

DOB:

DOS: 05/20/2024

**FU-Results**

**Patient: Account**  
**Number: DOB:**  
**Phone: Address:**

**Provider:**  
**Date:** 05/20/2024

**Subjective:****Chief Complaints:****HPI:**Neurology:

Patient is a 51yo female who is here today for a FU.

Pt states she is here today for her MRI results and reports no changes since her last visit.

She states that her headaches have improved significantly with the addition of the Ajovy. She states that she has only had a couple of migraines since her last visit. She states that Nurtec is also very effective when she does get a migraine. She states that she recently used sumatriptan as it was all that she had available, but this was not as effective. She notes that she had once episode of facial freezing. She would like to get off topiramate due to concern for possible side effects.

**Medical History:**

**Medications:** Taking gabapentin , Taking Xolair , Notes to Pharmacist: for uticaria, Taking biotin 5000 mcg tablet, disintegrating 1 tab(s) orally once a day , Taking levocetirizine 5 mg tablet 1 tab(s) orally once a day (in the evening) , Taking esomeprazole , Taking escitalopram 10 mg tablet 1 tab(s) orally once a day , Taking losartan 50 mg tablet 1 tab(s) orally once a day , Taking atorvastatin 40 mg tablet 1 tab(s) orally once a day , Taking Propranolol Hydrochloride LA 60 mg capsule, extended release 1 cap(s) orally once a day , Taking Ajovy Autoinjector vfrm 225 mg/1.5 mL solution as directed subcutaneously once a month , Taking Ondansetron Hydrochloride 4 mg tablet 1 tab(s) orally once daily as needed for migraine associated nausea , Taking Nurtec ODT 75 mg tablet, disintegrating 1 tab(s) orally once as needed at migraine onset. Max 1 per day. , Taking topiramate 100 mg tablet 1 tab(s) orally 2 times a day , Not-Taking/PRN SUMAtriptan 100 mg tablet 1 tab(s) orally once , Not-Taking/PRN venlafaxine 150 mg capsule, extended release 1 cap(s) orally once a day

**Objective:****Vitals:**

BP sitting: 113/79, Pulse sitting: 89, BMI: **34.69**, Ht: 5'10", Wt: 241.8, Temp: 97.8.

**Examination:**General Examination:

General appearance: pleasant, NAD, The patient is well nourished, well developed who appears to be of stated age. .

Lungs: non-labored.

Skin: no rashes, no visible lesions, no erythema, normal color without cyanosis.

Neurological Examination:

Cortical Functions: Awake and alert, oriented to person/place. Speech NL, follows commands .

Cranial nerves: eye movements normal, no ptosis, face symmetric, tongue midline, shoulder shrug normal.

Motor Strength: moves all four extremities against gravity, no drift, tremors or involuntary movements.

Coordination: no obvious dysmetria.

Gait and Station: narrow based gait.

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**DOB:****DOS:** 05/20/2024**Assessment:****Assessment:**

1. Migraine without aura, not intractable, without status migrainosus - G43.009 (Primary)
2. Headache, unspecified - R51.9
3. Tension-type headache, unspecified, not intractable - G44.209
4. Nausea - R11.0
5. Neuralgia and neuritis, unspecified - M79.2

**Plan:****Treatment:****1. Migraine without aura, not intractable, without status migrainosus**

Continue topiramate tablet, 100 mg, 1 tab(s), orally, 2 times a day, 90 days, 180 Tablet, Refills 1 ; Continue Ajovy Autoinjector solution, vfrm 225 mg/1.5 mL, as directed, subcutaneously, once a month, 90 days, 3, Refills 1 ; Continue Ondansetron Hydrochloride tablet, 4 mg, 1 tab(s), orally, once daily as needed for migraine associated nausea, 90 days, 30, Refills 1 ; Continue Nurtec ODT tablet, disintegrating, 75 mg, 1 tab(s), orally, once as needed at migraine onset. Max 1 per day., 90 days, 30, Refills 2 .

Notes: Ms. Robinson is a 51 year old female who presents for headaches.

Neurological examination shows normal pupillary light reflex, extraocular movement, facial strength. Normal motor exam. No atypical features to suggest a trigeminal autonomic cephalalgia. Likely migraines.

tried and failed: sumatriptan (oral and injection), rizatriptan (ineffective), CI to amitriptyline due to other mood medications, topiramate (not completely effective), propranolol (ineffective, cannot increase due to blood pressure/pulse), Ubrelvy sample not effective

MRI Brain shows mild scattered foci of T2/FLAIR hyperintensity, not significantly progressed from the comparison exam.

**PLAN**

- Continue Ajovy once monthly injectable. Side effects discussed, patient agrees with treatment.
- Will wean off topiramate 100mg BID. Discussed weaning by 25mg every 2 weeks as patient has been on medication for a very long time. She has different doses but will call if she needs prescription to do so. Discussed interactions with oral contraceptives and fetal risk.
- Continue Zofran 4mg as needed for migraine associated nausea. Discussed administration and possible interactions with other medications.
- Continue Nurtec as needed for migraines. Side effects discussed, patient agrees with treatment.
- Discussed treatment plan with patient, she agrees with plan.
- Follow up in 6 weeks. All questions answered.

**2. Others**

Notes: Time spent by provider: 33 minutes. Time spent reviewing imaging with patient, interviewing patient, discussing care plan, patient education, and writing note. More than 50% of the time was spent talking with patient.

**Follow Up:** nv

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