



## Nguyen, Tamhong

67 Y old Female, DOB: 02/02/1949

Account Number: 32964

11810 APPLE BLUFF CT, CYPRESS, TX-774336476

Home: 832-287-2057

Guarantor: Nguyen, Tamhong Insurance: AMERIGROUP -

VAN LANG IPA Payer ID: VLIPA

Appointment Facility: Rudolph Medical Associates PA

12/06/2016

Progress Notes: Tram Ngoc Ho, MD

### Current Medications

#### Taking

- Clonazepam 0.5 MG Tablet 1 tablet Orally twice a day (bid) as needed (prn) anxiety
- Gabapentin 800 MG Tablet 1 tablet Orally four times a day (qid)
- Restasis 0.05 % Emulsion 1 into affected eye Ophthalmic Twice a day
- Alendronate Sodium 70 MG Tablet 1 tablet Orally qwkly

#### Discontinued

- Gabapentin 600 MG Tablet 1 tablet Orally twice a day (bid)
- Medication List reviewed and reconciled with the patient

### Past Medical History

ANXIETY

DEPRESSION

GLAUCOMA

OSTEOPOROSIS ON MED SINCE 2006

### Surgical History

appendectomy 2016

EYE SURGERY BIL FOR GLAUCOMA 01/2016

### Family History

Mother: alive, diagnosed with Hypertension

Father: deceased, lung cancer, diagnosed with Cancer

2 brother(s) , 1 sister(s) - healthy. 3 son(s) , 2 daughter(s) .

daughter: mental.

### Social History

Tobacco Use

Are you a: *never smoker*

Smoke Exposure

Second Hand Smoke Exposure: *No*

Do you drink alcohol?

Status: *No*

Do you exercise?

Answer: *No*

Caffeine intake?

Status: *No*

Use of recreational / street drugs?

Answer: *No*

Do you have pets?

Status: *No*

### Reason for Appointment

1. Preventive care
2. Shoulder and ls pain / bil knee swollen x 7-8 months
3. Feel tired all the time
4. L back thigh lumb x 7-8 years

### History of Present Illness

#### PCMH:

High Risk Patient *no*.

Self-referral tracking and follow up

PCMH: Patient has made a self referral to another clinician

*No*

Coordinate with facility and manage care transition

PCMH: Admission to hospital or ER visit *No*

PCMH: Discharge summary received *No*

PCMH: Patient/Family discharge follow-up *Office Visit*

Language Services

PCMH: Language services were provided at the time of the

appointment? *No*

Care Management

PCMH: Pre-visit Preparations Completed? *No*

PCMH: Collaborated with patient/family to develop an

individual care plan? *Yes*

PCMH: Provided patient/family a written plan of care? *Yes*

PCMH: Assessed and addressed barriers when the patient has not met treatment goals? *Yes*

PCMH: Gave patient/family a clinical visit summary? *Yes*

PCMH: Identified patient/family who might benefit from

additional care management? *Yes*

Medication Management

PCMH: Assessed patient/family understanding of

medications? *Yes*

PCMH: Assessed patient response to medication and barriers

to adherence? *Yes*

Support Self-Care Process

PCMH: Self-management educational resources provided?

*Yes*

PCMH: Used EHR to identify patient specific education? *Yes*

PCMH: Self-management plans discussed and documented?

*Yes*

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Marital Status: Married.

## Allergies

N.K.D.A.

## Hospitalization/Major Diagnostic Procedure

as above 2016

## Review of Systems

### GENERAL:

GENERAL: denies fevers/chills/nausea/vomiting/diarrhea. HEENT: denies vision changes and headaches. RESPIRATORY: denies shortness of breath.

CARDIOVASCULAR: denies chest pain, palpitations, shortness of breath, or edema. GI: denies abdominal pain, change in bowel habits, no changes in appetite. GENITO-URINARY: denies dysuria, urinary urgency, increased frequency, hematuria.

MUSCULOSKELETAL: taking gabapentin 600mg bid for neck pain since 2010, better w/ acupuncture, +numbness of hands/arms sometimes. recom to have surgery but pt declined, had MRI CS 11/2016 w/ pending result.

NEUROLOGY: denies numbness, tingling of extremities, denies lightheadness, denies loss of sensation.

ENDOCRINOLOGY: denies polyuria, polydipsia. PSYCHIATRY: ANXIETY AND DEPRESSION. EXTREMITIES: denies swelling, pain, numbness.

PCMH: Self-management abilities documented? Yes

PCMH: Self-management tools provided? Yes

PCMH: Patient/family counselled on healthy behaviors? Yes

### Narrative:

Meds reviewed with pt  
pt usually goes to have acupuncture for R knee pain and neck pain. Neck pain is present since 2010, better w acupuncture. recom to have surgery in 2010 but declined since then. last MRI CS was 11/2016 w/ previous PCP, Dr. Le Huy Minh, w unknown result

Having R knee pain >L w/ swelling, better w/ acupuncture, using herbal pain patch which is helping.

+ hand joints pain for 6 yrs w/ o swelling, + AM stiffness  
no hx of LUPUS or RA

C/o left buttock swelling for 8 yrs that is not growing and causing pain to her Left leg.

### Vital Signs

Ht 59.25, Wt 109, BMI 21.83, BP 135/63, HR 65, Temp 98.2.

### Examination

#### Examination, General:

GENERAL APPEARANCE: well nourished, well developed, no acute distress.

HEENT: NC/AT, EOMI, PERRL, nose clear and TMs within normal limits.

NECK: supple without masses, no carotid bruits noted.

LUNGS: clear to auscultation bilaterally.

HEART: regular rate and rhythm normal S1S2.

ABDOMEN: soft, no masses felt, non-tender/non-distended.

EXTREMITIES: no clubbing, cyanosis, edema, +2 distal pulses  
throughouthands/wrists: no swelling, able to make fists  
R knee: decreased flexion, no swelling, + crepitus.

SKIN: + 5-6 cm soft ill defined induration at left button line.

NEURO: 2+ DTR throughout, Cn 2-12 intact, DRT 2+, sensory: decreased on R arm, gait steady but slow.

### Assessments

1. Annual physical exam - Z00.00 (Primary)
2. Cervical radiculopathy - M54.12, will get record for BDI
3. Degeneration of cervical intervertebral disc - M50.30
4. Dysthymia - F34.1
5. Anxiety - F41.9
6. Mass of right lower leg - R22.41
7. Pain in joints of right hand - M25.541
8. Pain in joints of left hand - M25.542
9. Other screening mammogram - Z12.31
10. Osteoporosis - M81.0
11. Long term (current) use of bisphosphonates - Z79.83
12. Special screening for malignant neoplasms, colon - Z12.11
13. Need for Streptococcus pneumoniae vaccination - Z23
14. Vitamin D deficiency - E55.9
15. Mixed hyperlipidemia - E78.2

### Treatment

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**1. Annual physical exam**

IMAGING: Echocardiogram (EKG/ECG)

**2. Dysthymia**

Start Paroxetine HCl Tablet, 10 MG, 1 tablet in the morning, Orally,  
Once a day for depression, 30 day(s), 30, Refills 3

LAB: 2834 TSH REFLEX TO FREE T4

**3. Anxiety**

LAB: 1000 CBC W/AUTO DIFF

**4. Mass of right lower leg**

IMAGING: MRI : Lower Ext Other Than Joint W/O

**5. Pain in joints of right hand**

LAB: 1055 SEDIMENTATION RATE

LAB: 3505 RHEUMATOID FACTOR, QUANT

LAB: 5390 CCP IgG

LAB: 9179 COMPREHENSIVE METABOLIC PANEL

**6. Other screening mammogram**

IMAGING: Breast mammogram screen bilateral

**7. Osteoporosis**

LAB: 6041 UA, MICROSCOPIC, REFLEX TO CULTURE

IMAGING: DEXA Hip and Spine

**8. Special screening for malignant neoplasms, colon**

Referral To:Thang Le Gastroenterology

Reason:please evaluate for screening colonoscopy. thanks

**9. Vitamin D deficiency**

LAB: 4958 VITAMIN D, 25 OH

**10. Mixed hyperlipidemia**

LAB: 173 LIPID PANEL

**11. Others**

Notes: diet and exercise discussed with patient.

**Immunization**

PREVNAR 13 - PNEUMOCOCCAL VACCINATION : 0.5 mL (Dose

No:1) given by Anh Nhan , AN on Left Deltoid

Immunization record has been reviewed and updated.

**Preventive Medicine**

Medical Home:

Bone Density Screening:

Have you had a bone density screening? Yes

Date: 12/06/2014

Colorectal Cancer Colonoscopy Screening:

Have you had a Colonoscopy colorectal screening? No

Depression Screening:

Have you received a depression screening? *Yes*  
Date: *12/06/2016*  
Depression Screening Findings *Positive*  
Suicide Risk Assessment Performed: *12/06/2016*  
Future Fall Risk Screening:  
Patient has been screened for future fall risk? *Yes*  
Date: *12/06/2016*  
Fall Risk Assessment: *No falls in the past year*  
Mammogram Performed:  
Have you had a mammogram? *Yes*  
Date: *12/06/2014 at Gold card*  
Pap Smear Performed:  
Have you had a pap smear? *Yes*  
Date: *12/06/2014*

**Procedure Codes**

93000 -ELECTROCARDIOGRAM, COMPLETE  
90670 PREVNAIR 13 - PNEUMOCOCCAL VACCINATION  
G0009 ADMN PNEUMCOC VAC NO FEE SCHED DAY  
1111F DSCHRG MED/CURRENT MED MERGE  
G8482 FLU IMMUNIZE ORDER/ADMIN  
4040F PNEUMOC IMM ORDER/ADMIN  
G8420 BMI<30 AND >=22 CALC & DOCU  
G8431 SCREENING FOR CLINICAL DEPRESSION IS  
DOCUMENTED AS BEING POSITIVE AND A FOLLOW-UP PLAN  
IS DOCUMENTED  
3288F FALL RISK ASSESSMENT DOCD  
1036F TOBACCO NON-USER  
G8783 BP SCR PRFRM RCMD D DEFIND SCR INTVL

**Follow Up**

3 Months



**Electronically signed by Tram Ho , MD on 12/06/2016 at  
05:41 PM CST**

**Sign off status: Completed**

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**Rudolph Medical Associates PA**

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