



Montgomery Cancer Center

FACSIMILE TRANSMITTAL SHEET

To: Lindsey Barton

Pages: 5

Fax: 3342443396

Date Sent: 2023-05-04

Subject: Note: Latarchia Green from Susmitha Nimmagadda

THE DOCUMENTS ACCOMPANYING THIS TRANSMISSION MAY CONTAIN CONFIDENTIAL HEALTH INFORMATION THAT IS LEGALLY PROTECTED. AS THE RECIPIENT OF THIS TRANSMISSION, YOU ARE OBLIGATED TO MAINTAIN IT IN A SAFE, SECURE AND CONFIDENTIAL MANNER.

This fax is intended only for the use of the individual or entity named above and may contain information that is privileged and confidential. Unauthorized re-disclosure or a failure to maintain the confidentiality of the information contained herein could subject you to penalties under state and federal law. If the reader of this message is not the intended recipient, or the employee or agent responsible to deliver it to the intended recipient, the reader is hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone.

**4145 CARMICHAEL ROAD
MONTGOMERY, ALABAMA 36106
PHONE: (334) 273-7000
FAX: (334) 260-2011**

Consult
May 04, 2023

Patient: Green, Latarchia DOB: Aug 21, 1975 Acct #: 000349823

Author: Susmitha Nimmagadda, M.D.

Date: May 04, 2023

CONSULTATION/NEW PATIENT
MONTGOMERY CANCER CENTER
4145 Carmichael Rd. ~ Montgomery, AL 36106 ~ 334-273-7000
Susmitha Nimmagadda, M.D.

PATIENT NAME: Latarchia Green **DOB:** Aug 21, 1975 **ACCOUNT#:** 000349823 **DATE:** May 04, 2023

REFERRING PHYSICIAN: Lindsey Barton

REASON FOR REFERRAL: Thrombocytosis

CHIEF COMPLAINT: I am here to see you because of my blood counts

HPI: Latarchia Green is a 47-year-old African-American woman who presents to the clinic at the request of her PCP for evaluation of her thrombocytosis. She mentions to have had a history of previous iron deficiency anemia with her recollection of thrombocytosis related to the same. Has had a history of endometriosis and subsequently underwent a hysterectomy in 2014. Denies any major weight loss surgeries. Denies any visible GI/GU sources of blood loss.

PAST MEDICAL HISTORY:

1. History of iron deficiency anemia
2. Prediabetes
3. Hypertension
4. Obesity
5. S/p a hysterectomy in 2014
6. S/p right axillary lipoma removal 1994
7. S/p left femur repair in 2011

SURGICAL HISTORY: Hysterectomy in 2014

Breast Biopsy in 2014

Left Femur Repair in 2011

C-Section in 1996

Removal of Lipoma Right Axillary in 1994

FAMILY HISTORY:

Father living with a history of diabetes. Mother deceased at the age of 67 secondary to coronary artery disease. She had had a diagnosis of breast cancer in her late 40s and was a patient of Dr. Keith Thompson here at the cancer center. Denies any family history of other malignancies.

SOCIAL HISTORY:

Single, has 3 adult children, works at AUM in the home, at FedEx and also works as a sitter for the patient a few days of the week. Social alcohol consumption. Denies history of smoking or recreational drug use.

ALLERGIES: Adhesive Tape

MEDICATIONS: amLODIPine Besylate (5 mg) Tablet Oral daily
metFORMIN HCl ER Suspension Reconstituted ER Oral daily
Multivitamin Tablet Oral daily

Electronically Signed By Nimmagadda, Susmitha on 5/4/2023 09:45:14

Consult
May 04, 2023

Patient: Green, Latarchia DOB: Aug 21, 1975 Acct #: 000349823

DISTRESS SCREENING:

Results reviewed with supportive care referrals as indicated.

PAIN ASSESSMENT: Previous Pain Scale (over past 24 hours) - None (0)

Present pain rating (0-10) - 0

Acceptable pain level (0-10) - 0

REVIEW OF SYSTEMS: 14 point review of systems pertinent positives include exertional shortness of breath remainder Review of systems negative unless specifically noted in the HPI.

VITALS: Performed on May 04, 2023 08:46: Ht - 60 in, Wt - 250.0 lbs, BSA - 2.19 sq.m, BMI - 48.83 (HIGH), T - 97.5 F (LOW), P - 52 /min (LOW), R - 16 /min, BP - 140/70 mm(hg), and O2 Sat - 100 %.

PHYSICAL EXAMINATION:

GENERAL: Petite, obese, African-American woman, who appears her stated age, ECOG PS of 1-2. Alert and oriented in no acute distress. Vital signs as per flow sheet.

HEAD: No alopecia. Non-traumatic.

EYES: PERLA, EOMI, No Pallor, No Icterus.

EARS, NOSE, MOUTH, THROAT: Mucosa is moist, No ulcers, No mucositis, No thrush.

NECK: Supple without masses. Symmetrical. No thyromegaly.

LYMPHATICS: No lymphadenopathy.

CARDIAC: Regular rate and rhythm. No murmurs.

RESPIRATORY: Clear to auscultation bilaterally.

GI: Soft, non-tender, non-distended, bowel sounds present. No masses or organomegaly noted.

EXTREMITIES: No clubbing, cyanosis or edema.

MUSCULOSKELETAL: Gait and station normal. Moves all extremities well.

CUTANEOUS: Warm and dry. No ecchymosis or rashes noted.

NEUROLOGIC: Without gross focal cranial nerve deficits.

LABS: Test performed on May 04, 2023 09:20

Ua Color	Yellow	Ua Appearance	Clear
Ua Specific Gravity	1.025	Ua pH	6.0
Ua Glucose	Negative	Ua Bilirubin	Negative
Ua Ketones	Negative	Ua Occult Blood	1+ (Small)
Ua Protein	Negative	Ua Urobilinogen	0.2 E.U./dL
Ua Nitrites	Negative	Ua Leukocyte Esterase	Negative

Test performed on May 04, 2023 08:19

WBC	7.1 X10 ³ /uL	RBC	5.35 X 10 ⁶ /uL
HGB	11.6 gm/dl	HCT	39.7 %
MCV	74 FL(LOW)	MCH	22 pg(LOW)
MCHC	29 gm/dl(LOW)	RDW	14.3 %
MPV	8.3 FL(LOW)	Platelet Count	457 X10 ³ /uL(HIGH)
Neutrophils (ANC)	3.74 X10 ³ /uL	Lymphocytes	2.4 X10 ³ /uL
Monocytes	0.7 X10 ³ /uL(HIGH)	Eosinophils	0.2 X10 ³ /uL
Basophils	0.0 X10 ³ /uL	Immature Grans	0.1 X10 ³ /uL
Neutrophil %	53 %	Lymphocyte %	33 %
Monocyte %	10 %	Eosinophil %	3 %
Basophils %	0 %	Immature Grans %	0.8 %

Electronically Signed ByNimmagadda, Susmitha on 5/4/202309:45:14

Consult
May 04, 2023

Patient: Green, Latarchia DOB: Aug 21, 1975 Acct #: 000349823

NRBC %	0.0 /100 WBC	NRBC (Abs)	0.0 X10 ⁻³ /uL
RBC	5.35 X 10 ⁻⁶ /uL	Retic Count %	1.94 %
Retic, Absolute	0.1038 X 10 ⁻⁶ /uL(HIGH)	Ret-He	23.7 pg(LOW)
Glucose	126 mg/dL(HIGH)	BUN	12 mg/dL
Creatinine	0.62 mg/dL	Cr Clearance (Est)	200.8100 mL/min(HIGH)
Sodium	137 mmol/L	Potassium	4.2 mmol/L
Chloride	108 mmol/L	CO2	28 mmol/L
Anion Gap	1 (LOW)	Calcium	9.7 mg/dL
Protein, Total	8.8 gm/dl(HIGH)	Albumin	3.7 gm/dl
Alkaline Phosphatase	95 u/l	ALT (SGPT)	23 u/l
AST (SGOT)	16.0 u/l	Bilirubin, Total	0.4 mg/dL
eGFR	110 mL/min/1.73m2	Ferritin	73.0 ng/mL
Folate, Serum	16.0 ng/mL	Iron	68 ug/dl
Iron Binding Capacity (TIBC)	285 ug/dl	% Iron Saturation	24 %
LDH (Total)	142 u/l	T4, Free	1.04 ng/dL
TSH	2.060 uIU/mL	Transferrin	203.00 mg/dL
Vitamin B12	467 pg/mL		

OTHER DIAGNOSTIC EVALUATIONS: Per the chart.

IMPRESSION/PLAN: 47-year-old African-American woman with

1. Thrombocytosis. Her iron studies from today are in the normal range ruling out iron deficiency associated thrombocytosis. Does not mostly reactive. Will consider short interval repeat assessment and if persistently abnormal lab will be recommended additional investigations for myeloproliferative neoplasm work-up. Clinically do not consistent with the same.
2. Microcytosis with normal hemoglobin parameters. Her iron parameters are in the normal range. This does suggest that she possibly has an underlying hemoglobinopathy. We will consider a short interval repeat assessment and recommended additional investigations as warranted in the future.
3. Family history of breast cancer in the late 40. Recommended for her to adhere with screening and be compliant.
4. Colon cancer screening. Given that she is a 45 years of age I have discussed with her about the now new screening guidelines of initiating colon cancer screening at the age of 45. She will discuss with her PCP and see if she would like to proceed with Cologuard or a colonoscopy.
5. Other comorbidities-chronic stable continue with current medical therapy.
6. Obesity encourage lifestyle changes.
7. Return to clinic in accordance to the schedule or earlier if warranted.

Susmitha Nimmagadda, MD

cc: Lindsey Barton

Reviewed
5/5/23
J. Barton, CRP

This dictation produced using voice recognition software.

Electronically Signed ByNimmagadda, Susmitha on 5/4/202309:45:14

Consult
May 04, 2023

Patient: Green, Latarchia DOB: Aug 21, 1975 Acct #: 000349823

Approved by <%Approved By%> on <%Approved / Signed Date%>, <%Approved / Signed Time%>