

# Demographics for William D Carrington

PATIENT INFORMATION					CELL PHONE (409) 454-7544		
NAME (Last, First Middle) Carrington, William D			MRN 000000056008	SSN# ###-##-8031	BIRTHDATE 01/29/1963	LANGUAGE English	SEX M
ADDRESS 5750 DUFF ST Beaumont, TX 77706			REFERRING PHYSICIAN		SECONDARY/BILLING ADDRESS (if Applicable) ,		
			PRIMARY CARE PROVIDER Anwar, Syed I				
HOME PHONE (409) 892-8090	DAY PHONE (409) 454-7544		EMAIL ADDRESS billc18@yahoo.com			HOME PHONE	
MARITAL STATUS Divorced	STUDENT N	SMOKER Y	VETERAN Y	EMERGENCY CONTACT NAME Robertson, Diana			CONTACT PHONE (409) 781-8114
PRIMARY EMPLOYER Rent-A-Center				SECONDARY EMPLOYER (if Applicable)			
ADDRESS 1101 Main Street Liberty, TX 77575				ADDRESS			
WORK PHONE (936) 336-8766				WORK PHONE			
RESPONSIBLE PARTY INFORMATION (if Different than above)							
NAME (Last, First Middle)			SSN#	BIRTHDATE	LANGUAGE	SEX	
ADDRESS			RELATIONSHIP TO PATIENT		SECONDARY/BILLING ADDRESS (if Applicable)		
			PRIMARY CARE PROVIDER				
HOME PHONE	DAY PHONE		EMAIL ADDRESS			HOME PHONE	
MARITAL STATUS	STUDENT	SMOKER	VETERAN				
PRIMARY INSURANCE							
NAME OF INSURANCE COMPANY Texan Plus Classic			PHONE (866) 230-2513	POLICY# 0868151630			
ADDRESS PO Box 17900 Austin, TX 78760-7900			EFFECTIVE DATE 01/01/2008		GROUP#		
			EXPIRATION DATE	DEDUCTIBLE \$0.00	COPAY AMT \$0.00		
NAME OF INSURED Carrington, William D			RELATIONSHIP Self				
SECONDARY INSURANCE (if Applicable)							
NAME OF INSURANCE COMPANY Texan Plus HMO			PHONE (888) 800-0760	POLICY# 00006394100			
ADDRESS PO Box 741107 Houston, TX 77274-1107			EFFECTIVE DATE 01/01/2008		GROUP#		
			EXPIRATION DATE	DEDUCTIBLE \$0.00	COPAY AMT \$0.00		
NAME OF INSURED Carrington, William D			RELATIONSHIP Self				

## Vitals Signs for William D Carrington

Date	Temperature (F)	Temperature (C)	Blood Pressure	Pulse	Respiration Rate	O2	Height (in)	Height (cm)	Weight (lbs)	Weight (kg)	BMI
08/08/2019 1:45 PM	98.7	37.1	120/70	92	18	98	73.00	185.42	228.00	103.419	30.08
07/02/2019 1:30 PM			120/82	48	18	99	73.00	185.42	229.00	103.873	30.21
06/19/2019 10:30 AM			124/80	69	18	96	73.00	185.42	228.00	103.419	30.08
04/03/2019 11:30 AM			118/82	63	18	99	73.00	185.42	223.00	101.151	29.42

Patient: Carrington, William  
Visit Date: 08/08/19  
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SETMA I - 2929 Calder, Suite 100

SETMA II - 3570 College, Suite 200

Mark Wilson Clinic - 2010 Dowlen

Lumberton - 137B LHS Drive

Nederland/Port Arthur - 2400 Highway 365, Suite 201

Orange - 610 Strickland Drive, Suite 140

(409) 833-9797

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## Chart Note - 08/08/19 SETMA II

**Patient** William Carrington  
**Date of Birth** 01/29/1963  
**Age** 56 Years  
**Race** Declined to specify  
**Preferred Language** English  
**Sex** M  
**Visit Type** Office Visit  
**Medical Record** 57115

### Acute Diagnoses

#### Status

URI, acute  
Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease,  
without long-term current use of insulin  
Chronic kidney disease, stage 2 (mild)  
Essential hypertension  
Acute recurrent maxillary sinusitis  
Body mass index (BMI) 30.0-30.9, adult

### Chief Complaints

COLD SYMPTOMS

\* Diabetes Management

### Chronic Conditions

Chronic GERD  
Polyneuropathy associated with underlying disease  
Combined forms of age-related cataract of both eyes  
Facet arthritis of cervical region  
Chronic bronchitis, mucopurulent  
Systolic CHF, chronic

Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease, without long-term current use of insulin  
Shy-Drager syndrome  
Degeneration of basal ganglia  
Calcification of abdominal aorta  
Essential hypertension  
Fredrickson type IIb hyperlipoproteinemia  
CAD in native artery  
Old MI (myocardial infarction)  
Mild persistent asthma, uncomplicated  
CKD (chronic kidney disease) stage 2, GFR 60-89 ml/min  
Ataxia  
Benign prostatic hyperplasia with weak urinary stream  
Elevated uric acid in blood  
Tobacco abuse  
Carrier of staphylococcus  
Benign essential tremor  
Chronic fatigue syndrome  
Chronic maxillary sinusitis  
Fibromyalgia  
Diarrhea  
Status post coronary artery bypass graft  
Simple obesity  
Beta-blockers contraindicated  
Changes in retinal vascular appearance of both eyes  
Subjective visual disturbance of both eyes

### **Chief Complaint 1- COLD SYMPTOMS**

Frequency - persistently  
Duration - 2 day(s)  
Severity - moderate  
Change - no change  
Aggravated By - None  
Relieved By - None

#### **Associated Symptoms**

sore throat  
fever  
cough  
Ear Ache

#### **Pertinent Negatives**

Congestion, Chest  
Congestion, Head  
Sneezing

#### **Comments**

ah ma

### **Chief Complaint 2 - \* Diabetes Management**

## Document note on 08/08/2019 1:45 PM for William D Carrington

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Frequency - persistently

Duration - year(s)

Severity - moderate

Change - no change

Context - chronic illness

Aggravated By - None

Relieved By - rx meds

### Pertinent Negatives

Excessive Hunger

Excessive Thirst

Excessive Urination

### Comments

ah ma

## Nursing

### Medications Administered

<u>Medication</u>	<u>Amount</u>	<u>Measure</u>	<u>Route</u>	<u>Site</u>	<u>Initials</u>	<u>Time</u>
Depo-Medrol	80.00	mg	IM			
Rocephin	1.00	gram(s)	IM			

### Medications (active prior to today)

<u>Medication Name</u>	<u>Sig Desc</u>	<u>Start Date</u>	<u>Stop Date</u>	<u>Refilled</u>	<u>Elsewhere</u>
Claritin-D 12 Hour 5 mg-120 mg Tab	1 tab po BID	//			Y
aspirin 325 mg tablet	take 1 tablet by oral route every day	//		05/17/2018	Y
Zantac 150 mg tablet	take 1 tablet by oral route every day	//		05/17/2018	Y
atorvastatin 80 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY DAY AT BEDTIME	10/25/2018	08/08/2019	08/08/2019	N
lisinopril 5 mg tablet	TAKE 1 TABLET BY ORAL ROUTE 2 TIMES EVERY DAY	12/04/2018		12/04/2018	N
Ventolin HFA 90 mcg/actuation aerosol inhaler	inhale 2 puff by inhalation route every 4 hours	04/03/2019		04/03/2019	N
omeprazole 20 mg capsule, delayed release	take 1 Tablet by Oral route every morning	04/03/2019		04/03/2019	N
Symbicort 80 mcg-4.5 mcg/actuation HFA aerosol inhaler	inhale 2 puff by inhalation route 2 times every day in the morning and evening	04/03/2019		04/03/2019	N
Viagra 50 mg tablet	take 1 tablet by oral route every day as needed approximately 1 hour before sexual activity	04/03/2019		04/03/2019	N
fluticasone propionate 50 mcg/actuation nasal	spray 2 spray by intranasal route twice a day each	06/19/2019		06/19/2019	N

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spray,suspension	nostril			
Zanaflex 4 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY 8 HOURS AS NEEDED NOT TO EXCEED 3 DOSES IN 24 HOURS	07/02/2019	07/02/2019	N
allopurinol 300 mg tablet	TAKE 1 TABLET BY MOUTH ONCE DAILY	07/16/2019	07/16/2019	N

### Medication Reconciliation

Medications reconciled today.

### Medication Reviewed

Adherence	Medication Name	Sig Desc	Elsewhere	Status
taking as directed	Claritin-D 12 Hour 5 mg-120 mg Tab	1 tab po BID	Y	Verified
taking as directed	aspirin 325 mg tablet	take 1 tablet by oral route every day	Y	Verified
taking as directed	Zantac 150 mg tablet	take 1 tablet by oral route every day	Y	Verified
taking as directed	lisinopril 5 mg tablet	TAKE 1 TABLET BY ORAL ROUTE 2 TIMES EVERY DAY	N	Verified
taking as directed	Ventolin HFA 90 mcg/actuation aerosol inhaler	inhale 2 puff by inhalation route every 4 hours	N	Verified
taking as directed	omeprazole 20 mg capsule,delayed release	take 1 Tablet by Oral route every morning	N	Verified
taking as directed	Symbicort 80 mcg-4.5 mcg/actuation HFA aerosol inhaler	inhale 2 puff by inhalation route 2 times every day in the morning and evening	N	Verified
taking as directed	Viagra 50 mg tablet	take 1 tablet by oral route every day as needed approximately 1 hour before sexual activity	N	Verified
taking as directed	fluticasone propionate 50 mcg/actuation nasal spray,suspension	spray 2 spray by intranasal route twice a day each nostril	N	Verified
taking as directed	Zanaflex 4 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY 8 HOURS AS NEEDED NOT TO EXCEED 3 DOSES IN 24 HOURS	N	Verified
taking as directed	allopurinol 300 mg tablet	TAKE 1 TABLET BY MOUTH ONCE DAILY	N	Verified
taking as directed	atorvastatin 80 mg tablet	take 1 tablet by oral route every day at bedtime	N	Verified

## Health Maintenance

The patient's health maintenance was reviewed today.

BMP - 04/03/2019

CBC - 04/03/2019

Chemistry - 05/17/2018

Chest X-Ray - 10/12/2017

Colonoscopy - 04/08/2004

Creatinine - 04/03/2019

Dilated Eye Exam - 10/30/2018

Foot Exam - 04/03/2019

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Echocardiogram - 08/15/2004  
EKG - 04/03/2019  
EMG - 01/21/2015  
Eye Exam - 04/03/2019  
Flu Shot - 09/27/2018  
Hemocult - 04/08/2019  
HFP - 04/03/2019  
HGB - 04/03/2019  
Lipids - 04/03/2019  
Microalbumin - 09/17/2018  
PFT - 07/25/2008  
Pneumovax - 04/08/2009  
PSA - 04/03/2019  
PT/INR - 08/18/2016  
Rectal Exam - 04/08/2009  
Stress Test - 09/23/2004  
Tetanus - 06/19/2019  
Thyroid Profile - 05/02/2008  
Urinalysis - 09/17/2018  
uTSH - 04/03/2019

### Patient's Preferred Specialists

Neurology - Dr. Deiparine

## **Histories**

### **Past Medical History**

#### PAST MEDICAL/SURGICAL HISTORY

Disease/disorder	Onset Date	Management	Date
		lymphnodes removed right knee CABG	2002
Chicken Pox			
measles			
Shy Drager syndrome	2007		

### **Social History**

Ethnicity - Not Hispanic or Latino  
Occupation - store manager  
Marital Status - divorced

#### Tobacco Use

Smoking status: Heavy tobacco smoker.

#### Alcohol Use

approximately 0.00 ounces/week.  
approximately 0.00 ounces/week.  
approximately 0.00 ounces/week.

Caffeine

Approximately 6 cups/cans per day

**Family History**

Relationship	Family Member Name	Deceased	Age at Death	Condition	Onset Age	Cause of Death
				Family history of Diabetes mellitus type 2		N
				No family history of Hypertension		N
				No family history of Hyperlipidemia		N
Father		Y		Cancer of the Lung	42	N
Mother		N		Arthritis		N

**Review of Systems**Source of Information

Patient

**Allergies**

Description	Onset
BACITRACIN ZINC	08/08/2002
MEDICAL SUPPLY, MISCELLANEOUS	08/08/2002
NEOMYCIN SULFATE	08/08/2002
INDOMETHACIN	08/08/2002
POLYMYXIN B	08/08/2002
ISOPROPYL ALCOHOL	08/08/2002
BACITRACIN	08/08/2002
PROPOXYPHENE NAPSYLATE	08/08/2002
CHLORHEXIDINE GLUCONATE	08/08/2002
CODEINE	08/08/2002
MORPHINE	08/08/2002
ACETAMINOPHEN	08/08/2002
IBUPROFEN	08/08/2002
POLYMYXIN B SULFATE	08/08/2002
GRAMICIDIN D	08/08/2002
FENTANYL	04/05/2007
AMOXICILLIN TRIHYDRATE	07/29/2009
POTASSIUM CLAVULANATE	07/29/2009

**Constitutional**Patient Confirms

Fever,

Patient Denies

Fatigue, Headache, Dizziness,

**Eyes**

Last Eye Exam - 04/03/2019



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Last Dilated Eye Exam - 10/30/2018

Patient Denies

Blurred vision, Faded vision,

### **Head/Neck**

Patient Denies

Headache,

### **Ears**

Patient Confirms

Ear aches,

### **Nose**

Patient Denies

Sneezing,

### **Oropharynx**

Patient Confirms

Sore throat,

### **Cardiac**

Patient Confirms

Cough,

Patient Denies

Diaphoresis, Nausea, Fatigue,

### **Respiratory**

Patient Confirms

Cold symptoms, Fever, Cough,

Patient Denies

Sneezing,

### **Gastrointestinal**

Patient Denies

Nausea, Vomiting, Indigestion, Heartburn,

### **Male Genitourinary**

Last PSA - 04/03/2019

Last Digital Rectal Exam - 04/08/2009

Patient Confirms

Urinary incontinence,

Patient Denies

Oliguria, Weak stream, Polyuria, Sexually active,

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## Musculoskeletal

Patient is right-handed.

### Patient Denies

Extremity pain, Joint pain, Joint swelling, Joint stiffness,

## Integumentary

### Patient Confirms

Intact, Warm/Dry

## Endocrine

### Patient Confirms

Diabetes Mellitus,

### Patient Denies

Drowsiness, Polydipsia, Polyphagia, Polyuria, Nausea,

## Physical Exam

### Vital Signs

#### HEIGHT

Time	ft	in	cm	Last Measured	Height Position	%
1:44 PM	6.0	1.00	185.42	07/02/2013	Standing	

#### WEIGHT/BSA/BMI

Time	lb	oz	kg	Context	%	BMI kg/m2	BSA m2
1:44 PM	228.00		103.419	dressed with shoes		30.08	2.31

#### BLOOD PRESSURE

Time	BP mm/Hg	Position	Side	Site	Method	Cuff Size
1:44 PM	120/70	sitting	right	arm	manual	adult

Mid-Arm Circumference - 0.0 inches

#### TEMPERATURE/PULSE/RESPIRATION

Time	Temp F	Temp C	Temp Site	Pulse/min	Pattern	Resp/ min
1:44 PM	98.7	37.1	ear	92	regular	18

#### PULSE OXIMETRY/FIO2

Time	Pulse Ox (Rest %)	Pulse Ox (Amb %)	O2 Sat	O2 LPM	Timing	FiO2 %	L/min	Delivery Method
1:44 PM	98		RA			21		

#### MEASURED BY

Time	Measured by
1:44 PM	Angela D. Harrison

Body Fat - 19.6 %

Protein Requirement - 124 grams/day

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### Circumferences (Performed 08/08/2019)

Abdomen - 40 inches  
Chest - 44.00 inches

### **Constitutional**

Level of Consciousness - Normal  
Orientation - Normal  
Level of Distress - Normal  
Nourishment - mildly obese  
Overall Appearance - Normal

### **Ears**

#### External Ear

##### Inspection

Right - Normal  
Left - Normal

##### Palpation

Right - Normal  
Left - Normal

#### Internal Ear

##### Canals

Right - Normal  
Left - Normal

##### TMs

Right - air fluid level  
Left - air fluid level

##### Hearing

Right - Normal  
Left - Normal

### **Nasopharynx**

#### Mouth

Teeth/Gums - Normal  
Tongue - Normal  
Buccal Mucosa - Normal

#### Throat

Palate/Uvula - Normal  
Pharynx - Normal

### **Neck**

Inspection - Normal  
Palpation - Normal  
Lymph Nodes - Normal  
Thyroid Gland - Normal

### **Respiratory**

Inspection - Normal  
Auscultation - Normal  
Cough - Absent

### **Cardiovascular**

Auscultation - Normal  
Murmurs - Absent  
Peripheral Edema - No

### **Abdomen**

Inspection - Normal  
Auscultation - Normal  
Palpation - Normal

### **Neurological**

#### Mental Status

Cognitive Abilities - Normal  
Emotional Stability - Normal

#### Sensory Function

Balance and Gait - Normal

### **Screeners and Opioid Assessment for Patients with Pain (SOAPP)**

## **Assessment**

URI, acute  
Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease, without long-term current use of insulin  
Chronic kidney disease, stage 2 (mild)  
Essential hypertension  
Acute recurrent maxillary sinusitis  
Body mass index (BMI) 30.0-30.9, adult

#### Chronic Conditions

Chronic GERD  
Polyneuropathy associated with underlying disease  
Combined forms of age-related cataract of both eyes  
Facet arthritis of cervical region  
Chronic bronchitis, mucopurulent  
Systolic CHF, chronic  
Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease, without long-term current use of insulin  
Shy-Drager syndrome

## Document note on 08/08/2019 1:45 PM for William D Carrington

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Degeneration of basal ganglia  
Calcification of abdominal aorta  
Essential hypertension  
Fredrickson type IIb hyperlipoproteinemia  
CAD in native artery  
Old MI (myocardial infarction)  
Mild persistent asthma, uncomplicated  
CKD (chronic kidney disease) stage 2, GFR 60-89 ml/min  
Ataxia  
Benign prostatic hyperplasia with weak urinary stream  
Elevated uric acid in blood  
Tobacco abuse  
Carrier of staphylococcus  
Benign essential tremor  
Chronic fatigue syndrome  
Chronic maxillary sinusitis  
Fibromyalgia  
Diarrhea  
Status post coronary artery bypass graft  
Simple obesity  
Beta-blockers contraindicated  
Changes in retinal vascular appearance of both eyes  
Subjective visual disturbance of both eyes

## Plan

---

Current and previous labs reviewed  
Plan was discussed with patient.  
The patient indicates they agree with the discussed plan.  
Follow-Up Visit  
Continue current medications & therapy  
Medications reviewed  
Schedule CT  
Medications Given in Office  
Current Medication List Given to Patient

### Education/Instructions

Increase fluids  
setma83\_hosp\_plan{Unexpected Value}

### Active Medications

Start Date	Brand	Dose	Sig Desc
08/08/2019	ATORVASTATIN CALCIUM	80 mg	take 1 tablet by oral route every day at bedtime
07/16/2019	ALLOPURINOL	300 mg	TAKE 1 TABLET BY MOUTH ONCE DAILY
07/02/2019	ZANAFLEX	4 mg	TAKE 1 TABLET BY ORAL ROUTE EVERY 8 HOURS AS NEEDED NOT TO EXCEED 3 DOSES IN 24 HOURS

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06/19/2019	FLUTICASONE PROPIONATE	50 mcg/actuation	spray 2 spray by intranasal route twice a day each nostril
04/03/2019	VENTOLIN HFA	90 mcg	inhale 2 puff by inhalation route every 4 hours
04/03/2019	OMEPRAZOLE	20 mg	take 1 Tablet by Oral route every morning
04/03/2019	SYMBICORT	80 mcg-4.5 mcg/actuation	inhale 2 puff by inhalation route 2 times every day in the morning and evening
04/03/2019	VIAGRA	50 mg	take 1 tablet by oral route every day as needed approximately 1 hour before sexual activity
12/04/2018	LISINOPRIL	5 mg	TAKE 1 TABLET BY ORAL ROUTE 2 TIMES EVERY DAY
	CLARITIN-D 12 HOUR	5 mg-120 mg	1 tab po BID
	ASPIRIN	325 mg	take 1 tablet by oral route every day
	ZANTAC	150 mg	take 1 tablet by oral route every day

### Injections

J1040 - Depo-Medrol 80 mg  
J0696 - Rocephin per 250 mg, x4

### Diagnostics

Status	Priority	Order
ordered	Immediate	CT: sinus w/o contrast

### Evaluation and Management

99214 - Established Patient, Detailed Problem

### Follow Up

#### Acute

Follow - up  
4 month(s)

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**Approved by Jeffrey S. Anthony APRN 08/08/19**  
Southeast Texas Medical Associates, LLP  
08/08/2019 01:45 PM



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## Chart Note - 08/08/19 SETMA II

**Patient** William Carrington  
**Date of Birth** 01/29/1963  
**Age** 56 Years  
**Race** Declined to specify  
**Preferred Language** English  
**Sex** M  
**Visit Type** Office Visit  
**Medical Record** 57115

### Acute Diagnoses

#### Status

URI, acute  
Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease,  
without long-term current use of insulin  
Chronic kidney disease, stage 2 (mild)  
Essential hypertension  
Acute recurrent maxillary sinusitis  
Body mass index (BMI) 30.0-30.9, adult

### Chief Complaints

COLD SYMPTOMS

\* Diabetes Management

### Chronic Conditions

Chronic GERD  
Polyneuropathy associated with underlying disease  
Combined forms of age-related cataract of both eyes  
Facet arthritis of cervical region  
Chronic bronchitis, mucopurulent  
Systolic CHF, chronic

Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease, without long-term current use of insulin  
Shy-Drager syndrome  
Degeneration of basal ganglia  
Calcification of abdominal aorta  
Essential hypertension  
Fredrickson type IIb hyperlipoproteinemia  
CAD in native artery  
Old MI (myocardial infarction)  
Mild persistent asthma, uncomplicated  
CKD (chronic kidney disease) stage 2, GFR 60-89 ml/min  
Ataxia  
Benign prostatic hyperplasia with weak urinary stream  
Elevated uric acid in blood  
Tobacco abuse  
Carrier of staphylococcus  
Benign essential tremor  
Chronic fatigue syndrome  
Chronic maxillary sinusitis  
Fibromyalgia  
Diarrhea  
Status post coronary artery bypass graft  
Simple obesity  
Beta-blockers contraindicated  
Changes in retinal vascular appearance of both eyes  
Subjective visual disturbance of both eyes

### **Chief Complaint 1- COLD SYMPTOMS**

Frequency - persistently  
Duration - 2 day(s)  
Severity - moderate  
Change - no change  
Aggravated By - None  
Relieved By - None

#### **Associated Symptoms**

sore throat  
fever  
cough  
Ear Ache

#### **Pertinent Negatives**

Congestion, Chest  
Congestion, Head  
Sneezing

#### **Comments**

ah ma

### **Chief Complaint 2 - \* Diabetes Management**



## Document note on 08/08/2019 1:45 PM for William D Carrington

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Frequency - persistently

Duration - year(s)

Severity - moderate

Change - no change

Context - chronic illness

Aggravated By - None

Relieved By - rx meds

### Pertinent Negatives

Excessive Hunger

Excessive Thirst

Excessive Urination

### Comments

ah ma

## Nursing

### Medications Administered

<u>Medication</u>	<u>Amount</u>	<u>Measure</u>	<u>Route</u>	<u>Site</u>	<u>Initials</u>	<u>Time</u>
Depo-Medrol	80.00	mg	IM			
Rocephin	1.00	gram(s)	IM			

### Medications (active prior to today)

<u>Medication Name</u>	<u>Sig Desc</u>	<u>Start Date</u>	<u>Stop Date</u>	<u>Refilled</u>	<u>Elsewhere</u>
Claritin-D 12 Hour 5 mg-120 mg Tab	1 tab po BID	//			Y
aspirin 325 mg tablet	take 1 tablet by oral route every day	//		05/17/2018	Y
Zantac 150 mg tablet	take 1 tablet by oral route every day	//		05/17/2018	Y
atorvastatin 80 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY DAY AT BEDTIME	10/25/2018	08/08/2019	08/08/2019	N
lisinopril 5 mg tablet	TAKE 1 TABLET BY ORAL ROUTE 2 TIMES EVERY DAY	12/04/2018		12/04/2018	N
Ventolin HFA 90 mcg/actuation aerosol inhaler	inhale 2 puff by inhalation route every 4 hours	04/03/2019		04/03/2019	N
omeprazole 20 mg capsule, delayed release	take 1 Tablet by Oral route every morning	04/03/2019		04/03/2019	N
Symbicort 80 mcg-4.5 mcg/actuation HFA aerosol inhaler	inhale 2 puff by inhalation route 2 times every day in the morning and evening	04/03/2019		04/03/2019	N
Viagra 50 mg tablet	take 1 tablet by oral route every day as needed approximately 1 hour before sexual activity	04/03/2019		04/03/2019	N
fluticasone propionate 50 mcg/actuation nasal	spray 2 spray by intranasal route twice a day each	06/19/2019		06/19/2019	N

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spray,suspension	nostril			
Zanaflex 4 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY 8 HOURS AS NEEDED NOT TO EXCEED 3 DOSES IN 24 HOURS	07/02/2019	07/02/2019	N
allopurinol 300 mg tablet	TAKE 1 TABLET BY MOUTH ONCE DAILY	07/16/2019	07/16/2019	N

### Medication Reconciliation

Medications reconciled today.

### Medication Reviewed

Adherence	Medication Name	Sig Desc	Elsewhere	Status
taking as directed	Claritin-D 12 Hour 5 mg-120 mg Tab	1 tab po BID	Y	Verified
taking as directed	aspirin 325 mg tablet	take 1 tablet by oral route every day	Y	Verified
taking as directed	Zantac 150 mg tablet	take 1 tablet by oral route every day	Y	Verified
taking as directed	lisinopril 5 mg tablet	TAKE 1 TABLET BY ORAL ROUTE 2 TIMES EVERY DAY	N	Verified
taking as directed	Ventolin HFA 90 mcg/actuation aerosol inhaler	inhale 2 puff by inhalation route every 4 hours	N	Verified
taking as directed	omeprazole 20 mg capsule,delayed release	take 1 Tablet by Oral route every morning	N	Verified
taking as directed	Symbicort 80 mcg-4.5 mcg/actuation HFA aerosol inhaler	inhale 2 puff by inhalation route 2 times every day in the morning and evening	N	Verified
taking as directed	Viagra 50 mg tablet	take 1 tablet by oral route every day as needed approximately 1 hour before sexual activity	N	Verified
taking as directed	fluticasone propionate 50 mcg/actuation nasal spray,suspension	spray 2 spray by intranasal route twice a day each nostril	N	Verified
taking as directed	Zanaflex 4 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY 8 HOURS AS NEEDED NOT TO EXCEED 3 DOSES IN 24 HOURS	N	Verified
taking as directed	allopurinol 300 mg tablet	TAKE 1 TABLET BY MOUTH ONCE DAILY	N	Verified
taking as directed	atorvastatin 80 mg tablet	take 1 tablet by oral route every day at bedtime	N	Verified

## Health Maintenance

The patient's health maintenance was reviewed today.

BMP - 04/03/2019

CBC - 04/03/2019

Chemistry - 05/17/2018

Chest X-Ray - 10/12/2017

Colonoscopy - 04/08/2004

Creatinine - 04/03/2019

Dilated Eye Exam - 10/30/2018

Foot Exam - 04/03/2019

## Document note on 08/08/2019 1:45 PM for William D Carrington

Patient: Carrington, William  
Visit Date: 08/08/19  
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Echocardiogram - 08/15/2004  
EKG - 04/03/2019  
EMG - 01/21/2015  
Eye Exam - 04/03/2019  
Flu Shot - 09/27/2018  
Hemocult - 04/08/2019  
HFP - 04/03/2019  
HGB - 04/03/2019  
Lipids - 04/03/2019  
Microalbumin - 09/17/2018  
PFT - 07/25/2008  
Pneumovax - 04/08/2009  
PSA - 04/03/2019  
PT/INR - 08/18/2016  
Rectal Exam - 04/08/2009  
Stress Test - 09/23/2004  
Tetanus - 06/19/2019  
Thyroid Profile - 05/02/2008  
Urinalysis - 09/17/2018  
uTSH - 04/03/2019

### Patient's Preferred Specialists

Neurology - Dr. Deiparine

## **Histories**

### **Past Medical History**

#### PAST MEDICAL/SURGICAL HISTORY

Disease/disorder	Onset Date	Management	Date
		lymphnodes removed right knee CABG	2002
Chicken Pox			
measles			
Shy Drager syndrome	2007		

### **Social History**

Ethnicity - Not Hispanic or Latino  
Occupation - store manager  
Marital Status - divorced

#### Tobacco Use

Smoking status: Heavy tobacco smoker.

#### Alcohol Use

approximately 0.00 ounces/week.  
approximately 0.00 ounces/week.  
approximately 0.00 ounces/week.

Patient: Carrington, William  
Visit Date: 08/08/19  
Page 6 of 12

### Caffeine

Approximately 6 cups/cans per day

## Family History

Relationship	Family Member Name	Deceased	Age at Death	Condition	Onset Age	Cause of Death
				Family history of Diabetes mellitus type 2		N
				No family history of Hypertension		N
				No family history of Hyperlipidemia		N
Father		Y		Cancer of the Lung	42	N
Mother		N		Arthritis		N

## Review of Systems

### Source of Information

Patient

## Allergies

Description	Onset
BACITRACIN ZINC	08/08/2002
MEDICAL SUPPLY, MISCELLANEOUS	08/08/2002
NEOMYCIN SULFATE	08/08/2002
INDOMETHACIN	08/08/2002
POLYMYXIN B	08/08/2002
ISOPROPYL ALCOHOL	08/08/2002
BACITRACIN	08/08/2002
PROPOXYPHENE NAPSYLATE	08/08/2002
CHLORHEXIDINE GLUCONATE	08/08/2002
CODEINE	08/08/2002
MORPHINE	08/08/2002
ACETAMINOPHEN	08/08/2002
IBUPROFEN	08/08/2002
POLYMYXIN B SULFATE	08/08/2002
GRAMICIDIN D	08/08/2002
FENTANYL	04/05/2007
AMOXICILLIN TRIHYDRATE	07/29/2009
POTASSIUM CLAVULANATE	07/29/2009

## Constitutional

### Patient Confirms

Fever,

### Patient Denies

Fatigue, Headache, Dizziness,

## Eyes

Last Eye Exam - 04/03/2019

## Document note on 08/08/2019 1:45 PM for William D Carrington

Patient: Carrington , William

Visit Date: 08/08/19

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Last Dilated Eye Exam - 10/30/2018

Patient Denies

Blurred vision, Faded vision,

### **Head/Neck**

Patient Denies

Headache,

### **Ears**

Patient Confirms

Ear aches,

### **Nose**

Patient Denies

Sneezing,

### **Oropharynx**

Patient Confirms

Sore throat,

### **Cardiac**

Patient Confirms

Cough,

Patient Denies

Diaphoresis, Nausea, Fatigue,

### **Respiratory**

Patient Confirms

Cold symptoms, Fever, Cough,

Patient Denies

Sneezing,

### **Gastrointestinal**

Patient Denies

Nausea, Vomiting, Indigestion, Heartburn,

### **Male Genitourinary**

Last PSA - 04/03/2019

Last Digital Rectal Exam - 04/08/2009

Patient Confirms

Urinary incontinence,

Patient Denies

Oliguria, Weak stream, Polyuria, Sexually active,

# Document note on 08/08/2019 1:45 PM for William D Carrington

Patient: Carrington , William  
Visit Date: 08/08/19  
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## Musculoskeletal

Patient is right-handed.

### Patient Denies

Extremity pain, Joint pain, Joint swelling, Joint stiffness,

## Integumentary

### Patient Confirms

Intact, Warm/Dry

## Endocrine

### Patient Confirms

Diabetes Mellitus,

### Patient Denies

Drowsiness, Polydipsia, Polyphagia, Polyuria, Nausea,

## Physical Exam

### Vital Signs

#### HEIGHT

Time	ft	in	cm	Last Measured	Height Position	%
1:44 PM	6.0	1.00	185.42	07/02/2013	Standing	

#### WEIGHT/BSA/BMI

Time	lb	oz	kg	Context	%	BMI kg/m2	BSA m2
1:44 PM	228.00		103.419	dressed with shoes		30.08	2.31

#### BLOOD PRESSURE

Time	BP mm/Hg	Position	Side	Site	Method	Cuff Size
1:44 PM	120/70	sitting	right	arm	manual	adult

Mid-Arm Circumference - 0.0 inches

#### TEMPERATURE/PULSE/RESPIRATION

Time	Temp F	Temp C	Temp Site	Pulse/min	Pattern	Resp/ min
1:44 PM	98.7	37.1	ear	92	regular	18

#### PULSE OXIMETRY/FIO2

Time	Pulse Ox (Rest %)	Pulse Ox (Amb %)	O2 Sat	O2 LPM	Timing	FiO2 %	L/min	Delivery Method
1:44 PM	98		RA			21		

#### MEASURED BY

Time	Measured by
1:44 PM	Angela D. Harrison

Body Fat - 19.6 %

Protein Requirement - 124 grams/day

## Document note on 08/08/2019 1:45 PM for William D Carrington

Patient: Carrington , William  
Visit Date: 08/08/19  
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### Circumferences (Performed 08/08/2019)

Abdomen - 40 inches  
Chest - 44.00 inches

### **Constitutional**

Level of Consciousness - Normal  
Orientation - Normal  
Level of Distress - Normal  
Nourishment - mildly obese  
Overall Appearance - Normal

### **Ears**

#### External Ear

##### Inspection

Right - Normal  
Left - Normal

##### Palpation

Right - Normal  
Left - Normal

#### Internal Ear

##### Canals

Right - Normal  
Left - Normal

##### TMs

Right - air fluid level  
Left - air fluid level

##### Hearing

Right - Normal  
Left - Normal

### **Nasopharynx**

#### Mouth

Teeth/Gums - Normal  
Tongue - Normal  
Buccal Mucosa - Normal

#### Throat

Palate/Uvula - Normal  
Pharynx - Normal

### **Neck**

Inspection - Normal  
Palpation - Normal  
Lymph Nodes - Normal  
Thyroid Gland - Normal

### **Respiratory**

Inspection - Normal  
Auscultation - Normal  
Cough - Absent

### **Cardiovascular**

Auscultation - Normal  
Murmurs - Absent  
Peripheral Edema - No

### **Abdomen**

Inspection - Normal  
Auscultation - Normal  
Palpation - Normal

### **Neurological**

#### Mental Status

Cognitive Abilities - Normal  
Emotional Stability - Normal

#### Sensory Function

Balance and Gait - Normal

### **Screeners and Opioid Assessment for Patients with Pain (SOAPP)**

## **Assessment**

URI, acute  
Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease, without long-term current use of insulin  
Chronic kidney disease, stage 2 (mild)  
Essential hypertension  
Acute recurrent maxillary sinusitis  
Body mass index (BMI) 30.0-30.9, adult

#### Chronic Conditions

Chronic GERD  
Polyneuropathy associated with underlying disease  
Combined forms of age-related cataract of both eyes  
Facet arthritis of cervical region  
Chronic bronchitis, mucopurulent  
Systolic CHF, chronic  
Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease, without long-term current use of insulin  
Shy-Drager syndrome



## Document note on 08/08/2019 1:45 PM for William D Carrington

Patient: Carrington , William

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Degeneration of basal ganglia  
Calcification of abdominal aorta  
Essential hypertension  
Fredrickson type IIb hyperlipoproteinemia  
CAD in native artery  
Old MI (myocardial infarction)  
Mild persistent asthma, uncomplicated  
CKD (chronic kidney disease) stage 2, GFR 60-89 ml/min  
Ataxia  
Benign prostatic hyperplasia with weak urinary stream  
Elevated uric acid in blood  
Tobacco abuse  
Carrier of staphylococcus  
Benign essential tremor  
Chronic fatigue syndrome  
Chronic maxillary sinusitis  
Fibromyalgia  
Diarrhea  
Status post coronary artery bypass graft  
Simple obesity  
Beta-blockers contraindicated  
Changes in retinal vascular appearance of both eyes  
Subjective visual disturbance of both eyes

## Plan

---

Current and previous labs reviewed  
Plan was discussed with patient.  
The patient indicates they agree with the discussed plan.  
Follow-Up Visit  
Continue current medications & therapy  
Medications reviewed  
Schedule CT  
Medications Given in Office  
Current Medication List Given to Patient

### Education/Instructions

Increase fluids  
setma83\_hosp\_plan{Unexpected Value}

### Active Medications

Start Date	Brand	Dose	Sig Desc
08/08/2019	ATORVASTATIN CALCIUM	80 mg	take 1 tablet by oral route every day at bedtime
07/16/2019	ALLOPURINOL	300 mg	TAKE 1 TABLET BY MOUTH ONCE DAILY
07/02/2019	ZANAFLEX	4 mg	TAKE 1 TABLET BY ORAL ROUTE EVERY 8 HOURS AS NEEDED NOT TO EXCEED 3 DOSES IN 24 HOURS

## Document note on 08/08/2019 1:45 PM for William D Carrington

Patient: Carrington, William

Visit Date: 08/08/19

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06/19/2019	FLUTICASONE PROPIONATE	50 mcg/actuation	spray 2 spray by intranasal route twice a day each nostril
04/03/2019	VENTOLIN HFA	90 mcg	inhale 2 puff by inhalation route every 4 hours
04/03/2019	OMEPRAZOLE	20 mg	take 1 Tablet by Oral route every morning
04/03/2019	SYMBICORT	80 mcg-4.5 mcg/actuation	inhale 2 puff by inhalation route 2 times every day in the morning and evening
04/03/2019	VIAGRA	50 mg	take 1 tablet by oral route every day as needed approximately 1 hour before sexual activity
12/04/2018	LISINOPRIL	5 mg	TAKE 1 TABLET BY ORAL ROUTE 2 TIMES EVERY DAY
	CLARITIN-D 12 HOUR	5 mg-120 mg	1 tab po BID
	ASPIRIN	325 mg	take 1 tablet by oral route every day
	ZANTAC	150 mg	take 1 tablet by oral route every day

### Injections

J1040 - Depo-Medrol 80 mg

J0696 - Rocephin per 250 mg, x4

### Diagnostics

Status	Priority	Order
ordered	Immediate	CT: sinus w/o contrast

### Evaluation and Management

99214 - Established Patient, Detailed Problem

### Follow Up

#### Acute

Follow - up  
4 month(s)

---

**Approved by Jeffrey S. Anthony APRN 08/08/19**

Southeast Texas Medical Associates, LLP

08/08/2019 01:45 PM



SETMA I - 2929 Calder, Suite 100

SETMA II - 3570 College, Suite 200

Mark Wilson Clinic - 2010 Dowlen

Lumberton - 137B LHS Drive

Nederland/Port Arthur - 2400 Highway 365, Suite 201

Orange - 610 Strickland Drive, Suite 140

(409) 833-9797

www.setma.com

## Chart Note - 07/02/19 SETMA II

**Patient** William Carrington  
**Date of Birth** 01/29/1963  
**Age** 56 Years  
**Race** Declined to specify  
**Preferred Language** English  
**Sex** M  
**Visit Type** Office Visit  
**Medical Record** 57115

### Acute Diagnoses

#### Status

Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease,  
without long-term current use of insulin  
Chronic kidney disease, stage 2 (mild)  
Essential hypertension  
Chronic maxillary sinusitis  
Body mass index (BMI) 30.0-30.9, adult

### Chief Complaints

SINUS PROBLEMS

\* Diabetes Management

### Chronic Conditions

Chronic GERD  
Polyneuropathy associated with underlying disease  
Combined forms of age-related cataract of both eyes  
Facet arthritis of cervical region  
Chronic bronchitis, mucopurulent  
Systolic CHF, chronic  
Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease, without

long-term current use of insulin  
Shy-Drager syndrome  
Degeneration of basal ganglia  
Calcification of abdominal aorta  
Essential hypertension  
Fredrickson type IIb hyperlipoproteinemia  
CAD in native artery  
Old MI (myocardial infarction)  
Mild persistent asthma, uncomplicated  
CKD (chronic kidney disease) stage 2, GFR 60-89 ml/min  
Ataxia  
Benign prostatic hyperplasia with weak urinary stream  
Elevated uric acid in blood  
Tobacco abuse  
Carrier of staphylococcus  
Benign essential tremor  
Chronic fatigue syndrome  
Chronic maxillary sinusitis  
Fibromyalgia  
Diarrhea  
Status post coronary artery bypass graft  
Simple obesity  
Beta-blockers contraindicated  
Changes in retinal vascular appearance of both eyes  
Subjective visual disturbance of both eyes

### **Chief Complaint 1 - SINUS PROBLEMS**

Frequency - persistently  
Duration - 2 week(s)  
Severity - moderate  
Change - no change  
Aggravated By - None  
Relieved By - none

#### **Associated Symptoms**

Cough, Productive  
Sneezing  
Congestion, Sinus  
Congestion, Head

#### **Pertinent Negatives**

Cough, Croupy  
Congestion, Chest

#### **Comments**

ah ma

### **Chief Complaint 2 - \* Diabetes Management**

Frequency - persistently  
Duration - year(s)

## Document note on 07/02/2019 1:30 PM for William D Carrington

Patient: Carrington , William

Visit Date: 07/02/19

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Severity - moderate

Change - no change

Context - chronic illness

Aggravated By - None

Relieved By - rx meds

### Pertinent Negatives

Excessive Hunger

Excessive Thirst

Excessive Urination

### Comments

ah ma

## Nursing

### Medications Administered

<u>Medication</u>	<u>Amount</u>	<u>Measure</u>	<u>Route</u>	<u>Site</u>	<u>Initials</u>	<u>Time</u>
Depo-Medrol	80.00	mg	IM			
Dexamethasone Sodium Phos		8.00	mg	IM		
Rocephin	1.00	gram(s)	IM			

### Medications (active prior to today)

<u>Medication Name</u>	<u>Sig Desc</u>	<u>Start Date</u>	<u>Stop Date</u>	<u>Refilled</u>	<u>Elsewhere</u>
Claritin-D 12 Hour 5 mg-120 mg Tab	1 tab po BID	//			Y
aspirin 325 mg tablet	take 1 tablet by oral route every day	//		05/17/2018	Y
Zantac 150 mg tablet	take 1 tablet by oral route every day	//		05/17/2018	Y
allopurinol 300 mg tablet	TAKE 1 TABLET BY MOUTH ONCE DAILY	07/09/2018		07/09/2018	N
Zanaflex 4 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY 8 HOURS AS NEEDED NOT TO EXCEED 3 DOSES IN 24 HOURS	07/09/2018		07/09/2018	N
atorvastatin 80 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY DAY AT BEDTIME	10/25/2018		10/25/2018	N
lisinopril 5 mg tablet	TAKE 1 TABLET BY ORAL ROUTE 2 TIMES EVERY DAY	12/04/2018		12/04/2018	N
Ventolin HFA 90 mcg/actuation aerosol inhaler	inhale 2 puff by inhalation route every 4 hours	04/03/2019		04/03/2019	N
omeprazole 20 mg capsule, delayed release	take 1 Tablet by Oral route every morning	04/03/2019		04/03/2019	N
Symbicort 80 mcg-4.5 mcg/actuation HFA aerosol inhaler	inhale 2 puff by inhalation route 2 times every day in the morning and evening	04/03/2019		04/03/2019	N
Viagra 50 mg tablet	take 1 tablet by oral route	04/03/2019		04/03/2019	N

## Document note on 07/02/2019 1:30 PM for William D Carrington

Patient: Carrington, William

Visit Date: 07/02/19

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	every day as needed				
	approximately 1 hour before				
	sexual activity				
Bactrim DS 800 mg-160 mg tablet	take 1 tablet by oral route	06/19/2019	07/12/2019	06/19/2019	N
	every 12 hours				
fluticasone propionate 50 mcg/actuation nasal spray,suspension	spray 2 spray by intranasal route twice a day each nostril	06/19/2019		06/19/2019	N
Medrol (Pak) 4 mg tablets in a dose pack	take as directed	06/19/2019	07/02/2019	06/19/2019	N

### Medication Reconciliation

Medications reconciled today.

### Medication Reviewed

Adherence	Medication Name	Sig Desc	Elsewhere	Status
taking as directed	fluticasone propionate 50 mcg/actuation nasal spray,suspension	spray 2 spray by intranasal route twice a day each nostril	N	Verified
taking as directed	Viagra 50 mg tablet	take 1 tablet by oral route every day as needed approximately 1 hour before sexual activity	N	Verified
taking as directed	Zantac 150 mg tablet	take 1 tablet by oral route every day	Y	Verified
taking as directed	lisinopril 5 mg tablet	TAKE 1 TABLET BY ORAL ROUTE 2 TIMES EVERY DAY	N	Verified
taking as directed	Ventolin HFA 90 mcg/actuation aerosol inhaler	inhale 2 puff by inhalation route every 4 hours	N	Verified
taking as directed	Symbicort 80 mcg-4.5 mcg/actuation HFA aerosol inhaler	inhale 2 puff by inhalation route 2 times every day in the morning and evening	N	Verified
taking as directed	aspirin 325 mg tablet	take 1 tablet by oral route every day	Y	Verified
taking as directed	allopurinol 300 mg tablet	TAKE 1 TABLET BY MOUTH ONCE DAILY	N	Verified
taking as directed	atorvastatin 80 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY DAY AT BEDTIME	N	Verified
taking as directed	omeprazole 20 mg capsule,delayed release	take 1 Tablet by Oral route every morning	N	Verified
taking as directed	Zanaflex 4 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY 8 HOURS AS NEEDED NOT TO EXCEED 3 DOSES IN 24 HOURS	N	Verified
taking as directed	Claritin-D 12 Hour 5 mg-120 mg Tab	1 tab po BID	Y	Verified
taking as directed	Medrol (Pak) 4 mg tablets in a dose pack	take as directed	N	Verified
taking as directed	Bactrim DS 800 mg-160 mg tablet	take 1 tablet by oral route every 12 hours	N	Verified

### Health Maintenance

The patient's health maintenance was reviewed today.

BMP - 04/03/2019

CBC - 04/03/2019

## Document note on 07/02/2019 1:30 PM for William D Carrington

Patient: Carrington, William

Visit Date: 07/02/19

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Chemistry - 05/17/2018  
Chest X-Ray - 10/12/2017  
Colonoscopy - 04/08/2004  
Creatinine - 04/03/2019  
Dilated Eye Exam - 10/30/2018  
Foot Exam - 04/03/2019  
Echocardiogram - 08/15/2004  
EKG - 04/03/2019  
EMG - 01/21/2015  
Eye Exam - 04/03/2019  
Flu Shot - 09/27/2018  
HFP - 04/03/2019  
HGB - 04/03/2019  
Lipids - 04/03/2019  
Microalbumin - 09/17/2018  
PFT - 07/25/2008  
Pneumovax - 04/08/2009  
PSA - 04/03/2019  
PT/INR - 08/18/2016  
Rectal Exam - 04/08/2009  
Stress Test - 09/23/2004  
Tetanus - 06/19/2019  
Thyroid Profile - 05/02/2008  
Urinalysis - 09/17/2018  
uTSH - 04/03/2019

### Patient's Preferred Specialists

Neurology - Dr. Deiparine

## Histories

---

### Past Medical History

#### PAST MEDICAL/SURGICAL HISTORY

Disease/disorder	Onset Date	Management	Date
		lymphnodes removed right knee CABG	2002
Chicken Pox			
measles			
Shy Drager syndrome	2007		

### Social History

Ethnicity - Not Hispanic or Latino

Occupation - store manager

Marital Status - divorced

#### Tobacco Use

Smoking status: Heavy tobacco smoker.

## Document note on 07/02/2019 1:30 PM for William D Carrington

Patient: Carrington , William

Visit Date: 07/02/19

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### Alcohol Use

approximately 0.00 ounces/week.

approximately 0.00 ounces/week.

approximately 0.00 ounces/week.

### Caffeine

Approximately 6 cups/cans per day

## Family History

Relationship	Family Member Name	Deceased	Age at Death	Condition	Onset Age	Cause of Death
				Family history of Diabetes mellitus type 2		N
				No family history of Hypertension		N
				No family history of Hyperlipidemia		N
Father		Y		Cancer of the Lung	42	N
Mother		N		Arthritis		N

## Review of Systems

### Source of Information

Patient

## Allergies

Description	Onset
BACITRACIN ZINC	08/08/2002
MEDICAL SUPPLY, MISCELLANEOUS	08/08/2002
NEOMYCIN SULFATE	08/08/2002
INDOMETHACIN	08/08/2002
POLYMYXIN B	08/08/2002
ISOPROPYL ALCOHOL	08/08/2002
BACITRACIN	08/08/2002
PROPOXYPHENE NAPSYLATE	08/08/2002
CHLORHEXIDINE GLUCONATE	08/08/2002
CODEINE	08/08/2002
MORPHINE	08/08/2002
ACETAMINOPHEN	08/08/2002
IBUPROFEN	08/08/2002
POLYMYXIN B SULFATE	08/08/2002
GRAMICIDIN D	08/08/2002
FENTANYL	04/05/2007
AMOXICILLIN TRIHYDRATE	07/29/2009
POTASSIUM CLAVULANATE	07/29/2009

## Constitutional

### Patient Denies

Fatigue, Headache, Dizziness,



**Eyes**

Last Eye Exam - 04/03/2019

Last Dilated Eye Exam - 10/30/2018

Patient Denies

Blurred vision, Faded vision,

**Head/Neck**

Patient Denies

Headache,

**Nose**

Patient Confirms

Sneezing,

**Cardiac**

Patient Confirms

Cough,

Patient Denies

Diaphoresis, Dyspnea, Nausea, Fatigue,

**Respiratory**

Patient Confirms

Sneezing, Cough, Daytime cough, Nighttime cough,

Productive cough - clear

Patient Denies

Cold symptoms,

**Gastrointestinal**

Patient Denies

Nausea, Vomiting, Indigestion, Heartburn,

**Male Genitourinary**

Last PSA - 04/03/2019

Last Digital Rectal Exam - 04/08/2009

Patient Confirms

Urinary incontinence,

Patient Denies

Weak stream, Polyuria, Nocturia, Sexually active,

**Musculoskeletal**

Patient is right-handed.

Patient Denies

Joint pain, Joint swelling, Joint stiffness,

**Integumentary**

# Document note on 07/02/2019 1:30 PM for William D Carrington

Patient: Carrington, William  
Visit Date: 07/02/19  
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Patient Confirms  
Intact, Warm/Dry

## Endocrine

Patient Confirms

Diabetes Mellitus,

Patient Denies

Polydipsia, Polyphagia, Polyuria, Nausea,

## Physical Exam

### Vital Signs

#### HEIGHT

Time	ft	in	cm	Last Measured	Height Position	%
1:41 PM	6.0	1.00	185.42	07/02/2013	Standing	

#### WEIGHT/BSA/BMI

Time	lb	oz	kg	Context	%	BMI kg/m2	BSA m2
1:41 PM	229.00		103.873	dressed with shoes		30.21	2.31

#### BLOOD PRESSURE

Time	BP mm/Hg	Position	Side	Site	Method	Cuff Size
1:41 PM	120/82	sitting	right	arm	manual	adult

Mid-Arm Circumference - 0.0 inches

#### TEMPERATURE/PULSE/RESPIRATION

Time	Temp F	Temp C	Temp Site	Pulse/min	Pattern	Resp/ min
1:41 PM				48	regular	18

#### PULSE OXIMETRY/FIO2

Time	Pulse Ox (Rest %)	Pulse Ox (Amb %)	O2 Sat	O2 LPM	Timing	FiO2 %	L/min	Delivery Method
1:41 PM	99		RA			21		

#### MEASURED BY

Time	Measured by
1:41 PM	Angela D. Harrison

Body Fat - 19.6 %

Protein Requirement - 124 grams/day

#### Circumferences (Performed 07/02/2019)

Waist - 0.00 inches

Hips - 0.00 inches

Abdomen - 40 inches

Chest - 44.00 inches

Neck - 0.0 inches

Patient: Carrington , William  
Visit Date: 07/02/19  
Page 9 of 14

### **Constitutional**

Level of Consciousness - Normal  
Orientation - Normal  
Level of Distress - Normal  
Nourishment - mildly obese  
Overall Appearance - Normal

### **Ears**

#### **External Ear**

Inspection

Right - Normal  
Left - Normal

Palpation

Right - Normal  
Left - Normal

#### **Internal Ear**

Canals

Right - Normal  
Left - Normal

TMs

Right - air fluid level  
Left - air fluid level

Hearing

Right - Normal  
Left - Normal

### **Neck**

Inspection - Normal  
Palpation - Normal  
Lymph Nodes - Normal  
Thyroid Gland - Normal

### **Respiratory**

Inspection - Normal  
Auscultation - Normal  
Cough - Absent

### **Cardiovascular**

Auscultation - Normal  
Murmurs - Absent  
Peripheral Edema - No

### **Abdomen**

## Document note on 07/02/2019 1:30 PM for William D Carrington

Patient: Carrington , William  
Visit Date: 07/02/19  
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Inspection - Normal  
Auscultation - Normal  
Palpation - Normal

### **Neurological**

#### Mental Status

Cognitive Abilities - Normal  
Emotional Stability - Normal

#### Sensory Function

Balance and Gait - Normal

### **Screener and Opioid Assessment for Patients with Pain (SOAPP)**

### **Latest Lab Results**

CBC	Value	Date	Normal Range
WBC	8.3 x10 <sup>3</sup> /uL	04/03/2019	3.7-10.1 x10 <sup>3</sup> /uL
HGB	17.7 g/dL	04/03/2019	12.9-16.7 g/dL
HCT	53.2 %	04/03/2019	38.7-50.0 %
PLT	275 10 <sup>3</sup> /uL	04/03/2019	155-400 10 <sup>3</sup> /uL
RBC	5.58 10 <sup>6</sup> /	04/03/2019	4.06-5.58 10 <sup>6</sup> /
MCV	95.0 fl	04/03/2019	81-96 fl
MCH	31.7 pg	04/03/2019	27.0-32.0 pg
MCHC33.3 g/dL	04/03/2019	31.8-35.4 g/dL	
Lymph#	2.4 10 <sup>3</sup> /	04/03/2019	1.1-3.0 10 <sup>3</sup> /
Lymph%	29.2 %	04/03/2019	18.0-48.3 %
Eos#	0.2 10 <sup>3</sup> /	04/03/2019	0.0-0.4 %
Eos%	2.4 2.4	04/03/2019	0.6-7.3 %

<b>Urinalysis</b>	09/17/2018
Color	DARK YELLOW
Clarity	Clear
pH	6.50
Spec Grav	1.022
Glucose	Negative
URO	
Ketones	Negative
Leukocytes	Negative
Nitrates	Negative
Bilirubin	Negative
Blood	Negative
Protein	Negative

## Document note on 07/02/2019 1:30 PM for William D Carrington

Patient: Carrington , William  
Visit Date: 07/02/19  
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Na	142 mmol/L	04/03/2019
K	4.5 mmol/L	04/03/2019
Chloride	104 mmol/L	04/03/2019
CO2	31 mmol/L	04/03/2019
Glucose	139 mg/dL	04/03/2019
BUN	19 mg/dL	04/03/2019
Creatinine	1.0 mg/dL	04/03/2019
Ca	9.3	04/03/2019

### CMP

ALB	3.7 g/dL	04/03/2019
AST	19 u/L	04/03/2019
ALT	41 u/L	04/03/2019
ALP	96 u/L	04/03/2019
BILI-D	0.2 mg/dL	04/03/2019
BILI-T	0.6 mg/dL	04/03/2019
TP	6.4 g/dL	04/03/2019

### Thyroid

T3	1.37 ng/mL	05/02/2008
T4	7.43 ng/dL	05/02/2008
T7	0.08	05/02/2008
TSH	1.67 ulu/mL	04/03/2019
T-Uptake	1.03 TBI	05/02/2008

### Lipids Result

#### Date

#### Normal Range

Cholesterol	81 mg/dL	04/03/2019	<175 mg/dL
HDL	30 mg/dL	04/03/2019	>40 mg/dL
CHOL/HDL Ratio	2.70		<4.7 NA
LDL	41 NA	04/03/2019	NA
Triglycerides	50 mg/dL	04/03/2019	<150 mg/dL

### Occult Blood

OB2	Negative	04/08/2019
OB3	Negative	04/08/2019

### Other

Amylase	45 u/L	05/17/2018
Lipase 197 u/L	05/17/2018	
PT	12.4 seconds	08/18/2016
INR	0	08/18/2016
Glyco Hemoglobin	6.5 %	04/03/2019
Mean Plasma Glucose	154.1 mg/dL	
BNP	41.00 pg/mL	04/03/2019

B12	509.00 pg/mL	01/18/2013
ESR	2 mm/hr	09/17/2018
Magnesium	1.7 mg/dL	04/03/2019
Micral Strip	Positive 20mg/L	09/17/2018
PSA	3.10 ng/mL	04/03/2019
Rheumatoid Factor	7.00 IU/mL	08/04/2014
Uric Acid	4.5 mg/dL	09/17/2018

## Assessment

Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease, without long-term current use of insulin  
Chronic kidney disease, stage 2 (mild)  
Essential hypertension  
Chronic maxillary sinusitis  
Body mass index (BMI) 30.0-30.9, adult

### Chronic Conditions

Chronic GERD  
Polyneuropathy associated with underlying disease  
Combined forms of age-related cataract of both eyes  
Facet arthritis of cervical region  
Chronic bronchitis, mucopurulent  
Systolic CHF, chronic  
Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease, without long-term current use of insulin  
Shy-Drager syndrome  
Degeneration of basal ganglia  
Calcification of abdominal aorta  
Essential hypertension  
Fredrickson type IIb hyperlipoproteinemia  
CAD in native artery  
Old MI (myocardial infarction)  
Mild persistent asthma, uncomplicated  
CKD (chronic kidney disease) stage 2, GFR 60-89 ml/min  
Ataxia  
Benign prostatic hyperplasia with weak urinary stream  
Elevated uric acid in blood  
Tobacco abuse  
Carrier of staphylococcus  
Benign essential tremor  
Chronic fatigue syndrome  
Chronic maxillary sinusitis  
Fibromyalgia  
Diarrhea  
Status post coronary artery bypass graft

# Document note on 07/02/2019 1:30 PM for William D Carrington

Patient: Carrington, William  
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Simple obesity  
Beta-blockers contraindicated  
Changes in retinal vascular appearance of both eyes  
Subjective visual disturbance of both eyes

## Framingham Cardiovascular Risk

10 Year CVD Risk - 13%  
10 Year Stroke Risk - 5%

## Global Cardiovascular Risk Score

Current Score - 2.7 points  
(A Global Cardiovascular Risk Score below 4 is desirable. Above 4, the patient is at increased risk of a cardiovascular event.)

## Plan

Current and previous labs reviewed  
Plan was discussed with patient.  
The patient indicates they agree with the discussed plan.  
Follow-Up Visit  
Medications reviewed  
Continue current medications & therapy  
Medication(s) Ordered  
Medications Given in Office  
Current Medication List Given to Patient

## Education/Instructions

Patient Given Diabetes Follow Up Document  
setma83\_hosp\_plan{Unexpected Value}

## Active Medications

Start Date	Brand	Dose	Sig Desc
06/19/2019	BACTRIM DS	800 mg-160 mg	take 1 tablet by oral route every 12 hours
06/19/2019	FLUTICASONE PROPIONATE	50 mcg/actuation	spray 2 spray by intranasal route twice a day each nostril
04/03/2019	VENTOLIN HFA	90 mcg	inhale 2 puff by inhalation route every 4 hours
04/03/2019	OMEPRAZOLE	20 mg	take 1 Tablet by Oral route every morning
04/03/2019	SYMBICORT	80 mcg-4.5 mcg/actuation	inhale 2 puff by inhalation route 2 times every day in the morning and evening
04/03/2019	VIAGRA	50 mg	take 1 tablet by oral route every day as needed approximately 1 hour before sexual activity
12/04/2018	LISINOPRIL	5 mg	TAKE 1 TABLET BY ORAL ROUTE 2 TIMES EVERY DAY
10/25/2018	ATORVASTATIN CALCIUM	80 mg	TAKE 1 TABLET BY ORAL ROUTE EVERY DAY AT BEDTIME

## Document note on 07/02/2019 1:30 PM for William D Carrington

Patient: Carrington , William

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07/09/2018	ALLOPURINOL	300 mg	TAKE 1 TABLET BY MOUTH ONCE DAILY
07/09/2018	ZANAFLEX	4 mg	TAKE 1 TABLET BY ORAL ROUTE EVERY 8 HOURS AS NEEDED NOT TO EXCEED 3 DOSES IN 24 HOURS
	CLARITIN-D 12 HOUR	5 mg-120 mg	1 tab po BID
	ASPIRIN	325 mg	take 1 tablet by oral route every day
	ZANTAC	150 mg	take 1 tablet by oral route every day

### **Disease Management Tools Accessed**

Diabetes Mellitus

Hypertension

Lipids

### **Injections**

J1040 - Depo-Medrol 80 mg

J1100 - Dexamethasone Sodium Phosphate 8 mg, x8

J0696 - Rocephin per 250 mg, x4

### **Evaluation and Management**

99214 - Established Patient, Detailed Problem

### **Follow Up**

Acute

Follow - up

6 week(s)

---

**Approved by Jeffrey S. Anthony APRN 07/02/19**

Southeast Texas Medical Associates, LLP

07/02/2019 01:30 PM





SETMA I - 2929 Calder, Suite 100

SETMA II - 3570 College, Suite 200

Mark Wilson Clinic - 2010 Dowlen

Lumberton - 137B LHS Drive

Nederland/Port Arthur - 2400 Highway 365, Suite 201

Orange - 610 Strickland Drive, Suite 140

(409) 833-9797

www.setma.com

## Chart Note - 07/02/19 SETMA II

**Patient** William Carrington  
**Date of Birth** 01/29/1963  
**Age** 56 Years  
**Race** Declined to specify  
**Preferred Language** English  
**Sex** M  
**Visit Type** Office Visit  
**Medical Record** 57115

### Acute Diagnoses

#### Status

Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease,  
without long-term current use of insulin  
Chronic kidney disease, stage 2 (mild)  
Essential hypertension  
Chronic maxillary sinusitis  
Body mass index (BMI) 30.0-30.9, adult

### Chief Complaints

SINUS PROBLEMS

\* Diabetes Management

### Chronic Conditions

Chronic GERD  
Polyneuropathy associated with underlying disease  
Combined forms of age-related cataract of both eyes  
Facet arthritis of cervical region  
Chronic bronchitis, mucopurulent  
Systolic CHF, chronic  
Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease, without

long-term current use of insulin  
Shy-Drager syndrome  
Degeneration of basal ganglia  
Calcification of abdominal aorta  
Essential hypertension  
Fredrickson type IIb hyperlipoproteinemia  
CAD in native artery  
Old MI (myocardial infarction)  
Mild persistent asthma, uncomplicated  
CKD (chronic kidney disease) stage 2, GFR 60-89 ml/min  
Ataxia  
Benign prostatic hyperplasia with weak urinary stream  
Elevated uric acid in blood  
Tobacco abuse  
Carrier of staphylococcus  
Benign essential tremor  
Chronic fatigue syndrome  
Chronic maxillary sinusitis  
Fibromyalgia  
Diarrhea  
Status post coronary artery bypass graft  
Simple obesity  
Beta-blockers contraindicated  
Changes in retinal vascular appearance of both eyes  
Subjective visual disturbance of both eyes

### **Chief Complaint 1 - SINUS PROBLEMS**

Frequency - persistently  
Duration - 2 week(s)  
Severity - moderate  
Change - no change  
Aggravated By - None  
Relieved By - none

#### **Associated Symptoms**

Cough, Productive  
Sneezing  
Congestion, Sinus  
Congestion, Head

#### **Pertinent Negatives**

Cough, Croupy  
Congestion, Chest

#### **Comments**

ah ma

### **Chief Complaint 2 - \* Diabetes Management**

Frequency - persistently  
Duration - year(s)

## Document note on 07/02/2019 1:30 PM for William D Carrington

Patient: Carrington, William

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Severity - moderate

Change - no change

Context - chronic illness

Aggravated By - None

Relieved By - rx meds

### Pertinent Negatives

Excessive Hunger

Excessive Thirst

Excessive Urination

### Comments

ah ma

## Nursing

### Medications Administered

<u>Medication</u>	<u>Amount</u>	<u>Measure</u>	<u>Route</u>	<u>Site</u>	<u>Initials</u>	<u>Time</u>
Depo-Medrol	80.00	mg	IM			
Dexamethasone Sodium Phos		8.00	mg	IM		
Rocephin	1.00	gram(s)	IM			

### Medications (active prior to today)

<u>Medication Name</u>	<u>Sig Desc</u>	<u>Start Date</u>	<u>Stop Date</u>	<u>Refilled</u>	<u>Elsewhere</u>
Claritin-D 12 Hour 5 mg-120 mg Tab	1 tab po BID	//			Y
aspirin 325 mg tablet	take 1 tablet by oral route every day	//		05/17/2018	Y
Zantac 150 mg tablet	take 1 tablet by oral route every day	//		05/17/2018	Y
allopurinol 300 mg tablet	TAKE 1 TABLET BY MOUTH ONCE DAILY	07/09/2018		07/09/2018	N
Zanaflex 4 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY 8 HOURS AS NEEDED NOT TO EXCEED 3 DOSES IN 24 HOURS	07/09/2018		07/09/2018	N
atorvastatin 80 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY DAY AT BEDTIME	10/25/2018		10/25/2018	N
lisinopril 5 mg tablet	TAKE 1 TABLET BY ORAL ROUTE 2 TIMES EVERY DAY	12/04/2018		12/04/2018	N
Ventolin HFA 90 mcg/actuation aerosol inhaler	inhale 2 puff by inhalation route every 4 hours	04/03/2019		04/03/2019	N
omeprazole 20 mg capsule, delayed release	take 1 Tablet by Oral route every morning	04/03/2019		04/03/2019	N
Symbicort 80 mcg-4.5 mcg/actuation HFA aerosol inhaler	inhale 2 puff by inhalation route 2 times every day in the morning and evening	04/03/2019		04/03/2019	N
Viagra 50 mg tablet	take 1 tablet by oral route	04/03/2019		04/03/2019	N

## Document note on 07/02/2019 1:30 PM for William D Carrington

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	every day as needed					
	approximately 1 hour before					
	sexual activity					
Bactrim DS 800 mg-160 mg tablet	take 1 tablet by oral route	06/19/2019	07/12/2019	06/19/2019	N	
	every 12 hours					
fluticasone propionate 50 mcg/actuation nasal spray,suspension	spray 2 spray by intranasal route twice a day each nostril	06/19/2019		06/19/2019	N	
Medrol (Pak) 4 mg tablets in a dose pack	take as directed	06/19/2019	07/02/2019	06/19/2019	N	

### Medication Reconciliation

Medications reconciled today.

### Medication Reviewed

Adherence	Medication Name	Sig Desc	Elsewhere	Status
taking as directed	fluticasone propionate 50 mcg/actuation nasal spray,suspension	spray 2 spray by intranasal route twice a day each nostril	N	Verified
taking as directed	Viagra 50 mg tablet	take 1 tablet by oral route every day as needed approximately 1 hour before sexual activity	N	Verified
taking as directed	Zantac 150 mg tablet	take 1 tablet by oral route every day	Y	Verified
taking as directed	lisinopril 5 mg tablet	TAKE 1 TABLET BY ORAL ROUTE 2 TIMES EVERY DAY	N	Verified
taking as directed	Ventolin HFA 90 mcg/actuation aerosol inhaler	inhale 2 puff by inhalation route every 4 hours	N	Verified
taking as directed	Symbicort 80 mcg-4.5 mcg/actuation HFA aerosol inhaler	inhale 2 puff by inhalation route 2 times every day in the morning and evening	N	Verified
taking as directed	aspirin 325 mg tablet	take 1 tablet by oral route every day	Y	Verified
taking as directed	allopurinol 300 mg tablet	TAKE 1 TABLET BY MOUTH ONCE DAILY	N	Verified
taking as directed	atorvastatin 80 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY DAY AT BEDTIME	N	Verified
taking as directed	omeprazole 20 mg capsule,delayed release	take 1 Tablet by Oral route every morning	N	Verified
taking as directed	Zanaflex 4 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY 8 HOURS AS NEEDED NOT TO EXCEED 3 DOSES IN 24 HOURS	N	Verified
taking as directed	Claritin-D 12 Hour 5 mg-120 mg Tab	1 tab po BID	Y	Verified
taking as directed	Medrol (Pak) 4 mg tablets in a dose pack	take as directed	N	Verified
taking as directed	Bactrim DS 800 mg-160 mg tablet	take 1 tablet by oral route every 12 hours	N	Verified

### Health Maintenance

The patient's health maintenance was reviewed today.

BMP - 04/03/2019

CBC - 04/03/2019

## Document note on 07/02/2019 1:30 PM for William D Carrington

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Chemistry - 05/17/2018  
Chest X-Ray - 10/12/2017  
Colonoscopy - 04/08/2004  
Creatinine - 04/03/2019  
Dilated Eye Exam - 10/30/2018  
Foot Exam - 04/03/2019  
Echocardiogram - 08/15/2004  
EKG - 04/03/2019  
EMG - 01/21/2015  
Eye Exam - 04/03/2019  
Flu Shot - 09/27/2018  
HFP - 04/03/2019  
HGB - 04/03/2019  
Lipids - 04/03/2019  
Microalbumin - 09/17/2018  
PFT - 07/25/2008  
Pneumovax - 04/08/2009  
PSA - 04/03/2019  
PT/INR - 08/18/2016  
Rectal Exam - 04/08/2009  
Stress Test - 09/23/2004  
Tetanus - 06/19/2019  
Thyroid Profile - 05/02/2008  
Urinalysis - 09/17/2018  
uTSH - 04/03/2019

### Patient's Preferred Specialists

Neurology - Dr. Deiparine

## Histories

---

### Past Medical History

#### PAST MEDICAL/SURGICAL HISTORY

Disease/disorder	Onset Date	Management	Date
		lymphnodes removed right knee CABG	2002
Chicken Pox			
measles			
Shy Drager syndrome	2007		

### Social History

Ethnicity - Not Hispanic or Latino

Occupation - store manager

Marital Status - divorced

#### Tobacco Use

Smoking status: Heavy tobacco smoker.

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### Alcohol Use

approximately 0.00 ounces/week.

approximately 0.00 ounces/week.

approximately 0.00 ounces/week.

### Caffeine

Approximately 6 cups/cans per day

## Family History

Relationship	Family Member Name	Deceased	Age at Death	Condition	Onset Age	Cause of Death
				Family history of Diabetes mellitus type 2		N
				No family history of Hypertension		N
				No family history of Hyperlipidemia		N
Father		Y		Cancer of the Lung	42	N
Mother		N		Arthritis		N

## Review of Systems

### Source of Information

Patient

## Allergies

Description	Onset
BACITRACIN ZINC	08/08/2002
MEDICAL SUPPLY, MISCELLANEOUS	08/08/2002
NEOMYCIN SULFATE	08/08/2002
INDOMETHACIN	08/08/2002
POLYMYXIN B	08/08/2002
ISOPROPYL ALCOHOL	08/08/2002
BACITRACIN	08/08/2002
PROPOXYPHENE NAPSYLATE	08/08/2002
CHLORHEXIDINE GLUCONATE	08/08/2002
CODEINE	08/08/2002
MORPHINE	08/08/2002
ACETAMINOPHEN	08/08/2002
IBUPROFEN	08/08/2002
POLYMYXIN B SULFATE	08/08/2002
GRAMICIDIN D	08/08/2002
FENTANYL	04/05/2007
AMOXICILLIN TRIHYDRATE	07/29/2009
POTASSIUM CLAVULANATE	07/29/2009

## Constitutional

### Patient Denies

Fatigue, Headache, Dizziness,

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### **Eyes**

Last Eye Exam - 04/03/2019

Last Dilated Eye Exam - 10/30/2018

Patient Denies

Blurred vision, Faded vision,

### **Head/Neck**

Patient Denies

Headache,

### **Nose**

Patient Confirms

Sneezing,

### **Cardiac**

Patient Confirms

Cough,

Patient Denies

Diaphoresis, Dyspnea, Nausea, Fatigue,

### **Respiratory**

Patient Confirms

Sneezing, Cough, Daytime cough, Nighttime cough,

Productive cough - clear

Patient Denies

Cold symptoms,

### **Gastrointestinal**

Patient Denies

Nausea, Vomiting, Indigestion, Heartburn,

### **Male Genitourinary**

Last PSA - 04/03/2019

Last Digital Rectal Exam - 04/08/2009

Patient Confirms

Urinary incontinence,

Patient Denies

Weak stream, Polyuria, Nocturia, Sexually active,

### **Musculoskeletal**

Patient is right-handed.

Patient Denies

Joint pain, Joint swelling, Joint stiffness,

### **Integumentary**

# Document note on 07/02/2019 1:30 PM for William D Carrington

Patient: Carrington, William  
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Patient Confirms  
Intact, Warm/Dry

## Endocrine

Patient Confirms

Diabetes Mellitus,

Patient Denies

Polydipsia, Polyphagia, Polyuria, Nausea,

## Physical Exam

### Vital Signs

#### HEIGHT

Time	ft	in	cm	Last Measured	Height Position	%
1:41 PM	6.0	1.00	185.42	07/02/2013	Standing	

#### WEIGHT/BSA/BMI

Time	lb	oz	kg	Context	%	BMI kg/m2	BSA m2
1:41 PM	229.00		103.873	dressed with shoes		30.21	2.31

#### BLOOD PRESSURE

Time	BP mm/Hg	Position	Side	Site	Method	Cuff Size
1:41 PM	120/82	sitting	right	arm	manual	adult

Mid-Arm Circumference - 0.0 inches

#### TEMPERATURE/PULSE/RESPIRATION

Time	Temp F	Temp C	Temp Site	Pulse/min	Pattern	Resp/ min
1:41 PM				48	regular	18

#### PULSE OXIMETRY/FIO2

Time	Pulse Ox (Rest %)	Pulse Ox (Amb %)	O2 Sat	O2 LPM	Timing	FiO2 %	L/min	Delivery Method
1:41 PM	99		RA			21		

#### MEASURED BY

Time	Measured by
1:41 PM	Angela D. Harrison

Body Fat - 19.6 %

Protein Requirement - 124 grams/day

#### Circumferences (Performed 07/02/2019)

Waist - 0.00 inches

Hips - 0.00 inches

Abdomen - 40 inches

Chest - 44.00 inches

Neck - 0.0 inches



**Constitutional**

Level of Consciousness - Normal  
Orientation - Normal  
Level of Distress - Normal  
Nourishment - mildly obese  
Overall Appearance - Normal

**Ears**

External Ear

Inspection

Right - Normal  
Left - Normal

Palpation

Right - Normal  
Left - Normal

Internal Ear

Canals

Right - Normal  
Left - Normal

TMs

Right - air fluid level  
Left - air fluid level

Hearing

Right - Normal  
Left - Normal

**Neck**

Inspection - Normal  
Palpation - Normal  
Lymph Nodes - Normal  
Thyroid Gland - Normal

**Respiratory**

Inspection - Normal  
Auscultation - Normal  
Cough - Absent

**Cardiovascular**

Auscultation - Normal  
Murmurs - Absent  
Peripheral Edema - No

**Abdomen**

## Document note on 07/02/2019 1:30 PM for William D Carrington

Patient: Carrington, William  
Visit Date: 07/02/19  
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Inspection - Normal  
Auscultation - Normal  
Palpation - Normal

### **Neurological**

#### Mental Status

Cognitive Abilities - Normal  
Emotional Stability - Normal

#### Sensory Function

Balance and Gait - Normal

### **Screeners and Opioid Assessment for Patients with Pain (SOAPP)**

### **Latest Lab Results**

CBC	Value	Date	Normal Range
WBC	8.3 x10 <sup>3</sup> /uL	04/03/2019	3.7-10.1 x10 <sup>3</sup> /uL
HGB	17.7 g/dL	04/03/2019	12.9-16.7 g/dL
HCT	53.2 %	04/03/2019	38.7-50.0 %
PLT	275 10 <sup>3</sup> /uL	04/03/2019	155-400 10 <sup>3</sup> /uL
RBC	5.58 10 <sup>6</sup> /	04/03/2019	4.06-5.58 10 <sup>6</sup> /
MCV	95.0 fl	04/03/2019	81-96 fl
MCH	31.7 pg	04/03/2019	27.0-32.0 pg
MCHC33.3 g/dL	04/03/2019	31.8-35.4 g/dL	
Lymph#	2.4 10 <sup>3</sup> /	04/03/2019	1.1-3.0 10 <sup>3</sup> /
Lymph%	29.2 %	04/03/2019	18.0-48.3 %
Eos#	0.2 10 <sup>3</sup> /	04/03/2019	0.0-0.4 %
Eos%	2.4 2.4	04/03/2019	0.6-7.3 %

<b>Urinalysis</b>	09/17/2018
Color	DARK YELLOW
Clarity	Clear
pH	6.50
Spec Grav	1.022
Glucose	Negative
URO	
Ketones	Negative
Leukocytes	Negative
Nitrates	Negative
Bilirubin	Negative
Blood	Negative
Protein	Negative

## Document note on 07/02/2019 1:30 PM for William D Carrington

Patient: Carrington , William  
Visit Date: 07/02/19  
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Na	142 mmol/L	04/03/2019
K	4.5 mmol/L	04/03/2019
Chloride	104 mmol/L	04/03/2019
CO2	31 mmol/L	04/03/2019
Glucose	139 mg/dL	04/03/2019
BUN	19 mg/dL	04/03/2019
Creatinine	1.0 mg/dL	04/03/2019
Ca	9.3	04/03/2019

### CMP

ALB	3.7 g/dL	04/03/2019
AST	19 u/L	04/03/2019
ALT	41 u/L	04/03/2019
ALP	96 u/L	04/03/2019
BILI-D	0.2 mg/dL	04/03/2019
BILI-T	0.6 mg/dL	04/03/2019
TP	6.4 g/dL	04/03/2019

### Thyroid

T3	1.37 ng/mL	05/02/2008
T4	7.43 ng/dL	05/02/2008
T7	0.08	05/02/2008
TSH	1.67 ulu/mL	04/03/2019
T-Uptake	1.03 TBI	05/02/2008

### Lipids Result

#### Date

#### Normal Range

Cholesterol	81 mg/dL	04/03/2019	<175 mg/dL
HDL	30 mg/dL	04/03/2019	>40 mg/dL
CHOL/HDL Ratio	2.70		<4.7 NA
LDL	41 NA	04/03/2019	NA
Triglycerides	50 mg/dL	04/03/2019	<150 mg/dL

### Occult Blood

OB2	Negative	04/08/2019
OB3	Negative	04/08/2019

### Other

Amylase	45 u/L	05/17/2018
Lipase 197 u/L	05/17/2018	
PT	12.4 seconds	08/18/2016
INR	0	08/18/2016
Glyco Hemoglobin	6.5 %	04/03/2019
Mean Plasma Glucose	154.1 mg/dL	
BNP	41.00 pg/mL	04/03/2019

B12	509.00 pg/mL	01/18/2013
ESR	2 mm/hr	09/17/2018
Magnesium	1.7 mg/dL	04/03/2019
Micral Strip	Positive 20mg/L	09/17/2018
PSA	3.10 ng/mL	04/03/2019
Rheumatoid Factor	7.00 IU/mL	08/04/2014
Uric Acid	4.5 mg/dL	09/17/2018

## Assessment

Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease, without long-term current use of insulin  
Chronic kidney disease, stage 2 (mild)  
Essential hypertension  
Chronic maxillary sinusitis  
Body mass index (BMI) 30.0-30.9, adult

### Chronic Conditions

Chronic GERD  
Polyneuropathy associated with underlying disease  
Combined forms of age-related cataract of both eyes  
Facet arthritis of cervical region  
Chronic bronchitis, mucopurulent  
Systolic CHF, chronic  
Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease, without long-term current use of insulin  
Shy-Drager syndrome  
Degeneration of basal ganglia  
Calcification of abdominal aorta  
Essential hypertension  
Fredrickson type IIb hyperlipoproteinemia  
CAD in native artery  
Old MI (myocardial infarction)  
Mild persistent asthma, uncomplicated  
CKD (chronic kidney disease) stage 2, GFR 60-89 ml/min  
Ataxia  
Benign prostatic hyperplasia with weak urinary stream  
Elevated uric acid in blood  
Tobacco abuse  
Carrier of staphylococcus  
Benign essential tremor  
Chronic fatigue syndrome  
Chronic maxillary sinusitis  
Fibromyalgia  
Diarrhea  
Status post coronary artery bypass graft

# Document note on 07/02/2019 1:30 PM for William D Carrington

Patient: Carrington, William  
Visit Date: 07/02/19  
Page 13 of 14

Simple obesity  
Beta-blockers contraindicated  
Changes in retinal vascular appearance of both eyes  
Subjective visual disturbance of both eyes

## Framingham Cardiovascular Risk

10 Year CVD Risk - 13%  
10 Year Stroke Risk - 5%

## Global Cardiovascular Risk Score

Current Score - 2.7 points  
(A Global Cardiovascular Risk Score below 4 is desirable. Above 4, the patient is at increased risk of a cardiovascular event.)

## Plan

Current and previous labs reviewed  
Plan was discussed with patient.  
The patient indicates they agree with the discussed plan.  
Follow-Up Visit  
Medications reviewed  
Continue current medications & therapy  
Medication(s) Ordered  
Medications Given in Office  
Current Medication List Given to Patient

## Education/Instructions

Patient Given Diabetes Follow Up Document  
setma83\_hosp\_plan{Unexpected Value}

## Active Medications

Start Date	Brand	Dose	Sig Desc
06/19/2019	BACTRIM DS	800 mg-160 mg	take 1 tablet by oral route every 12 hours
06/19/2019	FLUTICASONE PROPIONATE	50 mcg/actuation	spray 2 spray by intranasal route twice a day each nostril
04/03/2019	VENTOLIN HFA	90 mcg	inhale 2 puff by inhalation route every 4 hours
04/03/2019	OMEPRAZOLE	20 mg	take 1 Tablet by Oral route every morning
04/03/2019	SYMBICORT	80 mcg-4.5 mcg/actuation	inhale 2 puff by inhalation route 2 times every day in the morning and evening
04/03/2019	VIAGRA	50 mg	take 1 tablet by oral route every day as needed approximately 1 hour before sexual activity
12/04/2018	LISINOPRIL	5 mg	TAKE 1 TABLET BY ORAL ROUTE 2 TIMES EVERY DAY
10/25/2018	ATORVASTATIN CALCIUM	80 mg	TAKE 1 TABLET BY ORAL ROUTE EVERY DAY AT BEDTIME

## Document note on 07/02/2019 1:30 PM for William D Carrington

Patient: Carrington , William

Visit Date: 07/02/19

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07/09/2018	ALLOPURINOL	300 mg	TAKE 1 TABLET BY MOUTH ONCE DAILY
07/09/2018	ZANAFLEX	4 mg	TAKE 1 TABLET BY ORAL ROUTE EVERY 8 HOURS AS NEEDED NOT TO EXCEED 3 DOSES IN 24 HOURS
	CLARITIN-D 12 HOUR	5 mg-120 mg	1 tab po BID
	ASPIRIN	325 mg	take 1 tablet by oral route every day
	ZANTAC	150 mg	take 1 tablet by oral route every day

### **Disease Management Tools Accessed**

Diabetes Mellitus

Hypertension

Lipids

### **Injections**

J1040 - Depo-Medrol 80 mg

J1100 - Dexamethasone Sodium Phosphate 8 mg, x8

J0696 - Rocephin per 250 mg, x4

### **Evaluation and Management**

99214 - Established Patient, Detailed Problem

### **Follow Up**

Acute

Follow - up

6 week(s)

---

**Approved by Jeffrey S. Anthony APRN 07/02/19**

Southeast Texas Medical Associates, LLP

07/02/2019 01:30 PM

Patient: Carrington , William  
Visit Date: 06/19/19  
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SETMA II - 3570 College, Suite 200

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Orange - 610 Strickland Drive, Suite 140

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## Chart Note - 06/19/19 SETMA II

<b>Patient</b>	<b>William Carrington</b>
<b>Date of Birth</b>	<b>01/29/1963</b>
<b>Age</b>	<b>56 Years</b>
<b>Race</b>	<b>Declined to specify</b>
<b>Preferred Language</b>	<b>English</b>
<b>Sex</b>	<b>M</b>
<b>Visit Type</b>	<b>Office Visit</b>
<b>Medical Record</b>	<b>57115</b>

### Acute Diagnoses

#### Status

Facet arthritis of cervical region  
Facet arthritis of cervical region  
Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease,  
without long-term current use of insulin  
Chronic kidney disease, stage 2 (mild)  
Essential hypertension  
Chronic maxillary sinusitis  
Body mass index (BMI) 30.0-30.9, adult

### Chief Complaints

SINUS PROBLEMS  
BUMP

### Chronic Conditions

Chronic GERD  
Polyneuropathy associated with underlying disease  
Combined forms of age-related cataract of both eyes  
Facet arthritis of cervical region  
Chronic bronchitis, mucopurulent

## Document note on 06/19/2019 10:30 AM for William D Carrington

Patient: Carrington , William

Visit Date: 06/19/19

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Systolic CHF, chronic  
Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease, without long-term current use of insulin  
Shy-Drager syndrome  
Degeneration of basal ganglia  
Calcification of abdominal aorta  
Essential hypertension  
Fredrickson type IIb hyperlipoproteinemia  
CAD in native artery  
Old MI (myocardial infarction)  
Mild persistent asthma, uncomplicated  
CKD (chronic kidney disease) stage 2, GFR 60-89 ml/min  
Ataxia  
Benign prostatic hyperplasia with weak urinary stream  
Elevated uric acid in blood  
Tobacco abuse  
Carrier of staphylococcus  
Benign essential tremor  
Chronic fatigue syndrome  
Chronic maxillary sinusitis  
Fibromyalgia  
Diarrhea  
Status post coronary artery bypass graft  
Simple obesity  
Beta-blockers contraindicated  
Changes in retinal vascular appearance of both eyes  
Subjective visual disturbance of both eyes

### **Chief Complaint 1- SINUS PROBLEMS**

Frequency - persistently

Duration - 5 day(s)

Severity - moderate

Change - no change

Aggravated By - None

Relieved By - None

#### **Associated Symptoms**

Cough, Productive

Congestion, Head

Congestion, Sinus

sore throat

#### **Pertinent Negatives**

Sneezing

Cough, Non Productive

#### **Comments**

ah ma

### **Chief Complaint 2 - BUMP**



## Document note on 06/19/2019 10:30 AM for William D Carrington

Patient: Carrington, William

Visit Date: 06/19/19

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Location - RECTUM

Frequency - persistently

Duration - 5 day(s)

Severity - moderate

Change - no change

Context - none

Aggravated By - None

Relieved By - None

### Associated Symptoms

soreness

### Pertinent Negatives

redness

Blisters

drainage

### Comments

ah ma

## Nursing

### Medications (active prior to today)

Medication Name	Sig Desc	Start Date	Stop Date	Refilled	Elsewhere
Claritin-D 12 Hour 5 mg-120 mg Tab	1 tab po BID	//			Y
aspirin 325 mg tablet	take 1 tablet by oral route every day	//		05/17/2018	Y
Zantac 150 mg tablet	take 1 tablet by oral route every day	//		05/17/2018	Y
allopurinol 300 mg tablet	TAKE 1 TABLET BY MOUTH ONCE DAILY	07/09/2018		07/09/2018	N
Zanaflex 4 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY 8 HOURS AS NEEDED NOT TO EXCEED 3 DOSES IN 24 HOURS	07/09/2018		07/09/2018	N
atorvastatin 80 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY DAY AT BEDTIME	10/25/2018		10/25/2018	N
lisinopril 5 mg tablet	TAKE 1 TABLET BY ORAL ROUTE 2 TIMES EVERY DAY	12/04/2018		12/04/2018	N
Ventolin HFA 90 mcg/actuation aerosol inhaler	inhale 2 puff by inhalation route every 4 hours	04/03/2019		04/03/2019	N
omeprazole 20 mg capsule, delayed release	take 1 Tablet by Oral route every morning	04/03/2019		04/03/2019	N
fluticasone 50 mcg/actuation nasal spray, suspension	spray 2 spray by intranasal route twice a day each nostril	04/03/2019	06/19/2019	06/19/2019	N
Symbicort 80 mcg-4.5 mcg/actuation HFA	inhale 2 puff by inhalation route 2 times every day in	04/03/2019		04/03/2019	N

## Document note on 06/19/2019 10:30 AM for William D Carrington

Patient: Carrington, William  
Visit Date: 06/19/19  
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aerosol inhaler the morning and evening  
Viagra 50 mg tablet take 1 tablet by oral route 04/03/2019 04/03/2019 N  
every day as needed  
approximately 1 hour before  
sexual activity

### Medication Reconciliation

Medications reconciled today.

### Medication Reviewed

Adherence	Medication Name	Sig Desc	Elsewhere	Status
taking as directed	Claritin-D 12 Hour 5 mg-120 mg Tab	1 tab po BID	Y	Verified
taking as directed	Zantac 150 mg tablet	take 1 tablet by oral route every day	Y	Verified
taking as directed	aspirin 325 mg tablet	take 1 tablet by oral route every day	Y	Verified
taking as directed	allopurinol 300 mg tablet	TAKE 1 TABLET BY MOUTH ONCE DAILY	N	Verified
taking as directed	Zanaflex 4 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY 8 HOURS AS NEEDED NOT TO EXCEED 3 DOSES IN 24 HOURS	N	Verified
taking as directed	atorvastatin 80 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY DAY AT BEDTIME	N	Verified
taking as directed	Ventolin HFA 90 mcg/actuation aerosol inhaler	inhale 2 puff by inhalation route every 4 hours	N	Verified
taking as directed	omeprazole 20 mg capsule, delayed release	take 1 Tablet by Oral route every morning	N	Verified
taking as directed	lisinopril 5 mg tablet	TAKE 1 TABLET BY ORAL ROUTE 2 TIMES EVERY DAY	N	Verified
taking as directed	Symbicort 80 mcg-4.5 mcg/actuation HFA aerosol inhaler	inhale 2 puff by inhalation route 2 times every day in the morning and evening	N	Verified
taking as directed	fluticasone 50 mcg/actuation nasal spray, suspension	spray 2 spray by intranasal route twice a day each nostril	N	Verified
taking as directed	Viagra 50 mg tablet	take 1 tablet by oral route every day as needed approximately 1 hour before sexual activity	N	Verified

### Health Maintenance

The patient's health maintenance was reviewed today.

BMP - 04/03/2019  
CBC - 04/03/2019  
Chemistry - 05/17/2018  
Chest X-Ray - 10/12/2017  
Colonoscopy - 04/08/2004  
Creatinine - 04/03/2019  
Dilated Eye Exam - 10/30/2018  
Foot Exam - 04/03/2019  
Echocardiogram - 08/15/2004  
EKG - 04/03/2019

## Document note on 06/19/2019 10:30 AM for William D Carrington

Patient: Carrington, William  
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EMG - 01/21/2015  
Eye Exam - 04/03/2019  
Flu Shot - 09/27/2018  
Hemocult - 04/08/2019  
HFP - 04/03/2019  
HGB - 04/03/2019  
Lipids - 04/03/2019  
Microalbumin - 09/17/2018  
PFT - 07/25/2008  
Pneumovax - 04/08/2009  
PSA - 04/03/2019  
PT/INR - 08/18/2016  
Rectal Exam - 04/08/2009  
Stress Test - 09/23/2004  
Tetanus - 04/08/2009  
Thyroid Profile - 05/02/2008  
Urinalysis - 09/17/2018  
uTSH - 04/03/2019

### Patient's Preferred Specialists

Neurology - Dr. Deiparine

## Histories

---

### Past Medical History

#### PAST MEDICAL/SURGICAL HISTORY

Disease/disorder	Onset Date	Management	Date
		lymphnodes removed right knee CABG	2002
Chicken Pox			
measles			
Shy Drager syndrome	2007		

### Social History

Ethnicity - Not Hispanic or Latino

Occupation - store manager

Marital Status - divorced

#### Tobacco Use

Smoking status: Heavy tobacco smoker.

#### Alcohol Use

approximately 0.00 ounces/week.

approximately 0.00 ounces/week.

approximately 0.00 ounces/week.

#### Caffeine

Approximately 6 cups/cans per day

## Family History

Relationship	Family Member Name	Deceased	Age at Death	Condition	Onset Age	Cause of Death
				Family history of Diabetes mellitus type 2		N
				No family history of Hypertension		N
				No family history of Hyperlipidemia		N
Father		Y		Cancer of the Lung	42	N
Mother		N		Arthritis		N

## Review of Systems

### Source of Information

Patient

## Allergies

Description	Onset
BACITRACIN ZINC	08/08/2002
MEDICAL SUPPLY, MISCELLANEOUS	08/08/2002
NEOMYCIN SULFATE	08/08/2002
INDOMETHACIN	08/08/2002
POLYMYXIN B	08/08/2002
ISOPROPYL ALCOHOL	08/08/2002
BACITRACIN	08/08/2002
PROPOXYPHENE NAPSYLATE	08/08/2002
CHLORHEXIDINE GLUCONATE	08/08/2002
CODEINE	08/08/2002
MORPHINE	08/08/2002
ACETAMINOPHEN	08/08/2002
IBUPROFEN	08/08/2002
POLYMYXIN B SULFATE	08/08/2002
GRAMICIDIN D	08/08/2002
FENTANYL	04/05/2007
AMOXICILLIN TRIHYDRATE	07/29/2009
POTASSIUM CLAVULANATE	07/29/2009

## Constitutional

### Patient Denies

Fatigue, Headache, Dizziness,

## Eyes

Last Eye Exam - 04/03/2019

Last Dilated Eye Exam - 10/30/2018

### Patient Denies

Blurred vision, Faded vision,

Patient: Carrington , William  
Visit Date: 06/19/19  
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## **Head/Neck**

### Patient Denies

Headache,

## **Nose**

### Patient Denies

Sneezing,

## **Oropharynx**

### Patient Confirms

Sore throat,

## **Cardiac**

### Patient Confirms

Cough,

### Patient Denies

Diaphoresis, Dyspnea, Nausea, Fatigue,

## **Respiratory**

### Patient Confirms

Cough, Daytime cough, Nighttime cough,

Productive cough - clear

### Patient Denies

Cold symptoms, Sneezing,

## **Gastrointestinal**

### Patient Denies

Nausea, Vomiting, Indigestion, Heartburn,

## **Male Genitourinary**

Last PSA - 04/03/2019

Last Digital Rectal Exam - 04/08/2009

### Patient Confirms

Urinary incontinence,

### Patient Denies

Pyuria, Oliguria, Weak stream, Polyuria, Sexually active,

## **Musculoskeletal**

Patient is right-handed.

### Patient Denies

Joint pain, Joint swelling, Joint stiffness,

## **Integumentary**

### Patient Confirms

# Document note on 06/19/2019 10:30 AM for William D Carrington

Patient: Carrington , William

Visit Date: 06/19/19

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Intact, Nodules/bumps, Warm/Dry

Patient Denies

Redness,

## Endocrine

Patient Confirms

Diabetes Mellitus,

Patient Denies

Polydipsia, Polyphagia, Polyuria, Nausea,

## Physical Exam

### Vital Signs

#### HEIGHT

Time	ft	in	cm	Last Measured	Height Position	%
11:03 AM	6.0	1.00	185.42	07/02/2013	Standing	

#### WEIGHT/BSA/BMI

Time	lb	oz	kg	Context	%	BMI kg/m2	BSA m2
11:03 AM	228.00		103.419	dressed with shoes		30.08	2.31

#### BLOOD PRESSURE

Time	BP mm/Hg	Position	Side	Site	Method	Cuff Size
11:03 AM	124/80	sitting	right	arm	manual	adult

Mid-Arm Circumference - 0.0 inches

#### TEMPERATURE/PULSE/RESPIRATION

Time	Temp F	Temp C	Temp Site	Pulse/min	Pattern	Resp/ min
11:03 AM				69	regular	18

#### PULSE OXIMETRY/FIO2

Time	Pulse Ox (Rest %)	Pulse Ox (Amb %)	O2 Sat	O2 LPM	Timing	FiO2 %	L/min	Delivery Method
11:03 AM	96		RA			21		

#### MEASURED BY

Time	Measured by
11:03 AM	Angela D. Harrison

Body Fat - 19.6 %

Protein Requirement - 124 grams/day

Circumferences (Performed 06/19/2019)

Abdomen - 40 inches

Chest - 44.00 inches

## Constitutional

# Document note on 06/19/2019 10:30 AM for William D Carrington

Patient: Carrington , William  
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Level of Consciousness - Normal

Orientation - Normal

Level of Distress - Normal

Nourishment - mildly obese

Overall Appearance - Normal

## **Eyes**

General

Right - Normal

Left - Normal

External

Right - Normal

Left - Normal

Pupil

Right - Normal

Left - Normal

Last Dilated Eye Exam - 10/30/2018

Last Eye Exam - 04/03/2019

## **Neck**

Inspection - Normal

Palpation - Normal

Lymph Nodes - Normal

Thyroid Gland - Normal

## **Respiratory**

Inspection - Normal

Auscultation - Normal

Cough - Absent

## **Cardiovascular**

Auscultation - Normal

Murmurs - Absent

## **Abdomen**

Inspection - Normal

Auscultation - Normal

Palpation - Normal

## **Neurological**

Mental Status

Cognitive Abilities - Normal

Emotional Stability - Normal

Sensory Function

Balance and Gait - Normal

## **Integumentary**

### Lesion 1

Location - buttock, left

Type - abcess

Color - red

## **Screeners and Opioid Assessment for Patients with Pain (SOAPP)**

## **Assessment**

Facet arthritis of cervical region  
Facet arthritis of cervical region  
Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease, without long-term current use of insulin  
Chronic kidney disease, stage 2 (mild)  
Essential hypertension  
Chronic maxillary sinusitis  
Body mass index (BMI) 30.0-30.9, adult

### Chronic Conditions

Chronic GERD  
Polyneuropathy associated with underlying disease  
Combined forms of age-related cataract of both eyes  
Facet arthritis of cervical region  
Chronic bronchitis, mucopurulent  
Systolic CHF, chronic  
Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease, without long-term current use of insulin  
Shy-Drager syndrome  
Degeneration of basal ganglia  
Calcification of abdominal aorta  
Essential hypertension  
Fredrickson type IIb hyperlipoproteinemia  
CAD in native artery  
Old MI (myocardial infarction)  
Mild persistent asthma, uncomplicated  
CKD (chronic kidney disease) stage 2, GFR 60-89 ml/min  
Ataxia  
Benign prostatic hyperplasia with weak urinary stream  
Elevated uric acid in blood  
Tobacco abuse  
Carrier of staphylococcus  
Benign essential tremor  
Chronic fatigue syndrome  
Chronic maxillary sinusitis



## Document note on 06/19/2019 10:30 AM for William D Carrington

Patient: Carrington , William  
Visit Date: 06/19/19  
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Fibromyalgia  
Diarrhea  
Status post coronary artery bypass graft  
Simple obesity  
Beta-blockers contraindicated  
Changes in retinal vascular appearance of both eyes  
Subjective visual disturbance of both eyes

### Framingham Cardiovascular Risk

10 Year CVD Risk - 13%  
10 Year Stroke Risk - 5%

### Global Cardiovascular Risk Score

Current Score - 2.7 points  
(A Global Cardiovascular Risk Score below 4 is desirable. Above 4, the patient is at increased risk of a cardiovascular event.)

## Plan

Current and previous labs reviewed  
Plan was discussed with patient.  
The patient indicates they agree with the discussed plan.  
Follow-Up Visit  
Medications reviewed  
Continue current medications & therapy  
Current Medication List Given to Patient  
setma83\_hosp\_plan{Unexpected Value}

### Active Medications

Start Date	Brand	Dose	Sig Desc
06/19/2019	BACTRIM DS	800 mg-160 mg	take 1 tablet by oral route every 12 hours
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04/03/2019	FLUTICASON E PROPRIONATE	50 mcg/actuation	spray 2 spray by intranasal route twice a day each nostril
04/03/2019	SYMBICORT	80 mcg-4.5 mcg/actuation	inhale 2 puff by inhalation route 2 times every day in the morning and evening
04/03/2019	VIAGRA	50 mg	take 1 tablet by oral route every day as needed approximately 1 hour before sexual activity
12/04/2018	LISINOPRIL	5 mg	TAKE 1 TABLET BY ORAL ROUTE 2 TIMES EVERY DAY
10/25/2018	ATORVASTATIN CALCIUM	80 mg	TAKE 1 TABLET BY ORAL ROUTE EVERY DAY AT BEDTIME
07/09/2018	ALLOPURINOL	300 mg	TAKE 1 TABLET BY MOUTH ONCE DAILY
07/09/2018	ZANAFLEX	4 mg	TAKE 1 TABLET BY ORAL ROUTE EVERY 8 HOURS AS NEEDED NOT TO EXCEED

## Document note on 06/19/2019 10:30 AM for William D Carrington

Patient: Carrington , William

Visit Date: 06/19/19

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			3 DOSES IN 24 HOURS
CLARITIN-D 12 HOUR	5 mg-120 mg	1 tab po BID	
ASPIRIN	325 mg	take 1 tablet by oral route every day	
ZANTAC	150 mg	take 1 tablet by oral route every day	

### **Disease Management Tools Accessed**

Hypertension

### **Evaluation and Management**

99214 - Established Patient, Detailed Problem

### **Follow Up**

Acute

Follow - up

2 month(s)

---

**Approved by Jeffrey S. Anthony APRN 06/19/19**

Southeast Texas Medical Associates, LLP

06/19/2019 10:30 AM



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## Chart Note - 06/19/19 SETMA II

<b>Patient</b>	<b>William Carrington</b>
<b>Date of Birth</b>	<b>01/29/1963</b>
<b>Age</b>	<b>56 Years</b>
<b>Race</b>	<b>Declined to specify</b>
<b>Preferred Language</b>	<b>English</b>
<b>Sex</b>	<b>M</b>
<b>Visit Type</b>	<b>Office Visit</b>
<b>Medical Record</b>	<b>57115</b>

### Acute Diagnoses

#### Status

Facet arthritis of cervical region  
Facet arthritis of cervical region  
Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease,  
without long-term current use of insulin  
Chronic kidney disease, stage 2 (mild)  
Essential hypertension  
Chronic maxillary sinusitis  
Body mass index (BMI) 30.0-30.9, adult

### Chief Complaints

SINUS PROBLEMS

BUMP

### Chronic Conditions

Chronic GERD  
Polyneuropathy associated with underlying disease  
Combined forms of age-related cataract of both eyes  
Facet arthritis of cervical region  
Chronic bronchitis, mucopurulent

## Document note on 06/19/2019 10:30 AM for William D Carrington

Patient: Carrington , William

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Systolic CHF, chronic  
Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease, without long-term current use of insulin  
Shy-Drager syndrome  
Degeneration of basal ganglia  
Calcification of abdominal aorta  
Essential hypertension  
Fredrickson type IIb hyperlipoproteinemia  
CAD in native artery  
Old MI (myocardial infarction)  
Mild persistent asthma, uncomplicated  
CKD (chronic kidney disease) stage 2, GFR 60-89 ml/min  
Ataxia  
Benign prostatic hyperplasia with weak urinary stream  
Elevated uric acid in blood  
Tobacco abuse  
Carrier of staphylococcus  
Benign essential tremor  
Chronic fatigue syndrome  
Chronic maxillary sinusitis  
Fibromyalgia  
Diarrhea  
Status post coronary artery bypass graft  
Simple obesity  
Beta-blockers contraindicated  
Changes in retinal vascular appearance of both eyes  
Subjective visual disturbance of both eyes

### **Chief Complaint 1- SINUS PROBLEMS**

Frequency - persistently

Duration - 5 day(s)

Severity - moderate

Change - no change

Aggravated By - None

Relieved By - None

#### **Associated Symptoms**

Cough, Productive

Congestion, Head

Congestion, Sinus

sore throat

#### **Pertinent Negatives**

Sneezing

Cough, Non Productive

#### **Comments**

ah ma

### **Chief Complaint 2 - BUMP**

## Document note on 06/19/2019 10:30 AM for William D Carrington

Patient: Carrington , William

Visit Date: 06/19/19

Page 3 of 12

Location - RECTUM

Frequency - persistently

Duration - 5 day(s)

Severity - moderate

Change - no change

Context - none

Aggravated By - None

Relieved By - None

### Associated Symptoms

soreness

### Pertinent Negatives

redness

Blisters

drainage

### Comments

ah ma

## Nursing

### Medications (active prior to today)

Medication Name	Sig Desc	Start Date	Stop Date	Refilled	Elsewhere
Claritin-D 12 Hour 5 mg-120 mg Tab	1 tab po BID	//			Y
aspirin 325 mg tablet	take 1 tablet by oral route every day	//		05/17/2018	Y
Zantac 150 mg tablet	take 1 tablet by oral route every day	//		05/17/2018	Y
allopurinol 300 mg tablet	TAKE 1 TABLET BY MOUTH ONCE DAILY	07/09/2018		07/09/2018	N
Zanaflex 4 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY 8 HOURS AS NEEDED NOT TO EXCEED 3 DOSES IN 24 HOURS	07/09/2018		07/09/2018	N
atorvastatin 80 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY DAY AT BEDTIME	10/25/2018		10/25/2018	N
lisinopril 5 mg tablet	TAKE 1 TABLET BY ORAL ROUTE 2 TIMES EVERY DAY	12/04/2018		12/04/2018	N
Ventolin HFA 90 mcg/actuation aerosol inhaler	inhale 2 puff by inhalation route every 4 hours	04/03/2019		04/03/2019	N
omeprazole 20 mg capsule, delayed release	take 1 Tablet by Oral route every morning	04/03/2019		04/03/2019	N
fluticasone 50 mcg/actuation nasal spray, suspension	spray 2 spray by intranasal route twice a day each nostril	04/03/2019	06/19/2019	06/19/2019	N
Symbicort 80 mcg-4.5 mcg/actuation HFA	inhale 2 puff by inhalation route 2 times every day in	04/03/2019		04/03/2019	N

## Document note on 06/19/2019 10:30 AM for William D Carrington

Patient: Carrington, William

Visit Date: 06/19/19

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aerosol inhaler the morning and evening  
Viagra 50 mg tablet take 1 tablet by oral route 04/03/2019 04/03/2019 N  
every day as needed  
approximately 1 hour before  
sexual activity

### Medication Reconciliation

Medications reconciled today.

### Medication Reviewed

Adherence	Medication Name	Sig Desc	Elsewhere	Status
taking as directed	Claritin-D 12 Hour 5 mg-120 mg Tab	1 tab po BID	Y	Verified
taking as directed	Zantac 150 mg tablet	take 1 tablet by oral route every day	Y	Verified
taking as directed	aspirin 325 mg tablet	take 1 tablet by oral route every day	Y	Verified
taking as directed	allopurinol 300 mg tablet	TAKE 1 TABLET BY MOUTH ONCE DAILY	N	Verified
taking as directed	Zanaflex 4 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY 8 HOURS AS NEEDED NOT TO EXCEED 3 DOSES IN 24 HOURS	N	Verified
taking as directed	atorvastatin 80 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY DAY AT BEDTIME	N	Verified
taking as directed	Ventolin HFA 90 mcg/actuation aerosol inhaler	inhale 2 puff by inhalation route every 4 hours	N	Verified
taking as directed	omeprazole 20 mg capsule, delayed release	take 1 Tablet by Oral route every morning	N	Verified
taking as directed	lisinopril 5 mg tablet	TAKE 1 TABLET BY ORAL ROUTE 2 TIMES EVERY DAY	N	Verified
taking as directed	Symbicort 80 mcg-4.5 mcg/actuation HFA aerosol inhaler	inhale 2 puff by inhalation route 2 times every day in the morning and evening	N	Verified
taking as directed	fluticasone 50 mcg/actuation nasal spray, suspension	spray 2 spray by intranasal route twice a day each nostril	N	Verified
taking as directed	Viagra 50 mg tablet	take 1 tablet by oral route every day as needed approximately 1 hour before sexual activity	N	Verified

### Health Maintenance

The patient's health maintenance was reviewed today.

BMP - 04/03/2019

CBC - 04/03/2019

Chemistry - 05/17/2018

Chest X-Ray - 10/12/2017

Colonoscopy - 04/08/2004

Creatinine - 04/03/2019

Dilated Eye Exam - 10/30/2018

Foot Exam - 04/03/2019

Echocardiogram - 08/15/2004

EKG - 04/03/2019

## Document note on 06/19/2019 10:30 AM for William D Carrington

Patient: Carrington, William  
Visit Date: 06/19/19  
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EMG - 01/21/2015  
Eye Exam - 04/03/2019  
Flu Shot - 09/27/2018  
Hemocult - 04/08/2019  
HFP - 04/03/2019  
HGB - 04/03/2019  
Lipids - 04/03/2019  
Microalbumin - 09/17/2018  
PFT - 07/25/2008  
Pneumovax - 04/08/2009  
PSA - 04/03/2019  
PT/INR - 08/18/2016  
Rectal Exam - 04/08/2009  
Stress Test - 09/23/2004  
Tetanus - 04/08/2009  
Thyroid Profile - 05/02/2008  
Urinalysis - 09/17/2018  
uTSH - 04/03/2019

### Patient's Preferred Specialists

Neurology - Dr. Deiparine

## Histories

---

### **Past Medical History**

#### PAST MEDICAL/SURGICAL HISTORY

Disease/disorder	Onset Date	Management	Date
		lymphnodes removed right knee CABG	2002
Chicken Pox			
measles			
Shy Drager syndrome	2007		

### **Social History**

Ethnicity - Not Hispanic or Latino

Occupation - store manager

Marital Status - divorced

#### Tobacco Use

Smoking status: Heavy tobacco smoker.

#### Alcohol Use

approximately 0.00 ounces/week.

approximately 0.00 ounces/week.

approximately 0.00 ounces/week.

#### Caffeine

Approximately 6 cups/cans per day

Patient: Carrington, William  
Visit Date: 06/19/19  
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## Family History

Relationship	Family Member Name	Deceased	Age at Death	Condition	Onset Age	Cause of Death
				Family history of Diabetes mellitus type 2		N
				No family history of Hypertension		N
				No family history of Hyperlipidemia		N
Father		Y		Cancer of the Lung	42	N
Mother		N		Arthritis		N

## Review of Systems

### Source of Information

Patient

## Allergies

Description	Onset
BACITRACIN ZINC	08/08/2002
MEDICAL SUPPLY, MISCELLANEOUS	08/08/2002
NEOMYCIN SULFATE	08/08/2002
INDOMETHACIN	08/08/2002
POLYMYXIN B	08/08/2002
ISOPROPYL ALCOHOL	08/08/2002
BACITRACIN	08/08/2002
PROPOXYPHENE NAPSYLATE	08/08/2002
CHLORHEXIDINE GLUCONATE	08/08/2002
CODEINE	08/08/2002
MORPHINE	08/08/2002
ACETAMINOPHEN	08/08/2002
IBUPROFEN	08/08/2002
POLYMYXIN B SULFATE	08/08/2002
GRAMICIDIN D	08/08/2002
FENTANYL	04/05/2007
AMOXICILLIN TRIHYDRATE	07/29/2009
POTASSIUM CLAVULANATE	07/29/2009

## Constitutional

### Patient Denies

Fatigue, Headache, Dizziness,

## Eyes

Last Eye Exam - 04/03/2019

Last Dilated Eye Exam - 10/30/2018

### Patient Denies

Blurred vision, Faded vision,



## **Head/Neck**

### Patient Denies

Headache,

## **Nose**

### Patient Denies

Sneezing,

## **Oropharynx**

### Patient Confirms

Sore throat,

## **Cardiac**

### Patient Confirms

Cough,

### Patient Denies

Diaphoresis, Dyspnea, Nausea, Fatigue,

## **Respiratory**

### Patient Confirms

Cough, Daytime cough, Nighttime cough,

Productive cough - clear

### Patient Denies

Cold symptoms, Sneezing,

## **Gastrointestinal**

### Patient Denies

Nausea, Vomiting, Indigestion, Heartburn,

## **Male Genitourinary**

Last PSA - 04/03/2019

Last Digital Rectal Exam - 04/08/2009

### Patient Confirms

Urinary incontinence,

### Patient Denies

Pyuria, Oliguria, Weak stream, Polyuria, Sexually active,

## **Musculoskeletal**

Patient is right-handed.

### Patient Denies

Joint pain, Joint swelling, Joint stiffness,

## **Integumentary**

### Patient Confirms

# Document note on 06/19/2019 10:30 AM for William D Carrington

Patient: Carrington , William

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Intact, Nodules/bumps, Warm/Dry

Patient Denies

Redness,

## Endocrine

Patient Confirms

Diabetes Mellitus,

Patient Denies

Polydipsia, Polyphagia, Polyuria, Nausea,

## Physical Exam

### Vital Signs

#### HEIGHT

Time	ft	in	cm	Last Measured	Height Position	%
11:03 AM	6.0	1.00	185.42	07/02/2013	Standing	

#### WEIGHT/BSA/BMI

Time	lb	oz	kg	Context	%	BMI kg/m2	BSA m2
11:03 AM	228.00		103.419	dressed with shoes		30.08	2.31

#### BLOOD PRESSURE

Time	BP mm/Hg	Position	Side	Site	Method	Cuff Size
11:03 AM	124/80	sitting	right	arm	manual	adult

Mid-Arm Circumference - 0.0 inches

#### TEMPERATURE/PULSE/RESPIRATION

Time	Temp F	Temp C	Temp Site	Pulse/min	Pattern	Resp/ min
11:03 AM				69	regular	18

#### PULSE OXIMETRY/FIO2

Time	Pulse Ox (Rest %)	Pulse Ox (Amb %)	O2 Sat	O2 LPM	Timing	FiO2 %	L/min	Delivery Method
11:03 AM	96		RA			21		

#### MEASURED BY

Time	Measured by
11:03 AM	Angela D. Harrison

Body Fat - 19.6 %

Protein Requirement - 124 grams/day

Circumferences (Performed 06/19/2019)

Abdomen - 40 inches

Chest - 44.00 inches

## Constitutional

# Document note on 06/19/2019 10:30 AM for William D Carrington

Patient: Carrington , William

Visit Date: 06/19/19

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Level of Consciousness - Normal

Orientation - Normal

Level of Distress - Normal

Nourishment - mildly obese

Overall Appearance - Normal

## **Eyes**

General

Right - Normal

Left - Normal

External

Right - Normal

Left - Normal

Pupil

Right - Normal

Left - Normal

Last Dilated Eye Exam - 10/30/2018

Last Eye Exam - 04/03/2019

## **Neck**

Inspection - Normal

Palpation - Normal

Lymph Nodes - Normal

Thyroid Gland - Normal

## **Respiratory**

Inspection - Normal

Auscultation - Normal

Cough - Absent

## **Cardiovascular**

Auscultation - Normal

Murmurs - Absent

## **Abdomen**

Inspection - Normal

Auscultation - Normal

Palpation - Normal

## **Neurological**

Mental Status

Cognitive Abilities - Normal

Emotional Stability - Normal

Sensory Function

Balance and Gait - Normal

## **Integumentary**

### Lesion 1

Location - buttock, left

Type - abcess

Color - red

## **Screeners and Opioid Assessment for Patients with Pain (SOAPP)**

## **Assessment**

Facet arthritis of cervical region  
Facet arthritis of cervical region  
Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease, without long-term current use of insulin  
Chronic kidney disease, stage 2 (mild)  
Essential hypertension  
Chronic maxillary sinusitis  
Body mass index (BMI) 30.0-30.9, adult

### Chronic Conditions

Chronic GERD  
Polyneuropathy associated with underlying disease  
Combined forms of age-related cataract of both eyes  
Facet arthritis of cervical region  
Chronic bronchitis, mucopurulent  
Systolic CHF, chronic  
Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease, without long-term current use of insulin  
Shy-Drager syndrome  
Degeneration of basal ganglia  
Calcification of abdominal aorta  
Essential hypertension  
Fredrickson type IIb hyperlipoproteinemia  
CAD in native artery  
Old MI (myocardial infarction)  
Mild persistent asthma, uncomplicated  
CKD (chronic kidney disease) stage 2, GFR 60-89 ml/min  
Ataxia  
Benign prostatic hyperplasia with weak urinary stream  
Elevated uric acid in blood  
Tobacco abuse  
Carrier of staphylococcus  
Benign essential tremor  
Chronic fatigue syndrome  
Chronic maxillary sinusitis

# Document note on 06/19/2019 10:30 AM for William D Carrington

Patient: Carrington , William  
Visit Date: 06/19/19  
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Fibromyalgia  
Diarrhea  
Status post coronary artery bypass graft  
Simple obesity  
Beta-blockers contraindicated  
Changes in retinal vascular appearance of both eyes  
Subjective visual disturbance of both eyes

## Framingham Cardiovascular Risk

10 Year CVD Risk - 13%  
10 Year Stroke Risk - 5%

## Global Cardiovascular Risk Score

Current Score - 2.7 points  
(A Global Cardiovascular Risk Score below 4 is desirable. Above 4, the patient is at increased risk of a cardiovascular event.)

## Plan

Current and previous labs reviewed  
Plan was discussed with patient.  
The patient indicates they agree with the discussed plan.  
Follow-Up Visit  
Medications reviewed  
Continue current medications & therapy  
Current Medication List Given to Patient  
setma83\_hosp\_plan{Unexpected Value}

## Active Medications

Start Date	Brand	Dose	Sig Desc
06/19/2019	BACTRIM DS	800 mg-160 mg	take 1 tablet by oral route every 12 hours
04/03/2019	VENTOLIN HFA	90 mcg	inhale 2 puff by inhalation route every 4 hours
04/03/2019	OMEPRAZOLE	20 mg	take 1 Tablet by Oral route every morning
04/03/2019	FLUTICASONE PROPIONATE	50 mcg/actuation	spray 2 spray by intranasal route twice a day each nostril
04/03/2019	SYMBICORT	80 mcg-4.5 mcg/actuation	inhale 2 puff by inhalation route 2 times every day in the morning and evening
04/03/2019	VIAGRA	50 mg	take 1 tablet by oral route every day as needed approximately 1 hour before sexual activity
12/04/2018	LISINOPRIL	5 mg	TAKE 1 TABLET BY ORAL ROUTE 2 TIMES EVERY DAY
10/25/2018	ATORVASTATIN CALCIUM	80 mg	TAKE 1 TABLET BY ORAL ROUTE EVERY DAY AT BEDTIME
07/09/2018	ALLOPURINOL	300 mg	TAKE 1 TABLET BY MOUTH ONCE DAILY
07/09/2018	ZANAFLEX	4 mg	TAKE 1 TABLET BY ORAL ROUTE EVERY 8 HOURS AS NEEDED NOT TO EXCEED

## Document note on 06/19/2019 10:30 AM for William D Carrington

Patient: Carrington , William

Visit Date: 06/19/19

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			3 DOSES IN 24 HOURS
CLARITIN-D 12 HOUR	5 mg-120 mg	1 tab po BID	
ASPIRIN	325 mg	take 1 tablet by oral route every day	
ZANTAC	150 mg	take 1 tablet by oral route every day	

### **Disease Management Tools Accessed**

Hypertension

### **Evaluation and Management**

99214 - Established Patient, Detailed Problem

### **Follow Up**

Acute

Follow - up

2 month(s)

---

**Approved by Jeffrey S. Anthony APRN 06/19/19**

Southeast Texas Medical Associates, LLP

06/19/2019 10:30 AM

Patient: Carrington, William  
Visit Date: 04/03/19  
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SETMA I - 2929 Calder, Suite 100

SETMA II - 3570 College, Suite 200

Mark Wilson Clinic - 2010 Dowlen

Lumberton - 137B LHS Drive

Nederland/Port Arthur - 2400 Highway 365, Suite 201

Orange - 610 Strickland Drive, Suite 140

(409) 833-9797

www.setma.com

## Chart Note - 04/03/19 SETMA II

<b>Patient</b>	<b>William Carrington</b>
<b>Date of Birth</b>	<b>01/29/1963</b>
<b>Age</b>	<b>56 Years</b>
<b>Race</b>	<b>Declined to specify</b>
<b>Preferred Language</b>	<b>English</b>
<b>Sex</b>	<b>M</b>
<b>Visit Type</b>	<b>Office Visit</b>
<b>Medical Record</b>	<b>57115</b>

### Acute Diagnoses

#### Status

Encounter for Medicare annual wellness exam  
CAD in native artery  
Calcification of abdominal aorta  
Chronic bronchitis, mucopurulent  
Chronic GERD  
Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease,  
without long-term current use of insulin  
Chronic kidney disease, stage 2 (mild)  
Degeneration of basal ganglia  
Essential hypertension  
Fredrickson type IIb hyperlipoproteinemia  
Mild persistent asthma, uncomplicated  
Old MI (myocardial infarction)  
Polyneuropathy associated with underlying disease  
Shy-Drager syndrome  
Systolic CHF, chronic  
Body mass index (BMI) 29.0-29.9, adult  
Chronic maxillary sinusitis

### Chief Complaints

\* Medicare Wellness Exam

SINUS PROBLEMS

## Chronic Conditions

---

Chronic GERD

Polyneuropathy associated with underlying disease

Combined forms of age-related cataract of both eyes

Facet arthritis of cervical region

Chronic bronchitis, mucopurulent

Systolic CHF, chronic

Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease, without long-term current use of insulin

Shy-Drager syndrome

Degeneration of basal ganglia

Calcification of abdominal aorta

Essential hypertension

Fredrickson type IIb hyperlipoproteinemia

CAD in native artery

Old MI (myocardial infarction)

Mild persistent asthma, uncomplicated

CKD (chronic kidney disease) stage 2, GFR 60-89 ml/min

Ataxia

Benign prostatic hyperplasia with weak urinary stream

Elevated uric acid in blood

Tobacco abuse

Carrier of staphylococcus

Benign essential tremor

Chronic fatigue syndrome

Chronic maxillary sinusitis

Fibromyalgia

Diarrhea

Status post coronary artery bypass graft

Simple obesity

Beta-blockers contraindicated

Changes in retinal vascular appearance of both eyes

Subjective visual disturbance of both eyes

## Chief Complaint 1 - \* Medicare Wellness Exam

### Comments

ah ma

## Chief Complaint 2 - SINUS PROBLEMS

Frequency - persistently

Duration - 3 week(s)

Severity - moderate

Change - no change

Context - none

Aggravated By - None



## Document note on 04/03/2019 11:30 AM for William D Carrington

Patient: Carrington, William  
Visit Date: 04/03/19  
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Relieved By - None

### Associated Symptoms

Cough, Productive  
Sneezing  
sore throat  
Ear Ache

### Pertinent Negatives

Congestion, Chest  
Congestion, Head

### Comments

ah ma

## Nursing

### Medications Administered

<u>Medication</u>	<u>Amount</u>	<u>Measure</u>	<u>Route</u>	<u>Site</u>	<u>Initials</u>	<u>Time</u>
Lincomycin Hydrochloride	300.00	mg	IM			

### Medications (active prior to today)

<u>Medication Name</u>	<u>Sig Desc</u>	<u>Start Date</u>	<u>Stop Date</u>	<u>Refilled</u>	<u>Elsewhere</u>
Claritin-D 12 Hour 5 mg-120 mg Tab	1 tab po BID	//			Y
Proctozone-HC 2.5 % topical cream perineal applicator	apply by topical route 2 times every day to the affected area(s)	05/18/2017	06/03/2019	05/18/2017	N
Viagra 50 mg tablet	take 1 tablet by oral route every day as needed approximately 1 hour before sexual activity	08/08/2017			N
Ventolin HFA 90 mcg/actuation aerosol inhaler	inhale 2 puff by inhalation route every 4 hours	08/25/2017	04/03/2019	04/03/2019	N
Symbicort 80 mcg-4.5 mcg/actuation HFA aerosol inhaler	inhale 2 puff by inhalation route 2 times every day in the morning and evening	10/12/2017			N
fluticasone 50 mcg/actuation nasal spray,suspension	spray 2 spray by intranasal route twice a day each nostril	02/21/2018		02/21/2018	N
aspirin 325 mg tablet	take 1 tablet by oral route every day	//		05/17/2018	Y
Zantac 150 mg tablet	take 1 tablet by oral route every day	//		05/17/2018	Y
allopurinol 300 mg tablet	TAKE 1 TABLET BY MOUTH ONCE DAILY	07/09/2018		07/09/2018	N
Zanaflex 4 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY 8 HOURS AS NEEDED NOT TO EXCEED 3 DOSES IN 24 HOURS	07/09/2018		07/09/2018	N

## Document note on 04/03/2019 11:30 AM for William D Carrington

Patient: Carrington , William

Visit Date: 04/03/19

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omeprazole 20 mg capsule,delayed release	take 1 Tablet by Oral route every morning	09/27/2018	04/03/2019	04/03/2019	N
atorvastatin 80 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY DAY AT BEDTIME	10/25/2018		10/25/2018	N
lisinopril 5 mg tablet	TAKE 1 TABLET BY ORAL ROUTE 2 TIMES EVERY DAY	12/04/2018		12/04/2018	N

### Medication Reconciliation

Medications reconciled today.

### Medication Reviewed

Adherence	Medication Name	Sig Desc	Elsewhere	Status
taking as directed	Claritin-D 12 Hour 5 mg-120 mg Tab	1 tab po BID	Y	Verified
taking as directed	Proctozone-HC 2.5 % topical cream perineal applicator	apply by topical route 2 times every day to the affected area(s)	N	Verified
taking as directed	Viagra 50 mg tablet	take 1 tablet by oral route every day as needed approximately 1 hour before sexual activity	N	Verified
taking as directed	Ventolin HFA 90 mcg/actuation aerosol inhaler	inhale 2 puff by inhalation route every 4 hours	N	Verified
taking as directed	Symbicort 80 mcg-4.5 mcg/actuation HFA aerosol inhaler	inhale 2 puff by inhalation route 2 times every day in the morning and evening	N	Verified
taking as directed	fluticasone 50 mcg/actuation nasal spray,suspension	spray 2 spray by intranasal route twice a day each nostril	N	Verified
taking as directed	aspirin 325 mg tablet	take 1 tablet by oral route every day	Y	Verified
taking as directed	Zantac 150 mg tablet	take 1 tablet by oral route every day	Y	Verified
taking as directed	allopurinol 300 mg tablet	TAKE 1 TABLET BY MOUTH ONCE DAILY	N	Verified
taking as directed	Zanaflex 4 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY 8 HOURS AS NEEDED NOT TO EXCEED 3 DOSES IN 24 HOURS	N	Verified
taking as directed	atorvastatin 80 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY DAY AT BEDTIME	N	Verified
taking as directed	omeprazole 20 mg capsule,delayed release	take 1 Tablet by Oral route every morning	N	Verified
taking as directed	lisinopril 5 mg tablet	TAKE 1 TABLET BY ORAL ROUTE 2 TIMES EVERY DAY	N	Verified

### Health Maintenance

The patient's health maintenance was reviewed today.

BMP - 09/17/2018

CBC - 09/17/2018

Chemistry - 05/17/2018

Chest X-Ray - 10/12/2017

Colonoscopy - 04/08/2004

Creatinine - 09/17/2018

Dilated Eye Exam - 10/30/2018

## Document note on 04/03/2019 11:30 AM for William D Carrington

Patient: Carrington, William  
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Foot Exam - 04/03/2019  
Echocardiogram - 08/15/2004  
EKG - 04/03/2019  
EMG - 01/21/2015  
Eye Exam - 04/03/2019  
Flu Shot - 09/27/2018  
HFP - 09/17/2018  
HGB - 09/17/2018  
Lipids - 03/15/2018  
Microalbumin - 09/17/2018  
PFT - 07/25/2008  
Pneumovax - 04/08/2009  
PSA - 03/15/2018  
PT/INR - 08/18/2016  
Rectal Exam - 04/08/2009  
Stress Test - 09/23/2004  
Tetanus - 04/08/2009  
Thyroid Profile - 05/02/2008  
Urinalysis - 09/17/2018  
uTSH - 09/17/2018

### Patient's Preferred Specialists

Neurology - Dr. Deiparine

### Other Preferred Specialists

Dr Duplan, EENT

## **Histories**

---

### **Past Medical History**

#### PAST MEDICAL/SURGICAL HISTORY

Disease/disorder	Onset Date	Management	Date
		lymphnodes removed right knee CABG	2002
Chicken Pox			
measles			
Shy Drager syndrome	2007		

### **Social History**

Ethnicity - Not Hispanic or Latino

Occupation - store manager

Marital Status - divorced

#### Tobacco Use

Smoking status: Heavy tobacco smoker.

#### Alcohol Use

## Document note on 04/03/2019 11:30 AM for William D Carrington

Patient: Carrington , William

Visit Date: 04/03/19

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approximately 0.00 ounces/week.

approximately 0.00 ounces/week.

approximately 0.00 ounces/week.

### Caffeine

Approximately 6 cups/cans per day

## Family History

Relationship	Family Member Name	Deceased	Age at Death	Condition	Onset Age	Cause of Death
				Family history of Diabetes mellitus type 2		N
				No family history of Hypertension		N
				No family history of Hyperlipidemia		N
Father		Y		Cancer of the Lung	42	N
Mother		N		Arthritis		N

## Review of Systems

### Source of Information

Patient

## Allergies

Description	Onset
BACITRACIN ZINC	08/08/2002
MEDICAL SUPPLY, MISCELLANEOUS	08/08/2002
NEOMYCIN SULFATE	08/08/2002
INDOMETHACIN	08/08/2002
POLYMYXIN B	08/08/2002
ISOPROPYL ALCOHOL	08/08/2002
BACITRACIN	08/08/2002
PROPOXYPHENE NAPSYLATE	08/08/2002
CHLORHEXIDINE GLUCONATE	08/08/2002
CODEINE	08/08/2002
MORPHINE	08/08/2002
ACETAMINOPHEN	08/08/2002
IBUPROFEN	08/08/2002
POLYMYXIN B SULFATE	08/08/2002
GRAMICIDIN D	08/08/2002
FENTANYL	04/05/2007
AMOXICILLIN TRIHYDRATE	07/29/2009
POTASSIUM CLAVULANATE	07/29/2009

## Ears

### Patient Confirms

Ear aches,

## Nose

# Document note on 04/03/2019 11:30 AM for William D Carrington

Patient: Carrington , William  
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## Patient Confirms

Sneezing,

## Oropharynx

### Patient Confirms

Sore throat,

## Respiratory

### Patient Confirms

Sneezing, Cough, Daytime cough, Nighttime cough,  
Productive cough - clear

## Physical Exam

## Vital Signs

### HEIGHT

Time	ft	in	cm	Last Measured	Height Position	%
11:45 AM	6.0	1.00	185.42	07/02/2013	Standing	

### WEIGHT/BSA/BMI

Time	lb	oz	kg	Context	%	BMI kg/m2	BSA m2
11:45 AM	223.00		101.151	dressed with shoes		29.42	2.28

### BLOOD PRESSURE

Time	BP mm/Hg	Position	Side	Site	Method	Cuff Size
11:45 AM	118/82	sitting	right	arm	manual	adult

Mid-Arm Circumference - 0.0 inches

### TEMPERATURE/PULSE/RESPIRATION

Time	Temp F	Temp C	Temp Site	Pulse/min	Pattern	Resp/ min
11:45 AM				63	regular	18

### PULSE OXIMETRY/FIO2

Time	Pulse Ox (Rest %)	Pulse Ox (Amb %)	O2 Sat	O2 LPM	Timing	FiO2 %	L/min	Delivery Method
11:45 AM	99		RA			21		

### MEASURED BY

Time	Measured by
11:45 AM	Angela D. Harrison

Body Fat - 19.6 %

Protein Requirement - 121 grams/day

### Circumferences (Performed 04/03/2019)

Abdomen - 40 inches

Chest - 44.00 inches

### **Constitutional**

Level of Consciousness - Normal

Orientation - Normal

Level of Distress - Normal

Nourishment - overweight

Overall Appearance - Normal

### **Eyes**

General

Right - Normal

Left - Normal

External

Right - Normal

Left - Normal

Pupil

Right - Normal

Left - Normal

Last Dilated Eye Exam - 10/30/2018

Last Eye Exam - 04/03/2019

### **Neck**

Inspection - Normal

Palpation - Normal

Lymph Nodes - Normal

Thyroid Gland - Normal

### **Respiratory**

Inspection - Normal

Auscultation - expiratory wheeze

Location - bilateral

Cough - Absent

### **Cardiovascular**

Auscultation - Normal

Murmurs - Absent

Pulses Left

Right

Dorsalis Pedis

2+ expected

2+ expected

Peripheral Edema - No

### **Abdomen**

Inspection - Normal

Auscultation - Normal

Palpation - Normal

## **Neurological**

### Mental Status

Cognitive Abilities - Normal

Emotional Stability - Normal

### Sensory Function

Balance and Gait - Normal

## **Feet**

### Pulses

Dorsalis Pedis

Left - 2+ expected

Right - 2+ expected

Skin between toes checked

## **Monofilament Examination**

### Toe Pulps

	<u>Right</u>	<u>Left</u>
1	Sensation Present	Sensation Present
2	Sensation Present	Sensation Present
3	Sensation Present	Sensation Present
4	Sensation Present	Sensation Present
5	Sensation Present	Sensation Present

### Metatarsal Heads

	<u>Right</u>	<u>Left</u>
1	Sensation Present	Sensation Present
2	Sensation Present	Sensation Present
3	Sensation Present	Sensation Present
4	Sensation Present	Sensation Present
5	Sensation Present	Sensation Present

### Heel

<u>Right</u>	<u>Left</u>
Sensation Present	Sensation Present

### Foot

<u>Right</u>	<u>Left</u>
Sensation Present	Sensation Present

## **Screeners and Opioid Assessment for Patients with Pain (SOAPP)**

### **Fall Risk Assessment**

Level of Consciousness/Mental Status - Alert

History of Falls in Past 3 Months - No falls

Ambulation/Elimination Status - Chair Bound (Requires restraints and assist with elimination.)

Vision Status (With or Without Glasses) - Adequate

## Document note on 04/03/2019 11:30 AM for William D Carrington

Patient: Carrington , William

Visit Date: 04/03/19

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Gait/Balance - Decreased muscular coordination

Medications - None of these medications taken currently or within the last seven days

Anesthetics, Antihistamines, Antihypertensives, Antiseizure, Benzodiazepines, Cathartics, Diuretics, Hypoglycemics,  
Narcotics, Psychotropics, Sedatives/ Hypnotics

Predisposing Diseases - 1-2 present

### Total Fall Risk Score - 1

A score above 10 indicates HIGH RISK.

For patients with a score above 10, steps should be taken to protect the patient from preventable falls.

## Assessment

Encounter for Medicare annual wellness exam  
CAD in native artery  
Calcification of abdominal aorta  
Chronic bronchitis, mucopurulent  
Chronic GERD  
Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease, without  
long-term current use of insulin  
Chronic kidney disease, stage 2 (mild)  
Degeneration of basal ganglia  
Essential hypertension  
Fredrickson type IIb hyperlipoproteinemia  
Mild persistent asthma, uncomplicated  
Old MI (myocardial infarction)  
Polyneuropathy associated with underlying disease  
Shy-Drager syndrome  
Systolic CHF, chronic  
Body mass index (BMI) 29.0-29.9, adult  
Chronic maxillary sinusitis

### Chronic Conditions

Chronic GERD  
Polyneuropathy associated with underlying disease  
Combined forms of age-related cataract of both eyes  
Facet arthritis of cervical region  
Chronic bronchitis, mucopurulent  
Systolic CHF, chronic  
Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease, without  
long-term current use of insulin  
Shy-Drager syndrome  
Degeneration of basal ganglia  
Calcification of abdominal aorta  
Essential hypertension  
Fredrickson type IIb hyperlipoproteinemia  
CAD in native artery  
Old MI (myocardial infarction)



## Document note on 04/03/2019 11:30 AM for William D Carrington

Patient: Carrington , William

Visit Date: 04/03/19

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Mild persistent asthma, uncomplicated  
CKD (chronic kidney disease) stage 2, GFR 60-89 ml/min  
Ataxia  
Benign prostatic hyperplasia with weak urinary stream  
Elevated uric acid in blood  
Tobacco abuse  
Carrier of staphylococcus  
Benign essential tremor  
Chronic fatigue syndrome  
Chronic maxillary sinusitis  
Fibromyalgia  
Diarrhea  
Status post coronary artery bypass graft  
Simple obesity  
Beta-blockers contraindicated  
Changes in retinal vascular appearance of both eyes  
Subjective visual disturbance of both eyes

### Framingham Cardiovascular Risk

10 Year CVD Risk - 13%

10 Year Stroke Risk - 5%

### Global Cardiovascular Risk Score

Current Score - 2.3 points

(A Global Cardiovascular Risk Score below 4 is desirable. Above 4, the patient is at increased risk of a cardiovascular event.)

## **Plan**

---

Current and previous labs reviewed  
Plan was discussed with patient.  
The patient indicates they agree with the discussed plan.  
Follow-Up Visit  
Lab as indicated  
Medications reviewed  
Continue current medications & therapy  
Medications Given in Office  
Medication(s) Ordered  
Current Medication List Given to Patient

### Education/Instructions

Patient Given Diabetes Follow Up Document  
setma83\_hosp\_plan{Unexpected Value}

## **Active Medications**

Start Date	Brand	Dose	Sig Desc
04/03/2019	VENTOLIN HFA	90 mcg	inhale 2 puff by inhalation route every 4 hours

## Document note on 04/03/2019 11:30 AM for William D Carrington

Patient: Carrington , William

Visit Date: 04/03/19

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04/03/2019	OMEPRazole	20 mg	take 1 Tablet by Oral route every morning
04/03/2019	BACTRIM DS	800 mg-160 mg	take 1 tablet by oral route every 12 hours
04/03/2019	MEDROL	4 mg	take as directed
12/04/2018	LISINOPRIL	5 mg	TAKE 1 TABLET BY ORAL ROUTE 2 TIMES EVERY DAY
10/25/2018	ATORVASTATIN CALCIUM	80 mg	TAKE 1 TABLET BY ORAL ROUTE EVERY DAY AT BEDTIME
07/09/2018	ALLOPURINOL	300 mg	TAKE 1 TABLET BY MOUTH ONCE DAILY
07/09/2018	ZANAFLEX	4 mg	TAKE 1 TABLET BY ORAL ROUTE EVERY 8 HOURS AS NEEDED NOT TO EXCEED 3 DOSES IN 24 HOURS
02/21/2018	FLUTICASONE PROPIONATE	50 mcg/actuation	spray 2 spray by intranasal route twice a day each nostril
10/12/2017	SYMBICORT	80 mcg-4.5 mcg/actuation	inhale 2 puff by inhalation route 2 times every day in the morning and evening
08/08/2017	VIAGRA	50 mg	take 1 tablet by oral route every day as needed approximately 1 hour before sexual activity
05/18/2017	PROCTOZONE-HC	2.5 %	apply by topical route 2 times every day to the affected area(s)
	CLARITIN-D 12 HOUR	5 mg-120 mg	1 tab po BID
	ASPIRIN	325 mg	take 1 tablet by oral route every day
	ZANTAC	150 mg	take 1 tablet by oral route every day

### Disease Management Tools Accessed

Diabetes Mellitus

Hypertension

### Injections

J2010 - Linconcin up to 300 mg

### Lab

BMP

BNP

CBC

Glycohemoglobin

Hepatic Function Panel

Lipid Panel

Magnesium

Occult Blood

PSA

uTSH

### Radiology

93000 - EKG

## Document note on 04/03/2019 11:30 AM for William D Carrington

Patient: Carrington , William

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### **Diagnostics**

Status	Priority	Order
ordered	Routine	Echocardiogram

### **Evaluation and Management**

99213 - Established Patient, Expanded Problem

G0439 - Annual Wellness Visit, Subsequent (Medicare)

### **Follow Up**

#### Acute

Follow - up

4 month(s)

---

**Approved by Jeffrey S. Anthony APRN**    **04/03/19**  
Southeast Texas Medical Associates, LLP



SETMA I - 2929 Calder, Suite 100

SETMA II - 3570 College, Suite 200

Mark Wilson Clinic - 2010 Dowlen

Lumberton - 137B LHS Drive

Nederland/Port Arthur - 2400 Highway 365, Suite 201

Orange - 610 Strickland Drive, Suite 140

(409) 833-9797

www.setma.com

## Chart Note - 04/03/19 SETMA II

<b>Patient</b>	<b>William Carrington</b>
<b>Date of Birth</b>	<b>01/29/1963</b>
<b>Age</b>	<b>56 Years</b>
<b>Race</b>	<b>Declined to specify</b>
<b>Preferred Language</b>	<b>English</b>
<b>Sex</b>	<b>M</b>
<b>Visit Type</b>	<b>Office Visit</b>
<b>Medical Record</b>	<b>57115</b>

### Acute Diagnoses

#### Status

Encounter for Medicare annual wellness exam  
CAD in native artery  
Calcification of abdominal aorta  
Chronic bronchitis, mucopurulent  
Chronic GERD  
Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease,  
without long-term current use of insulin  
Chronic kidney disease, stage 2 (mild)  
Degeneration of basal ganglia  
Essential hypertension  
Fredrickson type IIb hyperlipoproteinemia  
Mild persistent asthma, uncomplicated  
Old MI (myocardial infarction)  
Polyneuropathy associated with underlying disease  
Shy-Drager syndrome  
Systolic CHF, chronic  
Body mass index (BMI) 29.0-29.9, adult  
Chronic maxillary sinusitis

### Chief Complaints

\* Medicare Wellness Exam

SINUS PROBLEMS

## **Chronic Conditions**

---

Chronic GERD

Polyneuropathy associated with underlying disease

Combined forms of age-related cataract of both eyes

Facet arthritis of cervical region

Chronic bronchitis, mucopurulent

Systolic CHF, chronic

Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease, without long-term current use of insulin

Shy-Drager syndrome

Degeneration of basal ganglia

Calcification of abdominal aorta

Essential hypertension

Fredrickson type IIb hyperlipoproteinemia

CAD in native artery

Old MI (myocardial infarction)

Mild persistent asthma, uncomplicated

CKD (chronic kidney disease) stage 2, GFR 60-89 ml/min

Ataxia

Benign prostatic hyperplasia with weak urinary stream

Elevated uric acid in blood

Tobacco abuse

Carrier of staphylococcus

Benign essential tremor

Chronic fatigue syndrome

Chronic maxillary sinusitis

Fibromyalgia

Diarrhea

Status post coronary artery bypass graft

Simple obesity

Beta-blockers contraindicated

Changes in retinal vascular appearance of both eyes

Subjective visual disturbance of both eyes

## **Chief Complaint 1 - \* Medicare Wellness Exam**

### Comments

ah ma

## **Chief Complaint 2 - SINUS PROBLEMS**

Frequency - persistently

Duration - 3 week(s)

Severity - moderate

Change - no change

Context - none

Aggravated By - None

## Document note on 04/03/2019 11:30 AM for William D Carrington

Patient: Carrington, William  
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Relieved By - None

### Associated Symptoms

Cough, Productive  
Sneezing  
sore throat  
Ear Ache

### Pertinent Negatives

Congestion, Chest  
Congestion, Head

### Comments

ah ma

## Nursing

### Medications Administered

<u>Medication</u>	<u>Amount</u>	<u>Measure</u>	<u>Route</u>	<u>Site</u>	<u>Initials</u>	<u>Time</u>
Lincomycin Hydrochloride	300.00	mg	IM			

### Medications (active prior to today)

<u>Medication Name</u>	<u>Sig Desc</u>	<u>Start Date</u>	<u>Stop Date</u>	<u>Refilled</u>	<u>Elsewhere</u>
Claritin-D 12 Hour 5 mg-120 mg Tab	1 tab po BID	//			Y
Proctozone-HC 2.5 % topical cream perineal applicator	apply by topical route 2 times every day to the affected area(s)	05/18/2017	06/03/2019	05/18/2017	N
Viagra 50 mg tablet	take 1 tablet by oral route every day as needed approximately 1 hour before sexual activity	08/08/2017			N
Ventolin HFA 90 mcg/actuation aerosol inhaler	inhale 2 puff by inhalation route every 4 hours	08/25/2017	04/03/2019	04/03/2019	N
Symbicort 80 mcg-4.5 mcg/actuation HFA aerosol inhaler	inhale 2 puff by inhalation route 2 times every day in the morning and evening	10/12/2017			N
fluticasone 50 mcg/actuation nasal spray,suspension	spray 2 spray by intranasal route twice a day each nostril	02/21/2018		02/21/2018	N
aspirin 325 mg tablet	take 1 tablet by oral route every day	//		05/17/2018	Y
Zantac 150 mg tablet	take 1 tablet by oral route every day	//		05/17/2018	Y
allopurinol 300 mg tablet	TAKE 1 TABLET BY MOUTH ONCE DAILY	07/09/2018		07/09/2018	N
Zanaflex 4 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY 8 HOURS AS NEEDED NOT TO EXCEED 3 DOSES IN 24 HOURS	07/09/2018		07/09/2018	N

## Document note on 04/03/2019 11:30 AM for William D Carrington

Patient: Carrington, William

Visit Date: 04/03/19

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omeprazole 20 mg capsule, delayed release	take 1 Tablet by Oral route every morning	09/27/2018	04/03/2019	04/03/2019	N
atorvastatin 80 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY DAY AT BEDTIME	10/25/2018		10/25/2018	N
lisinopril 5 mg tablet	TAKE 1 TABLET BY ORAL ROUTE 2 TIMES EVERY DAY	12/04/2018		12/04/2018	N

### Medication Reconciliation

Medications reconciled today.

### Medication Reviewed

Adherence	Medication Name	Sig Desc	Elsewhere	Status
taking as directed	Claritin-D 12 Hour 5 mg-120 mg Tab	1 tab po BID	Y	Verified
taking as directed	Proctozone-HC 2.5 % topical cream perineal applicator	apply by topical route 2 times every day to the affected area(s)	N	Verified
taking as directed	Viagra 50 mg tablet	take 1 tablet by oral route every day as needed approximately 1 hour before sexual activity	N	Verified
taking as directed	Ventolin HFA 90 mcg/actuation aerosol inhaler	inhale 2 puff by inhalation route every 4 hours	N	Verified
taking as directed	Symbicort 80 mcg-4.5 mcg/actuation HFA aerosol inhaler	inhale 2 puff by inhalation route 2 times every day in the morning and evening	N	Verified
taking as directed	fluticasone 50 mcg/actuation nasal spray, suspension	spray 2 spray by intranasal route twice a day each nostril	N	Verified
taking as directed	aspirin 325 mg tablet	take 1 tablet by oral route every day	Y	Verified
taking as directed	Zantac 150 mg tablet	take 1 tablet by oral route every day	Y	Verified
taking as directed	allopurinol 300 mg tablet	TAKE 1 TABLET BY MOUTH ONCE DAILY	N	Verified
taking as directed	Zanaflex 4 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY 8 HOURS AS NEEDED NOT TO EXCEED 3 DOSES IN 24 HOURS	N	Verified
taking as directed	atorvastatin 80 mg tablet	TAKE 1 TABLET BY ORAL ROUTE EVERY DAY AT BEDTIME	N	Verified
taking as directed	omeprazole 20 mg capsule, delayed release	take 1 Tablet by Oral route every morning	N	Verified
taking as directed	lisinopril 5 mg tablet	TAKE 1 TABLET BY ORAL ROUTE 2 TIMES EVERY DAY	N	Verified

### Health Maintenance

The patient's health maintenance was reviewed today.

BMP - 09/17/2018

CBC - 09/17/2018

Chemistry - 05/17/2018

Chest X-Ray - 10/12/2017

Colonoscopy - 04/08/2004

Creatinine - 09/17/2018

Dilated Eye Exam - 10/30/2018

## Document note on 04/03/2019 11:30 AM for William D Carrington

Patient: Carrington, William  
Visit Date: 04/03/19  
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Foot Exam - 04/03/2019  
Echocardiogram - 08/15/2004  
EKG - 04/03/2019  
EMG - 01/21/2015  
Eye Exam - 04/03/2019  
Flu Shot - 09/27/2018  
HFP - 09/17/2018  
HGB - 09/17/2018  
Lipids - 03/15/2018  
Microalbumin - 09/17/2018  
PFT - 07/25/2008  
Pneumovax - 04/08/2009  
PSA - 03/15/2018  
PT/INR - 08/18/2016  
Rectal Exam - 04/08/2009  
Stress Test - 09/23/2004  
Tetanus - 04/08/2009  
Thyroid Profile - 05/02/2008  
Urinalysis - 09/17/2018  
uTSH - 09/17/2018

### Patient's Preferred Specialists

Neurology - Dr. Deiparine

### Other Preferred Specialists

Dr Duplan, EENT

## Histories

---

### Past Medical History

#### PAST MEDICAL/SURGICAL HISTORY

Disease/disorder	Onset Date	Management	Date
		lymphnodes removed right knee CABG	2002
Chicken Pox			
measles			
Shy Drager syndrome	2007		

### Social History

Ethnicity - Not Hispanic or Latino

Occupation - store manager

Marital Status - divorced

#### Tobacco Use

Smoking status: Heavy tobacco smoker.

#### Alcohol Use



## Document note on 04/03/2019 11:30 AM for William D Carrington

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approximately 0.00 ounces/week.

approximately 0.00 ounces/week.

approximately 0.00 ounces/week.

### Caffeine

Approximately 6 cups/cans per day

## Family History

Relationship	Family Member Name	Deceased	Age at Death	Condition	Onset Age	Cause of Death
				Family history of Diabetes mellitus type 2		N
				No family history of Hypertension		N
				No family history of Hyperlipidemia		N
Father		Y		Cancer of the Lung	42	N
Mother		N		Arthritis		N

## Review of Systems

### Source of Information

Patient

## Allergies

Description	Onset
BACITRACIN ZINC	08/08/2002
MEDICAL SUPPLY, MISCELLANEOUS	08/08/2002
NEOMYCIN SULFATE	08/08/2002
INDOMETHACIN	08/08/2002
POLYMYXIN B	08/08/2002
ISOPROPYL ALCOHOL	08/08/2002
BACITRACIN	08/08/2002
PROPOXYPHENE NAPSYLATE	08/08/2002
CHLORHEXIDINE GLUCONATE	08/08/2002
CODEINE	08/08/2002
MORPHINE	08/08/2002
ACETAMINOPHEN	08/08/2002
IBUPROFEN	08/08/2002
POLYMYXIN B SULFATE	08/08/2002
GRAMICIDIN D	08/08/2002
FENTANYL	04/05/2007
AMOXICILLIN TRIHYDRATE	07/29/2009
POTASSIUM CLAVULANATE	07/29/2009

## Ears

### Patient Confirms

Ear aches,

## Nose

# Document note on 04/03/2019 11:30 AM for William D Carrington

Patient: Carrington, William  
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## Patient Confirms

Sneezing,

## **Oropharynx**

### Patient Confirms

Sore throat,

## **Respiratory**

### Patient Confirms

Sneezing, Cough, Daytime cough, Nighttime cough,  
Productive cough - clear

## **Physical Exam**

## **Vital Signs**

### HEIGHT

Time	ft	in	cm	Last Measured	Height Position	%
11:45 AM	6.0	1.00	185.42	07/02/2013	Standing	

### WEIGHT/BSA/BMI

Time	lb	oz	kg	Context	%	BMI kg/m2	BSA m2
11:45 AM	223.00		101.151	dressed with shoes		29.42	2.28

### BLOOD PRESSURE

Time	BP mm/Hg	Position	Side	Site	Method	Cuff Size
11:45 AM	118/82	sitting	right	arm	manual	adult

Mid-Arm Circumference - 0.0 inches

### TEMPERATURE/PULSE/RESPIRATION

Time	Temp F	Temp C	Temp Site	Pulse/min	Pattern	Resp/ min
11:45 AM				63	regular	18

### PULSE OXIMETRY/FIO2

Time	Pulse Ox (Rest %)	Pulse Ox (Amb %)	O2 Sat	O2 LPM	Timing	FiO2 %	L/min	Delivery Method
11:45 AM	99		RA			21		

### MEASURED BY

Time	Measured by
11:45 AM	Angela D. Harrison

Body Fat - 19.6 %

Protein Requirement - 121 grams/day

### Circumferences (Performed 04/03/2019)

Abdomen - 40 inches

Chest - 44.00 inches

Patient: Carrington , William  
Visit Date: 04/03/19  
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### **Constitutional**

Level of Consciousness - Normal  
Orientation - Normal  
Level of Distress - Normal  
Nourishment - overweight  
Overall Appearance - Normal

### **Eyes**

General

Right - Normal  
Left - Normal

External

Right - Normal  
Left - Normal

Pupil

Right - Normal  
Left - Normal

Last Dilated Eye Exam - 10/30/2018

Last Eye Exam - 04/03/2019

### **Neck**

Inspection - Normal  
Palpation - Normal  
Lymph Nodes - Normal  
Thyroid Gland - Normal

### **Respiratory**

Inspection - Normal  
Auscultation - expiratory wheeze  
Location - bilateral  
Cough - Absent

### **Cardiovascular**

Auscultation - Normal  
Murmurs - Absent

Pulses Left

Right

Dorsalis Pedis

2+ expected

2+ expected

Peripheral Edema - No

### **Abdomen**

Inspection - Normal  
Auscultation - Normal  
Palpation - Normal

## **Neurological**

### Mental Status

Cognitive Abilities - Normal

Emotional Stability - Normal

### Sensory Function

Balance and Gait - Normal

## **Feet**

### Pulses

Dorsalis Pedis

Left - 2+ expected

Right - 2+ expected

Skin between toes checked

## **Monofilament Examination**

### Toe Pulps

	<u>Right</u>	<u>Left</u>
1	Sensation Present	Sensation Present
2	Sensation Present	Sensation Present
3	Sensation Present	Sensation Present
4	Sensation Present	Sensation Present
5	Sensation Present	Sensation Present

### Metatarsal Heads

	<u>Right</u>	<u>Left</u>
1	Sensation Present	Sensation Present
2	Sensation Present	Sensation Present
3	Sensation Present	Sensation Present
4	Sensation Present	Sensation Present
5	Sensation Present	Sensation Present

### Heel

<u>Right</u>	<u>Left</u>
Sensation Present	Sensation Present

### Foot

<u>Right</u>	<u>Left</u>
Sensation Present	Sensation Present

## **Screeners and Opioid Assessment for Patients with Pain (SOAPP)**

### **Fall Risk Assessment**

Level of Consciousness/Mental Status - Alert

History of Falls in Past 3 Months - No falls

Ambulation/Elimination Status - Chair Bound (Requires restraints and assist with elimination.)

Vision Status (With or Without Glasses) - Adequate

## Document note on 04/03/2019 11:30 AM for William D Carrington

Patient: Carrington , William

Visit Date: 04/03/19

Page 10 of 13

Gait/Balance - Decreased muscular coordination

Medications - None of these medications taken currently or within the last seven days

Anesthetics, Antihistamines, Antihypertensives, Antiseizure, Benzodiazepines, Cathartics, Diuretics, Hypoglycemics,  
Narcotics, Psychotropics, Sedatives/ Hypnotics

Predisposing Diseases - 1-2 present

### Total Fall Risk Score - 1

A score above 10 indicates HIGH RISK.

For patients with a score above 10, steps should be taken to protect the patient from preventable falls.

## Assessment

Encounter for Medicare annual wellness exam  
CAD in native artery  
Calcification of abdominal aorta  
Chronic bronchitis, mucopurulent  
Chronic GERD  
Controlled type 2 diabetes mellitus with stage 2 chronic kidney disease, without  
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### Chronic Conditions

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Polyneuropathy associated with underlying disease  
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## Document note on 04/03/2019 11:30 AM for William D Carrington

Patient: Carrington , William

Visit Date: 04/03/19

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Ataxia  
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Tobacco abuse  
Carrier of staphylococcus  
Benign essential tremor  
Chronic fatigue syndrome  
Chronic maxillary sinusitis  
Fibromyalgia  
Diarrhea  
Status post coronary artery bypass graft  
Simple obesity  
Beta-blockers contraindicated  
Changes in retinal vascular appearance of both eyes  
Subjective visual disturbance of both eyes

### Framingham Cardiovascular Risk

10 Year CVD Risk - 13%

10 Year Stroke Risk - 5%

### Global Cardiovascular Risk Score

Current Score - 2.3 points

(A Global Cardiovascular Risk Score below 4 is desirable. Above 4, the patient is at increased risk of a cardiovascular event.)

## **Plan**

---

Current and previous labs reviewed  
Plan was discussed with patient.  
The patient indicates they agree with the discussed plan.  
Follow-Up Visit  
Lab as indicated  
Medications reviewed  
Continue current medications & therapy  
Medications Given in Office  
Medication(s) Ordered  
Current Medication List Given to Patient

### Education/Instructions

Patient Given Diabetes Follow Up Document  
setma83\_hosp\_plan{Unexpected Value}

## **Active Medications**

Start Date	Brand	Dose	Sig Desc
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## Document note on 04/03/2019 11:30 AM for William D Carrington

Patient: Carrington , William

Visit Date: 04/03/19

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04/03/2019	OMEPRAZOLE	20 mg	take 1 Tablet by Oral route every morning
04/03/2019	BACTRIM DS	800 mg-160 mg	take 1 tablet by oral route every 12 hours
04/03/2019	MEDROL	4 mg	take as directed
12/04/2018	LISINOPRIL	5 mg	TAKE 1 TABLET BY ORAL ROUTE 2 TIMES EVERY DAY
10/25/2018	ATORVASTATIN CALCIUM	80 mg	TAKE 1 TABLET BY ORAL ROUTE EVERY DAY AT BEDTIME
07/09/2018	ALLOPURINOL	300 mg	TAKE 1 TABLET BY MOUTH ONCE DAILY
07/09/2018	ZANAFLEX	4 mg	TAKE 1 TABLET BY ORAL ROUTE EVERY 8 HOURS AS NEEDED NOT TO EXCEED 3 DOSES IN 24 HOURS
02/21/2018	FLUTICASONE PROPIONATE	50 mcg/actuation	spray 2 spray by intranasal route twice a day each nostril
10/12/2017	SYMBICORT	80 mcg-4.5 mcg/actuation	inhale 2 puff by inhalation route 2 times every day in the morning and evening
08/08/2017	VIAGRA	50 mg	take 1 tablet by oral route every day as needed approximately 1 hour before sexual activity
05/18/2017	PROCTOZONE-HC	2.5 %	apply by topical route 2 times every day to the affected area(s)
	CLARITIN-D 12 HOUR	5 mg-120 mg	1 tab po BID
	ASPIRIN	325 mg	take 1 tablet by oral route every day
	ZANTAC	150 mg	take 1 tablet by oral route every day

### **Disease Management Tools Accessed**

Diabetes Mellitus

Hypertension

### **Injections**

J2010 - Linconcin up to 300 mg

### **Lab**

BMP

BNP

CBC

Glycohemoglobin

Hepatic Function Panel

Lipid Panel

Magnesium

Occult Blood

PSA

uTSH

### **Radiology**

93000 - EKG

## Document note on 04/03/2019 11:30 AM for William D Carrington

Patient: Carrington , William

Visit Date: 04/03/19

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### **Diagnostics**

Status	Priority	Order
ordered	Routine	Echocardiogram

### **Evaluation and Management**

99213 - Established Patient, Expanded Problem

G0439 - Annual Wellness Visit, Subsequent (Medicare)

### **Follow Up**

#### Acute

Follow - up

4 month(s)

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**Approved by Jeffrey S. Anthony APRN**    **04/03/19**  
Southeast Texas Medical Associates, LLP