

Datavant Release of Information

Patient Name: CHRISTOPHER PRITT
Date of Birth: 07/21/1972
Medical Record #: 37379

CERTIFICATION OF RECORDS

Enclosed are the medical records of CHRISTOPHER PRITT . Datavant is producing the records as the Health Insurance Portability and Accountability Act business associate of CENTER POINT FAMILY MEDICINE and pursuant to a subpoena or patient authorized request issued to CENTER POINT FAMILY MEDICINE. Please accept this document as certification of the records produced herewith. The records you requested are maintained by CENTER POINT FAMILY MEDICINE . The records produced herewith are accurate, complete, true, and correct copies of all records retrieved by Datavant from the CENTER POINT FAMILY MEDICINE medical records pursuant to your request.

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Date: 07/02/2024

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CENTER POINTE FAMILY MEDICINE MI 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Encounter Date: 04/29/2024

Patient

Name	PRITT, CHRISTOPHER (51yo, M) ID# 40582	Appt. Date/Time	04/29/2024 03:40PM
DOB	07/21/1972	Service Dept.	CASTLE ROCK 1
Provider	KEENAN GRIEGO, AGNP		
Insurance	Med Primary: MEDICAID-CO (MEDICAID) Insurance # : D569133 Prescription: check now		

Chief Complaint

Lab Results w/EP & DX

Patient's Pharmacies

SAFEWAY PHARMACY #05-1644 (ERX): 7655 MCLAUGHLIN ROAD, FALCON, CO 80831, Ph (719) 495-7400, Fax (719) 495-7600

WALMART PHARMACY 4335 (ERX): 11550 MERIDIAN MARKET VIEW, FALCON, CO 80831, Ph (719) 522-2989, Fax (719) 522-2991

Vitals

None recorded.

Measurements

None recorded.

Allergies

Allergies not reviewed (last reviewed 04/08/2024)

PENICILLINS, unable-to-assess criticality: - Reports he has always been told as a child he is allergic but is unsure what happens

Medications

Reviewed Medications

baclofen 10 mg tablet Take 2 tabs in the morning, take 1 tablet at lunch, and 2 tablet in the evening AS NEEDED for muscle spasms/pain	04/17/24 filled
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buPROPion HCL SR 150 mg tablet, 12 hr sustained-release Take 1 tablet BY MOUTH twice a day	05/09/24 filled
---	-----------------

gabapentin 800 mg tablet TAKE ONE TABLET BY MOUTH TWICE DAILY AS NEEDED	04/03/24 filled
--	-----------------

hydrOXYzine pamoate 50 mg capsule Take 1 capsule BY MOUTH twice a day as needed for 30 days.	05/05/24 filled
---	-----------------

oxyCODONE 5 mg tablet TAKE ONE TABLET BY MOUTH EVERY EIGHT HOURS AS NEEDED FOR SEVEN DAYS	04/30/24 filled
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Tylenol, Ibuprofen prn

Vaccines

Vaccines not reviewed (last reviewed 02/12/2024)

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PRITT, Christopher (id #37379, dob: 07/21/1972)

Vaccine Type	Date	Amt	Route	Site	NDC	Lot #	Mfr.	Exp Date	VIS	VIS Given	Vaccinator
COVID-19											
COVID-19, mRNA, LNP-S, bivalent, PF2507/23.5 mcg/0.5 mL dose (Moderna)	07/23/2023	0.5 mL	Intramuscular	Deltoid Left	8077702820323H22A	0023H22A	Moderna US, Inc.	06/05/23	Moderna COVID-196+ EUA 10/12/2022	07/23/2023	Linda James
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	04/08/2023	0.5 mL				023C21A	Moderna US, Inc.				
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	03/06/2023	0.5 mL				003B21A	Moderna US, Inc.				
Diphtheria, Tetanus, Pertussis											
Tdap	12/10/10	0.5 mL	Intramuscular			3K44J	GlaxoSmithKline				
Tdap	07/21/13										
Zoster											
zoster recombinant	07/28/23	0.5 mL	Intramuscular			X9KC7	GlaxoSmithKline				

Problems

Reviewed Problems

Closed fracture of metacarpal bone - Onset: 04/30/2024, Right
Pain of left hand - Onset: 04/08/2024
Tobacco use cessation education - Onset: 04/08/2024
Depression screening positive - Onset: 04/08/2024
Diet education - Onset: 04/13/2023
Fitting procedure - Onset: 03/09/2023
Erythrocytosis - Onset: 04/18/2023
Chondromalacia of right patella - Onset: 03/18/2024
Pain of right shoulder joint - Onset: 11/28/2023
Body mass index 25-29 - overweight - Onset: 01/18/2024
Red blood cell count above reference range - Onset: 03/08/2023
Generalized anxiety disorder - Onset: 02/20/2023
Osteoarthritis of hip - Onset: 03/09/2023
Pain of left hip joint - Onset: 10/11/2023
Pain in right hand - Onset: 11/28/2023
Pain in right hip joint - Onset: 02/26/2024
Vitamin D deficiency - Onset: 04/18/2023 - > Advised to start Vit D3 3000IU daily, recheck in 3-6 months
Major depressive disorder - Onset: 02/17/2023
Cervical spondylosis - Onset: 03/08/2023
Exercises education, guidance, and counseling - Onset: 04/13/2023
Avascular necrosis of bone of hip - Onset: 02/17/2023
Pain of right knee joint - Onset: 11/28/2023
Pain of left knee joint - Onset: 06/08/2023
Injury of finger - Onset: 01/18/2024, Left
Chews tobacco - Onset: 04/08/2024
Ex-smoker - Onset: 04/08/2024
Patient follow-up to return when and if necessary - Onset: 04/08/2024
Lipoma of skin and subcutaneous tissue of neck - Onset: 03/02/2023
Skin lesion - Onset: 02/19/2024

Family History

Family History not reviewed (last reviewed 02/12/2024)

Social History

Social History not reviewed (last reviewed 04/08/2024)

Activities of Daily Living

Are you able to care for yourself?: Yes
Are you blind or do you have difficulty seeing?: No
Are you deaf or do you have serious difficulty hearing?: No
Do you have difficulty concentrating, remembering or making decisions?: No
Do you have difficulty walking or climbing stairs?: No
Do you have difficulty dressing or bathing?: No
Do you have difficulty doing errands alone?: No

Substance Use

Do you or have you ever smoked tobacco?: Former smoker
Do you or have you ever used any other forms of tobacco or nicotine?: Yes
Do you or have you ever used e-cigarettes or vape?: Never used electronic cigarettes
Do you or have you ever used smokeless tobacco?: Currently chews tobacco (Notes: occasional)
What was the date of your most recent tobacco screening?: 04/08/2024
What is your level of alcohol consumption?: None

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PRITT, Christopher (id #37379, dob: 07/21/1972)

Do you use any illicit or recreational drugs?: No

What is your level of caffeine consumption?: Moderate (Notes: 1 cup of coffee/daily)

Education and Occupation

What is the highest grade or level of school you have completed or the highest degree you have received?: GED or equivalent

Home and Environment

Do you have any pets?: No

Do you have smoke and carbon monoxide detectors in your home?: Yes

Diet and Exercise

What type of diet are you following?: Regular (Notes: healthy)

What is your exercise level?: Occasional (Notes: PT)

Gender Identity and LGBTQ Identity

Gender identity: Identifies as Male

Surgical History

Surgical History not reviewed (last reviewed 02/12/2024)

Past Medical History

Past Medical History not reviewed (last reviewed 02/12/2024)

Acid Reflux (GERD): Y

Allergies: Y

Anxiety Disorder: Y

Depression: Y

Developmental or Behavioral Disorders: Y

Gout: Y

Head Injury/Concussion: Y

Headaches: Y

Headaches/Migraines: Y

High Cholesterol: Y

Hospitalizations: Y

Hypertension: Y

Hyperthyroidism: Y

Mental Disorder: Y

Mental Illness: Y

Muscle, Joint, or Bone Problems: Y

Obesity: Y

Seizures/Epilepsy: Y

Thyroid Problems: Y

Vision or Eye Problems: Y

Documents for Discussion

Discussed the following documents:

MRI, HAND, W/O CONTRAST - 04/06/24

HAND SURGEON CONSULT NOTE - COLORADO SPRINGS ORTHOPAEDIC GROUP (NORTH CAMPUS) - 04/11/24

EMERGENCY DEPARTMENT NOTE - PENROSE HOSPITAL EMERGENCY DEPARTMENT - 04/09/24

ADMISSION NOTICE - 04/09/24

EMERGENCY ROOM TREATMENT NOTIFICATION - PENROSE HOSPITAL - 04/09/24

Clinical Document - 04/08/24

Emergency Medicine - Emergency - Jeremiah Elias, CommonSpirit Health - 04/10/24

Screening

None recorded.

HPI

Christopher presents today via TeleMed to review recent labs and/or imaging results.

Medication List Reviewed and Updated as necessary.

Acute concerns: See below

Chris is a very pleasant non-toxic 51 y/o male who presents today for a virtual follow-up. He has confirmed he is currently located at home in the state of Colorado. He has confirmed his identify using DOB. Chris verbalized an understanding that he may terminate the visit at any time. All questions/concerns have been addressed by this provider and he has provided verbal consent to the provider to move forward with the virtual visit.

He reports he was seen in the ER and by the hand specialist. He was referred to PT services from his hand specialist. He reports having a follow up in x1 month. He reports he is doing the hand exercises but is still struggling with pain. He has not noticed a big difference at this time. He reports, "They spent like 30 seconds with me." Reports the edema has improved some. Current pain 8/10. Reports oxycodone brings pain down to 4-5, which allows him to do his therapy. Denies substance use. Denies any S/E. Denies alcohol use.

He denies chest pain, shortness of breath, palpitations, light headedness, or dizziness. Denies cough, wheezing, hemoptysis, or sleep apnea. Denies abdominal pain, vomiting, nausea, diarrhea, dyspepsia, GERD, incontinence, trouble urinating, hematuria, muscle aches, weakness, back pain, or swelling in the extremities. Denies jaundice, rashes, loss of consciousness, numbness,

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PRITT, Christopher (id #37379, dob: 07/21/1972)

seizures, headaches. Patient denies any other symptomatology and has verbalized provider has covered all concerns.

Med list, allergies reviewed with patient. Denies need for refills. Chart review completed upon examination.

ROS

ROS as noted in the HPI

Physical Exam

Mental Status Exam: Appearance: well-groomed, clean, and normal weight. Behavior: cooperative, calm, and eye contact. Speech: fluent, clear, and normal volume. Perception: no hallucinations. Cognition: oriented to situation, time, place, and person and alert and memory intact. Intelligence: above average. Mood: euthymic. Affect: pleasant, happy, euphoric, and congruent to thought content. Insight: intact. Judgment: intact. Thought Processes: intact. Thought Content: unremarkable. Motor Activity: intact.

A&Ox3 speaking in full and complete sentences without distress. Non-labored breathing.

Assessment / Plan

Total time spent with chart review, face to face time with patient, documentation, medication review, & allergy review, 20 min. Over 50% of the time was spent face to face with patient.

I have encouraged the patient to reach out to office and leave provider message with any questions or concerns. Contact information provided.

1. Closed fracture of metacarpal bone - Right -

- > Hand specialist note reviewed
 - > Reports oxycodone helps to continue therapy, advised that he will need to reach out to specialist for ongoing refills, will provide as he is working w/ therapy
 - > CO PDMP reviewed, no concerns
 - > Will provide refill but reviewed w/ patient that if further refills needed, they will need to come from specialist
 - > Discussed naloxone, pt declines
 - > ER precautions were reviewed in depth with patient
 - > All questions/concerns from the patient were addressed. Patient verbalized an understanding of the treatment plan, acceptance of the risks involved, verbalized an understanding that labs and referrals are the patient's responsibility to follow up on.
 - > Advised to f/u with the clinic if there are any changes, worsening of condition, or any questions present.
 - > Patient was advised to schedule a follow-up appointment, physical scheduled for next month
- S62.308D: Unspecified fracture of other metacarpal bone, subsequent encounter for fracture with routine healing
oxycodone 5 mg tablet - To be submitted on or around 04/30/2024 Take 1 tablet(s) every 8 hours by oral route as needed for 7 days. Qty: (21) tablet Refills: 0 Pharmacy: SAFEWAY PHARMACY #05-1644
OPIOID OVERDOSE: CARE INSTRUCTIONS

Patient Instructions

Please contact office if you do not receive a phone call for scheduling of referral/appointment within the next 5-7 days.

Discussion Notes

I discussed all the findings and full differential with the patient. Together, with patient, a plan of care was discussed including lab orders, imaging tests, medications and/or referrals. RBD & SE associated with current meds and potential interactions with other meds patient is taking. Pt accepts risks, responsibilities and wishes to continue current medications. I answered all the patient's questions and they voiced understanding about their visit, the workup and plan of care. Any tests, labs or referrals ordered were fully explained and the patient agreed with the plan and wishes to proceed. Pt will follow up on results of any tests, labs or referrals ordered today. LabCorp is available on-site for your convenience. Although, you may choose any other lab facility to have labs completed. Pt advised and understands it is their responsibility to check with insurance for tests, labs and apt coverage. Pt understands it is ultimately their choice to follow thru with recommendations, labs, imaging, medications and/or referrals

Return to Office

KEENAN GRIEGO, AGNP for PHYSICAL at CASTLE ROCK 1 on 06/05/2024 at 04:20 PM

Encounter Sign-Off

Encounter signed-off by KEENAN GRIEGO, AGNP, 05/12/2024.

Encounter performed and documented by KEENAN GRIEGO, AGNP

Encounter reviewed & signed by KEENAN GRIEGO, AGNP on 05/12/2024 at 2:06pm

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PRITT, Christopher (id #37379, dob: 07/21/1972)

Encounter Date: 04/08/2024

Patient

Name	PRITT, CHRISTOPHER (51yo, M) ID# 40582	Appt. Date/Time	04/08/2024 04:20PM
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DOB	07/21/1972	Service Dept.	CASTLE ROCK 1
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Provider	KEENAN GRIEGO, AGNP
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Insurance	Med Primary: MEDICAID-CO (MEDICAID) Insurance # : D569133 Prescription: MAGELLAN-COLORADO MEDICAID - Member is eligible. details
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Chief Complaint

Physical - Male 50+

Patient's Pharmacies

SAFEWAY PHARMACY #05-1644 (ERX): 7655 MCLAUGHLIN ROAD, FALCON, CO 80831, Ph (719) 495-7400, Fax (719) 495-7600

WALMART PHARMACY 4335 (ERX): 11550 MERIDIAN MARKET VIEW, FALCON, CO 80831, Ph (719) 522-2989, Fax (719) 522-2991

Vitals

Ht: 5 ft 9 in 04/08/2024
04:05 pm

Wt: 189 lbs With clothes
04/08/2024 04:13 pm

BMI: 27.9 04/08/2024 04:13
pm

BP: 130/82 sitting L arm
04/08/2024 05:05 pm

Pulse: 87 bpm regular
04/08/2024 04:15 pm

O2Sat: 94% Room Air at
Rest 04/08/2024 04:15
pm

T: 98.8 F° temporal
artery 04/08/2024
04:15 pm

Measurements

None recorded.

Allergies

Reviewed Allergies

PENICILLINS, unable-to-assess criticality: - Reports he has always been told as a child he is allergic but is unsure what happens

Medications

PRITT, Christopher (id #37379, dob: 07/21/1972)

Reviewed Medications

baclofen 10 mg tablet 04/08/24 prescribed
Take 2 tabs in the morning, take 1 tablet at lunch, and 2 tablet in the evening AS NEEDED for muscle spasms/pain
Note: Take 2 tabs in the morning, take 1 tablet at lunch, and 2 tablet in the evening AS NEEDED for muscle spasms/pain

buPROPion HCL SR 150 mg tablet, 12 hr sustained-release 02/12/24 filled
Take 1 tablet BY MOUTH twice a day

gabapentin 800 mg tablet 04/03/24 filled
TAKE ONE TABLET BY MOUTH TWICE DAILY AS NEEDED

hydrOXYzine pamoate 50 mg capsule 04/08/24 prescribed
Take 1 capsule(s) twice a day by oral route as needed for 30 days.

oxyCODONE 5 mg tablet 04/08/24 prescribed
Take 1 tablet(s) every 8 hours by oral route as needed for 7 days.

Tylenol, Ibuprofen prn

Vaccines

Vaccines not reviewed (last reviewed 02/12/2024)

Vaccine Type	Date	Amt	Route	Site	NDC	Lot #	Mfr.	Exp. Date	VIS	VIS Given	Vaccinator
COVID-19											
COVID-19, mRNA, LNP-S, bivalent, PF-02301222 0.5 mL dose (Moderna)	02/10/23	0.5 mL	Intramuscular	Deltoid Left	8077702820523H22	003B21A	Moderna US, Inc.	06/05/23	Moderna COVID-19 6+ EUA	10/12/2022	Linda James
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	04/08/24	0.5 mL				023C21A	Moderna US, Inc.				
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	03/08/23	0.5 mL				003B21A	Moderna US, Inc.				
Diphtheria, Tetanus, Pertussis											
Tdap	12/10/10	0.5 mL	Intramuscular			3K44J	GlaxoSmithKline				
Tdap	07/21/13										
Zoster recombinant	07/28/23	0.5 mL	Intramuscular			X9KC7	GlaxoSmithKline				

Problems

Reviewed Problems

Pain of left hand - Onset: 04/08/2024
Tobacco use cessation education - Onset: 04/08/2024
Depression screening positive - Onset: 04/08/2024
Diet education - Onset: 04/13/2023
Fitting procedure - Onset: 03/09/2023
Erythrocytosis - Onset: 04/18/2023
Chondromalacia of right patella - Onset: 03/18/2024
Pain of right shoulder joint - Onset: 11/28/2023
Body mass index 25-29 - overweight - Onset: 01/18/2024
Red blood cell count above reference range - Onset: 03/08/2023
Generalized anxiety disorder - Onset: 02/20/2023
Osteoarthritis of hip - Onset: 03/09/2023
Pain of left hip joint - Onset: 10/11/2023
Pain in right hand Onset: 11/28/2023
Pain in right hip joint - Onset: 02/26/2024
Vitamin D deficiency - Onset: 04/18/2023 - > Advised to start Vit D3 3000IU daily, recheck in 3-6 months
Major depressive disorder - Onset: 02/17/2023
Cervical spondylosis - Onset: 03/08/2023

PRITT, Christopher (id #37379, dob: 07/21/1972)

Exercises education, guidance, and counseling - Onset: 04/13/2023
Avascular necrosis of bone of hip - Onset: 02/17/2023
Pain of right knee joint - Onset: 11/28/2023
Pain of left knee joint - Onset: 06/08/2023
Injury of finger - Onset: 01/18/2024, Left
Chews tobacco - Onset: 04/08/2024
Ex-smoker - Onset: 04/08/2024
Patient follow-up to return when and if necessary - Onset: 04/08/2024
Lipoma of skin and subcutaneous tissue of neck - Onset: 03/02/2023
Skin lesion - Onset: 02/19/2024

Family History

Family History not reviewed (last reviewed 02/12/2024)

Social History

Reviewed Social History

Activities of Daily Living

Are you able to care for yourself?: Yes

Are you blind or do you have difficulty seeing?: No

Are you deaf or do you have serious difficulty hearing?: No

Do you have difficulty concentrating, remembering or making decisions?: No

Do you have difficulty walking or climbing stairs?: No

Do you have difficulty dressing or bathing?: No

Do you have difficulty doing errands alone?: No

Substance Use

Do you or have you ever smoked tobacco?: Former smoker

Do you or have you ever used any other forms of tobacco or nicotine?: Yes

Do you or have you ever used e-cigarettes or vape?: Never used electronic cigarettes

Do you or have you ever used smokeless tobacco?: Currently chews tobacco (Notes: occasional)

What was the date of your most recent tobacco screening?: 04/08/2024

What is your level of alcohol consumption?: None

Do you use any illicit or recreational drugs?: No

What is your level of caffeine consumption?: Moderate (Notes: 1 cup of coffee/daily)

Education and Occupation

What is the highest grade or level of school you have completed or the highest degree you have received?: GED or equivalent

Home and Environment

Do you have any pets?: No

Do you have smoke and carbon monoxide detectors in your home?: Yes

Diet and Exercise

What type of diet are you following?: Regular (Notes: healthy)

What is your exercise level?: Occasional (Notes: PT)

Gender Identity and LGBTQ Identity

Gender identity: Identifies as Male

Surgical History

Surgical History not reviewed (last reviewed 02/12/2024)

Past Medical History

Past Medical History not reviewed (last reviewed 02/12/2024)

Acid Reflux (GERD): Y

Allergies: Y

Anxiety Disorder: Y

Depression: Y

Developmental or Behavioral Disorders: Y

Gout: Y

Head Injury/Concussion: Y

Headaches: Y

Headaches/Migraines: Y

High Cholesterol: Y

Hospitalizations: Y

Hypertension: Y

Hyperthyroidism: Y

Mental Disorder: Y

Mental Illness: Y

Muscle, Joint, or Bone Problems: Y

Obesity: Y

Seizures/Epilepsy: Y

Thyroid Problems: Y

Vision or Eye Problems: Y

Documents for Discussion

Discussed the following documents:

CENTER POINTE FAMILY MEDICINE in 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

MRI, KNEE, W/O CONTRAST - 03/14/24

MRI, HAND, W/O CONTRAST - 03/13/24

XR, HIP, UNILATERAL, 2 OR 3 VIEW - 03/13/24

Screening

Name	Score	Notes
PHQ-2/PHQ-9	14 (for the PHQ-9), Finding: Positive	
GAD-7	15	
AUDIT-C	4	

HPI

Christopher presents to clinic for their Annual Physical Exam.

Recent immunization dates and recommendations entered in A/P

Recent preventive screening dates entered in A/P

Intake completed, vitals obtained including BMI calculation, current medication list reviewed, updated PHM, SocHx, and documented medical changes since last PE.

Patient completed the following screenings in house:

PHQ 9 - Depression Screening

AUDIT-C - Alcohol Use Disorders Identification Test

GAD-7 - General Anxiety Disorder Screening

Results/Answers of above screenings were entered where appropriate and given to Provider to review with patient.

Concerns: review MRI results Knee

Chris is a very pleasant non-toxic 51 y/o male who presents today for his annual examination.

He reports ongoing L hand pain that has been present since 10/2023. Has tried PT with no improvement. XR was completed and MRI recently done revealing a potential bone tumor with abnormal bone marrow signal and per radiology, should see a hand specialist or orthopedic oncologist. Chris endorses severe pain, which is improved with oxycodone. He does use it sparingly with good results. Endorses fatigue, drowsiness. Bone pain is described as a sharp/ache, currently 7/10 but can reach 9/10. Denies unexplained weight loss or bleeding.

Reports he has switched the bupropion to SR, with resolution of side effects from XL. Reports doing well with his gabapentin and hydroxyzine. Has been using 2 (25 mg tabs) at night with better results. Will send in new RX

Is requesting STD testing. Denies dysuria or discharge.

He denies worsening depressive feelings, anhedonia, muscle tension, trouble with sleep induction or maintenance, concentration/focus deficits, grandiosity, distractability, increased activity/talkativeness, hypersexuality, risky behavior, gambling, tics, nightmares, flashbacks, changes in appetite, irritability, somatic manifestations, drastic changes in mood / behavior, self-harm behaviors (cutting), AVH, or other psychiatric symptoms.

He denies a negative view of self, sense of hopelessness, isolation, increased substance use, giving away possessions/making funeral arrangements, feeling like a burden, or increased discussions of death.

He denies chest pain, shortness of breath, palpitations, light headedness, or dizziness. Denies cough, wheezing, hemoptysis, or sleep apnea. Denies abdominal pain, vomiting, nausea, diarrhea, GERD, incontinence, trouble urinating, hematuria, muscle aches, back pain, or swelling in the extremities. Denies jaundice, rashes, loss of consciousness, numbness, seizures, headaches. Patient denies any other symptomatology and has verbalized provider has covered all concerns.

Med list, allergies reviewed with patient. Refills on baclofen. Chart review completed upon examination.

ROS

ROS as noted in the HPI

Physical Exam

Constitutional: General Appearance: well-developed and overweight. Level of Distress: NAD. Ambulation: ambulating normally.

Psychiatric: Insight: good judgement. Mental Status: normal mood and affect and active and alert. Orientation: to time, place, and person. Memory: recent memory normal and remote memory normal.

Head: Head: normocephalic and atraumatic.

Eyes: Lids and Conjunctivae: no discharge or pallor and non-injected. Pupils: PERRLA. Corneas: grossly intact. EOM: EOMI. Lens: clear. Sclerae: non-icteric. Vision: peripheral vision grossly intact and acuity grossly intact.

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ENMT: Ears: no lesions on external ear, EACs clear, and TMs clear. Hearing: no hearing loss. Nose: no lesions on external nose, sinus tenderness, or nasal discharge and nares patent and nasal passages clear. Lips, Teeth, and Gums: no mouth or lip ulcers or bleeding gums and normal identification. Oropharynx: no erythema or exudates and moist mucous membranes and tonsils not enlarged.

Neck: Neck: supple, FROM, trachea midline, and no masses. Lymph Nodes: no cervical LAD, supraclavicular LAD, or axillary LAD. Thyroid: no enlargement or nodules and non-tender.

Lungs: Respiratory effort: no dyspnea. Percussion: no dullness, flatness, or hyperresonance. Auscultation: no wheezing, rales/crackles, or rhonchi and breath sounds normal, good air movement, and CTA except as noted.

Cardiovascular: Apical Impulse: not displaced. Heart Auscultation: normal S1 and S2; no murmurs, rubs, or gallops; and RRR. Neck vessels: no carotid bruits. Pulses including femoral / pedal: normal throughout.

Abdomen: Bowel Sounds: normal. Inspection and Palpation: no tenderness, guarding, masses, rebound tenderness, or CVA tenderness and soft and non-distended. Liver: non-tender and no hepatomegaly. Spleen: non-tender and no splenomegaly. Hernia: none palpable.

Male GU: Male GU Exam: Deferred. No clinical indication..

Rectal: Rectal Exam: Deferred. No clinical indication..

Musculoskeletal: Motor Strength and Tone: normal and normal tone. Joints, Bones, and Muscles: tenderness and bony deformity and normal movement of all extremities and no contractures; Se photo. Extremities: no cyanosis, edema, varicosities, or palpable cord.

Neurologic: Gait and Station: normal gait and station. Cranial Nerves: grossly intact. Sensation: grossly intact. Reflexes: DTRs 2+ bilaterally throughout. Coordination and Cerebellum: finger-to-nose intact and no tremor.

Skin: Inspection and palpation: no rash, lesions, ulcer, induration, nodules, jaundice, or abnormal nevi and good turgor. Nails: normal.

Back: Thoracolumbar Appearance: normal curvature.

Assessment / Plan

1. Adult health examination -
TD (02.10.17)-UTD
Flu (-)- offered, declined. Risks V Benefits discussed
Pevnar20 due age 65
Shingles(07.28.23)-directed pt to his local pharm

Previous Hep C Screening (Y+)

Vision forever
Dental 1 mo ago
Colonoscopy/Cologuard/I-Fobt: Is agreeable

PHQ9 (14) - Improved from 21
GAD7 (15) - Slightly improved from 16
AUDIT (4)
CAGE (0)

Labs ordered today

- All age-appropriate screenings were discussed and ordered as necessary.
- Advised Pt to make f/u apt to review results of any tests or screenings ordered today.
- Reviewed current mammogram/colonoscopy screening guidelines. Colonoscopy as "gold standard" for early colon cancer detection and screening guidelines. Offered Cologuard, fecal cards as alternatives. For women, mammogram is the "gold standard" to rule out any early form of breast cancer.
- Reviewed immunization updates and R/B.
- Reviewed medication compliance, dosing, SE's, RBD.
- Dietary, exercise, healthy lifestyle measures patient education provided
- Follow up yearly for your annual exams.
- Contact our office if you do not hear from scheduling of referrals in the next 5-7 business days.
- Remember to schedule your annual dental or eye exam if needed.
- F/u in 2 weeks to review labs, verbalized agreement

Z00.01: Encounter for general adult medical examination with abnormal findings
COMP. METABOLIC PANEL (14)-322000-P
LIPID PANEL-303756-P
CBC WITH DIFFERENTIAL/PLATELET
WELL VISIT, MEN 50 TO 65: CARE INSTRUCTIONS
OPHTHALMOLOGIST REFERRAL - Schedule Within: provider's discretion

2. Pain of left hand-

PRITT, Christopher (id #37379, dob: 07/21/1972)

- > Was notified by colleague Susan Foley, FNP of results of MRI were called in my radiologist to her, concerns of hand that are of concern for a potential bone tumor, MRI revealing abnormal bone marrow signal, reports onset of pain was from 11/2023, awaiting MRI to be sent
 - > Will send for hand surgeon referral, stat
 - > Obvious edema and tenderness to palpation of 5th metacarpal w/ reduced RoM, see PE for photo
 - > Will provide refill of oxycodone, denies s/e or issues w/ medication in the past
 - > Advised if he does not hear from hand specialist within 3 days to notify clinic
 - > ER precautions were reviewed in depth with patient
 - > CO PDMP reviewed, no concerns
 - > All questions/concerns from the patient were addressed. Patient verbalized an understanding of the treatment plan, acceptance of the risks involved, verbalized an understanding that labs and referrals are the patient's responsibility to follow up on.
 - > Advised to f/u with the clinic if there are any changes, worsening of condition, or any questions present.
 - > Patient was advised to schedule a follow-up appointment prior to leaving the office today
- M79.642: Pain in left hand
HAND SURGEON REFERRAL - Schedule Within: STAT Note to Provider: Concerns of bone marrow abnormality potential tumor of L hand from MRI
oxycodone 5 mg tablet - Take 1 tablet(s) every 8 hours by oral route as needed for 7 days. Qty: (21) tablet Refills: 0
Pharmacy: SAFEWAY PHARMACY #05-1644

3. Generalized anxiety disorder -
- > Feels anxiety is elevated due to pain, no real improvement in GAD when compared to last year
 - > Discussed talk therapy / SSRIs, patient declined
 - > Will update Vit D/B12 and given Chris reports he has been taking 50 mg of the hydroxyzine at night with good results, will send new Rx in
 - > ER precautions were reviewed in depth with patient
 - > All questions/concerns from the patient were addressed. Patient verbalized an understanding of the treatment plan, acceptance of the risks involved, verbalized an understanding that labs and referrals are the patient's responsibility to follow up on.
 - > Advised to f/u with the clinic if there are any changes, worsening of condition, or any questions present.
- F41.1: Generalized anxiety disorder
VITAMIN D, 25-HYDROXY-081950-P
VITAMIN B12-001503-P
hydroxyzine pamoate 50 mg capsule - Take 1 capsule(s) twice a day by oral route as needed for 30 days. Qty:
(60) capsule Refills: 1 Pharmacy: SAFEWAY PHARMACY #05-1644

4. Major depressive disorder -
- > Stable, improvement in PHQ9 when compared to last year
 - > Reports side effects have resolved w/ switching back to SR, he is not interested in adjust any meds today
 - ER precautions were reviewed in depth with patient
 - > All questions/concerns from the patient were addressed. Patient verbalized an understanding of the treatment plan, acceptance of the risks involved, verbalized an understanding that labs and referrals are the patient's responsibility to follow up on.
 - > Advised to f/u with the clinic if there are any changes, worsening of condition, or any questions present.
 - > Patient was advised to schedule a follow-up appointment prior to leaving the office today
- F32.9: Major depressive disorder, single episode, unspecified

5. Venereal disease screening -
- > Requesting STD screening
- Z11.3: Encounter for screening for infections with a predominantly sexual mode of transmission
HIV AB/P24 AG WITH REFLEX
RPR, RFX QN RPR/CONFIRM TP
CHLAMYDIA/GC AMPLIFICATION-183194-P
UA/M W/RFLX CULTURE, ROUTINE

6. Endocrine/metabolic screening -
- > Is agreeable
- Z13.228: Encounter for screening for other metabolic disorders
TSH REX ON ABNORMAL TO FREE T4
TRIIODOTHYRONINE (T3), FREE
HEMOGLOBIN A1C-001453-P

7. Body mass index 25-29 - overweight-
04.08.24-BMI: 27.9
- > Reviewed healthy dietary choices to include vegetables, lean meats, fruits, and avoiding processed foods.
 - > Encouraged regular exercise.
- Physical activity is anything that gets your body moving. Each week adults need 150 minutes of moderate-intensity physical activity and 2 days of muscle strengthening activity
- > Reviewed complications of obesity include heart disease,
- Type 2 (formerly non-insulin-dependent) diabetes mellitus, hypertension, stroke, certain types of cancer (endometrial, breast, prostate, colon), dyslipidemia, gallbladder disease, sleep apnea and other respiratory problems, reduced fertility, osteoarthritis, increase in all-cause mortality, & emotional distress
- Patient verbalized understanding and agreement with tx plan
- E66.3: Overweight
Z71.3: Dietary counseling and surveillance
Z71.82: Exercise counseling

PRITT, Christopher (id #37379, dob: 07/21/1972)

Z68.27: Body mass index [BMI] 27.0-27.9, adult

WHEN YOU ARE OVERWEIGHT: CARE INSTRUCTIONS

BODY MASS INDEX: CARE INSTRUCTIONS

8. Avascular necrosis of bone of hip-

> Stable, will provide refill

> ER precautions were reviewed in depth with patient

> All questions/concerns from the patient were addressed. Patient verbalized an understanding of the treatment plan, acceptance of the risks involved, verbalized an understanding that labs and referrals are the patient's responsibility to follow up on.

> Advised to f/u with the clinic if there are any changes, worsening of condition, or any questions present.

M87.859: Other osteonecrosis, unspecified femur

baclofen 10 mg tablet - Take 2 tabs in the morning, take 1 tablet at lunch, and 2 tablet in the evening AS NEEDED for muscle spasms/pain Qty: (180) tablet Refills: 1 Pharmacy: SAFEWAY PHARMACY #05-1644 Note to Pharmacy: Take 2 tabs in the morning, take 1 tablet at lunch, and 2 tablet in the evening AS NEEDED for muscle spasms/pain

9. Screening for malignant neoplasm of colon-

> Is agreeable

Z12.11: Encounter for screening for malignant neoplasm of colon

GASTROENTEROLOGIST REFERRAL - Schedule Within: provider's discretion

10. Hepatitis C screening -

> Hx of hep C, will check acute panel

Z11.59: Encounter for screening for other viral diseases

ACUTE HEPATITIS

11. Screening for malignant neoplasm of prostate

Is agreeable

Z12.5: Encounter for screening for malignant neoplasm of prostate

PSA TOTAL+% FREE

12. Depression screening -

PHQ-9 (14)

Z13.31: Encounter for screening for depression

13. Screening for mental disorders -

GAD (15)

Z13.89: Encounter for screening for other disorder

14. Screening for alcohol abuse -

Audit-C (4)

CAGE (0)

Z13.39: Encounter for screening examination for other mental health and behavioral disorders

15. Chews tobacco -

04.08.24- declines interventions

Z72.0: Tobacco use

F17.200: Nicotine dependence, unspecified, uncomplicated

Z71.6: Tobacco abuse counseling

16. Vaccine declined by patient -

04.08.24-Covid/Flu vaccine declined. TDap UTD

Z28.21: Immunization not carried out because of patient refusal

Patient Instructions

Discuss labs results prn. 150 minutes aerobic exercise per week, 2-3 day of gentle weight lifting per week. Eat a healthy diet, moderating your intake of sugar, starch, and simple carbohydrates with plenty of fruits, vegetables, whole grains, beans, nuts, and lean meats like chicken and fish. Eat breakfast every day, and limit soda and snacking. Try to drink 64-96 ounces of water each day. Make time for activities that allow you to decrease stress. 7-9 hours of sleep per night. Limit your alcohol intake to no more than 1 alcoholic drink per day.. Wear adequate sun protection while outdoors, use sun block with SPF > 30 protecting against both UVA and UVB rays. Wear your seat belt at all times when in a car. Wear a helmet while biking, using a motorcycle, skiing/snow boarding, skate/long boarding, etc. If you have a gun make sure it is locked up and stored unloaded away from children. Remember to check your smoke/carbon monoxide detectors. Follow-up yearly for your annual exams, self breast exam monthly. Remember to schedule your annual dental or eye exam if needed. Remember to review and discuss your advanced health care directive with your family and update your power of attorney if necessary. If you've never thought about end-of-life issues before, you may find the following form helpful: <http://coloradoadvancedirectives.com/wp-content/uploads/2014/07/14-MOST-Form-FINAL-2015.pdf>

Discussion Notes

I discussed all the findings and full differential with the patient. Together, with patient, a plan of care was discussed including lab

CENTER POINTE FAMILY MEDICINE is 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

orders, imaging tests, medications and/or referrals. RBD & SE associated with current meds and potential interactions with other meds patient is taking. Pt accepts risks, responsibilities and wishes to continue current medications. I answered all the patient's questions and they voiced understanding about their visit, the workup and plan of care. Any tests, labs or referrals ordered were fully explained and the patient agreed with the plan and wishes to proceed. Pt will follow up on results of any tests, labs or referrals ordered today. LabCorp is available on-site for your convenience. Although, you may choose any other lab facility to have labs completed. Pt advised and understands it is their responsibility to check with insurance for tests, labs and apt coverage. Pt understands it is ultimately their choice to follow thru with recommendations, labs, imaging, medications and/or referrals

Return to Office

to see KEENAN GRIEGO, AGNP for LAB RESULTS REVIEW at CASTLE ROCK 1 on or around 04/22/2024

KEENAN GRIEGO, AGNP for Virtual Visits - Telemedicine at CASTLE ROCK 1 on 04/29/2024 at 03:40 PM

Encounter Sign-Off

Encounter signed-off by KEENAN GRIEGO, AGNP, 04/08/2024.

Encounter performed and documented by KEENAN GRIEGO, AGNP

Encounter reviewed & signed by KEENAN GRIEGO, AGNP on 04/08/2024 at 5:06pm

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Encounter Date: 02/12/2024

Patient

Name	PRITT, CHRISTOPHER (51yo, M) ID# 40582	Appt. Date/Time	02/12/2024 03:00PM
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DOB	07/21/1972	Service Dept.	CASTLE ROCK 1
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Provider	KEENAN GRIEGO, AGNP
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Insurance	Med Primary: MEDICAID-CO (MEDICAID) Insurance # : D569133 Prescription: MAGELLAN-COLORADO MEDICAID - Member is eligible. details
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Chief Complaint

Right leg pain

Patient's Pharmacies

SAFEWAY PHARMACY #05-1644 (ERX): 7655 MCLAUGHLIN ROAD, FALCON, CO 80831, Ph (719) 495-7400, Fax (719) 495-7600

WALMART PHARMACY 4335 (ERX): 11550 MERIDIAN MARKET VIEW, FALCON, CO 80831, Ph (719) 522-2989, Fax (719) 522-2991

Vitals

Ht: 5 ft 9 in Standing
02/12/2024 02:44 pm

Wt: 182.4 lbs 02/12/2024
02:44 pm

BMI: 26.9 02/12/2024 02:44
pm

BP: 140/84 sitting L arm
02/12/2024 02:46 pm

Pulse: 82 bpm 02/12/2024
02:46 pm

O2Sat: 93% Room Air at
Rest 02/12/2024 02:46
pm

RR: 16 02/12/2024 02:46
pm

T: 98.2 F° temporal
artery 02/12/2024
02:45 pm

Pain Scale: 7 02/12/2024 02:46 pm

Measurements

None recorded.

Allergies

Reviewed Allergies

PENICILLINS, unable-to-assess criticality: - Reports he has always been told as a child he is allergic but is unsure what happens

Medications

CENTER POINTE FAMILY MEDICINE M 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Reviewed Medications

baclofen 10 mg tablet TAKE TWO TABLETS BY MOUTH EVERY MORNING. TAKE ONE TABLET BY MOUTH AT LUNCH AND TAKE 2 TABLET BY MOUTH IN THE EVENING AS NEEDED FOR MUSCLE SPASMS AND PAIN	02/08/24 filled
buPROPion HCL SR 150 mg tablet,12 hr sustained-release Take 1 tablet BY MOUTH twice a day	02/12/24 filled
docusate sodium 100 mg capsule	03/22/23 filled
ergocalciferol (vitamin D2) 1,250 mcg (50,000 unit) capsule TAKE ONE CAPSULE BY MOUTH WEEKLY	01/02/24 filled
gabapentin 800 mg tablet TAKE ONE TABLET BY MOUTH TWICE DAILY AS NEEDED	01/08/24 filled
hydrOXYzine pamoate 25 mg capsule TAKE ONE CAPSULE BY MOUTH TWICE DAILY AS NEEDED	02/12/24 filled
oxyCODONE 5 mg tablet Take 1 tablet BY MOUTH every 8 hours as needed for 7 days.	02/12/24 filled

Tylenol, Ibuprofen prn

Vaccines

Reviewed Vaccines

Vaccine Type	Date	Amt	Route	Site	NDC	Lot #	Mfr.	Exp. Date	VIS	VIS Given	Vaccinator
COVID-19											
COVID-19, mRNA, LNP-S, bivalent, PF-21901501 mcg/D.5 mL dose (Moderna)	02/07/23	0.5 mL	Intramuscular	Deltoid Left	80777028200523H22A		Moderna Inc.	US, 06/05/23	Moderna COVID-19 6+ EUA 10/12/2022	02/07/23	Linda James
COVID-19, mRNA, LNP-S, PF. 100 mcg/D.5 mL dose (Moderna)	04/05/23	0.5 mL				023C21A	Moderna Inc.	US.			
COVID-19, mRNA, LNP-S, PF, 100 mcg/D.5 mL dose (Moderna)	03/09/23	0.5 mL				003B21A	Moderna Inc.	US,			
Diphtheria Tetanus, Pertussis											
Tdap	12/10/10	0.5 mL	Intramuscular			3K44J	GlaxoSmithKline				
Tdap	07/21/13										
Zoster											
zoster recombinant	07/28/23	0.5 mL	Intramuscular			X9KC7	GlaxoSmithKline				

Problems

Reviewed Problems

Lipoma of skin and subcutaneous tissue of neck - Onset: 03/02/2023
Vitamin D deficiency - Onset: 04/18/2023 - > Advised to start Vit D3 3000IU daily, recheck in 3-6 months
Body mass index 30+ - obesity - Onset: 11/28/2023
Body mass index 25-29 - overweight - Onset: 01/18/2024
Major depressive disorder - Onset: 02/17/2023
Generalized anxiety disorder - Onset: 02/20/2023
Skin lesion - Onset: 02/19/2024
Osteoarthritis of hip - Onset: 03/09/2023
Cervical spondylosis - Onset: 03/08/2023
Avascular necrosis of bone of hip - Onset: 02/17/2023
Fitting procedure - Onset: 03/09/2023
Erythrocytosis - Onset: 04/18/2023

PRITT, Christopher (id #37379, dob: 07/21/1972)

Injury of finger - Onset: 01/18/2024, Left
Ex-smoker - Onset: 01/18/2024
Diet education - Onset: 04/13/2023
Exercises education, guidance, and counseling - Onset: 04/13/2023
Patient follow-up to return when and if necessary - Onset: 03/08/2023
Red blood cell count above reference range - Onset: 03/08/2023
Pain of left knee joint - Onset: 06/08/2023
Pain of left hip joint Onset: 10/11/2023
Pain of right knee joint - Onset: 11/28/2023
Pain in right hand - Onset: 11/28/2023
Pain of right shoulder joint - Onset: 11/28/2023
Chews tobacco - Onset: 01/18/2024

Family History

Reviewed Family History

Social History

Reviewed Social History

Activities of Daily Living

Are you able to care for yourself?: Yes
Are you blind or do you have difficulty seeing?: No
Are you deaf or do you have serious difficulty hearing?: No
Do you have difficulty concentrating, remembering or making decisions?: No
Do you have difficulty walking or climbing stairs?: No
Do you have difficulty dressing or bathing?: No
Do you have difficulty doing errands alone?: No

Substance Use

Do you or have you ever smoked tobacco?: Former smoker
Do you or have you ever used any other forms of tobacco or nicotine?: Yes
Do you or have you ever used e-cigarettes or vape?: Never used electronic cigarettes
Do you or have you ever used smokeless tobacco?: Currently chews tobacco (Notes: occasional)
What was the date of your most recent tobacco screening?: 02/12/2024
What is your level of alcohol consumption?: None
Do you use any illicit or recreational drugs?: No
What is your level of caffeine consumption?: Moderate (Notes: 1 cup of coffee/daily)

Education and Occupation

What is the highest grade or level of school you have completed or the highest degree you have received?: GED or equivalent

Home and Environment

Do you have any pets?: No
Do you have smoke and carbon monoxide detectors in your home?: Yes

Diet and Exercise

What type of diet are you following?: Regular (Notes: healthy)
What is your exercise level?: Occasional (Notes: PT)

Gender Identity and LGBTQ Identity

Gender identity: Identifies as Male

Surgical History

Reviewed Surgical History

Past Medical History

Reviewed Past Medical History

Acid Reflux (GERD): Y
Allergies: Y
Anxiety Disorder: Y
Depression: Y
Developmental or Behavioral Disorders: Y
Gout: Y
Head Injury/Concussion: Y
Headaches: Y
Headaches/Migraines: Y
High Cholesterol: Y
Hospitalizations: Y
Hypertension: Y
Hyperthyroidism: Y
Mental Disorder: Y
Mental Illness: Y
Muscle, Joint, or Bone Problems: Y
Obesity: Y
Seizures/Epilepsy: Y
Thyroid Problems: Y
Vision or Eye Problems: Y

CENTER POINTE FAMILY MEDICINE us 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Screening

None recorded.

HPI

Christopher presents to the office today with c/o Right Leg Pain X 5 days.

Chris is a very pleasant non-toxic 51 y/o male who presents today for a follow-up of R leg pain.

He reports walking on the ice, fell and slipped on Thursday. Reports landing more on his back. Current pain is 0/10 but can reach a 7/10 in his R knee. Reports shooting pain along the front /lateral aspect of his knee to his hip. Endorses some tingling and shooting pain. Reports pain has been enough to affect his PT services. Reports APAP and ibuprofen with no relief.

Reports that he was outside when his truck broke down, which resulted in him walking on the ice. He has some pain in his fingers. Reports sensation w/ palpation. He did not go to the ER for this.

He would like to go back to bupropion SR formulation instead of the XL formulation as the XL formulation causes him to feel jittery.

He denies chest pain, shortness of breath, palpitations, light headedness, or dizziness. Denies cough, wheezing, hemoptysis, or sleep apnea. Denies abdominal pain, vomiting, nausea, diarrhea, dyspepsia, GERD, incontinence, trouble urinating, hematuria, muscle aches, weakness, arthralgias/joint pain, back pain, or swelling in the extremities. Denies jaundice, rashes, loss of consciousness, numbness, seizures, headaches. Patient denies any other symptomatology and has verbalized provider has covered all concerns.

Med list, allergies reviewed with patient. Refill on bupropion. Chart review completed upon examination.

ROS

ROS as noted in the HPI

Physical Exam

Constitutional: General Appearance: overweight. Level of Distress: NAD. Ambulation: ambulating normally.

Psychiatric: Insight: good judgement. Mental Status: normal mood and affect and active and alert. Orientation: to time, place, and person. Memory: recent memory normal and remote memory normal.

Head: Head: normocephalic and atraumatic.

Lungs: Respiratory effort: no dyspnea. Percussion: no dullness, flatness, or hyperresonance. Auscultation: no wheezing, rales/crackles, or rhonchi and breath sounds normal, good air movement, and CTA except as noted.

Cardiovascular: Apical Impulse: not displaced. Heart Auscultation: normal S1 and S2; no murmurs, rubs, or gallops; and RRR. Neck vessels: no carotid bruits. Pulses including femoral / pedal: normal throughout.

Musculoskeletal: Motor Strength and Tone: normal tone and motor strength. Joints, Bones, and Muscles: tenderness (right knee). Extremities: no cyanosis, edema, or varicosities.

Neurologic: Gait and Station: normal gait and station. Cranial Nerves: grossly intact. Sensation: grossly intact. Coordination and Cerebellum: no tremor.

Skin: Inspection and palpation: no rash or jaundice and good turgor; Sensation present w/ palpation. Motor function WNL.

Assessment / Plan

1. Major depressive disorder -

- > Stable
- > Will switch to bupropion SR as XL formulation causes side effects
- > ER precautions were reviewed in depth with patient
- > All questions/concerns from the patient were addressed. Patient verbalized an understanding of the treatment plan, acceptance of the risks involved, verbalized an understanding that labs and referrals are the patient's responsibility to follow up on.
- > Advised to f/u with the clinic if there are any changes, worsening of condition, or any questions present.

Patient was advised to schedule a follow-up appointment prior to leaving the office today

F32.9: Major depressive disorder, single episode, unspecified

bupropion HCl SR 150 mg tablet, 12 hr sustained-release - Take 1 tablet(s) twice a day by oral route. Qty: (180) tablet

Refills: 0 Pharmacy: SAFEWAY PHARMACY #05-1644

hydroxyzine pamoate 25 mg capsule - To be submitted on or around 02/19/2024 Take 1 capsule(s) twice a day by oral route as needed for 90 days. Qty: (180) capsule Refills: 0 Pharmacy: SAFEWAY PHARMACY #05-1644

2. Pain of right knee joint-

- > Will check MRI given ongoing pain
- > APAP/ibuprofen ineffective for management
 - Will provide short course of oxycodone
- > CO PDMP reviewed, no concerns
- > The risks v benefits, side effects, drug to drug interactions based on patients current medication list was checked and reviewed

PRITT, Christopher (id #37379, dob: 07/21/1972)

using epocrates. These risks y benefits, adverse reactions, potential interactions were reviewed with the patient regarding oxycodone. The patient has read back the risks, black box warnings, side effects to the provider without error, has verbalized an understanding, and verbalized an acceptance of the risks. This explanation included common, serious, and long-term side effects. The patient has expressed a desire to move forward with therapy. They will follow-up in 2-4 weeks based on the instructions of the provider for a medication check. All questions/concerns were addressed and the patient has verbalized a full understanding.

> ER precautions were reviewed in depth with patient

All questions/concerns from the patient were addressed. Patient verbalized an understanding of the treatment plan, acceptance of the risks involved, verbalized an understanding that labs and referrals are the patient's responsibility to follow up on.

> Advised to f/u with the clinic if there are any changes, worsening of condition, or any questions present.

> Patient was advised to schedule a follow-up appointment prior to leaving the office today

M25.561: Pain in right knee

MRI, KNEE, W/O CONTRAST - Note to Imaging Facility: Hx of L hip replacement, screws

Side: RIGHT

Height (ft.): 5 ft 9 in

Is patient on blood thinners?: Prosthesis or Implant?:

N

Y

Weight (lbs): 182

oxycodone 5 mg tablet - Take 1 tablet(s) every 8 hours by oral route as needed for 7 days. Qty: (21) tablet Refills: 0
Pharmacy: SAFEWAY PHARMACY #05-1644

3. Skin lesion -

> Sensorimotor function preserved

No s/s of infection, mottling, or edema

> Advised to keep clean, dry

> ER precautions were reviewed in depth with patient

> All questions/concerns from the patient were addressed. Patient verbalized an understanding of the treatment plan, acceptance of the risks involved, verbalized an understanding that labs and referrals are the patient's responsibility to follow up on.

> Advised to f/u with the clinic if there are any changes, worsening of condition, or any questions present.

> Patient was advised to schedule a follow-up appointment prior to leaving the office today

> Patient was advised if he does not hear from derm within 1 weeks to follow back up with PCP office so referral will be handed to patient. Verbalized agreement.

L98.9: Disorder of the skin and subcutaneous tissue, unspecified

DERMATOLOGIST REFERRAL - Schedule Within: STAT

4. Body mass index 25-29 - overweight-

02.12.24-BMI 26.9

E66.3: Overweight

Z71.3: Dietary counseling and surveillance

Z71.82: Exercise counseling

Z68.26: Body mass index [BMI] 26.0-26.9, adult

5. Chews tobacco -

02.12.24-

Z72.0: Tobacco use

F17.200: Nicotine dependence, unspecified, uncomplicated

Z71.6: Tobacco abuse counseling

6. Vaccine declined by patient-

02.12.24-Flu vaccine declined. Covid UTD

Z28.21: Immunization not carried out because of patient refusal

Discussion Notes

I discussed all the findings and full differential with the patient. Together, with patient, a plan of care was discussed including lab orders, imaging tests, medications and/or referrals. RBD & SE associated with current meds and potential interactions with other meds patient is taking. The patient accepts risks, responsibilities and wishes to continue current medications. I answered all the patient's questions and they voiced understanding about their visit, the workup and plan of care. Any tests, labs or referrals ordered were fully explained and the patient agreed with the plan and wishes to proceed. Patient will follow up on results of any tests, labs or referrals ordered today. They verbalized an acceptance of risks and complications if they do not follow up with treatment plan as discussed with their provider. Lab Corp is available on-site for your convenience. Although, you may choose any other lab facility to have labs completed. Pt advised and understands it is their responsibility to check with insurance for tests, labs and apt coverage. Patient understands it is ultimately their choice to follow through with recommendations, labs, imaging, medications and/or referrals.

Return to Office

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

KEENAN GRIEGO, AGNP for FOLLOW UP SIMPLE at CASTLE ROCK 1 on 03/11/2024 at 03:40 PM

Encounter Sign-Off

Encounter signed-off by KEENAN GRIEGO, AGNP, 02/19/2024.

Encounter performed and documented by KEENAN GRIEGO, AGNP

Encounter reviewed & signed by KEENAN GRIEGO, AGNP on 02/19/2024 at 4:09pm

CENTER POINTE FAMILY MEDICINE sa 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Encounter Date: 01/18/2024

Patient

Name	PRITT, CHRISTOPHER (51yo, M) ID# 37379	Appt. Date/Time	01/18/2024 08:00AM
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DOB	07/21/1972	Service Dept.	NORTH OFFICE
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Provider	DANA DAWDY FNP
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Insurance	Med Primary: MEDICAID-CO (MEDICAID) Insurance # : D569133 Prescription: MAGELLAN-COLORADO MEDICAID - Member is eligible. details
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Chief Complaint

established patient

Patient's Pharmacies

SAFEWAY PHARMACY #05-1644 (ERX): 7655 MCLAUGHLIN ROAD, FALCON, CO 80831, Ph (719) 495-7400, Fax (719) 495-7600

WALMART PHARMACY 4335 (ERX): 11550 MERIDIAN MARKET VIEW, FALCON, CO 80831, Ph (719) 522-2989, Fax (719) 522-2991

Vitals

Ht: 5 ft 9 in 01/18/2024
07:49 am

Wt: 189 lbs With clothes
01/18/2024 07:52 am

BMI: 27.9 01/18/2024 07:52
am

BP: 136/82 sitting L arm
01/18/2024 07:53 am

Pulse: 93 bpm regular
01/18/2024 07:53 am

O2Sat: 92% Room Air at
Rest 01/18/2024 07:52
am

RR: 16 01/18/2024 07:52
am

T: 98.2 F° temporal
artery 01/18/2024
07:52 am

Measurements

None recorded.

Allergies

Reviewed Allergies

PENICILLINS, unable-to-assess criticality: - Reports he has always been told as a child he is allergic but is unsure what happens

Medications

CENTER POINTE FAMILY MEDICINE MI 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Reviewed Medications

baclofen 10 mg tablet TAKE ONE TABLET BY MOUTH FOUR TIMES DAILY	01/11/24 filled
buPROPion HCL XL 150 mg 24 hr tablet, extended release TAKE ONE TABLET BY MOUTH ONE TIME DAILY	11/07/23 filled
buPROPion HCL XL 300 mg 24 hr tablet, extended release TAKE ONE TABLET BY MOUTH ONE TIME DAILY	11/07/23 filled
cephALEXin 500 mg capsule Take 1 capsule(s) every 6 hours by oral route for 7 days.	01/18/24 prescribed
docusate sodium 100 mg capsule	03/22/23 filled
ergocalciferol (vitamin D2) 1,250 mcg (50,000 unit) capsule TAKE ONE CAPSULE BY MOUTH WEEKLY	01/02/24 filled
gabapentin 600 mg tablet TAKE ONE TABLET BY MOUTH TWICE DAILY AS NEEDED	01/18/24 renewed
gabapentin 800 mg tablet TAKE ONE TABLET BY MOUTH TWICE DAILY AS NEEDED	01/08/24 filled
hydrOXYzine pamoate 25 mg capsule take 1-2 capsules by mouth twice daily as needed for anxiety	11/07/23 filled
meloxicam 15 mg tablet TAKE ONE TABLET BY MOUTH ONE TIME DAILY	11/28/23 filled

Vaccines

Reviewed Vaccines

Vaccine Type	Date	Amt	Route	Site	NDC	Lot #	Mfr.	Exp. Date	VIS	VIS Given	Vaccinator
COVID-19											
COVID-19, mRNA, LNP-S, bivalent, 0.5 mL dose (Moderna)	07/23/23	0.5 mL	Intramuscular	Deltoid Left	8077702820623H22A	003B21A	Moderna US, Inc.	06/05/23	Moderna COVID-196+1 EUA	10/12/2022	Linda James
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	04/25/23	0.5 mL				023C21A	Moderna US, Inc.				
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	03/06/23	0.5 mL				003B21A	Moderna US, Inc.				
Diphtheria, Tetanus, Pertussis											
Tdap	12/10/17	0.5 mL	Intramuscular			3K44J	GlaxoSmithKline				
Tdap	07/21/13										
Zoster											
zoster recombinant	07/28/23	0.5 mL	Intramuscular			X9KC7	GlaxoSmithKine				

Problems

Reviewed Problems

Chews tobacco - Onset: 01/18/2024
Diet education - Onset: 04/13/2023
Fitting procedure - Onset: 03/09/2023

PRITT, Christopher (id #37379, dob: 07/21/1972)

Erythrocytosis - Onset: 04/18/2023
Pain of right shoulder joint - Onset: 11/28/2023
Body mass index 25-29 - overweight - Onset: 01/18/2024
Body mass index 30+ - obesity - Onset: 11/28/2023
Red blood cell count above reference range - Onset: 03/08/2023
Generalized anxiety disorder - Onset: 02/20/2023
Osteoarthritis of hip - Onset: 03/09/2023
Pain of left hip joint - Onset: 10/11/2023
Pain in right hand Onset: 11/28/2023
Vitamin D deficiency - Onset: 04/18/2023 - > Advised to start Vit D3 3000IU daily, recheck in 3-6 months
Major depressive disorder - Onset: 02/17/2023
Cervical spondylosis - Onset: 03/08/2023
Exercises education, guidance, and counseling - Onset: 04/13/2023
Avascular necrosis of bone of hip - Onset: 02/17/2023
Pain of right knee joint - Onset: 11/28/2023
Pain of left knee joint Onset: 06/08/2023
Injury of finger - Onset: 01/18/2024, Left
Ex-smoker - Onset: 01/18/2024
Patient follow-up to return when and if necessary - Onset: 03/08/2023
Lipoma of skin and subcutaneous tissue of neck - Onset: 03/02/2023

Family History

Family History not reviewed (last reviewed 03/08/2023)

Social History

Reviewed Social History

Activities of Daily Living

Are you able to care for yourself?: Yes
Are you blind or do you have difficulty seeing?: No
Are you deaf or do you have serious difficulty hearing?: No
Do you have difficulty concentrating, remembering or making decisions?: No
Do you have difficulty walking or climbing stairs?: No
Do you have difficulty dressing or bathing?: No
Do you have difficulty doing errands alone?: No

Substance Use

Do you or have you ever smoked tobacco?: Former smoker
Do you or have you ever used any other forms of tobacco or nicotine?: Yes
Do you or have you ever used e-cigarettes or vape?: Never used electronic cigarettes
Do you or have you ever used smokeless tobacco?: Currently chews tobacco (Notes: occasional)
What was the date of your most recent tobacco screening?: 01/18/2024
What is your level of alcohol consumption?: None
Do you use any illicit or recreational drugs?: No
What is your level of caffeine consumption?: Moderate (Notes: 1 cup of coffee/daily)

Education and Occupation

What is the highest grade or level of school you have completed or the highest degree you have received?: GED or equivalent

Home and Environment

Do you have any pets?: No
Do you have smoke and carbon monoxide detectors in your home?: Yes

Diet and Exercise

What type of diet are you following?: Regular (Notes: healthy)
What is your exercise level?: Occasional (Notes: PT)

Gender Identity and LGBTQ Identity

Gender identity: Identifies as Male

Surgical History

Surgical History not reviewed (last reviewed 04/13/2023)

Past Medical History

Past Medical History not reviewed (last reviewed 03/08/2023)

Acid Reflux (GERD): Y
Allergies: Y
Anxiety Disorder: Y
Depression: Y
Developmental or Behavioral Disorders: Y
Gout: Y
Head Injury/Concussion: Y
Headaches: Y
Headaches/Migraines: Y
High Cholesterol: Y
Hospitalizations: Y
Hypertension: Y
Hyperthyroidism: Y

CENTER POINTE FAMILY MEDICINE sit 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Mental Disorder: Y

Mental Illness: Y

Muscle, Joint, or Bone Problems: Y

Obesity: Y

Seizures/Epilepsy: Y

Thyroid Problems: Y

Vision or Eye Problems: Y

Screening

None recorded.

HPI

Chris presents W c/o pain and swelling of L index finger X 4-5 days after cutting it with a knife while working with insulation.

ROS

Patient reports myalgia (right hip). He reports pain and redness but reports no rash. He reports no significant weight change, good appetite, and no fever. He reports no eye pain and no blurry vision. He reports no sore throat and no hoarseness. He reports no chest pain and normal heart rate. He reports no cough and no chest tightness. He reports no difficulty swallowing and no abdominal pain. He reports no headache. He reports no depression and no anxiety.

Physical Exam

Constitutional: General Appearance: well-nourished and well-developed. Level of Distress: NAD.

Psychiatric: Orientation: to time, place, and person.

Eyes: Pupils: PERRLA. Sclerae: non-icteric.

ENMT: Oropharynx: no erythema or exudates and moist mucous membranes.

Lungs: Respiratory effort: no dyspnea. Auscultation: no wheezing, rales/crackles, or rhonchi and breath sounds normal.

Cardiovascular: Heart Auscultation: no murmurs, rubs, or gallops and RRR.

Musculoskeletal: Motor Strength and Tone: normal. Joints, Bones, and Muscles: normal movement of all extremities.

Neurologic: Gait and Station: normal gait. Cranial Nerves: grossly intact.

Skin: Inspection and palpation: good turgor, no jaundice, and lesion (left index finger puncture wound. swelling and erythema, slight yellow drainage noted). Nails: normal.

Assessment / Plan

Focused on issues in the HPI at this visit today. Pt will scheduled another apt for any additional concerns or issues to be addressed.

Advised to f/u with regular PCP

1. Puncture wound of finger - Left -

New Condition

Pt reports he cut himself with a scalpel knife working with insulation.

Tdap UTD 2017

-Use a gentle cleanser

-Use mild and unscented soap, like hibiclens

Use products without alcohol or a scent

Wash well and keep area clean and dry

RX: Keflex

RBD & SE associated with this med and potential interactions with other meds patient is taking. Pt accepts risks, responsibilities and wishes to continue medication.

S61.231A: Puncture wound without foreign body of left index finger without damage to nail, initial encounter

cephalexin 500 mg capsule - Take 1 capsule(s) every 6 hours by oral route for 7 days. Qty: (28) capsule Refills: 0

Pharmacy: SAFEWAY PHARMACY #05-1644

2. Pain in right hip joint-

Focused on issues in the HPI at this visit today. Pt will schedule another apt for any additional concerns or issues to be addressed including his right hip issues. Advised to f/u with regular PCP.

Pt reports this is getting bad and wants this included in his treatments.

He reports the weather has not helped his pain.

Pt reports he is already in PT and they are working with his hip. He reports he has had Xrays, I am unclear what he is wanting in regards to his hip pain today.

Will inform PCP of his concerns.

M25.551: Pain in right hip

3. Vaccine declined by patient-Declines Covid vaccine

CENTER POINTE FAMILY MEDICINE a 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Declines Flu Vaccine

Z28.21: Immunization not carried out because of patient refusal

4. Tobacco non-user

Z13.89: Encounter for screening for other disorder

5. Body mass index 25-29 - overweight-

BMI: 27.9

E66.3: Overweight

Z71.3: Dietary counseling and surveillance

Z71.82: Exercise counseling

Z68.27: Body mass index [BMI] 27.0-27.9, adult

LEARNING ABOUT HEALTHY WEIGHT
WHEN YOU ARE OVERWEIGHT: CARE INSTRUCTIONS
A HEALTHY LIFESTYLE CARE INSTRUCTIONS

Discussion Notes

I discussed all the findings and full differential with the patient. Together, with patient, a plan of care was discussed including lab orders, imaging tests, medications and/or referrals. RBD & SE associated with current meds and potential interactions with other meds patient is taking. Pt accepts risks, responsibilities and wishes to continue current medications. I answered all the patients' questions and the patient voiced understanding about their visit, the workup and plan of care. Any tests, labs or referrals ordered were fully explained and the patient agreed with the plan and wishes to proceed. Pt will follow up on results of any tests, labs or referrals ordered today. LabCorp is available on-site for your convenience. Although, you may choose any other lab facility to have labs completed. Pt advised and understands it is their responsibility to check with insurance for tests, labs and apt coverage. Pt understands it is ultimately the patients' choice to follow through with recommendations, labs, imaging, medications and/or referrals.

Return to Office

SUSAN FOLEY, FNP for PHYSICAL at NORTH OFFICE on 02/19/2024 at 04:20 PM

Encounter Sign-Off

Encounter signed-off by Dana Dawdy FNP, 01/18/2024.

Encounter performed and documented by Dana Dawdy FNP

Encounter reviewed & signed by Dana Dawdy FNP on 01/18/2024 at 1:55pm

CENTER POINTE FAMILY MEDICINE sit 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Encounter Date: 11/28/2023

Patient

Name	PRITT, CHRISTOPHER (51yo, M) ID# 37379	Appt. Date/Time	11/28/2023 03:00PM
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DOB	07/21/1972	Service Dept.	NORTH OFFICE
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Provider	SUSAN FOLEY, FNP
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Insurance	Med Primary: MEDICAID-CO (MEDICAID) Insurance # : D569133 Prescription: MAGELLAN-COLORADO MEDICAID - Member is eligible. details
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Chief Complaint

Right knee pain, Right shoulder pain

Patient's Pharmacies

SAFEWAY PHARMACY #05-1644 (ERX): 7655 MCLAUGHLIN ROAD, FALCON, CO 80831, Ph (719) 495-7400, Fax (719) 495-7600

WALMART PHARMACY 4335 (ERX): 11550 MERIDIAN MARKET VIEW, FALCON, CO 80831, Ph (719) 522-2989, Fax (719) 522-2991

Vitals

Ht: 5 ft 9 in 11/28/2023
02:59 pm

Wt: 190 lbs With clothes
11/28/2023 02:59 pm

BMI: 28.1 11/28/2023 02:59
pm

BP: 136/86 sitting L arm
11/28/2023 03:01 pm

Pulse: 92 bpm regular
11/28/2023 03:00 pm

O2Sat: 98% Room Air at
Rest 11/28/2023 03:00
pm

RR: 16 11/28/2023 03:01
pm

T: 98,6 F° 11/28/2023
03:00 pm

Measurements

None recorded.

Allergies

Allergies not reviewed (last reviewed 04/13/2023)

PENICILLINS, unable-to-assess criticality: - Reports he has always been told as a child he is allergic but is unsure what happens

Medications

CENTER POINTE FAMILY MEDICINE sa 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Reviewed Medications

baclofen 10 mg tablet Take 2 tablets by mouth in the morning, take 1 tablet at lunch, and 2 tablet in the evening AS NEEDED for muscle spasms/pain	11/15/23 filled
buPROPion HCL XL 150 mg 24 hr tablet, extended release TAKE ONE TABLET BY MOUTH ONE TIME DAILY	11/07/23 filled
buPROPion HCL XL 300 mg 24 hr tablet, extended release TAKE ONE TABLET BY MOUTH ONE TIME DAILY	11/07/23 filled
docusate sodium 100 mg capsule	03/22/23 filled
ergocalciferol (vitamin D2) 1,250 mcg (50,000 unit) capsule TAKE ONE CAPSULE BY MOUTH WEEKLY	10/11/23 filled
gabapentin 800 mg tablet TAKE ONE TABLET BY MOUTH TWICE DAILY AS NEEDED	11/30/23 auth requested
hydrOXYzine pamoate 25 mg capsule take 1-2 capsules by mouth twice daily as needed for anxiety	11/07/23 filled
meloxicam 15 mg tablet Take 1 tablet(s) every day by oral route for 30 days.	11/28/23 prescribed

Vaccines

Vaccines not reviewed (last reviewed 03/08/2023)

Vaccine Type	Date	Amt	Route	Site	NDC	Lot #	Mfr.	Exp. Date	VIS	VIS Given	Vaccinator
COVID-19											
COVID-19, mRNA, LNP-S, bivalent, PF-21901501 mcg/D.5 mL dose (Moderna)	07/23/23	0.5 mL	Intramuscular	Deltoid Left	8077702820623H22A	023C21A	Moderna US, Inc.	06/05/23	Moderna COVID-19 6+ EUA 10/12/2022	02/07/23	Linda James
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	04/28/23	0.5 mL				023C21A	Moderna US, Inc.				
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	03/06/23	0.5 mL				003B21A	Moderna US, Inc.				
Diphtheria, Tetanus, Pertussis											
Tdap	12/10/17	0.5 mL	Intramuscular			3K44J	GlaxoSmithKline				
Tdap	07/21/13										
Zostavax											
zoster recombinant	07/28/23	0.5 mL	Intramuscular			X9KC7	GlaxoSmithKline				

Problems

Reviewed Problems

Lipoma of skin and subcutaneous tissue of neck - Onset: 03/02/2023
Vitamin D deficiency - Onset: 04/18/2023 - > Advised to start Vit D3 3000IU daily, recheck in 3-6 months
Body mass index 30+ - obesity - Onset: 11/28/2023
Body mass index 25-29 - overweight - Onset: 12/03/2023
Major depressive disorder - Onset: 02/17/2023
Generalized anxiety disorder - Onset: 02/20/2023
Osteoarthritis of hip - Onset: 03/09/2023
Cervical spondylosis - Onset: 03/08/2023
Avascular necrosis of bone of hip - Onset: 02/17/2023
Fitting procedure - Onset: 03/09/2023
Erythrocytosis - Onset: 04/18/2023

CENTER POINTE FAMILY MEDICINE sa 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Ex-smoker - Onset: 11/28/2023
Diet education - Onset: 04/13/2023
Exercises education, guidance, and counseling - Onset: 04/13/2023
Patient follow-up to return when and if necessary - Onset: 03/08/2023
Red blood cell count above reference range - Onset: 03/08/2023
Pain of left knee joint - Onset: 06/08/2023
Pain of left hip joint - Onset: 10/11/2023
Pain of right knee joint - Onset: 11/28/2023
Pain in right hand Onset: 11/28/2023
Pain of right shoulder joint - Onset: 11/28/2023

Family History

Family History not reviewed (last reviewed 03/08/2023)

Social History

Reviewed Social History
Activities of Daily Living
Are you able to care for yourself?: Yes
Are you blind or do you have difficulty seeing?: No
Are you deaf or do you have serious difficulty hearing?: No
Do you have difficulty concentrating, remembering or making decisions?: No
Do you have difficulty walking or climbing stairs?: No
Do you have difficulty dressing or bathing?: No
Do you have difficulty doing errands alone?: No
Substance Use
Do you or have you ever smoked tobacco?: Former smoker
Do you or have you ever used any other forms of tobacco or nicotine?: Yes
Do you or have you ever used e-cigarettes or vape?: Never used electronic cigarettes
Do you or have you ever used smokeless tobacco?: Currently chews tobacco (Notes: occasional)
What was the date of your most recent tobacco screening?: 11/28/2023
What is your level of alcohol consumption?: None
Do you use any illicit or recreational drugs?: No
What is your level of caffeine consumption?: Moderate (Notes: 1 cup of coffee/daily)
Education and Occupation
What is the highest grade or level of school you have completed or the highest degree you have received?: GED or equivalent
Home and Environment
Do you have any pets?: No
Do you have smoke and carbon monoxide detectors in your home?: Yes
Diet and Exercise
What type of diet are you following?: Regular (Notes: healthy)
What is your exercise level?: Occasional (Notes: PT)
Gender Identity and LGBTQ Identity
Gender identity: Identifies as Male

Surgical History

Surgical History not reviewed (last reviewed 04/13/2023)

Past Medical History

Past Medical History not reviewed (last reviewed 03/08/2023)
Acid Reflux (GERD): Y
Allergies: Y
Anxiety Disorder: Y
Depression: Y
Developmental or Behavioral Disorders: Y
Gout: Y
Head Injury/Concussion: Y
Headaches: Y
Headaches/Migraines: Y
High Cholesterol: Y
Hospitalizations: Y
Hypertension: Y
Hyperthyroidism: Y
Mental Disorder: Y
Mental Illness: Y
Muscle, Joint, or Bone Problems: Y
Obesity: Y
Seizures/Epilepsy: Y
Thyroid Problems: Y
Vision or Eye Problems: Y

Screening

None recorded.

HPI

Chris is here with c/o persistent R knee and shoulder/hand pain. This patient is previously unknown to this provider.

Right knee pain ongoing for years. Started noticing it getting worse over the past few months. Minor swelling, pain worse with standing up or crouching/flexing the leg. Patient had left hip surgery recently which has corrected a chronically antalgic gait which likely has contributed to his knee pain. Denies any acute injury, redness, or heat when he has the swelling.

Right Hand pain in the morning with stiffness. Improves throughout the day. Has history of several fractures to the right hand. Obvious deformity that is chronic. Denies swelling or heat.

Right shoulder pain. Worse in the morning with stiffness, improves throughout the day. lateral abduction causes increased pain but is generally worse with any movement. On baclofen chronically for back issues. Also on gabapentin. Has not been taking any anti-inflammatories.

ROS

ROS as noted in the HPI

Physical Exam

Constitutional: General Appearance: overweight. Level of Distress: NAD. Ambulation: ambulating normally.

Psychiatric: Insight: good judgement. Mental Status: normal mood and affect and active and alert.

Head: Head: normocephalic and atraumatic.

Eyes: EOM: EOMI. Lens: clear. Sclerae: non-icteric. Vision: peripheral vision grossly intact and acuity grossly intact.

ENMT: Hearing: no hearing loss. Nose: no lesions on external nose and nares patent. Oropharynx: moist mucous membranes.

Lungs: Respiratory effort: no dyspnea.

Musculoskeletal:: Motor Strength and Tone: normal tone and motor strength. Joints, Bones, and Muscles: limited ROM (Pain limits movement of the right shoulder.), bony deformity (right hand), and tenderness (right knee and right shoulder at the lateral aspect.). Extremities: no cyanosis, edema, or varicosities.

Neurologic: Gait and Station: normal gait and station. Cranial Nerves: grossly intact. Sensation: grossly intact. Coordination and Cerebellum: no tremor.

Skin: Inspection and palpation: no rash.

Assessment / Plan

1. Pain of right knee joint-

Suspect arthritic changes with stiffness and increased pain in the morning. Will get XR and trial PT. Will get MRI if conservative measures fail. Also starting meloxicam daily. Discussed RBSE and patient agrees with this plan.

M25.561: Pain in right knee

XR, KNEE, 3 VIEW - Note to Imaging Facility: Chronic knee pain with worsening lately.

Side:

RIGHT

meloxicam 15 mg tablet - To be submitted on or around 12/03/2023 Take 1 tablet(s) every day by oral route for 30 days.

Qty: (30) tablet Refills: 1 Pharmacy: SAFEWAY PHARMACY #05-1644

PHYSICAL THERAPIST REFERRAL - Schedule Within: provider's discretion Note to Provider: Pain in right knee, right hand, and right shoulder. Chronic with worsening lately. Recent history of left hip surgery and has likely been compensating with overuse of the right side. Please evaluate and treat. XR are pending.

2. Pain in right hand -

Suspect arthritic changes with stiffness and increased pain in the morning. Will get XR and trial PT. Will get MRI if conservative measures fail. Also starting meloxicam daily.

M79.641: Pain in right hand

XR, HAND, 3 OR MORE VIEW - Note to Imaging Facility: History of two fractures to the right hand with chronic pain.

Side:

RIGHT

3. Pain of right shoulder joint-

Suspect arthritic changes with stiffness and increased pain in the morning. Will get XR and trial PT. Will get MRI if conservative measures fail. Also starting meloxicam daily.

M25.511: Pain in right shoulder

XR, SHOULDER, 2 OR MORE VIEW - Note to Imaging Facility: Chronic right shoulder pain, worsening lately.

Side:

RIGHT

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

4. Body mass index 25-29 - overweight-

BMI: 28.1

Recommend 5 - half-cup servings of fruits and vegetables daily, lean protein with every meal, reducing simple carbohydrates (including white rice, pasta, breads, corn, and potatoes), sugars and sweets, and sweetened drinks.

Recommend 30 minutes of moderate activity that raises the heart rate and keeps it up for 20-25 minutes 5 days a week, or 150 minutes of exercise per week. Including some resistance/strength training is also recommended.

E66.3: Overweight

Z71.3: Dietary counseling and surveillance

Z71.82: Exercise counseling

Z68.28: Body mass index [BMI] 28.0-28.9, adult

LEARNING ABOUT HEALTHY WEIGHT

WHEN YOU ARE OVERWEIGHT: CARE INSTRUCTIONS

A HEALTHY LIFESTYLE CARE INSTRUCTIONS

Discussion Notes

I discussed all the findings and full differential with the patient. Together, with patient, a plan of care was discussed including lab orders, imaging tests, medications and/or referrals. RBD & SE associated with current meds and potential interactions with other meds patient is taking. Pt accepts risks, responsibilities and wishes to continue current medications. | answered all the patients questions and they voiced understanding about their visit, the workup and plan of care. Any tests, labs or referrals ordered were fully explained and the patient agreed with the plan and wishes to proceed. Pt will follow up on results of any tests, labs or referrals ordered today. LabCorp is available on-site for your convenience. Although, you may choose any other lab facility to have labs completed. Pt advised and understands it is their responsibility to check with insurance for tests, labs and apt coverage. Pt understands it is ultimately their choice to follow through with recommendations, labs, imaging, medications and/or referrals.

Return to Office

KEENAN GRIEGO, NP for FOLLOW UP SIMPLE at NORTH OFFICE on 12/08/2023 at 11:40 AM
to see KEENAN GRIEGO, NP for PHYSICAL at NORTH OFFICE on or around 02/17/2024

Encounter Sign-Off

Encounter signed-off by SUSAN FOLEY, FNP, 12/03/2023.

Encounter performed and documented by SUSAN GULYA FNP

Encounter reviewed & signed by SUSAN GULYA FNP on 12/03/2023 at 10:11pm

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Encounter Date: 10/11/2023

Patient

Name	PRITT, CHRISTOPHER (51yo, M) ID# 37379	Appt. Date/Time	10/11/2023 11:20AM
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DOB	07/21/1972	Service Dept.	NORTH OFFICE
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Provider	KEENAN GRIEGO, NP
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Insurance	Med Primary: MEDICAID-CO (MEDICAID) Insurance # : D569133 Prescription: MAGELLAN-COLORADO MEDICAID - Member is eligible. details
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Chief Complaint

Patient Requesting Referral

Patient's Pharmacies

SAFEWAY PHARMACY #05-1644 (ERX): 7655 MCLAUGHLIN ROAD, FALCON, CO 80831, Ph (719) 495-7400, Fax (719) 495-7600

WALMART PHARMACY 4335 (ERX): 11550 MERIDIAN MARKET VIEW, FALCON, CO 80831, Ph (719) 522-2989, Fax (719) 522-2991

Vitals

Ht: 5 ft 9 in 10/11/2023
11:18 am

Wt: 208 lbs With clothes
10/11/2023 11:18 am

BMI: 30.7 10/11/2023 11:18
am

BP: 126/82 L arm
10/11/2023 11:39 am

Pulse: 96 bpm regular
10/11/2023 11:39 am

O2Sat: 95% Room Air at
Rest 10/11/2023 11:19
am

RR: 16 10/11/2023 11:19
am

T: 98 F° temporal artery
10/11/2023 11:19 am

Measurements

None recorded.

Allergies

Allergies not reviewed (last reviewed 04/13/2023)

PENICILLINS, unable-to-assess criticality: - Reports he has always been told as a child he is allergic but is unsure what happens

Medications

PRITT, Christopher (id #37379, dob: 07/21/1972)

Reviewed Medications

baclofen 10 mg tablet 10/11/23 prescribed
 Take 2 tabs in the morning, take 1 tablet at lunch, and 2 tablet in the evening AS NEEDED for muscle spasms/pain
 Note: Take 2 tabs in the morning, take 1 tablet at lunch, and 2 tablet in the evening AS NEEDED for muscle spasms/pain

buPROPion HCL SR 200 mg tablet, 1 12 hr sustained-release 10/01/23 filled
 TAKE ONE TABLET BY MOUTH TWICE DAILY

docusate sodium 100 mg capsule 03/22/23 filled

gabapentin 800 mg tablet 10/11/23 prescribed
 Take 1 tablet(s) twice a day by oral route as needed for 90 days.

hydrOXYzine pamoate 25 mg capsule 07/28/23 filled
 TAKE 1 TO 2 CAPSULES BY MOUTH DAILY AS NEEDED FOR ANXIETY

Vitamin D2 1,250 mcg (50,000 unit) capsule 10/11/23 prescribed
 Take 1 capsule(s) every week by oral route for 90 days.

Vaccines

Vaccines not reviewed (last reviewed 03/08/2023)

Vaccine Type	Date	Amt.	Route	Site	NDC	Lot #	Mfr.	Exp. Date	VIS	VIS Given	Vaccinator
COVID-19											
COVID-19, mRNA, LNP-S, bivalent, PF-21901501/20.5 mcg/0.5 mL dose (Moderna)	07/21/23	0.5 mL	Intramuscular	Deltoid Left	8077702820323H22A	0323H22A	Moderna Inc.	US, 06/05/23	Moderna COVID-19 6+ EUA 10/12/2022	10/07/23	Linda James
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	07/21/23	0.5 mL				023C21A	Moderna Inc.	US,			
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	07/21/23	0.5 mL				003B21A	Moderna Inc.	US,			
Diphtheria, Tetanus, Pertussis											
Tdap	12/10/10	0.5 mL	Intramuscular			3K44J	GlaxoSmithKline				
Tdap	07/21/13										
Zoster											
zoster recombinant	07/28/23	0.5 mL	Intramuscular			X9KC7	GlaxoSmithKline				

Problems

Reviewed Problems

Pain of left knee joint - Onset: 06/08/2023
 Pain of left hip joint - Onset: 10/11/2023
 Vitamin D deficiency - Onset: 04/18/2023 - > Advised to start Vit D3 3000IU daily, recheck in 3-6 months
 Erythrocytosis - Onset: 04/18/2023
 Exercises education, guidance, and counseling - Onset: 04/13/2023
 Fitting procedure - Onset: 03/09/2023
 Osteoarthritis of hip - Onset: 03/09/2023
 Diet education - Onset: 04/13/2023
 Red blood cell count above reference range - Onset: 03/08/2023
 Cervical spondylosis - Onset: 03/08/2023
 Generalized anxiety disorder - Onset: 02/20/2023
 Major depressive disorder - Onset: 02/17/2023
 Avascular necrosis of bone of hip - Onset: 02/17/2023
 Lipoma of skin and subcutaneous tissue of neck - Onset: 03/02/2023
 Body mass index 30+ - obesity - Onset: 10/11/2023
 Ex-smoker - Onset: 10/11/2023
 Patient follow-up to return when and if necessary - Onset: 03/08/2023

CENTER POINTE FAMILY MEDICINE sit 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Family History

Family History not reviewed (last reviewed 03/08/2023)

Social History

Reviewed Social History

Activities of Daily Living

Are you able to care for yourself?: Yes

Are you blind or do you have difficulty seeing?: No

Are you deaf or do you have serious difficulty hearing?: No

Do you have difficulty concentrating, remembering or making decisions?: No

Do you have difficulty walking or climbing stairs?: No

Do you have difficulty dressing or bathing?: No

Do you have difficulty doing errands alone?: No

Substance Use

Do you or have you ever smoked tobacco?: Former smoker

Do you or have you ever used any other forms of tobacco or nicotine?: Yes

Do you or have you ever used e-cigarettes or vape?: Never used electronic cigarettes

Do you or have you ever used smokeless tobacco?: Currently chews tobacco (Notes: occasional)

What was the date of your most recent tobacco screening?: 10/11/2023

What is your level of alcohol consumption?: None

Do you use any illicit or recreational drugs?: No

What is your level of caffeine consumption? Moderate (Notes: 1 cup of coffee/daily)

Education and Occupation

What is the highest grade or level of school you have completed or the highest degree you have received?: GED or equivalent

Home and Environment

Do you have any pets?: No

Do you have smoke and carbon monoxide detectors in your home?: Yes

Diet and Exercise

What type of diet are you following?: Regular (Notes: healthy)

What is your exercise level?: Occasional (Notes: PT)

Gender Identity and LGBTQ Identity

Gender identity: Identifies as Male

Surgical History

Surgical History not reviewed (last reviewed 04/13/2023)

Past Medical History

Past Medical History not reviewed (last reviewed 03/08/2023)

Acid Reflux (GERD): Y

Allergies: Y

Anxiety Disorder: Y

Depression: Y

Developmental or Behavioral Disorders: Y

Gout: Y

Head Injury/Concussion: Y

Headaches: Y

Headaches/Migraines: Y

High Cholesterol: Y

Hospitalizations: Y

Hypertension: Y

Hyperthyroidism: Y

Mental Disorder: Y

Mental Illness: Y

Muscle, Joint, or Bone Problems: Y

Obesity: Y

Seizures/Epilepsy: Y

Thyroid Problems: Y

Vision or Eye Problems: Y

Screening

None recorded.

HPI

Christopher is here requesting referral to neuro
wants to discuss increasing Baclofen and gabapentin

Chris is a very pleasant non-toxic 51 y/o male who presents today for a follow-up.

He is requesting to increase his gabapentin a bit. Since his procedure, he reports a lot of his pain has improved, but he still struggles w/ sharp/electric pain in his back/L hip. He has been well managed w/ gabapentin 600 mg PO BID but is struggling a bit. He would also like to increase the baclofen as well, taking 2 in the AM, 1 at lunch, and 2 in the PM. He reports he is still following with

PRITT, Christopher (id #37379, dob: 07/21/1972)

orthopedics up in Denver. He reports no systemic symptoms. Denies fevers, chills, or numbness. States that his pain is usually the worst after waking up in the AM. He reports moving more around the house, doing dishes, and vacuuming. He is currently living w/ his stepfather and is hoping to start looking for work somewhat soon. He has lost some weight as he is more mobile. He reports, "I don't eat nearly as much as I used to because I was bored."

He is requesting a referral to neurology. He reports a long history of concussions that were never evaluated at the time and he is part of a TBI program.

He reports that he continues to speak w/ his counselor every Tuesday. He is having a tough time as his mother recently passed away. He denies any SI/HI, plans or intent. Denies NSSI. He continues to follow w/ psychiatry who is managing his bupropion and hydroxyzine.

He would like a refill on his vitamin D.

He denies chest pain, shortness of breath, palpitations, light headedness, or dizziness. Denies cough, wheezing, hemoptysis, or sleep apnea. Denies abdominal pain, vomiting, nausea, diarrhea, dyspepsia, GERD, incontinence, trouble urinating, hematuria, muscle aches, weakness, or swelling in the extremities. Denies jaundice, rashes, loss of consciousness, numbness, seizures, headaches. Patient denies any other symptomatology and has verbalized provider has covered all concerns.

Med list, allergies reviewed with patient. Denies need for refills. Chart review completed upon examination.

ROS

ROS as noted in the HPI

Physical Exam

Chaperone: Chaperone: offered and declined.

Constitutional: General Appearance: well-developed and obese. Level of Distress: NAD. Ambulation: ambulating normally.

Psychiatric: Insight: good judgement. Mental Status: normal mood and affect and active and alert. Orientation: to time, place, and person. Memory: recent memory normal and remote memory normal.

Head: Head: normocephalic and atraumatic.

Lungs: Respiratory effort: no dyspnea. Auscultation: no wheezing, rales/crackles, or rhonchi and breath sounds normal, good air movement, and CTA except as noted.

Cardiovascular: Apical Impulse: not displaced. Heart Auscultation: normal S1 and S2; no murmurs, rubs, or gallops; and RRR. Neck vessels: no carotid bruits. Pulses including femoral pedal: normal throughout.

Musculoskeletal: Motor Strength and Tone: normal and normal tone. Joints, Bones, and Muscles: no contractures, malalignment, tenderness, or bony abnormalities and normal movement of all extremities. Extremities: no cyanosis, edema, varicosities, or palpable cord.

Neurologic: Gait and Station: normal gait and station. Coordination and Cerebellum: no tremor.

Skin: Inspection and palpation: no lesions, ulcer, induration, nodules, jaundice, or abnormal nevi and tattoo and good turgor. Nails: normal.

Back: Thoracolumbar Appearance: normal curvature.

Assessment / Plan

1. Pain of left hip joint-

- > Hx of avascular necrosis s/p surgical repair by Dr. Leiman
- > Will increase gabapentin to 900 mg PO BID and baclofen to 2 tabs in AM, 1 at lunch and 2 in PM for more pain control
- > The risks V benefits, side effects, drug to drug interactions based on patients current medication list was checked and reviewed using epocrates. These risks V benefits, adverse reactions, potential interactions were reviewed with the patient regarding gabapentin and baclofen. The patient has read back the risks, black box warnings, side effects to the provider without error, has verbalized an understanding, and verbalized an acceptance of the risks. The patient has expressed a desire to move forward with therapy. They will follow-up in 2-4 weeks based on the instructions of the provider for a medication check. All questions/concerns were addressed and the patient has verbalized a full understanding.
- > ER precautions were reviewed in depth with patient
- All questions/concerns from the patient were addressed. Patient verbalized an understanding of the treatment plan, acceptance of the risks involved, verbalized an understanding that labs and referrals are the patient's responsibility to follow up on.
- > Advised to f/u with the clinic if there are any changes, worsening of condition, or any questions present.
- > F/u in 1 month for med check, verbalized agreement

M25.552: Pain in left hip

gabapentin 800 mg tablet - Take 1 tablet(s) twice a day by oral route as needed for 90 days. Qty: (180) tablet Refills: 0

Pharmacy: SAFEWAY PHARMACY #05-1644

baclofen 10 mg tablet - Take 2 tabs in the morning, take 1 tablet at lunch, and 2 tablet in the evening AS NEEDED for muscle spasms/pain Qty: (180) tablet Refills: 1 Pharmacy: SAFEWAY PHARMACY #05-1644 Note to Pharmacy: Take 2 tabs in the morning, take 1 tablet at lunch, and 2 tablet in the evening AS NEEDED for muscle spasms/pain

PRITT, Christopher (id #37379, dob: 07/21/1972)

2. Vitamin D deficiency -

> 25 hydroxy vitamin d serum is much improved, continue supplementation

F/u labs in 3 months

> Ca++, alkaline phosphatase, electrolytes, BUN, Cr all WNL

> Encourage exercise, calcium PO intake with goals of maintaining levels 30-100

> Encouraged adequate calcium intake

> Reviewed complications of suboptimal Vit D levels

> All questions/concerns addressed, patient stated they would like to start supplementation and understands risks and benefits of medication therapy, patient verbalized understanding and agreement

E55.9: Vitamin D deficiency, unspecified

Vitamin D2 1,250 mcg (50,000 unit) capsule - Take 1 capsule(s) every week by oral route for 90 days.

Qty: (13) capsule

Refills: 1 Pharmacy: SAFEWAY PHARMACY #05-1644

VITAMIN D, 25-HYDROXY-081950-P - To be performed on or around 04/01/2024

3. Body mass index 30+ - obesity-

BMI: 30.7

> Will obtain hemoglobin A1c to screen for DM, lipids on another day as he is not fasting at this time

> Reviewed healthy dietary choices to include vegetables, lean meats, fruits, and avoiding processed foods.

> Encouraged regular exercise.

Physical activity is anything that gets your body moving. Each week adults need 150 minutes of moderate-intensity physical activity and 2 days of muscle strengthening activity

> Reviewed complications of obesity include heart disease,

Type 2 (formerly non-insulin-dependent) diabetes mellitus, hypertension, stroke, certain types of cancer (endometrial, breast, prostate, colon), dyslipidemia, gallbladder disease, sleep apnea and other respiratory problems, reduced fertility, osteoarthritis, increase in all-cause mortality, & emotional distress

Patient verbalized understanding and agreement with tx plan

Z71.3: Dietary counseling and surveillance

Z71.82: Exercise counseling

E66.09: Other obesity due to excess calories

Z68.30: Body mass index [BMI] 30.0-30.9, adult

Discussion Notes

| discussed all the findings and full differential with the patient. A plan of care was discussed with the patient, including lab orders, imaging tests, medications, and/or referrals. RBD & SE associated with current meds and potential interactions with other meds the patient is taking. Patient accepts risks and responsibilities and wishes to continue current medications. I answered all the patient's questions, and they voiced understanding about their visit, the workup, and the care plan. Any tests, labs, or referrals ordered were fully explained, and the patient agreed with the plan and wishes to proceed. Pt will follow up on the results of any tests, labs, or referrals ordered today. LabCorp is available on-site for your convenience. Although, you may choose any other lab facility to have labs completed. Pt advised and understands it is their responsibility to check with insurance for tests, labs, and apt coverage. Pt understands it is ultimately their choice to follow through with recommendations, labs, imaging, medications, and/or referrals

Return to Office

KEENAN GRIEGO, NP for FOLLOW UP SIMPLE at NORTH OFFICE on 12/08/2023 at 11:40 AM
to see KEENAN GRIEGO, NP for PHYSICAL at NORTH OFFICE on or around 02/17/2024

Encounter Sign-Off

Encounter signed-off by KEENAN GRIEGO, NP, 10/11/2023.

Encounter performed and documented by KEENAN GRIEGO, NP

Encounter reviewed & signed by KEENAN GRIEGO, NP on 10/11/2023 at 4:26pm

CENTER POINTE FAMILY MEDICINE 68 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Encounter Date: 06/08/2023

Patient

Name	PRITT, CHRISTOPHER (50yo, M) ID# 37379	Appt. Date/Time	06/08/2023 02:20PM
DOB	07/21/1972	Service Dept.	NORTH OFFICE
Provider	KEENAN GRIEGO, NP		
Insurance	Med Primary: MEDICAID-CO (MEDICAID) Insurance # : D569133 Prescription: MAGELLAN-COLORADO MEDICAID - Member is eligible. details		

Chief Complaint

Followup: Osteoarthritis of hip

Followup: Avascular necrosis of bone of hip

Patient's Pharmacies

SAFEWAY PHARMACY #05-1644 (ERX): 7655 MCLAUGHLIN ROAD, FALCON, CO 80831, Ph (719) 495-7400, Fax (719) 495-7600

WALMART PHARMACY 4335 (ERX): 11550 MERIDIAN MARKET VIEW, FALCON, CO 80831, Ph (719) 522-2989, Fax (719) 522-2991

Vitals

Ht: 5 ft 9 in 06/08/2023
01:50 pm

Wt: 220 lbs With clothes
06/08/2023 01:59 pm

BMI: 32.5 06/08/2023 01:59
pm

BP: 124/68 sitting L arm
06/08/2023 02:01 pm

Pulse: 100 bpm regular
06/08/2023 02:48 pm

O2Sat: 94% Room Air at
Rest 06/08/2023 02:00
pm

RR: 16 06/08/2023 01:59
pm

T: 97.8 F° temporal
artery 06/08/2023
01:59 pm

Measurements

None recorded.

Allergies

Allergies not reviewed (last reviewed 04/13/2023)

PENICILLINS, unable-to-assess criticality: - Reports he has always been told as a child he is allergic but is unsure what happens

Medications

PRITT, Christopher (id #37379, dob: 07/21/1972)

Reviewed Medications

<p>baclofen 10 mg tablet</p> <p>Take 2 tabs in the morning, take 1 tablet at lunch, and 1 tablet in the evening AS NEEDED for muscle spasms/pain</p> <p>Note: Take 1-2 tabs in the morning, take 1 tablet at lunch, and 1 tablet in the evening AS NEEDED for muscle spasms/pain</p>	06/08/23 prescribed
<p>buPROPion HCL SR 100 mg tablet, 12 hr sustained-release</p> <p>TAKE ONE TABLET BY MOUTH TWICE DAILY</p>	04/14/23 filled
<p>buPROPion HCL SR 200 mg tablet, 12 hr sustained-release</p> <p>TAKE ONE TABLET BY MOUTH TWICE DAILY</p>	05/16/23 filled
<p>celecoxib 200 mg capsule</p> <p>TAKE ONE CAPSULE BY MOUTH TWICE DAILY</p>	05/17/23 filled
<p>cholecalciferol (vitamin D3) 1,250 mcg (50,000 unit) capsule</p> <p>TAKE ONE CAPSULE BY MOUTH WEEKLY</p>	04/26/23 filled
<p>docusate sodium 100 mg capsule</p>	03/22/23 filled
<p>gabapentin 600 mg tablet</p> <p>Take 1 tablet(s) twice a day by oral route as needed for 60 days.</p>	06/08/23 prescribed
<p>naloxone 4 mg/actuation nasal spray</p> <p>For suspected opioid overdose, administer a single spray intranasally into 1 nostril, then seek emergency medical care. May repeat every 2-3 minutes if minimal or no response.</p>	05/18/23 filled
<p>ondansetron 4 mg disintegrating tablet</p> <p>DISSOLVE ONE TABLET IN MOUTH EVERY SIX HOURS AS NEEDED for nausea and vomiting</p>	05/17/23 filled
<p>oxyCODONE 5 mg tablet</p> <p>Take 1 tablet(s) every 8 hours by oral route as needed for 10 days.</p> <p>Note: Take for pain level > 7/10 and only if celecoxib is ineffective</p>	06/08/23 prescribed

Vaccines

Vaccines not reviewed (last reviewed 03/08/2023)

Vaccine Type	Date	Amt.	Route	Site	NDC	Lot #	Mfr.	Exp. Date	VIS	VIS Given	Vaccinator
COVID-19											
COVID-19, mRNA, LNP-S, bivalent, PF, 100 mcg/0.5 mL dose (Moderna)	07/23/23	0.5 mL	Intramuscular	Left	8077702820523H22A	023C21A	Moderna US, Inc.	06/05/23	Moderna COVID-196+ EUA	10/12/2022	Linda James
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	04/25/23	0.5 mL				023C21A	Moderna US, Inc.				
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	03/06/23	0.5 mL				003B21A	Moderna US, Inc.				
Diphtheria, Tetanus, Pertussis											
Tdap	12/10/10	0.5 mL	Intramuscular			3K44J	GlaxoSmithKline				
Tdap	07/21/13										

Problems

Reviewed Problems

CENTER POINTE FAMILY MEDICINE a 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Pain of left knee joint - Onset: 06/08/2023
Vitamin D deficiency - Onset: 04/18/2023 - > Advised to start Vit D3 3000IU daily, recheck in 3-6 months
Erythrocytosis - Onset: 04/18/2023
Exercises education, guidance, and counseling - Onset: 04/13/2023
Fitting procedure - Onset: 03/09/2023
Osteoarthritis of hip - Onset: 03/09/2023
Diet education - Onset: 04/13/2023
Red blood cell count raised - Onset: 03/08/2023
Cervical spondylosis - Onset: 03/08/2023
Generalized anxiety disorder - Onset: 02/20/2023
Major depressive disorder - Onset: 02/17/2023
Avascular necrosis of bone of hip - Onset: 02/17/2023
Lipoma of skin and subcutaneous tissue of neck - Onset: 03/02/2023
Body mass index 30+ - obesity - Onset: 06/08/2023
Ex-smoker - Onset: 06/08/2023
Obesity Onset: 04/13/2023
Patient follow-up to return when and if necessary - Onset: 03/08/2023

Family History

Family History not reviewed (last reviewed 03/08/2023)

Social History

Reviewed Social History
Education and Occupation
What is the highest grade or level of school you have completed or the highest degree you have received?: GED or equivalent
Activities of Daily Living
Are you able to care for yourself?: Yes
Are you blind or do you have difficulty seeing?: No
Are you deaf or do you have serious difficulty hearing?: No
Do you have difficulty concentrating, remembering or making decisions?: No
Do you have difficulty walking or climbing stairs?: No
Do you have difficulty dressing or bathing?: No
Do you have difficulty doing errands alone?: No
Diet and Exercise
What type of diet are you following?: Regular (Notes: healthy)
What is your exercise level?: Occasional (Notes: PT)
Home and Environment
Do you have any pets?: No
Do you have smoke and carbon monoxide detectors in your home?: Yes
Substance Use
Do you or have you ever smoked tobacco?: Former smoker
Do you or have you ever used any other forms of tobacco or nicotine?: No
What was the date of your most recent tobacco screening?: 06/08/2023
What is your level of alcohol consumption?: None
Do you use any illicit or recreational drugs?: No
What is your level of caffeine consumption?: Moderate (Notes: 1 cup of coffee/daily)
Gender Identity and LGBTQ Identity
Gender identity: Identifies as Male

Surgical History

Surgical History not reviewed (last reviewed 04/13/2023)

Past Medical History

Past Medical History not reviewed (last reviewed 03/08/2023)
Acid Reflux (GERD): Y
Allergies: Y
Anxiety Disorder: Y
Depression: Y
Developmental or Behavioral Disorders: Y
Gout: Y
Head Injury/Concussion: Y
Headaches: Y
Headaches/Migraines: Y
High Cholesterol: Y
Hospitalizations: Y
Hypertension: Y
Hyperthyroidism: Y
Mental Disorder: Y
Mental Illness: Y
Muscle, Joint, or Bone Problems: Y
Obesity: Y
Seizures/Epilepsy: Y

CENTER POINTE FAMILY MEDICINE a 37 WIDFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Thyroid Problems: Y

Vision or Eye Problems: Y

Documents for Discussion

Discussed the following documents:

ALBUMIN, SERUM OR PLASMA - 04/13/23

Result:

- ALBUMIN: 4.6

VITAMIN D, 25-HYDROXY, TOTAL, SERUM - 04/13/23

Result:

- VITAMIN D, 25-HYDROXY: 25.0 BELOW LOW NORMAL

BMP, SERUM OR PLASMA - 04/13/23

Results:

- GLUCOSE: 102 ABOVE HIGH NORMAL

- BUN: 14

- CREATININE: 1.20

- EGFR: 74

- BUN/CREATININE RATIO: 12

- SODIUM: 140

- POTASSIUM: 4.5

- CHLORIDE: 105

- CARBON DIOXIDE, TOTAL: 18 BELOW LOW NORMAL

- CALCIUM: 9.7

CBC W/ AUTO DIFF - 04/13/23

Results:

- WBC: 5.4

- RBC: 6.30 ABOVE HIGH NORMAL

- HEMOGLOBIN: 18.1 ABOVE HIGH NORMAL

- HEMATOCRIT: 52.6 ABOVE HIGH NORMAL

- MCV: 84

- MCH: 28.7

- MCHC: 34.4

- RDW: 14.1

- PLATELETS: 312

- NEUTROPHILS: 53

- LYMPHS: 37

- MONOCYTES: 7

- EOS: 1

- BASOS: 2

- IMMATURE CELLS: NP

- NEUTROPHILS (ABSOLUTE): 2.9

- LYMPHS (ABSOLUTE): 2.0

- MONOCYTES(ABSOLUTE): 0.4

- EOS (ABSOLUTE): 0.1

- BASO (ABSOLUTE): 0.1

- IMMATURE GRANULOCYTES: 0

- IMMATURE GRANS (ABS): 0.0

- NRBC: NP

- HEMATOLOGY COMMENTS:: NP

ELECTROCARDIOGRAM - 04/13/23

ORTHOPEDIC CONSULT NOTE - ERIC PORRITT MD - 05/26/23

Screening

None recorded.

HPI

Chris is here for follow up post op hip surgery; requests refills of Gabapentin and Baclofen

Chris is a very pleasant non-toxic 50 y/o male who presents today for a post-op visit.

He recently underwent a L hip conversion with neuroplasty and reports doing "so much better," since his surgery. He is still having some post-op pain but is doing well. He tolerated the procedure without complication and states, "My legs are the same length now." He has started physical therapy which is going well but is causing him some L knee pain and hip discomfort. He verbalizes, "It's probably because I've been in a wheelchair for the past 5 years." He does reports during the previous MVA, he did hit his knee on the dash and the impact is what pushed his L hip out of place.

He reports his current pain is 7/10 and that his gabapentin and baclofen help some. He was provided 5 days worth of oxycodone s/p surgery which lasted him up until this week. He verbalizes a strong desire to do therapy as he wants to continue to improve. He reports his hip pain has ranged between 3-6/10. He has had his sutures removed and denies any erythema or ecchymosis.

He reports that after the surgery, he was able to ambulate with a cane but since physical therapy began, he had to switch to using two canes due to his knee. He denies recent trauma or provocation other than physical therapy.

PRITT, Christopher (id #37379, dob: 07/21/1972)

He has not heard from neurology or GI. These referrals were printed off and provided directly to the patient with contact information so he can contact them.

He is doing well on his bupropion. He denies any seizure activity and reports overall, his mood has improved since the surgery.

He reports compliance with his Vit D supplementation.

He has not completed follow-up labs and will do so today, per patient.

Denies chest pain, shortness of breath, palpitations, light headedness, or dizziness. Denies cough, wheezing, hemoptysis, or sleep apnea. Denies abdominal pain, vomiting, nausea, diarrhea, dyspepsia, GERD, incontinence, trouble urinating, hematuria, muscle aches, weakness, arthralgias/joint pain, back pain, or swelling in the extremities. Denies abnormal mole, jaundice, rashes, loss of consciousness, numbness, seizures, dizziness, headaches. Denies fatigue, swollen glands, bruising, runny nose, itching, hives, or frequent sneezing.

ROS

ROS as noted in the HPI

Physical Exam

Chaperone: Chaperone: offered and declined.

Constitutional: General Appearance: well-developed and obese. Level of Distress: NAD. Ambulation: ambulation with cane; Improvement in gait

Psychiatric: Insight: good judgement. Mental Status: normal mood and affect and active and alert. Orientation: to time, place, and person. Memory: recent memory normal and remote memory normal.

Head: Head: normocephalic and atraumatic.

Lungs: Respiratory effort: no dyspnea. Percussion: no dullness, flatness, or hyperresonance. Auscultation: no wheezing, rales/crackles, or rhonchi and breath sounds normal, good air movement, and CTA except as noted.

Cardiovascular: Apical Impulse: not displaced. Heart Auscultation: normal S1 and S2; no murmurs, rubs, or gallops; and RRR. Neck vessels: no carotid bruits. Pulses including femoral / pedal: normal throughout.

Musculoskeletal: Motor Strength and Tone: normal and normal tone. Joints, Bones, and Muscles: no contractures, malalignment, tenderness, or bony abnormalities and normal movement of all extremities; Surgical site along L hip is clean, dry and intact. No ecchymosis or erythema identified. No s/s of cellulitis. Sutures have been removed.
(-) lachmann's/posterior, valgus/varus laxity.. Extremities: no cyanosis, edema, varicosities, or palpable cord.

Neurologic: Gait and Station: normal gait and station. Cranial Nerves: grossly intact. Sensation: grossly intact. Reflexes: DTRs 2+ bilaterally throughout. Coordination and Cerebellum: finger-to-nose intact and no tremor.

Skin: Inspection and palpation: no lesions, ulcer, induration, nodules, jaundice, or abnormal nevi and tattoo and good turgor. Nails: normal.

Back: Thoracolumbar Appearance: normal curvature.

Assessment / Plan

1. Avascular necrosis of bone of hip-

- > Overall vast improvement and is doing well s/p surgical intervention
Has f/u 7/26 with orthopedics, will request medical records
- > Strongly encouraged to continue PT, will refill oxycodone (ONE TIME) at this time to allow him to continue to do PT. Additional refills will need to come from orthopedics. Naloxone previously prescribed and patient reports he does have
- > Dosing will be decreased from what ortho provided and this provider reviewed in detail potential interactions with current medication regimen
- > Will discuss titration of baclofen and gabapentin at f/u visit as he is currently working with therapy
- > PDMP reviewed, no concerns
- > ER precautions were reviewed in depth with patient
- > All questions/concerns from the patient were addressed. Patient verbalized an understanding of the treatment plan, acceptance of the risks involved, verbalized an understanding that labs and referrals are the patient's responsibility to follow up on.
- > Advised to f/u with the clinic if there are any changes, worsening of condition, or any questions present.
- > Continue to follow ortho and PCP PRN, otherwise, f/u 6 months

M87.859: Other osteonecrosis, unspecified femur

baclofen 10 mg tablet - Take 2 tabs in the morning, take 1 tablet at lunch, and 1 tablet in the evening AS NEEDED for muscle spasms/pain Qty: (180) tablet Refills: 1 Pharmacy: SAFEWAY PHARMACY #05-1644 Note to Pharmacy: Take 1-2

tabs in the morning, take 1 tablet at lunch, and 1 tablet in the evening AS NEEDED for muscle spasms/pain

gabapentin 600 mg tablet - Take 1 tablet(s) twice a day by oral route as needed for 60 days. Qty: (120) tablet Refills:

0

Pharmacy: SAFEWAY PHARMACY #05-1644

oxycodone 5 mg tablet - To be submitted on or around 06/09/2023 Take 1 tablet(s) every 8 hours by oral route as needed for 10 days. Qty: (30) tablet Refills: 0 Pharmacy: SAFEWAY PHARMACY #05-1644

PRITT, Christopher (id #37379, dob: 07/21/1972)

2. Pain of left knee joint-

- > Suspect this is from physical therapy
 - > (-) Lachman's/posterior, no valgus/varus laxity
 - > Imaging to evaluate alignment, continue physical therapy, will provide analgesics, suspect from exercise, will provide adequate pain management so he may continue PT
 - > ER precautions were reviewed in depth with patient
 - > All questions/concerns from the patient were addressed. Patient verbalized an understanding of the treatment plan, acceptance of the risks involved, verbalized an understanding that labs and referrals are the patient's responsibility to follow up on.
 - > Advised to f/u with the clinic if there are any changes, worsening of condition, or any questions present.
- M25.562: Pain in left knee
XR, KNEE, 3 VIEW

3. Body mass index 30+ - obesity-

BMI: 33.7

- > Will obtain hemoglobin A1c to screen for DM, lipids on another day as he is not fasting at this time
- > Reviewed healthy dietary choices to include vegetables, lean meats, fruits, and avoiding processed foods.
- > Encouraged regular exercise.

Physical activity is anything that gets your body moving. Each week adults need 150 minutes of moderate-intensity physical activity and 2 days of muscle strengthening activity

- > Reviewed complications of obesity include heart disease,

Type 2 (formerly non-insulin-dependent) diabetes mellitus, hypertension, stroke, certain types of cancer (endometrial, breast, prostate, colon), dyslipidemia, gallbladder disease, sleep apnea and other respiratory problems, reduced fertility, osteoarthritis, increase in all-cause mortality, & emotional distress

- > Patient verbalized understanding and agreement with tx plan

Z71.3: Dietary counseling and surveillance

Z71.82: Exercise counseling

E66.09: Other obesity due to excess calories

Z68.33: Body mass index [BMI] 33.0-33.9, adult

Discussion Notes

I discussed all the findings and full differential with the patient. A plan of care was discussed with the patient, including lab orders, imaging tests, medications, and/or referrals. RBD & SE associated with current meds and potential interactions with other meds the patient is taking. Pt accepts risks and responsibilities and wishes to continue current medications. I answered all the patient's questions, and they voiced understanding about their visit, the workup, and the care plan. Any tests, labs, or referrals ordered were fully explained, and the patient agreed with the plan and wishes to proceed. Pt will follow up on the results of any tests, labs, or referrals ordered today. LabCorp is available on-site for your convenience. Although, you may choose any other lab facility to have labs completed. Pt advised and understands it is their responsibility to check with insurance for tests, labs, and apt coverage. Pt understands it is ultimately their choice to follow thru with recommendations, labs, imaging, medications, and/or referrals

Return to Office

to see KEENAN GRIEGO, NP for FOLLOW UP SIMPLE at NORTH OFFICE on or around 12/08/2023

to see KEENAN GRIEGO, NP for PHYSICAL at NORTH OFFICE on or around 02/17/2024

Encounter Sign-Off

Encounter signed-off by KEENAN GRIEGO, NP, 06/09/2023.

Encounter performed and documented by KEENAN GRIEGO, NP

Encounter reviewed & signed by KEENAN GRIEGO, NP on 06/09/2023 at 4:50pm

CENTER POINTE FAMILY MEDICINE sit 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Encounter Date: 04/13/2023

Patient

Name	PRITT, CHRISTOPHER (50yo, M) ID# 37379	Appt. Date/Time	04/13/2023 11:20AM
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DOB	07/21/1972	Service Dept.	NORTH OFFICE
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Provider	KEENAN GRIEGO, NP
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Insurance	Med Primary: MEDICAID-CO (MEDICAID) Insurance # : D569133 Prescription: MAGELLAN-COLORADO MEDICAID - Member is eligible. details
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Chief Complaint

pre-op evaluation

Patient's Pharmacies

SAFEWAY PHARMACY #05-1644 (ERX): 7655 MCLAUGHLIN ROAD, FALCON, CO 80831, Ph (719) 495-7400, Fax (719) 495-7600

WALMART PHARMACY 4335 (ERX): 11550 MERIDIAN MARKET VIEW, FALCON, CO 80831, Ph (719) 522-2989, Fax (719) 522-2991

Vitals

Ht: 5 ft 9 in 04/13/2023
11:03 am

Wt: 221 lbs With clothes
04/13/2023 11:10 am

BMI: 32,6 04/13/2023 11:10
am

BP: 116/70 sitting L arm
04/13/2023 11:11 am

Pulse: 90 bpm regular
04/13/2023 11:11 am

O2Sat: 92% Room Air at
Rest 04/13/2023 11:10
am

RR: 16 04/13/2023 11:10
am

T: 98.4 F° temporal
artery 04/13/2023
11:10 am

Measurements

None recorded.

Allergies

Reviewed Allergies

PENICILLINS, unable-to-assess criticality: - Reports he has always been told as a child he is allergic but is unsure what happens

Medications

PRITT, Christopher (id #37379, dob: 07/21/1972)

Reviewed Medications

baclofen 10 mg tablet 04/14/23 prescribed
Take 1 tablet(s) 3 times a day by oral route as needed for 30 days.
Note: Take 1-2 tabs in the morning, 1 tablet at lunch time, and may take 1 tablet before bed AS
NEEDED for muscle spasms/pain

buPROPion HCL SR 100 mg tablet, 12 hr sustained-release 03/21/23 filled
TAKE ONE TABLET BY MOUTH TWICE DAILY

docusate sodium 100 mg capsule 03/22/23 filled

gabapentin 300 mg capsule 04/02/23 filled
Take 1 capsule(s) twice a day by oral route as needed.

gabapentin 600 mg tablet 04/18/23 prescribed
Take 1 tablet(s) twice a day by oral route as needed for 60 days.

HYDROcodone 5 mg-acetaminophen 325 mg tablet 03/22/23 filled

Vaccines

Vaccines not reviewed (last reviewed 03/08/2023)

Vaccine Type	Date	Amt.	Route	Site	NDC	Lot #	Mfr.	Exp. Date	VIS	VIS Given	Vaccinator
COVID-19											
COVID-19, mRNA, LNP-S. bivalent, 0.5 mL dose (Moderna)	04/07/23	0.5 mL	Intramuscular	Deltoid Left	8077702820623H22A	023C21A	Moderna US, Inc.	06/05/23	Moderna COVID-19+ EUA 10/12/2022	02/07/23	Linda James
COVID-19, mRNA, LNP-S. PF, 100 mcg/0.5 mL dose (Moderna)	04/07/23	0.5 mL				023C21A	Moderna US, Inc.				
COVID-19, mRNA, LNP-S. PF, 100 mcg/0.5 mL dose (Moderna)	03/08/23	0.5 mL				003B21A	Moderna US, Inc.				
Diphtheria, Tetanus, Pertussis											
Tdap	12/10/10	0.5 mL	Intramuscular			3K44J	GlaxoSmithKline				
Tdap	07/21/13										

Problems

Reviewed Problems

Vitamin D deficiency - Onset: 04/18/2023 -> Advised to start Vit D3 3000IU daily, recheck in 3-6 months
Erythrocytosis - Onset: 04/18/2023
Exercises education, guidance, and counseling - Onset: 04/13/2023
Fitting procedure - Onset: 03/09/2023
Osteoarthritis of hip - Onset: 03/09/2023
Diet education - Onset: 04/13/2023
Red blood cell count raised - Onset: 03/08/2023
Cervical spondylosis - Onset: 03/08/2023
Generalized anxiety disorder - Onset: 02/20/2023
Major depressive disorder - Onset: 02/17/2023
Avascular necrosis of bone of hip - Onset: 02/17/2023
Lipoma of skin and subcutaneous tissue of neck - Onset: 03/02/2023
Body mass index 30+ - obesity - Onset: 04/13/2023
Ex-smoker - Onset: 04/13/2023
Obesity - Onset: 04/13/2023
Patient follow-up to return when and if necessary - Onset: 03/08/2023

Family History

Family History not reviewed (last reviewed 03/08/2023)

Social History

Reviewed Social History

CENTER POINTE FAMILY MEDICINE sil 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Education and Occupation

What is the highest grade or level of school you have completed or the highest degree you have received?: GED or equivalent

Activities of Daily Living

Are you able to care for yourself?: Yes

Are you blind or do you have difficulty seeing?: No

Are you deaf or do you have serious difficulty hearing? : No

Do you have difficulty concentrating, remembering or making decisions?: No

Do you have difficulty walking or climbing stairs?: No

Do you have difficulty dressing or bathing?: No

Do you have difficulty doing errands alone?: No

Diet and Exercise

What type of diet are you following?: Regular (Notes: healthy)

What is your exercise level?: Occasional (Notes: PT)

Home and Environment

Do you have any pets?: No

Do you have smoke and carbon monoxide detectors in your home?: Yes

Substance Use

Do you or have you ever smoked tobacco?: Former smoker

Do you or have you ever used any other forms of tobacco or nicotine?: No

What was the date of your most recent tobacco screening?: 04/13/2023

What is your level of alcohol consumption?: None

Do you use any illicit or recreational drugs?: No

What is your level of caffeine consumption?: Moderate (Notes: 1 cup of coffee/daily)

Gender Identity and LGBTQ Identity

Gender identity: Identifies as Male

Surgical History

Reviewed Surgical History

Past Medical History

Past Medical History not reviewed (last reviewed 03/08/2023)

Acid Reflux (GERD): Y

Allergies: Y

Anxiety Disorder: Y

Depression: Y

Developmental or Behavioral Disorders: Y

Gout: Y

Head Injury/Concussion: Y

Headaches: Y

Headaches/Migraines: Y

High Cholesterol: Y

Hospitalizations: Y

Hypertension: Y

Hyperthyroidism: Y

Mental Disorder: Y

Mental Illness: Y

Muscle, Joint, or Bone Problems: Y

Obesity: Y

Seizures/Epilepsy: Y

Thyroid Problems: Y

Vision or Eye Problems: Y

Documents for Discussion

Discussed the following documents:

Intra-procedure - Hospital Encounter - William Lechuga, Centura Health - 04/13/23

Screening

None recorded.

HPI

Christopher presents for pre-op clearance. Is having L hip replacement on 05/09/22

CHIEF COMPLAINT: L hip pain / previous avascular necrosis

HISTORY:

Christopher is a pleasant non-toxic 50-year-old here for a pre-op clearance. A L hip conversion + hardware removal with Dr. Lerman is planned for May 9th. Dr. Lerman has requested that the PCP provide a preoperative consultation and clearance before this procedure.

Since his last evaluation, he has seen general surgery and has had the lipoma on the posterior cervical neck removed without incident. He was provided general anesthesia without issues. He reports since then, his headaches have resolved and RoM of the neck has also improved. Denies any fevers/chills and reports healing well. Minimal serosanguinous drainage but nothing more.

PRITT, Christopher (id #37379, dob: 07/21/1972)

He has also been evaluated by psychiatry and was started on bupropion HCL SR 100 mg BID. He reports he has been on the medication for ~3 weeks and is starting to have an improvement in his anxiety/depression. He denies any further seizure activity or any side effects

He is requesting refills on his gabapentin and baclofen. He reports that the medications have been helpful. He reports that he has been having some ongoing neuropathic pain in the evenings and would like to increase his evening gabapentin.

PAST MEDICAL HISTORY: (verified with patient in office)

1. Avascular necrosis of bone of hip
2. Obesity
3. Cervical spondylosis
4. Former smoker
5. GAD
6. Lipoma of subcutaneous tissue
7. MDD
8. OA of the hip
9. Isolated seizures

PAST SURGICAL HISTORY: (verified with patient in office)

1. L hip repair
2. Lipoma excision
3. Tonsillectomy

Patient denies previous surgical or anesthetic complications. Include details of prior airway concerns or anesthetic records.

MEDICATIONS: - Verified with patient

1. Baclofen 20 mg in AM, 10 in afternoon, and 10 in PM
2. Gabapentin 800 mg in AM and 800 mg in PM
3. Bupropion HCL SR 100 mg PO BID
4. Docusate sodium 100 mg po qd
5. Norco 5-325 mg po q6h PRN

ALLERGIES: - verified with patient

1. Penicillins

SOCIAL HISTORY:

Denies smoking, alcohol use, or illicit drug use

FAMILY HISTORY: - verified with patient

Father: Unsure

Mother: Throat cancer (was smoker)

Denies family history of bleeding/clotting disorder

Denies any issues with anesthesia

REVIEW OF SYSTEMS:

- CONSTITUTIONAL Denies weight loss, muscle aches, fever, or chills.
- HEENT: Denies ear pain, facial pain, rhinorrhea, otorrhea, visual changes, hearing changes, or sore throat.
- RESPIRATORY: Denies SOB, wheezing, hemoptysis, or cough.
- CV: Denies palpitations and CP.
- GI: Denies abdominal pain, nausea, vomiting, melena, hematochezia, constipation, CVA tenderness or diarrhea.
- GU: Denies dysuria or urinary frequency.
- MSK: Lumbosacral back pain. Denies myalgia, decreased ROM of any joints, warm joints, or joint pain.
- SKIN: Denies rash, lesions, bleeding, or pruritus.
- NEUROLOGICAL: Denies headache, focal changes, numbness, tingling, or syncope.
- PSYCHIATRIC: Denies recent changes in mood. Denies anxiety, mania/hypomania, SI/HI, or depression.

FUNCTIONAL CAPACITY: Duke Activity Status Index Score: 21.95, limited to hip

ROS

ROS as noted in the HPI

Physical Exam

Chaperone: Chaperone: offered and declined.

Constitutional: General Appearance: well-developed and obese. Level of Distress: NAD. Ambulation: in wheelchair; Is able to ambulate. Very antalgic favoring L>R. Use of orthotic shoes..

Psychiatric: Insight: good judgement. Mental Status: normal mood and affect and active and alert. Orientation: to time, place, and person. Memory: recent memory normal and remote memory normal.

CENTER POINTE FAMILY MEDICINE is 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Head: Head: normocephalic and atraumatic.

Eyes: Lids and Conjunctivae: no discharge or pallor and non-injected. Pupils: PERRLA. Corneas: grossly intact. EOM: EOMI. Sclerae: non-icteric. Vision: peripheral vision grossly intact and acuity grossly intact.

ENMT: Ears: no lesions on external ear, EACs clear, TMs clear, and TM mobility normal. Hearing: no hearing loss. Nose: no lesions on external nose, septal deviation, sinus tenderness, or nasal discharge and nares patent. Lips, Teeth, and Gums: no mouth or lip ulcers or bleeding gums and poor dentition. Oropharynx: no erythema or exudates and moist mucous membranes and tonsils not enlarged.

Neck: Neck: supple, FROM, trachea midline, and no masses; Horizontal incision along posterior neck, no ecchymosis, erythema, or edema. No drainage. No s/s of infection. Nontender to palpation. Improved RoM of cervical spine. No lymphadenopathy.. Lymph Nodes: no cervical LAD, supraclavicular LAD, axillary LAD, or inguinal LAD. Thyroid: no enlargement or nodules and non-tender.

Lungs: Respiratory effort: no dyspnea. Percussion: no dullness, flatness, or hyperresonance. Auscultation: no wheezing, rales/crackles, or rhonchi and breath sounds normal, good air movement, and CTA except as noted.

Cardiovascular: Apical Impulse: not displaced. Heart Auscultation: normal S1 and S2; no murmurs, rubs, or gallops; and RRR. Neck vessels: no carotid bruits. Pulses including femoral / pedal: normal throughout.

Musculoskeletal:: Motor Strength and Tone: normal and normal tone. Joints, Bones, and Muscles: no contractures, malalignment, or tenderness and limited ROM and bony deformity; Limited ROM of L hip, well healed surgical scar, no erythema, bruising. Mild crepitus along flexion of L knee. CMS < 3 seconds.. Extremities: no cyanosis, edema, varicosities, or palpable cord.

Neurologic: Gait and Station: normal gait and station. Cranial Nerves: grossly intact. Sensation: grossly intact. Reflexes: DTRs 2+ bilaterally throughout. Coordination and Cerebellum: finger-to-nose intact and no tremor.

Skin: Inspection and palpation: no lesions, ulcer, induration, nodules, jaundice, or abnormal nevi and tattoo and good turgor. Nails: normal.

Back: Thoracolumbar Appearance: normal curvature.

Assessment Plan

1. Pre-surgery evaluation-

This patient is medically optimized for the planned surgery, see below for details. Case was discussed with Dr Abdulla.

1. CARDIAC EVALUATION - Physical examination reassuring

- Denies hx of personal cardiac issues or family history of cardiac issues

A. Revised Cardiac Risk Index Score: Points 0: Class | Very Low 3.9%, reviewed with patient. Reviewed with patient that no procedure is without risk and to have a conversation with surgery team. Verbalized understanding, acceptance, and wish to move forward.

B. Denies hx of arrhythmias, prosthetic valves, anticoagulation, or vascular dysfunction.

CHADS-VASC2 score: 0, reviewed with patient

C. No beta blocker use

D. No HTN medication use

E. Denies personal or family history of clotting/vascular disorders

F. ACS risk calculator reviewed with patient,

2. PULMONARY - Physical exam reassuring

A. Non-smoker, no inhaler, home O2 use. Physical exam reassuring, VSS, NAD. Does exercise as hip allows

B. OSA risk: STOP BANG score: 1, low risk

3. HEMATOLOGIC EVALUATION - Physical exam reassuring

A. Bleeding Risk: No personal or family hx of bleeding disorder per patient, H/H 17.6/50.0

B. VTE Prophylaxis/Thrombotic risk: Defer to surgeon

C. Anticoagulation management: Defer to surgeon

D. Anemia: Denies

D. Oncology: Denies

E. Erythrocytosis. Patient denies being a smoker. Will continue to work up (Sleep study, heme-chrome work-up outpatient, consider hematology evaluation)

F. Slightly hypercoag state

4. ENDOCRINE EVALUATION - Physical exam reassuring

A. Asymptomatic, no medication use. Reports healthy diet. No fam hx of DM.

5. RENAL EVALUATION - Physical exam reassuring

A. No evidence noted of CKD/AKI/electrolyte abnormalities on CMP. Physical exam reassuring

6. GI EVALUATION - Physical exam reassuring

A. No personal history of GI pathology. Physical exam reassuring.

PRITT, Christopher (id #37379, dob: 07/21/1972)

Christopher is a pleasant 50-year-old here for a pre-op clearance. AL hip conversion + hardware removal is planned with Dr. Lerman scheduled for May 9th. I have reviewed her PMHx, social hx, family hx, surgical hx, current medications, lab results as noted, and provided a physical examination. I see no medical reason that the patient cannot move forward with the planned surgery. He has verbalized an understanding of the procedure and reports she has spoken with her surgeon about risks V benefits. He reports all conservative measures have failed to improve his quality of life. He will follow up post-op in clinic to review the procedure and how progress is going. All questions/concerns have been addressed and patient has verbalized an understanding and desire to move forward. Forms has been filled out. Case was discussed with Dr. Abdulla.

Labs ordered per surgical team wishes. Will review labs and will notify patient of any concerns.

Z01.818: Encounter for other preprocedural examination

ELECTROCARDIOGRAM

Ordering provider to read?:	Number of leads:
Y	12

CBC WITH DIFFERENTIAL/PLATELET
BASIC METABOLIC PANEL (8)-322758-P
ALBUMIN
MRSA SCREENING CULTURE
VITAMIN D, 25-HYDROXY-081950-P

2. Avascular necrosis of bone of hip-

- > Patient reports he was referred by Dr. Jepsen to OrthoONE, Dr. Lerman and will be undergoing surgical repair of the L hip
Understands risks involved.
Has been on gabapentin and baclofen for some time
Has also been on bupropion for "years," was sent to psych for management given hx of seizures
- > Reviewed medication interactions and risks, patient verbalized understanding, acceptance of risks, and elects to move forward for pain management
Patient requesting refills and reports this has been very helpful in managing pain but is requesting 600 mg in evening PRN
No side effects reported/identified
ER precautions were reviewed in depth with patient
All questions/concerns from the patient were addressed. Patient verbalized an understanding of the treatment plan, acceptance of the risks involved, verbalized an understanding that labs and referrals are the patient's responsibility to follow up on.
- > Advised to f/u with the clinic if there are any changes, worsening of condition, or any questions present.
M87.859: Other osteonecrosis, unspecified femur
baclofen 10 mg tablet - To be submitted on or around 04/18/2023 Take 1 tablet(s) 3 times a day by oral route as needed for 30 days. Qty: (90) tablet Refills: 1 Pharmacy: SAFEWAY PHARMACY #05-1644 Note to Pharmacy: Take 1-2 tabs in the morning (20 mg), 1 tablet at lunch time (10 mg), and may take 1 tablet (10 mg) before bed AS NEEDED for muscle spasms/pain
gabapentin 600 mg tablet - To be submitted on or around 04/18/2023 Take 1 tablet(s) twice a day by oral route as needed for 60 days. Qty: (120) tablet Refills: 0 Pharmacy: SAFEWAY PHARMACY #05-1644

3. Erythrocytosis -

- > Asymptomatic
- > Consider sleep medicine referral, advised weight loss
- > Consider hematology evaluation pending initial eval
- > ER precautions were reviewed in depth with patient
- > All questions/concerns from the patient were addressed. Patient verbalized an understanding of the treatment plan, acceptance of the risks involved, verbalized an understanding that labs and referrals are the patient's responsibility to follow up on.
- > Advised to f/u with the clinic if there are any changes, worsening of condition, or any questions present.
D75.1: Secondary polycythemia
FERRITIN-004598-P
IRON AND TIBC
HEMATOPATH CONSULTATION, SMEAR

4. Lipoma of skin and subcutaneous tissue of neck-

- > S/p excision
- > Note reviewed with patient
- > Reports resolution of headaches and improved ROM
- > No s/s of infection
ER precautions were reviewed in depth with patient
All questions/concerns from the patient were addressed. Patient verbalized an understanding of the treatment plan, acceptance of the risks involved, verbalized an understanding that labs and referrals are the patient's responsibility to follow up on.
- > Advised to f/u with the clinic if there are any changes, worsening of condition, or any questions present.
D17.0: Benign lipomatous neoplasm of skin and subcutaneous tissue of head, face and neck

5. Major depressive disorder -

- PHQ-9 (21)
- > Is following psychiatry and was started on bupropion by psych, denies any seizure activity
 - > Continue to follow, denies any SI/HI, reports improvement in symptoms
 - > ER precautions were reviewed in depth with patient
 - > All questions/concerns from the patient were addressed. Patient verbalized an understanding of the treatment plan, acceptance of the risks involved, verbalized an understanding that labs and referrals are the patient's responsibility to follow up on.
 - > Advised to f/u with the clinic if there are any changes, worsening of condition, or any questions present.

CENTER POINTE FAMILY MEDICINE us 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

F32.9: Major depressive disorder, single episode, unspecified

6. Generalized anxiety disorder -

GAD (16)

(See tx plan for MDD)

F41.1: Generalized anxiety disorder

7. Cervical spondylosis -

> No red flag symptoms

> Discussed ibuprofen/APAP PRN

> Patients cervical ROM is mildly limited at this time 2/2 lipoma, once lipoma is resolved, will provide PT referral

> ER precautions reviewed

> Patient verbalized understanding and agreement

M47.812: Spondylosis without myelopathy or radiculopathy, cervical region

8. Body mass index 30+ - obesity-

BMI: 32.6

> Will obtain hemoglobin A1c to screen for DM, lipids on another day as he is not fasting at this time

> Reviewed healthy dietary choices to include vegetables, lean meats, fruits, and avoiding processed foods.

> Encouraged regular exercise.

Physical activity is anything that gets your body moving. Each week adults need 150 minutes of moderate-intensity physical activity and 2 days of muscle strengthening activity

Reviewed complications of obesity include heart disease,

Type 2 (formerly non-insulin-dependent) diabetes mellitus, hypertension, stroke, certain types of cancer (endometrial, breast, prostate, colon), dyslipidemia, gallbladder disease, sleep apnea and other respiratory problems, reduced fertility, osteoarthritis, increase in all-cause mortality, & emotional distress

Patient verbalized understanding and agreement with tx plan

Z71.3: Dietary counseling and surveillance

Z71.82: Exercise counseling

E66.09: Other obesity due to excess calories

Z68.32: Body mass index [BMI] 32.0-32.9, adult

ELECTROCARDIOGRAM

Ordering provider to read?: Y, Number of leads: 12

Results:

- Rate & Rhythm:

- QRS:

- PR Interval:

- QRS Duration:

- QT Interval:

Result Note: Normal ECG

Discussion Notes

I discussed all the findings and full differential with the patient. Together, with patient, a plan of care was discussed including lab orders, imaging tests, medications and/or referrals. RBD & SE associated with current meds and potential interactions with other meds patient is taking. Pt accepts risks, responsibilities and wishes to continue current medications. I answered all the patient's questions and they voiced understanding about their visit, the workup and plan of care. Any tests, labs or referrals ordered were fully explained and the patient agreed with the plan and wishes to proceed. Pt will follow up on results of any tests, labs or referrals ordered today. LabCorp is available on-site for your convenience. Although, you may choose any other lab facility to have labs completed. Pt advised and understands it is their responsibility to check with insurance for tests, labs and apt coverage. Pt understands it is ultimately their choice to follow thru with recommendations, labs, imaging, medications and/or referrals

Return to Office

KEENAN GRIEGO, NP for ANY20 at NORTH OFFICE on 06/08/2023 at 02:20 PM

to see KEENAN GRIEGO, NP for PHYSICAL at NORTH OFFICE on or around 02/17/2024

Encounter Sign-Off

Encounter signed-off by KEENAN GRIEGO, NP, 04/18/2023.

Encounter performed and documented by KEENAN GRIEGO, NP

Encounter reviewed & signed by KEENAN GRIEGO, NP on 04/18/2023 at 7:09am

CENTER POINTE FAMILY MEDICINE sa 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Encounter Date: 03/08/2023

Patient

Name	PRITT, CHRISTOPHER (50yo, M) ID# 37379	Appt. Date/Time	03/08/2023 02:20PM
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DOB	07/21/1972	Service Dept.	NORTH OFFICE
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Provider	KEENAN GRIEGO, NP
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Insurance	Med Primary: MEDICAID-CO (MEDICAID) Insurance # : D569133 Prescription: MAGELLAN-COLORADO MEDICAID - Member is eligible. details
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Chief Complaint

Physical Follow-Up/Lab Review

Patient's Pharmacies

SAFEWAY PHARMACY #05-1644 (ERX): 7655 MCLAUGHLIN ROAD, FALCON, CO 80831, Ph (719) 495-7400, Fax (719) 495-7600

WALMART PHARMACY 4335 (ERX): 11550 MERIDIAN MARKET VIEW, FALCON, CO 80831, Ph (719) 522-2989, Fax (719) 522-2991

Vitals

Ht: 5 ft 9 in 03/08/2023
02:00 pm

Wt: 228 lbs 03/08/2023
02:05 pm

BMI: 33.7 03/08/2023 02:05
pm

BP: 124/76 03/08/2023
02:07 pm

Pulse: 94 bpm 03/08/2023
02:06 pm

O2Sat: 94% 03/08/2023 02:06
pm

RR: 18 03/08/2023 02:06
pm

T: 96.5 F° 03/08/2023
02:06 pm

Measurements

None recorded.

Allergies

Reviewed Allergies

PENICILLINS, unable-to-assess criticality: - Reports he has always been told as a child he is allergic but is unsure what happens

Medications

Reviewed Medications

baclofen 10 mg tablet

03/08/23 prescribed

Take 1 tablet(s) 3 times a day by oral route as needed for 30 days.

Note: Take 1-2 tabs in the morning, 1 tablet at lunch time, and may take 1 tablet before bed AS
NEEDED for muscle spasms/pain

gabapentin 300 mg capsule

03/08/23 prescribed

Take 1 capsule(s) twice a day by oral route as needed.

Note: Take 2 capsules in the morning and 1 capsule at night for neuropathic pain

Vaccines

Reviewed Vaccines

CENTER POINTE FAMILY MEDICINE a 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Vaccine Type	Date	Amt.	Route	Site	NDC	Lot #	Mfr.	Exp. Date	VIS	VIS Given	Vaccinator
COVID-19											
COVID-19, mRNA, LNP-S, bivalent, PB2507/23.5 mcg/0.5 mL dose (Moderna)	07/23/2022	0.5 mL	Intramuscular	Left	Deltoid\$077702820623H22A	003B21A	Moderna US, Inc.	06/05/23	Moderna COVID-19 6+ EUA 10/12/2022	02/07/23	Linda James
COVID-19, mRNA, LNP-S. PF, 100 mcg/0.5 mL dose (Moderna)	04/28/2022	0.5 mL				023C21A	Moderna US, Inc.				
COVID-19, mRNA, LNP-S. PF, 100 mcg/0.5 mL dose (Moderna)	03/06/2022	0.5 mL				003B21A	Moderna US, Inc.				
Diphtheria, Tetanus, Pertussis											
Tdap	12/10/10	0.5 mL	Intramuscular			3K44J	GlaxoSmithKline				
Tdap	07/21/13										

Problems

Reviewed Problems

Fitting procedure - Onset: 03/09/2023
Osteoarthritis of hip - Onset: 03/09/2023
Diet education - Onset: 03/08/2023
Red blood cell count raised - Onset: 03/08/2023
Cervical spondylosis - Onset: 03/08/2023
Generalized anxiety disorder - Onset: 02/20/2023
Major depressive disorder - Onset: 02/17/2023
Avascular necrosis of bone of hip - Onset: 02/17/2023
Lipoma of skin and subcutaneous tissue of neck - Onset: 03/02/2023
Body mass index 30+ - obesity - Onset: 03/08/2023
Ex-smoker - Onset: 03/08/2023
Obesity - Onset: 03/08/2023
Patient follow-up to return when and if necessary - Onset: 03/08/2023

Family History

Reviewed Family History

Social History

Reviewed Social History

Education and Occupation

What is the highest grade or level of school you have completed or the highest degree you have received?: GED or equivalent

Activities of Daily Living

Are you able to care for yourself?: Yes

Are you blind or do you have difficulty seeing?: No

Are you deaf or do you have serious difficulty hearing?: No

Do you have difficulty concentrating, remembering or making decisions?: No

Do you have difficulty walking or climbing stairs?: No

Do you have difficulty dressing or bathing?: No

Do you have difficulty doing errands alone?: No

Diet and Exercise

What type of diet are you following?: Regular (Notes: healthy)

What is your exercise level?: Occasional (Notes: PT)

Substance Use

Do you or have you ever smoked tobacco?: Former smoker

Do you or have you ever used any other forms of tobacco or nicotine?: No

What was the date of your most recent tobacco screening?: 03/08/2023

What is your level of alcohol consumption?: None

Do you use any illicit or recreational drugs?: No

What is your level of caffeine consumption?: Moderate (Notes: 1 cup of coffee/daily)

Home and Environment

Do you have any pets?: No

Surgical History

Reviewed Surgical History

Past Medical History

Reviewed Past Medical History

Acid Reflux (GERD): Y

Allergies: Y

Anxiety Disorder: Y

Depression: Y

Developmental or Behavioral Disorders: Y

Gout: Y

CENTER POINTE FAMILY MEDICINE u 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Head Injury/Concussion: Y

Headaches: Y

Headaches/Migraines: Y

High Cholesterol: Y

Hospitalizations: Y

Hypertension: Y

Hyperthyroidism: Y

Mental Disorder: Y

Mental Illness: Y

Muscle, Joint, or Bone Problems: Y

Obesity: Y

Seizures/Epilepsy: Y

Thyroid Problems: Y

Vision or Eye Problems: Y

Screening

None recorded.

HPI

Christopher presents to rvw lab results
discuss medication dosage and refills

Chris is a pleasant 50 y/o male who presents for a lab review. Patient denies any SI/HI, no sleep disturbances, and no alcohol abuse. Denies fevers, night sweats, no significant weight gain/loss, or exercise intolerance. Denies dry eyes, or visual changes. Denies difficulty hearing or ear pain. Denies nosebleeds, nose/sinus problems, sore throat, bleeding gums, snoring, dry mouth, mouth ulcers, oral abnormalities, or teeth problems. Denies chest pain, shortness of breath, palpitations, light headedness, or dizziness. Denies cough, wheezing, hemoptysis, or sleep apnea. Denies abdominal pain, vomiting, nausea, diarrhea, dyspepsia, GERD, incontinence, trouble urinating, hematuria, muscle aches, weakness, or swelling in the extremities. Denies abnormal mole, jaundice, rashes, loss of consciousness, numbness, seizures, dizziness, headaches. Denies fatigue, swollen glands, bruising, runny nose, itching, hives, or frequent sneezing.

He reports since the baclofen and gabapentin, his pain has been better managed but is still having some pain. He reports a previous dosing schedule of baclofen 20 mg in the AM, 10 mg in the afternoon, and 10 mg PRN at night before bed has done very well for him in the past. Pain is mainly in his L hip/low back area. Reports that the baclofen helps "loosen everything up," so he has mobility. He still has some shooting/neuropathy pain as well. The gabapentin hasn't helped as much and he is requesting an increase in his dosing. He reports that gabapentin 600 mg in the AM and 300 in the PM has also done well for him. Overall, pain is still 5-6/10.

Reports that he is currently working on scheduling his ortho visit. Discussed going to the ER, patient declined and would really like to see this specific orthopedist. Denies any red flag symptoms. Recent imaging reviewed with patient.

Patient is requesting paperwork for the AND program to be filled out for financial benefits who are disabled as he is currently applying for disability. Patient's mobility is severely limited due to hx of avascular necrosis.

Reports limited ROM in neck and wonders if lipoma removal would improve his ROM and migraines. He has agreed to a general surgery referral.

He is also requesting an Rx for a new pair of orthotic shoes as his are well worn. The sole of the R shoe is falling off.

ROS

ROS as noted in the HPI

Physical Exam

Chaperone: Chaperone: offered and declined.

Constitutional: General Appearance: healthy-appearing, well-nourished, and well-developed. Level of Distress: NAD. Ambulation: in wheelchair; Is able to ambulate. Very antalgic favoring L>R. Use of orthotic shoes.

Psychiatric: Insight: good judgement. Mental Status: normal mood and affect and active and alert. Orientation: to time, place, and person. Memory: recent memory normal and remote memory normal.

Head: Head: normocephalic and atraumatic.

Eyes: Lids and Conjunctivae: no discharge or pallor and non-injected. Pupils: PERRLA. Corneas: grossly intact. EOM: EOMI. Sclerae: non-icteric. Vision: peripheral vision grossly intact and acuity grossly intact.

ENMT: Ears: no lesions on external ear, EACs clear, TMs clear, and TM mobility normal. Hearing: no hearing loss. Nose: no lesions on external nose, septal deviation, sinus tenderness, or nasal discharge and nares patent. Lips, Teeth, and Gums: no mouth or lip ulcers or bleeding gums and poor dentition. Oropharynx: no erythema or exudates and moist mucous membranes and tonsils not enlarged.

Neck: Neck: supple, FROM, trachea midline, and cervical mass; Posterior R sided mass. Is soft to palpation, movable. No changes since last evaluation.. Lymph Nodes: no cervical LAD, supraclavicular LAD, axillary LAD, or inguinal LAD. Thyroid: no

PRITT, Christopher (id #37379, dob: 07/21/1972)

enlargement or nodules and non-tender.

Lungs: Respiratory effort: no dyspnea. Percussion: no dullness, flatness, or hyperresonance. Auscultation: no wheezing, rales/crackles, or rhonchi and breath sounds normal, good air movement, and CTA except as noted.

Cardiovascular: Apical Impulse: not displaced. Heart Auscultation: normal S1 and S2; no murmurs, rubs, or gallops; and RRR. Neck vessels: no carotid bruits. Pulses including femoral / pedal: normal throughout.

Musculoskeletal: Motor Strength and Tone: normal and normal tone. Joints, Bones, and Muscles: no contractures, malalignment, or tenderness and limited ROM and bony deformity; Limited ROM of L hip, well healed surgical scar, no erythema, bruising. Mild crepitus along flexion of L knee. CMS < 3 seconds.. Extremities: no cyanosis, edema, varicosities, or palpable cord.

Neurologic: Gait and Station: normal gait and station. Cranial Nerves: grossly intact. Sensation: grossly intact and monofilament test intact. Reflexes: DTRs 2+ bilaterally throughout. Coordination and Cerebellum: finger-to-nose intact and no tremor.

Skin: Inspection and palpation: no lesions, ulcer, induration, nodules, jaundice, or abnormal nevi and tattoo and good turgor. Nails: normal.

Back: Thoracolumbar Appearance: normal curvature.

Assessment / Plan

1. Avascular necrosis of bone of hip-

- > Referral provided for Dr. Eric Jepson per patient request, insurance authorization has come through, patient will call after visit to see if visit can be scheduled.
- > DOC notes have not been received. Patient reports baclofen and gabapentin have been helpful but would like to increase dosing to previous levels. Renal function and liver function WNL. Will increase baclofen to 20 mg AM, 10 mg at lunch, and 10 at night PRN and increase gabapentin to 600 in AM and 300 in PM.
- > Updated imaging reviewed with patient. Patient reported concerns of four screws in soft tissue. Advised if pain has worsened or changes in condition patient needs to go to ER. Patient respectfully declined ER evaluation at this time as he really wants to see Dr. Jepson. Reviewed possible complications. Patient verbalized understanding, acceptance of risks, and wants to wait for ortho evaluation.
- > Requested MA to send updated imaging to ortho provider
- > F/u 3 months for med refill
 - No red flag symptoms reported or identified
 - Reviewed ER precautions
 - Patient verbalized understanding and agreement with tx plan
 - M87.859: Other osteonecrosis, unspecified femur
 - baclofen 10 mg tablet - To be submitted on or around 03/09/2023 Take 1 tablet(s) 3 times a day by oral route as needed for 30 days. Qty: (90) tablet Refills: 1 Pharmacy: SAFEWAY PHARMACY #05-1644
 - gabapentin 300 mg capsule - To be submitted on or around 03/09/2023 Take 1 capsule(s) twice a day by oral route as needed. Qty: (60) capsule Refills: 1 Pharmacy: SAFEWAY PHARMACY #05-1644

2. Lipoma of skin and subcutaneous tissue of neck-

- > Denies changes at this time
- > Denies cervical swelling, denies pain
- > U/S nonencapsulated lipoma, does restrict patients cervical ROM
- > Is mobile, nontender to palpation, no erythema, discharge, or pain associated
 - No lymphedema palpated in surrounding areas
- > ER precautions reviewed, patient verbalized understanding and agreement
 - D17.0: Benign lipomatous neoplasm of skin and subcutaneous tissue of head, face and neck
 - GENERAL SURGEON REFERRAL - Schedule Within: provider's discretion
 - Reason for Referral: cervical lipoma removal

3. Major depressive disorder -

- PHQ-9 (21)
- > Denies SI/HI, reports feeling safe at home and reports strong support system
- > CSSRS: 0, reassuring
- > Symptoms >2 weeks
- > No symptoms mania/hypomania
 - Reports he has been on "many" antidepressants in the past and the only one that worked well for him was bupropion ER but states that DOC does not allow bupropion so he was unable to receive medication
- > Psych eval and neuro eval both placed as patient has hx of seizures. Denies SSRIs and wants to go back on bupropion. As bupropion can lower seizure threshold, advised patient of these risks and that we need clearance prior. Reviewed ER precautions and acute psychiatric facilities here in Colorado Springs.
- > ER precautions reviewed
- > Patient verbalized understanding and agreement with tx plan
 - F32.9: Major depressive disorder, single episode, unspecified

4. Generalized anxiety disorder

GAD (16)

PRITT, Christopher (id #37379, dob: 07/21/1972)

Symptoms >6 months

> Patient verbalized understanding and agreement

(See tx plan for MDD)

F41.1: Generalized anxiety disorder

5. Red blood cell count raised -

RBC: 6.10 (H) as of 02/17/23

> Reviewed H/H are WNL, is asymptomatic

> Continue to monitor

> ER precautions reviewed

R71.8: Other abnormality of red blood cells

6. Hepatitis C screening -

> Reports hep C for 20 years and is s/p treatment, states this is resolved but would like follow-up

> Unable to recall medications

> Asymptomatic at this time

> Reviewed labs that HCV ab is reactive that he has been infected at some point in his life and that the hepatitis C quantitation is negative, which means there is no viral load in his blood at this time, which is consistent with his hx. Will await medical records. No physical findings support active infection.

Z11.59: Encounter for screening for other viral diseases

7. Body mass index 30+ - obesity-

BMI: 33.7

> Will obtain hemoglobin A1c to screen for DM, lipids on another day as he is not fasting at this time

> Reviewed healthy dietary choices to include vegetables, lean meats, fruits, and avoiding processed foods.

> Encouraged regular exercise.

Physical activity is anything that gets your body moving. Each week adults need 150 minutes of moderate-intensity physical activity and 2 days of muscle strengthening activity

> Reviewed complications of obesity include heart disease,

Type 2 (formerly non-insulin-dependent) diabetes mellitus, hypertension, stroke, certain types of cancer (endometrial, breast, prostate, colon), dyslipidemia, gallbladder disease, sleep apnea and other respiratory problems, reduced fertility, osteoarthritis, increase in all-cause mortality, & emotional distress

> Patient verbalized understanding and agreement with tx plan

Z71.3: Dietary counseling and surveillance

Z71.82: Exercise counseling

E66.09: Other obesity due to excess calories

Z68.33: Body mass index [BMI] 33.0-33.9, adult

8. History of single seizure-

> Patient reports history of two seizures

> One as a child playing the "pass out game." And another during adulthood when he was using "a lot of illicit drugs."

Patient wants to go back onto bupropion but will need neurology clearance and will also consult psych for medication management

> New referral placed to practice that accepts patient's insurance.

> Case discussed with Dr. Abdullah

> ER precautions reviewed

> Patient verbalized understanding and agreement

Z86.69: Personal history of other diseases of the nervous system and sense organs

NEUROLOGIST REFERRAL - Schedule Within: 2 weeks

Reason for Referral: Hx of seizures, would also like to go back on bupropion. Need clearance prior.

9. Cervical spondylosis -

> No red flag symptoms

> Discussed ibuprofen/APAP PRN

> Patients cervical ROM is mildly limited at this time 2/2 lipoma, once lipoma is resolved, will provide PT referral

> ER precautions reviewed

Patient verbalized understanding and agreement

M47.812: Spondylosis without myelopathy or radiculopathy, cervical region

OSTEOARTHRITIS EDUCATION

NECK ARTHRITIS: EXERCISES

Discussion Notes

I discussed all the findings and full differential with the patient. Together, with patient, a plan of care was discussed including lab orders, imaging tests, medications and/or referrals. RBD & SE associated with current meds and potential interactions with other meds patient is taking. Pt accepts risks, responsibilities and wishes to continue current medications. I answered all the patient's questions and they voiced understanding about their visit, the workup and plan of care. Any tests, labs or referrals ordered were fully explained and the patient agreed with the plan and wishes to proceed. Pt will follow up on results of any tests, labs or referrals ordered today. LabCorp is available on-site for your convenience. Although, you may choose any other lab facility to have labs completed. Pt advised and understands it is their responsibility to check with insurance for tests, labs and apt coverage. Pt understands it is ultimately their choice to follow thru with recommendations, labs, imaging, medications and/or referrals

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126
PRITT, Christopher (id #37379, dob: 07/21/1972)

Return to Office

KEENAN GRIEGO, NP for ANY20 at NORTH OFFICE on 06/08/2023 at 02:20 PM
to see KEENAN GRIEGO, NP for PHYSICAL at NORTH OFFICE on or around 02/17/2024

Encounter Sign-Off

Encounter signed-off by KEENAN GRIEGO, NP, 03/09/2023.

Encounter performed and documented by KEENAN GRIEGO, NP

Encounter reviewed & signed by KEENAN GRIEGO, NP on 03/09/2023 at 11:08am

CENTER POINTE FAMILY MEDICINE sa 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Encounter Date: 02/17/2023

Patient

Name	PRITT, CHRISTOPHER (50yo, M) ID# 37379	Appt. Date/Time	02/17/2023 04:00PM
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DOB	07/21/1972	Service Dept.	NORTH OFFICE
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Provider	KEENAN GRIEGO, NP
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Insurance	Med Primary: MEDICAID-CO (MEDICAID) Insurance # : D569133 Prescription: check now
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Chief Complaint

Physical - Male 50+

Patient's Pharmacies

SAFEWAY PHARMACY #05-1644 (ERX): 7655 MCLAUGHLIN ROAD, FALCON, CO 80831, Ph (719) 495-7400, Fax (719) 495-7600

WALMART PHARMACY 4335 (ERX): 11550 MERIDIAN MARKET VIEW, FALCON, CO 80831, Ph (719) 522-2989, Fax (719) 522-2991

Vitals

Ht: 5 ft 9 in 02/17/2023
03:33 pm

Wt: 230 lbs With clothes
02/17/2023 03:44 pm

BMI: 34 02/17/2023 03:44
pm

BP: 120/82 sitting L arm
02/17/2023 03:45 pm

Pulse: 86 bpm regular
02/17/2023 03:44 pm

O2Sat: 93% Room Air at
Rest 02/17/2023 03:44
pm

RR: 18 02/17/2023 03:45
pm

T: 98.8 F° temporal
artery 02/17/2023
03:44 pm

Pain Scale: 7 02/17/2023 03:44 pm

Measurements

None recorded.

Allergies

Reviewed Allergies

PENICILLINS, unable-to-assess criticality: - Reports he has always been told as a child he is allergic but is unsure what happens

Medications

Reviewed Medications

baclofen 10 mg tablet

02/07/23 entered

Take 1 tablet(s) twice a day by oral route.

Vaccines

Vaccines not reviewed (last reviewed 02/07/2023)

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Vaccine Type	Date	Amt	Route	Site	NDC	Lot #	Mfr.	Exp. Date	VIS	VIS Given	Vaccinator
COVID-19											
COVID-19, mRNA, LNP-S, bivalent, PB2507/23.5 mcg/0.5 mL dose (Moderna)	07/23/2023	0.5 mL	Intramuscular	Deltoid Left	8077702820623H22A		Moderna US, Inc.	06/05/23	Moderna COVID-19 6+ EUA 10/12/2022	02/07/23	Linda James
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	04/28/2023	0.5 mL				023C21A	Moderna US, Inc.				
COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna)	03/06/2023	0.5 mL				003B21A	Moderna US, Inc.				
Diphtheria, Tetanus, Pertussis											
Tdap	12/10/10	0.5 mL	Intramuscular			3K44J	GlaxoSmithKline				
Tdap	07/21/13										

Problems

Reviewed Problems

Major depressive disorder - Onset: 02/17/2023
Generalized anxiety disorder - Onset: 02/20/2023
Avascular necrosis of bone of hip - Onset: 02/17/2023
Neck swelling - Onset: 02/17/2023
Body mass index 30+ - obesity - Onset: 02/17/2023
Ex-smoker - Onset: 02/17/2023
Obesity - Onset: 02/07/2023
Patient follow-up to return when and if necessary - Onset: 02/07/2023

Social History

Reviewed Social History

Education and Occupation

What is the highest grade or level of school you have completed or the highest degree you have received?: GED or equivalent

Activities of Daily Living

Are you able to care for yourself?: Yes

Are you blind or do you have difficulty seeing?: No

Are you deaf or do you have serious difficulty hearing?: No

Do you have difficulty concentrating, remembering or making decisions?: No

Do you have difficulty walking or climbing stairs?: No

Do you have difficulty dressing or bathing?: No

Do you have difficulty doing errands alone?: No

Diet and Exercise

What type of diet are you following?: Regular (Notes: healthy)

What is your exercise level?: Occasional (Notes: PT)

Substance Use

Do you or have you ever smoked tobacco?: Former smoker

Do you or have you ever used any other forms of tobacco or nicotine?: No

What was the date of your most recent tobacco screening?: 02/17/2023

What is your level of alcohol consumption?: None

Do you use any illicit or recreational drugs?: No

What is your level of caffeine consumption?: Moderate (Notes: 1 cup of coffee/daily)

Home and Environment

Do you have any pets?: No

Surgical History

Surgical History not reviewed (last reviewed 02/07/2023)

Past Medical History

Reviewed Past Medical History

Acid Reflux (GERD): Y

Allergies: Y

Anxiety Disorder: Y

Depression: Y

Developmental or Behavioral Disorders: Y

Gout: Y

Head Injury/Concussion: Y

Headaches: Y

Headaches/Migraines: Y

High Cholesterol: Y

Hospitalizations: Y

Hypertension: Y

Hyperthyroidism: Y

Mental Disorder: Y

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Mental Illness: Y

Muscle, Joint, or Bone Problems: Y

Obesity: Y

Seizures/Epilepsy: Y

Thyroid Problems: Y

Vision or Eye Problems: Y

Screening

Name	Score	Notes
PHQ-2/PHQ-9	21 (for the PHQ-9), Finding: Positive	
GAD-7	16	
AUDIT-C	0	

HPI

Patient presents to clinic for their Annual Physical Exam.

Recent immunization dates and recommendations entered in A/P

Recent preventive screening dates entered in A/P

Intake completed, vitals obtained including BMI calculation, current medication list reviewed, updated PHM, SocHx, and documented medical changes since last PE.

Patient completed the following screenings in house:

PHQ 9 - Depression Screening

AUDIT-C - Alcohol Use Disorders Identification Test

GAD-7 - General Anxiety Disorder Screening

Results/Answers of above screenings were entered where appropriate and given to Provider to review with patient.

Concerns: Restarting medications and preventative services

Chris is a pleasant 50 y/o male who presents today for a physical exam. He reports multiple issues that he wants to get addressed and also is very interested in routine preventative screening measures. He reports that he was released from the department of corrections on 1/23/23 and had some medical conditions that haven't been addressed. He states, "They care, but they don't care."

He states that he was originally involved in an MVA that resulted in avascular necrosis of the L hip. He has undergone surgical repair x1 (around 2017, we are still awaiting medical records from DOC). When he was arrested, he states that he was slammed to the ground landing on the hip, which re-injured his hip. He has been managed with baclofen and prior to his arrest, gabapentin, which good results. He reports that he experiences ongoing dull aches with radiating/electric pain that shoot down the back of his buttock into his hamstring that stop just prior to his knee. He denies any saddle paresthesia, loss of bowel/bladder control, unexplained fevers/chills/bleeding or weight loss. He reports that he has a family friend who knows an orthopedist and that the orthopedist will accept Medicaid, so he is requesting a referral for further evaluation. He has signed papers for the DOC to release medical records but this clinic has not received those records. He is very interested in going back on baclofen at this time. He reports, "I've been eating tylenol and ibuprofen but it doesn't help much." He is still able to ambulate but, "I'm uneven with each step." He also reports the muscle spasms are pretty severe and keep him from sleep. Current pain is 7/10. Denies any other alleviating factors other than baclofen/gabapentin. He is able to ambulate but it is antalgic. He does use a wheelchair to get around stating it is much easier and pain free with the wheelchair. Denies aggravating factors.

He has used orthotics since but is also interested in getting new ones. He was on elavil while in custody but reported that "made me sleep for 12 hours, which isn't a bad thing when you're in prison." Because of this pain, he has been experiencing some intermittent sharp L knee pain. Denies any trauma to the knee and feels this is related to his hip.

He also reports a long history of depression. Denies any SI/HI and reports a strong desire to improve his mental health. He reports that he has been on "tons of antidepressants," but the only one that really helped was bupropion and wants to go back on bupropion. Denies any manic/hypomanic episodes, hallucinations, delusions, or feelings of being unsafe. He has verbalized and assured this provider of his own safety and the safety of others.

He denies any other acute concerns. Denies fevers, night sweats, no significant weight gain/loss, or exercise intolerance. Denies dry eyes, or visual changes. Denies difficulty hearing or ear pain. Denies nosebleeds, nose/sinus problems, sore throat, bleeding gums, snoring, dry mouth, mouth ulcers, oral abnormalities, or teeth problems. Denies chest pain, shortness of breath, palpitations, light headedness, or dizziness. Denies cough, wheezing, hemoptysis, or sleep apnea. Denies abdominal pain, vomiting, nausea, diarrhea, dyspepsia, GERD, incontinence, trouble urinating, hematuria, or swelling in the extremities. Denies abnormal mole, jaundice, rashes, loss of consciousness, numbness, seizures, dizziness, headaches. Denies fatigue, swollen glands, bruising, runny nose, itching, hives, or frequent sneezing.

ROS

ROS as noted in the HPI

Physical Exam

Chaperone: Chaperone: offered and declined.

CENTER POINTE FAMILY MEDICINE us 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Constitutional: General Appearance: healthy-appearing, well-nourished, and well-developed. Level of Distress: NAD. Ambulation: in wheelchair; Is able to ambulate. Very antalgic favoring R>L. Use of orthotic shoes.

Psychiatric: Insight: good judgement. Mental Status: normal mood and affect and active and alert. Orientation: to time, place, and person. Memory: recent memory normal and remote memory normal.

Head: Head: normocephalic and atraumatic.

Eyes: Lids and Conjunctivae: no discharge or pallor and non-injected. Pupils: PERRLA. Corneas: grossly intact. EOM: EOMI. Sclerae: non-icteric. Vision: peripheral vision grossly intact and acuity grossly intact.

ENMT: Ears: no lesions on external ear, EACs clear, TMs clear, and TM mobility normal. Hearing: no hearing loss. Nose: no lesions on external nose, septal deviation, sinus tenderness, or nasal discharge and nares patent. Lips, Teeth, and Gums: no mouth or lip ulcers or bleeding gums and poor dentition. Oropharynx: no erythema or exudates and moist mucous membranes and tonsils not enlarged.

Neck: Neck: supple, FROM, trachea midline, and cervical mass; See photo, posterior R sided mass. Is soft to palpation, movable. Lymph Nodes: no cervical LAD, supraclavicular LAD, axillary LAD, or inguinal LAD. Thyroid: no enlargement or nodules and non-tender.

Lungs: Respiratory effort: no dyspnea. Percussion: no dullness, flatness, or hyperresonance. Auscultation: no wheezing, rales/crackles, or rhonchi and breath sounds normal, good air movement, and CTA except as noted.

Cardiovascular: Apical Impulse: not displaced. Heart Auscultation: normal S1 and S2; no murmurs, rubs, or gallops; and RRR. Neck vessels: no carotid bruits. Pulses including femoral / pedal: normal throughout.

Abdomen: Bowel Sounds: normal. Inspection and Palpation: no tenderness, guarding, masses, rebound tenderness, or CVA tenderness and soft and non-distended. Liver: non-tender and no hepatomegaly. Spleen: non-tender and no splenomegaly. Hernia: none palpable.

Musculoskeletal:: Motor Strength and Tone: normal and normal tone. Joints, Bones, and Muscles: no contractures, malalignment, or tenderness and limited ROM and bony deformity; Limited ROM of L hip, well healed surgical scar, no erythema, bruising. Mild crepitus along flexion of L knee.. Extremities: no cyanosis, edema, varicosities, or palpable cord.

Neurologic: Gait and Station: normal gait and station. Cranial Nerves: grossly intact. Sensation: grossly intact and monofilament test intact. Reflexes: DTRs 2+ bilaterally throughout. Coordination and Cerebellum: finger-to-nose intact and no tremor.

Skin: Inspection and palpation: no lesions, ulcer, induration, nodules, jaundice, or abnormal nevi and tattoo and good turgor. Nails: normal.

Back: Thoracolumbar Appearance: normal curvature.

Assessment Plan

1. Adult health examination -

TD: 12/10/17

Flu: ~4 months ago

Pprevnar13

PPSV:

Shingles: Got first shingles vaccination, advised to get the second

Quit smoking ~10 years ago

Previous HepC Screening (N) - Hx of hep C, awaiting documents from DOC, MA has reached out

Vision >10 years ago

Dental - Dental appointment next Wednesday

Colonoscopy/Cologuard/IFobt() - GI referral placed

PHQ9 (21)

GAD7 (16)

AUDIT (0)

Labs ordered today

-All age-appropriate screenings were discussed and ordered as necessary.

-Advised Pt to make f/u apt to review results of any tests or screenings ordered today.

Reviewed current mammogram/colonoscopy screening guidelines. Colonoscopy as "gold standard" for early colon cancer detection and screening guidelines. Offered Cologuard, fecal cards as alternatives. For women, mammogram is the "gold standard" to rule out any early form of breast cancer.

-Reviewed immunization updates and R/B.

Reviewed medication compliance, dosing, SE's, RBD.

Dietary, exercise, healthy lifestyle measures patient education provided

- Follow up yearly for your annual exams.

CENTER POINTE FAMILY MEDICINE is 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

- Contact our office if you do not hear from scheduling of referrals in the next 5-7 business days.
- F/u in 1 month for lab review or PRN, patient verbalized understanding and agreement
- Remember to schedule your annual dental or eye exam if needed.

Z00.01: Encounter for general adult medical examination with abnormal findings
COMP. METABOLIC PANEL (14)-322000-P
LIPID PANEL-303756-P
CBC WITH DIFFERENTIAL/PLATELET
WELL VISIT, MEN 50 TO 65: CARE INSTRUCTIONS
HEMOGLOBIN A1C-001453-P

2. Avascular necrosis of bone of hip-

Referral provided for Dr. Eric Jepson per patient request

Awaiting updated labs, as DOC notes have not been received, to assure no renal dysfunction for safe prescribing and will re-initiate baclofen and gabapentin for symptomatic relief. Patient denied ER evaluation for medication management and is agreeable.

> Will update imaging in anticipation of ortho consultation

No red flag symptoms reported or identified

> Reviewed ER precautions

> Patient verbalized understanding and agreement with tx plan

M87.859: Other osteonecrosis, unspecified femur

ORTHOPEDIC SURGEON REFERRAL - Schedule Within: provider's discretion

Reason for Referral: Hx of avascular necrosis eval and treat.

XR, HIP, UNILATERAL, 2 OR 3 VIEW _ Note to Imaging Facility: Left hip, hx of avascular necrosis

3. Major depressive disorder -

PHQ-9 (21)

> Denies SI/HI, reports feeling safe at home and reports strong support system

> CSSRS: 0, reassuring

> Symptoms >2 weeks

No symptoms mania/hypomania

> Reports he has been on "many" antidepressants in the past and the only one that worked well for him was bupropion ER but states that DOC does not allow bupropion so he was unable to receive medication

> Reports he requested talk therapy many times while in DOC but never received, will place referral

> Currently awaiting labs (Cr) baseline and will monitor BP

> Advised that this provider cannot prescribe without reviewing labs for safety/notes from previous provider. Patient verbalized understanding and agreement

> Will initiate bupropion ER 75 mg po qd x1 week and titrate up PRN as long as Cr is appropriate

> ER precautions reviewed

> Patient verbalized understanding and agreement with tx plan

F32.9: Major depressive disorder, single episode, unspecified

BEHAVIORAL HEALTH REFERRAL - Schedule Within: provider's discretion

LEARNING ABOUT SLEEPING WELL

4. Neck swelling -

(See photo under PE)

> Patient unaware he had some cervical swelling, denies pain

> Is mobile, nontender to palpation, no erythema, discharge, or pain associated

No lymphedema palpated in surrounding areas

Will obtain baseline imaging

ER precautions reviewed, patient verbalized understanding and agreement

R22.1: Localized swelling, mass and lump, neck

US, NECK, SOFT TISSUE

XR, CERVICAL SPINE, 2 OR 3 VIEW

5. Endocrine/metabolic screening

Z13.228: Encounter for screening for other metabolic disorders

TSH RFX ON ABNORMAL TO FREE T4

TRIIODOTHYRONINE (T3), FREE

6. Generalized anxiety disorder -

GAD (16)

> Symptoms >6 months

> Awaiting labs to result and will restart bupropion XL

Patient verbalized understanding and agreement

(See tx plan for MDD)

F41.1: Generalized anxiety disorder

7. Hepatitis C screening -

> Reports hep C for 20 years and is s/p treatment, states this is resolved but would like follow-up

> Unable to recall medications

> Asymptomatic at this time

Z11.59: Encounter for screening for other viral diseases

PRITT, Christopher (id #37379, dob: 07/21/1972)

HCV ANTIBODY RFX TO QUANT PCR

8. Body mass index 30+ - obesity-

BMI: 34.0

> Will obtain hemoglobin A1c to screen for DM, lipids on another day as he is not fasting at this time

> Reviewed healthy dietary choices to include vegetables, lean meats, fruits, and avoiding processed foods.

> Encouraged regular exercise.

Physical activity is anything that gets your body moving. Each week adults need 150 minutes of moderate-intensity physical activity and 2 days of muscle strengthening activity

> Reviewed complications of obesity include heart disease,

Type 2 (formerly non-insulin-dependent) diabetes mellitus, hypertension, stroke, certain types of cancer (endometrial, breast, prostate, colon), dyslipidemia, gallbladder disease, sleep apnea and other respiratory problems, reduced fertility, osteoarthritis, increase in all-cause mortality, & emotional distress

> Patient verbalized understanding and agreement with tx plan

Z71.3: Dietary counseling and surveillance

Z71.82: Exercise counseling

E66.09: Other obesity due to excess calories

Z68.31: Body mass index [BMI] 31.0-31.9, adult

LEARNING ABOUT OBESITY

WHEN YOU ARE OVERWEIGHT: CARE INSTRUCTIONS

9. Screening for malignant neoplasm of colon-

> Is due for routine colonoscopy, referral placed

Z12.11: Encounter for screening for malignant neoplasm of colon

GASTROENTEROLOGIST REFERRAL - Schedule Within: provider's discretion

10. Ophthalmic examination and evaluation -

> Denies any visual changes but has not been seen by an eye doctor in >10 years

> Uses OTC reading glasses

Z01.00: Encounter for examination of eyes and vision without abnormal findings

OPHTHALMOLOGIST REFERRAL - Schedule Within: provider's discretion

11. Screening for alcohol abuse -

Audit-C (0)

Z13.39: Encounter for screening examination for other mental health and behavioral disorders

12. Vaccine declined by patient -

Covid - received 02/07/23

Z28.21: Immunization not carried out because of patient refusal

13. Influenza vaccination declined -

already received per pt

Z28.21: Immunization not carried out because of patient refusal

Patient Instructions

Discuss labs results prn. 150 minutes aerobic exercise per week, 2-3 day of gentle weight lifting per week. Eat a healthy diet, moderating your intake of sugar, starch, and simple carbohydrates with plenty of fruits, vegetables, whole grains, beans, nuts, and lean meats like chicken and fish. Eat breakfast every day, and limit soda and snacking. Try to drink 64-96 ounces of water each day. Make time for activities that allow you to decrease stress. 7-9 hours of sleep per night. Limit your alcohol intake to no more than 1 alcoholic drink per day.. Wear adequate sun protection while outdoors, use sun block with SPF > 30 protecting against both UVA and UVB rays. Wear your seat belt at all times when in a car. Wear a helmet while biking, using a motorcycle, skiing/snow boarding, skate/long boarding, etc. If you have a gun make sure it is locked up and stored unloaded away from children. Remember to check your smoke/carbon monoxide detectors. Follow-up yearly for your annual exams, self breast exam monthly. Remember to schedule your annual dental or eye exam if needed. Remember to review and discuss your advanced health care directive with your family and update your power of attorney if necessary. If you've never thought about end-of-life issues before, you may find the following form helpful: <http://coloroadvancedirectives.com/wp-content/uploads/2014/07/1-MOST-Form-FINAL-2015.pdt>

Discussion Notes

| discussed all the findings and full differential with the patient. Together, with patient, a plan of care was discussed including lab orders, imaging tests, medications and/or referrals. RBD & SE associated with current meds and potential interactions with other meds patient is taking. Pt accepts risks, responsibilities and wishes to continue current medications. I answered all the patient's questions and they voiced understanding about their visit, the workup and plan of care. Any tests, labs or referrals ordered were fully explained and the patient agreed with the plan and wishes to proceed. Pt will follow up on results of any tests, labs or referrals ordered today. LabCorp is available on-site for your convenience. Although, you may choose any other lab facility to have labs completed. Pt advised and understands it is their responsibility to check with insurance for tests, labs and apt coverage. Pt understands it is ultimately their choice to follow thru with recommendations, labs, imaging, medications and/or referrals

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126
PRITT, Christopher (id #37379, dob: 07/21/1972)

Return to Office

to see KEENAN GRIEGO, NP for PHYSICAL at NORTH OFFICE on or around 02/17/2024

Encounter Sign-Off

Encounter signed-off by KEENAN GRIEGO, NP, 02/20/2023.

Encounter performed and documented by KEENAN GRIEGO, NP

Encounter reviewed & signed by KEENAN GRIEGO, NP on 02/20/2023 at 6:44am

CENTER POINTE FAMILY MEDICINE M 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Encounter Date: 02/07/2023

Patient

Name	PRITT, CHRISTOPHER (50yo, M) ID# 37379	Appt. Date/Time	02/07/2023 01:00PM
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DOB	07/21/1972	Service Dept.	NORTH OFFICE
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Provider	KEENAN GRIEGO, NP
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Insurance	Med Primary: MEDICAID-CO (MEDICAID) Insurance # : D569133 Prescription: MAGELLAN-COLORADO MEDICAID - Member is eligible. details
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Chief Complaint

New Patient

Patient's Pharmacies

SAFEWAY PHARMACY #05-1644 (ERX): 7655 MCLAUGHLIN ROAD, FALCON, CO 80831, Ph (719) 495-7400, Fax (719) 495-7600

WALMART PHARMACY 4335 (ERX): 11550 MERIDIAN MARKET VIEW, FALCON, CO 80831, Ph (719) 522-2989, Fax (719) 522-2991

Vitals

Ht: 5 ft 9 in 02/07/2023
12:56 pm

Wt: 215 lbs With clothes
02/07/2023 12:56 pm

BMI: 31.7 02/07/2023 12:56
pm

BP: 132/80 sitting
02/07/2023 12:48 pm

Pulse: 80 bpm regular
02/07/2023 12:47 pm

O2Sat: 97% Room Air at
Rest 02/07/2023 12:46
pm

RR: 16 02/07/2023 12:46
pm

T: 97.9 F° temporal
artery 02/07/2023
12:46 pm

Measurements

None recorded.

Allergies

Reviewed Allergies

PENICILLINS, unable-to-assess criticality: - Reports he has always been told as a child he is allergic but is unsure what happens

Medications

Reviewed Medications

baclofen 10 mg tablet Take 1 tablet(s) twice a day by oral route.	02/07/23 entered
--	------------------

meloxicam 1 po daily	02/07/23 entered
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Vaccines

Reviewed Vaccines

CENTER POINTE FAMILY MEDICINE a 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Vaccine Type	Date	Amt	Route	Site	NDC	Lot #	Mfr	Exp. Date	VIS	VIS Given	Vaccinator
COVID-19											
COVID-19, mRNA, LNP-S, bivalent, PB2507/23.5 mcg/0.5 mL dose (Moderna)	02/07/2023	0.5 mL	Intramuscular	Deltoid Left	8077702820623H22A		Moderna US, Inc.	06/05/23	Moderna COVID-19 6+ EUA	10/12/2022	Linda James
COVID-19, mRNA, LNP-S. PF, 100 mcg/0.5 mL dose (Moderna)	04/08/2023	0.5 mL				023C21A	Moderna US, Inc.				
COVID-19, mRNA, LNP-S. PF, 100 mcg/0.5 mL dose (Moderna)	03/06/2023	0.5 mL				003B21A	Moderna US, Inc.				
Diphtheria, Tetanus, Pertussis											
Tdap	12/10/10	0.5 mL	Intramuscular			3K44J	GlaxoSmithKline				
Tdap	07/21/13										

Problems

Reviewed Problems

Ex-smoker - Onset: 02/07/2023

Obesity - Onset: 02/07/2023

Patient follow-up to return when and if necessary - Onset: 02/07/2023

Social History

Reviewed Social History

Education and Occupation

What is the highest grade or level of school you have completed or the highest degree you have received?: GED or equivalent

Activities of Daily Living

Are you able to care for yourself?: Yes

Are you blind or do you have difficulty seeing?: No

Are you deaf or do you have serious difficulty hearing?: No

Do you have difficulty concentrating, remembering or making decisions?: No

Do you have difficulty walking or climbing stairs?: No

Do you have difficulty dressing or bathing?: No

Do you have difficulty doing errands alone?: No

Diet and Exercise

What type of diet are you following?: Regular (Notes: healthy)

What is your exercise level?: Occasional (Notes: PT)

Substance Use

Do you or have you ever smoked tobacco?: Former smoker

Do you or have you ever used any other forms of tobacco or nicotine?: No

What was the date of your most recent tobacco screening?: 02/07/2023

What is your level of alcohol consumption?: None

Do you use any illicit or recreational drugs?: No

What is your level of caffeine consumption?: Moderate (Notes: 1 cup of coffee/daily)

Home and Environment

Do you have any pets?: No

Surgical History

Reviewed Surgical History

Past Medical History

Reviewed Past Medical History

Screening

None recorded.

HPI

Christopher is here to establish care.

Last PCP: Department of corrections (1 month ago)

Last PE w/labs: Reports he has had labs but will work on obtaining

Meds:

Last dental cleaning: > 2 years

Last eye exam: > 2 years

Immunizations:

Skin cancer screening by dermatologist:

Colonoscopy or other CRC screenings: Has never had

Acute Concerns to address today: Requests refills of Baclofen (local)

Christopher Pritt is a 50 y/o male who presents today to establish care. He reports he was released from the department of

PRITT, Christopher (id #37379, dob: 07/21/1972)

corrections - 1/23/23 and needs to establish care. He has no concerns today other than possible getting his baclofen refilled. He reports he was in an MVA in 10/17/2017, which resulted in a diagnosis of avascular necrosis. After that during his arrest, he reports he was slammed down by law enforcement because they felt he was not complying. per patient report, he was actually having a seizure. This re-injured the joint (June, 2018). Since then, he reports a sensation of bone on bone. He has undergone one surgical repair and has been told he needs subsequent surgery.

He experiences shooting pains from his hip into his groin and down the leg. Reports that the baclofen helps with his pain management

L hip:

Provocation:

-- Aggravating factors: Walking, sitting/standing for long periods of time

-- Medications (baclofen)

Quality: Grinding pain

Region: L hip with radiating factors down the posterior thigh to the mid calf

Severity: 5/10

Timing: 2017

Brief New Patient ROS completed and documented.

ROS

Patient reports arthralgias/joint pain; L hip pain. He reports no headaches, no dizziness, no loss of consciousness, no weakness, no numbness, no slurred speech, and no seizures. He reports no chest pain, no palpitations, no edema, no known heart murmur, no syncope, and no lightheadedness. He reports no cough, no shortness of breath, no sputum production, no coughing up blood, and no wheezing. He reports no fatigue, no fever, no night sweats, no significant weight gain, no significant weight loss, and no excessive sleepiness during the day (daytime somnolence). He reports no heartburn, no dysphagia, no nausea, no vomiting, no diarrhea, no bloody stool, no rectal bleed, no recent change in bowel habits, and no constipation. He reports no dry eyes, no irritation, no vision change, no scotoma, and no diplopia.

ROS as noted in the HPI

Physical Exam

None recorded.

Assessment / Plan

New pt here today to establish care with CPFM.

1. Pt advised to schedule PE/FBW.
2. Requested medial records for review.
3. Pt advised insurance may not pay for all future suggested treatments, therapies, medications, procedures and referrals. This may limit CPFM in plan of care.
4. Pt advised to RTO at any time for any concerns, questions, illnesses, or injuries. In the event of an emergency, pt should proceed directly to ER or UC. Voiced understanding.
5. Pt given contact information for CPFM, and hours of operation.
6. Pt educated on CPFM late arrival, no-show policy.
7. Pt educated that CPFM will not prescribe narcotics, sleep aids, benzos, etc for chronic issues and medications for psychological issues will be limited to providers preference and comfort level.
8. Pt has signed, and acknowledged understanding of policies.

1. Administrative reason for encounter-

-- Will accept patient for primary care

-- Reviewed appropriateness of prescribing. Have requested records from DOC to evaluate renal function. If notes come in and reveal no renal dysfunction, okay to provide refill for baclofen 10 mg PO BID to bridge until physical

-- Patient will schedule a physical within the next two weeks, will do lab work at this visit

-- Will review preventative interventions at physical

All questions/concerns addressed

-- Patient has verbalized understanding and agreement with treatment plan

Z02.9: Encounter for administrative examinations, unspecified

2. Active or passive immunization -

Moderna booster

(verified by JA, MA) administered in LD without incident. Pt vitals were obtained and consent forms were filled out. Pt was provided VIS and advised to wait 10-15 minutes prior to leaving in case of adverse reaction. Pt had no questions or concerns when checked on him LKJ

Z23: Encounter for immunization

MODERNA COVID-19 BIVALENT BOOST(6YR UP)(PF) 50 MCG/0.5 ML IM SUSP(EUA) - INJECT 0.5 MILLILITER (50 MCG) BY INTRAMUSCULAR ROUTE ONCE AS BOOSTERDOSE AT LEAST 2 MONTHS AFTER COMPLETION OF PRIMARY VACCINATION COVID-19, mRNA, LNP-S, bivalent, PF, 50 mcg/0.5 mL dose (Moderna) Site: Deltoid, Left Qty: (0.5) mL Administered on 02/07/2023 Perform Date: 02/07/2023

3. Influenza vaccination declined -
received

Z28.21: Immunization not carried out because of patient refusal

PRITT, Christopher (id #37379, dob: 07/21/1972)

4. Body mass index 30+ - obesity

BMI: 31.7

Z68.31: Body mass index [BMI] 31.0-31.9, adult

LEARNING ABOUT OBESITY

WHEN YOU ARE OVERWEIGHT: CARE INSTRUCTIONS

Discussion Notes

Discussion Notes

New pt here today to establish care with CPFM. Health History reviewed.

1. Pt advised to schedule routine PE with labs

2. Requested medical records for review.

3. Pt advised insurance may not pay for all future suggested treatments, therapies, medications, procedures and referrals. This may limit CPFM in plan of care.

4. Pt advised to RTO at any time for any concerns, questions, illnesses, or injuries. In the event of an emergency, pt should proceed directly to ER or UC. Voiced understanding.

5. Pt given contact information for CPFM, and hours of operation.

6. Pt educated on CPFM late arrival, no-show policy.

7. Pt educated that CPFM will not prescribe narcotics, sleep aids, benzos, etc for chronic issues and medications for psychological issues will be limited to providers preference and comfort level.

-Patient will schedule for a PE in the near future.

-More than 50% of time was spent in counseling or coordination of care.

I discussed all the findings and full differential with the patient. Together, with patient, a plan of care was discussed including lab orders, imaging tests, medications and/or referrals. RBD & SE associated with current meds and potential interactions with other meds patient is taking. Pt accepts risks, responsibilities and wishes to continue current medications. I answered all the patient's questions and they voiced understanding about their visit, the workup and plan of care. Any tests, labs or referrals ordered were fully explained and the patient agreed with the plan and wishes to proceed. Pt will follow up on results of any tests, labs or referrals ordered today. LabCorp is available on-site for your convenience. Although, you may choose any other lab facility to have labs completed. Pt advised and understands it is their responsibility to check with insurance for tests, labs and apt coverage. Pt understands it is ultimately their choice to follow thru with recommendations, labs, imaging, medications and/or referrals

Return to Office

KEENAN GRIEGO, NP for NEW PROVIDER 40MIN at NORTH OFFICE on 02/17/2023 at 04:00 PM

Encounter Sign-Off

Encounter signed-off by KEENAN GRIEGO, NP, 02/08/2023.

Encounter performed and documented by KEENAN GRIEGO, NP

Encounter reviewed & signed by KEENAN GRIEGO, NP on 02/08/2023 at 10:51am

Imaging Results

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

MRI, HAND, W/O CONTRAST (#3979184, 04/06/2024 12:00am)

PENRAD

MAGING

6011 Woodmen Road Suite 10
Colorado Springs, CO 80923-2601
Phone: (877) 6-PENRAD
Phone: (719) 785-9000
Fax: (719) 867-7900
PENRAD.org

PATIENT NAME: Christopher M Pritt

DATE OF BIRTH: 7/21/1972

AGE: 51Y 8M

GENDER: Male

EXAM DATE: 4/6/2024

EXAM: MRI Hand Rt w/o Contrast . 73218

REFERRER: Griego, Keenan, NP

3T MRI Hand Rt w/o Contrast *

PRESCRIPTION HISTORY: Pain in right hand.

SUPPLEMENTAL HISTORY: Pain and swelling at 5th metacarpal, from a recent fall in January 2024 which aggravated prior injuries in the hand. No surgery reported.

COMPARISON: 11/30/2023 right hand radiographs 12/3/2023 Center Point Family Medical Group clinical note.

TECHNIQUE: High-field strength multiplanar, multisequence imaging of the hand without IV contrast.

FINDINGS: Posttraumatic deformity is seen within the fifth metacarpal. There is intense marrow edema throughout the fifth metacarpal. T1 hypointensity similar to skeletal muscle is seen within the majority of the fifth metacarpal with some relative sparing within its base.

Suspected periosteal reaction and intense soft tissue inflammatory changes are present about the fifth metacarpal. No discrete extraosseous soft tissue mass is evident. Mild effusion is present within the fifth metacarpal phalangeal (MCP) joint. Mild effusion is also present within the hamate-fifth metacarpal (CMC) joint.

No other concerning marrow signal changes are seen within the right wrist or hand. There are however scattered areas of patchy subcortical marrow edema and cystic change throughout the right wrist as well as the first through fourth MCP joints. Erosive changes are also evident within the right wrist. Erosive changes are also seen within the interphalangeal (IP) joint of the thumb as well as the proximal interphalangeal (PIP) joints of the index and long fingers.

Edema is present within the dorsal ulnar subcutaneous fat overlying the extensor carpi ulnaris (ECU) and extensor tendon complex to the small finger. Mild thickening and fluid within the ECU tendon sheath. The volar flexor tendons are intact.

IMPRESSION:

1. Posttraumatic deformity within the right fifth metacarpal. Pathologic marrow signal changes throughout the majority of the fifth metacarpal, most intense distally within the head and neck. The marrow findings may in whole, or part, be posttraumatic in nature, however, the findings are worrisome for osteomyelitis. No reported cancer history and metastatic infiltration is felt to be unlikely. A primary bone malignancy superimposed upon trauma would be highly unlikely but cannot be excluded on MRI. Orthopedic hand surgery consultation is recommended.
2. Probable periosteal reaction and intense soft tissue inflammatory changes about the fifth metacarpal. No extraosseous soft tissue mass is evident.
3. Mild volume effusions within the fifth CMC and MCP joints, Septic arthritis is not excluded.
4. Scattered erosive and cystic changes throughout the right carpus. There appear to be erosive changes within the IP joint of the thumb as well as the proximal IP joints of the second through fifth fingers. These erosive changes within the wrist and hand could represent erosive osteoarthritis or inflammatory arthropathy such as rheumatoid arthritis. Rheumatology consultation should be considered.

5. Edema within the subcutaneous fat overlying the dorsal ulnar aspect of the hand which could reflect recent blunt trauma. Mild ECU tenosynovitis is evident.

Thank you for this referral.

Signed By: Campbell, MD, John

Signed Date/Time: 4/8/2024 10:14 PM

Transcribed By: , th

Transcribed Date/Time: 4/8/2024 12:38 PM

Patient ID: 873958

Accession 5839480

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

MRI, KNEE, W/O CONTRAST (#3945259, 03/14/2024 12:00am)

PENRAD

IMAGING

6011 Woodmen Road Suite 10
Colorado Springs, CO 80923-2601
Phone: (877) 6-PENRAD
Phone: (719) 785-9000
Fax: (719) 867-7900
PENRAD.org

PATIENT NAME: Christopher M Pritt

DATE OF BIRTH: 7/21/1972

AGE: 51Y 7M

GENDER: Male

EXAM DATE: 3/14/2024

EXAM: MRI Ext Knee Rt w/o Contrast 73721

REFERRER: Griego, Keenan, NP

PRESCRIPTION HISTORY: Pain in right knoc.

SUPPLEMENTAL HISTORY: Right knee pain and weakness, with overuse due to left hip replacement. Recently he fell on the ice a few months ago, and it has gotten worse. Majority of pain is on the lateral side of the patella and shoots inferiorly. No prior surgery on right knoc.

COMPARISON: Radiographs 11/30/2023

TECHNIQUE: MRI Ext Kncc RI w/o Contrast * High-field multisequence noncontrast MRI imaging of the right knoc was performed. Sequences obtained include sagittal proton density, axial, sagittal, coronal oblique and coronal fat saturated proton density.

FINDINGS: Tendons of the extensor mechanism are contiguous. There is mild proximal patellar tendinopathy. The anterior and posterior cruciate ligaments appear normal.

The medial collateral ligament, fibular collateral ligament, iliotibial band, biceps femoris tendon, and popliteus tendon appear intact. There is soft tissue edema around the lateral collateral structures and the fibular head anterior ligament. The signal changes are just anterior to the peroneal nerve. The included portion of the nerve shows normal signal. There is marrow edema in the fibular head, at least some which appears to be due to degenerative joint discase at the proximal tibiofibular joint. There is a moderate degree of slightly heterogeneous elevated T2 signal in the anterior tibialis, associated with partial fatty atrophy. Findings suggest acute on chronic denervation injury.

In the medial knee compartment, no meniscal tear or focal articular cartilage injury is identified.

In the lateral knce compartment, no surfacing meniscal tear or focal chondral defect is identified.

In the patellofemoral compartment, there is moderate to severe articular cartilage loss at the patellar vertex and medial facet, some of which appears to be full-thickness and is associated with subarticular bone marrow edema. Moderate central and lateral trochlea chondral thinning is present, also with mild subchondral edema.

IMPRESSION:

1. Patellofemoral degenerative chondromalacia.
2. Mild proximal patellar tendinopathy.
3. Fibular head bone marrow edema and adjacent soft tissue edema, potentially related to trauma although the posterolateral corner structures appear to be intact. There is an element of osteoarthritis at the proximal tibiofibular joint which may explain the bone marrow edema. The peroneal nerve appears to be spared by this process but there is a combination of acute and chronic denervation atrophy of the anterior tibialis muscle which could be due to peroneal nerve injury.

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Thank you for this referral.

Signed By: Moore, MD, Nicholas

Signed Date/Time: 3/14/2024 01:22 PM

Transcribed Date/Time:

Patient ID: 873958

Accession 5817802

CENTER POINTE FAMILY MEDICINE sa 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

XR, HAND, 3 OR MORE VIEW (#3804436, 11/30/2023 12:00am)

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PATIENT NAME: Christopher M Pritt
DATE OF BIRTH: 7/21/1972
AGE: SIY 4M
GENDER: Male
EXAM DATE: 11/30/2023
EXAM: XR Hand Rt 34 View * 73130

REFERRER: Foley, Susan, NP

PRESCRIPTION HISTORY: Pain in right hand

SUPPLEMENTAL HISTORY: Patient reports right hand pain after multiple fractures 10 years ago. He states his pain has worsened recently. No previous surgery.

COMPARISON None available.

TECHNIQUE: XR Hand Rt 3+ View +

FINDINGS:

No acute fracture or dislocation. Chronic fractures on the fourth and fifth metacarpals. Mild osteoarthritis of the fifth carpometacarpal joint.

Mild osteoarthritis of the first interphalangeal joint.

Soft tissues are grossly unremarkable

IMPRESSION:

No acute fracture or dislocation.

Chronic fractures of the fourth and fifth metacarpals with mild osteoarthritis of the fifth carpometacarpal joint.

Mild osteoarthritis of the first interphalangeal joint.

Thank you for this referral.

Signed By: Velez, Erik
Signed Date/Time: 11/30/2023 04:22
Transcribed Date/Time:

Patient ID: 873958

Accession 5768993

CENTER POINTE FAMILY MEDICINE a 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

XR, KNEE, 3 VIEW (#3804434, 11/30/2023 12:00am)

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PATIENT NAME: Christopher M Pritt
DATE OF BIRTH: 7/21/1972
AGE: 51Y 4M
GENDER: Male
EXAM DATE: 11/30/2023
EXAM: XR Knee Rt 3 View 73562

REFERRER: Foley, Susan, NP

XR Kncc Rt 3 View

PRESCRIPTION HISTORY: Pain in right kncc

TECHNIQUE: 3 views of the right knoe were acquired.

COMPARISON There is no prior study available for comparison.

FINDINGS:

There is normal mineralization and alignment. No fracture or ossoous lesion is identified. The joint spaces are normal. There is no joint effusion. The soft tissues are normal.

IMPRESSION:

Normal right knec.

Thank you for this referral.

Signed By: Campbell, Tyler
Signed Date/Time: 11/30/2023 04:21 PM
Transcribed Date/Time:

Patient ID: 873453
Accession# 5768397

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

XR, SHOULDER, 2 OR MORE VIEW (#3804433, 11/30/2023 12:00am)

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PATIENT NAME: Christopher M Pritt

DATE OF BIRTH: 7/21/1972

AGE: 51Y 4M

GENDER: Male

EXAM DATE: 11/30/2023

EXAM: XR Shoulder Rt 24 View * I 73030

REFERRER: Foley, Susan, NP

XR Shoulder Rt 2+ View *

PRESCRIPTION HISTORY: Pain in right shoulder

TECHNIQUE: 3 views of the right shoulder were acquired.

COMPARISON There is no prior study available for comparison.

FINDINGS:

There is normal mineralization and alignment. No fracture or osseous lesion is identified.

The AC, CC and glenohumeral joints are normal.

The acromiohumeral distance is maintained.

The soft tissues are normal.

IMPRESSION:

Normal right shoulder.

Thank you for this referral.

Signed By: Campbeil, Tyler

Signed Date/Time: 11/30/2023 04:20 PM

Transcribed Date/Time

Patient ID: 873958

Accessionall: 5768994

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

XR, KNEE, 3 VIEW (#3561487, 06/15/2023 12:00am)

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PATIENT NAME: Christopher M Pritt
DATE OF BIRTH: 7/21/1972
AGE: 50Y 10M
GENDER: Male
EXAM DATE: 6/15/2023
EXAM: XR Knee Lt 3 View I 73562

REFERRER: Griego, Keenan, NP

PRESCRIPTION HISTORY: Pain in left knee joint.

SUPPLEMENTAL HISTORY Patient stated that he has left knee pain and was in a car accident several years ago.

COMPARISON: None available.

TECHNIQUE: XR Knee Lt 3 View

FINDINGS: Bones, joints, and soft tissues are within normal limits.

IMPRESSION: No significant bone or joint abnormality

Thank you for this referral.

Signed By: Snider, MD, Jon
Signed Date/Time 6/15/2023 04:24 PM
Transcribed Date/Time:

Patient ID: 873958
Accession 5665127

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126
PRITT, Christopher (id #37379, dob: 07/21/1972)

ELECTROCARDIOGRAM (#3463860, 04/13/2023 12:00am)

Report	Result	Ref. Range	Units	Status	Facility
Rate & Rhythm					
QRS					
PR Interval					
QRS Duration					
QT Interval					
Result Note	Normal ECG				

CENTER POINTE FAMILY MEDICINE is 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

XR, HIP, UNILATERAL, 2 OR 3 VIEW (#3401429, 03/01/2023 12:00am)

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PATIENT NAME: Christopher M Pritt

DATE OF BIRTH: 7/21/1972

AGE: SOY 7M

GENDER: Male

EXAM DATE: 3/1/2023

EXAM: XR Hip Lt 2-3 View Includes AP Pelvis I 73502

REFERRER: Griego, Keenan, NP

PRESCRIPTION HISTORY: Other osteonecrosis, unspecified femur.

SUPPLEMENTAL HISTORY: Patient states that he was in a car accident in 2017 and then reinjured his hip in 2018.

COMPARISON: 8/30/2019

TECHNIQUE: XR Hip Lt 2-3 View Includes AP Pelvis 4

FINDINGS/IMPRESSION: No radiographic evidence for acute pelvic fracture or dislocation. There is no significant change in chronic dysmorphic appearance of the proximal left femur with superior subluxation, and internal fixation of the left acetabulum and intertrochanteric region of the left femur. Four additional screws also remain present within the soft tissues medial to the proximal femur. There is mild right hip osteoarthritis. Osseous prominence at the right femoral head-neck junction which can be seen with femoral acetabular impingement and predispose to acetabular labral tears.

Thank you for this referral.

Signed By: Garvey, MD, Benjamin

Signed Date/Time: 3/2/2023 08:22 AM

Transcribed By: th

Transcribed Date/Time: 3/1/2023 05:48 PM

Patient ID: 873458

Accession#: 5597208

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

XR, CERVICAL SPINE, 2 OR 3 VIEW (#3400891, 03/01/2023 12:00am)

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PATIENT NAME: Christopher M Pritt

DATE OF BIRTH: 7/21/1972

AGE: SOY 7M

GENDER: Male

EXAM DATE: 3/1/2023

EXAM: XR Spine Cervical 2-3 View I 72040

REFERRER: Griego, Keenan, NP

PRESCRIPTION HISTORY: Localized swelling, mass and lump, neck.

SUPPLEMENTAL HISTORY: Patient states that he has had a lump on the side of his neck for the last couple of years.

COMPARISON: 6/1/2018

TECHNIQUE: XR Spine Cervical 2-3 View.

IMPRESSION: 4 views of the cervical spine: are submitted. There is straightening of the cervical spine with minimal anterolisthesis at C2-C3. Vertebral body heights are normal. There is mild degenerative disease throughout the cervical spine. Prevertebral soft tissues are normal.

Thank you for this referral.

Signed By: Greenwood, MD, Taylor

Signed Date/Time: 3/1/2023 04:30 PM

Transcribed Date/Time:

Patient ID: 873958

Accession 5602307

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

US, NECK, SOFT TISSUE (#3400723, 03/01/2023 12:00am)

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PATIENT NAME: Christopher M Pritt

DATE OF BIRTH: 7/21/1972

AGE: 50Y 7M

GENDER: Male

EXAM DATE: 3/1/2023

EXAM: US Soft Tissue Neck and/or Head I 76536

REFERRER: Griego, Keenan, NP

PRESCRIPTION HISTORY: Localized swelling, mass and lump, neck.

SUPPLEMENTAL HISTORY: Lump on right back of head for three years that appears to be getting bigger. No pain.

COMPARISON: None available.

TECHNIQUE: US Soft Tissue Neck and/or Head

FINDINGS: Targeted sonographic evaluation of the posterior upper neck was performed. There is subtle ill-defined isocchoic thickening in the deep subcutaneous tissues measuring approximately 7.4 x 1.1 x 6.3 cm. This could represent a nonencapsulated lipoma.

IMPRESSION: Possible posterior right neck subcutaneous nonencapsulated lipoma.

Thank you for this referral.

Signed By: Greenwood, MD, Taylor

Signed Date/Time: 3/1/2023 04:22 PM

Transcribed Date/Time:

Patient ID: 873458

Accession#: 5597207

PRITT, Christopher (id #37379, dob: 07/21/1972)

LAB* 05/09/2024 (#4023093, 05/01/2024 2:52pm)

5/9/2024 3:17:48 pm PDT

FROM:LABCORP LCLS BULK TO:7206671830

Page of 7

TO: Center Pointe Family Medicine ATTN:

Pritt, Christopher

DOB: 07/21/1972

Patient Report

labcorp

Patient ID: 40582

Age: 51

Account Number: 05027010

Specimen ID: 122-612-4987-0

Sex Male

Ordering Physician: K GRIEGO

Date Collected: 05/01/2024

Date Received: 05/01/2024

Date Reported: 05/09/2024

Fasting: No

Ordered Items: CBC With Differential/Platelet; Comp. Metabolic Panel (14); UA/M w/rflx Culture, Routine; Lipid Panel; Acute Hepatitis; Chlamydia/GC Amplification; PSA Total+% Free; Hemoglobin A1c; RPR, Rfx Qn RPR/Confirm TP; Vitamin D, 25-Hydroxy; HIV Ab/p24 Ag with Reflex; TSH Rfx on Abnormal to Free T4; Vitamin B12; Triiodothyronine (T3), Free; Venipuncture

General Comments & Additional Information

Clinical Info: SRC:UR

Date Collected: 05/01/2024

CBC With Differential/Platelet

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
WBC	8.9	8.0 06/08/2023	x10E3/uL	3.4-10.8
RBC ¹	5.72	5.66 06/08/2023	x10E6/uL	4.14-5.80
Hemoglobin	15.5	16.0 06/08/2023	g/dL	13.0-17.7
Hematocrit	49.6	47.5 06/08/2023	%	37.5-51.0
MCV	87	84 06/08/2023	fL	79-97
MCH	27.1	28.3 06/08/2023	pg	26.6-33.0
MCHC	31.3 Low	33.7 06/08/2023	g/dL	31.5-35.7
RDW 01	13.5	14.2 06/08/2023	%	11.6-15.4
Platelets	307	330 06/08/2023	x10E3/uL	150-450
Neutrophils	57	60 06/08/2023	%	Not Estab.
Lymphs	30	29 06/08/2023	%	Not Estab.
Monocytes	6	8 06/08/2023	%	Not Estab.
Eos	5	2 06/08/2023	%	Not Estab.
Basos	2	1 06/08/2023	%	Not Estab.
Neutrophils (Absolute)	5.1	4.8 06/08/2023	x10E3/uL	1.4-7.0
Lymphs (Absolute)	2.7	2.3 06/08/2023	x10E3/uL	0.7-3.1
Monocytes(Absolute)*	0.5	0.6 06/08/2023	x10E3/uL	0.1-0.9
Eos (Absolute)	0.5 High	0.2 06/08/2023	x10E3/uL	0.0-0.4
Baso (Absolute)	0.2	0.1 06/08/2023	x10E3/uL	0.0-0.2
Immature Granulocytes 41	0	0 06/08/2023	%	Not Estab.
Immature Grans (Abs)	0.0	0.0 06/08/2023	x10E3/uL	0.0-0.1

Comp. Metabolic Panel (14)

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Glucose	190 High	102 04/13/2023	mg/dL	70-99
BUN9	15	14 04/13/2023	mg/dL	6-24
Creatinine	0.95	1.20 04/13/2023	mg/dL	0.76-1.27
eGFR	97	74 04/13/2023	mL/min/1.73	>59
BUN/Creatinine Ratio	16	12 04/13/2023		9-20
Sodium 11	136	140 04/13/2023	mmol/L	134-144
Potassium01	4.0	4.5 04/13/2023	mmol/L	3.5-5.2
Chloride	100	105 04/13/2023	mmol/L	96-106
Carbon Dioxide, Total	18 Low	18 04/13/2023	mmol/L	20-29

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PRITT, Christopher (id #37379, dob: 07/21/1972)

5/9/2024 3:17:48 om PDT

TO Center Pointe Family Medicine ATTN:

FROM:LABCORP LCLS BULK TO:7206671830

Page 2 of 7

Pritt, Christopher

DOB: 07/21/1972

Patient Report

labcorp

Patient ID: 40582

Age: 51

Account Number: 05027010

Specimen ID: 122-612-4987-0

Sex: Male

Ordering Physician: K GRIEGO

Date Collected: 05/01/2024

Comp. Metabolic Panel (14) (Cont.)

Calcium	9.4	9.7	04/13/2023	mg/dL	8.7-10.2
Protein, Total	6.4	7.2	02/17/2023	g/dL	6.0-8.5
Albumin°1	3.8	4.6*	04/13/2023	g/dL	3.8-4.9
Globulin, Total	2.6	2.5	02/17/2023	g/dL	1.5-4.5
A/G Ratio	1.5	1.9	02/17/2023		1.2-2.2
Bilirubin, Total	0.2	0.3	02/17/2023	mg/dL	0.0-1.2
Alkaline Phosphatase	92	73	02/17/2023	IU/L	44-121
AST (SGOT)	34	17	02/17/2023	IU/L	0-40
ALT (SGPT)	41	19	02/17/2023	IU/L	0-44

Previous Reference Interval: (Albumin: 4.0-5.0 g/dL)

UA/M w/rflx Culture, Routine

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Urinalysis Gross Exam				
Specific Gravity	1.014			1.005-1.030
pH	6.0			5.0-7.5
Urine-Color	Yellow			Yellow
Appearance	Clear			Clear
WBC Esterase	Negative			Negative
Protein°1	Negative			Negative/Trace
Glucose	Negative			Negative
Ketones	Negative			Negative
Occult Blood	Negative			Negative
Bilirubin°2	Negative			Negative
Urobilinogen,Semi-Qn	0.2		mg/dL	0.2-1.0
Nitrite, Urine	Negative			Negative

Microscopic Examination5

Microscopic follows if indicated.

Microscopic Examination **

See below:

Microscopic was indicated and was performed.

WBC "	None seen	/hpf	0-5
RBC *	None seen	/hpf	0-2
Epithelial Cells (non renal) at	None seen	/hpf	0-10
Casts	None seen	/lpf	None seen
Bacteria	None seen		None seen/Few

Urinalysis Reflex

This specimen will not reflex to a Urine Culture.

Lipid Panel

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Cholesterol, Total	195		mg/dL	100-199
Triglycerides	185 High		mg/dL	0-149
HDL Cholesterol	48		mg/dL	>39
VLDL Cholesterol Cal	32		mg/dL	5-40

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Pritt, Christopher

DOB: 07/21/1972

Patient Report

labcorp

Patient ID: 40582

Age: 51

Account Number: 05027010

Specimen ID: 122-612-4987-0

Sex: Male

Ordering Physician: K GRIEGO

Date Collected: 05/01/2024

Lipid Panel (Cont.)

LDL Chol Calc (NIH)	115	High	mg/dL	0-99
---------------------	-----	------	-------	------

Acute Hepatitis

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Hep AAb, IgM 92	Negative			Negative
HBsAg Screen 02	Negative	Negative 12/26/2019		Negative
Hep B Core Ab, IgM 2	Negative	Negative 12/26/2019		Negative
HCVAb	Reactive Abnormal	Reactive 02/17/2023		Non Reactive
Hepatitis C Quantitation 03	HCV Not Detected	HCV Not Detected 02/17/2023	IU/mL	

Test Information:

The quantitative range of this assay is 15 IU/mL to 100 million IU/mL.

Interpretation:

Positive HCV antibody screen without the presence of HCV RNA is consistent with a resolved past infection or a false positive HCV antibody. Consider repeat testing after one month.

Chlamydia/GCAmplification

Test	Current Result and Flag	Units	Reference Interval
Chlamydia trachomatis, NAA I	Negative		Negative
Neisseria gonorrhoeae, NAA	Negative I		Negative

PSA Total+% Free

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Prostate Specific Ag	15.6 High		ng/mL	0.0-4.0

Roche ECLIA methodology.
According to the American Urological Association, Serum PSA should decrease and remain at undetectable levels after radical prostatectomy. The AUA defines biochemical recurrence as an initial PSA value 0.2 ng/mL or greater followed by a subsequent confirmatory PSA value 0.2 ng/mL or greater.
Values obtained with different assay methods or kits cannot be used interchangeably. Results cannot be interpreted as absolute evidence of the presence or absence of malignant disease.

PSA, Free	0.55	ng/mL	N/A
-----------	------	-------	-----

Roche ECLIA methodology,

% Free PSA	3.5	%
------------	-----	---

The table below lists the probability of prostate cancer for men with non-suspicious DRE results and total PSA between 4 and 10 ng/mL, by patient age (Catalona et al, JAMA 1998, 279:1542)

% Free PSA	50-64 yr	65-75 yr
0.00-10.00%	56%	55%
10.01-15.00%	24%	35%
15.01-20.00%	17%	23%
20.01-25.00%	10%	28%
>25.00%	5%	9%

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PRITT, Christopher (id #37379, dob: 07/21/1972)

5/9/2024 3:17:48 pm PDT

TO Center Pointe Family Medicine ATTN:
Pritt, Christopher

FROM:LABCORP LCLS BULK TO:7206671830

Page 4 of 7

Patient ID: 40582
Specimen ID: 122-612-4987-0

DOB: 07/21/1972

Age: 51
Sex: Male

Patient Report

Account Number: 05027010
Ordering Physician: K GRIEGO

labcorp

Date Collected: 05/01/2024

PSA Total+% Free (Cont.)

Please note: Catalona et al did not make specific
recommendations regarding the use of
percent free PSA for any other population
of men.

Hemoglobin A1c

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Hemoglobin A1c°	6.2 High	6.1 02/17/2023	%	4.8-5.6
Please Note:02				
Prediabetes: 5.7 - 6.4				
Diabetes: >6.4				
Glycemic control for adults with diabetes: <7.0				

RPR, Rfx Qn RPR/Confirm TP

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
RPR	Non Reactive I			Non Reactive

Vitamin D, 25-Hydroxy

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Vitamin D, 25-Hydroxy	36.3	58.2 08/24/2023	ng/mL	30.0-100.0
Vitamin D deficiency has been defined by the Institute of Medicine and an Endocrine Society practice guideline as a level of serum 25-OH vitamin D less than 20 ng/mL (1,2). The Endocrine Society went on to further define vitamin D insufficiency as a level between 21 and 29 ng/mL (2).				
1. IOM (Institute of Medicine). 2010. Dietary reference intakes for calcium and D. Washington DC: The National Academies Press.				
2. Holick MF, Binkley NC, Bischoff-Ferrari HA, et al. Evaluation, treatment, and prevention of vitamin D deficiency: an Endocrine Society clinical practice guideline. JCEM. 2011 Jul; 96(7) 1911-30.				

HIV Ab/p24 Ag with Reflex

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
HIV Ab/p24 Ag Screen	Non Reactive	Non Reactive 12/26/2019		Non Reactive
HIV-1/HIV-2 antibodies and HIV-1 p24 antigen were NOT detected. There is no laboratory evidence of HIV infection.				
HIV Negative				

TSH Rfx on Abnormal to Free T4

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
TSH	I 2.010 I	3.850 02/17/2023	uIU/mL	0.450-4.500

Vitamin B12

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Vitamin	I 759 I		pg/mL	232-1245

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PRITT, Christopher (id #37379, dob: 07/21/1972)

5/9/2024 3:17:48 pm PDT

TO Center Pointe Family Medicine ATTN:
Pritt, Christopher

FROM:LABCORP LCLS BULK TO 7206671830

Page 5 of 7

DOB: 07/21/1972	Patient Report	labcorp
Patient ID: 40582	Age: 51	Account Number: 05027010
Specimen ID: 122-612-4987-0	Sex: Male	Ordering Physician: K GRIEGO

Date Collected: 05/01/2024

Triiodothyronine (T3), Free

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Trilodothyronine (T3), Free of I	3.5 I	2.6 02/17/2023	pg/mL	2.0-4.4

Disclaimer

The Previous Result is listed for the most recent test performed by Labcorp in the past 5 years where there is sufficient patient demographic data to match the result to the patient. Results from certain tests are excluded from the Previous Result display.

Icon Legend

Out of Reference Range Critical or Alert

Performing Labs

01: DV Labcorp Denver, 8490 Upland Drive, Englewood, CO 80112-7115 Dir: Earle Collum, MD
02: PDLCA Labcorp Phoenix, 5005 S 40th Street Ste 1200, Phoenix, AZ 85040-2969 Dir: Earle Collum, MD
03: BN Labcorp Burlington, 1447 York Court, Burlington, NC 27215-3361 Dir: Sanjai Nagendra, MD
04: CETWE - Labcorp Phoenix, 5005 S 40th Street Ste 1200, Phoenix, AZ 85040-2969 Dir: Earle Collum, MD
For Inquiries, the physician may contact Branch: 303-792-2600 Lab: 303-792-2600

Patient Details

Pritt, Christopher
20555 SAHARA DR, PEYTON, co, 80831

Phone: 719-439-4150
Date of Birth: 07/21/1972
Age: 51
Sex: Male
Patient ID: 40582
Alternate Patient ID: 40582

Physician Details

K GRIEGO
Center Pointe Family Medicine
1 Oakwood Park Plaza #101, Castlerock, co,
80104

Phone: 720-667-1825
Account Number: 05027010
Physician ID: 1346858404
NPI: 1346858404

Specimen Details

Specimen ID: 122-612-4987-0
Control ID: 315731CE853
Alternate Control Number: 315731CE8535
Date Collected: 05/01/2024 1452 Local
Date Received: 05/01/2024 0000 ET
Date Entered: 05/01/2024 1527 ET
Date Reported: 05/09/2024 1808 ET

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Date Created and Stored 05/09/24 1813 ET Final Report Page 5 of 7

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

PRITT, Christopher (id #37379, dob: 07/21/1972)

5/9/2024 3:17:48 pm PDT

FROM:LABCORP LCLS BULK TO:7206671830

Page 6 of 7

TO:Center Pointe Family Medicine ATTN:

Pritt, Christopher

DOB: 07/21/1972

Patient Report

labcorp

Patient ID: 40582

Age: 51

Account Number: 05027010

Specimen ID: 122-512-4987-0

Sex: Male

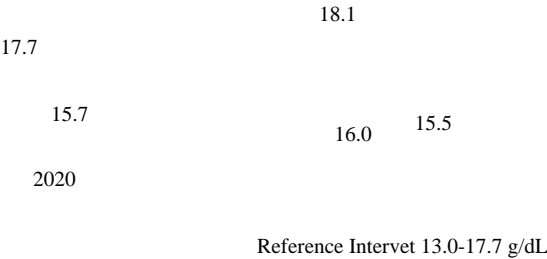
Ordering Physician: K GRIEGO

Historical Results & Insights

Labcorp offers historical lab results data with easy-to-interpret visualizations to provide a more complete picture of a patient's lab history and improve patient care.

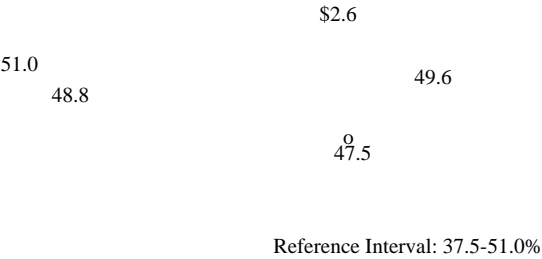
Hemoglobin

o Current Result: 15.5 g/dL



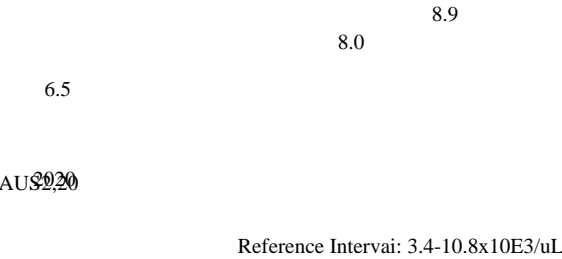
Hematocrit

o Current Result: 49.6 %



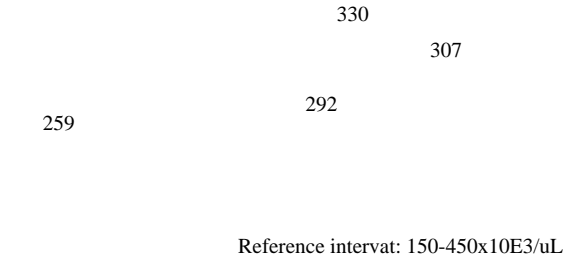
WBC

o Current Result: 8.9 x10E3/uL



Platelets

Current Result: 307 x10E3/uL



labcorp

Date Created and Stored 05/09/24 1813 ET Final Report

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PRITT, Christopher (id #37379, dob: 07/21/1972)

5/9/2024 3:17:48 pm PDT

FROM:LABCORP LCLS BULK TO 7206671830

Page 7 of 7

TO Center Pointe Family Medicine ATTN:

Pritt, Christopher

DOB: 07/21/1972

Patient Report

labcorp

Patient ID: 40582

Age: 51

Account Number: 05027010

Specimen ID: 122-512-4987-0

Sex: Male

Ordering Physician: K GRIEGO

Creatinine

Current Result: 0.95 mg/dL

1.27

1.20

1.03

1.03

0.95

0.99

0.93

0.78

0.76

0.86

Reference Interval: 0.76-1.27 mg/dl

eGFR

o Current Result: 97 mL/min/1.73

105

97

74

Reference interval: >59 mL/min/1.73

TRIODOXYTHYRONINE (T3), FREE 05/09/2024 (#4023038, Final, 05/01/2024 2:52pm)

o Current Result: 190 mg/dL

KEENAN GRIEGO, AGNP

Performing Lab
HIGH

LABCORP DENVER (01)
LABCORP DENVER
EARLE COLLUM
8490 UPLAND DRIVE
ENGLEWOOD CO 801127115

190

Account ID: 05027010

133

Specimen/Accession ID

-345731CE8505

Specimen Source

Specimen Col. Date

05/01/2024 14:52 MAY 1, 2024

Result Status

Final

Specimen Rec. Date

05/01/2024 00:00

Report Status

Reference interval: 70-99 mg/dL

SpecimenReportdDatervals (Oct 27, to 19, 2020: 65-99 mg/dL),

Report

Result

Ref. Range

Units

Status

Lab

labcorp

TRIODOXYTHYRONINE (T3), FREE

3.5

2.0-4.4

Date Created and Stored 05/09/24 18:13 ET Final Report Page 7 of 7

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CENTER POINTE FAMILY MEDICINE a 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

VITAMIN B12-001503-P 05/09/2024 (#4023037, Final, 05/01/2024 2:52pm)

Ordering Provider		KEENAN GRIEGO, AGNP		Performing Lab		LABCORP DENVER (01) LABCORP DENVER EARLE COLLUM 8490 UPLAND DRIVE ENGLEWOOD CO 801127115 Account ID: 05027010	
Specimen/Accession ID		315731CE8535		Specimen Source			
Specimen Coll. Date		05/01/2024 14:52		Result Status		Final	
Specimen Rec. Date		05/01/2024 00:00		Report Status			
Specimen Reported Date		05/09/2024 18:08					
Report	Result	Ref. Range		Units	Status	Lab	
VITAMIN B12	759	232-1245		PG/ML	Final	01	
RESULT NOTE	FASTING NO						

TSH RFX ON ABNORMAL TO FREE T4 05/09/2024 (#4023036, Final, 05/01/2024 2:52pm)

Ordering Provider		KEENAN GRIEGO, AGNP		Performing Lab		LABCORP DENVER (01) LABCORP DENVER EARLE COLLUM 8490 UPLAND DRIVE ENGLEWOOD CO 801127115 Account ID: 05027010	
Specimen/Accession ID		315731CE8535		Specimen Source			
Specimen Coll. Date		05/01/2024 14:52		Result Status		Final	
Specimen Rec. Date		05/01/2024 00:00		Report Status			
Specimen Reported Date		05/09/2024 18:08					
Report	Result	Ref. Range		Units	Status	Lab	
TSH	2,010	0.450-4.500		UIU/ML	Final	01	
RESULT NOTE	FASTING NO						

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126
PRITT, Christopher (id #37379, dob: 07/21/1972)

HIV AB/P24 AG WITH REFLEX 05/09/2024 (#4023035, Final, 05/01/2024 2:52pm)

Ordering Provider	KEENAN GRIEGO, AGNP	Performing Lab	LABCORP PHOENIX (02) LABCORP PHOENIX EARLE COLLUM 5005 S 40TH STREET STE 1200 PHOENIX, AZ 850402969 Account ID: 05027010		
Specimen/Accession ID	315731CE8535	Specimen Source			
Specimen Coll. Date	05/01/2024 14:52	Result Status	Final		
Specimen Rec. Date	05/01/2024 00:00	Report Status			
Specimen Reported Date	05/09/2024 18:08				
Report	Result	Ref. Range	Units	Status	Lab
HIV AB/P24 AG SCREEN	NON REACTIVE	NON REACTIVE		Final	02
	HIV-1/HIV-2 antibodies and htV-1.024 antigen were NOT detected. There is no Laboratory evidence of HIV infection HIV Negative				
RESULT NOTE	FASTING NO				

CENTER POINTE FAMILY MEDICINE a 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126
PRITT, Christopher (id #37379, dob: 07/21/1972)

VITAMIN D, 25-HYDROXY-081950-P 05/09/2024 (#4023034, Final, 05/01/2024 2:52pm)

Ordering Provider	KEENAN GRIEGO, AGNP		Performing Lab	LABCORP DENVER (01) LABCORP DENVER EARLE COLLUM 8490 UPLAND DRIVE ENGLEWOOD CO 801127115 Account ID: 05027010	
Specimen/Accession ID	315731CE8535		Specimen Source		
Specimen Coll. Date	05/01/2024 14:52		Result Status	Final	
Specimen Rec. Date	05/01/2024 00:00		Report Status		
Specimen Reported Date	05/09/2024 18:08				
Report	Result	Ref. Range	Units	Status	Lab
VITAMIN D. 25-HYDROXY	36.3	30.0-100.0	NG/ML	Final	01

Vitamin D deficiency has been dsfined by the Inscitute of Medicine and an Endocrine Society practice guideline as a level of serum 25-OH vilamin D less than 20 ng/mL (1,2) The Endocrine Society went on to further define vitamin D insufficiency 2.5 a level between 21 and 29 3g/mL (2)
1. ICM (Institute of Medicine) 2010. Dietary reference intakes for calcium and D. Washington DC: The National Acaderies Press.
2. Tolick MT, Binkley NC, IA, en al. Evaluation, treatment, and prevention of vitamin D deficiency: an Endocrine Society clinical practice guideline. 2011 Jul: 96(7):1911-30.

RESULT NOTE FASTING NO

PRITT, Christopher (id #37379, dob: 07/21/1972)

RPR, RFX QN RPR/CONFIRM TP 05/09/2024 (#4023033, Final, 05/01/2024 2:52pm)

Ordering Provider		KEENAN GRIEGO, AGNP		Performing Lab		LABCORP DENVER (01) LABCORP DENVER EARLE COLLUM 8490 UPLAND DRIVE ENGLEWOOD CO 801127115 Account ID: 05027010	
Specimen/Accession ID		315731CE8535		Specimen Source			
Specimen Coll. Date		05/01/2024 14:52		Result Status		Final	
Specimen Rec. Date		05/01/2024 00:00		Report Status			
Specimen Reported Date		05/09/2024 18:08					
Report	Result	Ref. Range		Units	Status	Lab	
RPR	NON REACTIVE	NON REACTIVE			Final	01	
RESULT NOTE	FASTING NO						

HEMOGLOBIN A1C-001453-P 05/09/2024 (#4023032, Final, 05/01/2024 2:52pm)

Ordering Provider	KEENAN GRIEGO, AGNP			Performing Lab	LABCORP DENVER (01) LABCORP DENVER EARLE COLLUM 8490 UPLAND DRIVE ENGLEWOOD CO 801127115 Account ID: 05027010	
Specimen/Accession ID	315731CE8535			Specimen Source		
Specimen Coll. Date	05/01/2024 14:52			Result Status	Final	
Specimen Rec. Date	05/01/2024 00:00			Report Status		
Specimen Reported Date	05/09/2024 18:08					
Report	Result	Ref. Range	Units	A		Status
HEMOGLOBIN A1C	6.2	4.8-5.6	%	ABOVE HIGH NORMAL		Final
		Prediabetes: 5.7 - 6.4 Diabetes: >6.4 Glycemic control for adults with diabetes: <7.0				
RESULT NOTE	FASTING NO					

PSA TOTAL+% FREE 05/09/2024 (#4023031, Final, 05/01/2024 2:52pm)

Ordering Provider	KEENAN GRIEGO, AGNP			Performing Lab	LABCORP DENVER (01) LABCORP DENVER EARLE COLLUM 8490 UPLAND DRIVE ENGLEWOOD CO 801127115 Account ID: 05027010		
Specimen/Accession ID	315731CE8535			Specimen Source			
Specimen Coll. Date	05/01/2024 14:52			Result Status	Final		
Specimen Rec. Date	05/01/2024 00:00			Report Status			
Specimen Reported Date	05/09/2024 18:08						
Report	Result	Ref. Range	Units	A		Status	Lab
PROSTATE SPECIFIC AG	15.6	0.0-4.0	NG/ML	ABOVE HIGH NORMAL		Final	01
Roche ECLIA methodology. According to the American Urological Association, Serum PSA should decrease and remain at undetectable levels after radical prostatectomy. The AUA defines biochemical recurrence as an initial PSA value 0.2 ng/mL or greater followed by a subsequent confirmatory PSA value 0.2 ng/mL or greater. Values obtained with different assay methods or kits cannot be used interchangeably. Results cannot be interpreted as absolute evidence of the presence or absence of malignant disease							
PSA, FREE	0.55	N/A	NG/ML			Final	01
Roche ECLIA methodclogy.							
% FREE PSA	3.5		%			Final	01
The table below lists the probability of prostato cancor for men with non-suspicious DFE results and total PSA between 4 and 10 ng/mL, by patient ago (Catalora et al. JAMA 1998, 279:1542)							
				% Free PSA	50-64 yr	65-78 ye	
				0.00-10.00%	56%	55%	
				10.01-15.00%	24%	35%	
				15.01-20.00%	17%	23%	
				20.01-25.00%	10%	20%	
				>25.00%	5%	9	
Please note: Catalona et did not make specific recommendations regarding the use of percent free PSA for any other population of men.							
RESULT NOTE	FASTING NO						

CENTER POINTE FAMILY MEDICINE a 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126
PRITT, Christopher (id #37379, dob: 07/21/1972)

CHLAMYDIA/GC AMPLIFICATION-183194-P 05/09/2024 (#4023030, Final, 05/01/2024 2:52pm)

Ordering Provider	KEENAN GRIEGO, AGNP	Performing Lab	LABCORP PHOENIX (04) LABCORP PHOENIX EARLE COLLUM 5005 S 40TH STREET STE 1200 PHOENIX, AZ 850402969 Account ID: 05027010			
Specimen/Accession ID	315731CE8535	Specimen Source	UR			
Specimen Coll. Date	05/01/2024 14:52	Result Status	Final			
Specimen Rec. Date	05/01/2024 00:00	Report Status				
Specimen Reported Date	05/09/2024 18:08					
Report		Result	Ref. Range	Units	Status	Lab
CHLAMYDIA TRACHOMATIS, NAA		NEGATIVE	NEGATIVE		Final	04
NEISSERIA GONORRHOEAE, NAA		NEGATIVE	NEGATIVE		Final	04
RESULT NOTE	FASTING NO					

ACUTE HEPATITIS 05/09/2024 (#4023029, Final, 05/01/2024 2:52pm)

Ordering Provider	KEENAN GRIEGO, AGNP	Performing Lab	LABCORP PHOENIX (02) LABCORP PHOENIX EARLE COLLUM 5005 S 40TH STREET STE 1200 PHOENIX, AZ 850402969 LABCORP BURLINGTON (03) LABCORP BURLINGTON SANJAI NAGENDRA 1447 YORK COURT BURLINGTON NC 272153361 Account ID: 05027010
Specimen/Accession ID	315731CE8535	Specimen Source	
Specimen Coll. Date	05/01/2024 14:52	Result Status	Final
Specimen Rec. Date	05/01/2024 00:00	Report Status	
Specimen Reported Date	05/09/2024 18:08		

CENTER POINTE FAMILY MEDICINE 6 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Report	Result	Ref. Range	Units	A	Status	Lab
HEP A AB, IGM	NEGATIVE	NEGATIVE			Final	02
HBSAG SCREEN	NEGATIVE	NEGATIVE			Final	02
HEP B CORE AB, IGM	NEGATIVE	NEGATIVE			Final	02
HCV AB	REACTIVE	NON REACTIVE		ABNORMAL	Final	02
HEPATITIS C QUANTITATION	HCV NOT DETECTED		IU/ML		Final	03
HCV LOG10	NP				Cancelled	03
TEST INFORMATION:	COMMENT				Final	03
	The quantitative mango of this assay is 15 10/mL to 100 million 10/TL					
INTERPRETATION:	COMMENT				Final	03
	Positive HCV antibody screen without the presence of HCV RNA is consistent with a resolved pass infection or a false positive HCV antibody. Consider repeat testing after one month.					
RESULT NOTE	FASTING NO					

LIPID PANEL-303756-P 05/09/2024 (#4023028, Final, 05/01/2024 2:52pm)

Ordering Provider	KEENAN GRIEGO, AGNP		Performing Lab		LABCORP DENVER (01) LABCORP DENVER EARLE COLLUM 8490 UPLAND DRIVE ENGLEWOOD CO 801127115 Account ID: 05027010		
Specimen/Accession ID	315731CE8535		Specimen Source				
Specimen Coll. Date	05/01/2024 14:52		Result Status		Final		
Specimen Rec. Date	05/01/2024 00:00		Report Status				
Specimen Reported Date	05/09/2024 18:08						
Report	Result	Ref. Range	Units	A		Status	Lab
CHOLESTEROL, TOTAL	195	100-199	MG/DL			Final	01
TRIGLYCERIDES	185	0-149	MG/DL	ABOVE HIGH NORMAL		Final	01
HDL CHOLESTEROL	48	>39	MG/DL			Final	01
VLDL CHOLESTEROL CAL	32	5-40	MG/DL			Final	01
LDL CHOL CALC (NIH)	115	0-99	MG/DL	ABOVE HIGH NORMAL		Final	01
COMMENT:	NP					Cancelled	01
RESULT NOTE	FASTING NO						

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

UA/M W/RFLX CULTURE, ROUTINE 05/09/2024 (#4023027, Final, 05/01/2024 2:52pm)

Ordering Provider	KEENAN GRIEGO, AGNP		Performing Lab	LABCORP DENVER (01) LABCORP DENVER EARLE COLLUM 8490 UPLAND DRIVE ENGLEWOOD CO 801127115 Account ID: 05027010		
Specimen/Accession ID	315731CE8535		Specimen Source			
Specimen Coll. Date	05/01/2024 14:52		Result Status	Final		
Specimen Rec. Date	05/01/2024 00:00		Report Status			
Specimen Reported Date	05/09/2024 18:08					
Report	Result	Ref. Range	Units	Status	Lab	
SPECIFIC GRAVITY	1.014	1.005-1.030		Final	01	
PH	6.0	5.0-7.5		Final	01	
URINE-COLOR	YELLOW	YELLOW		Final	01	
APPEARANCE	CLEAR	CLEAR		Final	01	
WBC ESTERASE	NEGATIVE	NEGATIVE		Final	01	
PROTEIN	NEGATIVE	NEGATIVE/TRACE		Final	01	
GLUCOSE	NEGATIVE	NEGATIVE		Final	01	
KETONES	NEGATIVE	NEGATIVE		Final	01	
OCCULT BLOOD	NEGATIVE	NEGATIVE		Final	01	
BILIRUBIN	NEGATIVE	NEGATIVE		Final	01	
UROBILINOGEN,SEMI-QN	0.2	0.2-1.0	MG/DL	Final	01	
NITRITE, URINE	NEGATIVE	NEGATIVE		Final	01	
MICROSCOPIC EXAMINATION	COMMENT			Final	01	
	Microscopic fellows if indicated.					
MICROSCOPIC EXAMINATION	SEE BELOW:			Final	01	
	Micoscopic was indicated and was performed					
WBC	NONE SEEN	0-5	/HPF	Final	01	
RBC	NONE SEEN	0-2	/HPF	Final	01	
EPITHELIAL CELLS (NON RENAL)	NONE SEEN	0-10	/HPF	Final	01	
EPITHELIAL CELLS (RENAL)	NP			Cancelled	01	
CASTS	NONE SEEN	NONE SEEN	/LPF	Final	01	

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126
PRITT, Christopher (id #37379, dob: 07/21/1972)

CAST TYPE	NP		Cancelled	01
CRYSTALS	NP		Cancelled	01
CRYSTAL TYPE	NP		Cancelled	01
MUCUS THREADS	NP		Cancelled	01
BACTERIA	NONE SEEN	NONE SEEN/FEW	Final	01
YEAST	NP		Cancelled	01
TRICHOMONAS	NP		Cancelled	01
COMMENT	NP		Cancelled	01
URINALYSIS REFLEX	COMMENT		Final	01
This specimen WAT not reflex to a Urire Culture.				
RESULT NOTE	FASTING NO			

COMP. METABOLIC PANEL (14)-322000-P 05/09/2024 (#4023026, Final, 05/01/2024 2:52pm)

Ordering Provider	KEENAN GRIEGO, AGNP	Performing Lab	LABCORP DENVER (01) LABCORP DENVER EARLE COLLUM 8490 UPLAND DRIVE ENGLEWOOD CO 801127115 Account ID: 05027010
Specimen/Accession ID	315731CE8535	Specimen Source	
Specimen Coll. Date	05/01/2024 14:52	Result Status	Final
Specimen Rec. Date	05/01/2024 00:00	Report Status	
Specimen Reported Date	05/09/2024 18:08		

CENTER POINTE FAMILY MEDICINE a 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Report	Result	Ref. Range	Units	A	Status	Lab
GLUCOSE	190	70-99	MG/DL	ABOVE HIGH NORMAL	Final	01
BUN	15	6-24	MG/DL		Final	01
CREATININE	0.95	0.76-1.27	MG/DL		Final	01
EGFR	97	>59	ML/MIN/1.73		Final	01
BUN/CREATININE RATIO	16	9-20			Final	01
SODIUM	136	134-144	MMOL/L		Final	01
POTASSIUM	4.0	3.5-5.2	MMOL/L		Final	01
CHLORIDE	100	96-106	MMOL/L		Final	01
CARBON DIOXIDE, TOTAL	18	20-29	MMOL/L	BELOW LOW NORMAL	Final	01
CALCIUM	9.4	8.7-10.2	MG/DL		Final	01
PROTEIN, TOTAL	6.4	6.0-8.5	G/DL		Final	01
ALBUMIN	3.8	3.8-4.9	G/DL		Final	01
GLOBULIN, TOTAL	2.6	1.5-4.5	G/DL		Final	01
A/G RATIO	1.5	1.2-2.2			Final	01
BILIRUBIN, TOTAL	0.2	0.0-1.2	MG/DL		Final	01
ALKALINE PHOSPHATASE	92	44-121	IU/L		Final	01
AST (SGOT)	34	0-40	IU/L		Final	01
ALT (SGPT)	41	0-44	IU/L		Final	01
RESULT NOTE	FASTING NO					

CBC WITH DIFFERENTIAL/PLATELET 05/09/2024 (#4023025, Final, 05/01/2024 2:52pm)

Ordering Provider	KEENAN GRIEGO, AGNP	Performing Lab	LABCORP DENVER (01) LABCORP DENVER EARLE COLLUM 8490 UPLAND DRIVE ENGLEWOOD CO 801127115 Account ID: 05027010
Specimen/Accession ID	315731CE8535	Specimen Source	
Specimen Coll. Date	05/01/2024 14:52	Result Status	Final
Specimen Rec. Date	05/01/2024 00:00	Report Status	
Specimen Reported Date	05/09/2024 18:08		

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Report	Result	Ref. Range	Units		Status	Lab
WBC	8.9	3.4-10.8	X10E3/UL		Final	01
RBC	5.72	4.14-5.80	X10E6/UL		Final	01
HEMOGLOBIN	15.5	13.0-17.7	G/DL		Final	01
HEMATOCRIT	49.6	37.5-51.0	%		Final	01
MCV	87	79-97	FL		Final	01
MCH	27.1	26.6-33.0	PG		Final	01
MCHC	31.3	31.5-35.7	G/DL	BELOW LOW NORMAL	Final	01
RDW	13.5	11.6-15.4	%		Final	01
PLATELETS	307	150-450	X10E3/UL		Final	01
NEUTROPHILS	57	NOT ESTAB.	%		Final	01
LYMPHS	30	NOT ESTAB.	%		Final	01
MONOCYTES	6	NOT ESTAB.	%		Final	01
EOS	5	NOT ESTAB.	%		Final	01
BASOS	2	NOT ESTAB.	%		Final	01
IMMATURE CELLS	NP				Cancelled	01
NEUTROPHILS (ABSOLUTE)	5.1	1.4-7.0	X10E3/UL		Final	01
LYMPHS (ABSOLUTE)	2.7	0.7-3.1	X10E3/UL		Final	01
MONOCYTES(ABSOLUTE)	0.5	0.1-0.9	X10E3/UL		Final	01
EOS (ABSOLUTE)	0.5	0.0-0.4	X10E3/UL	ABOVE HIGH NORMAL	Final	01
BASO (ABSOLUTE)	0.2	0.0-0.2	X10E3/UL		Final	01
IMMATURE GRANULOCYTES	0	NOT ESTAB.	%		Final	01
IMMATURE GRANS (ABS)	0.0	0.0-0.1	X10E3/UL		Final	01
NRBC	NP				Cancelled	01
HEMATOLOGY COMMENTS:	NP				Cancelled	01
RESULT NOTE	FASTING NO SRC:UR					

CENTER POINTE FAMILY MEDICINE sit 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

VITAMIN D, 25-HYDROXY-081950-P 08/25/2023 (#3664868, Final, 08/24/2023 2:02pm)

Ordering Provider	KEENAN GRIEGO, NP		Performing Lab	LABCORP DENVER (01) LABCORP DENVER EARLE COLLUM 8490 UPLAND DRIVE ENGLEWOOD, CO 801127115 Account ID: 05311140		
Specimen/Accession ID	285214CE8535		Specimen Source			
Specimen Coll. Date	08/24/2023 14:02		Result Status	Final		
Specimen Rec. Date	08/24/2023 00:00		Report Status			
Specimen Reported Date	08/25/2023 08:14					
Report	Result	Ref. Range	Unils	Status	Lab	
VITAMIN D, 25-HYDROXY	58.2	30.0-100,0	ng/mL	Final	01	
Vitamin D deficiency has been defined by the Institute of Medicine and an Endocrine Society practice guideline as a level of serum 25-OH vitamin D less than 20 ng/mL (1,2). The Endocrine Society went on to further define vitamin D insufficiency as a level between 21 and 29 ng/mL (2). 1. ICM (Institute of Medicine) 2010. Dietary reference intakes for calcium and D. Washington DC: The National Academies Press. 2. Tolick ME, Binkley NC, Bischoff-Teran TA, et al. Evaluation, treatment, and prevention of vitamin D deficiency: an Endocrine Society clinical practice guideline. JCEM. 2011 Jul; 96(11):1911-30.						
RESULT NOTE	FASTING YES					

CENTER POINTE FAMILY MEDICINE a 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126
PRITT, Christopher (id #37379, dob: 07/21/1972)

FERRITIN-004598-P 06/09/2023 (#3553398, Final, 06/08/2023 2:29pm)

Ordering Provider		KEENAN GRIEGO, NP		Performing Lab		LABCORP DENVER (02) LABCORP DENVER EARLE COLLUM 8490 UPLAND DRIVE ENGLEWOOD. CO 801127115 Account ID: 05311140	
Specimen/Accession ID		284556CE8535		Specimen Source			
Specimen Coll. Date		06/08/2023 14:29		Result Status		Final	
Specimen Rec. Date		06/08/2023 00:00		Report Status			
Specimen Reported Date		06/09/2023 17:08					
Report	Result	Ref. Range		Units		Status	Lab
FERRITIN	87	30-400		ng/mL		Final	02
RESULT NOTE	FASTING NO						

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126
PRITT, Christopher (id #37379, dob: 07/21/1972)

IRON AND TIBC 06/09/2023 (#3553397, Final, 06/08/2023 2:29pm)

Ordering Provider	KEENAN GRIEGO, NP	Performing Lab	LABCORP DENVER (02) LABCORP DENVER EARLE COLLUM 8490 UPLAND DRIVE ENGLEWOOD. CO 801127115 Account ID: 05311140			
Specimen/Accession ID	284556CE8535	Specimen Source				
Specimen Coll. Date	06/08/2023 14:29	Result Status	Final			
Specimen Rec. Date	06/08/2023 00:00	Report Status				
Specimen Reported Date	06/09/2023 17:08					
Report	Result	Ref. Range	Units	Status	Lab	
IRON BIND.CAP. (TIBC)	303	250-450	ug/dL	Final	02	
UIBC	236	111-343	ug/dL	Final	02	
IRON	67	38-169	ug/dL	Final	02	
IRON SATURATION	22	15-55	%	Final	02	
RESULT NOTE	FASTING NO					

HEMATOPATH CONSULTATION, SMEAR 06/09/2023 (#3553396, Final, 06/08/2023 2:29pm)

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Ordering Provider	KEENAN GRIEGO, NP	Performing Lab	LABCORP LAKEWOOD (01) LABCORP LAKEWOOD BRYAN COFFING 7444 WEST ALASKA DRIVE SUITE 250 LAKEWOOD CO 802263328 LABCORP DENVER (02) LABCORP DENVER EARLE COLLUM 8490 UPLAND DRIVE ENGLEWOOD CO 801127115 Account ID: 05311140
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Specimen/Accession ID	284556CE8535	Specimen Source	
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Specimen Coll. Date	06/08/2023 14:29	Result Status	Final
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Specimen Rec. Date	06/08/2023 00:00	Report Status	
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Specimen Reported Date	06/09/2023 17:08		
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Report	Result	Ref. Range	Units	Status	Lab
WBC	Appear normal.			Final	01
RBC	Appear normal.			Final	01
PLTS	Appear normal.			Final	01
COMMENTS/RECOMMENDATIONS	Comment			Final	01

Peripheral smear within normal limits.

PATHOLOGIST	Comment			Final	01
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Reviewed by: Coara Mankey, MD, Pathologist
NPI- 1093838799

WBC	8.0	3.4-10.8	x10E3/uL	Final	02
RBC	5.66	4.14-5.80	x10E6/uL	Final	02
HEMOGLOBIN	16.0	13.0-17.7	g/dL	Final	02
HEMATOCRIT	47.5	37.5-51.0	%	Final	02
MCV	84	79-97	fL	Final	02
MCH	28.3	26.6-33.0	pg	Final	02
MCHC	33.7	31.5-35.7	g/dL	Final	02
RDW	14.2	11.6-15.4	%	Final	02
PLATELETS	330	150-450	x10E3/uL	Final	02
NEUTROPHILS	60	NOT ESTAB.	%	Final	02
LYMPHS	29	NOT ESTAB.	%	Final	02
MONOCYTES	8	NOT ESTAB.	%	Final	02

CENTER POINTE FAMILY MEDICINE a 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

EOS	2	NOT ESTAB.	%	Final	02
BASOS	1	NOT ESTAB.	%	Final	02
IMMATURE CELLS	NP			Cancelled	02
NEUTROPHILS (ABSOLUTE)	4.8	1.4-7.0	x10E3/uL	Final	02
LYMPHS (ABSOLUTE)	2.3	0.7-3.1	x10E3/uL	Final	02
MONOCYTES(ABSOLUTE)	0.6	0.1-0.9	x10E3/uL	Final	02
EOS (ABSOLUTE)	0.2	0.0-0.4	x10E3/uL	Final	02
BASO (ABSOLUTE)	0.1	0.0-0.2	x10E3/uL	Final	02
IMMATURE GRANULOCYTES	0	NOT ESTAB,	%	Final	02
IMMATURE GRANS (ABS)	0.0	0.0-0.1	x10E3/uL	Final	02
NRBC	NP			Cancelled	02
HEMATOLOGY COMMENTS:	NP			Cancelled	02
RESULT NOTE	FASTING NO				

ALBUMIN 04/14/2023 (#3468252, Final, 04/13/2023 12:07pm)

Ordering Provider	KEENAN GRIEGO, NP	Performing Lab	LABCORP DENVER (01) LABCORP DENVER EARLE COLLUM 8490 UPLAND DRIVE ENGLEWOOD, CO 801127115 Account ID: 05311140		
Specimen/Accession ID	284556CE8535	Specimen Source			
Specimen Coll. Date	04/13/2023 12:07	Result Status	Final		
Specimen Rec. Date	04/13/2023 00:00	Report Status			
Specimen Reported Date	04/14/2023 15:08				
Report	Result	Ref. Range	Units	Status	Lab
ALBUMIN	4.6	4.0-5.0	G/DL	Final	01
RESULT NOTE	FASTING NO				

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

VITAMIN D, 25-HYDROXY-081950-P 04/14/2023 (#3468251, Final, 04/13/2023 12:07pm)

Ordering Provider	KEENAN GRIEGO, NP		Performing Lab		LABCORP DENVER (01) LABCORP DENVER EARLE COLLUM 8490 UPLAND DRIVE ENGLEWOOD, CO 801127115 Account ID: 05311140	
Specimen/Accession ID	284556CE8535		Specimen Source			
Specimen Coll. Date	04/13/2023 12:07		Result Status		Final	
Specimen Rec. Date	04/13/2023 00:00		Report Status			
Specimen Reported Date	04/14/2023 15:08					
Report	Result	Ref. Range	Units	A	Status	Lab
VITAMIN D, 25-HYDROXY	25.0	30.0-100.0	NG/ML	BELOW LOW NORMAL	Final	01
<p>Vitamin D deficiency has been defined by the Institute of Medicine and an Endocrine Society practice guideline as a level of serum 25-OH vitamin D less than 20 ng/mL (1,2) The Endocrine Society went on to further define vitamin D insufficiency as a level between 21 and 29 ng/mL (2)</p> <p>1. IOM (Institute of Medicine) 2010. Dietary reference intakes for calcium and D. Washington DC: The National Academies Press.</p> <p>2. Holick MF, Binkley NC, Bischoff-Ferrari HA, et al. Evaluation, treatment, and prevention of vitamin D deficiency: an Endocrine Society clinical practice guideline. JCEM. 2011 Jul; 96(7) :1911-30.</p>						
RESULT NOTE	FASTING NO					

CENTER POINTE FAMILY MEDICINE a 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126
PRITT, Christopher (id #37379, dob: 07/21/1972)

BASIC METABOLIC PANEL (8)-322758-P 04/14/2023 (#3468250, Final, 04/13/2023
12:07pm)

Ordering Provider	KEENAN GRIEGO, NP		Performing Lab		LABCORP DENVER (01) LABCORP DENVER EARLE COLLUM 8490 UPLAND DRIVE ENGLEWOOD, CO 801127115 Account ID: 05311140	
Specimen/Accession ID	284556CE8535		Specimen Source			
Specimen Coll. Date	04/13/2023 12:07		Result Status		Final	
Specimen Rec. Date	04/13/2023 00:00		Report Status			
Specimen Reported Date	04/14/2023 15:08					
Report	Result	Ref. Range	Units		Status	Lab
GLUCOSE	102	70-99	MG/DL	ABOVE HIGH NORMAL	Final	01
BUN	14	6-24	MG/DL		Final	01
CREATININE	1.20	0.76-1.27	MG/DL		Final	01
EGFR	74	>59	ML/MIN/1.73		Final	01
BUN/CREATININE RATIO	12	9-20			Final	01
SODIUM	140	134-144	MMOL/L		Final	01
POTASSIUM	4.5	3.5-5.2	MMOL/L		Final	01
CHLORIDE	105	96-106	MMOL/L		Final	01
CARBON DIOXIDE, TOTAL	18	20-29	MMOL/L	BELOW LOW NORMAL	Final	01
CALCIUM	9.7	8.7-10.2	MG/DL		Final	01
RESULT NOTE	FASTING NO					

CBC WITH DIFFERENTIAL/PLATELET 04/14/2023 (#3468249, Final, 04/13/2023 12:07pm)

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Ordering Provider	KEENAN GRIEGO, NP	Performing Lab	LABCORP DENVER (01) LABCORP DENVER EARLE COLLUM 8490 UPLAND DRIVE ENGLEWOOD, CO 801127115 Account ID: 05311140
Specimen/Accession ID	284556CE8535	Specimen Source	
Specimen Coll. Date	04/13/2023 12:07	Result Status	Final
Specimen Rec. Date	04/13/2023 00:00	Report Status	
Specimen Reported Date	04/14/2023 15:08		

CENTER POINTE FAMILY MEDICINE a 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Report	Result	Ref. Range	Units	A	Status	Lab
WBC	5.4	3.4-10.8	X10E3/UL		Final	01
RBC	6.30	4.14-5.80	X10E6/UL	ABOVE HIGH NORMAL	Final	01
HEMOGLOBIN	18.1	13.0-17.7	G/DL	ABOVE HIGH NORMAL	Final	01
HEMATOCRIT	52.6	37.5-51.0	%	ABOVE HIGH NORMAL	Final	01
MCV	84	79-97	FL		Final	01
MCH	28.7	26.6-33.0	PG		Final	01
MCHC	34.4	31.5-35.7	G/DL		Final	01
RDW	14.1	11.6-15.4	%		Final	01
PLATELETS	312	150-450	X10E3/UL		Final	01
NEUTROPHILS	53	NOT ESTAB.	%		Final	01
LYMPHS	37	NOT ESTAB.	%		Final	01
MONOCYTES	7	NOT ESTAB.	%		Final	01
EOS	1	NOT ESTAB.	%		Final	01
BASOS	2	NOT ESTAB.	%		Final	01
IMMATURE CELLS	NP				Cancelled	01
NEUTROPHILS (ABSOLUTE)	2.9	1.4-7.0	X10E3/UL		Final	01
LYMPHS (ABSOLUTE)	2.0	0.7-3.1	X10E3/UL		Final	01
MONOCYTES(ABSOLUTE)	0.4	0.1-0.9	X10E3/UL		Final	01
EOS (ABSOLUTE)	0.1	0.0-0.4	X10E3/UL		Final	01
BASO (ABSOLUTE)	0.1	0.0-0.2	X10E3/UL		Final	01
IMMATURE GRANULOCYTES	0	NOT ESTAB.	%		Final	01
IMMATURE GRANS (ABS)	0.0	0.0-0.1	X10E3/UL		Final	01
NRBC	NP				Cancelled	01
HEMATOLOGY COMMENTS:	NP				Cancelled	01
RESULT NOTE	FASTING NO					

PRITT, Christopher (id #37379, dob: 07/21/1972)

HEMOGLOBIN A1C-001453-P 02/24/2023 (#3393590, 02/23/2023)

02/24/2023 9:59AM FAX 7192826106

Pritt, Christopher

CPFM Powers

0001/0003

Patient ID: 37379

DOB: 07/21/1972

Specimen ID: 048-612-3711-0

Age: so

Sex: Male

Patient Report

PRITT. C 07/21/72

Account Number 05311140

Ordering Physician: GRIEGO

Date Collected: 02/17/2023

Date Received: 02/17/2023

Date Reported: 02/22/2023

4543541x8535 First Page LabRest

Hemoglobin Ordered Items: Alc; STATUS TSH Rfx REPORT; on Abnormal CBC With to Free Differential/Platelet; 14; Thyroid hormone Comp. (T3), Metabolic Panel (14); HCV Antibody to Quant PCR;

STATUS REPORT

Date Collected: 02/17/2023

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
STATUS REPORT	will Follow			
CBC With Differential/Platelet				
Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
WBC "	6.9			
A RBC "	6.10			
Hemoglobin	17.6	High	x10E3/uL	3.4-10.8
Hematocrit	50.9		x10E6/uL	4.14-5.80
MCV	83		g/dL	13.0-17.7
MCH	28.9		%	37.5-51.0
MCHC *	34.6		fl.	79-97
RDW	14.5		pg	26.6-33.0
Platelets	292		g/dL	31.5-35.7
Neutrophils	48		%	11.6-15.4
Lymphs	40		x10E3/uL	150-450
Monocytes	8		%	Not Estab.
Eos	2		%	Not Estab.
Basos	2		%	Not Estab.
Neutrophils (Absolute) (2	2		%	Not Estab.
Lymphs (Absolute)	3.4		%	Not Estab.
Monocytes(Absolute)	2.8		x10E3/uL	1.4-7.0
Eos (Absolute)	0.6		x10E3/ut	0.7-3.1
Baso (Absolute)	0.1		x10E3/ut.	0.1-0.9
Immature Granulocytes ²	0.1		x10E3/ut	0.0-0.4
Immature Grans (Abs)	0		x10E3/ut.	0.0-0.2
Comp. Metabolic Panel (14)	0.0		%	Not Estab.
			x10E3/uL	0.0-0.1

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Glucose	84			
BUN	19		mg/dl.	70-99
Creatinine	0.86		mg/dL	6-24
eGFR	105		mg/dL	0.76-1.27
A BUN/Creatinine Ratio	22	High	mL/min/1.73	>59
Sodium	139			9-20
Potassium'	4.5		mmol/L	134-144
Chloride	104		mmol/L	3.5-5.2
Carbon Dioxide, Total	19	Low	mmol/L	96-106
			mmol/L	20-29

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PRITT, Christopher (id #37379, dob: 07/21/1972)

02/24/2023 9:59AM FAX 7192828108

CPFM Powers

0002/0003

Pritt, Christopher

DOB: 07/21/1972

Patient Report

labcorp

Patient ID: 37379

Age: 50

Account Number 05311140

Specimen ID: 048-612-5711-8

Sex: Male

Ordering Physician: K GRIEGO

Date Collected: 02/17/2023

Comp. Metabolic Panel (14) (Cont.)

Calcium	9.4	mg/dl	8.7-10.2
Protein, Total"	7.2	g/dL	6.0-8.5
Albumin	4.7	g/dL	4.0-5.0
Globulin, Total	2.5	g/dL	1.5-4.5
A/G Ratio	1.9		1.2-2.2
Bilirubin, Total 02	0.3	mg/dL	0.0-1.2
Alkaline Phosphatase	73	IU/L	44-121
AST (SGOT)	17	IU/L	0-40
ALT (SGPT)	19	IU/L	0-44

HCV Antibody RFX to Quant PCR

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
A HCV Ab 52	Reactive Abnormal			Non Reactive
Hepatitis C Quantitation	HCV Not Detected		IU/mL	

Test Information:

The quantitative range of this assay is 15 IU/mL to 100 million IU/al.

Interpretation:4

Positive HCV antibody screen without the presence of HCV RNA is consistent with a resolved past infection or a false positive HCV antibody Consider repeat testing after one month.

Hemoglobin A1c

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
A Hemoglobin A1c9	6.1 High		%	4.8-5.6
Please Note:02	Prediabetes: 5.7 and 6.4 Diabetes: >6.4 Glycemic control for adults with diabetes: <7.0			

TSH Rfx on Abnormal to Free T4

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
TSH	3.850		uIU/mL	0.450-4.500

Triiodothyronine (T3), Free

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Triiodothyronine (T3), Free	2.6		pg/mL	2.0-4.4

Disclaimer

The Previous Result is listed for the most recent test performed by Labcorp In the past 5 years where there is sufficient patient demographic data to match the result to the patient. Results from certain tests are excluded from the Previous Result display,

Icon Legend

A Out of Reference Range Critical or Alert

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Date Created and Stored 02/23/23 1151 8 ET Preliminary Report Page 2 of 3

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PRITT, Christopher (id #37379, dob: 07/21/1972)

02/24/2023 10:00AM FAX 7192828108

CPFM Powers

0003/0003

Pritt, Christopher

DOB: 07/21/1972

Patient Report

Patient ID: 37379

Specimen ID: 048-612-5711-0

Age: 50

Sex: Male

Account Number: 05311140

Ordering Physician: K GRIEGO

labcorp

Performing Labs

01: BN w Labcorp Burlington 1447 York Court, Burlington, NC, 27215-3361 Dir: Sanjai Nagendra, MD

02: DV Labcorp Denver 8490 Upland Drive, Englewood, CO, 80112-7115 Dir: Earle Collum, MD

For Inquiries, the physician may contact Branch: 303-792-2600 Lab: 303-792-2600

PRITT C 07/21/72 #37379 HBA1C

*4543541y8535 Last Page LabResit

Patient Details

Pritt, Christopher

20555 SAHARA DR, PEYTON, co, 80831

Phone: 719-439-4150

Date of Birth: 07/21/1972

Age: 50

Sex: Male

Patient ID: 37379

Alternate Patient ID: 37379

Physician Details

K GRIEGO

Center Pointe Family Medicine

5410 Powers Center Point #230, Colorado

Springs, co, 80920

Phone: 719-282-5100

Account Number: 05311140

Physician ID: 1346858404

NPI: 1345858404

Specimen Details

Specimen ID: 048-612-5711-0

Control ID: 279490CE853

Alternate Control Number: 279490CE8535

Date Collected: 02/17/2023 1639 Local

Date Received: 02/17/2023 0000 ET

Date Entered: 02/17/2023 1719 ET

Date Reported: 02/22/2023 2007 ET

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of 3

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PRITT, Christopher (id #37379, dob: 07/21/1972)

HEMOGLOBIN A1C-001453-P 02/23/2023 (#3392097, 02/23/2023)

02/23/2023 12:31PM FAX 7192826106

CPFM Powers

0001/0003

Pritt, Christopher

DOB: 07/21/1972

Patient Report

PRITT, 07/21/72 #37379

Patient ID: 37379

Age: 50

Account Number: 05311140

Specimen ID: 048-612-5711-0

Sex Male

Ordering Physician: K GRIEGO

Date Collected: 02/17/2023

Date Received: 02/17/2023

Date Reported: 02/22/2023

4543541x8535 First Page LabResit

Ordered Items: STATUS REPORT; CBC With Differential/Platelet; Comp. Metabolic Panel (14); HCV Antibody RFX to Quant PCR; Hemoglobin A1c; TSH Rfx on Abnormal to Free T4; Trilodothyronine (T3), Free; Venipuncture

Date Collected: 02/17/2023

STATUS REPORT

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
STATUS REPORT	Will Follow			
CBC With Differential/Platelet				
Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
WBC	6.9		x10E3/uL	3.4-10.8
A RBC"	6.10 High		x10E6/uL	4.14-5.80
Hemoglobin	17.6		g/dL	13.0-17.7
Hernatocrit®	50.9		%	37.5-51.0
MCV Superscript(a)	83		fl.	79-97
MCH	28.9		pg	26.6-33.0
MCHC	34.6		g/dL	31.5-35.7
	14.5		%	11.6-15.4
Platelets	292		x10E3/uL	150-450
Neutrophils	48		%	Not Estab.
Lymphs td	40		%	Not Estab.
Monocytes	8		%	Not Estab.
Eos	2		%	Not Estab.
Basos	2		%	Not Estab.
Neutrophils (Absolute) de	3.4		x10E3/uL	1.4-7.0
Lymphs (Absolute)	2.8		x10E3/ul.	0.7-3.1
Monocytes(Absolute)	0.6		x10E3/uL	0.1-0.9
Eos (Absolute)	0.1		x10E3/uL	0.0-0.4
Baso (Absolute)	0.1		x10E3/uL	0.0-0.2
Immature Granulocytes '2	0		%	Not Estab.
Immature Grans (Abs)	0.0		x10E3/uL	0.0-0.1

Comp. Metabolic Panel (14)

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Glucose	84		mg/dl.	70-99
BUN°1	19		mg/dL	6-24
Creatinine	0.86		mg/dl	0.76-1.27
eGFR	105		mL/min/1.73	>59
A BUN/Creatinine Ratio	22 High			9-20
Sodium (2	139		mmol/L	134-144
Potassium	4.5		mmol/L	3.5-5.2
Chloride	104		mmol/L	96-106
V Carbon Dioxide, Total	19 Low		mmol/L	20-29

labcorp

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PRITT, Christopher (id #37379, dob: 07/21/1972)

02/23/2023 12:31PM FAX 7182828108

CPFM Powers

0002/0003

Pritt, Christopher

DOB: 07/21/1972

Patient Report

labcorp

Patient ID: 37379

Age: so

Account Number: 05311140

Specimen ID: 048-612-5711-0

Sex: Male

Ordering Physician: K GRIEGO

Date Collected: 02/17/2023

Comp. Metabolic Panel (14) (Cont.)

Calcium	9.4	mg/dL	8.7-10.2
Protein, Total *	7.2	g/dL	6.0-8.5
Albumin ^o	4.7	g/dL	4.0-5.0
Globulin, Total	2.5	g/dL	1.5-4.5
A/G Ratio	1.9		1.2-2.2
Bilirubin, Total	0.3	mg/dL	0.0-1.2
Alkaline Phosphatase	73	IU/L	44-121
AST (SGOT)	17	IU/L	0-40
ALT (SGPT)	19	IU/L	0-44

HCV Antibody RFX to Quant PCR

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
HCVAb	Reactive Abnormal			Non Reactive
Hepatitis C Quantitation	HCV Not Detected		IU/mL	

Test information:

The quantitative range of this assay is 15 IU/mL to 100 million IU/mL.

Interpretation:4

Positive HCV antibody screen without the presence of HCV RNA is consistent with a resolved past infection or a false positive HCV antibody. Consider repeat testing after one month.

Hemoglobin Alc

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
A Hemoglobin A1C ^o	6.1 High		%	4.8-5.6
Please Note:	Prediabetes: 5.7 - 6.4 Diabetes: >6.4 Glycemic control for adults with diabetes: <7.0			

TSH Rfx on Abnormal to Free T4

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
TSH	3.850		uIU/mL	0.450-4.500

Triiodothyronine (T3), Free

Test	Current Result and Rag	Previous Result and Date	Units	Reference interval
Triiodothyronine (T3), Free	2.6		pg/mL	2.0-4.4

Disclaimer

The Previous Result is listed for the most recent test performed by Labcorp in the past 5 years where there is sufficient patient demographic data to match the result to the patient. Results from certain tests are excluded from the Previous Result display.

Icon Legend

A Out of Reference Range Critical or Alert

labcorp

Date Created and Stored 02/23/23 1151 ET Preliminary Report Page 2 of 3

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CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

02/23/2023 12:32PM FAX 7182826108

CPFM Powers

00003/0003

Pritt, Christopher

DOB: 07/21/1972

Patient Report

labcorp

Patient ID: 27379

Age: 50

Account Number: 05311140

Specimen ID: 048-612-5711-0

Sex Male

Ordering Physician: K GRIEGO

Performing Labs

PRITT, 07/21/72 #37379 HBA1C

01; BN Labcorp Burlington 1447 York Court, Burlington, NC, 27215-3361 Dir: Sanjai Nagendra, MD

02: DV - Labcorp Denver 8490 Upland Drive, Englewood, CO, 80112-7115 Dir: Earle Collum, MD

For Inquiries, the physician may contact Branch: 303-792-2600 Lab: 303-792-2600

* 4543541y8535 Last Page LabResit

Patient Details

Pritt, Christopher

20555 SAHARA DR, PEYTON, co, 80831

Phone: 719-439-4150

Date of Birth: 07/21/1972

Age: 50

Sex: Male

Patient ID: 37379

Alternate Patient ID: 37379

Physician Details

K GRIEGO

Center Pointe Family Medicine

5410 Powers Center Point #230, Colorado

Springs, co, 80920

Phone: 719-282-6100

Account Number: 05311140

Physician ID: 1346858404

NPI: 1346858404

Specimen Details

Specimen ID: 048-612-5711-0

Control ID: 279490CE853

Alternate Control Number: 279490CE8535

Date Collected: 02/17/2023 1639 Local

Date Received: 02/17/2023 0000 ET

Date Entered: 02/17/2023 1719 ET

Date Reported: 02/22/2023 2007 ET

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Date Created and Stored 02/23/23 1151 ET Preliminary Report Page 3 of

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CENTER POINTE FAMILY MEDICINE a 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126
PRITT, Christopher (id #37379, dob: 07/21/1972)

TRIIODOTHYRONINE (T3), FREE 02/28/2023 (#3397809, Final,

02/17/2023 4:39pm)

Ordering Provider	KEENAN GRIEGO, NP	Performing Lab	LABCORP DENVER (01) LABCORP DENVER EARLE COLLUM 8490 UPLAND DRIVE ENGLEWOOD, CO 801127115 Account ID: 05311140			
Specimen/Accession ID	279490CE8535	Specimen Source				
Specimen Coll. Date	02/17/2023 16:39	Result Status	Final			
Specimen Rec. Date	02/17/2023 00:00	Report Status				
Specimen Reported Date	02/28/2023 16:09					
Report		Result	Ref. Range	Units	Status	Lab
TRIIODOTHYRONINE (T3), FREE		2.6	2.0-4.4	pg/mL	Final	01
RESULT NOTE	FASTING NO					

TSH RFX ON ABNORMAL TO FREE T4 02/28/2023 (#3397808, Final, 02/17/2023 4:39pm)

Ordering Provider	KEENAN GRIEGO, NP	Performing Lab	LABCORP DENVER (01) LABCORP DENVER EARLE COLLUM 8490 UPLAND DRIVE ENGLEWOOD, CO 801127115 Account ID: 05311140			
Specimen/Accession ID	279490CE8535	Specimen Source				
Specimen Coll. Date	02/17/2023 16:39	Result Status	Final			
Specimen Rec. Date	02/17/2023 00:00	Report Status				
Specimen Reported Date	02/28/2023 16:09					
Report	Result	Ref. Range	Units	Status	Lab	
TSH	3.850	0.450-4.500	uIU/mL	Final	01	
RESULT NOTE	FASTING NO					

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

HEMOGLOBIN A1C-001453-P 02/28/2023 (#3397807, Final, 02/17/2023 4:39pm)

Ordering Provider	KEENAN GRIEGO, NP		Performing Lab		LABCORP DENVER (01) LABCORP DENVER EARLE COLLUM 8490 UPLAND DRIVE ENGLEWOOD. CO 801127115 Account ID: 05311140		
Specimen/Accession ID	279490CE8535		Specimen Source				
Specimen Coll. Date	02/17/2023 16:39		Result Status		Final		
Specimen Rec. Date	02/17/2023 00:00		Report Status				
Specimen Reported Date	02/28/2023 16:09						
Report	Result	Ref. Range	Units	A		Status	Lab
HEMOGLOBIN A1C	6.1	4.8-5.6	%	Above High Normal		Final	01
Prediabetes 5.7 - 6.4 Diabetes >6.4 Glycemic control for adults with diabetes: <7.0							
RESULT NOTE	FASTING NO						

CENTER POINTE FAMILY MEDICINE sill 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

HCV ANTIBODY RFX TO QUANT PCR 02/28/2023 (#3397806, Final, 02/17/2023 4:39pm)

Ordering Provider	KEENAN GRIEGO, NP	Performing Lab	LABCORP DENVER (01) LABCORP DENVER EARLE COLLUM 8490 UPLAND DRIVE ENGLEWOOD. CO 801127115 LABCORP BURLINGTON (02) LABCORP BURLINGTON SANJAI NAGENDRA 1447 YORK COURT BURLINGTON NC 272153361 Account ID: 05311140			
Specimen/Accession ID	279490CE8535	Specimen Source				
Specimen Coll. Date	02/17/2023 16:39	Result Status	Final			
Specimen Rec. Date	02/17/2023 00:00	Report Status				
Specimen Reported Date	02/28/2023 16:09					
Report	Result	Ref. Range	Units	Status	Lab	
HCV AB	Reactive	NON REACTIVE	Abnormal	Final	01	
HEPATITIS C QUANTITATION	HCV Not Detected		IU/mL	Final	02	
HCV LOG10	NP			Cancelled	02	
TEST INFORMATION:	Comment				02	
	The quancitative mange of this assey is 15 TU/mT to 100 million TU/TL.					
INTERPRETATION:	Comment				02	
	Positive HCV antibody screen without the uresence of HCV RNA is consistent with E resolved pass infection or a false positive HCV antibody. Consider repeat testing after one month.					
RESULT NOTE	FASTING NO					

CENTER POINTE FAMILY MEDICINE a 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126
PRITT, Christopher (id #37379, dob: 07/21/1972)

COMP. METABOLIC PANEL (14)-322000-P 02/28/2023 (#3397803, Final, 02/17/2023

4:39pm)

Ordering Provider	KEENAN GRIEGO, NP		Performing Lab	LABCORP DENVER (01) LABCORP DENVER EARLE COLLUM 8490 UPLAND DRIVE ENGLEWOOD, CO 801127115 Account ID: 05311140	
Specimen/Accession ID	279490CE8535		Specimen Source		
Specimen Coll. Date	02/17/2023 16:39		Result Status	Final	
Specimen Rec. Date	02/17/2023 00:00		Report Status		
Specimen Reported Date	02/28/2023 1 16:09				
Report	Result	Ref. Range	Units	Status	Lab
GLUCOSE	84	70-99	mg/dL	Final	01
BUN	19	6-24	mg/dL	Final	01
CREATININE	0.86	0.76-1.27	mg/dL	Final	01
EGFR	105	>59	mL/min/1,73	Final	01
BUN/CREATININE RATIO	22	9-20	Above High Normal		Final 01
SODIUM	139	134-144	mmol/L	Final	01
POTASSIUM	4.5	3.5-5.2	mmol/L	Final	01
CHLORIDE	104	96-106	mmol/L	Final	01
CARBON DIOXIDE, TOTAL	19	20-29	mmol/L	Below Low Normal	Final 01
CALCIUM	9.4	8.7-10.2	mg/dL	Final	01
PROTEIN, TOTAL	7.2	6.0-8.5	g/dL	Final	01
ALBUMIN	4.7	4.0-5.0	g/dL	Final	01
GLOBULIN, TOTAL	2.5	1.5-4.5	g/dl.	Final	01
A/G RATIO	1,9	1.2-2.2		Final	01
BILIRUBIN, TOTAL	0,3	0.0-1.2	mg/dL	Final	01
ALKALINE PHOSPHATASE	73	44-121	IU/L	Final	01
AST (SGOT)	17	0-40	IU/L	Final	01
ALT (SGPT)	19	0-44	IU/L	Final	01
RESULT NOTE	FASTING NO				

CBC WITH DIFFERENTIAL/PLATELET 02/28/2023 (#3397793, Final, 02/17/2023 4:39pm)

CENTER POINTE FAMILY MEDICINE - 37 WIDEFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Ordering Provider	KEENAN GRIEGO, NP	Performing Lab	LABCORP DENVER (01) LABCORP DENVER EARLE COLLUM 8490 UPLAND DRIVE ENGLEWOOD, CO 801127115 Account ID: 05311140
Specimen/Accession ID	279490CE8535	Specimen Source	
Specimen Coll. Date	02/17/2023 16:39	Result Status	Final
Specimen Rec. Date	02/17/2023 00:00	Report Status	
Specimen Reported Date	02/28/2023 16:09		

CENTER POINTE FAMILY MEDICINE a 37 WIDFIELD BLVD., COLORADO SPRINGS CO 80911-2126

PRITT, Christopher (id #37379, dob: 07/21/1972)

Report	Result	Ref. Range	Units	A	Status	Lab
WBC	6.9	3.4-10.8	x10E3/uL		Final	01
RBC	6.10	4.14-5.80	x10E6/uL	Above High Normal	Final	01
HEMOGLOBIN	17.6	13.0-17.7	g/dL		Final	01
HEMATOCRIT	50.9	37.5-51.0	%		Final	01
MCV	83	79-97	fL		Final	01
MCH	28.9	26.6-33.0	pg		Final	01
MCHC	34.6	31.5-35.7	g/dL		Final	01
RDW	14.5	11.6-15.4	%		Final	01
PLATELETS	292	150-450	x10E3/uL		Final	01
NEUTROPHILS	48	NOT ESTAB.	%		Final	01
LYMPHS	40	NOT ESTAB.	%		Final	01
MONOCYTES	8	NOT ESTAB.	%		Final	01
EOS	2	NOT ESTAB.	%		Final	01
BASOS	2	NOT ESTAB.	%		Final	01
IMMATURE CELLS	NP				Cancelled	01
NEUTROPHILS (ABSOLUTE)	3.4	1.4-7.0	x10E3/uL		Final	01
LYMPHS (ABSOLUTE)	2.8	0.7-3.1	x10E3/uL		Final	01
MONOCYTES(ABSOLUTE)	0.6	0.1-0.9	x10E3/uL		Final	01
EOS (ABSOLUTE)	0.1	0.0-0.4	x10E3/uL		Final	01
BASO (ABSOLUTE)	0.1	0.0-0.2	x10E3/uL		Final	01
IMMATURE GRANULOCYTES	0	NOT ESTAB.	%		Final	01
IMMATURE GRANS (ABS)	0.0	0.0-0.1	x10E3/uL		Final	01
NRBC	NP				Cancelled	01
HEMATOLOGY COMMENTS:	NP				Cancelled	01
RESULT NOTE	FASTING NO					