

DARLEAN SCOTT

Female DOB: 06/12/1964

144349

Ins: Medicare Southern Region

09/09/2021 - Office Visit

Provider: Mukesh Misra MD

Location of Care: Antelope Valley Neuroscience Medical Group

History of Present Illness:

I saw DARLEAN SCOTT back in the office today. She is now just over a week since he had implantation of spinal cord stim later. She little blister from possible dressing on the battery site incision far from the incision site. She denies any fever. Her incision healing well. She denies any new issues. Pain is adequately controlled. She will follow with pain management for programming of the spinal cord stim later in next couple weeks time. Plan is to continue present management follow-up in 4-6 weeks prior appointment. Plan discussed with patient and family.

Patient complies with the 4 A's of opioid treatment.

ADL's: Patient is able to perform activities of daily living with the aid of the medications.

Adverse side effects: No side effects noted including cognitive/somnolence/respiratory depression and constipation.

Abuse: No signs of abuse, misuse or diversion

Associations: No worsening depression or anxiety.

A CURES report from the Department of Justice - Bureau of Narcotic Enforcement was reviewed and is consistent with the medications we are prescribing. Patient would recommend to continue decreasing medication for his pain. Adverse of medication discussed with patient as well.

Review of Records

Past Medical History:

No hypertension, diabetes, MI, or cancer.

Past Surgical History:

Statys post L3-L5 Lumbar Laminectomy/Laminotomy.

Status post Left CTR.

Status post Right CTR.

Status post C4-C7 ACDF by Dr Misra on 12/12/16.

Status post L3-S1 ALIF by Dr. Misra on 05/08/17.

Risk Factors:

Counseled to Quit/Cut Down: yes

Vital Signs:

Patient Profile: 57 Years Old Female

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Height: 64 inches
Weight: 170 pounds
BMI: 29.18
O2 Sat: 97 %
Temp: 97.0 degrees F
Pulse rate: 84 / minute
BP Sitting: 120 / 62 (left arm)

Cuff size: regular
Patient in pain? Yes
Location: back
Intensity: 10

Physical Exam

Msk:

cervical and lumbar tenderness

Neurologic:

Awake and alert
II-XII normal
grip better 5/5
rt PF 4/5
decreased rt L5 sensations
absent rt AJ and rt BJ rest DTRs normal
No cerebellar
gait cannot do tandem
positive SLR

Impression & Recommendations:

Problem # 1: CHRONIC PAIN SYNDROME (ICD-338.4) (ICD10-G89.4)

Assessment: Unchanged

Orders:

99024-NO CHARGE/POST OP (CPT-99024)

Patient Instructions:

- 1) Please schedule a follow-up appointment in 4-6 weeks.
- 2) Discussed the hazards of tobacco smoking (use). Smoking cessation recommended and techniques and options to help patient quit were discussed.
- 3) Discussed importance of regular exercise and recommended starting or continuing a regular exercise program for good health.
- 4) The patient was encouraged to lose weight for better health.

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5) Most patients (90%) of patients with low back pain will improve with time (2-6 weeks). Limit activity to comfort and avoid activities that increase discomfort. Apply moist heat and/or ice to lower back and take medication as instructed for pain relief. Please read the Back Pain Handout and start Physical Therapy as directed.

6) Limit activity to comfort and avoid activities that increase discomfort. Apply moist heat and/or ice to neck and take medication as instructed for pain relief. Please read the Neck Pain Handout and start Physical Therapy as directed. Patient follow-up with pain management for programming of spinal cord later and follow-up in the office in a few weeks time per appointment. Plan discussed with patient and family.

Active Medications:

Bactrim DS 800-160 mg tablet (sulfamethoxazole-trimethoprim) Take 1 tablet by mouth twice a day for 7 days

Percocet 10-325 mg tablet (oxycodone-acetaminophen) Take 1 tablet by mouth every six hours as needed

Soma 350 mg tablet (carisoprodol) Take 1 tablet by mouth every eight hours as needed for pain

Current Allergies:

No known allergies

Electronically signed by Mukesh Misra MD on 09/09/2021 at 10:57 AM
