REFERENCE LAB	
ANION GAP	9	7 - 15 mmol/L	SLHS REFERENCE LAB	
GLUCOSE	<b>112 (H)</b>	60 - 100 mg/dL	SLHS REFERENCE LAB	
CALCIUM	9.7	8.4 - 10.6 mg/dL	SLHS REFERENCE LAB	
BUN	<b>27 (H)</b>	7 - 17 mg/dL	SLHS REFERENCE LAB	
CREATININE	0.82	0.52 - 1.04 mg/dL	SLHS REFERENCE LAB	
GFR IF AFRICAN AMERICAN	>60	>=60 ml/min/1.73m <sup>2</sup>	SLHS REFERENCE LAB	
GFR	>60	>=60 ml/min/1.73m <sup>2</sup>	SLHS REFERENCE LAB	
PROTEIN TOTAL	7.5	6.3 - 8.2 g/dL	SLHS REFERENCE LAB	

ALBUMIN	4.3	3.5 - 5.0 g/dL	SLHS REFERENCE LAB
TOTAL BILIRUBIN	0.6	0.2 - 1.3 mg/dL	SLHS REFERENCE LAB
ALK PHOS	69	38 - 126 U/L	SLHS REFERENCE LAB
AST(SGOT)	32	15 - 46 U/L	SLHS REFERENCE LAB
ALT(SGPT)	19	<35 U/L	SLHS REFERENCE LAB

#### Specimen

Blood - Entire blood vessel (body structure)

#### Narrative

PLEASE NOTE THAT STARTING MARCH 6, 2018, THE REFERENCE RANGE OF THE ALT TEST HAS CHANGED.

#### Performed At

SLHS REFERENCE LAB

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	
SLHS REFERENCE LAB	3176 S. DENVER WAY	BOISE, ID 83705, USA	

#### XR ANKLE 3+ VW (XR ANKLE 3 OR MORE VW LEFT) - Final result (09/24/2018 1:18 PM MDT)

#### Specimen

#### Impressions

1. Interval improvement in alignment of the distal fibula fracture.
2. Unchanged alignment of the medial and posterior malleolus fractures.
3. Subtle widening of the medial ankle clear space which could represent medial ligamentous injury.

#### Performed At

POWERSCRIBE PACS  
ASOBGYN

#### Narrative

HISTORY: Injury of left ankle, initial encounter.

#### Performed At

POWERSCRIBE PACS  
ASOBGYN

COMPARISON: Left ankle radiographs September 18, 2018. Left ankle CT September 21, 2018

TECHNIQUE: Left ankle, 3 views.

FINDINGS: Decreased posterior displacement of the distal fibula fracture when compared with prior exam. The medial malleolus fracture remains nondisplaced. Posterior malleolus fracture is grossly unchanged in alignment. No significant callus formation at the fractures. No new fractures. There is subtle, asymmetric widening of the medial ankle clear space. No new fractures.

#### Procedure Note

#### **Edi, Rad Results - 09/24/2018 2:27 PM MDT**

Formatting of this note might be different from the original.

HISTORY: Injury of left ankle, initial encounter.

COMPARISON: Left ankle radiographs September 18, 2018. Left ankle CT September 21, 2018

TECHNIQUE: Left ankle, 3 views.

FINDINGS: Decreased posterior displacement of the distal fibula fracture when compared with prior exam. The medial malleolus fracture remains nondisplaced. Posterior malleolus fracture is grossly unchanged in alignment. No significant callus formation at the fractures. No new fractures. There is subtle, asymmetric widening of the medial ankle clear space. No new fractures.

#### IMPRESSION:

1. Interval improvement in alignment of the distal fibula fracture.
2. Unchanged alignment of the medial and posterior malleolus fractures.
3. Subtle widening of the medial ankle clear space which could represent medial ligamentous injury.

Performing Organization

Address

City/State/ZIP Code

Phone Number

POWERSCRIBE PACS ASOBGYN

## CT ANKLE LEFT WO CONTRAST - Final result (09/21/2018 1:11 PM MDT)

Specimen

### Impressions

1. Trimalleolar ankle fracture as detailed above.
2. Mildly displaced and rotated, subcentimeter fracture at the anterolateral aspect of the tibial plafond.
3. The tibialis posterior and flexor digitorum longus tendons closely approximate the posterior malleolus fracture without frank entrapment.

### Performed At

POWERSCRIBE PACS  
ASOBGYN

### Narrative

HISTORY: Closed trimalleolar fracture of left ankle, initial encounter

### Performed At

POWERSCRIBE PACS  
ASOBGYN

COMPARISON: Left ankle radiographs September 18, 2018

TECHNIQUE: Helical CT imaging was performed through the left ankle at a scan width of 2-mm. Coronal and sagittal reformats were created. DICOM format image data have been securely sent to the Idaho Health Data Exchange (IHDE) and are available to nonaffiliated external healthcare facilities or entities on a secure, media free, reciprocally searchable basis with patient authorization for at least 12-months following the study. For more information visit <http://www.idahohde.org>

### FINDINGS:

Osseous: Negative for dislocation. There is a comminuted, oblique fracture of the distal fibula (Weber B) with up to 5 mm posterior displacement of the distal fracture fragment. There is a comminuted fracture of the posterior malleolus with up to 4 mm posterior displacement of the distal fracture fragment. There is up to 4 mm depression at the posterior articular surface medially (series 5, image 38). The posterior malleolus fracture extends into the posterior aspect of the medial malleolus (series 7, image 71 and series 5, image 42). There is up to 2 mm distraction along this fracture (series 3, image 43).

There is a fracture at the anterolateral aspect of the tibial plafond and with fracture fragment measuring up to 9 x 8 x 6 mm, displaced by up to 4 mm. This fracture fragment appears to be rotated approximately 90 degrees (series 7, image 71 and series 3, image 30). No additional fractures appreciated.

Unfused accessory navicular noted. Tiny cysts line the synchondrosis.

Soft tissue/muscles: The medial flexor or, extensor or, peroneal, and Achilles tendons are limited in assessment but normal in contour. The tibialis posterior and flexor digitorum longus tendons closely approximate the medial margin of the posterior malleolus fracture without frank entrapment (series 2, image 66). There is moderate subcutaneous edema/hematoma at the level of the ankle.

### Procedure Note

#### **Edi, Rad Results - 09/21/2018 1:49 PM MDT**

Formatting of this note might be different from the original.

HISTORY: Closed trimalleolar fracture of left ankle, initial encounter

COMPARISON: Left ankle radiographs September 18, 2018

TECHNIQUE: Helical CT imaging was performed through the left ankle at a scan width of 2-mm. Coronal and sagittal reformats were created. DICOM format image data have been securely sent to the Idaho Health Data Exchange (IHDE) and are available to nonaffiliated external healthcare facilities or entities on a secure, media free, reciprocally searchable basis with patient authorization for at least 12-months following the study. For more information visit <http://www.idahohde.org>

### FINDINGS:

Osseous: Negative for dislocation. There is a comminuted, oblique fracture of the distal fibula (Weber B) with up to 5 mm posterior displacement of the distal fracture fragment. There is a comminuted fracture of the posterior malleolus with up to 4 mm posterior displacement of the distal fracture fragment. There is up to 4 mm depression at the posterior articular surface medially (series 5, image 38). The posterior malleolus fracture extends into the posterior aspect of the medial malleolus (series 7, image 71 and series 5, image 42). There is up to 2 mm distraction along this fracture (series 3, image 43).

There is a fracture at the anterolateral aspect of the tibial plafond and with fracture fragment measuring up to 9 x 8 x 6 mm, displaced by up to 4 mm. This fracture fragment appears to be rotated approximately 90 degrees (series 7, image 71 and series 3, image 30). No additional fractures appreciated.

Unfused accessory navicular noted. Tiny cysts line the synchondrosis.

Soft tissue/muscles: The medial flexor or, extensor or, peroneal, and Achilles tendons are limited in assessment but normal in contour. The tibialis posterior and flexor digitorum longus tendons closely approximate the medial margin of the posterior malleolus fracture without frank entrapment (series 2, image 66). There is moderate subcutaneous edema/hematoma at the level of the ankle.

**IMPRESSION:**

1. Trimalleolar ankle fracture as detailed above.
2. Mildly displaced and rotated, subcentimeter fracture at the anterolateral aspect of the tibial plafond.
3. The tibialis posterior and flexor digitorum longus tendons closely approximate the posterior malleolus fracture without frank entrapment.

Performing Organization	Address	City/State/ZIP Code	Phone Number
POWERSCRIBE PACS ASOBGYN			

**XR ANKLE 3+ VW (XR ANKLE 3 OR MORE VW LEFT) - Final result (09/18/2018 6:51 PM MDT)**

Specimen

Impressions	Performed At
Trimalleolar fracture as described.	POWERSCRIBE PACS ASOBGYN

Narrative	Performed At
HISTORY: Pain.	POWERSCRIBE PACS ASOBGYN

COMPARISON: None.

TECHNIQUE: Left ankle, 3 views.

FINDINGS: There is an oblique fracture through the distal fibular diaphysis. Minimally displaced medial malleolus fracture. Mildly displaced posterior malleolus fracture. Circumferential soft tissue edema.

**Procedure Note**

**Edi, Rad Results - 09/18/2018 7:12 PM MDT**

Formatting of this note might be different from the original.

HISTORY: Pain.

COMPARISON: None.

TECHNIQUE: Left ankle, 3 views.

FINDINGS: There is an oblique fracture through the distal fibular diaphysis. Minimally displaced medial malleolus fracture. Mildly displaced posterior malleolus fracture. Circumferential soft tissue edema.

**IMPRESSION:**

Trimalleolar fracture as described.

Performing Organization	Address	City/State/ZIP Code	Phone Number
POWERSCRIBE PACS ASOBGYN			

**CBC (PACKAGE) - Final result (01/22/2018 10:58 AM MST)**

Component	Value	Ref Range	Performed At	Pathologist Signature
WBC COUNT	6.19	3.80 - 11.00 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	

RBC COUNT	5.10	3.50 - 5.50 10 <sup>6</sup> /uL	SLHS REFERENCE LAB
HEMOGLOBIN	15.3	11.2 - 15.7 g/dL	SLHS REFERENCE LAB
HEMATOCRIT	45.8	33.0 - 48.0 %	SLHS REFERENCE LAB
MCV	89.8	79.0 - 101.0 fL	SLHS REFERENCE LAB
MCH	30.0	25.0 - 35.0 pg	SLHS REFERENCE LAB
MCHC	33.4	31.0 - 37.0 g/dL	SLHS REFERENCE LAB
RDW-CV	13.0	11.0 - 16.0 %	SLHS REFERENCE LAB
PLATELET COUNT	221	150 - 420 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
MPV	10.0	9.4 - 12.4 fL	SLHS REFERENCE LAB
NEUTROPHIL #	3.76	1.90 - 8.00 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
NRBC %	0	0 - 0 %	SLHS REFERENCE LAB
NRBC #	<0.01	0.00 - 0.12 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
NEUTROPHIL %	60.7	40.0 - 76.0 %	SLHS REFERENCE LAB
IMMATURE GRANULOCYTES %	0.3	0.0 - 1.0 %	SLHS REFERENCE LAB
LYMPHOCYTE %	24.9	20.0 - 44.0 %	SLHS REFERENCE LAB
MONOCYTE %	10.2	5.0 - 13.0 %	SLHS REFERENCE LAB
EOSINOPHIL %	3.1	0.0 - 6.0 %	SLHS REFERENCE LAB
BASOPHIL %	0.8	0.0 - 2.0 %	SLHS REFERENCE LAB
NEUTROPHIL #	3.76	1.90 - 8.00 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
IMMATURE GRANULOCYTES #	<0.03	0.00 - 0.04 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
LYMPHOCYTE #	1.54	1.40 - 4.80 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
MONOCYTE #	0.63	0.10 - 0.80 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
EOSINOPHIL #	0.19	0.00 - 0.50 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
BASOPHIL #	0.05	0.00 - 1.00 10 <sup>3</sup> /uL	SLHS REFERENCE LAB

#### Specimen

Blood - Entire blood vessel (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	
SLHS REFERENCE LAB	3176 S. DENVER WAY	BOISE, ID 83705, USA	

Component	Value	Ref Range	Performed At	Pathologist Signature
TSH, 3RD GEN	3.12	0.47 - 4.68 mIU/L	SLHS REFERENCE LAB	
Specimen				
Blood - Entire blood vessel (body structure)				
Performing Organization	Address	City/State/ZIP Code	Phone Number	
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705		
SLHS REFERENCE LAB	3176 S. DENVER WAY	BOISE, ID 83705, USA		

## Visit Diagnoses - from 06/01/2017 to 07/14/2021

Diagnosis	Start Date
GERD without esophagitis	1/22/2018
Acquired hypothyroidism	1/22/2018
Primary insomnia	1/22/2018
Chronic fatigue	1/22/2018
Skin tag	1/22/2018
Chronic pain of right ankle	1/22/2018
BMI 32.0-32.9,adult	1/22/2018
Colon cancer screening	1/22/2018
Left trimalleolar fracture, closed, initial encounter	9/18/2018
Closed trimalleolar fracture of left ankle, initial encounter	9/21/2018
Injury of left ankle, initial encounter	9/24/2018
Injury of left ankle, initial encounter	9/24/2018
Pre-op testing	9/24/2018
Injury of left ankle, initial encounter	9/25/2018
Injury of left ankle, initial encounter	9/25/2018
Acute left ankle pain	9/25/2018
Postoperative pain of extremity	9/25/2018
Postoperative state	10/4/2018
Post-operative state	10/18/2018
Post-operative state	10/18/2018
Post-operative state	11/12/2018
Post-operative state	11/12/2018
Post-operative state	12/12/2018
Post-operative state	12/12/2018
Well woman exam with routine gynecological exam	7/31/2019
Need for Tdap vaccination	7/31/2019
Need for shingles vaccine	7/31/2019
Colon cancer screening declined	7/31/2019
Encounter for hepatitis C screening test for low risk patient	7/31/2019
Obesity (BMI 30.0-34.9)	7/31/2019
Acquired hypothyroidism	7/31/2019
Hyperlipidemia, mixed	7/31/2019
Atrophic vaginitis	7/31/2019
Excessive drinking of alcohol	7/31/2019
Acute cystitis without hematuria	1/21/2020
Bronchitis	3/2/2020
Flu-like symptoms	3/2/2020
Acquired hypothyroidism	3/2/2020
Atrophic vaginitis	3/2/2020
Post-menopause on HRT (hormone replacement therapy)	3/2/2020
Atrophic vaginitis	5/15/2020

Dysuria	5/15/2020
Acute cystitis with hematuria	9/29/2020
Dysuria	9/29/2020
Elevated BP without diagnosis of hypertension	9/29/2020
Need for influenza vaccination	9/29/2020
Essential hypertension	11/16/2020
Excessive drinking of alcohol	11/16/2020
Hyperlipidemia, mixed	11/16/2020
Obesity (BMI 30.0-34.9)	11/16/2020
Essential hypertension	12/16/2020
Hyperlipidemia, mixed	12/16/2020
Excessive drinking of alcohol	12/16/2020
Mid-back pain, acute	1/15/2021
GERD without esophagitis	3/4/2021
Visit for screening mammogram	6/1/2021

## Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

## Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712	<b>MD Lisa M. Parrillo, MD</b> (Physician (Non Attending)) 208-639-4900 (Work) 208-639-4901 (Fax) 2855 E Magic View Dr Meridian, ID 83642 Urology	Jun. 01, 2017 - Jul. 14, 2021
Custodian Organization		
<b>St. Luke's Health System</b> Boise, ID 83712		

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Encounter Details

Date	Type	Department	Care Team
06/01/2021	Hospital Encounter	St. Luke's - Breast Care Services - Eagle 3101 E STATE ST STE 2101 EAGLE, ID 83616-6232 208-706-2055	Laky, Devin M., MD 3399 E Louise Dr Suite 100 Meridian, ID 83642 208-288-2255 208-706-2043 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
escitalopram (LEXAPRO) 10 MG tablet	Take 10 mg by mouth Daily.		0	07/31/2020		Active
cyclobenzaprine (FLEXERIL) 5 MG tablet	Take 1 tablet (5 mg total) by mouth 3 (three) times daily as needed for Muscle spasms.	15 tablet	0	01/15/2021		Active
lisinopriL (PRINIVIL,ZESTRIL) 20 MG tablet	TAKE 1 TABLET BY MOUTH EVERY NIGHT	90 tablet	1	02/10/2021		Active
estradiol (ESTRACE) 0.01 % (0.1 mg/gram) vaginal cream	apply 1g vaginally three times a week	42.5 g	0	03/16/2021		Active
sucralfate (CARAFATE) 1 gram tablet	TAKE 1 TABLET BY MOUTH 4 TIMES DAILY FOR 14 DAYS	56 tablet	0	04/09/2021		Active
atorvastatin (LIPITOR) 10 MG tablet	TAKE ONE TABLET BY MOUTH ONE TIME DAILY	90 tablet	3	04/13/2021		Active
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Daily.	90 tablet	2	08/31/2020	06/02/2021	Discontinued
omeprazole (PRILOSEC) 40 MG capsule	Take 1 capsule (40 mg total) by mouth Daily.	90 capsule	0	03/18/2021	06/16/2021	Expired

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Essential hypertension	10/02/2020
Impaired fasting blood sugar	06/19/2020
Colon cancer screening declined	08/02/2019
Atrophic vaginitis	07/31/2019
Excessive drinking of alcohol	07/31/2019
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
COVID-19 (Pfizer) SARS-COV-2 mRNA MDV Vaccine	04/09/2021, 03/19/2021	
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	11/01/2019, 10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULALVAL, FLUARIX, FLUZONE QUAD) >OR=6MO PF	09/29/2020, 11/01/2019, 10/04/2019, 10/02/2017	
Tdap	07/31/2019	
Zoster (Shingrix)	02/10/2020, 10/04/2019	

## Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985
Smokeless Tobacco: Never Used				
Alcohol Use	Standard Drinks/Week			
Yes	0 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits	Answer			Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week			08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily			08/02/2019
Physical Activity	Answer			Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days			08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				

## Last Filed Vital Signs - documented in this encounter

Not on file

## Medications at Time of Discharge - documented as of this encounter

Medication	Sig	Dispensed	Refills	Start Date	End Date
atorvastatin (LIPITOR) 10 MG tablet	TAKE ONE TABLET BY MOUTH ONE TIME DAILY	90 tablet	3	04/13/2021	
cyclobenzaprine (FLEXERIL) 5 MG tablet	Take 1 tablet (5 mg total) by mouth 3 (three) times daily as needed for Muscle spasms.	15 tablet	0	01/15/2021	
escitalopram (LEXAPRO) 10 MG tablet	Take 10 mg by mouth Daily.		0	07/31/2020	
estradiol (ESTRACE) 0.01 % (0.1 mg/gram) vaginal cream	apply 1g vaginally three times a week	42.5 g	0	03/16/2021	
levothyroxine (SYNTHROID) 50 MCG tablet	TAKE 1 TABLET (50 MCG TOTAL) BY MOUTH EVERY DAY	90 tablet	2	06/02/2021	
lisinopril (PRINIVIL,ZESTRIL) 20 MG tablet	TAKE 1 TABLET BY MOUTH EVERY NIGHT	90 tablet	1	02/10/2021	
sucralfate (CARAFATE) 1 gram tablet	TAKE 1 TABLET BY MOUTH 4 TIMES DAILY FOR 14 DAYS	56 tablet	0	04/09/2021	
omeprazole (PRILOSEC) 40 MG capsule	Take 1 capsule (40 mg total) by mouth Daily.	90 capsule	0	03/18/2021	06/16/2021
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Daily.	90 tablet	2	08/31/2020	06/02/2021

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

## Implants - documented as of this encounter

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfi 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description:MATERIAL - STAINLESS STEEL LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
<b>Screw Low Profile 2.7x14mm Locking Ss Ar-8827l-14 - Sar-8827l-14</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP  
LATERAL SIDE

<b>Screw Low Profile 2.7x12mm Locking Ss Ar-</b> <b>8827l-12 - Sar-8827l-12</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8827L-12 / AR-8827L-12 / 1-092518-2
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Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE

<b>Screw Low Profile 2.7x16mm Locking Ss Ar-</b> <b>8827l-16 - Sar-8827l-16</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8827L-16 / AR-8827L-16 / 1-092518-2
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Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-12 / AR-8835-12 / 1-092518-2
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Implanted: Qty: 2 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-14 / AR-8835-14 / 1-092518-2
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Implanted: Qty: 2 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

<b>Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-22 / AR-8835-22 / 1-092518-2
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Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

<b>Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-26 / AR-8835-26 / 1-092518-2
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Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

<b>Implant Knotless Syndesmosis Tightrope Xp Stainless Steel Ar-8925ss - Sar-8925ss</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8925SS / AR-8925SS / 10224713
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Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL, UHMWPE  
MEDIAL SIDE.

<b>Screw Low Profile 4x46 Cannulated Long Thread Stainless Steel Ar-8840cl-46 - Sar- 8840cl-46</b>	OTHER IMPLANTS	Left: Ankle	ARTHREX INC	AR-8840CL-46 / AR-8840CL-46 / 1-092518-2
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Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
MEDIAL SIDE.

## A Results - documented in this encounter

### BI SCREENING MAMMOGRAM BILATERAL - Final result (06/01/2021 3:01 PM MDT)

Specimen

Impressions	Performed At
BI-RADS Category 0: Needs additional imaging evaluation. Additional imaging evaluation beginning with ultrasound then followed by diagnostic mammography, at the discretion of the interpreting radiologist, is recommended.  If additional imaging is requested based on imaging or physical findings described above, we will contact the patient to schedule follow-up imaging.	POWERSCRIBE PACS ASOBGYN

Patient information entered into a reminder system with a target due date for the next mammogram.

Narrative	Performed At
BILATERAL DIGITAL MAMMOGRAM WITH COMPUTER AIDED DETECTION	POWERSCRIBE PACS ASOBGYN
HISTORY: Screening.	
PATIENT CONCERNS: None	
RISK FACTORS: No family history of breast cancer.	
COMPARISON: 03/28/2016, 02/03/2014, 09/21/2012	
MAMMOGRAM: Interpretation is performed utilizing computer-aided detection. Standard digital Bilateral CC and MLO views were obtained. There are scattered areas of fibroglandular density.	
Right breast: No suspicious mass, suspicious calcifications or unexpected architectural distortion.	
Left breast: 8 mm mass 2-3 o'clock 7 cm from the nipple	

Performing Organization	Address	City/State/ZIP Code	Phone Number
POWERSCRIBE PACS ASOBGYN			

## B Visit Diagnoses - documented in this encounter

Diagnosis

Visit for screening mammogram

## C Insurance - documented as of this encounter

Payer	Benefit Plan / Group	Subscriber ID	Effective Dates	Phone	Address	Type
COMMERCIAL	CIGNA	10494153000	5/1/2019-Present			Non-Contracted
Guarantor Name	Account Type	Relation to Patient	Date of Birth	Phone	Billing Address	
Lark,Mary Sue	Personal/Family	Self	09/18/1956	925-866-1111 (Home)	935 S Butler Way Lakewood, CO 80226-4213	

## Advance Directives

For more information, please contact: 208-381-2183

### Documents on File

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

### Latest Code Status on File

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

### Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

### Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712	<b>MD Lisa M. Parrillo, MD</b> (Physician (Non Attending)) 208-639-4900 (Work) 208-639-4901 (Fax) 2855 E Magic View Dr Meridian, ID 83642 Urology	Jun. 01, 2021

### Custodian Organization

St. Luke's Health System
Boise, ID 83712

### Encounter Providers

MD Devin M. Laky, MD (Attending)	Encounter Date
208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine	Jun. 01, 2021

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Encounter Details

Date	Type	Department	Care Team
04/09/2021	Immunization	St. Luke's Clinic - Internal Medicine - Boise 1000 E PARK BLVD STE 120 BOISE, ID 83712-7791 208-381-4100	<b>McGeorge, Laura A., MD</b> 1000 E Park Blvd Suite 120 Boise, ID 83712 208-381-4100 208-381-4101 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
escitalopram (LEXAPRO) 10 MG tablet	Take 10 mg by mouth Daily.		0	07/31/2020		Active
cyclobenzaprine (FLEXERIL) 5 MG tablet	Take 1 tablet (5 mg total) by mouth 3 (three) times daily as needed for Muscle spasms.	15 tablet	0	01/15/2021		Active
lisinopril (PRINIVIL,ZESTRIL) 20 MG tablet	TAKE 1 TABLET BY MOUTH EVERY NIGHT	90 tablet	1	02/10/2021		Active
estradiol (ESTRACE) 0.01 % (0.1 mg/gram) vaginal cream	apply 1g vaginally three times a week	42.5 g	0	03/16/2021		Active
sucralfate (CARAFATE) 1 gram tablet	TAKE 1 TABLET BY MOUTH 4 TIMES DAILY FOR 14 DAYS	56 tablet	0	04/09/2021		Active
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Daily.	90 tablet	2	08/31/2020	06/02/2021	Discontinued
atorvastatin (LIPITOR) 10 MG tablet	Take 1 tablet (10 mg total) by mouth Daily.	90 tablet	0	01/25/2021	04/13/2021	Discontinued
omeprazole (PRILOSEC) 40 MG capsule	Take 1 capsule (40 mg total) by mouth Daily.	90 capsule	0	03/18/2021	06/16/2021	Expired

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Essential hypertension	10/02/2020
Impaired fasting blood sugar	06/19/2020
Colon cancer screening declined	08/02/2019
Atrophic vaginitis	07/31/2019
Excessive drinking of alcohol	07/31/2019
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
COVID-19 (Pfizer) SARS-COV-2 mRNA MDV Vaccine	04/09/2021, 03/19/2021	
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	11/01/2019, 10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULALVAL, FLUARIX, FLUZONE QUAD) >OR=6MO PF	09/29/2020, 11/01/2019, 10/04/2019, 10/02/2017	
Tdap	07/31/2019	
Zoster (Shingrix)	02/10/2020, 10/04/2019	

## Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985
Smokeless Tobacco: Never Used				
Alcohol Use	Standard Drinks/Week			
Yes	0 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits	Answer			Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week			08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily			08/02/2019
Physical Activity	Answer			Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days			08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				

## Last Filed Vital Signs - documented in this encounter

Not on file

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

## Implants - documented as of this encounter

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfi 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
<b>Screw Low Profile 2.7x14mm Locking Ss Ar- 8827l-14 - Sar-8827l-14</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2
<b>Screw Low Profile 2.7x12mm Locking Ss Ar- 8827l-12 - Sar-8827l-12</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-12 / AR-8827L-12 / 1-092518-2
<b>Screw Low Profile 2.7x16mm Locking Ss Ar- 8827l-16 - Sar-8827l-16</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-16 / AR-8827L-16 / 1-092518-2
<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-12 / AR-8835-12 / 1-092518-2

<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-14 / AR-8835-14 / 1-092518-2
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-22 / AR-8835-22 / 1-092518-2
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-26 / AR-8835-26 / 1-092518-2
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Implant Knotless Syndesmosis Tightrope Xp Stainless Steel Ar-8925ss - Sar-8925ss</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8925SS / AR-8925SS / 10224713
Description: MATERIAL - STAINLESS STEEL, UHMWPE MEDIAL SIDE.				
<b>Screw Low Profile 4x46 Cannulated Long Thread Stainless Steel Ar-8840cl-46 - Sar-8840cl-46</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL	OTHER IMPLANTS	Left: Ankle	ARTHREX INC	AR-8840CL-46 / AR-8840CL-46 / 1-092518-2
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. MEDIAL SIDE.				

## Results - documented in this encounter

Not on file

## Insurance - documented as of this encounter

Payer	Benefit Plan / Group	Subscriber ID	Effective Dates	Phone	Address	Type
COMMERCIAL	CIGNA	10494153000	5/1/2019-Present			Non-Contracted
Guarantor Name	Account Type	Relation to Patient	Date of Birth	Phone	Billing Address	
Lark,Mary Sue	Personal/Family	Self	09/18/1956	925-866-1111 (Home)	935 S Butler Way Lakewood, CO 80226-4213	

## Advance Directives

For more information, please contact: 208-381-2183

### Documents on File

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

### Latest Code Status on File

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

### Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

### Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712	<b>MD Lisa M. Parrillo, MD</b> (Physician (Non Attending)) 208-639-4900 (Work) 208-639-4901 (Fax) 2855 E Magic View Dr Meridian, ID 83642 Urology	Apr. 09, 2021
Custodian Organization		
<b>St. Luke's Health System</b> Boise, ID 83712		
Encounter Providers		
<b>Boise Internal Medicine - Pfizer (2 doses)</b> (Attending)		Encounter Date Apr. 09, 2021

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Encounter Details

Date	Type	Department	Care Team
03/19/2021	Immunization	St. Luke's Clinic - Internal Medicine - Boise 1000 E PARK BLVD STE 120 BOISE, ID 83712-7791 208-381-4100	<b>McGeorge, Laura A., MD</b> 1000 E Park Blvd Suite 120 Boise, ID 83712 208-381-4100 208-381-4101 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
escitalopram (LEXAPRO) 10 MG tablet	Take 10 mg by mouth Daily.		0	07/31/2020		Active
cyclobenzaprine (FLEXERIL) 5 MG tablet	Take 1 tablet (5 mg total) by mouth 3 (three) times daily as needed for Muscle spasms.	15 tablet	0	01/15/2021		Active
lisinopril (PRINIVIL,ZESTRIL) 20 MG tablet	TAKE 1 TABLET BY MOUTH EVERY NIGHT	90 tablet	1	02/10/2021		Active
estradiol (ESTRACE) 0.01 % (0.1 mg/gram) vaginal cream	apply 1g vaginally three times a week	42.5 g	0	03/16/2021		Active
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Daily.	90 tablet	2	08/31/2020	06/02/2021	Discontinued
atorvastatin (LIPITOR) 10 MG tablet	Take 1 tablet (10 mg total) by mouth Daily.	90 tablet	0	01/25/2021	04/13/2021	Discontinued
omeprazole (PRILOSEC) 40 MG capsule	Take 1 capsule (40 mg total) by mouth Daily.	90 capsule	0	03/18/2021	06/16/2021	Expired

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Essential hypertension	10/02/2020
Impaired fasting blood sugar	06/19/2020
Colon cancer screening declined	08/02/2019
Atrophic vaginitis	07/31/2019
Excessive drinking of alcohol	07/31/2019
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
COVID-19 (Pfizer) SARS-COV-2 mRNA MDV Vaccine	03/19/2021	
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	11/01/2019, 10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD) >OR=6MO PF	09/29/2020, 11/01/2019, 10/04/2019, 10/02/2017	
Tdap	07/31/2019	
Zoster (Shingrix)	02/10/2020, 10/04/2019	

## Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985
Smokeless Tobacco: Never Used				
Alcohol Use				
Yes	Standard Drinks/Week	0 (1 standard drink = 0.6 oz pure alcohol)		
Alcohol Habits	Answer			Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week			08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily			08/02/2019
Physical Activity	Answer			Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days			08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				

## Last Filed Vital Signs - documented in this encounter

Not on file

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

## Implants - documented as of this encounter

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfi 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
<b>Screw Low Profile 2.7x14mm Locking Ss Ar- 8827l-14 - Sar-8827l-14</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2
<b>Screw Low Profile 2.7x12mm Locking Ss Ar- 8827l-12 - Sar-8827l-12</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-12 / AR-8827L-12 / 1-092518-2
<b>Screw Low Profile 2.7x16mm Locking Ss Ar- 8827l-16 - Sar-8827l-16</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-16 / AR-8827L-16 / 1-092518-2
<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-12 / AR-8835-12 / 1-092518-2
<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-14 / AR-8835-14 / 1-092518-2

## HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Implant Knotless Syndesmosis Tightrope  
Xp Stainless Steel Ar-8925ss - Sar-8925ss**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL, UHMWPE  
MEDIAL SIDE.

**Screw Low Profile 4x46 Cannulated Long****Thread Stainless Steel Ar-8840cl-46 - Sar-8840cl-46**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
MEDIAL SIDE.

 **Results** - documented in this encounter

Not on file

**Insurance** - documented as of this encounter

Payer	Benefit Plan / Group	Subscriber ID	Effective Dates	Phone	Address	Type
COMMERCIAL	CIGNA	10494153000	5/1/2019-Present			Non-Contracted
Guarantor Name	Account Type	Relation to Patient	Date of Birth	Phone	Billing Address	
Lark,Mary Sue	Personal/Family	Self	09/18/1956	925-866-1111 (Home)	935 S Butler Way Lakewood, CO 80226-4213	

## Advance Directives

For more information, please contact: 208-381-2183

### Documents on File

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

### Latest Code Status on File

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

### Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

### Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712	<b>MD Lisa M. Parrillo, MD</b> (Physician (Non Attending)) 208-639-4900 (Work) 208-639-4901 (Fax) 2855 E Magic View Dr Meridian, ID 83642 Urology	Mar. 19, 2021
Custodian Organization		
<b>St. Luke's Health System</b> Boise, ID 83712		
Encounter Providers		
<b>Boise Internal Medicine - Pfizer (2 doses)</b> (Attending)		Encounter Date Mar. 19, 2021

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Reason for Visit

### Reason

Abdominal Pain

## Encounter Details

Date	Type	Department	Care Team
03/04/2021	Office Visit	St. Luke's Clinic Ada Medical Associates - Meridian 3399 E LOUISE DR STE 100 MERIDIAN, ID 83642-5047 208-288-2255	<b>Laky, Devin M., MD</b> 3399 E Louise Dr Suite 100 Meridian, ID 83642 208-288-2255 208-706-2043 (Fax)
			<b>Landry, Jennifer M., PA-C</b> 3399 E Louise Dr Suite 100 Meridian, ID 83642 208-288-2255 208-706-2043 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
escitalopram (LEXAPRO) 10 MG tablet	Take 10 mg by mouth Daily.		0	07/31/2020		Active
cyclobenzaprine (FLEXERIL) 5 MG tablet	Take 1 tablet (5 mg total) by mouth 3 (three) times daily as needed for Muscle spasms.	15 tablet	0	01/15/2021		Active
lisinopril (PRINIVIL,ZESTRIL) 20 MG tablet	TAKE 1 TABLET BY MOUTH EVERY NIGHT	90 tablet	1	02/10/2021		Active
estradiol (ESTRACE) 0.01 % (0.1 mg/gram) vaginal cream	Place 1 g vaginally 3 (three) times a week.	42.5 g	1	06/29/2020	03/15/2021	Discontinued
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Daily.	90 tablet	2	08/31/2020	06/02/2021	Discontinued
atorvastatin (LIPITOR) 10 MG tablet	Take 1 tablet (10 mg total) by mouth Daily.	90 tablet	0	01/25/2021	04/13/2021	Discontinued
sucralfate (CARAFATE) 1 gram tablet	Take 1 tablet (1 g total) by mouth 4 (four) times daily for 14 days.	56 tablet	0	03/04/2021	03/30/2021	Discontinued (Reorder)
omeprazole (PRILOSEC) 40 MG capsule	Take 1 capsule (40 mg total) by mouth Daily.	90 capsule	0	03/18/2021	06/16/2021	Expired

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Essential hypertension	10/02/2020
Impaired fasting blood sugar	06/19/2020
Colon cancer screening declined	08/02/2019
Atrophic vaginitis	07/31/2019
Excessive drinking of alcohol	07/31/2019
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	11/01/2019, 10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD) >OR=6MO PF	09/29/2020, 11/01/2019, 10/04/2019, 10/02/2017	
Tdap	07/31/2019	
Zoster (Shingrix)	02/10/2020, 10/04/2019	

## Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985
Smokeless Tobacco: Never Used				
Alcohol Use	Standard Drinks/Week			
Yes	0 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits	Answer			Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week			08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily			08/02/2019
Physical Activity	Answer			Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days			08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				



## Last Filed Vital Signs - documented in this encounter

Vital Sign	Reading	Time Taken	Comments
Blood Pressure	106/72	03/04/2021 12:21 PM MST	
Pulse	63	03/04/2021 12:21 PM MST	
Temperature	36.2 °C (97.1 °F)	03/04/2021 12:21 PM MST	
Respiratory Rate	-	-	
Oxygen Saturation	95%	03/04/2021 12:21 PM MST	
Inhaled Oxygen Concentration	-	-	
Weight	90.7 kg (199 lb 15.3 oz)	03/04/2021 12:21 PM MST	
Height	165.1 cm (5' 5")	03/04/2021 12:21 PM MST	
Body Mass Index	33.27	03/04/2021 12:21 PM MST	

# Patient Instructions - documented in this encounter

## Patient Instructions

Landry, Jennifer M., PA-C - 03/04/2021 12:20 PM MST

Formatting of this note is different from the original.

Images from the original note were not included.

### Gastroesophageal Reflux Disease (GERD): Care Instructions

#### Your Care Instructions

Gastroesophageal reflux disease (GERD) is the backward flow of stomach acid into the esophagus. The esophagus is the tube that leads from your throat to your stomach. A one-way valve prevents the stomach acid from moving up into this tube. When you have GERD, this valve does not close tightly enough.

If you have mild GERD symptoms including heartburn, you may be able to control the problem with antacids or over-the-counter medicine. Changing your diet, losing weight, and making other lifestyle changes can also help reduce symptoms.

Follow-up care is a key part of your treatment and safety. Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

#### How can you care for yourself at home?

- Take your medicines exactly as prescribed. Call your doctor if you think you are having a problem with your medicine.
- Your doctor may recommend over-the-counter medicine. For mild or occasional indigestion, antacids, such as Tums, Gaviscon, Mylanta, or Maalox, may help. Your doctor also may recommend over-the-counter acid reducers, such as Pepcid AC, Tagamet HB, Zantac 75, or Prilosec. Read and follow all instructions on the label. If you use these medicines often, talk with your doctor.
- Change your eating habits.

? It's best to eat several small meals instead of two or three large meals.

? After you eat, wait 2 to 3 hours before you lie down.

? Chocolate, mint, and alcohol can make GERD worse.

? Spicy foods, foods that have a lot of acid (like tomatoes and oranges), and coffee can make GERD symptoms worse in some people. If your symptoms are worse after you eat a certain food, you may want to stop eating that food to see if your symptoms get better.

· Do not smoke or chew tobacco. Smoking can make GERD worse. If you need help quitting, talk to your doctor about stop-smoking programs and medicines. These can increase your chances of quitting for good.

· If you have GERD symptoms at night, raise the head of your bed 6 to 8 inches by putting the frame on blocks or placing a foam wedge under the head of your mattress. (Adding extra pillows does not work.)

· Do not wear tight clothing around your middle.

· Lose weight if you need to. Losing just 5 to 10 pounds can help.

#### When should you call for help?

Call your doctor now or seek immediate medical care if:

- You have new or different belly pain.
- Your stools are black and tarlike or have streaks of blood.

Watch closely for changes in your health, and be sure to contact your doctor if:

- Your symptoms have not improved after 2 days.
- Food seems to catch in your throat or chest.

#### Where can you learn more?

Log into your MyChart on <https://www.stlukesonline.org/mychart> and enter T927 in the search box to learn more about

"Gastroesophageal Reflux Disease (GERD): Care Instructions."

Current as of: August 11, 2019 Content Version: 12.4

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Care instructions adapted under license by St. Luke's Health System. If you have questions about a medical condition or this instruction, always ask your healthcare professional. Healthwise, Incorporated disclaims any warranty or liability for your use of this information.

Electronically signed by Jennifer M. Landry, PA-C at 03/04/2021 1:00 PM MST

## Ordered Prescriptions - documented in this encounter

Prescription	Sig	Dispensed	Refills	Start Date	End Date
omeprazole (PRILOSEC) 40 MG capsule	Take 1 capsule (40 mg total) by mouth Daily.	90 capsule	0	03/18/2021	06/16/2021
sucralfate (CARAFATE) 1 gram tablet	Take 1 tablet (1 g total) by mouth 4 (four) times daily for 14 days.	56 tablet	0	03/04/2021	03/30/2021

# Progress Notes - documented in this encounter

Landry, Jennifer M., PA-C - 03/04/2021 12:20 PM MST

Formatting of this note is different from the original.

Subjective:

Mary Sue Lark is an 64 y.o. female with who presents for evaluation of heartburn. This has been associated with abdominal bloating, heartburn, midespigastic pain, nocturnal burning, symptoms primarily relate to meals, and lying down after meals and upper abdominal discomfort. She denies: belching and eructation, bilious reflux, chest pain, choking on food, cough, deep pressure at base of neck, difficulty swallowing, dysphagia, hematemesis, laryngitis, melena, nausea, need to clear throat frequently, odynophagia, regurgitation of undigested food, shortness of breath, unexpected weight loss, waterbrash and wheezing. Symptoms have been present for several weeks. She denies dysphagia. She has not lost weight. She denies melena, hematochezia, hematemesis, and coffee ground emesis. Medical therapy in the past has included: antacids.

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

Pertinent items are noted in HPI.

## Objective:

BP 106/72 (BP Location: Left upper arm, Patient Position: Sitting, Cuff size: Large Adult 31-40 cm) | Pulse 63 | Temp 36.2 °C (97.1 °F) (Temporal) | Ht 165.1 cm (65") | Wt 90.7 kg (199 lb 15.3 oz) | SpO2 95% | BMI 33.27 kg/m<sup>2</sup>

General appearance: alert, appears stated age, cooperative and no distress

Head: Normocephalic, without obvious abnormality, atraumatic

Eyes: conjunctivae/corneas clear. PERRL, EOM's intact. No scleral icterus or discharge.

Nose: Nares normal. Septum midline. Mucosa normal. No drainage or sinus tenderness.

Throat: normal findings: lips normal without lesions, buccal mucosa normal, palate normal and tongue midline and normal and abnormal findings: mild oropharyngeal erythema

Neck: no adenopathy, no carotid bruit, supple, symmetrical, trachea midline and thyroid not enlarged, symmetric, no tenderness/mass/nodules

Abdomen: normal findings: no bruits heard, no organomegaly and soft and abnormal findings: hyperactive bowel sounds and mild tenderness in the epigastrium

Pulses: 2+ and symmetric

Skin: Skin color, texture, turgor normal. No rashes or lesions

Neurologic: Alert and oriented X 3, normal strength, tone, coordination and stable independent gait

## Assessment:

- GERD without esophagitis omeprazole (PRILOSEC) 40 MG capsule  
sucralfate (CARAFATE) 1 gram tablet

## Plan:

GERD

Nonpharmacologic treatments were discussed including: eating smaller meals, elevation of the head of bed at night, avoidance of caffeine, chocolate, nicotine and peppermint, and avoiding tight fitting clothing.

Will start a trial of sucralfate per orders above, then continue with trial of proton pump inhibitors for 30-90 days, then prn.

Patient denies "Red Flag" symptoms at this time.

Will consider referral to GI for further evaluation if failing to improve with conservative treatment options.

RTC and ED precautions were reviewed in detail.

Return if symptoms worsen or fail to improve, for GERD/epigastric pain.

R/B/AR/SE were reviewed in detail and patient expressed verbal understanding and would like to proceed with plan per above.

Electronically signed by Jennifer M. Landry, PA-C at 06/07/2021 11:46 AM MDT

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

## Implants - documented as of this encounter

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfi 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
<b>Screw Low Profile 2.7x14mm Locking Ss Ar- 8827l-14 - Sar-8827l-14</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2
<b>Screw Low Profile 2.7x12mm Locking Ss Ar- 8827l-12 - Sar-8827l-12</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-12 / AR-8827L-12 / 1-092518-2
<b>Screw Low Profile 2.7x16mm Locking Ss Ar- 8827l-16 - Sar-8827l-16</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-16 / AR-8827L-16 / 1-092518-2
<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-12 / AR-8835-12 / 1-092518-2
<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-14 / AR-8835-14 / 1-092518-2

## HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Implant Knotless Syndesmosis Tightrope  
Xp Stainless Steel Ar-8925ss - Sar-8925ss**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL, UHMWPE  
MEDIAL SIDE.

**Screw Low Profile 4x46 Cannulated Long****Thread Stainless Steel Ar-8840cl-46 - Sar-8840cl-46**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
MEDIAL SIDE.

 **Results** - documented in this encounter

Not on file

 **Visit Diagnoses** - documented in this encounter

Diagnosis

GERD without esophagitis - Primary

 **Insurance** - documented as of this encounter

Payer	Benefit Plan / Group	Subscriber ID	Effective Dates	Phone	Address	Type
COMMERCIAL	CIGNA	10494153000	5/1/2019-Present			Non-Contracted
Guarantor Name	Account Type	Relation to Patient	Date of Birth	Phone	Billing Address	
Lark,Mary Sue	Personal/Family	Self	09/18/1956	925-866-1111 (Home)	935 S Butler Way Lakewood, CO 80226-4213	

## Advance Directives

For more information, please contact: 208-381-2183

### Documents on File

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

### Latest Code Status on File

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

### Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

### Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712	<b>MD Lisa M. Parrillo, MD</b> (Physician (Non Attending)) 208-639-4900 (Work) 208-639-4901 (Fax) 2855 E Magic View Dr Meridian, ID 83642 Urology	Mar. 04, 2021

### Custodian Organization

<b>St. Luke's Health System</b> Boise, ID 83712
--

Encounter Providers	Encounter Date
<b>PA-C Jennifer M. Landry, PA-C</b> (Attending) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Physician Assistant	Mar. 04, 2021

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Reason for Visit

Reason
Back Pain

## Encounter Details

Date	Type	Department	Care Team
01/15/2021	Office Visit	St. Luke's Clinic Ada Medical Associates - Meridian 3399 E LOUISE DR STE 100 MERIDIAN, ID 83642-5047 208-288-2255	<b>Laky, Devin M., MD</b> 3399 E Louise Dr Suite 100 Meridian, ID 83642 208-288-2255 208-706-2043 (Fax)

  

Allergies - documented as of this encounter (statuses as of 07/14/2021)	
Active Allergy Statins-Hmg-Coa Reductase Inhibitors	Reactions Other (See Comments)

  

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Allergies

- documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
escitalopram (LEXAPRO) 10 MG tablet	Take 10 mg by mouth Daily.		0	07/31/2020		Active
cyclobenzaprine (FLEXERIL) 5 MG tablet	Take 1 tablet (5 mg total) by mouth 3 (three) times daily as needed for Muscle spasms.	15 tablet	0	01/15/2021		Active
estradiol (ESTRACE) 0.01 % (0.1 mg/gram) vaginal cream	Place 1 g vaginally 3 (three) times a week.	42.5 g	1	06/29/2020	03/15/2021	Discontinued
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Daily.	90 tablet	2	08/31/2020	06/02/2021	Discontinued
atorvastatin (LIPITOR) 10 MG tablet	Take half tab 5mg orally every other day x 1 month, then 1 tab 10mg orally every other day x 1 month, then 10mg daily.	90 tablet	0	10/23/2020	01/25/2021	Discontinued
lisinopril (PRINIVIL,ZESTRIL) 20 MG tablet	Take 1 tablet (20 mg total) by mouth nightly.	90 tablet	0	11/16/2020	02/10/2021	Discontinued
naltrexone (DEPADE) 50 mg tablet	Take 50 mg by mouth Daily.		0		01/15/2021	Discontinued (Patient stopped taking)

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Essential hypertension	10/02/2020
Impaired fasting blood sugar	06/19/2020
Colon cancer screening declined	08/02/2019
Atrophic vaginitis	07/31/2019
Excessive drinking of alcohol	07/31/2019
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	11/01/2019, 10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD)>OR=6MO PF	09/29/2020, 11/01/2019, 10/04/2019, 10/02/2017	
Tdap	07/31/2019	
Zoster (Shingrix)	02/10/2020, 10/04/2019	

## Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985
Smokeless Tobacco: Never Used				
Alcohol Use	Standard Drinks/Week			
Yes	0 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits	Answer			Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week			08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily			08/02/2019
Physical Activity	Answer			Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days			08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				

## Last Filed Vital Signs - documented in this encounter

Vital Sign	Reading	Time Taken	Comments
Blood Pressure	108/74	01/15/2021 10:00 AM MST	
Pulse	70	01/15/2021 10:00 AM MST	
Temperature	36.5 °C (97.7 °F)	01/15/2021 10:00 AM MST	
Respiratory Rate	-	-	
Oxygen Saturation	95%	01/15/2021 10:00 AM MST	
Inhaled Oxygen Concentration	-	-	
Weight	94.7 kg (208 lb 12.4 oz)	01/15/2021 10:00 AM MST	
Height	165.1 cm (5' 5")	01/15/2021 10:00 AM MST	
Body Mass Index	34.74	01/15/2021 10:00 AM MST	

## Patient Instructions - documented in this encounter

### Patient Instructions

Landry, Jennifer M., PA-C - 01/15/2021 10:00 AM MST

Formatting of this note is different from the original.

Images from the original note were not included.

### Back Stretches: Exercises

#### Introduction

Here are some examples of exercises for stretching your back. Start each exercise slowly. Ease off the exercise if you start to have pain.

Your doctor or physical therapist will tell you when you can start these exercises and which ones will work best for you.

#### How to do the exercises

##### Overhead stretch

1. Stand comfortably with your feet shoulder-width apart.
2. Looking straight ahead, raise both arms over your head and reach toward the ceiling. Do not allow your head to tilt back.
3. Hold for 15 to 30 seconds, then lower your arms to your sides.
4. Repeat 2 to 4 times.

##### Side stretch

1. Stand comfortably with your feet shoulder-width apart.
2. Raise one arm over your head, and then lean to the other side.
3. Slide your hand down your leg as you let the weight of your arm gently stretch your side muscles. Hold for 15 to 30 seconds.
4. Repeat 2 to 4 times on each side.

## Press-up

1. Lie on your stomach, supporting your body with your forearms.
2. Press your elbows down into the floor to raise your upper back. As you do this, relax your stomach muscles and allow your back to arch without using your back muscles. As your press up, do not let your hips or pelvis come off the floor.
3. Hold for 15 to 30 seconds, then relax.
4. Repeat 2 to 4 times.

## Relax and rest

1. Lie on your back with a rolled towel under your neck and a pillow under your knees. Extend your arms comfortably to your sides.
2. Relax and breathe normally.
3. Remain in this position for about 10 minutes.
4. If you can, do this 2 or 3 times each day.

Follow-up care is a key part of your treatment and safety. Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

## Where can you learn more?

Log into your MyChart on <https://www.stlukesonline.org/mychart> and enter Y090 in the search box to learn more about "Back Stretches: Exercises."

Current as of: June 26, 2019 Content Version: 12.4

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## Acute Low Back Pain: Exercises

### Introduction

Here are some examples of typical rehabilitation exercises for your condition. Start each exercise slowly. Ease off the exercise if you start to have pain.

Your doctor or physical therapist will tell you when you can start these exercises and which ones will work best for you.

When you are not being active, find a comfortable position for rest. Some people are comfortable on the floor or a medium-firm bed with a small pillow under their head and another under their knees. Some people prefer to lie on their side with a pillow between their knees. Don't stay in one position for too long.

Take short walks (10 to 20 minutes) every 2 to 3 hours. Avoid slopes, hills, and stairs until you feel better. Walk only distances you can manage without pain, especially leg pain.

### How to do the exercises

#### Back stretches

1. Get down on your hands and knees on the floor.
2. Relax your head and allow it to droop. Round your back up toward the ceiling until you feel a nice stretch in your upper, middle, and lower back. Hold this stretch for as long as it feels comfortable, or about 15 to 30 seconds.
3. Return to the starting position with a flat back while you are on your hands and knees.
4. Let your back sway by pressing your stomach toward the floor. Lift your buttocks toward the ceiling.
5. Hold this position for 15 to 30 seconds.
6. Repeat 2 to 4 times.

Follow-up care is a key part of your treatment and safety. Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

## Where can you learn more?

Log into your MyChart on <https://www.stlukesonline.org/mychart> and enter Z071 in the search box to learn more about "Acute Low Back Pain: Exercises."

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## Low Back Pain: Exercises

### Introduction

Here are some examples of exercises for you to try. The exercises may be suggested for a condition or for rehabilitation. Start each exercise slowly. Ease off the exercises if you start to have pain.

You will be told when to start these exercises and which ones will work best for you.

### How to do the exercises

#### Press-up

1. Lie on your stomach, supporting your body with your forearms.
2. Press your elbows down into the floor to raise your upper back. As you do this, relax your stomach muscles and allow your back to arch without using your back muscles. As your press up, do not let your hips or pelvis come off the floor.
3. Hold for 15 to 30 seconds, then relax.
4. Repeat 2 to 4 times.

## Alternate arm and leg (bird dog) exercise

1. Start on the floor, on your hands and knees.
2. Tighten your belly muscles.
3. Raise one leg off the floor, and hold it straight out behind you. Be careful not to let your hip drop down, because that will twist your trunk.
4. Hold for about 6 seconds, then lower your leg and switch to the other leg.
5. Repeat 8 to 12 times on each leg.
6. Over time, work up to holding for 10 to 30 seconds each time.

## Knee-to-chest exercise

1. Lie on your back with your knees bent and your feet flat on the floor.
2. Bring one knee to your chest, keeping the other foot flat on the floor (or keeping the other leg straight, whichever feels better on your lower back).
3. Keep your lower back pressed to the floor. Hold for at least 15 to 30 seconds.
4. Relax, and lower the knee to the starting position.
5. Repeat with the other leg. Repeat 2 to 4 times with each leg.
6. To get more stretch, put your other leg flat on the floor while pulling your knee to your chest.

## Curl-ups

1. Lie on the floor on your back with your knees bent at a 90-degree angle. Your feet should be flat on the floor, about 12 inches from your buttocks.
2. Cross your arms over your chest. If this bothers your neck, try putting your hands behind your neck (not your head), with your elbows spread apart.
3. Slowly tighten your belly muscles and raise your shoulder blades off the floor.
4. Keep your head in line with your body, and do not press your chin to your chest.
5. Hold this position for 1 or 2 seconds, then slowly lower yourself back down to the floor.
6. Repeat 8 to 12 times.

## Pelvic tilt exercise

1. Lie on your back with your knees bent.
2. "Brace" your stomach. This means to tighten your muscles by pulling in and imagining your belly button moving toward your spine. You should feel like your back is pressing to the floor and your hips and pelvis are rocking back.
3. Hold for about 6 seconds while you breathe smoothly.
4. Repeat 8 to 12 times.

## Heel dig bridging

1. Lie on your back with both knees bent and your ankles bent so that only your heels are digging into the floor. Your knees should be bent about 90 degrees.
2. Then push your heels into the floor, squeeze your buttocks, and lift your hips off the floor until your shoulders, hips, and knees are all in a straight line.
3. Hold for about 6 seconds as you continue to breathe normally, and then slowly lower your hips back down to the floor and rest for up to 10 seconds.
4. Do 8 to 12 repetitions.

## Hamstring stretch in doorway

1. Lie on your back in a doorway, with one leg through the open door.
2. Slide your leg up the wall to straighten your knee. You should feel a gentle stretch down the back of your leg.
3. Hold the stretch for at least 15 to 30 seconds. Do not arch your back, point your toes, or bend either knee. Keep one heel touching the floor and the other heel touching the wall.
4. Repeat with your other leg.
5. Do 2 to 4 times for each leg.

## Hip flexor stretch

1. Kneel on the floor with one knee bent and one leg behind you. Place your forward knee over your foot. Keep your other knee touching the floor.
2. Slowly push your hips forward until you feel a stretch in the upper thigh of your rear leg.
3. Hold the stretch for at least 15 to 30 seconds. Repeat with your other leg.
4. Do 2 to 4 times on each side.

## Wall sit

1. Stand with your back 10 to 12 inches away from a wall.
2. Lean into the wall until your back is flat against it.
3. Slowly slide down until your knees are slightly bent, pressing your lower back into the wall.
4. Hold for about 6 seconds, then slide back up the wall.
5. Repeat 8 to 12 times.

Follow-up care is a key part of your treatment and safety. Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

## Where can you learn more?

Log into your MyChart on <https://www.stlukesonline.org/mychart> and enter Z938 in the search box to learn more about "Low Back Pain: Exercises."

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## Learning About Relief for Back Pain

### What is back tension and strain?

Back strain happens when you overstretch, or pull, a muscle in your back. You may hurt your back in an accident or when you exercise or lift something.

Most back pain will get better with rest and time. You can take care of yourself at home to help your back heal.

### What can you do first to relieve back pain?

When you first feel back pain, try these steps:

- Walk. Take a short walk (10 to 20 minutes) on a level surface (no slopes, hills, or stairs) every 2 to 3 hours. Walk only distances you can manage without pain, especially leg pain.
- Relax. Find a comfortable position for rest. Some people are comfortable on the floor or a medium-firm bed with a small pillow under their head and another under their knees. Some people prefer to lie on their side with a pillow between their knees. Don't stay in one position for too long.
- Try heat or ice. Try using a heating pad on a low or medium setting, or take a warm shower, for 15 to 20 minutes every 2 to 3 hours. Or you can buy single-use heat wraps that last up to 8 hours. You can also try an ice pack for 10 to 15 minutes every 2 to 3 hours. You can use an ice pack or a bag of frozen vegetables wrapped in a thin towel. There is not strong evidence that either heat or ice will help, but you can try them to see if they help. You may also want to try switching between heat and cold.
- Take pain medicine exactly as directed.

? If the doctor gave you a prescription medicine for pain, take it as prescribed.

? If you are not taking a prescription pain medicine, ask your doctor if you can take an over-the-counter medicine.

### What else can you do?

- Stretch and exercise. Exercises that increase flexibility may relieve your pain and make it easier for your muscles to keep your spine in a good, neutral position. And don't forget to keep walking.
- Do self-massage. You can use self-massage to unwind after work or school or to energize yourself in the morning. You can easily massage your feet, hands, or neck. Self-massage works best if you are in comfortable clothes and are sitting or lying in a comfortable position. Use oil or lotion to massage bare skin.
- Reduce stress. Back pain can lead to a vicious circle: Distress about the pain tenses the muscles in your back, which in turn causes more pain. Learn how to relax your mind and your muscles to lower your stress.

### Where can you learn more?

Log into your MyChart on <https://www.stlukesonline.org/mychart> and enter Q517 in the search box to learn more about "Learning About Relief for Back Pain."

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Electronically signed by Jennifer M. Landry, PA-C at 01/15/2021 9:52 AM MST

## Ordered Prescriptions - documented in this encounter

Prescription	Sig	Dispensed	Refills	Start Date	End Date
cyclobenzaprine (FLEXERIL) 5 MG tablet	Take 1 tablet (5 mg total) by mouth 3 (three) times daily as needed for Muscle spasms.	15 tablet	0	01/15/2021	

## Progress Notes - documented in this encounter

Landry, Jennifer M., PA-C - 01/15/2021 10:00 AM MST

Formatting of this note is different from the original.

Subjective:

Mary Sue Lark is a 64 y.o. female who presents for evaluation of back pain. The patient has had recurrent self limited episodes of low back pain in the past. Symptoms have been present for 13 days and are rapidly worsening starting last night which prevented her sleeping. Onset was related to / precipitated by a twisting movement during yoga. The pain is located in the lower thoracic/upper lumbar area and radiates to the around the waist bilaterally. The pain is described as aching, sharp, stabbing and stiffness and occurs intermittently. She rates her pain as a 3-5/10 at its best, and shot up to a 8/10, currently a 5/10 on a scale of 0-10. Symptoms are exacerbated by lying down and sitting. Symptoms are improved by change in body position and stretching. She has also tried change in body position, exercise, rest, sleep and stretching which provided no symptom relief. She does deny: weakness in the right

leg, weakness in the left leg, tingling in the right leg, tingling in the left leg, burning pain in the right leg, burning pain in the left leg, urinary hesitancy, urinary incontinence, urinary retention, bowel incontinence, constipation, impotence and groin/perineal numbness associated with the back pain. The patient has no "red flag" history indicative of complicated back pain.

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

A comprehensive review of systems was negative except for those reported above in HPI.

#### Objective:

##### Vitals:

01/15/21 1000

BP: 108/74

Pulse: 70

Temp: 36.5 °C (97.7 °F)

TempSrc: Temporal

SpO2: 95%

Weight: 94.7 kg (208 lb 12.4 oz)

Height: 165.1 cm (65")

PainSc: 5-Moderate

PainLoc: Back

Inspection and palpation: paraspinal tenderness noted mid-thoracic region bilaterally.

Muscle tone and ROM exam: muscle spasm noted mid-thoracic region, limited range of motion without pain.

Straight leg raise: positive at 45 degrees on the left.

Neurological: normal DTRs, muscle strength and reflexes.

#### Assessment & Plan:

##### Diagnosis Assessment and Plan

ICD-10-CM

1. Mid-back pain, acute M54.9 cyclobenzaprine (FLEXERIL) 5 MG tablet

Natural history and expected course discussed. Questions answered.

Educational material distributed.

Proper lifting, bending technique discussed.

Stretching exercises discussed.

Patient denies Red Flag s/s of complicated LBP at this time.

Regular aerobic and trunk strengthening exercises discussed.

Short (2-4 day) period of relative rest recommended until acute symptoms improve.

Ice to affected area as needed for local pain relief.

Heat to affected area as needed for local pain relief.

She does report having left over tramadol from her previous Ortho surgery that she can take if needed.

OTC analgesics as needed.

Muscle relaxants per medication orders.

Consider referred to spine wellness if failing to improve or worsening.

PT referral offered, patient declined at this time.

RTC and ED precautions reviewed in detail.

Return if symptoms worsen or fail to improve, for Back pain.

R/B/AR/SE were reviewed in detail and patient expressed verbal understanding and would like to proceed with plan per above.

Electronically signed by Jennifer M. Landry, PA-C at 05/02/2021 5:21 PM MDT

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

## Implants - documented as of this encounter

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfi 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
<b>Screw Low Profile 2.7x14mm Locking Ss Ar- 8827l-14 - Sar-8827l-14</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2
<b>Screw Low Profile 2.7x12mm Locking Ss Ar- 8827l-12 - Sar-8827l-12</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-12 / AR-8827L-12 / 1-092518-2
<b>Screw Low Profile 2.7x16mm Locking Ss Ar- 8827l-16 - Sar-8827l-16</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-16 / AR-8827L-16 / 1-092518-2
<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-12 / AR-8835-12 / 1-092518-2
<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-14 / AR-8835-14 / 1-092518-2

## HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Implant Knotless Syndesmosis Tightrope  
Xp Stainless Steel Ar-8925ss - Sar-8925ss**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL, UHMWPE  
MEDIAL SIDE.

**Screw Low Profile 4x46 Cannulated Long****Thread Stainless Steel Ar-8840cl-46 - Sar-8840cl-46**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
MEDIAL SIDE.

 **Results** - documented in this encounter

Not on file

 **Visit Diagnoses** - documented in this encounter

Diagnosis

Mid-back pain, acute - Primary

 **Insurance** - documented as of this encounter

Payer	Benefit Plan / Group	Subscriber ID	Effective Dates	Phone	Address	Type
COMMERCIAL	CIGNA	10494153000	5/1/2019-Present			Non-Contracted
Guarantor Name	Account Type	Relation to Patient	Date of Birth	Phone	Billing Address	
Lark,Mary Sue	Personal/Family	Self	09/18/1956	925-866-1111 (Home)	935 S Butler Way Lakewood, CO 80226-4213	

## Advance Directives

For more information, please contact: 208-381-2183

### Documents on File

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

### Latest Code Status on File

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

### Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

### Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712	<b>MD Lisa M. Parrillo, MD</b> (Physician (Non Attending)) 208-639-4900 (Work) 208-639-4901 (Fax) 2855 E Magic View Dr Meridian, ID 83642 Urology	Jan. 15, 2021
Custodian Organization <b>St. Luke's Health System</b> Boise, ID 83712		

Encounter Providers	Encounter Date
<b>PA-C Jennifer M. Landry, PA-C</b> (Attending) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Physician Assistant	Jan. 15, 2021

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Reason for Visit

### Reason

Hypertension

## Encounter Details

Date	Type	Department	Care Team
12/16/2020	Office Visit	St. Luke's Clinic Ada Medical Associates - Meridian 3399 E LOUISE DR STE 100 MERIDIAN, ID 83642-5047 208-288-2255	Laky, Devin M., MD 3399 E Louise Dr Suite 100 Meridian, ID 83642 208-288-2255 208-706-2043 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
escitalopram (LEXAPRO) 10 MG tablet	Take 10 mg by mouth Daily.		0	07/31/2020		Active
phenazopyridine (PYRIDIUM) 200 MG tablet	Take 1 tablet (200 mg total) by mouth 3 (three) times daily as needed for Pain.	10 tablet	0	01/21/2020	12/16/2020	Discontinued (Patient stopped taking)
estradiol (ESTRACE) 0.01 % (0.1 mg/gram) vaginal cream	Place 1 g vaginally 3 (three) times a week.	42.5 g	1	06/29/2020	03/15/2021	Discontinued
levothyroxine (SYNTHROID) 50 MCg tablet	Take 1 tablet (50 mcg total) by mouth Daily.	90 tablet	2	08/31/2020	06/02/2021	Discontinued
atorvastatin (LIPITOR) 10 MG tablet	Take half tab 5mg orally every other day x 1 month, then 1 tab 10mg orally every other day x 1 month, then 10mg daily.	90 tablet	0	10/23/2020	01/25/2021	Discontinued
lisinopril (PRINIVIL,ZESTRI) 20 MG tablet	Take 1 tablet (20 mg total) by mouth nightly.	90 tablet	0	11/16/2020	02/10/2021	Discontinued
naltrexone (DEPADE) 50 mg tablet	Take 50 mg by mouth Daily.		0		01/15/2021	Discontinued (Patient stopped taking)

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Essential hypertension	10/02/2020
Impaired fasting blood sugar	06/19/2020
Colon cancer screening declined	08/02/2019
Atrophic vaginitis	07/31/2019
Excessive drinking of alcohol	07/31/2019
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	11/01/2019, 10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD) >OR=6MO PF	09/29/2020, 11/01/2019, 10/04/2019, 10/02/2017	
Tdap	07/31/2019	
Zoster (Shingrix)	02/10/2020, 10/04/2019	

## Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985
Smokeless Tobacco: Never Used				
Alcohol Use	Standard Drinks/Week			
Yes	0 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits	Answer			Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week			08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily			08/02/2019
Physical Activity	Answer			Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days			08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				

## Last Filed Vital Signs - documented in this encounter

Vital Sign	Reading	Time Taken	Comments
Blood Pressure	110/72	12/16/2020 12:44 PM MST	
Pulse	75	12/16/2020 12:44 PM MST	
Temperature	36.8 °C (98.3 °F)	12/16/2020 12:44 PM MST	
Respiratory Rate	-	-	
Oxygen Saturation	95%	12/16/2020 12:44 PM MST	
Inhaled Oxygen Concentration	-	-	
Weight	95 kg (209 lb 7 oz)	12/16/2020 12:44 PM MST	
Height	165.1 cm (5' 5")	12/16/2020 12:44 PM MST	
Body Mass Index	34.85	12/16/2020 12:44 PM MST	

## Progress Notes - documented in this encounter

Laky, Devin M., MD - 12/16/2020 12:45 PM MST

Formatting of this note is different from the original.

Mary Sue Lark is a 64 y.o. female

### Subjective

Chief complaint: Hypertension follow-up from November 16

Mary was here November 16 and we increased her lisinopril to 20 mg. She has tolerated this without shortness of breath or cough. No lightheadedness or chest pain or pressure, palpitations, edema, or shortness of breath. Home BP under 130/80 average. She is completing her stationary bike daily and has no anginal symptoms with this. Sometimes at rest she will get an occasional twinge behind the sternum, but it is only within seconds of duration and dissipates on its own without any lightheadedness or shortness of breath. She has been able to increase her atorvastatin up to 10 mg nightly and is tolerating this well without any claudication or myalgias.

She has started naltrexone through another provider and is continuing her efforts for complete cessation.

### Review of Systems

Constitutional: Negative for chills, diaphoresis, fever, malaise/fatigue and weight loss.

Eyes: Negative for blurred vision.

Respiratory: Negative for cough and shortness of breath.

Cardiovascular: Negative for chest pain and palpitations.

Gastrointestinal: Negative for abdominal pain, diarrhea, nausea and vomiting.

Musculoskeletal: Negative for myalgias.

Neurological: Negative for dizziness, tingling, tremors, seizures, weakness and headaches.

Psychiatric/Behavioral: Negative for depression and substance abuse. The patient is not nervous/anxious and does not have insomnia.

### Current Outpatient Medications

#### Medication Sig Dispense Refill

- atorvastatin (LIPITOR) 10 MG tablet Take half tab 5mg orally every other day x 1 month, then 1 tab 10mg orally every other day x 1 month, then 10mg daily. (Patient taking differently: Take 10 mg by mouth Daily.) 90 tablet 0
- escitalopram (LEXAPRO) 10 MG tablet Take 10 mg by mouth Daily.
- estradiol (ESTRACE) 0.01 % (0.1 mg/gram) vaginal cream Place 1 g vaginally 3 (three) times a week. 42.5 g 1
- levothyroxine (SYNTHROID) 50 MCG tablet Take 1 tablet (50 mcg total) by mouth Daily. 90 tablet 2
- lisinopril (PRINIVIL,ZESTRIL) 20 MG tablet Take 1 tablet (20 mg total) by mouth nightly. 90 tablet 0
- naltrexone (DEPADE) 50 mg tablet Take 50 mg by mouth Daily.

No current facility-administered medications for this visit.

### Wt Readings from Last 3 Encounters:

12/16/20 95 kg (209 lb 7 oz)

11/16/20 94.8 kg (208 lb 15.9 oz)

09/29/20 95.7 kg (210 lb 15.7 oz)

### BP Readings from Last 3 Encounters:

12/16/20 110/72

11/16/20 132/82

09/29/20 142/90

I have reviewed the past medical, surgical, family, and social history sections including the medications and allergies listed in the medical record.

### Objective

BP 110/72 (BP Location: Left upper arm, Patient Position: Sitting, Cuff size: Large Adult 31-40 cm) | Pulse 75 | Temp 36.8 °C (98.3 °F) (Temporal) | Ht 165.1 cm (65") | Wt 95 kg (209 lb 7 oz) | SpO2 95% | BMI 34.85 kg/m<sup>2</sup>

Mood: Congruent, good insight and judgement.

Constitutional: Appears well-developed and well-nourished. No distress. Good hygiene.

Neuro: Alert and oriented. Cranial nerves II through XII gross intact. Stable independent gait. No tremors.

Eyes: EOMI, no nystagmus. PERRL. Anicteric.

Cardiovascular: Normal rate, regular rhythm, normal heart sounds, and intact distal pulses. No murmur, rub, or gallop. No peripheral edema.

Pulmonary/Chest: Normal effort. Clear to auscultation. No respiratory distress. No wheezes, rhonchi, or rales.

### Assessment and Plan

Mary Sue Lark is a 64 y.o. female

### Diagnoses and all orders for this visit:

Essential hypertension (Primary)

Overview:

Asymptomatic. Excellent control on lisinopril 20 mg once daily. Renal function and electrolytes ordered.

Goal BP is less than 130/80. Reinforced the etiology and silent pathophysiologic changes that uncontrolled hypertension can cause as a consequence of not treating.

While genetics may play a role, lifestyle interventions are a key player in managing a normal blood pressure to reduce the risk of stroke and heart disease, including:

- Aim for consistent aerobic exercise for 30-45 min 4-5 days per week.

- Aim for a healthy body weight BMI 20-25.

- Avoid NSAID's (Ibuprofen, Naproxen, Aspirin), opt for Acetaminopen instead.

- Decrease stress when able.

- Stay hydrated.

- Encourage low salt consumption limited to 2000mg daily.

- Do not smoke, limit alcohol, and control your other cardiac risk factors including blood sugar and cholesterol.

\*\*Keep a daily blood pressure log (may vary the time of today). Research values are based on using an upper arm cuff, taken after 5 minutes of rest, your arm at heart level, and feet flat on the floor.\*\*

-Emergently seek care for any new neurologic deficits or cardiopulmonary compromise. Discussed that this is a leading risk factor for stroke.

### Orders:

- COMPREHENSIVE METABOLIC; Future

Hyperlipidemia, mixed

Overview:

Asymptomatic and tolerating primary prevention atorvastatin 10mg once daily. Ordered future lipid and LFT panel.

- Check the American Heart Association website for heart healthy foods.

- Reinforced the etiology and silent pathophysiologic changes that uncontrolled hyperlipidemia can cause as a consequence of not treating. While genetics may play a role, lifestyle interventions make a big impact on cholesterol management, including:

- Aim for routine aerobic exercise 30-45min 4-5 days per week.

- Strive for healthy body weight BMI 20-25.

- Look at nutrition labels and limit trans fats and saturated fats in your diet (butter, cheese, junk food, high fat dairy, fatty cuts of red meat, fried foods, etc.); opt for healthy nuts, olive oil, low-fat dairy, chicken, and fish.

- Increase soluble psyllium fiber (Metamucil) in your diet with ample hydration (also good for the gut).

- Plant sterols 2grams per day (Benecol).

- Decrease stress when able.

- May supplement with Omega 3 fish oil 1200-2000mg daily, and try flax seed meal.

- Do not smoke, avoid alcohol, and control your other cardiac risk factors including blood sugar and blood pressure.

### Orders:

- COMPREHENSIVE METABOLIC; Future

Excessive drinking of alcohol

Overview:

Congratulated on her progress! Encouraged continued efforts for cessation. Using naltrexone through counseling office. Suggested

support programs like AA.

Follow-up in 6 months for annual exam with fasting labs, sooner as needed.

Electronically signed by Devin M. Laky, MD at 12/20/2020 4:42 PM MST

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

## Implants - documented as of this encounter

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfl 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL					
Description: MATERIAL - STAINLESS STEEL LATERAL SIDE					
<b>Screw Low Profile 2.7x14mm Locking Ss Ar- 8827l-14 - Sar-8827l-14</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL					
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE					
<b>Screw Low Profile 2.7x12mm Locking Ss Ar- 8827l-12 - Sar-8827l-12</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-12 / AR-8827L-12 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL					
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE					
<b>Screw Low Profile 2.7x16mm Locking Ss Ar- 8827l-16 - Sar-8827l-16</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-16 / AR-8827L-16 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL					
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE					
<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-12 / AR-8835-12 / 1-092518-2
Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL					

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-14 / AR-8835-14 / 1-092518-2
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Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

<b>Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-22 / AR-8835-22 / 1-092518-2
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Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

<b>Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-26 / AR-8835-26 / 1-092518-2
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Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

<b>Implant Knotless Syndesmosis Tightrope Xp Stainless Steel Ar-8925ss - Sar-8925ss</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8925SS / AR-8925SS / 10224713
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Description: MATERIAL - STAINLESS STEEL, UHMWPE  
MEDIAL SIDE.

<b>Screw Low Profile 4x46 Cannulated Long Thread Stainless Steel Ar-8840cl-46 - Sar-8840cl-46</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL	OTHER IMPLANTS	Left: Ankle	ARTHREX INC	AR-8840CL-46 / AR-8840CL-46 / 1-092518-2
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Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
MEDIAL SIDE.

## Results - documented in this encounter

Not on file

## Visit Diagnoses - documented in this encounter

Diagnosis

Essential hypertension - Primary

Hyperlipidemia, mixed

Excessive drinking of alcohol

## Insurance - documented as of this encounter

Payer	Benefit Plan / Group	Subscriber ID	Effective Dates	Phone	Address	Type
COMMERCIAL	CIGNA	10494153000	5/1/2019-Present			Non-Contracted

Guarantor Name	Account Type	Relation to Patient	Date of Birth	Phone	Billing Address
Lark,Mary Sue	Personal/Family	Self	09/18/1956	925-866-1111 (Home)	935 S Butler Way Lakewood, CO 80226-4213

## Advance Directives

For more information, please contact: 208-381-2183

### Documents on File

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

### Latest Code Status on File

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

### Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

### Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712	<b>MD Lisa M. Parrillo, MD</b> (Physician (Non Attending)) 208-639-4900 (Work) 208-639-4901 (Fax) 2855 E Magic View Dr Meridian, ID 83642 Urology	Dec. 16, 2020

### Custodian Organization

St. Luke's Health System
Boise, ID 83712

### Encounter Providers

MD Devin M. Laky, MD (Attending)	Encounter Date
208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine	Dec. 16, 2020

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Reason for Visit

Reason

Hypertension

## Encounter Details

Date	Type	Department	Care Team
11/16/2020	Office Visit	St. Luke's Clinic Ada Medical Associates - Meridian 3399 E LOUISE DR STE 100 MERIDIAN, ID 83642-5047 208-288-2255	Laky, Devin M., MD 3399 E Louise Dr Suite 100 Meridian, ID 83642 208-288-2255 208-706-2043 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
escitalopram (LEXAPRO) 10 MG tablet	Take 10 mg by mouth Daily.		0	07/31/2020		Active
phenazopyridine (PYRIDIUM) 200 MG tablet	Take 1 tablet (200 mg total) by mouth 3 (three) times daily as needed for Pain.	10 tablet	0	01/21/2020	12/16/2020	Discontinued (Patient stopped taking)
estradiol (ESTRACE) 0.01 % (0.1 mg/gram) vaginal cream	Place 1 g vaginally 3 (three) times a week.	42.5 g	1	06/29/2020	03/15/2021	Discontinued
levothyroxine (SYNTHROID) 50 MCg tablet	Take 1 tablet (50 mcg total) by mouth Daily.	90 tablet	2	08/31/2020	06/02/2021	Discontinued
lisinopril (PRINIVIL,ZESTRIL) 5 MG tablet	Take 1 tablet (5 mg total) by mouth nightly for 7 days, THEN 2 tablets (10 mg total) nightly for 28 days.	63 tablet	0	10/16/2020	11/16/2020	Discontinued (Reorder)
atorvastatin (LIPITOR) 10 MG tablet	Take half tab 5mg orally every other day x 1 month, then 1 tab 10mg orally every other day x 1 month, then 10mg daily.	90 tablet	0	10/23/2020	01/25/2021	Discontinued
lisinopril (PRINIVIL,ZESTRIL) 20 MG tablet	Take 1 tablet (20 mg total) by mouth nightly.	90 tablet	0	11/16/2020	02/10/2021	Discontinued

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Essential hypertension	10/02/2020
Impaired fasting blood sugar	06/19/2020
Colon cancer screening declined	08/02/2019
Atrophic vaginitis	07/31/2019
Excessive drinking of alcohol	07/31/2019
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	11/01/2019, 10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD) >OR=6MO PF	09/29/2020, 11/01/2019, 10/04/2019, 10/02/2017	
Tdap	07/31/2019	
Zoster (Shingrix)	02/10/2020, 10/04/2019	

## Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985
Smokeless Tobacco: Never Used				
Tobacco Cessation: Counseling Given: Yes				
Alcohol Use	Standard Drinks/Week			
Yes	0 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits	Answer			Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week			08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily			08/02/2019
Physical Activity	Answer			Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days			08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				

## Last Filed Vital Signs - documented in this encounter

Vital Sign	Reading	Time Taken	Comments
Blood Pressure	132/82	11/16/2020 12:49 PM MST	
Pulse	77	11/16/2020 12:49 PM MST	
Temperature	36.4 °C (97.5 °F)	11/16/2020 12:49 PM MST	
Respiratory Rate	-	-	
Oxygen Saturation	98%	11/16/2020 12:49 PM MST	
Inhaled Oxygen Concentration	-	-	
Weight	94.8 kg (208 lb 15.9 oz)	11/16/2020 12:49 PM MST	
Height	165.1 cm (5' 5")	11/16/2020 12:49 PM MST	
Body Mass Index	34.78	11/16/2020 12:49 PM MST	

## Patient Instructions - documented in this encounter

### Patient Instructions

Laky, Devin M., MD - 11/16/2020 12:45 PM MST

Formatting of this note might be different from the original.

Goal BP is less than 130/80. Reinforced the etiology and silent pathophysiologic changes that uncontrolled hypertension can cause as a consequence of not treating.

While genetics may play a role, lifestyle interventions are a key player in managing a normal blood pressure to reduce the risk of stroke and heart disease, including:

- Aim for consistent aerobic exercise for 30-45 min 4-5 days per week.

- Aim for a healthy body weight BMI 20-25.

- Avoid NSAID's (Ibuprofen, Naproxen, Aspirin), opt for Acetaminopen instead.

- Decrease stress when able.

- Stay hydrated.

- Encourage low salt consumption limited to 2000mg daily.

- Do not smoke, limit alcohol, and control your other cardiac risk factors including blood sugar and cholesterol.

\*\*Keep a daily blood pressure log (may vary the time of today). Research values are based on using an upper arm cuff, taken after 5 minutes of rest, your arm at heart level, and feet flat on the floor.\*\*

-Emergently seek care for any new neurologic deficits or cardiopulmonary compromise. Discussed that this is a leading risk factor for stroke.

Electronically signed by Devin M. Laky, MD at 11/16/2020 1:00 PM MST

## Ordered Prescriptions - documented in this encounter

Prescription	Sig	Dispensed	Refills	Start Date	End Date
lisinopril (PRINIVIL,ZESTRIL) 20 MG tablet	Take 1 tablet (20 mg total) by mouth nightly.	90 tablet	0	11/16/2020	02/10/2021

## Progress Notes - documented in this encounter

Laky, Devin M., MD - 11/16/2020 12:45 PM MST

Formatting of this note is different from the original.

Mary Sue Lark is a 64 y.o. female

### Subjective

Chief complaint: Hypertension follow-up

Mary was last seen September 29, 2020 and we dialogue about her elevated blood pressure and cholesterol levels. In the interim time (reference patient messages) she opted to initiate lisinopril and atorvastatin therapies.

Blood pressure at home has ranged 120-131/80s. Currently on lisinopril 10 mg once daily. Most often just at that upper margin of normal limits. Denies any intolerances such as dizziness or lightheadedness, cough, shortness of breath, palpitation, chest pain or pressure, edema. Initially she had a sensation that her head and chest were going to pop but this has improved.

She is very gradually starting a trial of atorvastatin half tab every other day x1 month, 1 tab every other day x1 month, then 1 tab daily of low-dose 10 mg. As far she is tolerating without myalgias.

She has lost a couple pounds since last visit. She shares that she stopped drinking in the last couple weeks. She is very glad to be making this effort to cut back. She states that she is no longer going to the grocery store at the end of the day because it is too

tempting to buy a bottle of wine and drink it. She feels fine without any withdrawal diaphoresis, jitters, insomnia, hallucinations, tremor. This has helped her feel successful in her mood and emotional stability are doing well without any swings and depression/sadness, or worry/anxiety.

### Review of Systems

Constitutional: Positive for weight loss. Negative for chills, diaphoresis, fever and malaise/fatigue.

Eyes: Negative for blurred vision.

Respiratory: Negative for cough and shortness of breath.

Cardiovascular: Negative for chest pain and palpitations.

Gastrointestinal: Negative for abdominal pain, diarrhea, nausea and vomiting.

Musculoskeletal: Negative for myalgias.

Neurological: Negative for dizziness, tingling, tremors, seizures, weakness and headaches.

Psychiatric/Behavioral: Negative for depression and substance abuse. The patient is not nervous/anxious and does not have insomnia.

### Current Outpatient Medications

#### Medication Sig Dispense Refill

- atorvastatin (LIPITOR) 10 MG tablet Take half tab 5mg orally every other day x 1 month, then 1 tab 10mg orally every other day x 1 month, then 10mg daily. 90 tablet 0
- escitalopram (LEXAPRO) 10 MG tablet Take 10 mg by mouth Daily.
- estradiol (ESTRACE) 0.01 % (0.1 mg/gram) vaginal cream Place 1 g vaginally 3 (three) times a week. 42.5 g 1
- levothyroxine (SYNTHROID) 50 MCG tablet Take 1 tablet (50 mcg total) by mouth Daily. 90 tablet 2
- lisinopril (PRINIVIL,ZESTRIL) 20 MG tablet Take 1 tablet (20 mg total) by mouth nightly. 90 tablet 0
- phenazopyridine (PYRIDIUM) 200 MG tablet Take 1 tablet (200 mg total) by mouth 3 (three) times daily as needed for Pain. 10 tablet 0

No current facility-administered medications for this visit.

#### Wt Readings from Last 3 Encounters:

11/16/20 94.8 kg (208 lb 15.9 oz)

09/29/20 95.7 kg (210 lb 15.7 oz)

05/15/20 83.9 kg (185 lb)

#### BP Readings from Last 3 Encounters:

11/16/20 132/82

09/29/20 142/90

05/15/20 125/82

I have reviewed the past medical, surgical, family, and social history sections including the medications and allergies listed in the medical record.

### Objective

BP 132/82 (BP Location: Left upper arm, Patient Position: Sitting, Cuff size: Large Adult 31-40 cm) | Pulse 77 | Temp 36.4 °C (97.5 °F) (Temporal) | Ht 165.1 cm (65") | Wt 94.8 kg (208 lb 15.9 oz) | SpO2 98% | BMI 34.78 kg/m<sup>2</sup>

Mood: Congruent, good insight and judgement.

Constitutional: Appears well-developed and well-nourished. No distress. Good hygiene.

Neuro: Alert and oriented. Cranial nerves II through XII gross intact. Stable independent gait. No tremors.

Eyes: EOMI, no nystagmus. PERRL. Anicteric.

Cardiovascular: Normal rate, regular rhythm, normal heart sounds, and intact distal pulses. No murmur, rub, or gallop. No peripheral edema.

Pulmonary/Chest: Normal effort. Clear to auscultation. No respiratory distress. No wheezes, rhonchi, or rales.

### Assessment and Plan

Mary Sue Lark is a 64 y.o. female

### Diagnoses and all orders for this visit:

Essential hypertension (Primary)

Overview:

Asymptomatic. Home BP log appropriate 120-131/80s. Clinic BP at margin of control. Increase to lisinopril 20 mg. Renal function and electrolytes normal today.

Goal BP is less than 130/80. Reinforced the etiology and silent pathophysiologic changes that uncontrolled hypertension can cause as a consequence of not treating.

While genetics may play a role, lifestyle interventions are a key player in managing a normal blood pressure to reduce the risk of stroke and heart disease, including:

- Aim for consistent aerobic exercise for 30-45 min 4-5 days per week.
- Aim for a healthy body weight BMI 20-25.
- Avoid NSAID's (Ibuprofen, Naproxen, Aspirin), opt for Acetaminopen instead.
- Decrease stress when able.
- Stay hydrated.
- Encourage low salt consumption limited to 2000mg daily.
- Do not smoke, limit alcohol, and control your other cardiac risk factors including blood sugar and cholesterol.
- \*\*Keep a daily blood pressure log (may vary the time of today). Research values are based on using an upper arm cuff, taken after 5 minutes of rest, your arm at heart level, and feet flat on the floor.\*\*
- Emergently seek care for any new neurologic deficits or cardiopulmonary compromise. Discussed that this is a leading risk factor for stroke.

Orders:

- BASIC METABOLIC PANEL
- lisinopril (PRINIVIL,ZESTRIL) 20 MG tablet; Take 1 tablet (20 mg total) by mouth nightly.

Excessive drinking of alcohol

Overview:

Congratulated on her progress! Encouraged continued efforts for cessation. Declines medication support at this time. Suggested support programs like AA.

Hyperlipidemia, mixed

Overview:

Asymptomatic and tolerating primary prevention statin therapy with gradual titration of 10 mg tablets: Half tab every other day x1 month, full tab every other day x1 month, then 1 tablet daily. Recheck in 3 months.

- Check the American Heart Association website for heart healthy foods.
- Reinforced the etiology and silent pathophysiologic changes that uncontrolled hyperlipidemia can cause as a consequence of not treating. While genetics may play a role, lifestyle interventions make a big impact on cholesterol management, including:
  - Aim for routine aerobic exercise 30-45min 4-5 days per week.
  - Strive for healthy body weight BMI 20-25.
  - Look at nutrition labels and limit trans fats and saturated fats in your diet (butter, cheese, junk food, high fat dairy, fatty cuts of red meat, fried foods, etc.); opt for healthy nuts, olive oil, low-fat dairy, chicken, and fish.
  - Increase soluble psyllium fiber (Metamucil) in your diet with ample hydration (also good for the gut).
  - Plant sterols 2grams per day (Benecol).
  - Decrease stress when able.
  - May supplement with Omega 3 fish oil 1200-2000mg daily, and try flax seed meal.
  - Do not smoke, avoid alcohol, and control your other cardiac risk factors including blood sugar and blood pressure.

Obesity (BMI 30.0-34.9)

Overview:

Goal BMI 20-25. Lifestyle medicine or nutrition referral always an option. Encourage caloric reduction, opting for low carbohydrate diet rich in vegetables, whole grains, fruits, lean white meats and fish, low-fat dairy. Limit alcohol and excess calories from beverages, opting for water. Limit snacking and food consumption after 7pm. Opt for 3 regular meals throughout the day. Increase fiber for satiety. Increase aerobic activity to 5 days per week, 45-60min, strength training 2 days per week. Consistency stressed as necessary to achieve changes.

Follow-up in 4 to 6 weeks for hypertension with repeat labs, sooner as needed.

Electronically signed by Devin M. Laky, MD at 11/19/2020 9:33 PM MST

Dakota D - 11/16/2020 12:45 PM MST

Formatting of this note might be different from the original.

Left antecubital lab collected. No complications. Aseptic technique

Electronically signed by Dakota D at 11/19/2020 9:33 PM MST

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

## Implants - documented as of this encounter

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfi 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
<b>Screw Low Profile 2.7x14mm Locking Ss Ar- 8827l-14 - Sar-8827l-14</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2
<b>Screw Low Profile 2.7x12mm Locking Ss Ar- 8827l-12 - Sar-8827l-12</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-12 / AR-8827L-12 / 1-092518-2
<b>Screw Low Profile 2.7x16mm Locking Ss Ar- 8827l-16 - Sar-8827l-16</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-16 / AR-8827L-16 / 1-092518-2
<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-12 / AR-8835-12 / 1-092518-2
<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-14 / AR-8835-14 / 1-092518-2

## HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Implant Knotless Syndesmosis Tightrope  
Xp Stainless Steel Ar-8925ss - Sar-8925ss**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL, UHMWPE  
MEDIAL SIDE.

**Screw Low Profile 4x46 Cannulated Long****Thread Stainless Steel Ar-8840cl-46 - Sar-8840cl-46**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
MEDIAL SIDE.

## Results - documented in this encounter

### BASIC METABOLIC PANEL - Final result (11/16/2020 1:04 PM MST)

Component	Value	Ref Range	Performed At	Pathologist Signature
SODIUM	137	135 - 144 mmol/L	SLHS CORE LAB	
POTASSIUM	4.6	3.5 - 5.5 mmol/L	SLHS CORE LAB	
CHLORIDE	105	98 - 107 mmol/L	SLHS CORE LAB	
TOTAL CO2	23	22 - 32 mmol/L	SLHS CORE LAB	
ANION GAP	9	7 - 15 mmol/L	SLHS CORE LAB	
GLUCOSE	<b>110 (H)</b>	60 - 100 mg/dL	SLHS CORE LAB	
CALCIUM	9.3	8.4 - 10.6 mg/dL	SLHS CORE LAB	
BUN	16	7 - 17 mg/dL	SLHS CORE LAB	
CREATININE	0.69	0.52 - 1.04 mg/dL	SLHS CORE LAB	
GFR IF AFRICAN AMERICAN	>90	>=60 ml/min/1.73m2	SLHS CORE LAB	
GFR	86	>=60 ml/min/1.73m2	SLHS CORE LAB	

### Specimen

Blood - Entire blood vessel (body structure)

Performing Organization

SLHS CORE LAB

Address

3176 S. DENVER WAY

City/State/ZIP Code

BOISE, ID 83705

Phone Number



## Visit Diagnoses - documented in this encounter

### Diagnosis

- Essential hypertension - Primary
- Excessive drinking of alcohol
- Hyperlipidemia, mixed
- Obesity (BMI 30.0-34.9)

### Insurance - documented as of this encounter

Payer	Benefit Plan / Group	Subscriber ID	Effective Dates	Phone	Address	Type
COMMERCIAL	CIGNA	10494153000	5/1/2019-Present			Non-Contracted
Guarantor Name	Account Type	Relation to Patient	Date of Birth	Phone	Billing Address	
Lark,Mary Sue	Personal/Family	Self	09/18/1956	925-866-1111 (Home)	935 S Butler Way Lakewood, CO 80226-4213	



### Advance Directives

For more information, please contact: 208-381-2183

### Documents on File

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		



### Latest Code Status on File

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		



### Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

# Document Information

## Primary Care Provider

**MD Devin M. Laky, MD** (Jan. 04, 2018 - Present)  
208-288-2255 (Work)  
208-706-2043 (Fax)  
3399 E Louise Dr  
Suite 100  
Meridian, ID 83642  
Family Medicine  
**St. Luke's Health System**  
Boise, ID 83712

## Other Service Providers

**MD Lisa M. Parrillo, MD** (Physician (Non Attending))  
208-639-4900 (Work)  
208-639-4901 (Fax)  
2855 E Magic View Dr  
Meridian, ID 83642  
Urology

## Document Coverage Dates

Nov. 16, 2020

## Custodian Organization

**St. Luke's Health System**  
Boise, ID 83712

## Encounter Providers

**MD Devin M. Laky, MD** (Attending)  
208-288-2255 (Work)  
208-706-2043 (Fax)  
3399 E Louise Dr  
Suite 100  
Meridian, ID 83642  
Family Medicine

## Encounter Date

Nov. 16, 2020

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Reason for Visit

Reason
Urinary Tract Infection
Flu Vaccine

## Encounter Details

Date	Type	Department	Care Team
09/29/2020	Office Visit	St. Luke's Clinic Ada Medical Associates - Meridian 3399 E LOUISE DR STE 100 MERIDIAN, ID 83642-5047 208-288-2255	Laky, Devin M., MD 3399 E Louise Dr Suite 100 Meridian, ID 83642 208-288-2255 208-706-2043 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
escitalopram (LEXAPRO) 10 MG tablet	Take 10 mg by mouth Daily.		0	07/31/2020		Active
phenazopyridine (PYRIDIUM) 200 MG tablet	Take 1 tablet (200 mg total) by mouth 3 (three) times daily as needed for Pain.	10 tablet	0	01/21/2020	12/16/2020	Discontinued (Patient stopped taking)
estradiol (ESTRACE) 0.01 % (0.1 mg/gram) vaginal cream	Place 1 g vaginally 3 (three) times a week.	42.5 g	1	06/29/2020	03/15/2021	Discontinued
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Daily.	90 tablet	2	08/31/2020	06/02/2021	Discontinued
sulfamethoxazole-trimethoprim (BACTRIM DS) 800-160 mg per tablet	Take 1 tablet by mouth 2 (two) times daily for 3 days.	6 tablet	0	09/29/2020	10/02/2020	Expired

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Essential hypertension	10/02/2020
Impaired fasting blood sugar	06/19/2020
Colon cancer screening declined	08/02/2019
Atrophic vaginitis	07/31/2019
Excessive drinking of alcohol	07/31/2019
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	11/01/2019, 10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD) >OR=6MO PF	09/29/2020, 11/01/2019, 10/04/2019, 10/02/2017	
Tdap	07/31/2019	
Zoster (Shingrix)	02/10/2020, 10/04/2019	

## Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985
Smokeless Tobacco: Never Used				
Alcohol Use	Standard Drinks/Week			
Yes	0 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits	Answer			Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week			08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily			08/02/2019
Physical Activity	Answer			Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days			08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				

## Last Filed Vital Signs - documented in this encounter

Vital Sign	Reading	Time Taken	Comments
Blood Pressure	142/90	09/29/2020 12:17 PM MDT	
Pulse	73	09/29/2020 12:17 PM MDT	
Temperature	36.6 °C (97.8 °F)	09/29/2020 12:17 PM MDT	
Respiratory Rate	-	-	
Oxygen Saturation	98%	09/29/2020 12:17 PM MDT	
Inhaled Oxygen Concentration	-	-	
Weight	95.7 kg (210 lb 15.7 oz)	09/29/2020 12:17 PM MDT	
Height	165.1 cm (5' 5")	09/29/2020 12:17 PM MDT	
Body Mass Index	35.11	09/29/2020 12:17 PM MDT	

## Patient Instructions - documented in this encounter

### Patient Instructions

Laky, Devin M., MD - 09/29/2020 12:15 PM MDT

Formatting of this note might be different from the original.

Images from the original note were not included.

Monitor home BP and if staying above 130/80 let me know as treatment may be needed.

While genetics may play a role, lifestyle interventions are a key player in managing a normal blood pressure to reduce the risk of stroke and heart disease, including:

- Aim for consistent aerobic exercise for 30-45 min 4-5 days per week.
- Aim for a healthy body weight BMI 20-25.
- Avoid NSAID's (Ibuprofen, Naproxen, Aspirin), opt for Acetaminopen instead.
- Decrease stress when able.
- Stay hydrated.
- Encourage low salt consumption limited to 2000mg daily.
- Do not smoke, limit alcohol, and control your other cardiac risk factors including blood sugar and cholesterol.

\*\*Keep a daily blood pressure log (may vary the time of today). Research values are based on using an upper arm cuff, taken after 5 minutes of rest, your arm at heart level, and feet flat on the floor.\*\*

-Emergently seek care for any new neurologic deficits or cardiopulmonary compromise. Discussed that this is a leading risk factor for stroke.

### DASH Diet: Care Instructions

#### Your Care Instructions

The DASH diet is an eating plan that can help lower your blood pressure. DASH stands for Dietary Approaches to Stop Hypertension. Hypertension is high blood pressure.

The DASH diet focuses on eating foods that are high in calcium, potassium, and magnesium. These nutrients can lower blood pressure. The foods that are highest in these nutrients are fruits, vegetables, low-fat dairy products, nuts, seeds, and legumes. But taking calcium, potassium, and magnesium supplements instead of eating foods that are high in those nutrients does not have the same effect. The DASH diet also includes whole grains, fish, and poultry.

The DASH diet is one of several lifestyle changes your doctor may recommend to lower your high blood pressure. Your doctor may also want you to decrease the amount of sodium in your diet. Lowering sodium while following the DASH diet can lower blood pressure even further than just the DASH diet alone.

Follow-up care is a key part of your treatment and safety. Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

How can you care for yourself at home?

Following the DASH diet

- Eat 4 to 5 servings of fruit each day. A serving is 1 medium-sized piece of fruit, ½ cup chopped or canned fruit, 1/4 cup dried fruit, or 4 ounces (½ cup) of fruit juice. Choose fruit more often than fruit juice.
- Eat 4 to 5 servings of vegetables each day. A serving is 1 cup of lettuce or raw leafy vegetables, ½ cup of chopped or cooked vegetables, or 4 ounces (½ cup) of vegetable juice. Choose vegetables more often than vegetable juice.
- Get 2 to 3 servings of low-fat and fat-free dairy each day. A serving is 8 ounces of milk, 1 cup of yogurt, or 1 ½ ounces of cheese.
- Eat 6 to 8 servings of grains each day. A serving is 1 slice of bread, 1 ounce of dry cereal, or ½ cup of cooked rice, pasta, or cooked cereal. Try to choose whole-grain products as much as possible.
- Limit lean meat, poultry, and fish to 2 servings each day. A serving is 3 ounces, about the size of a deck of cards.
- Eat 4 to 5 servings of nuts, seeds, and legumes (cooked dried beans, lentils, and split peas) each week. A serving is 1/3 cup of nuts, 2 tablespoons of seeds, or ½ cup of cooked beans or peas.
- Limit fats and oils to 2 to 3 servings each day. A serving is 1 teaspoon of vegetable oil or 2 tablespoons of salad dressing.
- Limit sweets and added sugars to 5 servings or less a week. A serving is 1 tablespoon jelly or jam, ½ cup sorbet, or 1 cup of

lemonade.

• Eat less than 2,300 milligrams (mg) of sodium a day. If you limit your sodium to 1,500 mg a day, you can lower your blood pressure even more.

#### Tips for success

• Start small. Do not try to make dramatic changes to your diet all at once. You might feel that you are missing out on your favorite foods and then be more likely to not follow the plan. Make small changes, and stick with them. Once those changes become habit, add a few more changes.

• Try some of the following:

? Make it a goal to eat a fruit or vegetable at every meal and at snacks. This will make it easy to get the recommended amount of fruits and vegetables each day.

? Try yogurt topped with fruit and nuts for a snack or healthy dessert.

? Add lettuce, tomato, cucumber, and onion to sandwiches.

? Combine a ready-made pizza crust with low-fat mozzarella cheese and lots of vegetable toppings. Try using tomatoes, squash, spinach, broccoli, carrots, cauliflower, and onions.

? Have a variety of cut-up vegetables with a low-fat dip as an appetizer instead of chips and dip.

? Sprinkle sunflower seeds or chopped almonds over salads. Or try adding chopped walnuts or almonds to cooked vegetables.

? Try some vegetarian meals using beans and peas. Add garbanzo or kidney beans to salads. Make burritos and tacos with mashed pinto beans or black beans.

Where can you learn more?

Log into your MyChart on <https://www.stlukesonline.org/mychart> and enter H967 in the search box to learn more about "DASH Diet: Care Instructions."

Current as of: December 15, 2019 Content Version: 12.4

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Electronically signed by Devin M. Laky, MD at 09/29/2020 12:40 PM MDT

## Ordered Prescriptions - documented in this encounter

Prescription	Sig	Dispensed	Refills	Start Date	End Date
sulfamethoxazole-trimethoprim (BACTRIM DS) 800-160 mg per tablet	Take 1 tablet by mouth 2 (two) times daily for 3 days.	6 tablet	0	09/29/2020	10/02/2020

## Progress Notes - documented in this encounter

Laky, Devin M., MD - 09/29/2020 12:15 PM MDT

Formatting of this note is different from the original.

Mary Sue Lark is a 64 y.o. female

Subjective

CC: dysuria

Mary has had recurrent bladder infections previously and is certain that with onset in the last 24 hours of dysuria, urinary frequency and urgency, that she has a UTI again. She bikes often and this predisposes her to perineal irritation and dryness, but truly enjoys the activity and is consistent. She uses vaginal estrogen to help with prophylaxis. She has tried Azo.

Noted elevated BP and perhaps due to UTI discomfort and will trend. She has a BP cuff at home with which she can check values. Noted at other appointments recently slight elevations, but no associated symptoms.

### Review of Systems

Constitutional: Negative for chills and fever.

Respiratory: Negative for shortness of breath.

Cardiovascular: Negative for chest pain and palpitations.

Gastrointestinal: Negative for abdominal pain, nausea and vomiting.

Genitourinary: Positive for dysuria, frequency and urgency. Negative for flank pain and hematuria.

Neurological: Negative for dizziness and headaches.

### Current Outpatient Medications

#### Medication Sig Dispense Refill

- escitalopram (LEXAPRO) 10 MG tablet Take 10 mg by mouth Daily.

- estradioL (ESTRACE) 0.01 % (0.1 mg/gram) vaginal cream Place 1 g vaginally 3 (three) times a week. 42.5 g 1
- levothyroxine (SYNTHROID) 50 MCG tablet Take 1 tablet (50 mcg total) by mouth Daily. 90 tablet 2
- phenazopyridine (PYRIDIUM) 200 MG tablet Take 1 tablet (200 mg total) by mouth 3 (three) times daily as needed for Pain. (Patient not taking: Reported on 9/29/2020) 10 tablet 0

No current facility-administered medications for this visit.

Wt Readings from Last 3 Encounters:

09/29/20 95.7 kg (210 lb 15.7 oz)

05/15/20 83.9 kg (185 lb)

03/02/20 91.6 kg (201 lb 15.1 oz)

BP Readings from Last 3 Encounters:

09/29/20 142/90

05/15/20 125/82

03/02/20 132/83

I have reviewed the past medical, surgical, family, and social history sections including the medications and allergies listed in the medical record.

#### Objective

BP 142/90 (BP Location: Left upper arm, Patient Position: Sitting, Cuff size: Large Adult 31-40 cm) | Pulse 73 | Temp 36.6 °C (97.8 °F) (Temporal) | Ht 165.1 cm (65") | Wt 95.7 kg (210 lb 15.7 oz) | SpO2 98% | BMI 35.11 kg/m<sup>2</sup>

Mood: Congruent, good insight and judgement.

Constitutional: Appears well-developed and well-nourished. No distress. Good hygiene.

Neuro: Alert and oriented. CN II-XII grossly intact. Stable independent gait.

Eyes: EOMI, no nystagmus. PERRL. Anicteric.

Nose: Breathing comfortably. Symmetric. No discharge.

Cardiovascular: Normal rate, regular rhythm, normal heart sounds, and intact distal pulses. No murmur, rub, or gallop. No peripheral edema.

Pulmonary/Chest: Normal effort. Clear to auscultation. No respiratory distress. No wheezes, rhonchi, or rales.

Abdominal: Soft. Non-distended. Mild suprapubic regional discomfort on palpation. No rebound or guarding. Normal bowel tones. No organomegaly, nor firm or pulsatile masses. No flank pain.

#### Lab Results

Component Value Date

COLORU yellow 09/29/2020

CLARITYU cloudy 09/29/2020

GLUCOSEUR neg 09/29/2020

BILIRUBINUR neg 09/29/2020

KETONESU neg 09/29/2020

SPECGRAV 1.020 09/29/2020

RBCUR Trace-Intact 09/29/2020

PHUR 7.0 09/29/2020

PROTEINUA neg 09/29/2020

UROBILINOGEN 0.2 09/29/2020

NITRITE positive 09/29/2020

LEUKOCYTESUR 2+ 09/29/2020

#### Assesment and Plan

Mary Sue Lark is a 64 y.o. female

1. Acute cystitis with hematuria

2. Dysuria

Initiate Bactrim therapy as per prior UCx results. Increase water hydration. Continue vaginal estrogen. If recurrent consider daily antimicrobial prophylaxis. Follow-up if symptoms become associated with fever, nausea/vomiting, intense abdominal or flank pain, hematuria, or new concerns. Has seen urology if needed.

- POCT urinalysis dipstick

- Urine Culture; Future

- sulfamethoxazole-trimethoprim (BACTRIM DS) 800-160 mg per tablet; Take 1 tablet by mouth 2 (two) times daily for 3 days.

Dispense: 6 tablet; Refill: 0

- Urine Culture

3. Elevated BP without diagnosis of hypertension

Goal BP is less than 130/80. Reinforced the etiology and silent pathophysiologic changes that uncontrolled hypertension can cause as a consequence of not treating.

While genetics may play a role, lifestyle interventions are a key player in managing a normal blood pressure to reduce the risk of stroke and heart disease, including:

- Aim for consistent aerobic exercise for 30-45 min 4-5 days per week.

- Aim for a healthy body weight BMI 20-25.

- Avoid NSAID's (Ibuprofen, Naproxen, Aspirin), opt for Acetaminopen instead.

- Decrease stress when able.

- Stay hydrated.

- Encourage low salt consumption limited to 2000mg daily. DASH diet given.

- Do not smoke, limit alcohol, and control your other cardiac risk factors including blood sugar and cholesterol.

\*\*Keep a daily blood pressure log (may vary the time of today). Research values are based on using an upper arm cuff, taken after 5 minutes of rest, your arm at heart level, and feet flat on the floor.\*\*

-Emergently seek care for any new neurologic deficits or cardiopulmonary compromise. Discussed that this is a leading risk factor for stroke.

- MyChart BP Flowsheet; Future

#### 4. Need for influenza vaccination

- INFLUENZA (FLUZONE QUAD) >OR=6MO PF 0.5ML INTRAMUSCULAR, NOW

Follow-up June 2021 for thyroid, sooner as needed.

Electronically signed by Devin M. Laky, MD at 10/04/2020 9:47 AM MDT

Dakota D - 09/29/2020 12:15 PM MDT

Formatting of this note might be different from the original.

Patient presented today for immunizations.

Received Flu per standing orders.

Diluent: N/A

Patient tolerated the administration? Yes

Reviewed side effects from VIS? Yes

Self present.

The information below was gathered and reviewed with Dr. Laky.

Patient observed for 15 minutes after Flu administration.

- Patient is alert and interactive? Yes

- Is patient breathing comfortably on room air? Yes

- Any inflammation, swelling, or significant pain of injection site? No

- Any flushing or rashes noted? No

- Any changes in mental status. No

- Dizziness/lightheadedness? No

- Shortness of breath? No

- Swelling of mouth or tongue? No

- Hives? No

- Pain: 0/10 on verbal pain scale.

VERBAL ORDERS WERE REPEATED BACK TO PROVIDER FOR CONFIRMATION?: Yes

Electronically signed by Dakota D at 10/04/2020 9:47 AM MDT



## Plan of Treatment - documented as of this encounter

### Scheduled Orders

Name	Type	Priority	Associated Diagnoses	Order Schedule
MYCHART BP FLOWSHEET	Procedures	Routine	Elevated BP without diagnosis of hypertension	1 Occurrences starting 09/29/2020 until 09/29/2021
Health Maintenance	Due Date	Last Done	Comments	
Hepatitis C Screening	<b>09/18/1956</b>			
HPV Screening	<b>09/18/1986</b>			
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists		
Colon Cancer Screening: Colonoscopy	12/20/2021	Postponed from 09/18/2006 (Patient advised to receive but declines)		
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015		
Breast Cancer Screening	06/01/2023	06/01/2021		
Tetanus / Tdap Immunization (3 - 07/31/2029 Td or Tdap)	07/31/2019, 11/05/2008			
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019		

### Implants - documented as of this encounter

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfi 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
<b>Screw Low Profile 2.7x14mm Locking Ss Ar- 8827l-14 - Sar-8827l-14</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2
<b>Screw Low Profile 2.7x12mm Locking Ss Ar- 8827l-12 - Sar-8827l-12</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-12 / AR-8827L-12 / 1-092518-2
<b>Screw Low Profile 2.7x16mm Locking Ss Ar- 8827l-16 - Sar-8827l-16</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-16 / AR-8827L-16 / 1-092518-2
<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-12 / AR-8835-12 / 1-092518-2

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-14 / AR-8835-14 / 1-092518-2
Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

<b>Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-22 / AR-8835-22 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

<b>Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-26 / AR-8835-26 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

<b>Implant Knotless Syndesmosis Tightrope Xp Stainless Steel Ar-8925ss - Sar-8925ss</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8925SS / AR-8925SS / 10224713
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				

Description: MATERIAL - STAINLESS STEEL, UHMWPE  
MEDIAL SIDE.

<b>Screw Low Profile 4x46 Cannulated Long Thread Stainless Steel Ar-8840cl-46 - Sar-8840cl-46</b>	OTHER IMPLANTS	Left: Ankle	ARTHREX INC	AR-8840CL-46 / AR-8840CL-46 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
MEDIAL SIDE.

## Results - documented in this encounter

### URINE CULTURE - Final result (09/29/2020 12:30 PM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
URINE CULTURE	<b>20,000-30,000 CFU/mL Mixed periurethral flora present (A)</b>		SLHS CORE LAB	

#### Specimen

Urine - Urine specimen collection, clean catch (procedure)

#### Narrative

Mixed periurethral flora present. Probable contamination. Susceptibilities not indicated. Suggest repeat specimen if patient's symptoms suggest a urinary tract infection.

Performed At

SLHS CORE LAB

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	

### POCT PERFORM URINE DIPSTICK (POCT URINALYSIS DIPSTICK) - Final result (09/29/2020 12:30 PM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
COLOR UA	yellow		PORTE ADA MEDICAL ASSOCIATES	
CLARITY UA	cloudy		PORTE ADA MEDICAL	

ASSOCIATES			
GLUCOSE UA	neg	NEG mg/dl	PORTE ADA MEDICAL ASSOCIATES
BILIRUBIN UA	neg	NEG	PORTE ADA MEDICAL ASSOCIATES
KETONES UA	neg	NEG	PORTE ADA MEDICAL ASSOCIATES
SPECIFIC GRAVITY UA	1.020	1.001 - 1.035	PORTE ADA MEDICAL ASSOCIATES
RBC UA	Trace-Intact	NEG	PORTE ADA MEDICAL ASSOCIATES
PH UA	7.0	5 - 9	PORTE ADA MEDICAL ASSOCIATES
PROTEIN UA	neg	NEG	PORTE ADA MEDICAL ASSOCIATES
UROBILINOGEN UA	0.2	0 - 1 mg/dl	PORTE ADA MEDICAL ASSOCIATES
NITRITES UA	positive	NEG	PORTE ADA MEDICAL ASSOCIATES
LEUKOCYTES EST	2+	NEG	PORTE ADA MEDICAL ASSOCIATES
URINE SENT FOR CULTURE?	Yes		PORTE ADA MEDICAL ASSOCIATES
URINE SOURCE, POC	Clean Catch Urine		PORTE ADA MEDICAL ASSOCIATES

#### Specimen

Urine

Performing Organization	Address	City/State/ZIP Code	Phone Number
PORTE ADA MEDICAL ASSOCIATES	3399 E LOUISE DRIVE SUITE 100	Meridian, ID 83642-5047	208-288-2255

#### Visit Diagnoses - documented in this encounter

##### Diagnosis

Acute cystitis with hematuria - Primary

##### Dysuria

Elevated BP without diagnosis of hypertension

Need for influenza vaccination

## Insurance - documented as of this encounter

Payer	Benefit Plan / Group	Subscriber ID	Effective Dates	Phone	Address	Type
COMMERCIAL	CIGNA	10494153000	5/1/2019-Present			Non-Contracted
Guarantor Name	Account Type	Relation to Patient	Date of Birth	Phone	Billing Address	
Lark,Mary Sue	Personal/Family	Self	09/18/1956	925-866-1111 (Home)	935 S Butler Way Lakewood, CO 80226-4213	

## F Advance Directives

For more information, please contact: 208-381-2183

### Documents on File

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

### Latest Code Status on File

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

## G Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

# Document Information

## Primary Care Provider

**MD Devin M. Laky, MD** (Jan. 04, 2018 - Present)  
208-288-2255 (Work)  
208-706-2043 (Fax)  
3399 E Louise Dr  
Suite 100  
Meridian, ID 83642  
Family Medicine  
**St. Luke's Health System**  
Boise, ID 83712

## Other Service Providers

## Document Coverage Dates

Sep. 29, 2020

## Custodian Organization

**St. Luke's Health System**  
Boise, ID 83712

## Encounter Providers

## Encounter Date

**MD Devin M. Laky, MD** (Attending)  
208-288-2255 (Work)  
208-706-2043 (Fax)  
3399 E Louise Dr  
Suite 100  
Meridian, ID 83642  
Family Medicine

Sep. 29, 2020

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Reason for Visit

### Reason

Dysuria

## Encounter Details

Date	Type	Department	Care Team
05/15/2020	Office Visit	St. Luke's Clinic Ada Medical Associates - Meridian 3399 E LOUISE DR STE 100 MERIDIAN, ID 83642-5047 208-288-2255	Laky, Devin M., MD 3399 E Louise Dr Suite 100 Meridian, ID 83642 208-288-2255 208-706-2043 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
phenazopyridine (PYRIDIUM) 200 MG tablet	Take 1 tablet (200 mg total) by mouth 3 (three) times daily as needed for Pain.	10 tablet	0	01/21/2020	12/16/2020	Discontinued (Patient stopped taking)
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Daily.	90 tablet	1	03/02/2020	08/31/2020	Discontinued
progesterone micronized (PROMETRIUM) 200 MG capsule	Take 1 capsule (200 mg total) by mouth Daily.	90 capsule	1	03/02/2020	05/15/2020	Discontinued (Therapy completed)
estradiol 10 mcg Tab	Place 10 mcg vaginally 2 (two) times a week.	24 tablet	1	03/02/2020	05/15/2020	Discontinued (Therapy completed)
estradiol (ESTRACE) 0.01 % (0.1 mg/gram) vaginal cream	Apply intravaginally 2 grams every day for 2 weeks, then reduce to 3 days per week.	42.5 each	0	05/15/2020	06/04/2020	Discontinued

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Colon cancer screening declined	08/02/2019
Atrophic vaginitis	07/31/2019
Excessive drinking of alcohol	07/31/2019
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	11/01/2019, 10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULALVAL, FLUARIX, FLUZONE QUAD) >OR=6MO PF	11/01/2019, 10/04/2019, 10/02/2017	
Tdap	07/31/2019	
Zoster (Shingrix)	02/10/2020, 10/04/2019	

## Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985
Smokeless Tobacco: Never Used				
Alcohol Use				
Yes	Standard Drinks/Week	0 (1 standard drink = 0.6 oz pure alcohol)		
Alcohol Habits	Answer			Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week			08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily			08/02/2019
Physical Activity	Answer			Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days			08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				

## Last Filed Vital Signs - documented in this encounter

Vital Sign	Reading	Time Taken	Comments
Blood Pressure	125/82	05/15/2020 11:18 AM MDT	
Pulse	74	05/15/2020 11:18 AM MDT	
Temperature	37 °C (98.6 °F)	05/15/2020 11:18 AM MDT	
Respiratory Rate	-	-	
Oxygen Saturation	98%	05/15/2020 11:18 AM MDT	
Inhaled Oxygen Concentration	-	-	
Weight	83.9 kg (185 lb)	05/15/2020 11:18 AM MDT	
Height	165.1 cm (5' 5")	05/15/2020 11:18 AM MDT	
Body Mass Index	30.79	05/15/2020 11:18 AM MDT	

## Patient Instructions - documented in this encounter

### Patient Instructions

Laky, Devin M., MD - 05/15/2020 11:15 AM MDT

Formatting of this note is different from the original.

Images from the original note were not included.

#### Atrophic Vaginitis: Care Instructions

##### Your Care Instructions

Atrophic vaginitis is an irritation of the vagina. It's caused by thinning tissues and less moisture in the vaginal walls. It often happens during menopause when hormone levels change. Surgery to remove the ovaries also can cause it. Your doctor may do tests to rule out other causes. And you may get tests to measure your hormone levels.

The problem is most often treated with the hormone estrogen. It comes in a cream, tablets, or a soft plastic ring that is placed in the vagina.

Follow-up care is a key part of your treatment and safety. Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

How can you care for yourself at home?

- Use a water-based lubricant for your vagina if sex is dry or painful. Examples are Astroglide, Wet Lubricant Gel, and K-Y Jelly.
- Talk with your doctor about using low-dose vaginal estrogen. It treats dryness and thinning tissue.
- Do not douche.
- Having sex improves blood flow to the vagina. This helps keep your tissue healthy.

When should you call for help?

Watch closely for changes in your health, and be sure to contact your doctor if:

- You have unexpected vaginal bleeding.
- You do not get better as expected.

Where can you learn more?

Log into your MyChart on <https://www.stlukesonline.org/mychart> and enter R330 in the search box to learn more about "Atrophic Vaginitis: Care Instructions."

Current as of: November 7, 2019 Content Version: 12.4

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Electronically signed by Devin M. Laky, MD at 05/15/2020 11:58 AM MDT

## Ordered Prescriptions - documented in this encounter

Prescription	Sig	Dispensed	Refills	Start Date	End Date
estradiol (ESTRACE) 0.01 % (0.1 mg/gram) vaginal cream	Apply intravaginally 2 grams every day for 2 weeks, then reduce to 3 days per week.	42.5 each	0	05/15/2020	06/04/2020

## Progress Notes - documented in this encounter

Laky, Devin M., MD - 05/15/2020 11:15 AM MDT

Formatting of this note is different from the original.

Mary Sue Lark is a 63 y.o. female

Subjective

CC: dysuria, possible UTI

Mary expresses that she continues to have the sensation of burning with urination that is very discomforting. She had initial relief when treated for her UTI 1/21/2020 with nitrofurantoin and phenazopyridine, but this pattern of pain returns. UCx at that time showed mixed periurethral flora. She has tried an estrogen suppository. Previously from an outside provider used a Rx bioidentical that worked well with this estrogen suppository. However, we discontinued this as in March as I do not prescribe bioidenticals, while she maintained estrogen suppository with a progesterone tab. She is frustrated that she is dry and irritated around the urethra and vagina and it always feels as though she has a UTI. Azo in the past had really helped but she refrained from using it before today's appointment and urine sample. Denies flank pain, fevers, chills, urinary urgency or frequency, hematuria, nausea, vomiting, change in BM or abdominal pain. States that she maintains ample hydration throughout her day. Diet doesn't seem to change her symptoms.

OB History  
Gravida Para Term Preterm AB Living  
1 1 1  
SAB TAB Ectopic Multiple Live Births

# Outcome Date GA Lbr Len/2nd Weight Sex Delivery Anes PTL Lv  
1 Para

#### Obstetric Comments

Gynecology surgeries: Cesarean

Menarche: 15yo

Menopause: 48yo, 2004

Pap smear: 2018, no abnormal hx.

Denies vaginal discharge, odor, pruritus, lesions, or abnormal bleeding.

Denies breast pain, masses, skin changes, nipple discharge or bleeding, or axillary lymphadenopathy.

#### Review of Systems

Constitutional: Negative for chills and fever.

Respiratory: Negative for cough and shortness of breath.

Cardiovascular: Negative for chest pain and palpitations.

Gastrointestinal: Negative for abdominal pain, constipation, diarrhea, nausea and vomiting.

Genitourinary: Positive for dysuria. Negative for flank pain, frequency, hematuria and urgency.

Musculoskeletal: Negative for back pain.

Neurological: Negative for dizziness and headaches.

#### Current Outpatient Medications

Medication Sig Dispense Refill

- levothyroxine (SYNTHROID) 50 MCG tablet Take 1 tablet (50 mcg total) by mouth Daily. 90 tablet 1
- phenazopyridine (PYRIDIUM) 200 MG tablet Take 1 tablet (200 mg total) by mouth 3 (three) times daily as needed for Pain. 10 tablet 0
- estradiol (ESTRACE) 0.01 % (0.1 mg/gram) vaginal cream Apply intravaginally 2 grams every day for 2 weeks, then reduce to 3 days per week. 42.5 each 0

No current facility-administered medications for this visit.

#### Wt Readings from Last 3 Encounters:

05/15/20 83.9 kg (185 lb)

03/02/20 91.6 kg (201 lb 15.1 oz)

07/31/19 90.6 kg (199 lb 11.8 oz)

#### BP Readings from Last 3 Encounters:

05/15/20 125/82

03/02/20 132/83

01/21/20 142/82

I have reviewed the past medical, surgical, family, and social history sections including the medications and allergies listed in the medical record.

#### Objective

BP 125/82 (BP Location: Left upper arm, Patient Position: Sitting, Cuff size: Large Adult 31-40 cm) | Pulse 74 | Temp 37 °C (98.6 °F) (Oral) | Ht 165.1 cm (65") | Wt 83.9 kg (185 lb) | SpO2 98% | BMI 30.79 kg/m<sup>2</sup>

Mood: Congruent, good insight and judgement.

Constitutional: Appears well-developed and well-nourished. No distress. Good hygiene.

Neuro: Alert and oriented.

Eyes: PERRL.

Cardiovascular: Normal rate, regular rhythm, normal heart sounds, and intact distal pulses. No murmur, rub, or gallop.

Pulmonary/Chest: Normal effort. Clear to auscultation. No respiratory distress. No wheezes, rhonchi, or rales.

GU: patient declines

Urinalysis: trace LE, SG 1.010

Urine culture: negative

#### Assessment and Plan

Mary Sue Lark is a 63 y.o. female

## 1. Atrophic vaginitis

- estradiol (ESTRACE) 0.01 % (0.1 mg/gram) vaginal cream; Apply intravaginally 2 grams every day for 2 weeks, then reduce to 3 days per week. Dispense: 42.5 each; Refill: 0

## 2. Dysuria

- POCT urinalysis dipstick
- Urine Culture
- Ambulatory referral to Urology

Reassured no evidence of UTI nor indication for antibiotic therapy at this time. Increase hydration for comfort and avoid diuretics. She declined a pelvic examination today which I explained could be helpful to look for cystocele or lichen sclerosus as well which is treated differently. Suspect differential of atrophic vaginitis and potentially interstitial cystitis. Educated and provided handout on atrophic vaginitis. Will try estrogen cream instead of suppository as she may be able to place this nearer to urethra for comfort as well as vaginal introitus. She will also be referred to urology for consult given her level of discomfort and frustration. Follow-up as needed.

Electronically signed by Devin M. Laky, MD at 05/18/2020 8:38 AM MDT

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

## Implants - documented as of this encounter

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfi 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL					
Description: MATERIAL - STAINLESS STEEL LATERAL SIDE					
<b>Screw Low Profile 2.7x14mm Locking Ss Ar- 8827l-14 - Sar-8827l-14</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL					
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE					
<b>Screw Low Profile 2.7x12mm Locking Ss Ar- 8827l-12 - Sar-8827l-12</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-12 / AR-8827L-12 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL					
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE					

<b>Screw Low Profile 2.7x16mm Locking Ss Ar-8827l-16 - Sar-8827l-16</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8827L-16 / AR-8827L-16 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-12 / AR-8835-12 / 1-092518-2
Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-14 / AR-8835-14 / 1-092518-2
Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-22 / AR-8835-22 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-26 / AR-8835-26 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Implant Knotless Syndesmosis Tightrope Xp Stainless Steel Ar-8925ss - Sar-8925ss</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8925SS / AR-8925SS / 10224713
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL, UHMWPE MEDIAL SIDE.				
<b>Screw Low Profile 4x46 Cannulated Long Thread Stainless Steel Ar-8840cl-46 - Sar-8840cl-46</b>	OTHER IMPLANTS	Left: Ankle	ARTHREX INC	AR-8840CL-46 / AR-8840CL-46 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. MEDIAL SIDE.				

## Results - documented in this encounter

### URINE CULTURE - Final result (05/15/2020 12:12 PM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
URINE CULTURE	No Growth 16 hrs		SLHS CORE LAB	
Specimen				
Urine - Urine specimen collection, clean catch (procedure)				
Performing Organization	Address	City/State/ZIP Code	Phone Number	
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705		

POCT PERFORM URINE DIPSTICK (POCT URINALYSIS DIPSTICK) - Final result (05/15/2020 11:38 AM MDT)

Component	Value	Ref Range	Performed At	Pathologist Signature
COLOR UA	yellow		PORTE ADA MEDICAL ASSOCIATES	
CLARITY UA	slightly cloudy		PORTE ADA MEDICAL ASSOCIATES	
GLUCOSE UA	neg	NEG mg/dl	PORTE ADA MEDICAL ASSOCIATES	
BILIRUBIN UA	neg	NEG	PORTE ADA MEDICAL ASSOCIATES	
KETONES UA	neg	NEG	PORTE ADA MEDICAL ASSOCIATES	
SPECIFIC GRAVITY UA	1.010	1.001 - 1.035	PORTE ADA MEDICAL ASSOCIATES	
RBC UA	neg	NEG	PORTE ADA MEDICAL ASSOCIATES	
PH UA	6.0	5 - 9	PORTE ADA MEDICAL ASSOCIATES	
PROTEIN UA	neg	NEG	PORTE ADA MEDICAL ASSOCIATES	
UROBILINOGEN UA	0.2	0 - 1 mg/dl	PORTE ADA MEDICAL ASSOCIATES	
NITRITES UA	neg	NEG	PORTE ADA MEDICAL ASSOCIATES	
LEUKOCYTES EST	trace	NEG	PORTE ADA MEDICAL ASSOCIATES	
URINE SENT FOR CULTURE?	Yes		PORTE ADA MEDICAL ASSOCIATES	
URINE SOURCE, POC	Clean Catch Urine		PORTE ADA MEDICAL ASSOCIATES	

#### Specimen

Urine

Performing Organization	Address	City/State/ZIP Code	Phone Number
PORTE ADA MEDICAL ASSOCIATES	3399 E LOUISE DRIVE SUITE 100	Meridian, ID 83642-5047	208-288-2255

#### Visit Diagnoses - documented in this encounter

Diagnosis

Atrophic vaginitis - Primary

Dysuria

## Insurance - documented as of this encounter

Payer	Benefit Plan / Group	Subscriber ID	Effective Dates	Phone	Address	Type
COMMERCIAL	CIGNA	10494153000	5/1/2019-Present			Non-Contracted
Guarantor Name	Account Type	Relation to Patient	Date of Birth	Phone	Billing Address	
Lark,Mary Sue	Personal/Family	Self	09/18/1956	925-866-1111 (Home)	935 S Butler Way Lakewood, CO 80226-4213	

## F Advance Directives

For more information, please contact: 208-381-2183

### Documents on File

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

### Latest Code Status on File

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

## G Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

# Document Information

## Primary Care Provider

**MD Devin M. Laky, MD** (Jan. 04, 2018 - Present)  
208-288-2255 (Work)  
208-706-2043 (Fax)  
3399 E Louise Dr  
Suite 100  
Meridian, ID 83642  
Family Medicine  
**St. Luke's Health System**  
Boise, ID 83712

## Other Service Providers

## Document Coverage Dates

May 15, 2020

## Custodian Organization

**St. Luke's Health System**  
Boise, ID 83712

## Encounter Providers

## Encounter Date

**MD Devin M. Laky, MD** (Attending)  
208-288-2255 (Work)  
208-706-2043 (Fax)  
3399 E Louise Dr  
Suite 100  
Meridian, ID 83642  
Family Medicine

May 15, 2020

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Encounter Details

Date	Type	Department	Care Team
03/02/2020	Travel		

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

No known medications

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Colon cancer screening declined	08/02/2019
Atrophic vaginitis	07/31/2019
Excessive drinking of alcohol	07/31/2019
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	11/01/2019, 10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD)>OR=6MO PF	11/01/2019, 10/04/2019, 10/02/2017	
Tdap	07/31/2019	
Zoster (Shingrix)	02/10/2020, 10/04/2019	

### Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985
Smokeless Tobacco: Never Used				
Alcohol Use	Standard Drinks/Week			
Yes	0 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits	Answer			Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week			08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily			08/02/2019
Physical Activity	Answer			Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days			08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				

### Last Filed Vital Signs - documented in this encounter

Not on file
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### Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

### Implants - documented as of this encounter

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfi 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL					
Description: MATERIAL - STAINLESS STEEL LATERAL SIDE					
<b>Screw Low Profile 2.7x14mm Locking Ss Ar-</b> ORTHO Left: Ankle ARTHREX INC AR-8827L-14 /					

<b>8827I-14 - Sar-8827I-14</b>	Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL	IMPLANTS		AR-8827L-14 / 1-092518-2
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE				
<b>Screw Low Profile 2.7x12mm Locking Ss Ar- 8827I-12 - Sar-8827I-12</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8827L-12 / AR-8827L-12 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE				
<b>Screw Low Profile 2.7x16mm Locking Ss Ar- 8827I-16 - Sar-8827I-16</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8827L-16 / AR-8827L-16 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE				
<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-12 / AR-8835-12 / 1-092518-2
Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE				
<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-14 / AR-8835-14 / 1-092518-2
Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE				
<b>Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-22 / AR-8835-22 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE				
<b>Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-26 / AR-8835-26 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE				
<b>Implant Knotless Syndesmosis Tightrope Xp Stainless Steel Ar-8925ss - Sar-8925ss</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8925SS / AR-8925SS / 10224713
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL, UHMWPE MEDIAL SIDE.				
<b>Screw Low Profile 4x46 Cannulated Long Thread Stainless Steel Ar-8840cl-46 - Sar- 8840cl-46</b>	OTHER IMPLANTS	Left: Ankle	ARTHREX INC	AR-8840CL-46 / AR-8840CL-46 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. MEDIAL SIDE.				

	Results - documented in this encounter
	Not on file

## Insurance - documented as of this encounter

Payer	Benefit Plan / Group	Subscriber ID	Effective Dates	Phone	Address	Type
COMMERCIAL	CIGNA	10494153000	5/1/2019-Present			Non-Contracted

## Advance Directives

For more information, please contact: 208-381-2183

### Documents on File

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

### Latest Code Status on File

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

## Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

## Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712		Mar. 02, 2020
Custodian Organization		
<b>St. Luke's Health System</b> Boise, ID 83712		
Encounter Providers		Encounter Date

Mar. 02, 2020

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Reason for Visit

### Reason

Cough

## Encounter Details

Date	Type	Department	Care Team
03/02/2020	Office Visit	St. Luke's Clinic Ada Medical Associates - Meridian 3399 E LOUISE DR STE 100 MERIDIAN, ID 83642-5047 208-288-2255	Laky, Devin M., MD 3399 E Louise Dr Suite 100 Meridian, ID 83642 208-288-2255 208-706-2043 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
estradiol 10 mcg Tab	Place 10 mcg vaginally 2 (two) times a week.		0	05/31/2018	03/02/2020	Discontinued (Reorder)
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Daily.	90 tablet	3	06/26/2019	03/02/2020	Discontinued (Reorder)
phenazopyridine (PYRIDIUM) 200 MG tablet	Take 1 tablet (200 mg total) by mouth 3 (three) times daily as needed for Pain.	10 tablet	0	01/21/2020	12/16/2020	Discontinued (Patient stopped taking)
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Daily.	90 tablet	1	03/02/2020	08/31/2020	Discontinued
amoxicillin-clavulanate (AUGMENTIN) 875-125 mg per tablet	Take 1 tablet by mouth 2 (two) times daily for 7 days.	14 tablet	0	03/02/2020	03/09/2020	Expired
benzonatate 100 MG capsule	Take 1-2 capsules (100-200 mg total) by mouth 3 (three) times daily as needed for Cough.	20 capsule	0	03/02/2020	03/22/2020	Expired
progesterone micronized (PROMETRIUM) 200 MG capsule	Take 1 capsule (200 mg total) by mouth Daily.	90 capsule	1	03/02/2020	05/15/2020	Discontinued (Therapy completed)
estradiol 10 mcg Tab	Place 10 mcg vaginally 2 (two) times a week.	24 tablet	1	03/02/2020	05/15/2020	Discontinued (Therapy completed)

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Colon cancer screening declined	08/02/2019
Atrophic vaginitis	07/31/2019
Excessive drinking of alcohol	07/31/2019
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	11/01/2019, 10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD) >OR=6MO PF	11/01/2019, 10/04/2019, 10/02/2017	
Tdap	07/31/2019	
Zoster (Shingrix)	02/10/2020, 10/04/2019	

## Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985
Smokeless Tobacco: Never Used				
Alcohol Use				
Yes	Standard Drinks/Week	0 (1 standard drink = 0.6 oz pure alcohol)		
Alcohol Habits	Answer			Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week			08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily			08/02/2019
Physical Activity	Answer			Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days			08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				

## Last Filed Vital Signs - documented in this encounter

Vital Sign	Reading	Time Taken	Comments
Blood Pressure	132/83	03/02/2020 12:38 PM MST	
Pulse	95	03/02/2020 12:38 PM MST	
Temperature	37.8 °C (100 °F)	03/02/2020 12:38 PM MST	
Respiratory Rate	-	-	
Oxygen Saturation	98%	03/02/2020 12:38 PM MST	
Inhaled Oxygen Concentration	-	-	
Weight	91.6 kg (201 lb 15.1 oz)	03/02/2020 12:38 PM MST	
Height	165.1 cm (5' 5")	03/02/2020 12:38 PM MST	
Body Mass Index	33.6	03/02/2020 12:38 PM MST	

## Patient Instructions - documented in this encounter

### Patient Instructions

Laky, Devin M., MD - 03/02/2020 12:30 PM MST

Formatting of this note is different from the original.

Images from the original note were not included.

### Bronchitis: Care Instructions

#### Your Care Instructions

Bronchitis is inflammation of the bronchial tubes, which carry air to the lungs. The tubes swell and produce mucus, or phlegm. The mucus and inflamed bronchial tubes make you cough. You may have trouble breathing.

Most cases of bronchitis are caused by viruses like those that cause colds. Antibiotics usually do not help and they may be harmful. Bronchitis usually develops rapidly and lasts about 2 to 3 weeks in otherwise healthy people.

Follow-up care is a key part of your treatment and safety. Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

#### How can you care for yourself at home?

- Take all medicines exactly as prescribed. Call your doctor if you think you are having a problem with your medicine.
- Get some extra rest.
- Take an over-the-counter pain medicine, such as acetaminophen (Tylenol), ibuprofen (Advil, Motrin), or naproxen (Aleve) to reduce fever and relieve body aches. Read and follow all instructions on the label.
- Do not take two or more pain medicines at the same time unless the doctor told you to. Many pain medicines have acetaminophen, which is Tylenol. Too much acetaminophen (Tylenol) can be harmful.
- Take an over-the-counter cough medicine that contains dextromethorphan to help quiet a dry, hacking cough so that you can sleep. Avoid cough medicines that have more than one active ingredient. Read and follow all instructions on the label.
- Breathe moist air from a humidifier, hot shower, or sink filled with hot water. The heat and moisture will thin mucus so you can cough it out.
- Do not smoke. Smoking can make bronchitis worse. If you need help quitting, talk to your doctor about stop-smoking programs and medicines. These can increase your chances of quitting for good.

#### When should you call for help?

Call 911 anytime you think you may need emergency care. For example, call if:

- You have severe trouble breathing.

Call your doctor now or seek immediate medical care if:

- You have new or worse trouble breathing.
- You cough up dark brown or bloody mucus (sputum).
- You have a new or higher fever.
- You have a new rash.

Watch closely for changes in your health, and be sure to contact your doctor if:

- You cough more deeply or more often, especially if you notice more mucus or a change in the color of your mucus.
- You are not getting better as expected.

#### Where can you learn more?

Log into your MyChart on [www.stlukesonline.org/mychart](http://www.stlukesonline.org/mychart) and enter H333 in the search box to learn more about "Bronchitis: Care Instructions."

Current as of: June 9, 2019

Content Version: 12.2

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## Hormone Therapy (HT): Care Instructions

### Your Care Instructions

Hormone therapy (HT) is medicine to treat symptoms of menopause, such as hot flashes, vaginal dryness, and sleep problems. It replaces the hormones that drop at menopause. Most women get relief from these symptoms within weeks of starting HT. HT contains two female hormones, estrogen and progestin. HT may come in the form of a pill, patch, gel, spray, or vaginal ring. A vaginal cream or a vaginal ring that has a much lower dose of estrogen may be used to relieve vaginal dryness only. HT has some risks. Most doctors recommend that women only take HT for as short a time as possible. This is to reduce the chances of heart disease, breast cancer, blood clots, and stroke that may be connected to HT. Be sure to have regular checkups with your doctor when taking HT.

Talk with your doctor about whether HT is right for you. If you decide that the benefits of HT outweigh the risks, ask your doctor to prescribe the lowest effective dose for as short a time as possible.

Follow-up care is a key part of your treatment and safety. Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

Why might you take HT?

- HT reduces symptoms of menopause. These include hot flashes, mood swings, and sleep problems.
- The estrogen in HT helps to prevent thinning bones. And it may lower the chance of colon cancer.
- HT helps keep the lining of the vagina moist and thick. This can reduce irritation.
- HT helps protect against dental problems, such as tooth loss and gum disease.

What are the risks of taking HT?

- Some women who take HT may have vaginal bleeding, bloating, nausea, sore breasts, mood swings, and headaches. Talk to your doctor about changing the type of HT you take or lowering the dose. This may help to end these side effects.
- Taking HT may slightly increase your risk for heart disease, breast cancer, ovarian cancer, blood clots, and stroke.
- You should not take HT if you:

? Could be pregnant.

? Have a personal history of breast cancer, endometrial cancer, pulmonary embolism, deep vein thrombosis, heart attack, or stroke.

? Have vaginal bleeding from an unknown cause.

? Have active liver disease.

What can you do to reduce the symptoms of menopause?

- Eat healthy foods and get regular exercise. This also will help to maintain strong bones and a healthy heart.
- Do not smoke. If you smoke, you can reduce hot flashes and long-term health risks by stopping. If you need help quitting, talk to your doctor about stop-smoking programs and medicines. These can increase your chances of quitting for good.
- Practice daily breathing exercises (meditation) to reduce hot flashes and mood swings.
- Limit the amount of alcohol you drink. This can reduce symptoms of menopause and long-term health risks.
- Keep your home and office cool.
- Use a vaginal lubricant, such as Astroglide, Wet Gel Lubricant, or K-Y Jelly.

· Do pelvic floor (Kegel) exercises, which tighten and strengthen pelvic muscles. To do Kegel exercises:

? Squeeze the same muscles you would use to stop your urine. Your belly and thighs should not move.

? Hold the squeeze for 3 seconds, then relax for 3 seconds.

? Start with 3 seconds. Then add 1 second each week until you are able to squeeze for 10 seconds.

? Repeat the exercise 10 to 15 times a session. Do three or more sessions a day.

Where can you learn more?

Log into your MyChart on [www.stlukesonline.org/mychart](http://www.stlukesonline.org/mychart) and enter V552 in the search box to learn more about "Hormone Therapy (HT): Care Instructions."

Current as of: February 19, 2019

Content Version: 12.2

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Electronically signed by Auston Whitmer at 03/02/2020 1:56 PM MST

## Ordered Prescriptions - documented in this encounter

Prescription	Sig	Dispensed	Refills	Start Date	End Date
estradiol 10 mcg Tab	Place 10 mcg vaginally 2 (two) times a week.	24 tablet	1	03/02/2020	05/15/2020
progesterone micronized (PROMETRIUM) 200 MG capsule	Take 1 capsule (200 mg total) by mouth Daily.	90 capsule	1	03/02/2020	05/15/2020
benzonatate 100 MG capsule	Take 1-2 capsules (100-200 mg total) by mouth 3 (three) times daily as needed for Cough.	20 capsule	0	03/02/2020	03/22/2020
amoxicillin-clavulanate (AUGMENTIN) 875-125 mg per tablet	Take 1 tablet by mouth 2 (two) times daily for 7 days.	14 tablet	0	03/02/2020	03/09/2020
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Daily.	90 tablet	1	03/02/2020	08/31/2020

## Progress Notes - documented in this encounter

Laky, Devin M., MD - 03/02/2020 12:30 PM MST

Formatting of this note is different from the original.

### Subjective:

Mary Sue Lark is a 63 y.o. female who presents for evaluation of fever, nasal congestion, productive cough and sore throat. Symptoms began 7 days ago. Symptoms have been unchanged since that time. She has been taking Mucinex DM and Nyquil with little relief. Denies ear pain or pressure, nausea, vomiting, diarrhea. She did get her influenza vaccine. No one else at home is sick. She states she had adverse gastrointestinal reaction to a "4 day course antibiotic" but cannot recall the exact name, possibly azithromycin. Denies difficulty breathing or wheezing.

At the end of the acute care visit appointment she states she also would like a refill of an unknown combined compounded hormone that has DHEA in it, vaginal estradiol, and levothyroxine prescriptions. She has been on HRT prescribed by her OBGYN previously but cannot recall the name of her prior provider. She feels better when on her exercise bike having vaginal moisture, otherwise the skin tears. She has a mother with hx of ovarian cancer. She would prefer to stay on a progesterone option for uterine protection. No family hx of breast cancer or blood clots. Former smoker. Denies palpitations, temperature intolerance, BM/Skin/Hair/Nail changes on current thyroid dosing.

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

### Review of Systems

Pertinent items are noted in HPI.

### Objective:

BP 132/83 (BP Location: Left upper arm, Patient Position: Sitting, Cuff size: Large Adult 31-40 cm) | Pulse 95 | Temp 37.8 °C (100 °F) (Oral) | Ht 165.1 cm (65") | Wt 91.6 kg (201 lb 15.1 oz) | SpO2 98% | BMI 33.60 kg/m<sup>2</sup>

Mood: Congruent, good insight and judgement.

Constitutional: Appears well-developed and well-nourished. No distress. Good hygiene.

Neuro: Alert and oriented.

Head: No pain on palpation of frontal or maxillary sinuses.

Neck: Supple. Trachea midline. Thyroid smooth, non-tender.

Lymph: No submental, submandibular, supraclavicular, cervical lymphadenopathy.

Eyes: EOMI, no nystagmus. PERRL. Anicteric. No scleral or conjunctival injection. No discharge.

Ears: Bilateral TM's with normal cone of light. Normal EAC. No pain on manipulation.

Nose: Breathing comfortably. Symmetric. Clear discharge.

Mouth: Mucosa & gingiva normal. Oropharynx without exudate or erythema. No tonsillar swelling. Uvula midline.

Cardiovascular: Normal rate, regular rhythm, normal heart sounds, and intact distal pulses. No murmur, rub, or gallop.

Pulmonary/Chest: Normal effort. Clear to auscultation. No respiratory distress. Bibasilar crackles and expiratory wheezing.

POCT Influenza A/B: negative

### Assessment:

1. Bronchitis amoxicillin-clavulanate (AUGMENTIN) 875-125 mg per tablet

- benzonatate 100 MG capsule  
 2. Flu-like symptoms POCT Influenza A/B  
 3. Acquired hypothyroidism levothyroxine (SYNTHROID) 50 MCG tablet  
 4. Atrophic vaginitis estradiol 10 mcg Tab  
 5. Post-menopause on HRT (hormone replacement therapy) progesterone micronized (PROMETRIUM) 200 MG capsule

**Plan:**

1-2. No respiratory distress. Clinical exam consistent with a bronchitis, likely viral, but given the bibasilar crackles with fever we will opt to treat with a biotic therapy. She does not want to use azithromycin. Begin amoxicillin-clavulanate (Augmentin) 875-125 mg tab by mouth twice daily for 7 days. Advised patient to take probiotic while on antibiotic therapy. Patient education handout provided and reviewed: Bronchitis care instructions.

Begin benzonatate 100 mg 1-2 tabs as needed for cough.

Flonase use as directed for nasal inflammation and congestion.

Rest, fluids, Ibuprofen and acetaminophen, and humidification.

Advised patient of worsening signs and symptoms for which to seek care.

3. TSH normal 6/2019, refilled 6 months levothyroxine until next annual exam and labs.

4-5. Patient has been on postmenopausal vaginal estrogen and a compounded cream. Risks and benefits of post menopausal hormone replacement therapy are reviewed including cardiovascular disease, thromboembolic disease, breast and gynecologic cancer risk, while improving vasomotor symptoms, vaginal atrophy, and bone density. Family history of breast or gynecologic cancer includes: mother with ovarian cancer. Due for mammogram, no family hx of breast cancer. Uterus intact. Smoking status: former. Family history of osteoporosis or hip fractures: none. Will review alternatives including paroxetine, gabapentin. Advised low risk of systematic effects or cancer stimulation from a local vaginal estrogen that can be taken as monotherapy, but she would prefer to use progesterone for hyperplasia prevention. Over-the-counter vaginal lubricants may be tried. Hormone therapy handout provided.

Follow-up at 6 months for annual exam, sooner as needed.

Note: I did spend 25 minutes with the patient and greater than 50% of that time was spent face to face discussing and educating regarding diagnosis of bronchitis and antibiotic and probiotic adverse effects and indications, anticipated infection course, in addition to postmenopausal hormone therapy options, adverse effects, and benefits with prognosis for follow up plan. Patient voiced understanding of plan.

Electronically signed by Devin M. Laky, MD at 03/03/2020 7:25 AM MST

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

## Implants - documented as of this encounter

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfl 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2

## HOSPITAL

Description: MATERIAL - STAINLESS STEEL

LATERAL SIDE

**Screw Low Profile 2.7x14mm Locking Ss Ar-****8827l-14 - Sar-8827l-14**Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP

LATERAL SIDE

**Screw Low Profile 2.7x12mm Locking Ss Ar-****8827l-12 - Sar-8827l-12**Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.

LATERAL SIDE

**Screw Low Profile 2.7x16mm Locking Ss Ar-****8827l-16 - Sar-8827l-16**Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.

LATERAL SIDE

**Screw Low Profile 3.5x12mm Cortical****Stainless Steel Ar-8835-12 - Sar-8835-12**Implanted: Qty: 2 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.

LATERAL SIDE

**Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14**Implanted: Qty: 2 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.

LATERAL SIDE

**Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22**Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.

LATERAL SIDE

**Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26**Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.

LATERAL SIDE

**Implant Knotless Syndesmosis Tightrope****Xp Stainless Steel Ar-8925ss - Sar-8925ss**Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL, UHMWPE

MEDIAL SIDE

**Screw Low Profile 4x46 Cannulated Long****Thread Stainless Steel Ar-8840cl-46 - Sar-****8840cl-46**Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

ORTHO  
IMPLANTS

Left: Ankle

ARTHREX INC

AR-8827L-14 /

AR-8827L-14 /

1-092518-2

ORTHO  
IMPLANTS

Left: Ankle

ARTHREX INC

AR-8827L-12 /

AR-8827L-12 /

1-092518-2

ORTHO  
IMPLANTS

Left: Ankle

ARTHREX INC

AR-8827L-16 /

AR-8827L-16 /

1-092518-2

ORTHO  
IMPLANTS

Left: Ankle

ARTHREX INC

AR-8835-12 /

AR-8835-12 /

1-092518-2

ORTHO  
IMPLANTS

Left: Ankle

ARTHREX INC

AR-8835-14 /

AR-8835-14 /

1-092518-2

ORTHO  
IMPLANTS

Left: Ankle

ARTHREX INC

AR-8835-22 /

AR-8835-22 /

1-092518-2

ORTHO  
IMPLANTS

Left: Ankle

ARTHREX INC

AR-8835-26 /

AR-8835-26 /

1-092518-2

OTHER  
IMPLANTS

Left: Ankle

ARTHREX INC

AR-8840CL-46 /

AR-8840CL-46 /

1-092518-2

## Results - documented in this encounter

### POCT INFLUENZA A/B - Final result (03/02/2020 12:57 PM MST)

Component	Value	Ref Range	Performed At	Pathologist Signature
RAPID INFLUENZA A AGN	Negative	Negative	PORTE ADA MEDICAL ASSOCIATES	
RAPID INFLUENZA B AGN	Negative	Negative	PORTE ADA MEDICAL ASSOCIATES	
INFLUENZA TEST LOT#	8,315,849		PORTE ADA MEDICAL ASSOCIATES	
EXPIRATION DATE	11/11/2021		PORTE ADA MEDICAL ASSOCIATES	
CONTROLS OKAY?	Yes		PORTE ADA MEDICAL ASSOCIATES	

### Specimen

Upper Resp/Eye/Ear

Performing Organization	Address	City/State/ZIP Code	Phone Number
PORTE ADA MEDICAL ASSOCIATES	3399 E LOUISE DRIVE SUITE 100	Meridian, ID 83642-5047	208-288-2255

## Visit Diagnoses - documented in this encounter

### Diagnosis

Bronchitis - Primary

Flu-like symptoms

Acquired hypothyroidism

Atrophic vaginitis

Post-menopause on HRT (hormone replacement therapy)

## Insurance - documented as of this encounter

Payer	Benefit Plan / Group	Subscriber ID	Effective Dates	Phone	Address	Type
COMMERCIAL	CIGNA	10494153000	5/1/2019-Present			Non-Contracted
Guarantor Name	Account Type	Relation to Patient	Date of Birth	Phone	Billing Address	
Lark,Mary Sue	Personal/Family	Self	09/18/1956	925-866-1111 (Home)	935 S Butler Way Lakewood, CO 80226-4213	

## Advance Directives

For more information, please contact: 208-381-2183

### Documents on File

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

### Latest Code Status on File

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

### Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

### Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712		Mar. 02, 2020
Custodian Organization		
<b>St. Luke's Health System</b> Boise, ID 83712		

Encounter Providers	Encounter Date
<b>MD Devin M. Laky, MD</b> (Attending) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine	Mar. 02, 2020

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Reason for Visit

### Reason

Dysuria

## Encounter Details

Date	Type	Department	Care Team
01/21/2020	Hospital Encounter	Eagle Urgent Care 3101 E STATE ST EAGLE, ID 83616-6232 208-473-3100	<b>Borst, Alicia R., PA-C</b> 3080 E Gentry Way Suite 210 Meridian, ID 83642 208-384-9022 208-388-1683 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
estradiol 10 mcg Tab	Place 10 mcg vaginally 2 (two times a week.		0	05/31/2018	03/02/2020	Discontinued (Reorder)
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Daily.	90 tablet	3	06/26/2019	03/02/2020	Discontinued (Reorder)
nitrofurantoin, macrocrystal-monohydrate, (MACROBID) 100 MG capsule	Take 1 capsule (100 mg total) by mouth 2 (two) times daily for 7 days.	14 capsule	0	01/21/2020	01/28/2020	Expired
phenazopyridine (PYRIDIUM) 200 MG tablet	Take 1 tablet (200 mg total) by mouth 3 (three) times daily as needed for Pain.	10 tablet	0	01/21/2020	12/16/2020	Discontinued (Patient stopped taking)

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Colon cancer screening declined	08/02/2019
Atrophic vaginitis	07/31/2019
Excessive drinking of alcohol	07/31/2019
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	11/01/2019, 10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULALVAL, FLUARIX, FLUZONE QUAD) >OR=6MO PF	11/01/2019, 10/04/2019, 10/02/2017	
Tdap	07/31/2019	
Zoster (Shingrix)	10/04/2019	

## Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985
Smokeless Tobacco: Never Used				
Alcohol Use				
Yes	Standard Drinks/Week	0 (1 standard drink = 0.6 oz pure alcohol)		
Alcohol Habits	Answer			Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week			08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily			08/02/2019
Physical Activity	Answer			Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days			08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				

## Last Filed Vital Signs - documented in this encounter

Vital Sign	Reading	Time Taken	Comments
Blood Pressure	142/82	01/21/2020 6:49 PM MST	
Pulse	64	01/21/2020 6:49 PM MST	
Temperature	36.6 °C (97.9 °F)	01/21/2020 6:49 PM MST	
Respiratory Rate	16	01/21/2020 6:49 PM MST	
Oxygen Saturation	97%	01/21/2020 6:49 PM MST	
Inhaled Oxygen Concentration	-	-	
Weight	-	-	
Height	-	-	
Body Mass Index	-	-	

## Discharge Instructions - documented in this encounter

### Attachments

The following attachments were made available to the patient upon discharge.

UTI (Urinary Tract Infection): Female (English)

### Medications at Time of Discharge - documented as of this encounter

Medication	Sig	Dispensed	Refills	Start Date	End Date
nitrofurantoin, macrocrystal-monohydrate, (MACROBID) 100 MG capsule	Take 1 capsule (100 mg total) by mouth 2 (two) times daily for 7 days.	14 capsule	0	01/21/2020	01/28/2020
estradiol 10 mcg Tab	Place 10 mcg vaginally 2 (two) times a week.		0	05/31/2018	03/02/2020
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Daily.	90 tablet	3	06/26/2019	03/02/2020
phenazopyridine (PYRIDIUM) 200 MG tablet	Take 1 tablet (200 mg total) by mouth 3 (three) times daily as needed for Pain.	10 tablet	0	01/21/2020	12/16/2020

### Ordered Prescriptions - documented in this encounter

Prescription	Sig	Dispensed	Refills	Start Date	End Date
phenazopyridine (PYRIDIUM) 200 MG tablet	Take 1 tablet (200 mg total) by mouth 3 (three) times daily as needed for Pain.	10 tablet	0	01/21/2020	12/16/2020
nitrofurantoin, macrocrystal-monohydrate, (MACROBID) 100 MG capsule	Take 1 capsule (100 mg total) by mouth 2 (two) times daily for 7 days.	14 capsule	0	01/21/2020	01/28/2020

### Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

### Implants - documented as of this encounter

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfl 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL					
Description:MATERIAL - STAINLESS STEEL LATERAL SIDE					
<b>Screw Low Profile 2.7x14mm Locking Ss Ar- 8827l-14 - Sar-8827l-14</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary,					

Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP  
LATERAL SIDE

**Screw Low Profile 2.7x12mm Locking Ss Ar-8827l-12 - Sar-8827l-12** ORTHO IMPLANTS Left: Ankle ARTHREX INC AR-8827L-12 / AR-8827L-12 / 1-092518-2

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE

**Screw Low Profile 2.7x16mm Locking Ss Ar-8827l-16 - Sar-8827l-16** ORTHO IMPLANTS Left: Ankle ARTHREX INC AR-8827L-16 / AR-8827L-16 / 1-092518-2

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12** ORTHO IMPLANTS Left: Ankle ARTHREX INC AR-8835-12 / AR-8835-12 / 1-092518-2

Implanted: Qty: 2 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14** ORTHO IMPLANTS Left: Ankle ARTHREX INC AR-8835-14 / AR-8835-14 / 1-092518-2

Implanted: Qty: 2 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22** ORTHO IMPLANTS Left: Ankle ARTHREX INC AR-8835-22 / AR-8835-22 / 1-092518-2

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26** ORTHO IMPLANTS Left: Ankle ARTHREX INC AR-8835-26 / AR-8835-26 / 1-092518-2

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Implant Knotless Syndesmosis Tightrope Xp Stainless Steel Ar-8925ss - Sar-8925ss** ORTHO IMPLANTS Left: Ankle ARTHREX INC AR-8925SS / AR-8925SS / 10224713

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL, UHMWPE  
MEDIAL SIDE.

**Screw Low Profile 4x46 Cannulated Long Thread Stainless Steel Ar-8840cl-46 - Sar-8840cl-46** OTHER IMPLANTS Left: Ankle ARTHREX INC AR-8840CL-46 / AR-8840CL-46 / 1-092518-2

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
MEDIAL SIDE.

## Results - documented in this encounter

URINE CULTURE - Final result (01/21/2020 7:07 PM MST)

Component	Value	Ref Range	Performed At	Pathologist Signature
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URINE CULTURE >100,000 CFU/mL Mixed periurethral flora present (A) SLHS REFERENCE LAB

Specimen

Urine - Urine specimen collection, clean catch (procedure)

Narrative

Mixed periurethral flora present. Probable contamination. Susceptibilities not indicated. Suggest repeat specimen if patient's symptoms suggest a urinary tract infection.

Performed At

SLHS REFERENCE LAB

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	
SLHS REFERENCE LAB	3176 S. DENVER WAY	BOISE, ID 83705, USA	

POCT URINALYSIS AUTOMATED - Final result (01/21/2020 6:57 PM MST)

Component	Value	Ref Range	Performed At	Pathologist Signature
COLOR UA	Yellow	Yellow	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	
CLARITY UA	<b>Cloudy (A)</b>	Clear	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	
SPECIFIC GRAVITY UA	1.025	>1.002-<1.030	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	
PH UA	6.0	4.5 - 8.0	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	
GLUCOSE UA	Negative	Negative	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	
PROTEIN UA	<b>2+ (A)</b>	Negative	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	
KETONES UA	Negative	Negative	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	
BILIRUBIN UA	Negative	Negative	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	
OCCULT BLOOD UA	<b>3+ (A)</b>	Negative	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	
LEUKOCYTES UA	<b>2+ (A)</b>	Negative	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	
NITRITES UA	Negative	Negative	SLHS EMC SL EAGLE MEDICAL PLAZA DRAW	

Specimen

Urine

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS EMC SL EAGLE MEDICAL PLAZA DRAW STATION	3101 E STATE STREET	EAGLE, ID 83616-6232	208-473-3020

**Visit Diagnoses** - documented in this encounter

Diagnosis

Acute cystitis without hematuria - Primary

**Administered Medications** - documented in this encounter

Inactive Administered Medications - up to 3 most recent administrations

Medication Order	MAR Action	Action Date	Dose	Rate	Site
nitrofurantoin (macrocrystal-monohydrate) (MACROBID) 100 MG capsule 100 mg 100 mg, Oral, Once, On Tue 1/21/20 at 1918, For 1 dose	Given	01/21/2020 7:10 PM MST	100 mg		

**Insurance** - documented as of this encounter

Payer	Benefit Plan / Group	Subscriber ID	Effective Dates	Phone	Address	Type
COMMERCIAL	CIGNA	10494153000	5/1/2019-Present			Non-Contracted
Guarantor Name	Account Type	Relation to Patient	Date of Birth	Phone	Billing Address	

Lark,Mary Sue      Personal/Family Self      09/18/1956      925-866-1111 (Home)      935 S Butler Way Lakewood, CO 80226-4213

**Advance Directives**

For more information, please contact: 208-381-2183

**Documents on File**

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

**Latest Code Status on File**

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

**Patient Contacts**

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

# Document Information

## Primary Care Provider

**MD Devin M. Laky, MD** (Jan. 04, 2018 - Present)  
208-288-2255 (Work)  
208-706-2043 (Fax)  
3399 E Louise Dr  
Suite 100  
Meridian, ID 83642  
Family Medicine  
**St. Luke's Health System**  
Boise, ID 83712

## Other Service Providers

## Document Coverage Dates

Jan. 21, 2020

## Custodian Organization

**St. Luke's Health System**  
Boise, ID 83712

## Encounter Providers

## Encounter Date

**PA-C Alicia R. Borst, PA-C** (Attending)  
208-384-9022 (Work)  
208-388-1683 (Fax)  
3080 E Gentry Way  
Suite 210  
Meridian, ID 83642  
Physician Assistant

Jan. 21, 2020

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Reason for Visit

### Reason

Annual Wellness Visit

## Encounter Details

Date	Type	Department	Care Team
07/31/2019	Office Visit	St. Luke's Clinic Ada Medical Associates - Meridian 3399 E LOUISE DR STE 100 MERIDIAN, ID 83642-5047 208-288-2255	Laky, Devin M., MD 3399 E Louise Dr Suite 100 Meridian, ID 83642 208-288-2255 208-706-2043 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019	Discontinued (Patient stopped taking)
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	40 tablet	0	10/11/2018	07/31/2019	Discontinued (Patient stopped taking)
estradiol 10 mcg Tab	Place 10 mcg vaginally 2 (two) times a week.		0	05/31/2018	03/02/2020	Discontinued (Reorder)
nitrofurantoin, macrocrystal-monohydrate, (MACROBID) 100 MG capsule	TK 1 C PO Q 12 H WF FOR 7 DAYS		0	08/08/2018	07/31/2019	Discontinued (Patient stopped taking)
terbinafine HCl (LAMISIL) 250 mg tablet	TK 1 T PO QD		2	09/29/2018	07/31/2019	Discontinued (Patient stopped taking)
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Daily.	90 tablet	3	06/26/2019	03/02/2020	Discontinued (Reorder)
varicella-zoster gE-AS01B, PF, (SHINGRIX) 50 mcg/0.5 mL SusR injection	Inject 0.5 mLs into the muscle once for 1 dose. Repeat dose in 2-6 months.	0.5 mL	0	07/31/2019	07/31/2019	Expired

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Colon cancer screening declined	08/02/2019
Atrophic vaginitis	07/31/2019
Excessive drinking of alcohol	07/31/2019
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD)>OR=6MO PF	10/02/2017	
Tdap	07/31/2019	

## Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Former Smoker	Cigarettes	2	17	Quit: 1985
Smokeless Tobacco: Never Used				
Tobacco Cessation: Counseling Given: Yes				
Alcohol Use	Standard Drinks/Week			
Yes	0 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits	Answer			Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week			08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily			08/02/2019
Physical Activity	Answer			Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days			08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				



## Last Filed Vital Signs - documented in this encounter

Vital Sign	Reading	Time Taken	Comments
Blood Pressure	121/82	07/31/2019 8:49 AM MDT	
Pulse	80	07/31/2019 8:49 AM MDT	
Temperature	37.2 °C (99 °F)	07/31/2019 8:49 AM MDT	
Respiratory Rate	-	-	
Oxygen Saturation	98%	07/31/2019 8:49 AM MDT	
Inhaled Oxygen Concentration	-	-	
Weight	90.6 kg (199 lb 11.8 oz)	07/31/2019 8:49 AM MDT	
Height	165.1 cm (5' 5")	07/31/2019 8:49 AM MDT	
Body Mass Index	33.24	07/31/2019 8:49 AM MDT	

## Patient Instructions - documented in this encounter

### Patient Instructions

Laky, Devin M., MD - 07/31/2019 9:20 AM MDT

Formatting of this note might be different from the original.

#### Exercise

Should be enjoyable, convenient, and best with a partner. Include cardiovascular and weight training. Goal is 5 days a week, 30-45 minute sessions dedicated to physical activity. Start at 3 days a week, 10 min sessions and increase every 1-2 weeks.

#### Nutrition

Maintain normal caloric intake, avoid excess. Most important goal of nutrition is 5 servings of vegetables per day and drink water. Corn & potatoes are considered starch and should not be included in the 5 servings per day. Some ideas: GREENS: try to get spinach, broccoli, dark green lettuce, peas, cucumber, celery and (many others). ORANGE: Carrots, orange bell peppers etc. REDS: Tomatoes, red bell peppers, beets. YELLOW: Bell peppers, onions, mushrooms. Eliminate soda and additional table salt. Moderate caffeine consumption. Choose low-fat dairy, beans, and white meats (fish and chicken). Keep saturated fat low.

#### Calcium and Vit D

Adults under age 50 need 1000mg of elemental calcium, and 400-800 IU of vitamin D daily. Adults 50 and over need 1000-1200mg of elemental calcium (best absorbed through diet, or taken as divided supplement doses), and 800-4000 IU of vitamin D daily.

#### Stress management

Practice coping mechanisms to help with stress: relaxation breathing, take a walk, read a book, get away, exercise, yoga, find a new hobby.

#### Sleep

Sleep hygiene includes adherence to a regular sleep schedule. You should wake and go to bed at same time even on weekends. Goal duration of 7-8 hours. Create an optimal sleep environment with minimal dim lighting and cooler temperature. Do not go to bed if not tired. The bedroom is only for sleep and sex. No reading, eating, TV or other screens in bed (cell phone, tablet, laptop). Avoid naps. Limit caffeine (soda, coffee, tea, energy drinks) with last consumption before 1PM, alcohol (especially before bed), and tobacco. Practice relaxing presleep rituals. Keeping a journal or list of concerns and a plan for taking care of those one hour prior to bed helps the mind quiet.

#### Sexuality

Notify provider for any concerns of sexual dysfunction, family planning choices, or concerns of infections. Recommend HIV screening at least once age 18-64.

#### Substance abuse

Avoid the dangers of addiction to tobacco, alcohol, drug use, gambling, etc.

#### Injury Prevention

Advise safety belts, helmets, protective recreational gear for hobbies, smoke/CO detector with current batteries.

#### Dental & Vision health:

Advise regular tooth brushing, flossing, and dental visits. Annual vision screens.

#### Immunizations:

Advise annual influenza vaccine, Zostavax at age 60, Prevnar 13 and Pneumovax 23 starting at age 65 unless indicated sooner by your doctor. Tdap is indicated every 10 years or sooner for injuries.

#### High cholesterol:

-Check the American Heart Association website for heart healthy foods.

-Reinforced the etiology and silent pathophysiologic changes that uncontrolled hyperlipidemia can cause as a consequence of not treating. While genetics may play a role, lifestyle interventions make a big impact on cholesterol management, including:

-Aim for routine aerobic exercise 30-45min 4-5 days per week.

-Strive for healthy body weight BMI 20-25.

-Look at nutrition labels and limit trans fats and saturated fats in your diet (butter, cheese, junk food, high fat dairy, fatty cuts of red meat, fried foods, etc.); opt for healthy nuts, olive oil, low-fat dairy, chicken, and fish.

-Increase soluble psyllium fiber (Metamucil) in your diet with ample hydration (also good for the gut).

-Plant sterols 2grams per day (Benecol).

-Decrease stress when able.

-May supplement with Omega 3 fish oil 1200-2000mg daily, and try flax seed meal.

-Do not smoke, avoid alcohol, and control your other cardiac risk factors including blood sugar and blood pressure.

Electronically signed by Devin M. Laky, MD at 08/02/2019 3:02 PM MDT

## Ordered Prescriptions - documented in this encounter

Prescription	Sig	Dispensed	Refills	Start Date	End Date
varicella-zoster gE-AS01B, PF, (SHINGRIX) 50 mcg/0.5 mL SusR injection	Inject 0.5 mLs into the muscle once for 1 dose. Repeat dose in 2-6 months.	0.5 mL	0	07/31/2019	07/31/2019

## Progress Notes - documented in this encounter

Laky, Devin M., MD - 07/31/2019 9:20 AM MDT

Formatting of this note is different from the original.

**Subjective:**

Mary Sue Lark is a 62 y.o. female and is here for annual comprehensive exam.

Compliant with levothyroxine 50 µg once daily without palpitations, sleep disruption, headache, temperature intolerance, bowel movement changes, skin, hair, nail changes.

Patient denies any chest pain or claudication symptoms. States that she will not try cholesterol statin medications again as they have caused myalgias in the past.

Atrophic vaginitis has been much relieved by using estrogen suppositories. No vaginal bleeding. No itching, discharge, odor, or lesions. Using this about twice per week as needed. She had seen an OB/GYN in the last year around 2018 who did a Pap smear and also started her on this medication. However, she would like to keep her care at this office. She can get records for us.

Encounter Date: 07/31/2019

PHQ-2/9: Over the past 2 weeks, have you experienced:

1. Little interest or pleasure in doing things: 0
2. Feeling down, depressed, or hopeless: 0
9. Thoughts that you would be better off dead, or of hurting yourself in some way: 0

PHQ-9 Total Score: 0

Colonoscopy: No family history of colon cancer. Denies abdominal pain, blood in stool, bowel habit changes. Had a prior normal colonoscopy, uncertain of date but will look for records of when and where she had it at home..

Mary reports that there is not domestic violence in her life.

**GU History:**

Sexually active: No currently. No LMP recorded. Patient is postmenopausal. Mammogram: Over two years ago. No family hx of breast cancer. Hysterectomy? No. Last Pap/HPV: year ago. Abnormal pap hx? No. There is no history of gynecologic problems or procedures. No breast pain or new or enlarging lumps on self exam, no vaginal bleeding, no discharge or pelvic pain.

**OB History**

Gravida

1

Para

1

Term

Preterm

AB

Living

1

SAB

TAB

Ectopic

Multiple

Live Births

**Obstetric Comments**

Cesarean

Menopause 48, 2004.

Menarche: 15yo

Pap smear: 2018, no abnormalities.

Lifestyle habits: Exercise: not active or just bought a gym membership and does some stationary biking.

Smoking: 34 pack year hx, quit 1985

Alcohol: Realys drinking a bottle of wine per night to help unwind. Has done AA and not willing to seek this group and support at this time. Denies depression/anxiety or need to seek counseling or medication for emotions. Declines medication support to cut back. Denies hx of alcohol withdrawal, seizure, DUI, or hospital stay. Has been several years, at least, of routine use. Has quit before on her own, but then in a social setting relapsed. Feels that it is also a likely reason for persistent weight gain. No jaundice or abdominal pain or edema. Na tremors. Can wake up and go without withdrawal symptoms. Has gone up to 4 days between drinks before.

Caffeine: denies use

#### Review of Systems:

Gen: No significant weight gain or loss. No significant fatigue or fevers.

HEENT: No visual, hearing, or nasal changes. No sore throat.

Heart: No chest pains or palpitations.

Lungs: No chronic coughing, wheezing, or shortness of breath.

GI: No abdominal pain, nausea, vomiting, diarrhea, hematochezia, melena, or constipation.

GU: No urinary frequency, hematuria, or dysuria.

Skin: No rashes or changing lesions. No skin, hair, or nail changes.

Endo: No heat or cold intolerance. No severe fatigue.

Lymph: No new adenopathy.

Psyc: No depression or anxiety. No memory problems

Neuro: No tremor, no sensory changes, no headaches.

Musc: No recently acute joint dysfunction.

All other review of systems negative, except for those noted.

Note: Reviewed medical, surgical, family, and social history and updated today.

#### Past Medical History:

Diagnosis Date

- Accessory skin tags
- Benign paroxysmal positional vertigo
- Depression 1999

Lithium until 2001

- GERD without esophagitis 1/22/2018

- Hyperlipidemia

statin intolerant

- Hypothyroidism

- Injury of left ankle 9/24/2018

Added automatically from request for surgery 1247573

- Obesity

- Plantar fasciitis, bilateral

- Primary insomnia 1/22/2018

#### Past Surgical History:

Procedure Laterality Date

- CESAREAN SECTION
- OPEN REDUCTION INTERNAL FIXATION ANKLE Left 9/25/2018

Procedure: trimalleolar ankle open reduction internal fixation and syndesmosis open reduction internal fixation.; Surgeon: Kaitlin C Neary, MD; Location: SLRH SURGERY CENTER ROBBINS ROAD; Service: Orthopedic Surgery; Laterality: Left;

- RELEASE EPICONDYLAR Bilateral
- WISDOM TOOTH EXTRACTION

#### Family History

Problem Relation Age of Onset

- COPD Mother
- Depression Mother
- Early death Mother
- Ovarian cancer Mother
- Early death Father

Amyloidosis

- Heart disease Father
- Diabetes Sister
- Obesity Sister
- Hodgkin's lymphoma Brother
- Multiple sclerosis Sister
- Alzheimer's disease Paternal Aunt

x2

- Breast cancer Neg Hx
- Colon cancer Neg Hx
- Stroke Neg Hx
- Thyroid disease Neg Hx
- Osteoporosis Neg Hx

## Social History

### Socioeconomic History

- Marital status: Divorced

Spouse name: Not on file

- Number of children: 1

• Years of education: Not on file

• Highest education level: Not on file

### Occupational History

- Occupation: Software Manager

### Social Needs

- Financial resource strain: Not on file

- Food insecurity:

Worry: Not on file

Inability: Not on file

- Transportation needs:

Medical: Not on file

Non-medical: Not on file

### Tobacco Use

- Smoking status: Former Smoker

Packs/day: 2.00

Years: 17.00

Pack years: 34.00

Types: Cigarettes

Last attempt to quit: 1985

Years since quitting: 34.6

- Smokeless tobacco: Never Used

### Substance and Sexual Activity

- Alcohol use: Yes

Alcohol/week: 2.0 - 3.0 standard drinks

Types: 2 - 3 Glasses of wine per week

Comment: Weekly

- Drug use: No

- Sexual activity: Not Currently

### Lifestyle

- Physical activity:

Days per week: Not on file

Minutes per session: Not on file

- Stress: Not on file

### Relationships

- Social connections:

Talks on phone: Not on file

Gets together: Not on file

Attends religious service: Not on file

Active member of club or organization: Not on file

Attends meetings of clubs or organizations: Not on file

Relationship status: Not on file

- Intimate partner violence:

Fear of current or ex partner: Not on file

Emotionally abused: Not on file

Physically abused: Not on file

Forced sexual activity: Not on file

### Other Topics Concern

- Not on file

### Social History Narrative

Exercise: just bought a gym membership and does some stationary biking.

Caffeine: no coffee, soda, or energy drinks

Moved from CA.

Breast and colon cancer screening declined 1/22/2018

Allergies  
Allergen Reactions  
• Statins-Hmg-Coa Reductase Inhibitors Other (See Comments)  
Bones ache.

#### Current Outpatient Medications

##### Medication Sig Dispense Refill

- estradiol 10 mcg Tab Place 10 mcg vaginally 2 (two) times a week.
- levothyroxine (SYNTHROID) 50 MCG tablet Take 1 tablet (50 mcg total) by mouth Daily. 90 tablet 3

No current facility-administered medications for this visit.

#### Objective:

##### Wt Readings from Last 3 Encounters:

07/31/19 90.6 kg (199 lb 11.8 oz)  
09/25/18 88.5 kg (195 lb)  
01/22/18 89.7 kg (197 lb 12 oz)

##### BP Readings from Last 3 Encounters:

07/31/19 121/82  
09/26/18 101/67  
09/25/18 121/75

BP 121/82 (BP Location: Left upper arm, Patient Position: Sitting, Cuff size: Adult 23-33 cm) | Pulse 80 | Temp 37.2 °C (99 °F) (Oral) | Ht 165.1 cm (65") | Wt 90.6 kg (199 lb 11.8 oz) | SpO2 98% | BMI 33.24 kg/m<sup>2</sup>

Mood: Congruent, good insight and judgement.

Constitutional: Appears well-developed and well-nourished. No distress. Good hygiene.

Neuro: Grossly normal. Alert and oriented. CN II-XII grossly intact. Normal independent gait.

Neck: Supple. Trachea midline. Thyroid smooth, non-tender.

Lymph: No submental, submandibular, supraclavicular, cervical lymphadenopathy.

Eyes: EOMI, no nystagmus. PERRL. Anicteric. No scleral or conjunctival injection. No discharge.

Ears: Bilateral TM's with normal cone of light. Normal EAC. No pain on manipulation.

Nose: Breathing comfortably. Symmetric. No discharge.

Mouth: Mucosa & gingiva normal. Oropharynx without exudate or erythema. No tonsillar swelling. Uvula midline.

Cardiovascular: Normal rate, regular rhythm, normal heart sounds, and intact distal pulses. No murmur, rub, or gallop. No peripheral edema.

Pulmonary/Chest: Normal effort. Clear to auscultation. No respiratory distress. No wheezes, rhonchi, or rales.

Abdominal: Soft. Non-distended. Non-tender without rebound or guarding. Normal bowel tones. No organomegaly, nor firm or pulsatile masses.

Breast/GU: Declines, saw OBGYN 2018 with normal exam. Asymptomatic. Will reconsider in one year.

No results found for: CHOL

No results found for: HDL

No results found for: LDLDIRECT

No results found for: TRIG

No results found for: CHOLHDL

#### Assessment:

Healthy female annual physical exam.

1. Well woman exam with routine gynecological exam Lipid Panel

BI Screening Mammogram Bilateral W Tomo

HEPATITIS C ANTIBODY

varicella-zoster gE-AS01B, PF, (SHINGRIX) 50 mcg/0.5 mL SusR injection

2. Need for Tdap vaccination Tdap vaccine greater than or equal to 7yo 0.5mL Intramuscular, NOW

3. Need for shingles vaccine varicella-zoster gE-AS01B, PF, (SHINGRIX) 50 mcg/0.5 mL SusR injection

4. Colon cancer screening declined

5. Encounter for hepatitis C screening test for low risk patient HEPATITIS C ANTIBODY

6. Breast cancer screening BI Screening Mammogram Bilateral W Tomo

7. Obesity (BMI 30.0-34.9)

8. Hyperlipidemia, mixed Lipid Panel

9. Acquired hypothyroidism

10. Atrophic vaginitis

11. Excessive drinking of alcohol

Plan:

Wellness Patient Counseling:

- Nutrition: Stressed importance of moderation in sodium/caffeine intake, saturated fat and cholesterol, caloric balance, sufficient intake of fresh fruits, vegetables, fiber, Vitamin D 2000-4000 IU per day, elemental calcium 1000-1200mg per day is best obtained through diet or taken in divided doses.
- Exercise: Stressed the importance of regular exercise, either moderate intensity 150 minutes per week, or vigorous intensity 75 minutes per week, with 1-2 sessions of strength training per week.
- Substance Abuse: Dangers of addiction to tobacco, alcohol, drug use, gambling, etc.
- Sexuality: Discussed sexually transmitted diseases including risks of HIV and use of condoms, family planning choices.
- Injury prevention: Discussed safety belts, helmets, smoke/CO detector.
- Dental health: Discussed importance of regular tooth brushing, flossing, and dental visits.
- Immunizations reviewed: Influenza each fall. Tdap updated today 7/31/2019, repeat 2029. Shingrix Rx provided.
- Health screening discussed: cholesterol, diabetes, cancer screening including colonoscopy due but declines despite alternatives discussed.
- Women: Mammogram and pap smear/HPV risks, benefits, and current advisories reviewed with patient and she Accepts screening. Well woman. Mammogram ordered. ROI given for OB Pap smear record from 2018.
- Stress management through exercise, yoga, meditation, consistent sleep hygiene, and social activities.
- Informed patient of after hours service.
- Medication refills reviewed. Additional labs per orders.
- Consents to HCV and HIV screening: Consents to Hep C ordered today. Declines HIV screen.
- Discussed the patient's BMI with her. Body mass index is 33.24 kg/m<sup>2</sup>. Patient BMI is above acceptable range; BMI management plan: counseled and given instructions on diet and exercise plan
- Discussed exercise recommendations of 30-60 minutes most days of the week
- Follow up annually or as needed for acute illness
- Goals: decrease or avoid alcohol intake.

Health maintenance

Last Health Maintenance: No results found for: PAP, COLONOSCOPY, DEXA, MAMMOGRAM, PSATOTAL, DIABEYEX

Hypothyroidism: Controlled on levothyroxine 50 µg daily. TSH normal June 2019.

Hyperlipidemia: Patient declines statin treatment due to prior intolerance causing myalgias. Lipid panel due.

- Check the American Heart Association website for heart healthy foods.
- Reinforced the etiology and silent pathophysiologic changes that uncontrolled hyperlipidemia can cause as a consequence of not treating. While genetics may play a role, lifestyle interventions make a big impact on cholesterol management, including:
  - Aim for routine aerobic exercise 30-45min 4-5 days per week.
  - Strive for healthy body weight BMI 20-25.
  - Look at nutrition labels and limit trans fats and saturated fats in your diet (butter, cheese, junk food, high fat dairy, fatty cuts of red meat, fried foods, etc.); opt for healthy nuts, olive oil, low-fat dairy, chicken, and fish.
  - Increase soluble psyllium fiber (Metamucil) in your diet with ample hydration (also good for the gut).
  - Plant sterols 2grams per day (Benecol).
  - Decrease stress when able.
  - May supplement with Omega 3 fish oil 1200-2000mg daily, and try flax seed meal.
  - Do not smoke, avoid alcohol, and control your other cardiac risk factors including blood sugar and blood pressure.

Atrophic vaginitis: Controlled with twice weekly estrogen application.

Excessive alcohol: Reviewed the risks of chronic excess alcohol consumption which patient states understanding of but is pre-contemplative of seeking support from a counseling referral, lifestyle medicine with handout provided (could benefit weight and HLD as well), AA support, or physician supported medication treatment including naloxone, Librium, acamprosate discussed. Provided a handout on naloxone. She will follow up as needed when ready to seek support. LFT's recently normal 6/2019.

Portions of this note were created using Dragon Natural Speaking voice recognition system.

Electronically signed by Devin M. Laky, MD at 08/02/2019 3:07 PM MDT

Angela S - 07/31/2019 9:20 AM MDT

Formatting of this note might be different from the original.

This drug was administered by Angela Salinas at 9:23 AM per physician order.

Manufacturer Adacel

Site: Right deltoid

Route: Intramuscular

Electronically signed by Angela S at 07/31/2019 9:23 AM MDT

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

## Implants - documented as of this encounter

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfi 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
<b>Screw Low Profile 2.7x14mm Locking Ss Ar- 8827l-14 - Sar-8827l-14</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2
<b>Screw Low Profile 2.7x12mm Locking Ss Ar- 8827l-12 - Sar-8827l-12</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-12 / AR-8827L-12 / 1-092518-2
<b>Screw Low Profile 2.7x16mm Locking Ss Ar- 8827l-16 - Sar-8827l-16</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-16 / AR-8827L-16 / 1-092518-2
<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-12 / AR-8835-12 / 1-092518-2
<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-14 / AR-8835-14 / 1-092518-2

**HOSPITAL**

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Implant Knotless Syndesmosis Tightrope  
Xp Stainless Steel Ar-8925ss - Sar-8925ss**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL, UHMWPE  
MEDIAL SIDE.

**Screw Low Profile 4x46 Cannulated Long****Thread Stainless Steel Ar-8840cl-46 - Sar-8840cl-46**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
MEDIAL SIDE.

 **Results** - documented in this encounter

Not on file

 **Visit Diagnoses** - documented in this encounter**Diagnosis**

Well woman exam with routine gynecological exam - Primary

Need for Tdap vaccination

Need for shingles vaccine

Colon cancer screening declined

Encounter for hepatitis C screening test for low risk patient

Obesity (BMI 30.0-34.9)

Acquired hypothyroidism

Hyperlipidemia, mixed

Atrophic vaginitis

Excessive drinking of alcohol

## Advance Directives

For more information, please contact: 208-381-2183

### Documents on File

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

### Latest Code Status on File

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

### Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

### Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712		Jul. 31, 2019

### Custodian Organization

<b>St. Luke's Health System</b> Boise, ID 83712
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Encounter Providers	Encounter Date
<b>MD Devin M. Laky, MD</b> (Attending) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine	Jul. 31, 2019

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Encounter Details

Date	Type	Department	Care Team
12/12/2018	Hospital Encounter	St. Luke's Clinic - Diagnostic X-ray - Orthopaedics Portico East 3399 E LOUISE DR STE 200 MERIDIAN, ID 83642-5047 208-706-2663	<b>Neary, Kaitlin C., MD</b> 3399 E Louise Dr Suite 200 Meridian, ID 83642 208-706-2663 208-489-4300 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019	Discontinued (Patient stopped taking)
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019	Expired
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	40 tablet	0	10/11/2018	07/31/2019	Discontinued (Patient stopped taking)
estradiol 10 mcg Tab	Place 10 mcg vaginally 2 (two) times a week.		0	05/31/2018	03/02/2020	Discontinued (Reorder)
nitrofurantoin, macrocrystal-monohydrate, (MACROBID) 100 MG capsule	TK 1 C PO Q 12 H WF FOR 7 DAYS		0	08/08/2018	07/31/2019	Discontinued (Patient stopped taking)
terbinafine HCl (LAMISIL) 250 mg tablet	TK 1 T PO QD		2	09/29/2018	07/31/2019	Discontinued (Patient stopped taking)
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Daily. Appointment due for lab and refill.	90 tablet	0	12/04/2018	02/21/2019	Discontinued (Reorder)

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD) >OR=6MO PF	10/02/2017	

## Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
Alcohol Use	Standard Drinks/Week			
Yes	2 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits	Answer			Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week			08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily			08/02/2019
Physical Activity	Answer			Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days			08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				

## Last Filed Vital Signs - documented in this encounter

Not on file

## Medications at Time of Discharge - documented as of this encounter

Medication	Sig	Dispensed	Refills	Start Date	End Date
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019
estradiol 10 mcg Tab	Place 10 mcg vaginally 2 (two) times a week.		0	05/31/2018	03/02/2020
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	40 tablet	0	10/11/2018	07/31/2019
hydrOXYzine HCl (ATARAX) 25 MG tablet	Take 1 tablet (25 mg total) by mouth nightly as needed for Other (insomnia).	30 tablet	0	01/22/2018	11/11/2019
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Daily. Appointment due for lab and refill.	90 tablet	0	12/04/2018	02/21/2019
nitrofurantoin, macrocrystal-monohydrate, (MACROBID) 100 MG capsule	TK 1 C PO Q 12 H WF FOR 7 DAYS		0	08/08/2018	07/31/2019
terbinafine HCl (LAMISIL) 250 mg tablet	TK 1 T PO QD		2	09/29/2018	07/31/2019
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

## Implants - documented as of this encounter

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfi 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
<b>Screw Low Profile 2.7x14mm Locking Ss Ar-8827l-14 - Sar-8827l-14</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2

<b>Screw Low Profile 2.7x12mm Locking Ss Ar-8827l-12 - Sar-8827l-12</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8827L-12 / AR-8827L-12 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Screw Low Profile 2.7x16mm Locking Ss Ar-8827l-16 - Sar-8827l-16</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8827L-16 / AR-8827L-16 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-12 / AR-8835-12 / 1-092518-2
Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-14 / AR-8835-14 / 1-092518-2
Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-22 / AR-8835-22 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-26 / AR-8835-26 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Implant Knotless Syndesmosis Tightrope Xp Stainless Steel Ar-8925ss - Sar-8925ss</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8925SS / AR-8925SS / 10224713
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL, UHMWPE MEDIAL SIDE.				
<b>Screw Low Profile 4x46 Cannulated Long Thread Stainless Steel Ar-8840cl-46 - Sar-8840cl-46</b>	OTHER IMPLANTS	Left: Ankle	ARTHREX INC	AR-8840CL-46 / AR-8840CL-46 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. MEDIAL SIDE.				



## Results - documented in this encounter

XR ANKLE 3+ VW (XR ANKLE 3 OR MORE VW LEFT) - Final result (12/12/2018 9:21 AM MST)

Specimen

Impressions	Performed At
Unchanged alignment and interval progression towards healing of the trimalleolar ankle fracture. Hardware is intact.	POWERSCRIBE PACS ASOBGYN
Narrative	Performed At
HISTORY: Post-operative state.	POWERSCRIBE PACS ASOBGYN
COMPARISON: November 12 and October 18, 2018	
TECHNIQUE: Left ankle, 3 views.	

FINDINGS: Unchanged alignment of the distal fibula fracture. Lateral fixation plate and cortical screws are intact. The fracture is slightly less conspicuous suggesting callus formation. Unchanged alignment of the medial malleolus fracture with intact fixation screw. Increasing callus formation at the medial malleolus fracture. Unchanged alignment of the posterior malleolus fracture with callus formation. Syndesmotic graft noted. Ankle mortise is congruent. Talar dome is intact. Disuse osteopenia of the ankle and foot.

### Procedure Note

#### **Edi, Rad Results - 12/12/2018 9:59 AM MST**

Formatting of this note might be different from the original.

HISTORY: Post-operative state.

COMPARISON: November 12 and October 18, 2018

TECHNIQUE: Left ankle, 3 views.

FINDINGS: Unchanged alignment of the distal fibula fracture. Lateral fixation plate and cortical screws are intact. The fracture is slightly less conspicuous suggesting callus formation. Unchanged alignment of the medial malleolus fracture with intact fixation screw. Increasing callus formation at the medial malleolus fracture. Unchanged alignment of the posterior malleolus fracture with callus formation. Syndesmotic graft noted. Ankle mortise is congruent. Talar dome is intact. Disuse osteopenia of the ankle and foot.

#### IMPRESSION:

Unchanged alignment and interval progression towards healing of the trimalleolar ankle fracture. Hardware is intact.

Performing Organization	Address	City/State/ZIP Code	Phone Number
POWERSCRIBE PACS ASOBGYN			



## Visit Diagnoses - documented in this encounter

Diagnosis

Post-operative state

## Advance Directives

For more information, please contact: 208-381-2183

### Documents on File

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

### Latest Code Status on File

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

### Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

### Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712		Dec. 12, 2018
Custodian Organization		
<b>St. Luke's Health System</b> Boise, ID 83712		

Encounter Providers	Encounter Date
<b>MD Kaitlin C. Neary, MD</b> (Attending) 208-706-2663 (Work) 208-489-4300 (Fax) 3399 E Louise Dr Suite 200 Meridian, ID 83642 Orthopedic Surgery	Dec. 12, 2018

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Reason for Visit

Reason  
POV

## Encounter Details

Date	Type	Department	Care Team
12/12/2018	Office Visit	St. Luke's Clinic - Orthopedics - Meridian 3399 E LOUISE DR STE 200 MERIDIAN, ID 83642-5047 208-706-2663	<b>Neary, Kaitlin C., MD</b> 3399 E Louise Dr Suite 200 Meridian, ID 83642 208-706-2663 208-489-4300 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019	Discontinued (Patient stopped taking)
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019	Expired
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	40 tablet	0	10/11/2018	07/31/2019	Discontinued (Patient stopped taking)
estradiol 10 mcg Tab	Place 10 mcg vaginally 2 (two) times a week.		0	05/31/2018	03/02/2020	Discontinued (Reorder)
nitrofurantoin, macrocrystal-monohydrate, (MACROBID) 100 MG capsule	TK 1 C PO Q 12 H WF FOR 7 DAYS		0	08/08/2018	07/31/2019	Discontinued (Patient stopped taking)
terbinafine HCl (LAMISIL) 250 mg tablet	TK 1 T PO QD		2	09/29/2018	07/31/2019	Discontinued (Patient stopped taking)
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Daily. Appointment due for lab and refill.	90 tablet	0	12/04/2018	02/21/2019	Discontinued (Reorder)

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD) >OR=6MO PF	10/02/2017	

## Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
Alcohol Use	Standard Drinks/Week			
Yes	2 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits	Answer			Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week			08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily			08/02/2019
Physical Activity	Answer			Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days			08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				

## Last Filed Vital Signs - documented in this encounter

Not on file

## Progress Notes - documented in this encounter

Neary, Kaitlin C., MD - 12/12/2018 9:00 AM MST

Formatting of this note is different from the original.

DATE OF VISIT: 12/12/2018

REASON FOR VISIT: 12 weeks status post:

1. Open reduction internal fixation left trimalleolar ankle fracture
2. Open reduction internal fixation left syndesmosis

#### HISTORY OF PRESENT ILLNESS:

Mary returns to clinic today now 12 weeks out from surgery. She has been weightbearing as tolerated in the boot and really denies any pain. She reports she has been able to advance her weightbearing without difficulty. She does still continue to experience some mildly restricted range of motion, particularly in dorsiflexion. Otherwise she really has no other concerns in clinic today. She feels as if things have continued to improve over time and she is happy with her progress.

#### REVIEW OF SYSTEMS:

A complete review of systems was performed. The patient denies any recent fevers, chills, fatigue, nausea, vomiting, chest pain, shortness of breath, dyspnea on exertion, abdominal pain, lower extremity swelling (other than swelling secondary to surgery or injury), or any other recent illnesses other than stated in HPI.

#### PHYSICAL EXAM:

There were no vitals taken for this visit.

**GENERAL:** The patient is well-appearing and is awake, alert, and in no acute distress

#### MUSCULOSKELETAL:

Upon evaluation of her left lower ankle, her incisions all remaining well-healed. She has a mild amount of diffuse swelling. There are no open wounds or overlying skin changes. She has fairly good range of motion of the left ankle including 5-10 degrees of dorsiflexion to 30-40 degrees of plantarflexion. Her ankle is stable to testing of ATFL and CFL. She has full strength and sensation throughout. Her foot is warm and well-perfused and dorsalis pedis pulses 2+.

#### IMAGING:

Radiographs including 3 weightbearing views of her left ankle were obtained and independently reviewed in clinic today. They reveal evidence of a likely healed trimalleolar ankle fracture. She has progression of healing of her lateral, medial, and posterior malleoli compared to previous imaging. Her mortise remains intact and is congruent. Her syndesmosis also remains well reduced. Hardware position and alignment remain unchanged compared to previous imaging. No other acute osseous abnormalities appreciated.

#### DIAGNOSTIC STUDIES/OTHER:

None

#### DIAGNOSES:

1. Post-operative state

#### ASSESSMENT:

12 weeks status post:

1. Open reduction internal fixation left trimalleolar ankle fracture
2. Open reduction internal fixation left syndesmosis

#### PLAN:

Today in clinic married is doing quite well. She has been weightbearing as tolerated in the boot without difficulty, and has minimal pain. I told her that she may now wean out of the boot into an ankle brace and she was given an ankle brace in clinic today. She can wear the brace whenever she feels as if she needs it. I also will get her into physical therapy for strengthening and range of motion of her left ankle. She will advance her activities as her ankle allows. I will see her back in approximately 3 months if she is still having pain or any other concerns. Otherwise she can be seen on an as-needed basis. All questions were answered and she was in full agreement with the above-stated plan.

Kaitlin C. Neary, M.D.

St. Luke's Department of Orthopaedics

Foot and Ankle Surgery

Nearyk@slhs.org

#### CC:

Devin M. Laky, MD

No ref. provider found

This note was transcribed using Dragon Natural Speaking voice recognition system. Despite editing there may be minor grammatical and/or minor typographical errors in this transcriptions due to the limitations inherent with voice activated computer dictation. This should not adversely affect the overall integrity of the document

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

## Implants - documented as of this encounter

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfi 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
<b>Screw Low Profile 2.7x14mm Locking Ss Ar- 8827l-14 - Sar-8827l-14</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2
<b>Screw Low Profile 2.7x12mm Locking Ss Ar- 8827l-12 - Sar-8827l-12</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-12 / AR-8827L-12 / 1-092518-2
<b>Screw Low Profile 2.7x16mm Locking Ss Ar- 8827l-16 - Sar-8827l-16</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-16 / AR-8827L-16 / 1-092518-2
<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-12 / AR-8835-12 / 1-092518-2
<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-14 / AR-8835-14 / 1-092518-2

## HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Implant Knotless Syndesmosis Tightrope  
Xp Stainless Steel Ar-8925ss - Sar-8925ss**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL, UHMWPE  
MEDIAL SIDE.

**Screw Low Profile 4x46 Cannulated Long****Thread Stainless Steel Ar-8840cl-46 - Sar-8840cl-46**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
MEDIAL SIDE.

 **Results** - documented in this encounter

Not on file

 **Visit Diagnoses** - documented in this encounter

Diagnosis

Post-operative state - Primary

 **Advance Directives**

For more information, please contact: 208-381-2183

**Documents on File**

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

**Latest Code Status on File**

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

# Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

## Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712		Dec. 12, 2018
Custodian Organization		
<b>St. Luke's Health System</b> Boise, ID 83712		
Encounter Providers	Encounter Date	
<b>MD Kaitlin C. Neary, MD</b> (Attending) 208-706-2663 (Work) 208-489-4300 (Fax) 3399 E Louise Dr Suite 200 Meridian, ID 83642 Orthopedic Surgery	Dec. 12, 2018	

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Encounter Details

Date	Type	Department	Care Team
11/12/2018	Hospital Encounter	St. Luke's Imaging - Diagnostic X-ray - Rehabilitation Hospital 600 N ROBBINS RD STE 100 BOISE, ID 83702-4564 208-383-0201	<b>Neary, Kaitlin C., MD</b> 3399 E Louise Dr Suite 200 Meridian, ID 83642 208-706-2663 208-489-4300 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019	Discontinued (Patient stopped taking)
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019	Expired
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.	90 tablet	2	04/09/2018	12/03/2018	Discontinued (Reorder)
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	40 tablet	0	10/11/2018	07/31/2019	Discontinued (Patient stopped taking)
estradiol 10 mcg Tab	Place 10 mcg vaginally 2 (two) times a week.		0	05/31/2018	03/02/2020	Discontinued (Reorder)
nitrofurantoin, macrocrystal-monohydrate, (MACROBID) 100 MG capsule	TK 1 C PO Q 12 H WF FOR 7 DAYS		0	08/08/2018	07/31/2019	Discontinued (Patient stopped taking)
terbinafine HCl (LAMISIL) 250 mg tablet	TK 1 T PO QD		2	09/29/2018	07/31/2019	Discontinued (Patient stopped taking)

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD) >OR=6MO PF	10/02/2017	

## Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
Alcohol Use	Standard Drinks/Week			
Yes	2 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits	Answer			Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week			08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily			08/02/2019
Physical Activity	Answer			Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days			08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				

## Last Filed Vital Signs - documented in this encounter

Not on file

## Medications at Time of Discharge - documented as of this encounter

Medication	Sig	Dispensed	Refills	Start Date	End Date
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019
estradiol 10 mcg Tab	Place 10 mcg vaginally 2 (two) times a week.		0	05/31/2018	03/02/2020
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	40 tablet	0	10/11/2018	07/31/2019
hydrOXYzine HCl (ATARAX) 25 MG tablet	Take 1 tablet (25 mg total) by mouth nightly as needed for Other (insomnia).	30 tablet	0	01/22/2018	11/11/2019
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.	90 tablet	2	04/09/2018	12/03/2018
nitrofurantoin, macrocrystal-monohydrate, (MACROBID) 100 MG capsule	TK 1 C PO Q 12 H WF FOR 7 DAYS		0	08/08/2018	07/31/2019
terbinafine HCl (LAMISIL) 250 mg tablet	TK 1 T PO QD		2	09/29/2018	07/31/2019
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

## Implants - documented as of this encounter

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfi 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
<b>Screw Low Profile 2.7x14mm Locking Ss Ar-8827l-14 - Sar-8827l-14</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2

<b>Screw Low Profile 2.7x12mm Locking Ss Ar-8827l-12 - Sar-8827l-12</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8827L-12 / AR-8827L-12 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Screw Low Profile 2.7x16mm Locking Ss Ar-8827l-16 - Sar-8827l-16</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8827L-16 / AR-8827L-16 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-12 / AR-8835-12 / 1-092518-2
Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-14 / AR-8835-14 / 1-092518-2
Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-22 / AR-8835-22 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-26 / AR-8835-26 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Implant Knotless Syndesmosis Tightrope Xp Stainless Steel Ar-8925ss - Sar-8925ss</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8925SS / AR-8925SS / 10224713
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL, UHMWPE MEDIAL SIDE.				
<b>Screw Low Profile 4x46 Cannulated Long Thread Stainless Steel Ar-8840cl-46 - Sar-8840cl-46</b>	OTHER IMPLANTS	Left: Ankle	ARTHREX INC	AR-8840CL-46 / AR-8840CL-46 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. MEDIAL SIDE.				



## Results - documented in this encounter

XR ANKLE 3+ VW (XR ANKLE 3 OR MORE VW LEFT) - Final result (11/12/2018 7:55 AM MST)

Specimen

Impressions	Performed At
Unchanged alignment and interval progression towards healing of the trimalleolar ankle fracture. Hardware is intact.	POWERSCRIBE PACS ASOBGYN
Narrative	Performed At
HISTORY: Post-operative state.	POWERSCRIBE PACS ASOBGYN
COMPARISON: October 18; September 24, 2018	
TECHNIQUE: Left ankle, 3 views.	

**FINDINGS:** Unchanged alignment of the oblique distal fibula fracture. Lateral fixation plate and cortical screws are intact. Unchanged alignment of the medial malleolus fracture, fixation screws intact. Unchanged alignment of the nondisplaced posterior malleolus fracture. Old fractures are less conspicuous suggesting increasing callus formation. Syndesmotic repair are noted. Ankle mortise is congruent. Joint spaces are preserved.

### Procedure Note

#### **Edi, Rad Results - 11/12/2018 8:31 AM MST**

Formatting of this note might be different from the original.

HISTORY: Post-operative state.

COMPARISON: October 18; September 24, 2018

TECHNIQUE: Left ankle, 3 views.

**FINDINGS:** Unchanged alignment of the oblique distal fibula fracture. Lateral fixation plate and cortical screws are intact. Unchanged alignment of the medial malleolus fracture, fixation screws intact. Unchanged alignment of the nondisplaced posterior malleolus fracture. Old fractures are less conspicuous suggesting increasing callus formation. Syndesmotic repair are noted. Ankle mortise is congruent. Joint spaces are preserved.

#### IMPRESSION:

Unchanged alignment and interval progression towards healing of the trimalleolar ankle fracture. Hardware is intact.

Performing Organization	Address	City/State/ZIP Code	Phone Number
POWERSCRIBE PACS ASOBGYN			



## Visit Diagnoses - documented in this encounter

Diagnosis

Post-operative state

## Advance Directives

For more information, please contact: 208-381-2183

### Documents on File

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

### Latest Code Status on File

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

### Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

### Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712		Nov. 12, 2018
Custodian Organization <b>St. Luke's Health System</b> Boise, ID 83712		

Encounter Providers	Encounter Date
<b>MD Kaitlin C. Neary, MD</b> (Attending) 208-706-2663 (Work) 208-489-4300 (Fax) 3399 E Louise Dr Suite 200 Meridian, ID 83642 Orthopedic Surgery	Nov. 12, 2018

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Reason for Visit

Reason  
POV

## Encounter Details

Date	Type	Department	Care Team
11/12/2018	Office Visit	St. Luke's Clinic - Orthopaedics - IERH-Boise 600 N ROBBINS RD STE 100 BOISE, ID 83702-4564 208-706-2663	<b>Neary, Kaitlin C., MD</b> 3399 E Louise Dr Suite 200 Meridian, ID 83642 208-706-2663 208-489-4300 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019	Discontinued (Patient stopped taking)
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019	Expired
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.	90 tablet	2	04/09/2018	12/03/2018	Discontinued (Reorder)
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	40 tablet	0	10/11/2018	07/31/2019	Discontinued (Patient stopped taking)
estradiol 10 mcg Tab	Place 10 mcg vaginally 2 (two) times a week.		0	05/31/2018	03/02/2020	Discontinued (Reorder)
nitrofurantoin, macrocrystal-monohydrate, (MACROBID) 100 MG capsule	TK 1 C PO Q 12 H WF FOR 7 DAYS		0	08/08/2018	07/31/2019	Discontinued (Patient stopped taking)
terbinafine HCl (LAMISIL) 250 mg tablet	TK 1 T PO QD		2	09/29/2018	07/31/2019	Discontinued (Patient stopped taking)

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD) >OR=6MO PF	10/02/2017	

## Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
Alcohol Use	Standard Drinks/Week			
Yes	2 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits	Answer			Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week			08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily			08/02/2019
Physical Activity	Answer			Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days			08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				

## Last Filed Vital Signs - documented in this encounter

Not on file

## Progress Notes - documented in this encounter

Neary, Kaitlin C., MD - 11/12/2018 7:45 AM MST

Formatting of this note might be different from the original.

DATE OF VISIT: 11/12/2018

REASON FOR VISIT: 6 weeks status post:

1. Open reduction internal fixation left trimalleolar ankle fracture
2. Open reduction internal fixation left syndesmosis

#### HISTORY OF PRESENT ILLNESS:

Mary returns to clinic today now 6 weeks out from surgery. She states that things are going fairly well and she has continued to remain nonweightbearing in a cam boot. She denies having any pain and has continued to work on her range of motion. She has no other concerns in clinic today.

#### REVIEW OF SYSTEMS:

A complete review of systems was performed. The patient denies any recent fevers, chills, fatigue, nausea, vomiting, chest pain, shortness of breath, dyspnea on exertion, abdominal pain, lower extremity swelling (other than swelling secondary to surgery or injury), or any other recent illnesses other than stated in HPI.

#### PHYSICAL EXAM:

There were no vitals taken for this visit.

**GENERAL:** The patient is well-appearing and is awake, alert, and in no acute distress

#### MUSCULOSKELETAL:

Upon evaluation of her left lower ankle, her incisions all remain well healed, clean, dry, and intact. She has good range of motion of the ankle including 20 degrees of dorsiflexion to 40 degrees of plantarflexion. Her ankle is stable to testing of ATFL and CFL. She does not have any pain throughout range of motion. She has full strength and sensation throughout. She is grossly neurovascularly intact distally.

#### IMAGING:

Radiographs including 3 nonweightbearing views of the left ankle were obtained and independently reviewed in clinic today. They reveal evidence of healing medial and lateral malleoli fractures. There appears to be progression of healing compared to previous imaging. Her mortise remains congruent and intact. Her syndesmosis also remains well reduced with the suture button in place. Hardware position and ankle alignment are unchanged compared to previous imaging. No other acute osseous abnormalities appreciated.

#### DIAGNOSTIC STUDIES/OTHER:

None

#### DIAGNOSES:

No diagnosis found.

#### ASSESSMENT:

6 weeks status post:

1. Open reduction internal fixation left trimalleolar ankle fracture
2. Open reduction internal fixation left syndesmosis

#### PLAN:

At this point in time Mary continues to do well. I discussed with her that she should remain nonweightbearing in the boot for the next 2 weeks. In 2 weeks' time, she can start to slowly advance her weightbearing in the boot as tolerated. I also will allow her to now sleep outside of the boot but she should have the boot in place at all times when she is up. She will advance her weightbearing in the boot and I will see her back in a proximally 6 weeks for repeat weightbearing radiographs of her left ankle. She can wean out of the boot at that time if her x-rays show her fractures are healed. All questions were answered and she was in full agreement with the above-stated plan. I will see her back in 6 weeks.

Kaitlin C. Neary, M.D.

St. Luke's Department of Orthopaedics

Foot and Ankle Surgery

Nearyk@slhs.org

#### CC:

Devin M Laky, MD

No ref. provider found

This note was transcribed using Dragon Natural Speaking voice recognition system. Despite editing there may be minor grammatical and/or minor typographical errors in this transcriptions due to the limitations inherent with voice activated computer dictation. This should not adversely affect the overall integrity of the document

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

## Implants - documented as of this encounter

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfi 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
<b>Screw Low Profile 2.7x14mm Locking Ss Ar- 8827l-14 - Sar-8827l-14</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2
<b>Screw Low Profile 2.7x12mm Locking Ss Ar- 8827l-12 - Sar-8827l-12</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-12 / AR-8827L-12 / 1-092518-2
<b>Screw Low Profile 2.7x16mm Locking Ss Ar- 8827l-16 - Sar-8827l-16</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-16 / AR-8827L-16 / 1-092518-2
<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-12 / AR-8835-12 / 1-092518-2
<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-14 / AR-8835-14 / 1-092518-2

## HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Implant Knotless Syndesmosis Tightrope  
Xp Stainless Steel Ar-8925ss - Sar-8925ss**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL, UHMWPE  
MEDIAL SIDE.

**Screw Low Profile 4x46 Cannulated Long  
Thread Stainless Steel Ar-8840cl-46 - Sar-  
8840cl-46**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
MEDIAL SIDE.

 **Results** - documented in this encounter

Not on file

 **Visit Diagnoses** - documented in this encounter

Diagnosis

Post-operative state - Primary

 **Advance Directives**

For more information, please contact: 208-381-2183

**Documents on File**

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

**Latest Code Status on File**

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

# Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

## Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712		Nov. 12, 2018
Custodian Organization		
<b>St. Luke's Health System</b> Boise, ID 83712		
Encounter Providers	Encounter Date	
<b>MD Kaitlin C. Neary, MD</b> (Attending) 208-706-2663 (Work) 208-489-4300 (Fax) 3399 E Louise Dr Suite 200 Meridian, ID 83642 Orthopedic Surgery	Nov. 12, 2018	

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Encounter Details

Date	Type	Department	Care Team
10/18/2018	Hospital Encounter	St. Luke's Clinic - Diagnostic X-ray - Orthopaedics Portico East 3399 E LOUISE DR STE 200 MERIDIAN, ID 83642-5047 208-706-2663	<b>Neary, Kaitlin C., MD</b> 3399 E Louise Dr Suite 200 Meridian, ID 83642 208-706-2663 208-489-4300 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019	Discontinued (Patient stopped taking)
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019	Expired
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.	90 tablet	2	04/09/2018	12/03/2018	Discontinued (Reorder)
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	40 tablet	0	10/11/2018	07/31/2019	Discontinued (Patient stopped taking)
estradiol 10 mcg Tab	Place 10 mcg vaginally 2 (two) times a week.		0	05/31/2018	03/02/2020	Discontinued (Reorder)
nitrofurantoin, macrocrystal-monohydrate, (MACROBID) 100 MG capsule	TK 1 C PO Q 12 H WF FOR 7 DAYS		0	08/08/2018	07/31/2019	Discontinued (Patient stopped taking)
terbinafine HCl (LAMISIL) 250 mg tablet	TK 1 T PO QD		2	09/29/2018	07/31/2019	Discontinued (Patient stopped taking)

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD) >OR=6MO PF	10/02/2017	

## Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
Alcohol Use	Standard Drinks/Week			
Yes	2 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits	Answer			Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week			08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily			08/02/2019
Physical Activity	Answer			Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days			08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				

## Last Filed Vital Signs - documented in this encounter

Not on file

## Medications at Time of Discharge - documented as of this encounter

Medication	Sig	Dispensed	Refills	Start Date	End Date
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019
estradiol 10 mcg Tab	Place 10 mcg vaginally 2 (two) times a week.		0	05/31/2018	03/02/2020
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	40 tablet	0	10/11/2018	07/31/2019
hydrOXYzine HCl (ATARAX) 25 MG tablet	Take 1 tablet (25 mg total) by mouth nightly as needed for Other (insomnia).	30 tablet	0	01/22/2018	11/11/2019
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.	90 tablet	2	04/09/2018	12/03/2018
nitrofurantoin, macrocrystal-monohydrate, (MACROBID) 100 MG capsule	TK 1 C PO Q 12 H WF FOR 7 DAYS		0	08/08/2018	07/31/2019
terbinafine HCl (LAMISIL) 250 mg tablet	TK 1 T PO QD		2	09/29/2018	07/31/2019
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

## Implants - documented as of this encounter

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfi 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
<b>Screw Low Profile 2.7x14mm Locking Ss Ar-8827l-14 - Sar-8827l-14</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2

<b>Screw Low Profile 2.7x12mm Locking Ss Ar-8827l-12 - Sar-8827l-12</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8827L-12 / AR-8827L-12 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Screw Low Profile 2.7x16mm Locking Ss Ar-8827l-16 - Sar-8827l-16</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8827L-16 / AR-8827L-16 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-12 / AR-8835-12 / 1-092518-2
Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-14 / AR-8835-14 / 1-092518-2
Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-22 / AR-8835-22 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-26 / AR-8835-26 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.				
<b>Implant Knotless Syndesmosis Tightrope Xp Stainless Steel Ar-8925ss - Sar-8925ss</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8925SS / AR-8925SS / 10224713
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL, UHMWPE MEDIAL SIDE.				
<b>Screw Low Profile 4x46 Cannulated Long Thread Stainless Steel Ar-8840cl-46 - Sar-8840cl-46</b>	OTHER IMPLANTS	Left: Ankle	ARTHREX INC	AR-8840CL-46 / AR-8840CL-46 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. MEDIAL SIDE.				



## Results - documented in this encounter

XR ANKLE 3+ VW (XR ANKLE 3 OR MORE VW LEFT) - Final result (10/18/2018 10:36 AM MDT)

Specimen

Impressions	Performed At
1. Open reduction internal fixation of the trimalleolar left ankle fracture with progression towards healing. The hardware is intact.	POWERSCRIBE PACS ASOBGYN
Narrative	Performed At
HISTORY: Post-operative state.	POWERSCRIBE PACS ASOBGYN
COMPARISON: September 24, 2018.	
TECHNIQUE: Left ankle, 3 views.	
FINDINGS: Postoperative changes are present consistent with open reduction internal fixation of the distal fibula and medial malleolus fractures. The posterior malleolus fracture is in near-anatomic alignment. A syndesmotic button screws present.	

## Procedure Note

### Edi, Rad Results - 10/18/2018 11:34 AM MDT

Formatting of this note might be different from the original.

HISTORY: Post-operative state.

COMPARISON: September 24, 2018.

TECHNIQUE: Left ankle, 3 views.

FINDINGS: Postoperative changes are present consistent with open reduction internal fixation of the distal fibula and medial malleolus fractures. The posterior malleolus fracture is in near-anatomic alignment. A syndesmotic button screws present.

### IMPRESSION:

1. Open reduction internal fixation of the trimalleolar left ankle fracture with progression towards healing. The hardware is intact.

Performing Organization	Address	City/State/ZIP Code	Phone Number
POWERSCRIBE PACS ASOBGYN			



## Visit Diagnoses - documented in this encounter

Diagnosis

Post-operative state

## Advance Directives

For more information, please contact: 208-381-2183

### Documents on File

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

### Latest Code Status on File

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

### Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

### Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712		Oct. 18, 2018
Custodian Organization		
<b>St. Luke's Health System</b> Boise, ID 83712		

Encounter Providers	Encounter Date
<b>MD Kaitlin C. Neary, MD</b> (Attending) 208-706-2663 (Work) 208-489-4300 (Fax) 3399 E Louise Dr Suite 200 Meridian, ID 83642 Orthopedic Surgery	Oct. 18, 2018

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Reason for Visit

Reason  
POV

## Encounter Details

Date	Type	Department	Care Team
10/18/2018	Office Visit	St. Luke's Clinic - Orthopedics - Meridian 3399 E LOUISE DR STE 200 MERIDIAN, ID 83642-5047 208-706-2663	<b>Neary, Kaitlin C., MD</b> 3399 E Louise Dr Suite 200 Meridian, ID 83642 208-706-2663 208-489-4300 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019	Discontinued (Patient stopped taking)
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019	Expired
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.	90 tablet	2	04/09/2018	12/03/2018	Discontinued (Reorder)
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	40 tablet	0	10/11/2018	07/31/2019	Discontinued (Patient stopped taking)
estradiol 10 mcg Tab	Place 10 mcg vaginally 2 (two) times a week.		0	05/31/2018	03/02/2020	Discontinued (Reorder)
nitrofurantoin, macrocrystal-monohydrate, (MACROBID) 100 MG capsule	TK 1 C PO Q 12 H WF FOR 7 DAYS		0	08/08/2018	07/31/2019	Discontinued (Patient stopped taking)
terbinafine HCl (LAMISIL) 250 mg tablet	TK 1 T PO QD		2	09/29/2018	07/31/2019	Discontinued (Patient stopped taking)

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD)>OR=6MO PF	10/02/2017	

## Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
Tobacco Cessation: Counseling Given: Yes				
Alcohol Use	Standard Drinks/Week			
Yes	2 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits	Answer			Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week			08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily			08/02/2019
Physical Activity	Answer			Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days			08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				

## Last Filed Vital Signs - documented in this encounter

Not on file

## Progress Notes - documented in this encounter

Neary, Kaitlin C., MD - 10/18/2018 10:15 AM MDT

Formatting of this note is different from the original.

DATE OF VISIT: 10/18/2018

**REASON FOR VISIT:** 3 weeks status post:

1. Open reduction internal fixation left trimalleolar ankle fracture
2. Open reduction internal fixation left syndesmosis

**HISTORY OF PRESENT ILLNESS:**

The patient is a pleasant 62-year-old female presenting to clinic today now 3 weeks out from surgery. She states that at this point in time she is doing much better. She has continued to advance her activity and has been able to remain nonweightbearing without difficulty. Her pain is controlled and she has started to wean herself off pain medicine. She has no new concerns in clinic today and feels as if she has continued to improve.

**REVIEW OF SYSTEMS:**

A complete review of systems was performed. The patient denies any recent fevers, chills, fatigue, nausea, vomiting, chest pain, shortness of breath, dyspnea on exertion, abdominal pain, lower extremity swelling (other than swelling secondary to surgery or injury), or any other recent illnesses other than stated in HPI.

**PHYSICAL EXAM:**

There were no vitals taken for this visit.

**GENERAL:** The patient is well-appearing and is awake, alert, and in no acute distress

**MUSCULOSKELETAL:**

Upon evaluation of her left lower extremity, she has multiple well-healed incisions. They are all clean, dry, and intact. Sutures were removed and Steri-Strips were applied. She has minimal swelling and no overlying skin changes. She does have some stiffness with ankle range of motion including neutral of dorsiflexion to 30 degrees of plantarflexion. Stability and strength were not examined. She has full sensation intact to light touch in all distal dermatomes. Her foot is warm and well-perfused and dorsalis pedis pulses 2+. She is grossly neurovascularly intact distally. Her swelling is minimal.

**IMAGING:**

Radiographs including 3 nonweightbearing views of the left lower extremity were obtained and independently reviewed in clinic today. She has evidence of healing fractures with egression of healing compared to her intraoperative imaging. Her mortise remains intact and congruent. Fracture alignment and position of hardware also remain unchanged compared to intraoperative imaging. Her mortise is congruent and the alignment of her tibiotalar joint appears to be restored. Her posterior malleolus is in acceptable position. No other acute osseous abnormalities appreciated.

**DIAGNOSTIC STUDIES/OTHER:**

None

**DIAGNOSES:**

1. Post-operative state

**ASSESSMENT:**

Three weeks status post:

1. Open reduction internal fixation left trimalleolar ankle fracture
2. Open reduction internal fixation left syndesmosis

**PLAN:**

Today in clinic Mary is doing very well. She feels as if she has continued to improve and her pain is also improving. Her sutures were removed and Steri-Strips are applied. I told her she may come out of the cam boot now for showering and light range of motion only, otherwise she must remain nonweightbearing in the cam boot full-time. I will see her back in 3 weeks for repeat clinical exam and nonweightbearing radiographs of her left ankle. All questions were answered and she was in full agreement with the above-stated plan.

Kaitlin C. Neary, M.D.

St. Luke's Department of Orthopaedics

Foot and Ankle Surgery

Nearyk@slhs.org

**CC:**

Devin M Laky, MD

No ref. provider found

This note was transcribed using Dragon Natural Speaking voice recognition system. Despite editing there may be minor grammatical and/or minor typographical errors in this transcriptions due to the limitations inherent with voice activated computer dictation. This should not adversely affect the overall integrity of the document

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

## Implants - documented as of this encounter

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfi 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
<b>Screw Low Profile 2.7x14mm Locking Ss Ar- 8827l-14 - Sar-8827l-14</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2
<b>Screw Low Profile 2.7x12mm Locking Ss Ar- 8827l-12 - Sar-8827l-12</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-12 / AR-8827L-12 / 1-092518-2
<b>Screw Low Profile 2.7x16mm Locking Ss Ar- 8827l-16 - Sar-8827l-16</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-16 / AR-8827L-16 / 1-092518-2
<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-12 / AR-8835-12 / 1-092518-2
<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b> Implanted: Qty: 2 on 09/25/2018 by Neary,	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-14 / AR-8835-14 /

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

<b>Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-22 / AR-8835-22 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

<b>Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-26 / AR-8835-26 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

<b>Implant Knotless Syndesmosis Tightrope Xp Stainless Steel Ar-8925ss - Sar-8925ss</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8925SS / AR-8925SS / 10224713
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				

Description: MATERIAL - STAINLESS STEEL, UHMWPE  
MEDIAL SIDE.

<b>Screw Low Profile 4x46 Cannulated Long Thread Stainless Steel Ar-8840cl-46 - Sar-8840cl-46</b>	OTHER IMPLANTS	Left: Ankle	ARTHREX INC	AR-8840CL-46 / AR-8840CL-46 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
MEDIAL SIDE.

## Results - documented in this encounter

Not on file

## Visit Diagnoses - documented in this encounter

Diagnosis

Post-operative state - Primary

## Advance Directives

For more information, please contact: 208-381-2183

## Documents on File

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

## Latest Code Status on File

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

# Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

## Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712		Oct. 18, 2018
Custodian Organization		
<b>St. Luke's Health System</b> Boise, ID 83712		
Encounter Providers	Encounter Date	
<b>MD Kaitlin C. Neary, MD</b> (Attending) 208-706-2663 (Work) 208-489-4300 (Fax) 3399 E Louise Dr Suite 200 Meridian, ID 83642 Orthopedic Surgery	Oct. 18, 2018	

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Reason for Visit

Reason

POV

## Encounter Details

Date	Type	Department	Care Team
10/04/2018	Office Visit	St. Luke's Clinic - Orthopedics - Meridian 3399 E LOUISE DR STE 200 MERIDIAN, ID 83642-5047 208-706-2663	<b>Neary, Kaitlin C., MD</b> 3399 E Louise Dr Suite 200 Meridian, ID 83642 208-706-2663 208-489-4300 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019	Discontinued (Patient stopped taking)
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019	Expired
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.	90 tablet	2	04/09/2018	12/03/2018	Discontinued (Reorder)
hydROXYzine (VISTARIL) 50 MG capsule	Take 1 capsule (50 mg total) by mouth 3 (three) times daily as needed for Itching or Other (nausea).	30 capsule	0	09/24/2018	10/04/2018	Expired
traMADol (ULTRAM) 50 mg tablet	Take 1 tablet (50 mg total) by mouth every 6 (six) hours as needed for Pain.	30 tablet	0	09/24/2018	10/04/2018	Discontinued (Reorder)
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1-2 tablets by mouth every 4 (four) hours as needed for Pain.	60 tablet	0	09/25/2018	10/04/2018	Discontinued (Reorder)
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	30 tablet	0	10/04/2018	10/11/2018	Discontinued (Reorder)
traMADol (ULTRAM) 50 mg tablet	Take 1 tablet (50 mg total) by mouth every 6 (six) hours as needed for Pain.	30 tablet	0	10/04/2018	10/14/2018	Expired

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD)>OR=6MO PF	10/02/2017	

**Social History** - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
Alcohol Use	Standard Drinks/Week			
Yes	2 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits	Answer			Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week			08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily			08/02/2019
Physical Activity	Answer			Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days			08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				

**Last Filed Vital Signs** - documented in this encounter

Not on file
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**Ordered Prescriptions** - documented in this encounter

Prescription	Sig	Dispensed	Refills	Start Date	End Date
traMADol (ULTRAM) 50 mg tablet	Take 1 tablet (50 mg total) by mouth every 6 (six) hours as needed for Pain.	30 tablet	0	10/04/2018	10/14/2018
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	30 tablet	0	10/04/2018	10/11/2018

**Progress Notes** - documented in this encounter

Neary, Kaitlin C., MD - 10/04/2018 10:15 AM MDT  
 Formatting of this note might be different from the original.  
 DATE OF VISIT: 10/4/2018

**REASON FOR VISIT:** One week status post:  
 1. Open reduction internal fixation left trimalleolar ankle fracture  
 2. Open reduction internal fixation left syndesmosis

**HISTORY OF PRESENT ILLNESS:**  
 The patient is a pleasant 52-year-old female presenting 1 week out from surgery. She states that overall she is now doing a fair amount better. Initially, she was having significant pain related to her splint. The night following surgery, she presented to the emergency department secondary to pain. They loosened the splint and her pain immediately improved. She otherwise has continued to take her pain medication and feels as if things are slowly improving. With that said, she still does feel fairly unstable on the knee scooter and has had a hard time adjusting to being nonweightbearing. She has been able to become more ambulatory over the past few days and has been able to increase her activity. Overall she does feel as if things are improving.

**REVIEW OF SYSTEMS:**  
 A complete review of systems was performed. The patient denies any recent fevers, chills, fatigue, nausea, vomiting, chest pain, shortness of breath, dyspnea on exertion, abdominal pain, lower extremity swelling (other than swelling secondary to surgery or injury), or any other recent illnesses other than stated in HPI.

**PHYSICAL EXAM:**  
 There were no vitals taken for this visit.

GENERAL: The patient is well-appearing and is awake, alert, and in no acute distress

MUSCULOSKELETAL:

Today in clinic her splint was removed. Upon evaluation of her left ankle, her incisions are clean, dry, and intact. They appear to be healing adequately. She has a moderate amount of swelling and a mild amount of lateral ecchymosis. Otherwise her skin is intact without any signs of overlying skin changes. Strength and stability of her ankle were not examined. Range of motion was also not examined. Her foot is warm and well-perfused and dorsalis pedis pulses 2+. She has full sensation intact to light touch in all distal dermatomes. She is grossly neurovascularly intact distally.

IMAGING:

No new imaging today

DIAGNOSTIC STUDIES/OTHER:

None

DIAGNOSES:

No diagnosis found.

ASSESSMENT:

One week status post:

1. Open reduction internal fixation left trimalleolar ankle fracture
2. Open reduction internal fixation left syndesmosis

PLAN:

Today in clinic I reassured Mary that she is only a week out from surgery therefore I would still expect her to have some pain. I refilled her pain medications as well as her Vistaril. She was placed into a new dry dressing and back into the cam boot. She will keep the cam boot in place at all times over the next 2 weeks and we will continue to remain nonweightbearing. I will see her back in 2 weeks' time for repeat wound check, likely suture removal, and nonweightbearing radiographs of her left ankle. All questions were answered and she was in full agreement with the above-stated plan.

Kaitlin C. Neary, M.D.

St. Luke's Department of Orthopaedics

Foot and Ankle Surgery

Nearyk@slhs.org

CC:

Devin M Laky, MD

No ref. provider found

This note was transcribed using Dragon Natural Speaking voice recognition system. Despite editing there may be minor grammatical and/or minor typographical errors in this transcriptions due to the limitations inherent with voice activated computer dictation. This should not adversely affect the overall integrity of the document

Electronically signed by Kaitlin C. Neary, MD at 10/04/2018 5:25 PM MDT

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

## Implants - documented as of this encounter

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfi 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
<b>Screw Low Profile 2.7x14mm Locking Ss Ar- 8827l-14 - Sar-8827l-14</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2
<b>Screw Low Profile 2.7x12mm Locking Ss Ar- 8827l-12 - Sar-8827l-12</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-12 / AR-8827L-12 / 1-092518-2
<b>Screw Low Profile 2.7x16mm Locking Ss Ar- 8827l-16 - Sar-8827l-16</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-16 / AR-8827L-16 / 1-092518-2
<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-12 / AR-8835-12 / 1-092518-2
<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-14 / AR-8835-14 / 1-092518-2

## HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Implant Knotless Syndesmosis Tightrope  
Xp Stainless Steel Ar-8925ss - Sar-8925ss**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL, UHMWPE  
MEDIAL SIDE.

**Screw Low Profile 4x46 Cannulated Long****Thread Stainless Steel Ar-8840cl-46 - Sar-8840cl-46**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
MEDIAL SIDE.

 **Results** - documented in this encounter

Not on file

 **Visit Diagnoses** - documented in this encounter

Diagnosis

Postoperative state - Primary

 **Advance Directives**

For more information, please contact: 208-381-2183

**Documents on File**

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

**Latest Code Status on File**

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

# Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

## Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712		Oct. 04, 2018
Custodian Organization		
<b>St. Luke's Health System</b> Boise, ID 83712		
Encounter Providers	Encounter Date	
<b>MD Kaitlin C. Neary, MD</b> (Attending) 208-706-2663 (Work) 208-489-4300 (Fax) 3399 E Louise Dr Suite 200 Meridian, ID 83642 Orthopedic Surgery	Oct. 04, 2018	

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Reason for Visit

Reason
Cast Problem

## Encounter Details

Date	Type	Department	Care Team
09/25/2018 - 09/26/2018	Emergency	Meridian Emergency Department 520 S EAGLE RD MERIDIAN, ID 83642-6351 208-706-1140	<b>Kartel, Douglas S., MD</b> 3080 E Gentry Way Suite 210 Meridian, ID 83642 208-384-9022 208-388-1683 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019	Discontinued (Patient stopped taking)
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019	Expired
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.	90 tablet	2	04/09/2018	12/03/2018	Discontinued (Reorder)
HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	10 tablet	0	09/18/2018	09/28/2018	Expired
cephalexin (KEFLEX) 500 MG capsule	Take 1 capsule (500 mg total) by mouth 4 (four) times daily for 3 days.	12 capsule	0	09/24/2018	09/27/2018	Expired
hydrOXYzine (VISTARIL) 50 MG capsule	Take 1 capsule (50 mg total) by mouth 3 (three) times daily as needed for Itching or Other (nausea).	30 capsule	0	09/24/2018	10/04/2018	Expired
traMADol (ULTRAM) 50 mg tablet	Take 1 tablet (50 mg total) by mouth every 6 (six) hours as needed for Pain.	30 tablet	0	09/24/2018	10/04/2018	Discontinued (Reorder)
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1-2 tablets by mouth every 4 (four) hours as needed for Pain.	60 tablet	0	09/25/2018	10/04/2018	Discontinued (Reorder)

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD)>OR=6MO PF	10/02/2017	

**Social History** - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
Alcohol Use	Standard Drinks/Week			
Yes	2 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits		Answer		Date Recorded
How often do you have a drink containing alcohol?		4 or more times a week		08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?		Not asked		
How often do you have six or more drinks on one occasion?		Daily or almost daily		08/02/2019
Physical Activity		Answer		Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?		0 days		08/02/2019
On average, how many minutes do you engage in exercise at this level?		Not asked		
Sex Assigned at Birth		Date Recorded		
Not on file				

**Last Filed Vital Signs** - documented in this encounter

Vital Sign	Reading	Time Taken	Comments
Blood Pressure	101/67	09/26/2018 12:09 AM MDT	
Pulse	59	09/26/2018 12:09 AM MDT	
Temperature	36.7 °C (98.1 °F)	09/25/2018 9:26 PM MDT	
Respiratory Rate	16	09/26/2018 12:09 AM MDT	
Oxygen Saturation	93%	09/25/2018 9:26 PM MDT	
Inhaled Oxygen Concentration	-	-	
Weight	-	-	
Height	-	-	
Body Mass Index	-	-	

**Discharge Instructions** - documented in this encounter

**Instructions**

Kartel, Douglas S., MD - 09/26/2018

Formatting of this note might be different from the original.

Continue the postoperative instructions provided for you by your orthopedic surgeon. Keep your foot and ankle elevated. Do not bear weight on her ankle. Follow-up with your orthopedic specialist within the next 2 days for recheck. Return to the emergency department at any time for any additional concerns.

## Medications at Time of Discharge - documented as of this encounter

Medication	Sig	Dispensed	Refills	Start Date	End Date
cephalexin (KEFLEX) 500 MG capsule	Take 1 capsule (500 mg total) by mouth 4 (four) times daily for 3 days.	12 capsule	0	09/24/2018	09/27/2018
HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	10 tablet	0	09/18/2018	09/28/2018
hydrOXYzine (VISTARIL) 50 MG capsule	Take 1 capsule (50 mg total) by mouth 3 (three) times daily as needed for Itching or Other (nausea).	30 capsule	0	09/24/2018	10/04/2018
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019
estradiol 10 mcg Tab	Place 10 mcg vaginally 2 (two) times a week.		0	05/31/2018	03/02/2020
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1-2 tablets by mouth every 4 (four) hours as needed for Pain.	60 tablet	0	09/25/2018	10/04/2018
hydrOXYzine HCl (ATARAX) 25 MG tablet	Take 1 tablet (25 mg total) by mouth nightly as needed for Other (insomnia).	30 tablet	0	01/22/2018	11/11/2019
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.	90 tablet	2	04/09/2018	12/03/2018
nitrofurantoin, macrocrystal-monohydrate, (MACROBID) 100 MG capsule	TK 1 C PO Q 12 H WF FOR 7 DAYS		0	08/08/2018	07/31/2019
traMADol (ULTRAM) 50 mg tablet	Take 1 tablet (50 mg total) by mouth every 6 (six) hours as needed for Pain.	30 tablet	0	09/24/2018	10/04/2018
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

## Implants - documented as of this encounter

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfi 6 HI Lck Mdlr Ss Bn</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 /
<b>Arthrex Ar-8943bl-06 - Sar-8943bl-06</b>					1-092518-2

Implanted: Qty: 1 on 09/25/2018 by Neary,

Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL

Description: MATERIAL - STAINLESS STEEL

LATERAL SIDE

<b>Screw Low Profile 2.7x14mm Locking Ss Ar-8827l-14 - Sar-8827l-14</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8827L-14 / AR-8827L-14 / 1-092518-2
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Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE

<b>Screw Low Profile 2.7x12mm Locking Ss Ar-8827l-12 - Sar-8827l-12</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8827L-12 / AR-8827L-12 / 1-092518-2
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Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE

<b>Screw Low Profile 2.7x16mm Locking Ss Ar-8827l-16 - Sar-8827l-16</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8827L-16 / AR-8827L-16 / 1-092518-2
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Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.

<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-12 / AR-8835-12 / 1-092518-2
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Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.

<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-14 / AR-8835-14 / 1-092518-2
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Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.

<b>Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-22 / AR-8835-22 / 1-092518-2
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Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.

<b>Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-26 / AR-8835-26 / 1-092518-2
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Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.

<b>Implant Knotless Syndesmosis Tightrope Xp Stainless Steel Ar-8925ss - Sar-8925ss</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8925SS / AR-8925SS / 10224713
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Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL

Description: MATERIAL - STAINLESS STEEL, UHMWPE MEDIAL SIDE.

<b>Screw Low Profile 4x46 Cannulated Long Thread Stainless Steel Ar-8840cl-46 - Sar-8840cl-46</b>	OTHER IMPLANTS	Left: Ankle	ARTHREX INC	AR-8840CL-46 / AR-8840CL-46 / 1-092518-2
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Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION

**HOSPITAL**

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
MEDIAL SIDE.

**Results** - documented in this encounter

Not on file

**Visit Diagnoses** - documented in this encounter

Diagnosis

Acute left ankle pain - Primary

Postoperative pain of extremity

**Advance Directives**

For more information, please contact: 208-381-2183

**Documents on File**

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

**Latest Code Status on File**

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

**Patient Contacts**

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

# Document Information

## Primary Care Provider

**MD Devin M. Laky, MD** (Jan. 04, 2018 - Present)  
208-288-2255 (Work)  
208-706-2043 (Fax)  
3399 E Louise Dr  
Suite 100  
Meridian, ID 83642  
Family Medicine  
**St. Luke's Health System**  
Boise, ID 83712

## Other Service Providers

## Document Coverage Dates

Sep. 25, 2018 - Sep. 26, 2018

## Custodian Organization

**St. Luke's Health System**  
Boise, ID 83712

## Encounter Providers

## Encounter Date

**MD Douglas S. Kartel, MD** (Attending)  
208-384-9022 (Work)  
208-388-1683 (Fax)  
3080 E Gentry Way  
Suite 210  
Meridian, ID 83642  
Emergency Medicine

Sep. 25, 2018 - Sep. 26, 2018

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Reason for Visit

### Auth/Cert

Status	Reason	Specialty	Diagnoses / Procedures	Referred By Contact	Referred To Contact
			Diagnoses Injury of left ankle, initial encounter	Neary, Kaitlin C., MD 3399 E Louise Dr Suite 200 Meridian, ID 83642 Phone: 208-706-2663 Fax: 208-489-4300	

## Encounter Details

Date	Type	Department	Care Team
09/25/2018	Anesthesia	St. Luke's Clinic Intermountain Orthopedics Surgery Center - Elk's 600 W ROBBINS RD STE 400 BOISE, ID 83702-4564 208-706-9005	<b>Bailey, Jeanne S., MD</b>

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019	Discontinued (Patient stopped taking)
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019	Expired
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.	90 tablet	2	04/09/2018	12/03/2018	Discontinued (Reorder)
HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	10 tablet	0	09/18/2018	09/28/2018	Expired
cephalexin (KEFLEX) 500 MG capsule	Take 1 capsule (500 mg total) by mouth 4 (four) times daily for 3 days.	12 capsule	0	09/24/2018	09/27/2018	Expired
hydrOXYzine (VISTARIL) 50 MG capsule	Take 1 capsule (50 mg total) by mouth 3 (three) times daily as needed for Itching or Other (nausea).	30 capsule	0	09/24/2018	10/04/2018	Expired
traMADol (ULTRAM) 50 mg tablet	Take 1 tablet (50 mg total) by mouth every 6 (six) hours as needed for Pain.	30 tablet	0	09/24/2018	10/04/2018	Discontinued (Reorder)
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1-2 tablets by mouth every 4 (four) hours as needed for Pain.	60 tablet	0	09/25/2018	10/04/2018	Discontinued (Reorder)

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD)>OR=6MO PF	10/02/2017	

## Anesthesia Record - documented in this encounter

### Procedure Summary

Procedure Name	Responsible Anesthesiologist	Anesthesia Start Time	Anesthesia Stop Time
trimalleolar ankle open reduction internal fixation and syndesmosis open reduction	Jeanne S. Bailey, MD	09/25/18 1522	09/25/18 1738

internal fixation. (Left Ankle)

## Events

Date	Time	Event	Comment
09/25/2018	1520	1522 An Start	
		1522 In Room	
		1522 An Start Data	
		1544 An Induction	
		1544 Anesthesia Ready	
		1546 Proc Start	
		1547 An Tourn Inflated	
		1725 An Tourn Deflated	
		1734 Proc Finish	
		1735 an stop data	
		1735 Out of Room	
		1738 Handoff to RN	PACU Anesthesia to RN Handoff - Identify the patient by name prior to report (Circulating RN to PACU RN will SBAR per SL policy) - Identify the PACU nurse assuming the care of the patient - Review the procedure performed, surgeon, and surgical course - Relay any pertinent medical history - Discuss any significant anesthesia or intra-operative issues and management - Relay medications given during the case, specifically narcotics, PONV, Tylenol, and NSAIDS - Review the I&O with the RN (including blood products) - Review any early post-operative plans/expectations as needed - Ask if the nurse has any questions regarding the patient or the report In addition to the above PACU protocol, ICU transfers include: - Identify the ICU nurse and/or ICU physician assuming the care of the patient (ICU handoff specific) - Discuss any significant anesthesia or intra-operative issues and management such as airway, hemodynamics. Identify arterial line, central lines, or invasive monitors (ICU handoff specific) - Review any early post-operative plans/expectations such as anticipated lab work, sedation management, paralytic timing, airway/ventilation settings needed until ICU physician assumes care (ICU handoff specific)

1738 An Stop

## Meds

Name	Total
propofol (DIPRIVAN) 10 mg/mL	1,000.05 mg
ondansetron (ZOFTRAN) injection 4mg/2mL	8 mg
bupivacaine-EPINEPHrine 0.5%	15 mL
ropivacaine 0.5%	10 mL
lidocaine 2%	10 mL
ceFAZolin (ANCEF)	2,000 mg
midazolam (PF) (VERSED) injection 2 mg	2 mg

## Agents

Name
O2
O2 (Supplemental)

## Blood

No blood administrations on file.

## Lines, Drains, and Airways

Type	Details	Placement	Removal
Negative Pressure Wound Therapy	Wound #1; OR; PICO 4in.x8in. negative pressure wound system. (Lot# 1828 exp: 2020-07-01); 09/25/18; 1720	09/25/18 1720 by Colette King, RN	
Peripheral IV	09/25/18; 1322; No; 20 G; Left; Hand; Alcohol; None; Well without incident	09/25/18 1322 by Michelle Kormanik, RN	09/25/18 1815 by Joy Erman, RN
Incision	09/25/18; 1603; Left; Other (see notes); 4x4, Other (Comment), ABD, Splint Plaster, ACE, Tape (Comment); 09/25/18; 1750; (dsg intact in pacu)	09/25/18 1603 by Colette King, RN	09/25/18 1750 by Joy Erman, RN

**Social History** - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
Alcohol Use	Standard Drinks/Week			
Yes	2 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits		Answer		Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week		08/02/2019	
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily		08/02/2019	
Physical Activity		Answer		Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days		08/02/2019	
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				

**Last Filed Vital Signs** - documented in this encounter

Vital Sign	Reading	Time Taken	Comments
Blood Pressure	98/74	09/25/2018 4:10 PM MDT	
Pulse	61	09/25/2018 4:12 PM MDT	
Temperature	-	-	
Respiratory Rate	-	-	
Oxygen Saturation	-	-	
Inhaled Oxygen Concentration	-	-	
Weight	-	-	
Height	-	-	
Body Mass Index	-	-	

**Plan of Treatment** - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

**Implants** - documented as of this encounter

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Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfl 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
<b>Screw Low Profile 2.7x14mm Locking Ss Ar- 8827l-14 - Sar-8827l-14</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2
<b>Screw Low Profile 2.7x12mm Locking Ss Ar- 8827l-12 - Sar-8827l-12</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-12 / AR-8827L-12 / 1-092518-2
<b>Screw Low Profile 2.7x16mm Locking Ss Ar- 8827l-16 - Sar-8827l-16</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-16 / AR-8827L-16 / 1-092518-2
<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-12 / AR-8835-12 / 1-092518-2
<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-14 / AR-8835-14 / 1-092518-2
<b>Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-22 / AR-8835-22 / 1-092518-2
<b>Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-26 / AR-8835-26 / 1-092518-2
<b>Implant Knotless Syndesmosis Tightrope Xp Stainless Steel Ar-8925ss - Sar-8925ss</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL, UHMWPE MEDIAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8925SS / AR-8925SS / 10224713

Implanted: Qty: 1 on 09/25/2018 by Neary,  
 Kaitlin C., MD at IDAHO ELKS REHABILITATION  
 HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
 MEDIAL SIDE.

## Procedures - documented in this encounter

Procedure Name	Priority	Date/Time	Associated Diagnosis	Comments
ANESTHESIA PERIPHERAL BLOCK Routine		09/25/2018 3:56 PM MDT		
ANESTHESIA PERIPHERAL BLOCK Routine		09/25/2018 3:56 PM MDT		
ANESTHESIA PERIPHERAL BLOCK Routine		09/25/2018 3:53 PM MDT		

## Results - documented in this encounter

Not on file

## Administered Medications - documented in this encounter

### Inactive Administered Medications - up to 3 most recent administrations

Medication Order	MAR Action	Action Date	Dose	Rate	Site
bupivacaine-EPINEPHrine PF (MARCAINE-EPI) 0.5 % 1:200,000 injection Peripheral Nerve Block, As needed, Other, Starting on Tue 9/25/18 at 1521, Anesthesia Intra-op	Given	09/25/2018 3:21 PM MDT	15 mLs		
ceFAZolin (ANCEF) injection As needed, Starting on Tue 9/25/18 at 1522, Anesthesia Intra-op	Given	09/25/2018 3:22 PM MDT	2,000 mg		
lidocaine (PF) (XYLOCAINE) 20 mg/mL (2 %) injection Peripheral Nerve Block, As needed, Starting on Tue 9/25/18 at 1521, Anesthesia Intra-op	Given	09/25/2018 3:21 PM MDT	10 mLs		
midazolam (PF) (VERSED) injection 2 mg 2 mg, IntraVENOUS, As needed, sedation, Procedural Sedation, Starting on Tue 9/25/18 at 1258, Give every 1 minute Procedural Sedation to meet sedation goal. Max dose 4 mg., Preoperative	Given Given	09/25/2018 3:30 PM MDT 09/25/2018 3:03 PM MDT	2 mg 2 mg		
ondansetron (ZOFTRAN) injection IntraVENOUS, As needed, Nausea, Vomiting, Starting on Tue 9/25/18 at 1522, Anesthesia Intra-op	Given Given	09/25/2018 5:19 PM MDT 09/25/2018 3:22 PM MDT	4 mg 4 mg		
propofol (DIPRIVAN) IV solution IntraVENOUS, Continuous PRN, Starting on Tue 9/25/18 at 1530, Anesthesia Intra-op	New Bag	09/25/2018 3:30 PM MDT	100 mcg/kg/min	53.1 mL/hr	
ropivacaine PF (NAROPIN) 5 mg/mL (0.5 %) injection Peripheral Nerve Block, As needed, Other, Starting on Tue 9/25/18 at 1521, Anesthesia Intra-op	Given	09/25/2018 3:21 PM MDT	10 mLs		

## Advance Directives

For more information, please contact: 208-381-2183

### Documents on File

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

### Latest Code Status on File

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

### Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

### Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712		Sep. 25, 2018
Custodian Organization		
<b>St. Luke's Health System</b> Boise, ID 83712		
Encounter Providers		

Encounter Providers	Encounter Date
<b>MD Jeanne S. Bailey, MD</b> (Attending) Anesthesiology	Sep. 25, 2018

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Reason for Visit

### Auth/Cert

Status	Reason	Specialty	Diagnoses / Procedures	Referred By Contact	Referred To Contact
			Diagnoses Injury of left ankle, initial encounter	Neary, Kaitlin C., MD 3399 E Louise Dr Suite 200 Meridian, ID 83642 Phone: 208-706-2663 Fax: 208-489-4300	

## Encounter Details

Date	Type	Department	Care Team
09/25/2018	Anesthesia Event	St. Luke's Clinic Intermountain Orthopedics Surgery Center - Elk's 600 W ROBBINS RD STE 400 BOISE, ID 83702-4564 208-706-9005	<b>Bailey, Jeanne S., MD</b>

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019	Discontinued (Patient stopped taking)
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019	Expired
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.	90 tablet	2	04/09/2018	12/03/2018	Discontinued (Reorder)
HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	10 tablet	0	09/18/2018	09/28/2018	Expired
cephalexin (KEFLEX) 500 MG capsule	Take 1 capsule (500 mg total) by mouth 4 (four) times daily for 3 days.	12 capsule	0	09/24/2018	09/27/2018	Expired
hydrOXYzine (VISTARIL) 50 MG capsule	Take 1 capsule (50 mg total) by mouth 3 (three) times daily as needed for Itching or Other (nausea).	30 capsule	0	09/24/2018	10/04/2018	Expired
traMADol (ULTRAM) 50 mg tablet	Take 1 tablet (50 mg total) by mouth every 6 (six) hours as needed for Pain.	30 tablet	0	09/24/2018	10/04/2018	Discontinued (Reorder)
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1-2 tablets by mouth every 4 (four) hours as needed for Pain.	60 tablet	0	09/25/2018	10/04/2018	Discontinued (Reorder)

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD)>OR=6MO PF	10/02/2017	

## Anesthesia Record - documented in this encounter

### Procedure Summary

Procedure Name	Responsible Anesthesiologist	Anesthesia Start Time	Anesthesia Stop Time
trimalleolar ankle open reduction internal fixation and syndesmosis open reduction	Jeanne S. Bailey, MD	09/25/18 1522	09/25/18 1738

internal fixation. (Left Ankle)

## Events

Date	Time	Event	Comment
09/25/2018	1520	1522 An Start	
		1522 In Room	
		1522 An Start Data	
		1544 An Induction	
		1544 Anesthesia Ready	
		1546 Proc Start	
		1547 An Tourn Inflated	
		1725 An Tourn Deflated	
		1734 Proc Finish	
		1735 an stop data	
		1735 Out of Room	
		1738 Handoff to RN	PACU Anesthesia to RN Handoff - Identify the patient by name prior to report (Circulating RN to PACU RN will SBAR per SL policy) - Identify the PACU nurse assuming the care of the patient - Review the procedure performed, surgeon, and surgical course - Relay any pertinent medical history - Discuss any significant anesthesia or intra-operative issues and management - Relay medications given during the case, specifically narcotics, PONV, Tylenol, and NSAIDS - Review the I&O with the RN (including blood products) - Review any early post-operative plans/expectations as needed - Ask if the nurse has any questions regarding the patient or the report In addition to the above PACU protocol, ICU transfers include: - Identify the ICU nurse and/or ICU physician assuming the care of the patient (ICU handoff specific) - Discuss any significant anesthesia or intra-operative issues and management such as airway, hemodynamics. Identify arterial line, central lines, or invasive monitors (ICU handoff specific) - Review any early post-operative plans/expectations such as anticipated lab work, sedation management, paralytic timing, airway/ventilation settings needed until ICU physician assumes care (ICU handoff specific)

1738 An Stop

## Meds

Name	Total
propofol (DIPRIVAN) 10 mg/mL	1,000.05 mg
ondansetron (ZOFTRAN) injection 4mg/2mL	8 mg
bupivacaine-EPINEPHrine 0.5%	15 mL
ropivacaine 0.5%	10 mL
lidocaine 2%	10 mL
ceFAZolin (ANCEF)	2,000 mg
midazolam (PF) (VERSED) injection 2 mg	2 mg

## Agents

Name
O2
O2 (Supplemental)

## Blood

No blood administrations on file.

## Lines, Drains, and Airways

Type	Details	Placement	Removal
Negative Pressure Wound Therapy	Wound #1; OR; PICO 4in.x8in. negative pressure wound system. (Lot# 1828 exp: 2020-07-01); 09/25/18; 1720	09/25/18 1720 by Colette King, RN	
Peripheral IV	09/25/18; 1322; No; 20 G; Left; Hand; Alcohol; None; Well without incident	09/25/18 1322 by Michelle Kormanik, RN	09/25/18 1815 by Joy Erman, RN
Incision	09/25/18; 1603; Left; Other (see notes); 4x4, Other (Comment), ABD, Splint Plaster, ACE, Tape (Comment); 09/25/18; 1750; (dsg intact in pacu)	09/25/18 1603 by Colette King, RN	09/25/18 1750 by Joy Erman, RN

**Social History** - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
Alcohol Use	Standard Drinks/Week			
Yes	2 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits	Answer			Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week			08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily			08/02/2019
Physical Activity	Answer			Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days			08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				

**Last Filed Vital Signs** - documented in this encounter

Vital Sign	Reading	Time Taken	Comments
Blood Pressure	98/74	09/25/2018 4:10 PM MDT	
Pulse	61	09/25/2018 4:12 PM MDT	
Temperature	-	-	
Respiratory Rate	-	-	
Oxygen Saturation	-	-	
Inhaled Oxygen Concentration	-	-	
Weight	-	-	
Height	-	-	
Body Mass Index	-	-	

**Plan of Treatment** - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

**Implants** - documented as of this encounter

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Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfl 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
<b>Screw Low Profile 2.7x14mm Locking Ss Ar- 8827l-14 - Sar-8827l-14</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2
<b>Screw Low Profile 2.7x12mm Locking Ss Ar- 8827l-12 - Sar-8827l-12</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-12 / AR-8827L-12 / 1-092518-2
<b>Screw Low Profile 2.7x16mm Locking Ss Ar- 8827l-16 - Sar-8827l-16</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-16 / AR-8827L-16 / 1-092518-2
<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-12 / AR-8835-12 / 1-092518-2
<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-14 / AR-8835-14 / 1-092518-2
<b>Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-22 / AR-8835-22 / 1-092518-2
<b>Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-26 / AR-8835-26 / 1-092518-2
<b>Implant Knotless Syndesmosis Tightrope Xp Stainless Steel Ar-8925ss - Sar-8925ss</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL, UHMWPE MEDIAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8925SS / AR-8925SS / 10224713

Implanted: Qty: 1 on 09/25/2018 by Neary,  
 Kaitlin C., MD at IDAHO ELKS REHABILITATION  
 HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
 MEDIAL SIDE.

## Procedures - documented in this encounter

Procedure Name	Priority	Date/Time	Associated Diagnosis	Comments
ANESTHESIA PERIPHERAL BLOCK Routine		09/25/2018 3:56 PM MDT		
ANESTHESIA PERIPHERAL BLOCK Routine		09/25/2018 3:56 PM MDT		
ANESTHESIA PERIPHERAL BLOCK Routine		09/25/2018 3:53 PM MDT		

## Results - documented in this encounter

Not on file

## Administered Medications - documented in this encounter

### Inactive Administered Medications - up to 3 most recent administrations

Medication Order	MAR Action	Action Date	Dose	Rate	Site
bupivacaine-EPINEPHrine PF (MARCAINE-EPI) 0.5 % 1:200,000 injection Peripheral Nerve Block, As needed, Other, Starting on Tue 9/25/18 at 1521, Anesthesia Intra-op	Given	09/25/2018 3:21 PM MDT	15 mLs		
ceFAZolin (ANCEF) injection As needed, Starting on Tue 9/25/18 at 1522, Anesthesia Intra-op	Given	09/25/2018 3:22 PM MDT	2,000 mg		
lidocaine (PF) (XYLOCAINE) 20 mg/mL (2 %) injection Peripheral Nerve Block, As needed, Starting on Tue 9/25/18 at 1521, Anesthesia Intra-op	Given	09/25/2018 3:21 PM MDT	10 mLs		
midazolam (PF) (VERSED) injection 2 mg 2 mg, IntraVENOUS, As needed, sedation, Procedural Sedation, Starting on Tue 9/25/18 at 1258, Give every 1 minute Procedural Sedation to meet sedation goal. Max dose 4 mg., Preoperative	Given Given	09/25/2018 3:30 PM MDT 09/25/2018 3:03 PM MDT	2 mg 2 mg		
ondansetron (ZOFTRAN) injection IntraVENOUS, As needed, Nausea, Vomiting, Starting on Tue 9/25/18 at 1522, Anesthesia Intra-op	Given Given	09/25/2018 5:19 PM MDT 09/25/2018 3:22 PM MDT	4 mg 4 mg		
propofol (DIPRIVAN) IV solution IntraVENOUS, Continuous PRN, Starting on Tue 9/25/18 at 1530, Anesthesia Intra-op	New Bag	09/25/2018 3:30 PM MDT	100 mcg/kg/min	53.1 mL/hr	
ropivacaine PF (NAROPIN) 5 mg/mL (0.5 %) injection Peripheral Nerve Block, As needed, Other, Starting on Tue 9/25/18 at 1521, Anesthesia Intra-op	Given	09/25/2018 3:21 PM MDT	10 mLs		

## Advance Directives

For more information, please contact: 208-381-2183

### Documents on File

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

### Latest Code Status on File

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

### Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

### Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712		Sep. 25, 2018
Custodian Organization		
<b>St. Luke's Health System</b> Boise, ID 83712		
Encounter Providers		

Encounter Providers	Encounter Date
<b>MD Jeanne S. Bailey, MD</b> (Attending) Anesthesiology	Sep. 25, 2018

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Reason for Visit

### Auth/Cert

Status	Reason	Specialty	Diagnoses / Procedures	Referred By Contact	Referred To Contact
			Diagnoses Injury of left ankle, initial encounter	Neary, Kaitlin C., MD 3399 E Louise Dr Suite 200 Meridian, ID 83642 Phone: 208-706-2663 Fax: 208-489-4300	

## Encounter Details

Date	Type	Department	Care Team
09/25/2018	Surgery: OPEN REDUCTION INTERNAL FIXATION ANKLE	St. Luke's Clinic Intermountain Orthopedics Surgery Center - Elk's 600 W ROBBINS RD STE 400 BOISE, ID 83702-4564 208-706-9005	<b>Neary, Kaitlin C., MD</b> 3399 E Louise Dr Suite 200 Meridian, ID 83642 208-706-2663 208-489-4300 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019	Discontinued (Patient stopped taking)
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019	Expired
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.	90 tablet	2	04/09/2018	12/03/2018	Discontinued (Reorder)
HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	10 tablet	0	09/18/2018	09/28/2018	Expired
cephalexin (KEFLEX) 500 MG capsule	Take 1 capsule (500 mg total) by mouth 4 (four) times daily for 3 days.	12 capsule	0	09/24/2018	09/27/2018	Expired
hydrOXYzine (VISTARIL) 50 MG capsule	Take 1 capsule (50 mg total) by mouth 3 (three) times daily as needed for Itching or Other (nausea).	30 capsule	0	09/24/2018	10/04/2018	Expired
oxyCODONE (ROXICODONE) 5 MG immediate release tablet	Take 1-2 tablets (5-10 mg total) by mouth every 4 (four) hours as needed for severe pain.	60 tablet	0	09/24/2018	09/25/2018	Discontinued (Stop Taking at Discharge)
traMADol (ULTRAM) 50 mg tablet	Take 1 tablet (50 mg total) by mouth every 6 (six) hours as needed for Pain.	30 tablet	0	09/24/2018	10/04/2018	Discontinued (Reorder)
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1-2 tablets by mouth every 4 (four) hours as needed for Pain.	60 tablet	0	09/25/2018	10/04/2018	Discontinued (Reorder)

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD)>OR=6MO PF	10/02/2017	

# Surgery Details

Date/Time	Status	Location	OR	Service	Patient Class	Case Class	Case Type	Trauma Case?
9/25/18 2:00 PM	Posted	SLRH SURGERY CENTER ROBBINS RD	OR 01	Orthopedic Surgery	Hospital Outpatient Surgery	Green (Elective)		
Panel 1 Procedure		LRB	Anes	Op Region	Wound Class	Comments		
trimalleolar ankle open reduction internal fixation and syndesmosis open reduction internal fixation.			Left	General	Ankle	Clean		
Surgeon		Surgeon Role		Service		Panel		
Neary, Kaitlin C., MD		Primary		Orthopedic Surgery		1		

## Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
Alcohol Use	Standard Drinks/Week			
Yes	2 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits		Answer	Date Recorded	
How often do you have a drink containing alcohol?		4 or more times a week	08/02/2019	
How many drinks containing alcohol do you have on a typical day when you are drinking?		Not asked		
How often do you have six or more drinks on one occasion?		Daily or almost daily	08/02/2019	
Physical Activity		Answer	Date Recorded	
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?		0 days	08/02/2019	
On average, how many minutes do you engage in exercise at this level?		Not asked		
Sex Assigned at Birth		Date Recorded		
Not on file				

## Last Filed Vital Signs - documented in this encounter

Vital Sign	Reading	Time Taken	Comments
Blood Pressure	116/70	09/25/2018 3:20 PM MDT	
Pulse	65	09/25/2018 3:20 PM MDT	
Temperature	36.9 °C (98.5 °F)	09/25/2018 1:12 PM MDT	
Respiratory Rate	14	09/25/2018 3:20 PM MDT	
Oxygen Saturation	95%	09/25/2018 3:20 PM MDT	
Inhaled Oxygen Concentration	-	-	
Weight	88.5 kg (195 lb)	09/25/2018 1:12 PM MDT	
Height	165.1 cm (5' 5")	09/25/2018 1:12 PM MDT	
Body Mass Index	32.45	09/25/2018 1:12 PM MDT	

## Discharge Instructions - documented in this encounter

### Instructions

Nurse Joy E - 09/25/2018

Formatting of this note might be different from the original.

Frequently Asked Questions about Infections after Surgery

**What is an infection after a surgery or procedure?**

A surgical site infection is an infection that occurs after surgery in the part of the body where the surgery or procedure took place.

Most patients who have surgery do not develop an infection.

**What are common symptoms of infection?**

- Redness and pain around the area where you had surgery
- Drainage of cloudy fluid or pus from your surgical incision
- General "ill or bad" feeling different from your usual
- Fever

**What can I do to help prevent an infection after surgery?**

- Keep your hands clean
- Keep your incision and bandage clean
- Limit or avoid touching your incision and bandage
- If you need to touch the area around your incision or bandage, clean your hands before and afterwards
- Do not let people other than your caregiver touch your incision or bandage

**What do I need to do when I go home from the hospital?**

- Make sure you understand how to care for your incision and bandage before you leave the hospital or clinic
- Always wash your hands before and after caring for your incision or bandage
- Look at your incision area and bandage at least once a day
- Do not put lotion or ointment directly on your incision before talking with your doctor
- Sleep in clean clothes and bed sheets
- Shower or sponge bath daily. Do not soak in tubs or pools until next doctor visit.
- Keep pets away from your incision and bandage
- If you have redness and pain in the area of your surgery, call your doctor immediately.

**What can I do to help my incision heal?**

- Eat nutritious foods. For example, protein, fruits and vegetables.
- Drink fluids
- Get plenty of rest
- Walk as able several times a day. Gradually increase activity.

**Can surgical site infections be treated?**

Yes. Treatment may be an antibiotic for the type of infection, special incision care or surgery. It is important to call your doctor to get the right care.

**Reference:** [Www.cdc.gov/hai/ssi/faq](http://www.cdc.gov/hai/ssi/faq).

Nerve blocks are used for pain control during & after surgery. How your nerve block was administered depended on your preference and medical considerations.

Nerve blocks cause temporary numbness and loss of movement. Both Femoral and Sciatic nerve blocks have been performed on you today. The blocks usually last 8-12 hours but can last as long as 48-72 hrs after your surgery. This nerve block will affect your muscles in your leg and make your leg unable to support you. Please be careful as you will not have full strength or balance until the block fully wears off. You should use crutches or a walker until full strength is back in your leg.

Follow your discharge instructions. You may still have some discomfort or pain. You will have a prescription for pain medicine if needed. Do not use ice or heat until feeling returns unless directed by your surgeon as you will not have normal sensation to your skin until the block has worn off completely.

If you have any concerns about your nerve block, please contact the St. Luke's Orthopedic Surgery Center Robbins Road (208)489-4279, and a nurse or your anesthesiologist will get back to you as soon as possible.

Please note that the surgery center is open from 0600-5:30 p.m. If you need help after these hours, please contact your surgeon. Hand washing is one of the main ways to avoid germs and prevent the spread of infection.

**Hands should be washed :**

- . Before and after caring for wounds and incisions, including changing dressings.
- . Before and after caring for someone who is ill.
- . After using the toilet or helping someone use the toilet, or changing diapers.
- . After coughing, sneezing, or blowing your nose.
- . After touching animals.

**To clean hands effectively:**

- . Completely wet hands.
- . Lather hands with soap.
- . Scrub for at least 20 seconds.

. Rinse hands well under running water.  
. Dry well with a clean towel or air.

If soap and water are not available, hand sanitizer may be used, but wash your hands  
As soon as you can.

## Medications at Time of Discharge - documented as of this encounter

Medication	Sig	Dispensed	Refills	Start Date	End Date
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.	90 tablet	2	04/09/2018	12/03/2018
traMADol (ULTRAM) 50 mg tablet	Take 1 tablet (50 mg total) by mouth every 6 (six) hours as needed for Pain.	30 tablet	0	09/24/2018	10/04/2018
cephalexin (KEFLEX) 500 MG capsule	Take 1 capsule (500 mg total) by mouth 4 (four) times daily for 3 days.	12 capsule	0	09/24/2018	09/27/2018
HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	10 tablet	0	09/18/2018	09/28/2018
hydrOXYzine (VISTARIL) 50 MG capsule	Take 1 capsule (50 mg total) by mouth 3 (three) times daily as needed for Itching or Other (nausea).	30 capsule	0	09/24/2018	10/04/2018
estradiol 10 mcg Tab	Place 10 mcg vaginally 2 (two) times a week.		0	05/31/2018	03/02/2020
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1-2 tablets by mouth every 4 (four) hours as needed for Pain.	60 tablet	0	09/25/2018	10/04/2018
hydrOXYzine HCl (ATARAX) 25 MG tablet	Take 1 tablet (25 mg total) by mouth nightly as needed for Other (insomnia).	30 tablet	0	01/22/2018	11/11/2019
nitrofurantoin, macrocrystal-monohydrate, (MACROBID) 100 MG capsule	TK 1 C PO Q 12 H WF FOR 7 DAYS		0	08/08/2018	07/31/2019
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019

## Ordered Prescriptions - documented in this encounter

Prescription	Sig	Dispensed	Refills	Start Date	End Date
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1-2 tablets by mouth every 4 (four) hours as needed for Pain.	60 tablet	0	09/25/2018	10/04/2018

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

## Implants - documented as of this encounter

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfi 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
<b>Screw Low Profile 2.7x14mm Locking Ss Ar- 8827l-14 - Sar-8827l-14</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2
<b>Screw Low Profile 2.7x12mm Locking Ss Ar- 8827l-12 - Sar-8827l-12</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-12 / AR-8827L-12 / 1-092518-2
<b>Screw Low Profile 2.7x16mm Locking Ss Ar- 8827l-16 - Sar-8827l-16</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-16 / AR-8827L-16 / 1-092518-2
<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-12 / AR-8835-12 / 1-092518-2
<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-14 / AR-8835-14 / 1-092518-2

## HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
LATERAL SIDE.

**Implant Knotless Syndesmosis Tightrope  
Xp Stainless Steel Ar-8925ss - Sar-8925ss**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL, UHMWPE  
MEDIAL SIDE.

**Screw Low Profile 4x46 Cannulated Long  
Thread Stainless Steel Ar-8840cl-46 - Sar-  
8840cl-46**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION

HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
MEDIAL SIDE.

AR-8835-22 /  
AR-8835-22 /  
1-092518-2

AR-8835-26 /  
AR-8835-26 /  
1-092518-2

AR-8925SS /  
AR-8925SS /  
10224713

AR-8840CL-46 /  
AR-8840CL-46 /  
1-092518-2

## Procedures - documented in this encounter

Procedure Name	Priority	Date/Time	Associated Diagnosis	Comments
OPEN REDUCTION INTERNAL FIXATION ANKLE		09/25/2018 3:07 PM MDT	Injury of left ankle, initial encounter	

## Results - documented in this encounter

FLUORO > 1 HOUR (FLUOROSCOPY GREATER THAN 1 HOUR) - Final result (09/25/2018 5:48 PM MDT)  
Specimen

## Narrative

This study was not interpreted by a St. Luke's radiologist.

Performed At

IMAGING

Please see the note from the performing clinician.

Performing Clinician: NEARY, KAITLIN C  
Exam Date: 09/25/2018 1748

Performing Organization	Address	City/State/ZIP Code	Phone Number
IMAGING			

## Visit Diagnoses - documented in this encounter

## Diagnosis

Injury of left ankle, initial encounter

## Admitting Diagnoses - documented in this encounter

## Diagnosis

Injury of left ankle

Administered Medications - documented in this encounter					
Inactive Administered Medications - up to 3 most recent administrations		MAR Action	Action Date	Dose	Rate
Medication Order					Site
fentaNYL (SUBLIMAZE) 50 mcg/mL injection 25-100 mcg 25-100 mcg, IntraVENOUS, Every 5 min PRN, moderate pain, Up to 100 mcg, consult with MD for additional dose, Starting on Tue 9/25/18 at 1725, For 6 doses, If no PO, Max dose 150 mcg., PACU					
fentaNYL (SUBLIMAZE) 50 mcg/mL injection 25-100 mcg 25-100 mcg, IntraVENOUS, Every 5 min PRN, moderate pain, Up to 100 mcg, consult with MD for additional dose, Starting on Tue 9/25/18 at 1725, For 6 doses, If no PO, Max dose 150 mcg., PACU					
fentaNYL (SUBLIMAZE) 50 mcg/mL injection 50 mcg 50 mcg, IntraVENOUS, As needed, Other, Procedural Sedation, Starting on Tue 9/25/18 at 1258, Give every 1 minute Procedural Sedation to meet sedation goal. Max dose 200 mcg., Preoperative	Given	09/25/2018 3:03 PM MDT	100 mcg		
lactated Ringer's infusion at 25 mL/hr, IntraVENOUS, Continuous, Starting on Tue 9/25/18 at 1330, Until Tue 9/25/18 at 2036, Preoperative	New Bag	09/25/2018 1:27 PM MDT		25 mL/hr	
meperidine (DEMEROL) 25 mg/mL syringe 10-20 mg 10-20 mg, IntraVENOUS, Every 5 min PRN, breakthrough pain, (morphine-resistant), Starting on Tue 9/25/18 at 1725, For 10 doses, Up to 2 mg/kg. Max dose 100 mg. , PACU					
meperidine (DEMEROL) 25 mg/mL syringe 10-20 mg 10-20 mg, IntraVENOUS, Every 5 min PRN, breakthrough pain, (morphine-resistant), Starting on Tue 9/25/18 at 1725, For 10 doses, Up to 2 mg/kg. Max dose 100 mg. , PACU					
meperidine (DEMEROL) 25 mg/mL syringe 12.5 mg 12.5 mg, IntraVENOUS, Once as needed, Shivering, Starting on Tue 9/25/18 at 1725, For 2 doses, May repeat x 1. , PACU					
meperidine (DEMEROL) 25 mg/mL syringe 12.5 mg 12.5 mg, IntraVENOUS, Once as needed, Shivering, Starting on Tue 9/25/18 at 1725, For 2 doses, May repeat x 1. , PACU					
midazolam (PF) (VERSED) injection 2 mg 2 mg, IntraVENOUS, As needed, sedation, Procedural Sedation, Starting on Tue 9/25/18 at 1258, Give every 1 minute Procedural Sedation to meet sedation goal. Max dose 4 mg. , Preoperative	Given	09/25/2018 3:30 PM MDT	2 mg		
	Given	09/25/2018 3:03 PM MDT	2 mg		

## Advance Directives

For more information, please contact: 208-381-2183

### Documents on File

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

### Latest Code Status on File

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

### Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

### Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712		Sep. 25, 2018
Custodian Organization		
<b>St. Luke's Health System</b> Boise, ID 83712		

Encounter Providers	Encounter Date
	Sep. 25, 2018

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Reason for Visit

### Auth/Cert

Status	Reason	Specialty	Diagnoses / Procedures	Referred By Contact	Referred To Contact
			Diagnoses Injury of left ankle, initial encounter	Neary, Kaitlin C., MD 3399 E Louise Dr Suite 200 Meridian, ID 83642 Phone: 208-706-2663 Fax: 208-489-4300	

## Encounter Details

Date	Type	Department	Care Team
09/25/2018	Hospital Encounter	St. Luke's Clinic Intermountain Orthopedics Surgery Center - Elk's 600 W ROBBINS RD STE 400 BOISE, ID 83702-4564 208-706-9005	<b>Neary, Kaitlin C., MD</b> 3399 E Louise Dr Suite 200 Meridian, ID 83642 208-706-2663 208-489-4300 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019	Discontinued (Patient stopped taking)
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019	Expired
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.	90 tablet	2	04/09/2018	12/03/2018	Discontinued (Reorder)
HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	10 tablet	0	09/18/2018	09/28/2018	Expired
cephalexin (KEFLEX) 500 MG capsule	Take 1 capsule (500 mg total) by mouth 4 (four) times daily for 3 days.	12 capsule	0	09/24/2018	09/27/2018	Expired
hydrOXYzine (VISTARIL) 50 MG capsule	Take 1 capsule (50 mg total) by mouth 3 (three) times daily as needed for Itching or Other (nausea).	30 capsule	0	09/24/2018	10/04/2018	Expired
oxyCODONE (ROXICODONE) 5 MG immediate release tablet	Take 1-2 tablets (5-10 mg total) by mouth every 4 (four) hours as needed for severe pain.	60 tablet	0	09/24/2018	09/25/2018	Discontinued (Stop Taking at Discharge)
traMADol (ULTRAM) 50 mg tablet	Take 1 tablet (50 mg total) by mouth every 6 (six) hours as needed for Pain.	30 tablet	0	09/24/2018	10/04/2018	Discontinued (Reorder)
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1-2 tablets by mouth every 4 (four) hours as needed for Pain.	60 tablet	0	09/25/2018	10/04/2018	Discontinued (Reorder)

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD)>OR=6MO PF	10/02/2017	

**Social History** - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
Alcohol Use	Standard Drinks/Week			
Yes	2 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits	Answer			Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week			08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily			08/02/2019
Physical Activity	Answer			Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days			08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				

**Last Filed Vital Signs** - documented in this encounter

Vital Sign	Reading	Time Taken	Comments
Blood Pressure	121/75	09/25/2018 6:13 PM MDT	
Pulse	62	09/25/2018 6:13 PM MDT	
Temperature	37.2 °C (99 °F)	09/25/2018 6:13 PM MDT	
Respiratory Rate	19	09/25/2018 6:13 PM MDT	
Oxygen Saturation	94%	09/25/2018 6:13 PM MDT	
Inhaled Oxygen Concentration	-	-	
Weight	88.5 kg (195 lb)	09/25/2018 1:12 PM MDT	
Height	165.1 cm (5' 5")	09/25/2018 1:12 PM MDT	
Body Mass Index	32.45	09/25/2018 1:12 PM MDT	

**Discharge Instructions** - documented in this encounter

Instructions
Nurse Joy E - 09/25/2018
Formatting of this note might be different from the original.
Frequently Asked Questions about Infections after Surgery

What is an infection after a surgery or procedure?  
A surgical site infection is an infection that occurs after surgery in the part of the body where the surgery or procedure took place.  
Most patients who have surgery do not develop an infection.  
What are common symptoms of infection?  

- Redness and pain around the area where you had surgery
- Drainage of cloudy fluid or pus from your surgical incision
- General "ill or bad" feeling different from your usual
- Fever

What can I do to help prevent an infection after surgery?  

- Keep your hands clean
- Keep your incision and bandage clean
- Limit or avoid touching your incision and bandage
- If you need to touch the area around your incision or bandage, clean your hands before and afterwards
- Do not let people other than your caregiver touch your incision or bandage

- What do I need to do when I go home from the hospital?
  - Make sure you understand how to care for your incision and bandage before you leave the hospital or clinic
  - Always wash your hands before and after caring for your incision or bandage
  - Look at your incision area and bandage at least once a day
  - Do not put lotion or ointment directly on your incision before talking with your doctor
  - Sleep in clean clothes and bed sheets
  - Shower or sponge bath daily. Do not soak in tubs or pools until next doctor visit.
  - Keep pets away from your incision and bandage
  - If you have redness and pain in the area of your surgery, call your doctor immediately.

What can I do to help my incision heal?

- Eat nutritious foods. For example, protein, fruits and vegetables.
- Drink fluids
- Get plenty of rest
- Walk as able several times a day. Gradually increase activity.

Can surgical site infections be treated?

Yes. Treatment may be an antibiotic for the type of infection, special incision care or surgery. It is important to call your doctor to get the right care.

Reference: [Www.cdc.gov/hai/ssi/faq](http://www.cdc.gov/hai/ssi/faq).

Nerve blocks are used for pain control during & after surgery. How your nerve block was administered depended on your preference and medical considerations.

Nerve blocks cause temporary numbness and loss of movement. Both Femoral and Sciatic nerve blocks have been performed on you today. The blocks usually last 8-12 hours but can last as long as 48-72 hrs after your surgery. This nerve block will affect your muscles in your leg and make your leg unable to support you. Please be careful as you will not have full strength or balance until the block fully wears off. You should use crutches or a walker until full strength is back in your leg.

Follow your discharge instructions. You may still have some discomfort or pain. You will have a prescription for pain medicine if needed. Do not use ice or heat until feeling returns unless directed by your surgeon as you will not have normal sensation to your skin until the block has worn off completely.

If you have any concerns about your nerve block, please contact the St. Luke's Orthopedic Surgery Center Robbins Road (208)489-4279, and a nurse or your anesthesiologist will get back to you as soon as possible.

Please note that the surgery center is open from 0600-5:30 p.m. If you need help after these hours, please contact your surgeon. Hand washing is one of the main ways to avoid germs and prevent the spread of infection.

Hands should be washed :

- . Before and after caring for wounds and incisions, including changing dressings.
- . Before and after caring for someone who is ill.
- . After using the toilet or helping someone use the toilet, or changing diapers.
- . After coughing, sneezing, or blowing your nose.
- . After touching animals.

To clean hands effectively:

- . Completely wet hands.
- . Lather hands with soap.
- . Scrub for at least 20 seconds.
- . Rinse hands well under running water.
- . Dry well with a clean towel or air.

If soap and water are not available, hand sanitizer may be used, but wash your hands As soon as you can.

## Medications at Time of Discharge - documented as of this encounter

Medication	Sig	Dispensed	Refills	Start Date	End Date
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.	90 tablet	2	04/09/2018	12/03/2018
traMADol (ULTRAM) 50 mg tablet	Take 1 tablet (50 mg total) by mouth every 6 (six) hours as needed for Pain.	30 tablet	0	09/24/2018	10/04/2018
cephalexin (KEFLEX) 500 MG capsule	Take 1 capsule (500 mg total) by mouth 4 (four) times daily for 3 days.	12 capsule	0	09/24/2018	09/27/2018
HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	10 tablet	0	09/18/2018	09/28/2018
hydrOXYzine (VISTARIL) 50 MG capsule	Take 1 capsule (50 mg total) by mouth 3 (three) times daily as needed for Itching or Other (nausea).	30 capsule	0	09/24/2018	10/04/2018
estradiol 10 mcg Tab	Place 10 mcg vaginally 2 (two) times a week.		0	05/31/2018	03/02/2020
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1-2 tablets by mouth every 4 (four) hours as needed for Pain.	60 tablet	0	09/25/2018	10/04/2018
hydrOXYzine HCl (ATARAX) 25 MG tablet	Take 1 tablet (25 mg total) by mouth nightly as needed for Other (insomnia).	30 tablet	0	01/22/2018	11/11/2019
nitrofurantoin, macrocrystal-monohydrate, (MACROBID) 100 MG capsule	TK 1 C PO Q 12 H WF FOR 7 DAYS		0	08/08/2018	07/31/2019
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019

## Ordered Prescriptions - documented in this encounter

Prescription	Sig	Dispensed	Refills	Start Date	End Date
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1-2 tablets by mouth every 4 (four) hours as needed for Pain.	60 tablet	0	09/25/2018	10/04/2018

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

## Implants - documented as of this encounter

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprf 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
<b>Screw Low Profile 2.7x14mm Locking Ss Ar- 8827l-14 - Sar-8827l-14</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-14 / AR-8827L-14 / 1-092518-2
<b>Screw Low Profile 2.7x12mm Locking Ss Ar- 8827l-12 - Sar-8827l-12</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-12 / AR-8827L-12 / 1-092518-2
<b>Screw Low Profile 2.7x16mm Locking Ss Ar- 8827l-16 - Sar-8827l-16</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8827L-16 / AR-8827L-16 / 1-092518-2
<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-12 / AR-8835-12 / 1-092518-2
<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b> Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-14 / AR-8835-14 / 1-092518-2
<b>Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-22 / AR-8835-22 / 1-092518-2
<b>Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE.	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8835-26 / AR-8835-26 / 1-092518-2
<b>Implant Knotless Syndesmosis Tightrope Xp Stainless Steel Ar-8925ss - Sar-8925ss</b> Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8925SS / AR-8925SS / 10224713

Description: MATERIAL - STAINLESS STEEL, UHMWPE  
MEDIAL SIDE.

**Screw Low Profile 4x46 Cannulated Long Thread Stainless Steel Ar-8840cl-46 - Sar-8840cl-46**

Implanted: Qty: 1 on 09/25/2018 by Neary,  
Kaitlin C., MD at IDAHO ELKS REHABILITATION  
HOSPITAL

Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP.  
MEDIAL SIDE.

AR-8840CL-46 /  
AR-8840CL-46 /  
1-092518-2

**Procedures** - documented in this encounter

Procedure Name	Priority	Date/Time	Associated Diagnosis	Comments
OPEN REDUCTION INTERNAL FIXATION ANKLE		09/25/2018 3:07 PM MDT	Injury of left ankle, initial encounter	

**Results** - documented in this encounter

FLUORO > 1 HOUR (FLUOROSCOPY GREATER THAN 1 HOUR) - Final result (09/25/2018 5:48 PM MDT)  
Specimen

Narrative

This study was not interpreted by a St. Luke's radiologist.

Performed At

IMAGING

Please see the note from the performing clinician.

Performing Clinician: NEARY, KAITLIN C

Exam Date: 09/25/2018 1748

Performing Organization

Address

City/State/ZIP Code

Phone Number

IMAGING

**Visit Diagnoses** - documented in this encounter

Diagnosis

Injury of left ankle, initial encounter

**Admitting Diagnoses** - documented in this encounter

Diagnosis

Injury of left ankle

**Administered Medications** - documented in this encounter

Inactive Administered Medications - up to 3 most recent administrations

Medication Order	MAR Action	Action Date	Dose	Rate	Site
bupivacaine-EPINEPHrine PF (MARCAINE-EPI) 0.5 %-1:200,000 injection Peripheral Nerve Block, As needed, Other, Starting on Tue 9/25/18 at 1521, Anesthesia Intra-op	Given	09/25/2018 3:21 PM MDT	15 mLs		
ceFAZolin (ANCEF) injection As needed, Starting on Tue 9/25/18 at 1522, Anesthesia Intra-op	Given	09/25/2018 3:22 PM MDT	2,000 mg		
fentaNYL (SUBLIMAZE) 50 mcg/mL injection 25-100 mcg 25-100 mcg, IntraVENOUS, Every 5 min PRN, moderate pain, Up to 100 mcg, consult with MD for additional dose, Starting on Tue 9/25/18 at 1725, For 6 doses, If no PO, Max dose 150 mcg., PACU					
fentaNYL (SUBLIMAZE) 50 mcg/mL injection 25-100 mcg					

25-100 mcg, IntraVENOUS, Every 5 min PRN,  
moderate pain, Up to 100 mcg, consult with MD for  
additional dose, Starting on Tue 9/25/18 at 1725,  
For 6 doses, If no PO, Max dose 150 mcg., PACU

fentaNYL (SUBLIMAZE) 50 mcg/mL injection 50 mcg  
50 mcg, IntraVENOUS, As needed, Other,  
Procedural Sedation, Starting on Tue 9/25/18 at  
1258, Give every 1 minute Procedural Sedation to  
meet sedation goal. Max dose 200 mcg. ,  
Preoperative

lactated Ringer's infusion  
at 25 mL/hr, IntraVENOUS, Continuous, Starting on  
Tue 9/25/18 at 1330, Until Tue 9/25/18 at 2036,  
Preoperative

lidocaine (PF) (XYLOCAINE) 20 mg/mL (2 %)  
injection  
Peripheral Nerve Block, As needed, Starting on Tue  
9/25/18 at 1521, Anesthesia Intra-op

meperidine (DEMEROL) 25 mg/mL syringe 10-20  
mg  
10-20 mg, IntraVENOUS, Every 5 min PRN,  
breakthrough pain, (morphine-resistant), Starting on  
Tue 9/25/18 at 1725, For 10 doses, Up to 2 mg/kg.  
Max dose 100 mg. , PACU

meperidine (DEMEROL) 25 mg/mL syringe 10-20  
mg  
10-20 mg, IntraVENOUS, Every 5 min PRN,  
breakthrough pain, (morphine-resistant), Starting on  
Tue 9/25/18 at 1725, For 10 doses, Up to 2 mg/kg.  
Max dose 100 mg. , PACU

meperidine (DEMEROL) 25 mg/mL syringe 12.5 mg  
12.5 mg, IntraVENOUS, Once as needed, Shivering,  
Starting on Tue 9/25/18 at 1725, For 2 doses, May  
repeat x 1. , PACU

meperidine (DEMEROL) 25 mg/mL syringe 12.5 mg  
12.5 mg, IntraVENOUS, Once as needed, Shivering,  
Starting on Tue 9/25/18 at 1725, For 2 doses, May  
repeat x 1. , PACU

midazolam (PF) (VERSED) injection 2 mg  
2 mg, IntraVENOUS, As needed, sedation,  
Procedural Sedation, Starting on Tue 9/25/18 at  
1258, Give every 1 minute Procedural Sedation to  
meet sedation goal. Max dose 4 mg. , Preoperative

ondansetron (ZOFTRAN) injection  
IntraVENOUS, As needed, Nausea, Vomiting,  
Starting on Tue 9/25/18 at 1522, Anesthesia Intra-  
op

propofol (DIPRIVAN) IV solution  
IntraVENOUS, Continuous PRN, Starting on Tue  
9/25/18 at 1530, Anesthesia Intra-op

Given 09/25/2018 100 mcg  
3:03 PM MDT

New Bag 09/25/2018 25 mL/hr  
1:27 PM MDT

Given 09/25/2018 10 mLs  
3:21 PM MDT

Given 09/25/2018 2 mg  
3:30 PM MDT

Given 09/25/2018 2 mg  
3:03 PM MDT

Given 09/25/2018 4 mg  
5:19 PM MDT

Given 09/25/2018 4 mg  
3:22 PM MDT

New Bag 09/25/2018 53.1 mL/hr  
3:30 PM MDT 100  
mcg/kg/min

ropivacaine PF (NAROPIN) 5 mg/mL (0.5 %)  
injection  
Peripheral Nerve Block, As needed, Other, Starting  
on Tue 9/25/18 at 1521, Anesthesia Intra-op

Given 09/25/2018 10 mLs  
3:21 PM MDT

## Advance Directives

For more information, please contact: 208-381-2183

### Documents on File

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

### Latest Code Status on File

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

## Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

## Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine		Sep. 25, 2018
<b>St. Luke's Health System</b> Boise, ID 83712		
Custodian Organization		

<b>St. Luke's Health System</b> Boise, ID 83712	
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Encounter Providers	Encounter Date
<b>MD Kaitlin C. Neary, MD</b> (Attending, Admitting) 208-706-2663 (Work) 208-489-4300 (Fax) 3399 E Louise Dr Suite 200 Meridian, ID 83642 Orthopedic Surgery	Sep. 25, 2018

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Encounter Details

Date	Type	Department	Care Team
09/24/2018	Hospital Encounter	St. Luke's Imaging - Diagnostic X-ray - Rehabilitation Hospital 600 N ROBBINS RD STE 100 BOISE, ID 83702-4564 208-383-0201	<b>Neary, Kaitlin C., MD</b> 3399 E Louise Dr Suite 200 Meridian, ID 83642 208-706-2663 208-489-4300 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019	Discontinued (Patient stopped taking)
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019	Expired
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.	90 tablet	2	04/09/2018	12/03/2018	Discontinued (Reorder)
HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	10 tablet	0	09/18/2018	09/28/2018	Expired

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD) >OR=6MO PF	10/02/2017	

Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
Alcohol Use	Standard Drinks/Week			
Yes	2 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits	Answer			Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week			08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily			08/02/2019
Physical Activity	Answer			Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days			08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				

Last Filed Vital Signs - documented in this encounter

Not on file
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## Medications at Time of Discharge - documented as of this encounter

Medication	Sig	Dispensed	Refills	Start Date	End Date
cephalexin (KEFLEX) 500 MG capsule	Take 1 capsule (500 mg total) by mouth 4 (four) times daily for 3 days.	12 capsule	0	09/24/2018	09/27/2018
HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	10 tablet	0	09/18/2018	09/28/2018
hydrOXYzine (VISTARIL) 50 MG capsule	Take 1 capsule (50 mg total) by mouth 3 (three) times daily as needed for Itching or Other (nausea).	30 capsule	0	09/24/2018	10/04/2018
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019
estradiol 10 mcg Tab	Place 10 mcg vaginally 2 (two) times a week.		0	05/31/2018	03/02/2020
HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	Take 1-2 tablets by mouth every 4 (four) hours as needed for Pain.	60 tablet	0	09/25/2018	10/04/2018
hydrOXYzine HCl (ATARAX) 25 MG tablet	Take 1 tablet (25 mg total) by mouth nightly as needed for Other (insomnia).	30 tablet	0	01/22/2018	11/11/2019
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.	90 tablet	2	04/09/2018	12/03/2018
nitrofurantoin, macrocrystal-monohydrate, (MACROBID) 100 MG capsule	TK 1 C PO Q 12 H WF FOR 7 DAYS		0	08/08/2018	07/31/2019
oxyCODONE (ROXICODONE) 5 MG immediate release tablet	Take 1-2 tablets (5-10 mg total) by mouth every 4 (four) hours as needed for severe pain.	60 tablet	0	09/24/2018	09/25/2018
traMADol (ULTRAM) 50 mg tablet	Take 1 tablet (50 mg total) by mouth every 6 (six) hours as needed for Pain.	30 tablet	0	09/24/2018	10/04/2018
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	



## Results - documented in this encounter

XR ANKLE 3+ VW (XR ANKLE 3 OR MORE VW LEFT) - Final result (09/24/2018 1:18 PM MDT)

Specimen

### Impressions

1. Interval improvement in alignment of the distal fibula fracture.
2. Unchanged alignment of the medial and posterior malleolus fractures.
3. Subtle widening of the medial ankle clear space which could represent medial ligamentous injury.

Performed At

POWERSCRIBE PACS  
ASOBGYN

### Narrative

HISTORY: Injury of left ankle, initial encounter.

Performed At

POWERSCRIBE PACS  
ASOBGYN

COMPARISON: Left ankle radiographs September 18, 2018. Left ankle CT September 21, 2018

TECHNIQUE: Left ankle, 3 views.

FINDINGS: Decreased posterior displacement of the distal fibula fracture when compared with prior exam. The medial malleolus fracture remains nondisplaced. Posterior malleolus fracture is grossly unchanged in alignment. No significant callus formation at the fractures. No new fractures. There is subtle, asymmetric widening of the medial ankle clear space. No new fractures.

### Procedure Note

#### Edi, Rad Results - 09/24/2018 2:27 PM MDT

Formatting of this note might be different from the original.

HISTORY: Injury of left ankle, initial encounter.

COMPARISON: Left ankle radiographs September 18, 2018. Left ankle CT September 21, 2018

TECHNIQUE: Left ankle, 3 views.

FINDINGS: Decreased posterior displacement of the distal fibula fracture when compared with prior exam. The medial malleolus fracture remains nondisplaced. Posterior malleolus fracture is grossly unchanged in alignment. No significant callus formation at the fractures. No new fractures. There is subtle, asymmetric widening of the medial ankle clear space. No new fractures.

### IMPRESSION:

1. Interval improvement in alignment of the distal fibula fracture.
2. Unchanged alignment of the medial and posterior malleolus fractures.
3. Subtle widening of the medial ankle clear space which could represent medial ligamentous injury.

Performing Organization

Address

City/State/ZIP Code

Phone Number

POWERSCRIBE PACS ASOBGYN



## Visit Diagnoses - documented in this encounter

Diagnosis

Injury of left ankle, initial encounter

## Advance Directives

For more information, please contact: 208-381-2183

### Documents on File

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

### Latest Code Status on File

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

### Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

### Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712		Sep. 24, 2018
Custodian Organization <b>St. Luke's Health System</b> Boise, ID 83712		

Encounter Providers	Encounter Date
<b>MD Kaitlin C. Neary, MD</b> (Attending) 208-706-2663 (Work) 208-489-4300 (Fax) 3399 E Louise Dr Suite 200 Meridian, ID 83642 Orthopedic Surgery	Sep. 24, 2018

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Reason for Visit

Reason
New Patient Consult

## Encounter Details

Date	Type	Department	Care Team
09/24/2018	Office Visit	St. Luke's Clinic - Orthopaedics - IERH-Boise 600 N ROBBINS RD STE 100 BOISE, ID 83702-4564 208-706-2663	<b>Neary, Kaitlin C., MD</b> 3399 E Louise Dr Suite 200 Meridian, ID 83642 208-706-2663 208-489-4300 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019	Discontinued (Patient stopped taking)
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019	Expired
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.	90 tablet	2	04/09/2018	12/03/2018	Discontinued (Reorder)
HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	10 tablet	0	09/18/2018	09/28/2018	Expired
cephalexin (KEFLEX) 500 MG capsule	Take 1 capsule (500 mg total) by mouth 4 (four) times daily for 3 days.	12 capsule	0	09/24/2018	09/27/2018	Expired
hydrOXYzine (VISTARIL) 50 MG capsule	Take 1 capsule (50 mg total) by mouth 3 (three) times daily as needed for Itching or Other (nausea).	30 capsule	0	09/24/2018	10/04/2018	Expired
oxyCODONE (ROXICODONE) 5 MG immediate release tablet	Take 1-2 tablets (5-10 mg total) by mouth every 4 (four) hours as needed for severe pain.	60 tablet	0	09/24/2018	09/25/2018	Discontinued (Stop Taking at Discharge)
traMADol (ULTRAM) 50 mg tablet	Take 1 tablet (50 mg total) by mouth every 6 (six) hours as needed for Pain.	30 tablet	0	09/24/2018	10/04/2018	Discontinued (Reorder)

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Injury of left ankle	09/24/2018	07/31/2019
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD)>OR=6MO PF	10/02/2017	

 Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
Alcohol Use	Standard Drinks/Week			
Yes	2 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits		Answer		Date Recorded
How often do you have a drink containing alcohol?		4 or more times a week		08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?		Not asked		
How often do you have six or more drinks on one occasion?		Daily or almost daily		08/02/2019
Physical Activity		Answer		Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?		0 days		08/02/2019
On average, how many minutes do you engage in exercise at this level?		Not asked		
Sex Assigned at Birth	Date Recorded			
Not on file				

 Last Filed Vital Signs - documented in this encounter

Not on file
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# Patient Instructions - documented in this encounter

## Patient Instructions

Neary, Kaitlin C., MD - 09/24/2018 12:45 PM MDT

Formatting of this note might be different from the original.

The risks of surgery can include:

1. Nerves: Nerves can be damaged in the course of surgical intervention. The nerves can be cut or trapped resulting in a numb area or a very hypersensitive spot at the site where it is cut. Sometimes the nerves control the muscles and a damaged nerve may result in weakness or loss of the involved muscle or joint.
2. Muscles: Muscles can be damaged at the time of surgical intervention and result in loss of function to that muscle which may result in stiffness for the joint that the muscle controls.
3. Tendons: Tendons can be damaged at the time of surgery and can result in functional loss of mobility or strength. If the tendon is damaged before or during the surgery, every attempt will be made to fix the problem associated with that tendon and restore function. It may become stiff or ineffective and create ongoing issues.
4. Bones: Surgery is required to repair a broken bone or to align a bone that is out of place. Sometimes it is difficult for the bone to heal itself and can go on to a non-union and require another surgery to fix the problem. Sometimes the bone can heal itself in a malposition requiring another surgery to reposition the bone. If the joint is damaged at the time of the accident, it may end up with arthritis in that joint that could require future surgery in the form of replacement or fusion.
5. Joints: Damage to the joint may occur at the time of initial accident or at the time of surgery. Damage to the joint could result in arthritis, pain and stiffness.
6. Recurrence of deformity: When realignment surgery is required (i.e. bunion surgery) the deformity may recur and possibly worsen. Revision surgery could be required.
7. Anesthesia: It is typical to place a regional blockade of the nerves at the time of surgery. This is temporary and should resolve at some point in the 1st day following surgery. However, the injection is placed around the major nerve to the leg and could result in damage to that nerve on a permanent basis.
8. Tourniquet: A tourniquet is used for most procedures about the foot and ankle. It is rare to have long-term numbness that is caused by a tourniquet. It is possible.
9. Blood clots: Blood clots can occur following foot and ankle surgery. They are rare but can be serious. One needs to look for the following signs: Significant swelling to the affected extremity soon after the surgery, pain in the calf that goes into the knee, and/or no significant problems about the leg but a very difficult time "catching one's breath". Please proceed to the emergency room to be checked if these symptoms occur. A daily aspirin (81mg) can help to prevent their formation.
10. Hardware: Various types of hardware may be used in your surgery. That hardware may be proud after the surgery and cause us to remove it at a later date. The hardware may be affected by weather patterns and, should you feel this is the case, may require us to remove it at a later date. The hardware that I placed in your body should remain throughout the rest of your life unless a problem arises. Superficial pins will be removed in the office. Occasionally, hardware will need to be removed from 3-6 months following the surgery to allow for better healing. Obviously, this would require yet another surgery.
11. Cast/splint: At various times you will be placed into a cast and or splint to help you recover. Sometimes these devices will create pressure sores that can harm to her skin. Likewise, they can get wet or damaged and will need to be replaced. Please call as quickly as one of these issues occurs so that we can deal with that appropriately within the office.
12. Infection: Infection can occur following surgery. We will give you a dose of IV antibiotics prior to your surgery that should protect you. Superficial or deep infection can occur, however, and those infections can go on to create the need for repeat operations, the failure of the operation, and, in certain circumstances, require the removal of the fixation devices or the infected bone. Should the skin suffer significant damage, then plastic surgical reconstruction may be required. We do not have plastic surgeons who specialize in this within the Treasure Valley. This could necessitate a referral to Salt Lake City, Utah or Portland, Oregon.
13. Chronic Regional Pain Syndrome: You could have your nerves not understand that your surgery has healed. If they overreact, you could be left with pain on a chronic basis with no ability to help that pain with surgery. It could require medicines and management by chronic pain physician. We do not understand in whom this can occur.
14. Cold Sensitivity: If you suffer from cold sensitivity, then you have to be extra cautious with the use of ice after an injury or surgery. Cold placed for too long could result in frostbite and, around the foot and ankle, could cause the need for surgery to repair or remove the damaged tissue resulting in loss of function.

Lastly, you should never hesitate to contact our office immediately should a problem arise. Please listen to my assistance voicemail as it will direct you as to whether or not we are immediately available. If not, and the operator contact the doctor on call to return your call and answer any of your concerns.

Electronically signed by Kaitlin C. Neary, MD at 09/24/2018 4:12 PM MDT

## Ordered Prescriptions - documented in this encounter

Prescription	Sig	Dispensed	Refills	Start Date	End Date
traMADol (ULTRAM) 50 mg tablet	Take 1 tablet (50 mg total) by mouth every 6 (six) hours as needed for Pain.	30 tablet	0	09/24/2018	10/04/2018
oxyCODONE (ROXICODONE) 5 MG immediate release tablet	Take 1-2 tablets (5-10 mg total) by mouth every 4 (four) hours as needed for severe pain.	60 tablet	0	09/24/2018	09/25/2018
hydrOXYzine (VISTARIL) 50 MG capsule	Take 1 capsule (50 mg total) by mouth 3 (three) times daily as needed for Itching or Other (nausea).	30 capsule	0	09/24/2018	10/04/2018
cephalexin (KEFLEX) 500 MG capsule	Take 1 capsule (500 mg total) by mouth 4 (four) times daily for 3 days.	12 capsule	0	09/24/2018	09/27/2018

## Progress Notes - documented in this encounter

Neary, Kaitlin C., MD - 09/24/2018 12:45 PM MDT

Formatting of this note might be different from the original.

The patient was given a prescription for a rollout knee scooter in clinic today. This is medically necessary and warranted secondary to her ankle injury and the fact that she will need to remain nonweightbearing for an extended period of time.

Electronically signed by Kaitlin C. Neary, MD at 09/25/2018 2:56 PM MDT

Neary, Kaitlin C., MD - 09/24/2018 12:45 PM MDT

Formatting of this note is different from the original.

DATE OF VISIT: 9/24/2018

REFERRING PHYSICIAN: No referring provider defined for this encounter.

CHEIF COMPLAINT: Left ankle injury

### HISTORY OF PRESENT ILLNESS:

The patient is a pleasant 62-year-old female presenting to clinic today for evaluation of her ankle. 6 days ago, she states that she was hiking in Oregon when she sustained a significant twisting injury to her left ankle. At that time, she noted extreme pain and inability to ambulate. She was seen at an outside facility where radiographs revealed a left trimalleolar ankle fracture dislocation. A closed reduction of her ankle was performed and she was placed into a short leg splint. She has been nonweightbearing in a splint since that time. She denies any open wounds or any other overlying skin changes. She denies any history of injury to this ankle in the past. She continues to report pain at the medial and lateral aspects of her ankle, but denies pain anywhere else involving the left lower extremity. She has been diligent about keeping her leg elevated and feels as if her swelling is improving. She is in clinic today for further discussion regarding treatment options and management of her left ankle injury.

### PAST MEDICAL HISTORY:

Past Medical History:

Diagnosis Date

- Accessory skin tags
- Benign paroxysmal positional vertigo
- Depression 1999

Lithium until 2001

- Hyperlipidemia
- Hypothyroidism
- Obesity
- Plantar fasciitis, bilateral

Past Surgical History:

Procedure Laterality Date

- CESAREAN SECTION
- WISDOM TOOTH EXTRACTION

### SOCIAL HISTORY:

Social History

Social History

- Marital status: Divorced

Spouse name: N/A

- Number of children: 1
- Years of education: N/A

#### Occupational History

- Software Manager

#### Social History Main Topics

- Smoking status: Never Smoker
- Smokeless tobacco: Never Used
- Alcohol use 1.2 - 1.8 oz/week

2 - 3 Glasses of wine per week

Comment: Weekly

- Drug use: No
- Sexual activity: No

#### Other Topics Concern

- None

#### Social History Narrative

Exercise 2-3 x per week; 4-6hrs summer, 2-3hrs winter.

Caffeine: none

Moved from CA.

Menopause 48, 2004.

Pap smear: 2015, no abnormalities.

Breast and colon cancer screening declined 1/22/2018

#### History

##### Smoking Status

- Never Smoker
- Smokeless Tobacco
- Never Used

#### History

##### Alcohol Use

- 1.2 - 1.8 oz/week
- 2 - 3 Glasses of wine per week

Comment: Weekly

#### History

Drug Use No

#### FAMILY HISTORY:

##### Family History

##### Problem Relation Age of Onset

- COPD Mother
- Depression Mother
- Early death Mother
- Ovarian cancer Mother
- Early death Father

##### Amyloidosis

- Heart disease Father
- Hodgkin's lymphoma Brother

#### MEDICATIONS:

##### Current Outpatient Prescriptions

##### Medication Sig Dispense Refill

- HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet Take 1 tablet by mouth every 6 (six) hours as needed for Pain. 10 tablet 0
- levothyroxine (SYNTHROID) 50 MCG tablet Take 1 tablet (50 mcg total) by mouth Every morning before breakfast. 90 tablet 2
- omeprazole (PRILOSEC) 20 MG capsule Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months. 30 capsule 2
- zolpidem (AMBIEN) 5 MG tablet Take 5 mg by mouth nightly as needed for Insomnia.

No current facility-administered medications for this visit.

#### ALLERGIES:

Statins-hmg-coa reductase inhibitors

## REVIEW OF SYSTEMS:

A complete review of systems was performed. The patient denies any recent fevers, chills, fatigue, nausea, vomiting, chest pain, shortness of breath, dyspnea on exertion, abdominal pain, lower extremity swelling (other than secondary to surgery or injury), or any other recent illnesses other than stated in HPI.

## PHYSICAL EXAM:

There were no vitals taken for this visit.

**GENERAL:** The patient is well-appearing, awake, alert and oriented x 3, and in no acute distress

**HEENT:** Head is atraumatic, normocephalic. Extraosseous muscles intact.

**CARDIOVASCULAR:** Heart is regular rate and rhythm, No peripheral edema, cap refill <2 sec

**RESPIRATORY:** Breathing is unlabored, no respiratory distress, normal respiratory rate

**ALLERGY:** No itching or rashes are noted on the legs

**INTEGUMENT:** Well hydrated, soft and supple to the touch

**NEUROLOGIC:** Alert & oriented x 3, no motor, sensory or focal deficits noted

**PSYCHIATRIC:** Speech and behavior appropriate, normal mood and affect

## MUSCULOSKELETAL:

Today in clinic her splint was removed. Upon evaluation of her left ankle, she has a mild amount of swelling both medially and laterally. She has a very superficial abrasion medially, 6 cm proximal to the medial malleolus. This is very superficial in nature. She does not have any other evidence of open wounds. She has resolving ecchymosis diffusely about the left ankle, and otherwise no overlying skin changes. Strength and stability of her ankle were not evaluated. She has tenderness to palpation over the medial and lateral malleoli, as well as over the deltoid ligament. Range of motion was also not examined. She has full sensation intact to light touch in all distal dermatomes. She is grossly neurovascularly intact distally and her foot is warm and well-perfused. Dorsalis pedis pulses 2+.

## IMAGING:

Radiographs including 3 nonweightbearing views of the left ankle were obtained and independently reviewed in clinic today. Her x-rays reveal evidence of a trimalleolar ankle fracture. Her ankle remains in improved alignment compared to her injury films and her ankle is reduced into acceptable alignment. She has a displaced oblique Weber B distal fibula fracture. There is also evidence of a posterior malleolus fracture that is displaced and shortened. The medial malleolus fracture is difficult to visualize on radiographs, but she does have increased medial clear space consistent with likely deltoid injury.

CT scan of the left ankle was also independently reviewed. This reveals an unstable and displaced trimalleolar ankle fracture. There is evidence of an oblique Weber B distal fibula fracture that is significantly displaced in nature. There is also a small anterolateral Chaput's fragment off the distal lateral tibia that is displaced in nature. There is a posterior malleolus fracture that is displaced with an interposed small articular fragment. There is also evidence of a medial malleolus fracture involving the posterior colliculus. Her ankle appears to be in improved alignment from her injury films.

## DIAGNOSTIC STUDIES/OTHER:

None

## DIAGNOSES:

1. Injury of left ankle, initial encounter

## ASSESSMENT:

1. Left trimalleolar ankle fracture dislocation, displaced, unstable

## PLAN:

Today in clinic I had a long discussion with the patient in which her left ankle was discussed. We discussed both nonsurgical and surgical options. Due to the inherent unstable nature of the fracture pattern, and in order to restore stability and alignment of the ankle, the patient elected to proceed with surgery. We discussed that this would include open reduction internal fixation of her left trimalleolar ankle fracture. I also discussed that this may require open reduction internal fixation of her syndesmosis. After all questions were answered, the patient stated she was in full understanding of and in agreement with the above-stated surgical plan. At this point time her swelling is minimal and she is almost a week out from her injury. I therefore discussed with her that I would like to fix this on an urgent basis. I will plan on adding her on for tomorrow afternoon. All questions were answered and she was in full agreement with the plan.

Because the patient has elected to proceed with surgical management, we discussed the risks, benefits, and alternatives to surgery today in clinic. The risks discussed included first the risks involved with the procedure itself. We discussed the risk of infection and wound problems. This could involve a superficial infection or wound problem requiring local wound care and a course of oral antibiotics, or could be a more serious problem including deep infection necessitating more aggressive treatment, repeat surgery, or even an amputation. We also discussed potential injury to nerves and blood vessels. The patient understood that occasionally disruption of nerves or blood vessels may occur, leading to numbness, tingling, loss of function or sensation, and in rare circumstances even chronic neuropathic pain. The patient also understood that there is a chance of residual pain despite operative management, or even development of new pain postoperatively that may require a repeat surgery. We also discussed the risk of

deep venous thrombosis following foot and ankle surgery. Because the patient is low risk for postoperative DVT, I will not plan on postoperative anticoagulation.

We also discussed the risks specific to her particular injury and procedure. She understands that because of the significant nature of her injury she is at increased risk for posttraumatic arthritis in the future despite surgical management. She also understands she is at increased risk for possible chronic pain and complications related to her ankle such as symptomatic hardware.

We also discussed the risks involved with general anesthesia. This included the risk of medical complications associated with anesthesia including prolonged intubation, unexpected reaction to medications or anesthetic, and even death. Further, we discussed complications related to possible regional nerve block including postoperative nerve hypersensitivity or residual numbness.

I also instructed the patient to never hesitate to contact our office immediately should any questions, concerns, or problems arise.

After each of these risks were discussed and all questions were answered, the patient stated they fully understood these above-mentioned risks and elected to proceed with surgery.

Kaitlin C. Neary, M.D.  
St. Luke's Department of Orthopaedics  
Foot and Ankle Surgery  
Nearyk@slhs.org

CC:  
Devin M Laky, MD  
No ref. provider found

This note was transcribed using Dragon Natural Speaking voice recognition system. Despite editing there may be minor grammatical and/or minor typographical errors in this transcriptions due to the limitations inherent with voice activated computer dictation. This should not adversely affect the overall integrity of the document

Electronically signed by Kaitlin C. Neary, MD at 09/24/2018 4:12 PM MDT

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

## Implants - documented as of this encounter

Implanted	Type	Area	Manufacturer	Device Identifier	Model / Serial / Lot
<b>Plate Fib Lt Dist Loprfi 6 HI Lck Mdlr Ss Bn Arthrex Ar-8943bl-06 - Sar-8943bl-06</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC		AR-8943BL-06 / AR-8943BL-06 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL					
Description:MATERIAL - STAINLESS STEEL LATERAL SIDE					
<b>Screw Low Profile 2.7x14mm Locking Ss Ar-</b>	ORTHO	Left: Ankle	ARTHREX INC		AR-8827L-14 /

<b>8827I-14 - Sar-8827I-14</b>	Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL	IMPLANTS		AR-8827L-14 / 1-092518-2
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE				
<b>Screw Low Profile 2.7x12mm Locking Ss Ar- 8827I-12 - Sar-8827I-12</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8827L-12 / AR-8827L-12 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE				
<b>Screw Low Profile 2.7x16mm Locking Ss Ar- 8827I-16 - Sar-8827I-16</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8827L-16 / AR-8827L-16 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE				
<b>Screw Low Profile 3.5x12mm Cortical Stainless Steel Ar-8835-12 - Sar-8835-12</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-12 / AR-8835-12 / 1-092518-2
Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE				
<b>Scrw Crtl 3.5x14mm Lprf Ss - Sar-8835-14</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-14 / AR-8835-14 / 1-092518-2
Implanted: Qty: 2 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE				
<b>Scrw Crtl 3.5x22mm Lprf Ss - Sar-8835-22</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-22 / AR-8835-22 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE				
<b>Scrw Crtl 3.5x26mm Lprf Ss - Sar-8835-26</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8835-26 / AR-8835-26 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. LATERAL SIDE				
<b>Implant Knotless Syndesmosis Tightrope Xp Stainless Steel Ar-8925ss - Sar-8925ss</b>	ORTHO IMPLANTS	Left: Ankle	ARTHREX INC	AR-8925SS / AR-8925SS / 10224713
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL, UHMWPE MEDIAL SIDE.				
<b>Screw Low Profile 4x46 Cannulated Long Thread Stainless Steel Ar-8840cl-46 - Sar- 8840cl-46</b>	OTHER IMPLANTS	Left: Ankle	ARTHREX INC	AR-8840CL-46 / AR-8840CL-46 / 1-092518-2
Implanted: Qty: 1 on 09/25/2018 by Neary, Kaitlin C., MD at IDAHO ELKS REHABILITATION HOSPITAL				
Description: MATERIAL - STAINLESS STEEL PER ARTHREX REP. MEDIAL SIDE.				



**Results** - documented in this encounter  
Not on file



**Visit Diagnoses** - documented in this encounter

Diagnosis  
Injury of left ankle, initial encounter - Primary  
Pre-op testing



**Advance Directives**

For more information, please contact: 208-381-2183

**Documents on File**

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

**Latest Code Status on File**

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		



**Patient Contacts**

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

# Document Information

## Primary Care Provider

**MD Devin M. Laky, MD** (Jan. 04, 2018 - Present)  
208-288-2255 (Work)  
208-706-2043 (Fax)  
3399 E Louise Dr  
Suite 100  
Meridian, ID 83642  
Family Medicine  
**St. Luke's Health System**  
Boise, ID 83712

## Other Service Providers

## Document Coverage Dates

Sep. 24, 2018

## Custodian Organization

**St. Luke's Health System**  
Boise, ID 83712

## Encounter Providers

## Encounter Date

**MD Kaitlin C. Neary, MD** (Attending)  
208-706-2663 (Work)  
208-489-4300 (Fax)  
3399 E Louise Dr  
Suite 200  
Meridian, ID 83642  
Orthopedic Surgery

Sep. 24, 2018

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Reason for Visit

### MRI/CAT Scan (Emergency)

Status	Reason	Specialty	Diagnoses / Procedures	Referred By Contact	Referred To Contact
Closed		Radiology	Diagnoses Closed trimalleolar fracture of left ankle, initial encounter	Kemp, Travis J., MD 3015 E Magic View Dr Suite 120 Meridian, ID 83642 Phone: 208-855-2410 Fax: 208-482-5515	

## Encounter Details

Date	Type	Department	Care Team
09/21/2018	Hospital Encounter	St. Luke's Imaging - CT - Eagle 3101 E STATE ST EAGLE, ID 83616-6232 208-473-3155	<b>Kemp, Travis J., MD</b> 3015 E Magic View Dr Suite 120 Meridian, ID 83642 208-855-2410 208-482-5515 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019	Discontinued (Patient stopped taking)
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019	Expired
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.	90 tablet	2	04/09/2018	12/03/2018	Discontinued (Reorder)
HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	10 tablet	0	09/18/2018	09/28/2018	Expired

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD) >OR=6MO PF	10/02/2017	

## Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
Alcohol Use	Standard Drinks/Week			
Yes	2 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits		Answer		Date Recorded
How often do you have a drink containing alcohol?		4 or more times a week		08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?		Not asked		
How often do you have six or more drinks on one occasion?		Daily or almost daily		08/02/2019
Physical Activity		Answer		Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?		0 days		08/02/2019
On average, how many minutes do you engage in exercise at this level?		Not asked		
Sex Assigned at Birth	Date Recorded			
Not on file				

## Last Filed Vital Signs - documented in this encounter

Not on file

## Medications at Time of Discharge - documented as of this encounter

Medication	Sig	Dispensed	Refills	Start Date	End Date
HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	10 tablet	0	09/18/2018	09/28/2018
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019
estradiol 10 mcg Tab	Place 10 mcg vaginally 2 (two) times a week.		0	05/31/2018	03/02/2020
hydrOXYzine HCl (ATARAX) 25 MG tablet	Take 1 tablet (25 mg total) by mouth nightly as needed for Other (insomnia).	30 tablet	0	01/22/2018	11/11/2019
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.	90 tablet	2	04/09/2018	12/03/2018
nitrofurantoin, macrocrystal-monohydrate, (MACROBID) 100 MG capsule	TK 1 C PO Q 12 H WF FOR 7 DAYS		0	08/08/2018	07/31/2019
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

## Results - documented in this encounter

CT ANKLE LEFT WO CONTRAST - Final result (09/21/2018 1:11 PM MDT)

Specimen

### Impressions

1. Trimalleolar ankle fracture as detailed above.
2. Mildly displaced and rotated, subcentimeter fracture at the anterolateral aspect of the tibial plafond.
3. The tibialis posterior and flexor digitorum longus tendons closely approximate the posterior malleolus fracture without frank entrapment.

Performed At

POWERSCRIBE PACS  
ASOBGYN

### Narrative

HISTORY: Closed trimalleolar fracture of left ankle, initial encounter

Performed At

POWERSCRIBE PACS  
ASOBGYN

COMPARISON: Left ankle radiographs September 18, 2018

TECHNIQUE: Helical CT imaging was performed through the left ankle at a scan width of 2-mm. Coronal and sagittal reformats were created. DICOM format image data have been securely sent to the Idaho Health Data Exchange (IHDE) and are available to nonaffiliated external healthcare facilities or entities on a secure, media free, reciprocally searchable basis with patient authorization for at least 12-months

**FINDINGS:**

Osseous: Negative for dislocation. There is a comminuted, oblique fracture of the distal fibula (Weber B) with up to 5 mm posterior displacement of the distal fracture fragment. There is a comminuted fracture of the posterior malleolus with up to 4 mm posterior displacement of the distal fracture fragment. There is up to 4 mm depression at the posterior articular surface medially (series 5, image 38). The posterior malleolus fracture extends into the posterior aspect of the medial malleolus (series 7, image 71 and series 5, image 42). There is up to 2 mm distraction along this fracture (series 3, image 43).

There is a fracture at the anterolateral aspect of the tibial plafond and with fracture fragment measuring up to 9 x 8 x 6 mm, displaced by up to 4 mm. This fracture fragment appears to be rotated approximately 90 degrees (series 7, image 71 and series 3, image 30). No additional fractures appreciated.

Unfused accessory navicular noted. Tiny cysts line the synchondrosis.

Soft tissue/muscles: The medial flexor or, extensor or, peroneal, and Achilles tendons are limited in assessment but normal in contour. The tibialis posterior and flexor digitorum longus tendons closely approximate the medial margin of the posterior malleolus fracture without frank entrapment (series 2, image 66). There is moderate subcutaneous edema/hematoma at the level of the ankle.

**Procedure Note**

**Edi, Rad Results - 09/21/2018 1:49 PM MDT**

Formatting of this note might be different from the original.

HISTORY: Closed trimalleolar fracture of left ankle, initial encounter

COMPARISON: Left ankle radiographs September 18, 2018

TECHNIQUE: Helical CT imaging was performed through the left ankle at a scan width of 2-mm. Coronal and sagittal reformats were created. DICOM format image data have been securely sent to the Idaho Health Data Exchange (IHDE) and are available to nonaffiliated external healthcare facilities or entities on a secure, media free, reciprocally searchable basis with patient authorization for at least 12-months following the study. For more information visit <http://www.idahohde.org>

**FINDINGS:**

Osseous: Negative for dislocation. There is a comminuted, oblique fracture of the distal fibula (Weber B) with up to 5 mm posterior displacement of the distal fracture fragment. There is a comminuted fracture of the posterior malleolus with up to 4 mm posterior displacement of the distal fracture fragment. There is up to 4 mm depression at the posterior articular surface medially (series 5, image 38). The posterior malleolus fracture extends into the posterior aspect of the medial malleolus (series 7, image 71 and series 5, image 42). There is up to 2 mm distraction along this fracture (series 3, image 43).

There is a fracture at the anterolateral aspect of the tibial plafond and with fracture fragment measuring up to 9 x 8 x 6 mm, displaced by up to 4 mm. This fracture fragment appears to be rotated approximately 90 degrees (series 7, image 71 and series 3, image 30). No additional fractures appreciated.

Unfused accessory navicular noted. Tiny cysts line the synchondrosis.

Soft tissue/muscles: The medial flexor or, extensor or, peroneal, and Achilles tendons are limited in assessment but normal in contour. The tibialis posterior and flexor digitorum longus tendons closely approximate the medial margin of the posterior malleolus fracture without frank entrapment (series 2, image 66). There is moderate subcutaneous edema/hematoma at the level of the ankle.

**IMPRESSION:**

1. Trimalleolar ankle fracture as detailed above.
2. Mildly displaced and rotated, subcentimeter fracture at the anterolateral aspect of the tibial plafond.
3. The tibialis posterior and flexor digitorum longus tendons closely approximate the posterior malleolus fracture without frank entrapment.

Performing Organization

Address

City/State/ZIP Code

Phone Number

POWERSCRIBE PACS ASOBGYN



## Visit Diagnoses - documented in this encounter

### Diagnosis

Closed trimalleolar fracture of left ankle, initial encounter

## Advance Directives

For more information, please contact: 208-381-2183

### Documents on File

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

### Latest Code Status on File

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

### Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

### Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712		Sep. 21, 2018

### Custodian Organization

<b>St. Luke's Health System</b> Boise, ID 83712
--

Encounter Providers	Encounter Date
<b>MD Travis J. Kemp, MD</b> (Attending) 208-855-2410 (Work) 208-482-5515 (Fax) 3015 E Magic View Dr Suite 120 Meridian, ID 83642 Orthopedic Surgery	Sep. 21, 2018

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Reason for Visit

Reason
Leg Pain

## Encounter Details

Date	Type	Department	Care Team
09/18/2018	Emergency	Meridian Emergency Department 520 S EAGLE RD MERIDIAN, ID 83642-6351 208-706-1140	<b>Warner, Tyson H., PA-C</b> 3080 E Gentry Way Suite 210 Meridian, ID 83642 208-384-9022 208-388-1683 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019	Discontinued (Patient stopped taking)
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019	Expired
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.	90 tablet	2	04/09/2018	12/03/2018	Discontinued (Reorder)
HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	10 tablet	0	09/18/2018	09/28/2018	Expired

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD) >OR=6MO PF	10/02/2017	

## Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
Alcohol Use	Standard Drinks/Week			
Yes	2 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits	Answer			Date Recorded
How often do you have a drink containing alcohol?	4 or more times a week			08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?	Not asked			
How often do you have six or more drinks on one occasion?	Daily or almost daily			08/02/2019
Physical Activity	Answer			Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?	0 days			08/02/2019
On average, how many minutes do you engage in exercise at this level?	Not asked			
Sex Assigned at Birth	Date Recorded			
Not on file				

## Last Filed Vital Signs - documented in this encounter

Vital Sign	Reading	Time Taken	Comments
Blood Pressure	110/65	09/18/2018 6:12 PM MDT	
Pulse	64	09/18/2018 6:12 PM MDT	
Temperature	36.6 °C (97.9 °F)	09/18/2018 6:12 PM MDT	
Respiratory Rate	16	09/18/2018 6:12 PM MDT	
Oxygen Saturation	96%	09/18/2018 6:12 PM MDT	
Inhaled Oxygen Concentration	-	-	
Weight	-	-	
Height	-	-	
Body Mass Index	-	-	

## Medications at Time of Discharge - documented as of this encounter

Medication	Sig	Dispensed	Refills	Start Date	End Date
HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	10 tablet	0	09/18/2018	09/28/2018
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019
estradiol 10 mcg Tab	Place 10 mcg vaginally 2 (two) times a week.		0	05/31/2018	03/02/2020
hydrOXYzine HCl (ATARAX) 25 MG tablet	Take 1 tablet (25 mg total) by mouth nightly as needed for Other (insomnia).	30 tablet	0	01/22/2018	11/11/2019
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.	90 tablet	2	04/09/2018	12/03/2018
nitrofurantoin, macrocrystal-monohydrate, (MACROBID) 100 MG capsule	TK 1 C PO Q 12 H WF FOR 7 DAYS		0	08/08/2018	07/31/2019
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019

## Ordered Prescriptions - documented in this encounter

Prescription	Sig	Dispensed	Refills	Start Date	End Date
HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet	Take 1 tablet by mouth every 6 (six) hours as needed for Pain.	10 tablet	0	09/18/2018	09/28/2018

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

## Procedures - documented in this encounter

Procedure Name	Priority	Date/Time	Associated Diagnosis	Comments
SPLINT APPLICATION	Routine	09/18/2018 7:45 PM MDT		



## Results - documented in this encounter

XR ANKLE 3+ VW (XR ANKLE 3 OR MORE VW LEFT) - Final result (09/18/2018 6:51 PM MDT)

Specimen

Impressions	Performed At
Trimalleolar fracture as described.	POWERSCRIBE PACS ASOBGYN

Narrative	Performed At
<b>HISTORY:</b> Pain.  <b>COMPARISON:</b> None.  <b>TECHNIQUE:</b> Left ankle, 3 views.	POWERSCRIBE PACS ASOBGYN

**FINDINGS:** There is an oblique fracture through the distal fibular diaphysis. Minimally displaced medial malleolus fracture. Mildly displaced posterior malleolus fracture. Circumferential soft tissue edema.

## Procedure Note

### Edi, Rad Results - 09/18/2018 7:12 PM MDT

Formatting of this note might be different from the original.

**HISTORY:** Pain.

**COMPARISON:** None.

**TECHNIQUE:** Left ankle, 3 views.

**FINDINGS:** There is an oblique fracture through the distal fibular diaphysis. Minimally displaced medial malleolus fracture. Mildly displaced posterior malleolus fracture. Circumferential soft tissue edema.

### IMPRESSION:

Trimalleolar fracture as described.

Performing Organization	Address	City/State/ZIP Code	Phone Number
POWERSCRIBE PACS ASOBGYN			



## Visit Diagnoses - documented in this encounter

Diagnosis

Left trimalleolar fracture, closed, initial encounter - Primary



## Administered Medications - documented in this encounter

### Inactive Administered Medications - up to 3 most recent administrations

Medication Order	MAR Action	Action Date	Dose	Rate	Site
HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet 1 tablet  1 tablet, Oral, Once, On Tue 9/18/18 at 1839, For 1 dose, Maximum dose of acetaminophen is 4000 mg from all sources in 24 hours.	Given	09/18/2018 6:55 PM MDT	1 tablet		
ondansetron (ZOFTRAN ODT) disintegrating tablet 4 mg  4 mg, Oral, Once, On Tue 9/18/18 at 1839, For 1 dose	Given	09/18/2018 6:54 PM MDT	4 mg		

## Advance Directives

For more information, please contact: 208-381-2183

### Documents on File

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

### Latest Code Status on File

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

### Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

### Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712		Sep. 18, 2018
Custodian Organization		
<b>St. Luke's Health System</b> Boise, ID 83712		

Encounter Providers	Encounter Date
<b>PA-C Tyson H. Warner, PA-C</b> (Attending) 208-384-9022 (Work) 208-388-1683 (Fax) 3080 E Gentry Way Suite 210 Meridian, ID 83642 Physician Assistant	Sep. 18, 2018

# Mary Sue Lark

Summary of Care, generated on Jul. 14, 2021

## Patient Demographics - Female; born Sep. 18, 1956

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
935 S Butler Way Lakewood, CO 80226-4213	925-866-1111 (Home) 925-866-1111 (Mobile) mary@marylark.com	Unknown	White / Not Hispanic or Latino	Divorced

## Note from St. Luke's Health System

This document contains information that was shared with Mary Sue Lark. It may not contain the entire record from St. Luke's Health System.

## Reason for Visit

Reason
Establish Care

## Encounter Details

Date	Type	Department	Care Team
01/22/2018	Office Visit	St. Luke's Clinic Ada Medical Associates - Meridian 3399 E LOUISE DR STE 100 MERIDIAN, ID 83642-5047 208-288-2255	Laky, Devin M., MD 3399 E Louise Dr Suite 100 Meridian, ID 83642 208-288-2255 208-706-2043 (Fax)

## Allergies - documented as of this encounter (statuses as of 07/14/2021)

Active Allergy	Reactions	Severity	Noted Date	Comments
Statins-Hmg-Coa Reductase Inhibitors	Other (See Comments)	Low	01/22/2018	Bones ache.

## Medications - documented as of this encounter (statuses as of 07/14/2021)

Medication	Sig	Dispensed	Refills	Start Date	End Date	Status
levothyroxine (SYNTHROID) 25 MCG tablet	Take 25 mcg by mouth Every morning before breakfast.		0		01/22/2018	Discontinued (Reorder)
zolpidem (AMBIEN) 5 MG tablet	Take 5 mg by mouth nightly as needed for Insomnia.		0		07/31/2019	Discontinued (Patient stopped taking)
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019	Expired
levothyroxine (SYNTHROID) 50 MCG tablet	Take 1 tablet (50 mcg total) by mouth Every morning before breakfast.		0	01/22/2018	04/09/2018	Discontinued (Reorder)
hydrOXYzine HCl (ATARAX) 25 MG tablet	Take 1 tablet (25 mg total) by mouth nightly as needed for Other (insomnia).	30 tablet	0	01/22/2018	11/11/2019	Discontinued (Reorder)

## Active Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date
Obesity (BMI 30.0-34.9)	01/22/2018
Acquired hypothyroidism	01/22/2018
Hyperlipidemia, mixed	01/22/2018

## Resolved Problems - documented as of this encounter (statuses as of 07/14/2021)

Problem	Noted Date	Resolved Date
Primary insomnia	01/22/2018	07/31/2019
GERD without esophagitis	01/22/2018	07/31/2019
Chronic fatigue	01/22/2018	07/31/2019

## Immunizations - documented as of this encounter

Name	Administration Dates	Next Due
INFLUENZA (AFLURIA QUAD)>OR=3YO PF	10/02/2017	
INFLUENZA 3 YRS & OLDER PF(HISTORICAL ONLY)	10/02/2017	
INFLUENZA QUAD (FLULAVAL, FLUARIX, FLUZONE QUAD) >OR=6MO PF	10/02/2017	

## Social History - documented as of this encounter

Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
Alcohol Use	Standard Drinks/Week			
Yes	2 (1 standard drink = 0.6 oz pure alcohol)			
Alcohol Habits		Answer		Date Recorded
How often do you have a drink containing alcohol?		4 or more times a week		08/02/2019
How many drinks containing alcohol do you have on a typical day when you are drinking?		Not asked		
How often do you have six or more drinks on one occasion?		Daily or almost daily		08/02/2019
Physical Activity		Answer		Date Recorded
On average, how many days per week do you engage in moderate to strenuous exercise (like walking fast, running, jogging, dancing, swimming, biking, or other activities that cause a light or heavy sweat)?		0 days		08/02/2019
On average, how many minutes do you engage in exercise at this level?		Not asked		
Sex Assigned at Birth	Date Recorded			
Not on file				

## Last Filed Vital Signs - documented in this encounter

Vital Sign	Reading	Time Taken	Comments
Blood Pressure	123/76	01/22/2018 9:58 AM MST	
Pulse	77	01/22/2018 9:58 AM MST	
Temperature	-	-	
Respiratory Rate	-	-	
Oxygen Saturation	98%	01/22/2018 9:58 AM MST	
Inhaled Oxygen Concentration	-	-	
Weight	89.7 kg (197 lb 12 oz)	01/22/2018 9:58 AM MST	
Height	165.1 cm (5' 5")	01/22/2018 9:58 AM MST	
Body Mass Index	32.91	01/22/2018 9:58 AM MST	

## Patient Instructions - documented in this encounter

### Patient Instructions

Laky, Devin M., MD - 01/22/2018 10:20 AM MST

Formatting of this note might be different from the original.

The problem of recurrent insomnia is discussed regarding sleep latency, nighttime awakenings, early rising.

#### Sleep Hygiene

Sleep hygiene includes adherence to a regular sleep schedule. You should wake and go to bed at same time even on weekends. Goal duration of 7-8 hours. A sunrise/sunset simulation alarm clock can help maintain your circadian rhythm year round, including the long, dark winter days.

Use earplugs or white noise (fan) to limit unwanted noise.

Turn the clock around. If the alarm is set, there is no need to know the time in bed. It only adds worry.

Create an optimal sleep environment with dim lighting, black out shades, no night lights (caution in elderly to prevent falls), and cooler temperature (68F).

Do not go to bed if you are not tired. If you cannot fall asleep after 20-30 minutes, leave the bedroom and do another calm activity like reading in another calm room -- no electronics.

The bedroom is only for sleep and sex.

No pets, reading, studying, eating, TV or other screens in bed (cell phone, tablet, laptop).

Avoid naps longer than 1 hour, or after 3PM.

Limit fluids before bed. Could try 1 cup limit within the 4 hours prior to bed.

Limit alcohol, tobacco, & caffeine (soda, coffee, tea, energy drinks) with last consumption before 1PM. Your body withdraws from these causing awakenings.

Exercise regularly. Generally, such exercise performed in the late afternoon or early evening leads to deeper sleep at night. Also, improving your fitness level, no matter when you choose to exercise, will likely improve the quality of your sleep. However, avoid exercise right before bedtime because it may make it harder to get to sleep quickly.

Practice, practice, practice relaxing presleep rituals. Do not problem solve in bed. Mindful meditation (many smart phone apps available for this), a warm shower, stretching, or yoga are beneficial. Keep a journal or list of concerns with a plan for taking care of those one hour prior to bed.

Also advised over-the-counter sleep aids like Unisom or melatonin. Melatonin can be started at 3mg, and increased to 10mg as needed. Take these one hour prior to laying down when you desire to fall asleep.

Briefly discussed sedative hypnotics for temporary relief as appropriate. We discussed the addictive nature of these drugs. I would like to avoid.

A prescription for as needed use of a hypnotic (Ambien) may be given, to use NO MORE than 3 times per week for 2-3 weeks while developing better sleep hygiene habits.

Electronically signed by Devin M. Laky, MD at 01/22/2018 10:57 AM MST

## Ordered Prescriptions - documented in this encounter

Prescription	Sig	Dispensed	Refills	Start Date	End Date
hydrOXYzine HCl (ATARAX) 25 MG tablet	Take 1 tablet (25 mg total) by mouth nightly as needed for Other (insomnia).	30 tablet	0	01/22/2018	11/11/2019
omeprazole (PRILOSEC) 20 MG capsule	Take 1 capsule (20 mg total) by mouth Daily. Use up to 3 months.	30 capsule	2	01/22/2018	01/22/2019

## Progress Notes - documented in this encounter

Angela S - 01/22/2018 10:20 AM MST

Formatting of this note might be different from the original.  
Left arm lab collected. No complications. Aseptic technique

Electronically signed by Angela S at 01/22/2018 2:53 PM MST

Laky, Devin M., MD - 01/22/2018 10:20 AM MST

Formatting of this note is different from the original.

**Subjective:**

Mary Sue Lark is a 61 y.o. female here to establish care. She is here to discuss:

1. GERD without esophagitis
2. Acquired hypothyroidism
3. Primary insomnia
4. Chronic fatigue
5. Skin tag
6. Chronic pain of right ankle
7. BMI 32.0-32.9,adult
8. Colon cancer screening
9. Breast cancer screening

One year of morning throat clearance with increased phlegm production. Has seen ENT in the past, but has never tried a proton pump inhibitor or other antacid, nor nasal steroid. No environmental allergies known. Denies heartburn, nausea, vomiting, or routine use of NSAIDs or excess caffeine. No odynophagia or dysphagia. Denies hoarseness, nasal congestion, sinus pressure, headache. Does not eat much peppermint or spicy foods. Has gained weight, but had symptoms even at lower weight. No weight loss, diaphoresis, change in appetite, or early satiety. Has tried Mucinex DM.

Has been treated with levothyroxine 50 µg daily for acquired hypothyroidism. Prior records show endocrinology at UCLA suggested this is likely due to transient lithium effect, and that they thought her need for thyroid hormone replacement would improve, and that she could taper off her medication. That was documented in 2002, and she has not discontinued the medication. There were reports of occasional palpitations at doses above 50 µg. No skin, hair, nail changes recently. Denies any further depression or need for treatment of mood. She is functional daily, up and out of bed.

She does take Ambien 5 mg as needed for insomnia, but not every day. She is requesting Xanax as needed for the times when she accidentally has caffeine and other food such as dark chocolate. Has tried melatonin without much benefit.

She has had chronic fatigue but no history of sleep study. Endocrinology noted in the past suggested fibromyalgia and was going to refer her to rheumatology in 2002. No indication that that was done. She knows that she snores, particularly when more overweight. Had never been told when married that she had sleep apnea. She is not actively dieting, and current workout regimen is not providing weight loss.

She has 2 skin tags on her back that have not been treated before. Occasionally chafe and bleed and she picks at them. Feels like she can almost pick them off sometimes. No skin cancer hx.

Also has chronic right lateral malleolus pain without injury. A gentleman fitting her for a ski boot told her that she had a bone spur. Has not had imaging. Does not routinely use over-the-counter analgesics for this. No loss of range of motion or falls.

Patient is not currently employed and declines colon cancer and breast cancer screening based on this. Risks and benefits of alternative screening methods reviewed.

**Note:** Reviewed medical, surgical, family, and social history and updated today

**Past Medical History:**

**Diagnosis Date**

- Accessory skin tags
  - Benign paroxysmal positional vertigo
  - Depression 1999
- Lithium until 2001
- Hyperlipidemia
  - Hypothyroidism
  - Obesity
  - Plantar fasciitis, bilateral

**Past Surgical History:**

**Procedure Laterality Date**

- CESAREAN SECTION
- WISDOM TOOTH EXTRACTION

## Family History

Problem Relation Age of Onset

- COPD Mother
  - Depression Mother
  - Early death Mother
  - Ovarian cancer Mother
  - Early death Father
- Amyloidosis
- Heart disease Father
  - Hodgkin's lymphoma Brother

## Social History

### Social History

- Marital status: Divorced
- Spouse name: N/A
- Number of children: 1
  - Years of education: N/A

### Occupational History

- Software Manager

### Social History Main Topics

- Smoking status: Never Smoker
- Smokeless tobacco: Never Used
- Alcohol use 1.2 - 1.8 oz/week

2 - 3 Glasses of wine per week

Comment: Weekly

- Drug use: No
- Sexual activity: No

### Other Topics Concern

- Not on file

### Social History Narrative

Exercise 2-3 x per week; 4-6hrs summer, 2-3hrs winter.

Caffeine: none

Moved from CA.

Menopause 48, 2004.

Pap smear: 2015, no abnormalities.

Breast and colon cancer screening declined 1/22/2018

MEDS: has a current medication list which includes the following prescription(s): levothyroxine, zolpidem, hydroxyzine hcl, and omeprazole.

ALLERGIES: is allergic to statins-hmg-coa reductase inhibitors.

Use the following STOP-Bang Questionnaire below to screen patient for pre-test probability for OSA:

SNORING. Do you snore loudly? (louder than talking or loud enough to be heard through closed doors). Yes

TIREDNESS. Do you often feel tired, fatigued, or sleepy during the daytime? Yes

OBSERVED APNEA. Has anyone observed you to stop breathing during your sleep? No

PRESSURE. Do you have or are you being treated for high BP? No

BMI > 35 kg/m<sup>2</sup> (See chart on back page) No

AGE > 50 yr Yes

NECK CIRCUMFERENCE > 40cm (15 ¾ inches). 15 3/4in Yes

GENDER is male. No

Total Yes answers 4

### OSA RISK:

SCORE 1-2: low likelihood of OSA

SCORE 3-4: moderate risk which needs further clinical judgement. Consider other risk factors: mallampati score 3-4, BMI>50, atrial fibrillation, h/o stroke, CAD, CHF, pulmonary HTN, poorly controlled HTN, high dose narcotics/BZD

SCORE 5-8: high likelihood of OSA

## Review of Systems

Constitutional: Negative for chills, diaphoresis, fever, malaise/fatigue and weight loss.

HENT: Negative for congestion, sinus pain and sore throat.

Eyes: Negative for blurred vision.

Respiratory: Negative for cough, shortness of breath and wheezing.

Cardiovascular: Negative for chest pain, palpitations and leg swelling.

Gastrointestinal: Negative for abdominal pain, heartburn, nausea and vomiting.

Musculoskeletal: Positive for joint pain. Negative for falls and myalgias.

Neurological: Negative for dizziness, sensory change, focal weakness and headaches.

Endo/Heme/Allergies: Negative for environmental allergies.

Psychiatric/Behavioral: Negative for depression and substance abuse. The patient has insomnia. The patient is not nervous/anxious.

## Objective:

BP 123/76 | Pulse 77 | Ht 165.1 cm (65") | Wt 89.7 kg (197 lb 12 oz) | SpO<sub>2</sub> 98% | BMI 32.91 kg/m<sup>2</sup>

Mood: Congruent, good insight and judgement.

Constitutional: Appears well-developed and well-nourished. No distress. Good hygiene.

Neuro: Alert and oriented.

Head: NC/AT.

Skin: Inflamed, scabbed skin lesion of left mid-back of uncertain anatomy with excoriation. No induration, fluctuance, or active bleeding. Appears c/w skin tag or seborrheic keratosis.

Neck: Supple. Trachea midline. Thyroid smooth, non-tender.

Lymph: No cervical lymphadenopathy.

Eyes: EOMI, no nystagmus. PERRL. Anicteric. No scleral or conjunctival injection. No discharge.

Ears: Bilateral TM's with normal cone of light. Normal EAC. No pain on manipulation.

Nose: Breathing comfortably. Symmetric. No discharge.

Mouth: Mucosa & gingiva normal. Mallampati 2. Oropharynx without exudate or erythema. No tonsillar swelling. Uvula midline.

Cardiovascular: Normal rate, regular rhythm, normal heart sounds, and intact distal pulses. No murmur, rub, or gallop. No peripheral edema.

Pulmonary/Chest: Normal effort. Clear to auscultation. No respiratory distress. No wheezes, rhonchi, or rales.

MSK: Right lateral malleolus is symmetric without palpable bone spur when compared with asymptomatic left malleolus. Non-tender to palpation. No effusion, warmth, or erythema. Warm, well perfused with symmetric upstroke of DP and PT pulses.

## Assessment

1. GERD without esophagitis omeprazole (PRILOSEC) 20 MG capsule

2. Acquired hypothyroidism levothyroxine (SYNTHROID) 50 MCG tablet

TSH, 3RD GEN

3. Primary insomnia hydrOXYzine HCl (ATARAX) 25 MG tablet

4. Chronic fatigue TSH, 3RD GEN

CBC

5. Skin tag

6. Chronic pain of right ankle

7. BMI 32.0-32.9,adult

8. Colon cancer screening

9. Breast cancer screening

## Plan

1. Symptoms of silent reflux suggested by history timeline. Advised 8 week trial of omeprazole 20 mg once daily; may need to increase to twice daily. If improved, would recommend ranitidine twice daily for long-term therapy. Provided education on trigger foods for dyspepsia, and encourage weight loss to reduce symptoms.

2. Acquired hypothyroidism has been treated long-term with levothyroxine 50 µg once daily. She is due for lab work to make sure no dose adjustments are needed, although asymptomatic.

3. Insomnia has been managed with chronic Ambien 5 mg as needed at night. Sleep hygiene handout provided. She had requested Xanax as needed for insomnia related to accidental consumption of caffeine products. Discouraged any caffeine after 2 PM. Advised trial of hydroxyzine with less side effect profile. Encouraged use of melatonin.

4. Patient states she is chronically fatigued. STOPBANG questionnaire puts her at moderate risk for sleep apnea, however she declines polysomnography referral. Encouraged weight loss, stress reduction, regular nutritious meals throughout the day, and mental health well-being. Rechecking her cell counts her anemia and thyroid function.

5. Educated patient that the excoriated left mid back lesion looks like a possible skin tag or seborrheic keratosis. Advised not to irritate this lesion. If it remains inflamed, could use cryotherapy or shave excision. Otherwise it is likely a benign lesion.

6. Chronic, intermittent, atraumatic pain of the right lateral malleoli has been evaluated on examination and is benign. Without decreased musculoskeletal function or neurologic function, I advised conservative home therapy with over-the-counter Tylenol and NSAID as needed. Likely osteoarthritis. If progressive, would order x-ray.

7. Goal BMI 2025, increase aerobic exercise to 4-5 days per week, 40-45 minutes, and reduce caloric intake. Declines dietitian referral.

8-9. The risks, alternative screenings, benefits are reviewed for mammography and colonoscopy, but patient declines due to stated

lack of insurance this time.

Advised annual exam once per year for updating her labs, vaccines, and cancer screenings.

Note: I did spend 45 minutes with the patient and greater than 50% of that time was spent face to face discussing and educating regarding diagnosis, treatment and follow up plan. Patient voiced understanding of plan

\*\*Voice recognition software was used.\*\*Return in about 3 months (around 4/22/2018) for GERD, Annual exam.

Instructed to come in sooner for any new problems or concerns.

Electronically signed by Devin M. Laky, MD at 01/22/2018 2:53 PM MST

## Plan of Treatment - documented as of this encounter

Health Maintenance	Due Date	Last Done	Comments
Hepatitis C Screening	<b>09/18/1956</b>		
HPV Screening	<b>09/18/1986</b>		
Influenza Vaccine (Flu shot) (#1)	09/01/2021	09/29/2020, 11/01/2019, 11/01/2019, Additional history exists	
Colon Cancer Screening: Colonoscopy	12/20/2021		Postponed from 09/18/2006 (Patient advised to receive but declines)
Cervical Cancer Screening	01/02/2023	01/02/2018, 01/01/2015	
Breast Cancer Screening	06/01/2023	06/01/2021	
Tetanus / Tdap Immunization (3 - Td or Tdap)	07/31/2029	07/31/2019, 11/05/2008	
Shingrix (Shingles) Immunization	Completed	02/10/2020, 10/04/2019	

## Results - documented in this encounter

### CBC (PACKAGE) - Final result (01/22/2018 10:58 AM MST)

Component	Value	Ref Range	Performed At	Pathologist Signature
WBC COUNT	6.19	3.80 - 11.00 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	
RBC COUNT	5.10	3.50 - 5.50 10 <sup>6</sup> /uL	SLHS REFERENCE LAB	
HEMOGLOBIN	15.3	11.2 - 15.7 g/dL	SLHS REFERENCE LAB	
HEMATOCRIT	45.8	33.0 - 48.0 %	SLHS REFERENCE LAB	
MCV	89.8	79.0 - 101.0 fL	SLHS REFERENCE LAB	
MCH	30.0	25.0 - 35.0 pg	SLHS REFERENCE LAB	
MCHC	33.4	31.0 - 37.0 g/dL	SLHS REFERENCE LAB	
RDW-CV	13.0	11.0 - 16.0 %	SLHS REFERENCE LAB	
PLATELET COUNT	221	150 - 420 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	
MPV	10.0	9.4 - 12.4 fL	SLHS REFERENCE LAB	
NEUTROPHIL #	3.76	1.90 - 8.00 10 <sup>3</sup> /uL	SLHS REFERENCE LAB	
NRBC %	0	0 - 0 %	SLHS REFERENCE LAB	
NRBC #	<0.01	0.00 - 0.12 10 <sup>3</sup> /uL	SLHS REFERENCE	

NEUTROPHIL %	60.7	40.0 - 76.0 %	SLHS REFERENCE LAB
IMMATURE GRANULOCYTES %	0.3	0.0 - 1.0 %	SLHS REFERENCE LAB
LYMPHOCYTE %	24.9	20.0 - 44.0 %	SLHS REFERENCE LAB
MONOCYTE %	10.2	5.0 - 13.0 %	SLHS REFERENCE LAB
EOSINOPHIL %	3.1	0.0 - 6.0 %	SLHS REFERENCE LAB
BASOPHIL %	0.8	0.0 - 2.0 %	SLHS REFERENCE LAB
NEUTROPHIL #	3.76	1.90 - 8.00 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
IMMATURE GRANULOCYTES #	<0.03	0.00 - 0.04 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
LYMPHOCYTE #	1.54	1.40 - 4.80 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
MONOCYTE #	0.63	0.10 - 0.80 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
EOSINOPHIL #	0.19	0.00 - 0.50 10 <sup>3</sup> /uL	SLHS REFERENCE LAB
BASOPHIL #	0.05	0.00 - 1.00 10 <sup>3</sup> /uL	SLHS REFERENCE LAB

#### Specimen

Blood - Entire blood vessel (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	
SLHS REFERENCE LAB	3176 S. DENVER WAY	BOISE, ID 83705, USA	

#### TSH (TSH, 3RD GEN) - Final result (01/22/2018 10:58 AM MST)

Component	Value	Ref Range	Performed At	Pathologist Signature
TSH, 3RD GEN	3.12	0.47 - 4.68 mIU/L	SLHS REFERENCE LAB	

#### Specimen

Blood - Entire blood vessel (body structure)

Performing Organization	Address	City/State/ZIP Code	Phone Number
SLHS CORE LAB	3176 S. DENVER WAY	BOISE, ID 83705	
SLHS REFERENCE LAB	3176 S. DENVER WAY	BOISE, ID 83705, USA	

#### Visit Diagnoses - documented in this encounter

##### Diagnosis

GERD without esophagitis - Primary

Acquired hypothyroidism

Primary insomnia

Chronic fatigue

Skin tag

Chronic pain of right ankle

BMI 32.0-32.9,adult

Colon cancer screening

## Advance Directives

For more information, please contact: 208-381-2183

### Documents on File

Type	Date Recorded	Patient Representative	Explanation
Advance Care Plan Screening	6/1/2021 2:40 PM		
Advance Care Plan Screening	9/29/2020 12:11 PM		
Advance Care Plan Screening	1/21/2020 6:44 PM		
Advance Care Plan Screening	6/24/2019 10:45 AM		
Advance Care Plan Screening	9/18/2018 7:06 PM		

### Latest Code Status on File

Code Status	Date Activated	Date Inactivated	Comments
Default Full Code	9/25/2018 12:58 PM		

### Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Kyle Lark	Unknown	925-699-2582 (Home)	Son, Emergency Contact

### Document Information

Primary Care Provider	Other Service Providers	Document Coverage Dates
<b>MD Devin M. Laky, MD</b> (Jan. 04, 2018 - Present) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine <b>St. Luke's Health System</b> Boise, ID 83712		Jan. 22, 2018
Custodian Organization		
<b>St. Luke's Health System</b> Boise, ID 83712		

Encounter Providers	Encounter Date
<b>MD Devin M. Laky, MD</b> (Attending) 208-288-2255 (Work) 208-706-2043 (Fax) 3399 E Louise Dr Suite 100 Meridian, ID 83642 Family Medicine	Jan. 22, 2018