

HEATH, Nelda DOB: 03/05/1938 (85 yo F) Acc No. 4909562 DOS: 06/28/2023

Progress Notes

Patient: Heath, Nelda

Account Number: 4909562

DOB: 03/05/1938 **Age:** 85 Y **Sex:** Female

Date: 06/28/2023

Phone: 915-526-6796

Address: 14427 BRIARLAKE ST, SAN ANTONIO, TX-78247-2737

Subjective:

Chief Complaints:

1. 3 mo f/u.

HPI:

General:

85-year-old female with multiple comorbidities presenting for 3-month follow-up on chronic conditions. Pt reports to have loose bowels daily and is taking a stool softener. Pt reports her fatigue has gotten better since she takes some naps and is well rested in the morning. Pt reports she is still hungry even after eating 3 meals a day with snack. Pt is fighting the urge to eat more. Pt reports she has to stand up and hold on to rails due to unsteady balance. Pt does exercises daily, and works in her garden. Pt use to sweat three times at night but has improved when sticking feet out of sheets and lighter sheets. Pt got a pedicure last week and had an ingrown nail pulled that was very painful. Pt has some shooting pain from ankle down occasionally. No associated fevers, chills, shortness of breath, chest pain, palpitations, nausea, vomiting, diarrhea. Medications and labs reviewed with patient. No additional questions.

ROS:

General/Constitutional:

Comments See HPI for details, See HPI for details, See HPI for details.

Medical History:

A-fib, Hypertension, Type 2 Diabetes, Measles, Mumps, Polio, Vertigo, GERD.

Surgical History:

Appendectomy, Umbilical hernia repair, Total hysterectomy, Cataract lens BL, Pacemaker placement, Endoscopy x 2.

Hospitalization/Major Diagnostic Procedure:

Childbirth x 4, Above surgerfes, Syncope (multiple), Measles / Mumps, Polio, Methodist Stone Oak - Constipation 12/09/2022.

Family History:

Father: deceased 87 yrs, diagnosed with Diabetes. Mother: deceased 85 yrs, diagnosed with Diabetes, Hypertension. Maternal grandfather: deceased, diagnosed with Diabetes, Hypertension, Cancer. 2 brothers (s), 2 sister(s), 1 son(s), 3 daughter(s) . .

3 of her children have hypertension.

Social History:

Pt was an elementary school teacher for 20 years

Divorced for 25 years

Granddaughter- 210-577-9665.

Medications:

Taking Aspirin 81 MG Tablet Delayed Release 1 tablet Orally Once a day, Taking Atorvastatin Calcium 40 MG Tablet 1 tablet Orally 1 tab at bedtime, Taking Azelastine HCl 137 MCG/SPRAY Solution 1 puff in each nostril Nasally Twice a day, Taking Cetirizine HCl 10 MG Tablet 1 tablet Orally Once a day, Taking Clotrimazole-Betamethasone 1-0.05 % Cream APPLY TO AFFECTED AREA TWICE A DAY External, Taking Diclofenac Sodium 1 % Gel 1 gram as directed Transdermal Four times a day, Taking Docusate Sodium 100 MG Capsule 1 capsule as needed Orally Once a day, Taking Escitalopram Oxalate 10 MG Tablet 1 tablet Orally Once a day, Taking Farnotidine 40 MG Tablet 1 tablet at bedtime Orally Once a day, Taking Fluticasone Propionate (Inhal) 100 MCG/ACT Aerosol Powder Breath Activated 1 puff Inhalation Twice a day, Taking Glucose Monitor Lantec refill Brand per Insurance Plan Lancets Test blood sugar Three times daily AC meals Short-Acting Insulin as directed, Notes to Pharmacist: One Touch Ultra 2 meter used, Taking Glucose Monitor Test Strip refill Brand per Insurance Plan Strips Test blood sugar Three times daily Short-Acting Insulin as directed, Notes to Pharmacist: One Touch Ultra 2 meter used, Taking Isosorbide Mononitrate ER 30 MG Tablet Extended Release 24

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Hour 1 tablet in the morning Orally Once a day , Taking Januvia 100 MG Tablet 1 tablet Orally Once a day , Taking Jardiance 25 MG Tablet 1 tablet Orally Once a day , Taking Losartan Potassium 100 MG Tablet 1 tablet Orally Once a day , Taking metFORMIN HCl 500 MG Tablet 1 tablet with a meal Orally Once a day , Taking Multivitamin - Tablet 1 tablet Orally Once a day , Taking Nitroglycerin 0.4 MG Tablet Sublingual 1 tablet Sublingual as needed for chest pain As needed, Taking Omeprazole 40 MG Capsule Delayed Release 1 capsule Orally Once a day , Taking Polyeth Glyc-Propylene Glyc , Taking Sotalol HCl 80 MG Tablet 1 tablet Orally Twice a day , Taking Vascepa 1 GM Capsule 2 capsules with meals Orally Twice a day , Discontinued Clobetasol Propionate 0.05 % Ointment External , Discontinued Fluconazole 150 MG Tablet 1 tablet Orally Once a month , Discontinued Gemtesa 75 MG Tablet 1 tablet Orally Once a day , Discontinued Gemtesa 75 MG Tablet 1 tablet Orally Once a day , Medication List reviewed and reconciled with the patient

Allergies: Lidocaine: edema - Side Effects - Criticality High, Crestor: itching - Allergy - Criticality High, Doxycycline: rosacea - Side Effects - Criticality High, Ropinirole: edema - Side Effects - Criticality High.

Objective:

Vitals: BP: 112/60 mm Hg, RR: 14 /min, Pulse: 60 /min, Ht: 61.75 in, Wt: 133.8 lbs, BMI: 24.67 Index, Oxygen Sat: 98 % , Pain Scale: 8 1-10, Nurse/MA:: cedmunds,rma.

Past Vitals:

03/08/2023
 BP: 104/60 mm Hg, RR: 14 /min, Pulse: 60 /min, Ht: 61.75 in, Wt: 141.6 lbs, BMI: 26.11 Index, Oxygen Sat: 97 % , Pain Scale: 0 1-10

12/21/2022
 BP: sitting:131/69 mm Hg, RR: 16 /min, Pulse: sitting:69 /min, Ht: 61.75 in, Wt: 144.2 lbs, BMI: 26.59 Index, Oxygen Sat: Room Air:97 % , Pain Scale: 1 1-10

12/14/2022
 BP: sitting:136/66 mm Hg, RR: 16 /min, Pulse: sitting:68 /min, Ht: 61.75 in, Wt: 144.8 lbs, BMI: 26.7 Index, Oxygen Sat: Room Air:98 % , Pain Scale: 1 1-10

11/10/2022
 BP: 143/74 mm Hg, repeat:134/78 mm Hg, RR: 16 /min, Pulse: 66 /min, Temp: 98.1 F, Ht: 61.75 in, Wt: 150.8 lbs, BMI: 27.8 Index, Oxygen Sat: 99 % , Pain Scale: 6 1-10

Examination:

General Examination:
 Appearance: alert, in no acute distress, well developed, well nourished.
 Head: normocephalic, atraumatic, Head: normocephalic, atraumatic.
 Eyes: sclera non-icteric , pupils equal, round, reactive to light and accommodation, sclera non-icteric.
 Lymph nodes: no cervical adenopathy.
 Skin: no rashes, warm and dry , no suspicious lesions, warm and dry.
 Heart: regular rate and rhythm, no murmurs , regular rate and rhythm, no murmurs, S1, S2 normal.
 Lungs: clear to auscultation bilaterally , clear to auscultation bilaterally, no wheezes, rales or rhonchi, good air movement.
 Abdomen: no masses palpable, soft, nontender, nondistended.
 Musculoskeletal: cervical spine normal, full range of motion, no swelling, redness, or warmth of the elbow.
 Neurologic: alert and oriented, cognitive exam grossly normal, cooperative with exam, sensory exam intact.
 Psych: alert, oriented, good eye contact, mood and affect appropriate, no auditory or visual hallucinations, speech clear.

Assessment:

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Assessment:

- 1. Supraventricular tachycardia - I47.1
- 2. T2DM (type 2 diabetes mellitus) - E11.9 (Primary)
- 3. GERD (gastroesophageal reflux disease) - K21.9
- 4. Controlled diabetes mellitus with diabetic polyneuropathy - E11.42
- 5. Angina pectoris - I20.9
- 6. Type 2 diabetes mellitus with hyperglycemia - E11.65
- 7. Weakness - R53.1
- 8. Immunodeficiency due to conditions classified elsewhere - D84.81
- 9. Type 2 diabetes mellitus with hypoglycemia - E11.649
- 10. Knee pain - M25.569
- 11. Loose stools - R19.5
- 12. Imbalance - R26.89

Plan:

Treatment:

- LAB: HEMOGLOBIN A1C (Collection Date & Time - 06/28/2023 02:41 PM)
- LAB: CBC WITH DIFFERENTIAL/PLATELET (Collection Date & Time - 06/28/2023 02:41 PM)
- LAB: TSH+Free T4 (Collection Date & Time - 06/28/2023 02:41 PM)
- LAB: COMP. METABOLIC PANEL (14) (Collection Date & Time - 06/28/2023 02:41 PM)
- Clinical Notes: Checking a/c.

Referral To: Wellmed San Antonio LeadingReach Podiatry
Reason: patient needing toe nail trim | Langlois, Michael MD

2. Supraventricular tachycardia

- LAB: HEMOGLOBIN A1C (Collection Date & Time - 06/28/2023 02:41 PM)
- LAB: CBC WITH DIFFERENTIAL/PLATELET (Collection Date & Time - 06/28/2023 02:41 PM)
- LAB: TSH+Free T4 (Collection Date & Time - 06/28/2023 02:41 PM)
- LAB: COMP. METABOLIC PANEL (14) (Collection Date & Time - 06/28/2023 02:41 PM)
- Clinical Notes: Stable on sotolol.

3. GERD (gastroesophageal reflux disease)

- LAB: HEMOGLOBIN A1C (Collection Date & Time - 06/28/2023 02:41 PM)
- LAB: CBC WITH DIFFERENTIAL/PLATELET (Collection Date & Time - 06/28/2023 02:41 PM)
- LAB: TSH+Free T4 (Collection Date & Time - 06/28/2023 02:41 PM)
- LAB: COMP. METABOLIC PANEL (14) (Collection Date & Time - 06/28/2023 02:41 PM)
- Clinical Notes: Continue PPI.

4. Controlled diabetes mellitus with diabetic polyneuropathy

- LAB: HEMOGLOBIN A1C (Collection Date & Time - 06/28/2023 02:41 PM)
- LAB: CBC WITH DIFFERENTIAL/PLATELET (Collection Date & Time - 06/28/2023 02:41 PM)
- LAB: TSH+Free T4 (Collection Date & Time - 06/28/2023 02:41 PM)
- LAB: COMP. METABOLIC PANEL (14) (Collection Date & Time - 06/28/2023 02:41 PM)
- Clinical Notes: Continue gabapentin.

5. Angina pectoris

- LAB: HEMOGLOBIN A1C (Collection Date & Time - 06/28/2023 02:41 PM)
- LAB: CBC WITH DIFFERENTIAL/PLATELET (Collection Date & Time - 06/28/2023 02:41 PM)
- LAB: TSH+Free T4 (Collection Date & Time - 06/28/2023 02:41 PM)
- LAB: COMP. METABOLIC PANEL (14) (Collection Date & Time - 06/28/2023 02:41 PM)
- Clinical Notes: ANGINA PECTORIS, UNSPECIFIED: I20.9 Continue NTG SL pm as directed. Use and warning signs reviewed. Stressed importance of BP control, risk factor modifications, and fu w/ Cardiologist.

6. Type 2 diabetes mellitus with hyperglycemia

- LAB: HEMOGLOBIN A1C (Collection Date & Time - 06/28/2023 02:41 PM)
- LAB: CBC WITH DIFFERENTIAL/PLATELET (Collection Date & Time - 06/28/2023 02:41 PM)
- LAB: TSH+Free T4 (Collection Date & Time - 06/28/2023 02:41 PM)
- LAB: COMP. METABOLIC PANEL (14) (Collection Date & Time - 06/28/2023 02:41 PM)

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Notes: T2DM

-start metformin 500mg daily

-stop glimepiride

-continue januvia 100mg

-continue januvia 100mg

Clinical Notes: Patient with T2DM with hyperglycemia, goal a1c of 8.

-continue.

7. Weakness

LAB: HEMOGLOBIN A1C (Collection Date & Time - 06/28/2023 02:41 PM)

LAB: CBC WITH DIFFERENTIAL/PLATELET (Collection Date & Time - 06/28/2023 02:41 PM)

LAB: TSH+Free T4 (Collection Date & Time - 06/28/2023 02:41 PM)

LAB: COMP. METABOLIC PANEL (14) (Collection Date & Time - 06/28/2023 02:41 PM)

Notes: Provider services - Call Department of Aging and Disability

(210) 935-3967

8. Immunodeficiency due to conditions classified elsewhere

LAB: HEMOGLOBIN A1C (Collection Date & Time - 06/28/2023 02:41 PM)

LAB: CBC WITH DIFFERENTIAL/PLATELET (Collection Date & Time - 06/28/2023 02:41 PM)

LAB: TSH+Free T4 (Collection Date & Time - 06/28/2023 02:41 PM)

LAB: COMP. METABOLIC PANEL (14) (Collection Date & Time - 06/28/2023 02:41 PM)

Clinical Notes: Patient with immunodeficiency secondary to type 2 diabetes with hyperglycemia. Patient at increased risk of infections. Requires frequent monitoring and early treatment of potential infections. We will continue to monitor.

9. Type 2 diabetes mellitus with hypoglycemia

LAB: HEMOGLOBIN A1C (Collection Date & Time - 06/28/2023 02:41 PM)

LAB: CBC WITH DIFFERENTIAL/PLATELET (Collection Date & Time - 06/28/2023 02:41 PM)

LAB: TSH+Free T4 (Collection Date & Time - 06/28/2023 02:41 PM)

LAB: COMP. METABOLIC PANEL (14) (Collection Date & Time - 06/28/2023 02:41 PM)

10. Knee pain

LAB: HEMOGLOBIN A1C (Collection Date & Time - 06/28/2023 02:41 PM)

LAB: CBC WITH DIFFERENTIAL/PLATELET (Collection Date & Time - 06/28/2023 02:41 PM)

LAB: TSH+Free T4 (Collection Date & Time - 06/28/2023 02:41 PM)

LAB: COMP. METABOLIC PANEL (14) (Collection Date & Time - 06/28/2023 02:41 PM)

Notes: Knee pain

-recommend nonimpact exercise i.e, ellipticals, stationary bikes

-diclofenac 1% gel on knees or joints.

11. Loose stools

LAB: HEMOGLOBIN A1C (Collection Date & Time - 06/28/2023 02:41 PM)

LAB: CBC WITH DIFFERENTIAL/PLATELET (Collection Date & Time - 06/28/2023 02:41 PM)

LAB: TSH+Free T4 (Collection Date & Time - 06/28/2023 02:41 PM)

LAB: COMP. METABOLIC PANEL (14) (Collection Date & Time - 06/28/2023 02:41 PM)

Clinical Notes: hold off on stool softeners.

12. Imbalance

Clinical Notes: Having some imbalance

reviewed balance exercise

if not improving consider home physical therapy.

13. Others

Stop Polyeth Glyc-Propylene Glyc .

Clinical Notes: On insulin.

Procedures:

Ventpuncture:

Procedure Details

Consent: Patient - discussion held with the patient that included the risks, benefits, and alternatives. The patient verbalized understanding and elected to proceed.

Needle gauge: 21 gauge needle

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Anatomic location: *Left antecubital*

Number of attempts: 1 { ... }

Lab specimen sent to: *LabCorp*

Tolerance: *Patient tolerated procedure well*

Procedure completed by *_____*, Zamora, Bernice, RPT 6/28/2023 02:48:47 PM >

Procedure Codes: 36415 VENIPUNCT, ROUTINE

Preventive Medicine:

Handouts :

Patient Handouts:

THE FOLLOWING HANDOUTS WERE PROVIDED: *After hours care, Visit summary*

SCRIBE INFORMATION
THE ABOVE HANDOUTS WERE PROVIDED BY: Izarraras, Alejandra, CMA 6/28/2023 02:21:29 PM >

Documentation of this note included assistance by a scribe: Paige, Rachel 6/28/2023 01:58:11 PM >
Patient consent obtained for scribe participation in patient visit. Scribe assistance was provided on behalf

of: Dr. Koch.

Follow Up: 3 Months

Electronically signed by Kristopher Koch MD, MD on 06/28/2023 at 03:01 PM CDT
Sign off status: Pending

Provider: Kristopher R Koch, MD

Date: 06/28/2023