



1710 Churn Creek Rd.
 Redding, CA 96002 - 0236
 PH: 530 646-4242
 FAX: 530 255-4934

TELEMEDICINE FOLLOW UP VISIT PROGRESS NOTE

Patient First Name:	Patient Last Name:	Date of Birth:	Sex:
James	Seghetti	10-13-1970	Male
Attending Provider:	Referring Provider:	Visit Date:	Chart No.:
Frederic Butler, MD, MPH		09-18-2023	SCL10016
Insurance:	Employer:	Claim Number:	Date of Injury:
Shasta County Risk Management	Shasta County Risk Management	22-0350	12-30-2022
Appointment Location:		Appointment Location Address:	
Agile Occupational Medicine, Redding		1710 Churn Creek Rd., Redding CA 96002 - 0236	

Telehealth Statement: I advised the patient that this visit will be performed using a HIPAA compliant telehealth tool, including a live video connection between the patient's location and my location. I answered all the patient's questions, and the patient gave his/her consent for telehealth visit. Subsequently, I performed consultation using telehealth and live video conference. I performed a virtual musculoskeletal or neurological examination based on specific set of guidelines to enhance the information obtained when evaluating the musculoskeletal and neurological systems. Most of these tests are based on validated physical exam maneuvers under my observation. REFERENCE: Mayo Clinic: The Telemedicine Musculoskeletal Examination [https://www.mayoclinicproceedings.org/article/S0025-6196\(20\)30542-5/fulltext](https://www.mayoclinicproceedings.org/article/S0025-6196(20)30542-5/fulltext). Neurology: Primer on the In-home Teleneurologic Examination. Clinical Practice April 2021 vol. 11 no. 2 <https://cp.neurology.org/content/11/2/e157.full>.

History of Present Illness

Patient is a 52 year old male.

Patient reports back pain has decreased. Currently attending physical therapy with home exercise program taught. Recent consult with Dr O'Sullivan who recommended NSAIDS. There is no reported saddle anesthesia, loss of bowel or bladder control. There is no new intervening trauma. Injury is 9 months old.

Past Medical History

Knee injury . Foot/ ankle injury . Left foot/ankle since 11/2019. Left knee since 11/2019.

Surgical History

Left knee: 11/2021 by Paul. Mathews at Redding surgical center . Left knee / meniscus .

Allergy

No Known Drug Allergies.

Current Medication

Ibuprofen
Tylenol

Social History

Work History: He is employed - full time. He has been in the current profession for 23 years. He previously worked for Truck driver as a

Use of Drugs/Alcohol/Tobacco: Never drinks any alcohol. Reports consuming caffeine/cafeinated drinks 1-2 cup a day. He has never used any illicit drugs. He denies using street drugs with a needle.

Physical Examination

Constitutional: Well developed, well nourished, and well kempt. In no apparent distress.

Head: Normocephalic and atraumatic

Eyes: Sclera is clear. Extraocular eye movement is grossly intact.

Ears: Ears are symmetrical. No redness or swelling of external ears is appreciated.

Nose: No excessive nasal discharge is appreciated.

Neck: Supple with full ROM.

Resp: Breathing is non-labored.

Abdomen: Non-distended.

Neurological: Alert and oriented. CN II-XII grossly intact. Motor and sensation grossly normal and non-focal.

Musculoskeletal: Mobility is age appropriate. EROM grossly intact with 5/5 motor gross motor strength in four extremities.

Skin: Appropriate color for ethnicity.

Psych: Calm, cooperative, answering questions appropriately, and pleasant.

Assessment and Plan

ICD: Strain of lumbar paraspinous muscle (S39.012A)

Assessment: LBP with L piriformis syndrome.

Recent consult with Dr O'Sullivan on 9/11/23 with recommendation made to take NSAID

Plan: Patient with 9 month old back injury.

Reinforce home exercise program from Physical Therapy to improve pain, ROM and function
RTC 1 month

ICD: Strain of muscle, fascia and tendon of lower back, subsequent encounter (S39.012D)

ICD: Piriformis syndrome of left side (G57.02)

CPT Codes:

Office O/p Est Low 20-29 Min (99213)
WC002 (WC002)

Follow up: -

Seghetti, James DOB:10-13-1970

A handwritten signature in black ink, appearing to read "Frederic Butler". The signature is fluid and cursive, with the first name "Frederic" and last name "Butler" clearly distinguishable.

Frederic Butler MD, MPH

This has been electronically signed by Frederic Butler MD, MPH for visit dated 09-18-2023.

Clinic Address: 1710 Churn Creek Rd., Redding CA 96002 - 0236

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Frederic Butler MD, MPH

Rendering Provider

This has been electronically signed by Frederic Butler MD, MPH for visit dated 09-18-2023.