

**DARLEAN SCOTT**

Female DOB: 06/12/1964

144349

Ins: Medicare Southern Region

**09/08/2020 - Office Visit**

**Provider: Mukesh Misra MD**

**Location of Care: Antelope Valley Neuroscience Medical Group**

**History of Present Illness:**

I saw DARLEAN SCOTT in the office today for a followup consultation. She is a 56 year old woman with the complaint of neck pain. low back pain. bilateral leg pain. Patient is here to follow-up and discussed regarding her chronic use of narcotics and chronic pain management. Patient has some findings a urinalysis that had to be discussed. She tells me that she does have a card for cannabis for she did not get with her today. Her chronic pain management and narcotic use and misuse and disuse of other concurrent medications and drugs were discussed at length with the patient. She agrees and understands the repercussions and will follow the instructions. Urinalysis again been sent for testing.

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:**

Reviewed history from 08/13/2020 and no changes required:  
No hypertension, diabetes, MI, or cancer.

**Past Surgical History:**

Reviewed history from 08/13/2020 and no changes required:  
Status 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.

**Family History Summary:**

Reviewed history Last on 08/13/2020 and no changes required:09/08/2020

**General Comments - FH:**

Family History of Tuberculosis

Family History of Bleeding Disorders

Family History of High Blood Pressure

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Family History of Diabetes  
Family History of Heart Disease

**Social History:**

Reviewed history from 06/01/2017 and no changes required:  
Patient currently smokes every day. She smokes 6 cigarettes a day  
Alcohol Use - yes Moderate.  
Drug Use - no  
HIV/High Risk - no  
Regular Exercise - no

**Risk Factors:**

Counseled to Quit/Cut Down: yes

**Vital Signs:**

Patient Profile: 56 Years Old Female  
Height: 64 inches  
Weight: 189 pounds  
BMI: 32.44  
Temp: 97.1 degrees F  
BP Sitting: 168 / 88

Patient in pain? Yes

Location: back, right foot  
Intensity: 8

**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

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**Impression & Recommendations:**

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

**Assessment:** Improved

Orders:

99214-FU, DETAILED (CPT-99214)

**Patient Instructions:**

- 1) Please schedule a follow-up appointment in 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.
- 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.

**Active Medications:**

PERCOCET 10-325 MG ORAL TABLET (OXYCODONE-ACETAMINOPHEN) T PO Q 4-6 hrs prn pain  
SOMA 350 MG ORAL TABLET (CARISOPRODOL) T PO Q 8 HRS PRN  
MEDROL 4 MG ORAL TABLET THERAPY PACK (METHYLPREDNISOLONE) take as directed by physician

**Current Allergies:**

No known allergies

**Electronically signed by Mukesh Misra MD on 09/08/2020 at 2:14 PM**

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