

Braswell, Janice, Female DOB: 10/08/1973 Procedure Date: 02/13/2019

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Patient: Janice Braswell**DOB:****Gender:** Female**Age:** 45y**Date:** 02/13/2019

Carol Stewart

244 3394

Family Doctor: Dd. Tolentino**Referring Doctor:** AUM Campuse Nurse Pract. Carol Stewart

Problem List

Problem List

HPI

Ms. Braswell returns today regarding her headaches. Patient states that she is doing well. She says that her headaches are still bothering her. She is having about 10 per month. They do not last for several days at a time. She continues on Pamelor and she is taking that every other night. Otherwise, she denies having any other new problems.

CT brain-normal

Review of Systems was reviewed, discussed and documented on the scanned in

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medication/ROS sheet

Vitals: Added vitals entry: Measurement date: 2019-02-13 11:29 Weight: 220.0 lbs
Height: 5 ft 6.0 in BMI: 35.5 Heart rate: 93 bpm Blood pressure: 148 / 98 mmHg

Performed Reconciliation

Active Medications

- clonidine 0.2 mg/24hr TD tdsy. Take 1 apply on the skin daily DAILY. Do not substitute.
- Prilosec 40 mg capsule, delayed release. Take 1 by mouth daily DAILY. Do not substitute.

Other Medications: Atorvastatin ?mg

Amlodipine ?mg

Reglan ?mg

Pamelor ?mg

Allergies

Performed Reconciliation

- Penicillins (Mild): Recorded on 12/19/2018. Reactions: None noted.

Physical Exam

Physical Exam done

CONSTITUTIONAL:

Well dressed, well nourished. No obvious distress. Awake, alert and oriented x 3.
Good recent and remote memory, normal speech cadence and normal rhythm. Adequate fund of knowledge. Good concentration and attention.

HEENT:

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PERRL. EOMI. Discs sharp.

Neck Supple. No carotid bruit.

CARDIOVASCULAR:

CRANIAL NERVES:

CN 2-12 grossly intact

MOTOR:

	R	L
Deltoids	5	5
Biceps	5	5
Triceps	5	5
Grip	5	5
Psoas	5	5
Quads	5	5
Hams	5	5
Anter. Tib	5	5
Gastroc.	5	5

SENSORY:

Intact.

CEREBELLUM:

Good FTN and RAM. Gait WNL. Romberg negative.

MUSCULOSKELETAL:

Intact. Normal bulk and tone.

DTR:

	Right	Left
Biceps	2	2
Triceps	2	2
Knees	2	2
Ankles	2	2

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Negative Babinski bilaterally.

Impression

Fell down stairs on Nov 26, 2018

Posttraumatic Headaches

HTN

Plan

She continues to have over 10 headaches a month, I have advised her she needs to take her Pamelor every night and will add Zoengran also.

I talked to the patient about symptomatic and prophylactic treatment for migraine headaches, medication overuse headaches, and tension headaches at length.

My general rule is that when a patient has 2-3 days per month ruined by headaches, I use prophylactic medication if the symptomatic medication does not abort it to their satisfaction.

HTN

I note patient's blood pressure is well controlled and it is being followed by patient's primary care physician.

Patient was seen and examined by Dr. Epperson with Paige Harris, CRNP

Orders:

#1 Fax notes to Carol Stevens CRNP

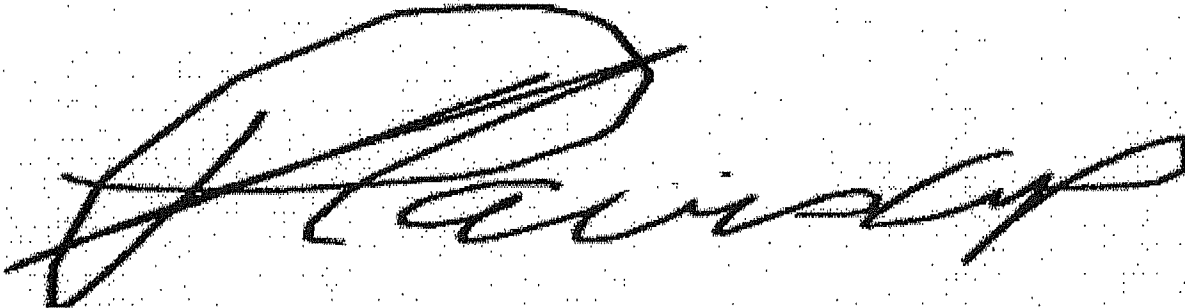
#2 Followup clinic appt in 4 month- Dr E only

#3 continue pamelor and start Zonegran

I agree, and I am actively participating in patient's plan of care
Larry Epperson, MD

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CVS Taylor

A handwritten signature in black ink, appearing to read 'Paige Harris', with a large, stylized initial 'P'.

Paige Harris, CRNP

ICD 10 Superbill

care slip

Encounter Diagnosis:

- Headache (ICD10CM - R51)
- Essential (primary) hypertension (ICD10CM - I10)
- Post-traumatic headache, unspecified, intractable (ICD10CM - G44.301)
- Carpal tunnel syndrome, LUE (ICD10CM - G56.02)
- Cervical radiculopathy (ICD10CM - M54.12)

Procedures Applied on 02/13/2019:

- Procedure code: Detailed OV (99214) Units: 1.00 Date: 02/13/2019
- Headache (ICD10CM - R51)
- Essential (primary) hypertension (ICD10CM - I10)
- Post-traumatic headache, unspecified, intractable (ICD10CM - G44.301)
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Notes: Paige./Epperson
