



AFC CREDENTIALING FAX



american family care
The Right Care. Right Now.

3700 Cahaba Beach Rd. Birmingham, AL 35212

From: CN=Kamala Owens,OU=RCM,OU=Corporate,OU=Domain Users,DC=AMERICAN FAMILY CARE,DC=com

Company:

Company: AUBURN UNIVERSITY AT
MONTGOMERY

Voice:

Voice:

Fax:

Fax: 334-244-3396

Subject: PORTIA BRONSON

Any material contained in this facsimile is to be confidential information and is to be used for the intended purposes only. This material should be reviewed only by the person(s) to whom it is sent. If you receive this fax in error or there is any missing information please contact the above number to inform the sender of the mistake. Please disregard any information that has been received in error immediately.

Patient: PORTIA BRONSON, Sex: F
Date of Service: 11/03/2024 (Log# 5728172)
Date of Birth: 06/16/1983 (41 years)
Patient ID: 5727441



AMERICAN FAMILY CARE INC
7559 Highway 72 West
Madison, AL 35758-8749
256-562-0850 F: 256-562-0853

Transcription

Patient: PORTIA BRONSON, Sex: F (ID# 5727441)
Date of Birth: 06/16/1983 (41 years)
Visit on 11/03/2024 (Log# 5728172)
Historian: Self

Triage Notes:

- L shoulder pain. s/s yesterday PT C/O LEFT SHOULDER PAIN ONGOING YESTERDAY. PT DENIES ANY INJURY/FALL, NUMBNESS/TINGLING, SOB, CHEST PAIN, FEVERS, ETC. CLEAR LUNG SOUNDS IN ALL LUNG FIELDS BILAT. PT STATES PAIN REPRODUCIBLE WITH MOVEMENT. THOROUGHLY DISCUSSED WITH PT AND PT'S HUSBAND- WE CAN NOT FULLY RULE OUT ANY CARDIAC CONDITIONS INCLUDING MI. FOR FULL EVAL- SEEK ER CARE. PT REFUSED TO SEEK ER CARE AT THIS TIME. DISCUSSED RISKS AND RISKS OF DELAY OF TREATMENT WITH PT- PT V/U.

OVERALL WELL APPEARING. NO EVIDENCE OF SOB, ACUTE ILLNESS, OR DISTRESS NOTED UPON EXAM. DENIES SOB, CP, FEVER, N/V/D. THOROUGHLY DISCUSSED S/S THAT WARRANTS IMMEDIATE F/U TO ER. PT V/U.

History of Present Illness:

Complaint:

- The patient presents with a chief complaint of pain of the left shoulder since Sat, Nov 02, 2024.

Review of Systems:

The patient complains of the following recent symptoms:

- Constitutional:
 - o pain: See HPI
- Musculoskeletal:
 - o aches/pains

The patient denies the following recent symptoms:

- Constitutional: denies chills, fatigue, fever, sweats
- Cardiovascular: denies fluttering/palpitations, chest pain/pressure, leg swelling
- Neurological: denies loss of consciousness, numbness/tingling, headache, weakness
- Psychiatric: denies depression, sleep difficulties, anxiety/nerves
- Lymph: denies lymph nodes/ "glands" problems, bleeding, bruising
- Eyes: denies eye pain, blurry vision, double vision, eye redness, eye discharge
- ENT and Mouth: denies loss of taste/smell, nasal congestion, sore throat, change of taste/smell, nasal discharge, ear pain
- Respiratory: denies congestion, shortness of breath, wheeze
- GI: denies blood in stool, vomiting, constipation, nausea, abdominal pain, diarrhea
- GU: denies painful urination, frequent urination, possibility of pregnancy, blood in urine, vaginal itching, vaginal discharge
- Musculoskeletal: denies muscle pain, swelling, back pain
- Skin: denies redness, bruised skin
- Endocrine: denies weight gain
- Allergy/Immun.: denies lip/tongue/throat swelling

Allergies:

patient specifies no known allergies

Medications:

- Farxiga: Farxiga 10 mg tablet; TAKE 1 TABLET TAKE 1 TABLET BY MOUTH ONCE DAILY IN THE MORNING; Total Qty: 90 (ninety)
Each; 0 refill(s); DAW;
- lisinopril: lisinopril 40 mg tablet; TAKE 1 TABLET TAKE 1 TABLET BY MOUTH ONCE DAILY REPLACES 20 MG DOSE; Total Qty: 30

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(thirty) Each; 0 refill(s); DAW:

- Ozempic: Ozempic 2 mg/dose (8 mg/3 mL) Pen Injector; INJECT 2MG SUBCUTANEOUSLY INJECT 2MG SUBCUTANEOUSLY ONCE A WEEK ON THE SAME DAY OF EACH WEEK: Total Qty: 3 (three) Milliliter: 0 refill(s); DAW:

Problem List:

- Essential (primary) hypertension (status Active)
- Type 2 diabetes mellitus without complications (status Active)

Social History:

- Alcohol: drinks rarely (2 or less drinks per week).
- Tobacco Use: denies

Vitals:

- 08:57 AM (11/03/2024)
Temperature: 97.7 °F (Temporal), Pulse: 74 BPM, BP: 111/79 (Arm [R]), Respirations: 18/min, O2 Saturation: 97%, O2 Delivery: RA,
Weight: 320 LBS, Height/Length: 5' 6", BMI: 51.6, Pregnant: No, Breastfeeding: No
First entered 11/03/2024 08:57 by McDaniel, Bailey
Last edited 11/03/2024 08:59 by McDaniel, Bailey

Physical Exam:

The following exam elements were documented to be abnormal:

- Muscular (Left abnormal and Right normal): tenderness of proximal upper extremity noted.
Left shoulder: tenderness noted, mild tenderness. NV EXAM INTACT.

The following exam elements were documented to be normal:

- Cardiovascular: upper extremity pulses 2+ and equal bilaterally.
- General: well developed, well nourished, and in no apparent distress.
- Muscular (Right and Left): normal biceps tendon and rotator cuff.
- Muscular (Right and Left): normal passive range of motion of shoulder.
- Muscular (Right and Left): normal shoulder strength.
- Muscular (Right and Left): normal active range of motion of shoulder.
- Muscular (Right and Left): no atrophy or deformity of shoulder or upper arm.
- Muscular (Right and Left): no swelling or mass of shoulder or upper arm.
- Psychiatric: oriented and alert.
- Skin (Right and Left): skin of shoulder dry and normal in temperature.
- Skin (Right and Left): no ecchymosis or rash of shoulder.
- Skin (Right and Left): no open wound of shoulder.
- Skin (Right and Left): no lesion of shoulder.

Procedures and Supplies:

- Electrocardiogram - 12 Lead
64 beats per minute, regular rate, sinus rhythm, normal axis.
Code(s): 93000
Ordered 11/03/2024 09:23 by Randel, Mary
Completed 11/03/2024 09:54 by Randel, Mary
Reviewed 11/03/2024 09:54 by Randel, Mary

X-Rays:

- Study:
Shoulder 2 or more views

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Transcription

Code(s): 73030-LT

Shielding:

Transport: walk

Ordered: 11/03/2024 09:22 by Randel, Mary

Completed: Pending

Reading: Pending

Radiologist Impression: FINAL REPORT LEFT SHOULDER FILMS COMPARISON: None FINDINGS: 2 views of the left shoulder was/were obtained. There is no acute fracture. Soft tissues are unremarkable. There is mild degenerative arthritis of the shoulder and acromioclavicular joints. There is mild calcific tendinitis of the rotator cuff. Bones are normally mineralized. **IMPRESSION:** No acute bony abnormality. If pain persists or occult fracture remains clinically suspected, then delayed radiographs in 7-10 days may be of benefit. Electronically signed by: David Zamos M.D. on 11/03/2024 11:09:13 Electronically Signed by ZAMOS, DAVID on 11/03/2024 11:09:44.

Over Read Generated: 11/03/2024 11:09 by Teleradiologist Specialist

Over Read Received: 11/03/2024 11:09

Over Read Reviewed: 11/03/2024 11:27 by Randel, Mary

Diagnoses:

- Pain in left shoulder (M25.512)

Medication Orders:

- Prescribed: ketorolac 10 mg tablet; Take 1 Tablet (oral) 4 times per day for 5 days TAKE WITH FOOD; Total Qty: 20 (twenty) Tablet; 0 refill(s); Substitutions allowed; Earliest Fill Date: 11/03/2024
ePrescribed at 10:12 AM on 11/03/2024 by Mary Randel, NP
Prescription sent to Walgreens Drug Store #02363 (P: 256-895-9326 F: 256-895-9879) 7813 HIGHWAY 72 W, MADISON, AL, 357589559

Plan:

- Please return to the clinic in 3 day(s) if not better. Call or return to this clinic sooner if your condition worsens or if you have any concerns.
- Patient Off work and may return on 11/5/2024.
- DISCHARGE- Drink plenty of fluids. Tylenol every 4-6 hours as needed and/or ibuprofen every 6-8 hours as needed, over the counter for pain or fever. If your condition worsens, we recommend that you receive another evaluation at the ER immediately.

RICE- Rest and ice.

ONGOING S/S OR WORSENING/SEVERE S/S- SEEK ER CARE AS DISCUSSED ASAP

FOLLOW UP WITH ORTHO FOR ONGOING SHOULDER PAIN

Visit discharged at 11/3/2024 10:16:29 AM by MARY ANN RANDEL, NP

Signed electronically by MARY ANN RANDEL, NP on 11/3/2024 11:31:04 AM

Reviewed
11/12/24
J. Bronson
CRNP

Patient: PORTIA BRONSON, Sex: F
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Patient Clinical Summary

Log# 5728172 (Room# RM 7)

You were seen at AMERICAN FAMILY CARE INC (MADISON) on Sunday, November 3, 2024.

Your Diagnosis for today's visit is:

- 1. Pain in left shoulder

You have been Prescribed the following medications. Please take as instructed.

Medication Orders:

- Prescribed: ketorolac 10 mg tablet; Take 1 Tablet (oral) 4 times per day for 5 days TAKE WITH FOOD; Total Qty: 20 (twenty) Tablet; 0 refill(s); Substitutions allowed; Earliest Fill Date: 11/03/2024
ePrescribed at 10:12 AM on 11/03/2024 by Mary Randel, NP
Prescription sent to Walgreens Drug Store #02363 (P: 256-895-9326 F: 256-895-9879) 7813 HIGHWAY 72 W, MADISON, AL, 357589559

Recommendations/Plan:

- Please return to the clinic in 3 day(s) if not better. Call or return to this clinic sooner if your condition worsens or if you have any concerns.
- Patient Off work and may return on 11/5/2024.
- DISCHARGE- Drink plenty of fluids. Tylenol every 4-6 hours as needed and/or ibuprofen every 6-8 hours as needed, over the counter for pain or fever. If your condition worsens, we recommend that you receive another evaluation at the ER immediately.

RICE- Rest and ice.

ONGOING S/S OR WORSENING/SEVERE S/S- SEEK ER CARE AS DISCUSSED ASAP

FOLLOW UP WITH ORTHO FOR ONGOING SHOULDER PAIN

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Madison, AL 35758-8749
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Patient Clinical Summary

Your Vital Signs recorded during this visit were:

- 08:57 AM (11/03/2024)
Temperature: 97.7 °F (Temporal), Pulse: 74 BPM, BP: 111/79 (Arm [R]), Respirations: 18/min, O2 Saturation: 97%, O2 Delivery: RA,
Weight: 320 LBS, Height/Length: 5' 6", BMI: 51.6, Pregnant: No, Breastfeeding: No
First entered 11/03/2024 08:57 by McDaniel, Bailey
Last edited 11/03/2024 08:59 by McDaniel, Bailey

Procedures performed during visit:

- Electrocardiogram - 12 Lead
64 beats per minute, regular rate, sinus rhythm, normal axis.
Ordered 11/03/2024 09:23 by Randel, Mary
Completed 11/03/2024 09:54 by Randel, Mary
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X-Rays performed during visit:

- Study:
Shoulder 2 or more views
Shielding:
Transport: walk
Ordered: 11/03/2024 09:22 by Randel, Mary
Completed: Pending
Reading: Pending
Radiologist Impression: FINAL REPORTLEFT SHOULDER FILMSCOMPARISON: NoneFINDINGS:2 views of the left shoulder was/were obtained. There is no acute fracture. Soft tissues are unremarkable. There is mild degenerative arthritis of the shoulder and acromioclavicular joints. There is mild calcific tendinitis of the rotator cuff. Bones are normally mineralized.IMPRESSON:No acute bony abnormalityIf pain persists or occult fracture remains clinically suspected, then delayed radiographs in 7-10 days may be of benefit.Electronically signed by: David Zamos M.D. on 11/03/2024 11:09:13Electronically Signed by ZAMOS, DAVID on 11/03/2024 11:09:44.
Over Read Generated: 11/03/2024 11:09 by Teleradiologist Specialist
Over Read Received: 11/03/2024 11:09
Over Read Reviewed: 11/03/2024 11:27 by Randel, Mary

Thank you for allowing us to serve you today.

Please call this clinic at 256-562-0850 if your condition changes, or you have any concerns.

Visit discharged at 11/3/2024 10:16:29 AM by MARY ANN RANDEL, NP

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Code Summary

Complexity of Medical Decision Making Documentation & Code Summary

Type	Code	Description
E/M	99203	Suggested E/M = 99203 using 2021 guidelines MDM=Low Complexity (DX=Low; Risk=Mod; DR=N/A)

Presenting Problem: No Problem Associated

Diagnosis ICD10 M25.512 Pain in left shoulder
(Dx/Prob Morbidity Threat=Low; Illness, Acute, Continued illness/symptoms unlikely)

Medical Decision Making

Visit type: 99203 - Office Visit Level 3 (New Patient)

Risk (highest option considered): Moderate

Data Reviewed: N/A
0 unique test(s) ordered

Procedure Summary

Type	Qty	Code	Description
CPT		93000	Electrocardiogram - 12 Lead - Electrocardiogram, routine ECG with at least 12 leads; with interpretation and report
XRAY		73030-LT	Shoulder 2 or more views

Signed electronically by MARY ANN RANDEL, NP on 11/3/2024 11:31:04 AM

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X-Ray Over Read Report 1

X-Ray Order Information:

Shoulder 2 or more views
CPT Code: 73030 (LT)
Date Order Was Sent: 11/03/2024 09:22:57
Placer Order Number: 404170180

Additional Patient Information:

DOB: 06/16/1983
Gender: F
Clinic Patient Number: 5727441

Ordering Physician:

Randel, Mary

Report Status: Final

Facility: MADISON
Radiologist: N/A
Accession Number: 404170180
Over Read Generated: 11/03/2024 11:09:45
Over Read Received: 11/03/2024 11:09:45
Over Read Reviewed: 11/03/2024 11:27:06

Over Read Review Notes: *Not yet specified*

Over Read not yet received.

Impression:

FINAL REPORT

LEFT SHOULDER FILMS

COMPARISON: None

FINDINGS:

2 views of the left shoulder was/were obtained. There is no acute fracture. Soft tissues are unremarkable. There is mild degenerative arthritis of the shoulder and acromioclavicular joints. There is mild calcific tendinitis of the rotator cuff. Bones are normally mineralized.

IMPRESSION:

No acute bony abnormality

If pain persists or occult fracture remains clinically suspected, then delayed radiographs in 7-10 days may be of benefit.

Electronically signed by: David Zamos M.D. on 11/03/2024 11:09:13

Electronically Signed by ZAMOS, DAVID on 11/03/2024 11:09:44.



American Family Care
7559 Hwy 72 West
Madison, AL 35758
256-562-0850

Patient name:	BRONSON, PORTIA	DOB:	6/16/83
Study Date:	Nov 3, 2024 9:54:06 AM CST	Gender:	F
Body Part:	upper limb	Accession:	404170180
Description:	SHOULDER 2 OR MORE VIEWS	Patient MRN:	X5727441
Modality:	DXSD	Ref Phys:	RANDEL MARY

HISTORY/ COMPARISON:

LEFT SHOULDER FILMS

COMPARISON: None

FINDINGS:

2 views of the left shoulder was/were obtained. There is no acute fracture. Soft tissues are unremarkable. There is mild degenerative arthritis of the shoulder and acromioclavicular joints. There is mild calcific tendinitis of the rotator cuff. Bones are normally mineralized.

IMPRESSION:

No acute bony abnormality

If pain persists or occult fracture remains clinically suspected, then delayed radiographs in 7-10 days may be of benefit.

*Thank you.**Please contact me with any questions or additional information.*

Electronically signed by:

David Zamos M.D.

Note: This report describes relevant significant findings, based on the clinical setting and information provided. Further details, consultation or follow-up imaging may be obtained as clinically indicated.

Nov 3, 2024 11:09:13 AM CST