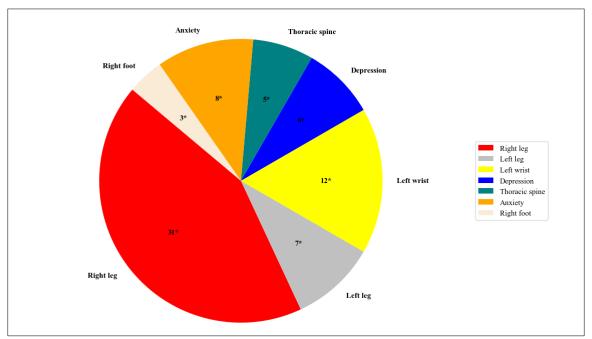
Case Capsule

Case Overview

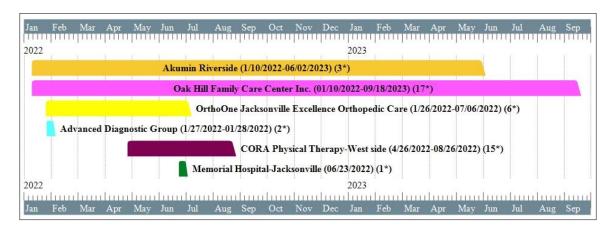
On 01/10/2022, Ms. McCrary slipped and fell in Publix while pushing a shopping cart and sustained injuries to her left wrist, right knee, and right foot. On 01/26/2022, she was evaluated by Fady El-Bahri, M.D., where she was diagnosed with right knee internal derangement, left wrist internal derangement and right ankle internal derangement. She was treated conservatively by physical therapy for right knee pain. On 06/27/2022, she underwent right ankle arthroscopy, abrasion chondroplasty of the ankle, removal of loose body, extensive excision of scar tissue and extensive synovectomy. On 07/04/2022, she went to ER of HCA Florida Orange Park Hospital for right foot pain where she was diagnosed with postoperative wound check and discharged to home with referral to Orthopedic surgeon. As on 08/26/2022, she was undergoing physical therapy for right ankle pain.

Treated Body Parts/Medical Conditions Chart



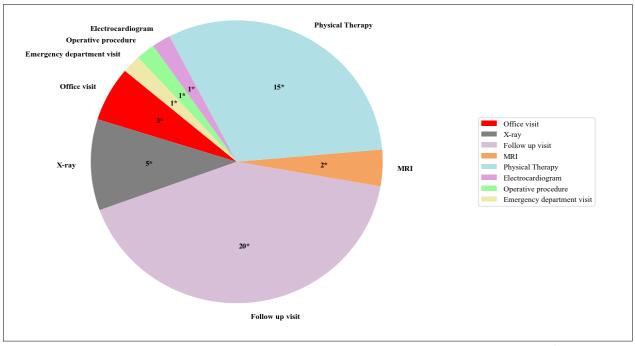
*No of times each parts/medical conditions treated

Treating Providers Timeline



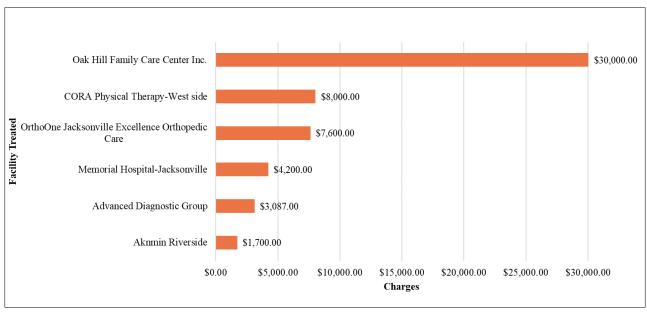
*No. of times treated

Medical Visit Chart



*No of Occurrences

Key Medical Expenses*



*If Medical Expense Summary Service requested

Injury Report

PARAMETER	DETAILS	PDF REF
Date of injury	01/10/2022	73
Related Injuries and	Past medical history: Idiopathic scoliosis	73
Medical Condition Before		
incident	Past surgical history: Unavailable	
Damages	Internal derangement, knee, right	74-75, 84-85,
Developed/Sustained as a	Internal Derangement, right ankle	81-82, 12, 24,
result of incident	Internal derangement left wrist	114, 117, 126
(diagnoses alone)	Contusion, knee, right	
	Contusion of right knee	
	Contusion, wrist, left	
	Wrist tendinitis, left	
	Ankle synovitis, right	
	• Ankle tendon tear	
	Pain in right ankle and joints of right foot	
	Pain of bilateral knee joints	
	Left knee pain	
	Pain in right ankle	
	Pain in left wrist	
	Pain in left leg	
	Right ankle sprain	
	Bruising from injury	
	Pedal edema	
Surgeries or procedures	Procedures: Unavailable	18-19
underwent as a result of		
incident	Surgeries:	
	06/27/2022:	
	Right ankle arthroscopy.	
	Abrasion chondroplasty of the ankle.	
	Removal of loose body.	
	Extensive excision of scar tissue	
	Extensive synovectomy.	
Postsurgical complications	Unavailable	
(infection, DVT, etc)		
Aggravation of pre-	Physician statement regarding aggravation of pre-existing conditions is	
existing conditions	unavailable for review	
(Physician or therapist's		
statement alone)		
Did patient return to work	As of 08/19/2023: Unemployed.	171
(Date and work status as		
per the last few		
visits/therapies)		
Disability (Physician or	Physician statement regarding disability is unavailable for review	
therapist's statement		
alone)		

Missing Medical Records

What Records are Needed	Hospital/ Medical Provider	Date/Time Period	Is Record Missing Confirmatory or Probable?	Hint/Clue that records are missing	Reference
X-ray of left wrist	Unknown	11/05/2021	confirmatory	Compared with the X-ray of left wrist dated 01/10/2022	105
X-ray of right knee	Unknown	09/09/2021	confirmatory	Compared with the X-ray of right knee dated 01/10/2022	106
Physical therapy evaluation	CORA Physical Therapy-Westside	02/08/2022	Confirmatory	Reviewed the physical therapy discharge summary	22-23
Physical therapy visits	CORA Physical Therapy-Westside	After 02/08/2022 and before 04/01/2022	Confirmatory	Reviewed the physical therapy discharge summary	22-23
Physical therapy re-evaluation	CORA Physical Therapy-Westside	04/01/2022 04/22/2022	Confirmatory	Reviewed the physical therapy discharge summary	22-23

Patient History

Past medical history: Elevated high blood pressure, Idiopathic scoliosis, depression, arthritis (PDF REF 73, 113)

Past surgical history: Appendectomy, gall bladder removal 2018 (PDF REF 16, 60)

Prior occupational history: Unavailable

Current occupational status: As on 02/07/2022 - Self-employed – Instacart Shopper – full time/modified; As of 09/18/2023: Unemployed (PDF REF 60, 171)

Family History: Hypertension, osteoporosis, scoliosis; Family history of breast cancer, colon cancer, ovarian cancer, osteoporosis (PDF REF 16, 181)

Social History: She is a never smoker and does not drink alcohol. (PDF REF 16)

Drug Allergy: *Unavailable*

Other Allergy: Latex – weal, rash and Adhesive tape – weal – rash (PDF REF 16)

Detailed Chronology

	Provider	Occurrence/Treatment	PDF REF
		Slip and fall – 01/10/2022	
01/10/2022	Oak Hill Family Care Center Inc.	Office visit for right knee, right ankle, left shin and left wrist complaints: Subjective: Patient reports slipped and fall while shopping at Publix	112-114, 186
	Liza Byatt, APRN.	103 rd today. Patient states she stepped on a banana peel and slide while still holding into her pushcart her legs split and forward she fell. She hurt her right knee, right ankle, left shin, and left wrist. No bruises and abrasions noted.	
		Review of systems:	
		Neck: Neck pain. Musculoskeletal: Right knee pain, right ankle pain, left shin, left wrist	
		pain from falling, chronic low back and upper back pain. Psychiatric: Positive for anxiety and depressive symptoms.	
		Objective:	
		Back: Scoliosis, upper and lower back tenderness. Extremities: Right knee and right ankle tenderness, left wrist tenderness, left shin tender to touch. Neuro: Thoracic scoliosis.	
		Assessment:	
		 Pain of bilateral knee joints Left knee pain 	
		Pain in right ankle	
		 Pain in left wrist Fall from other slipping, tripping, or stumbling Pain in left leg 	
		Plan:	
		X-ray of right ankle, right knee and left wrist.	
		Flexeril 10 mg. May apply cold compress to affected sites.	
		Prescription:	
		Cyclobenzaprine 10 mg	
		Related records: Patient's information.	
01/10/2022	Akumin Riverside	X-ray of left wrist:	105
		Ordering physician – Liza Byatt, APRN.	
	Shahir Aiad, M.D.	Indication: Left wrist pain since a fall today in Publix on 01/10/2022. No surgery. No trauma. Multiple studies same day.	
		Prior Studies: Radiograph of left wrist 11/05/2021.	

Date	Provider	Occurrence/Treatment	PDF REF
		*Reviewer's comment: X-ray of right knee dated 11/05/2021 is unavailable for review	
		unavallable for review	
0.4.44.0.42.0.2.2		Impression: Unremarkable exam	
01/10/2022	Akumin Riverside	X-ray of right knee: Clinical data: Right knee pain since a fall today. No surgery. Multiple	106
	Kiveiside	studies same day.	
	Shahir Aiad,		
	M.D.	Prior Studies: Radiograph of right knee 9/9/2021.	
		*Reviewer's comment: X-ray of right knee dated 09/09/2021 is	
		unavailable for review	
		Impression: Unremarkable exam	
01/10/2022	Akumin	X-ray of right ankle:	107
	Riverside	Clinical Data: Right ankle pain since a fall today in Publix on	
	C11	01/10/2022. No surgery. No trauma. Multiple studies same day.	
	Shahir Aiad, M.D.	Impression: No fracture seen	
01/14/2022	Oak Hill	Follow up visit for X-ray results:	115-117
0 - 7 - 7 - 7 - 0	Family Care	Review of systems: Patient reports a fall.	
	Center Inc.	Musculoskeletal: Patient reports a fall that affected the patient's right	
	Liza Byatt,	ankle, right knee, left shin, and left wrist.	
	APRN	Objective:	
		Extremities: Patient reports tenderness with palpation in the ankle and	
		muscles surrounding the right ankle, right knee and left wrist. The left	
		shin has a large bruise.	
		Assessment:	
		 Ankle sprain 	
		 Bruising from injury 	
		Exercise counseling	
		Dietary counselingPainful	
		• railliui	
		Plan:	
		Patient had a fall on Mondary at Publix, the X-rays were unremarkable,	
		but there is considerable bruising and tenderness with palpation. Patient likely has a soft tissue injury.	
		incry has a soft dissue injury.	
		Follow up in one month or as needed.	
		Prescription:	
		Cyclobenzaprine 10 mg.	
0.4.4.7.17		Ibuprofen 800 mg.	110 :
01/19/2022	Oak Hill	Follow up visit for right knee pain: Subjective: Deticat how to device follow up status post alin and fall at	118-120
	Family Care Center Inc.	Subjective: Patient here today for follow up status post slip and fall at Publix 103 rd on 01/10/2022. Today she reports worsening pain of her	
	Contor Inc.	right knee, tender and feels swollen on palpation affecting her mobility.	

Date	Provider	Occurrence/Treatment	PDF REF
	Liza Byatt, APRN.	She states pain is worse during stretching and bending especially when she is driving. She takes NSAIDs as needed but only giving her mild relief. Her right knee X-ray done on 01/10/2022 was unremarkable.	
		Review of systems: Neck: Neck pain. Musculoskeletal: Right knee pain, right ankle pain, left shin pain and left wrist pain, lower back pain, scoliosis. Psychological: Positive for depression and trouble sleeping.	
		Objective: Back: Lower back tenderness. Extremities: Right knee decreased range of motion,	
		Assessment: • Falling injury • Pain of bilateral knee joints • Pain in right ankle • Pain in left wrist	
		Plan: Refer to Orthopedic regarding right knee pain and swelling for 9 days related to slip and fall.	
		Prescription: Methocarbamol 750 mg.	
01/26/2022	OrthoOne Jacksonville Excellence Orthopedic Care Fady El-Bahri, M.D., Jennifer Scott (Credential unavailable)	Office visit for bilateral knee and left wrist pain: Patient presents with bilateral knee pain following a fall on 1/10/2022. She states that she has a history of a bilateral knee injury when she fell six year ago landing on her knees. She states that her right knee was immobilized for 3-6 weeks and her symptoms resolved over time. On 1/10/22 she slipped and fell in Publix while pushing a shopping cart. She states that she landed on her right knee and hit her left shin on the frame of the cart. She complains of right knee pain with any applied pressure, pain with squatting, painful popping and clicking, swelling, and feeling like there is fluid in her knee. She states that she has been putting more weight on her left knee to compensate for her right knee pain. Is new to our office and presents with left wrist pain following a slip and fall on 1/10/22. She states that when she slipped in Publix she was holding onto a shopping cart and her left wrist was hyperextended. She complains of swelling, pain with weight bearing, and weakness of her grip. She had X-rays performed and she has no fractures. To help manage her symptoms she purchased a left wrist brace. Secondary Complaints include: Complains of right ankle pain. She	73-76, 91
		complains of pain with weight bearing, swelling, and pain when driving.	
		Physical examination: Wrist:	

Date	Provider	Occurrence/Treatment	PDF REF
		Left wrist range of motion: Grossly intact and with pain. Inspection: Left wrist: Tenderness to palpation first dorsal compartment, swelling, tenderness to palpation over distal ulna and tenderness to palpation over TFCC and tenderness to palpation over flexor carpi ulnaris. Positive tenderness to palpation over extensor carpi ulnaris.	
		Knee: Right knee range of motion: With pain. Inspection: Right Knee: Lateral joint line tenderness, medial joint line tenderness, patellar tendon tenderness, and swelling positive tenderness to palpation over the quadriceps tendon.	
		Special test: Right Knee: McMurray Test: Positive medial and McMurray Test: positive lateral	
		Right Ankle ROM: Grossly intact and with pain	
		Inspection: Right Ankle: Swelling positive tenderness to palpation over the anterolateral aspect	
		Additional exam findings: Antalgic gait medial joint tenderness lateral joint tenderness patellar tendon, tenderness pain with supination pain with wrist flexion pain with pronation wrist tenderness to palpation pain with wrist extension antalgic gait ankle tenderness.	
		Impression and plan: Internal derangement, knee, right Unspecified interna) derangement of right knee distributed on the right knee joint. Pain intensity 7/10 pain. Plan – RICE. Rest the affected area for 24-48 hours. RICE – ice, apply ice to the affected area for 20 minutes. Place a towel or cloth between the skin and ice. If continued icing is needed remove ice for 20 minutes then reapply. RICE- compression: Keep compression wrap in place for 24-48 hours. If the compressive dressing feels too tight, then loosen as needed.	
		Plan – Order MRI – knee. Right MRI without contrast to rule out a tear. Plan: PT prescription- Meniscus for right knee internal derangement. Right Knee: Weight bearing as tolerated. Recommend frequency of 3 times per week for 4 weeks. Therapeutic Exercises: All exercises prn per therapist, Gait/balance training, Home program exercises, and Strengthening exercises. Manual Therapy: All manual exercises prn per therapist. Modalities: All modalities prn per therapist.	

Date	Provider	Occurrence/Treatment	PDF REF
		Internal derangement left wrist: Continue taking Ibuprofen and continue wearing a wrist brace. Order MRI – wrist. RICE.	
		Internal Derangement, Right Ankle: RICE. RICE: Rest: Rest the affected area for 24-48 hours. RICE: Ice: Apply ice to the affected area for 20 minutes. Place a towel or cloth between the skin and ice. If continued icing is needed remove ice for 20 minutes then reapply. RICE: Compression: Keep compression wrap in place for 24-48 hours. If the compressive dressing feels too tight, then loosen as needed. RICE: Elevation: Elevate the affected extremity above your heart. Order – MRI of right ankle without contrast.	
		Follow up in 3 weeks for: Imaging results	
01/27/2022	Advanced Diagnostic Group	MRI of right ankle without contrast: History: Slip and fall injury dated 01/10/2022. Pain. No previous studies available for comparison.	109-110
	High Field MRI and X- ray Scott Wiedenmann, M.D.,	 Findings: Soft tissue edema of the ankle and hindfoot. Effusions of the ankle joint and subtalar joint. Localized hematoma the soft tissues anterolateral to the ankle joint measuring 18 mm in height, 13 mm in AP diameter, and 7 mm in transverse diameter. No widening of the ankle mortise. The talofibular ligaments are intact. The peroneus, tibialis, Achilles, and plantar fascia tendons are intact. No bone marrow edema or cortical defect. 	
		Impression:	
		• Traumatic strain or contusion of the ankle presenting as joint effusions, soft tissue edema, and the hematoma anterolateral to the ankle joint.	
		• Given the patient's history and findings, it is medically probable that these imaging findings are related to the injuries dated 01/10/2022.	
01/28/2022	Advanced Diagnostic Group	MRI of left wrist without contrast: History: Slip and fall injury dated 01/10/2022. Pain. No previous studies available for comparison.	108
	High Field MRI and X- ray Scott Wiedenmann, M.D.,	 Findings: Effusions of the radiocarpal joint, radial ulnar joint, intercarpal joints, and carpometacarpal joints. No bone marrow edema, therefore, no evidence of occult fracture, bone bruise, stress reaction, or osteonecrosis. The intercarpal ligaments are intact. The triangular fibrocartilage is intact. The flexor tendons and extensor tendons are intact. 	
		Impression:	

Date	Provider	Occurrence/Treatment	PDF REF
		Traumatic strain or contusion of the wrist presenting as joint effusions. Given the patient's history and findings, it is medically probable that this imaging finding is related to the injuries dated 01/10/2022.	
02/05/2022	Oak Hill	Work status report:	184
02/03/2022	Family Care	Disability:	101
		When were your first unable to work: 01/11/2022.	
	Self-attested	If not working, give reason: Have not returned, going through physical	
	3	therapy.	
		When do you except to return to work: 02/28/2022.	
02/08/2022	Oak Hill	Follow up visit for left wrist, right knee, and right ankle pain:	121-123, 185
	Family Care	Subjective:	
	Center Inc.	Patient is here today to discuss MRI results of left wrist, right knee and	
		right ankle. Patient had MRI done ordered by Bahri's Orthopedic but	
	Liza Byatt,	results are not available yet for review. Patient continues to have	
	APRN.	worsening left wrist pain, right knee and right ankle pain that even worse	
		when she is driving. Patient reports slipped and fall while shopping at	
		Publix 103rd on 01/10/2022. Patient states she stepped on a banana peel	
		and slide while still holding into her pushcart her legs split and forward	
		she fell. She hurt her right knee, right ankle, left shin and left wrist.	
		X-ray was unremarkable.	
		Review of systems:	
		Neck: Neck pain.	
		Musculoskeletal: Right knee pain, right ankle pain, left shin, left wrist	
		pain from falling, chronic low back and upper back pain.	
		Psychiatric: Positive for anxiety and depressive symptoms.	
		Objective:	
		Back: Lower back tenderness.	
		Extremities: Left wrist, right knee and right ankle tenderness, decrease	
		range of motion.	
		Assessment:	
		Falling injury	
		• Ankle sprain	
		Pain in left wrist	
		Pain in right ankle	
		Pain in bilateral knee joints	
		Plan:	
		Occupational forms physician statement signed.	
		Followup with orthopedics as scheduled.	
		Refer to PT for hand therapy.	
		Prescription:	
		Buspirone HCL 15 mg.	
		Related records: Assesment.	
	I	neimen recorns, rissesment.	1

Date	Provider	Occurrence/Treatment	PDF REF
Date 02/23/2022	OrthoOne Jacksonville Excellence Orthopedic Care Fady El-Bahri, M.D., Jennifer Scott (Credential unavailable)	Follow-up visit for right ankle injury and left wrist injury: Follow-up ankle injury, Right evaluated on 01/26/2022 Follow-up my wrist injury, Left evaluated on 01/26/2022 Follow-up wrist injury, Left evaluated on 01/26/2022 Follow-up wrist injury, Left evaluated on 01/26/2022 Follow-up internal Derangement, Knee, Right evaluated on 01/26/2022 Internal derangement of the right ankle joint - She was seen on 01/26/2022 at which time a MRI of the right ankle was ordered and presents today to discuss her imaging results. She complains of swelling, pain with range of motion, but no pain with standing. She is attending physical therapy at Cora four times per week and she feels it has helped to reduce her symptoms Internal derangement of the left wrist joint - She was seen on 01/26/2022, at which time a MRI of the left wrist was ordered and presents today to discuss her imaging results. She complains of swelling and pain with gripping objects. She is attending physical therapy at Cora four times per week and she feels it has helped to reduce her symptoms. *Reviewer's comment: Physical therapy record of Cora Physical Therapy prior to 02/23/2022 if any are unavailable for review Internal derangement of the right knee - She was seen on 01/26/2022, at which time a MRI of the right knee was ordered and presents today to discuss her imaging results. She complains ot knee pain, and states she is attending physical therapy at Cora four times per week. She states that the therapy has helped to reduce her symptoms. Physical examination: Left Wrist: Left Wrist ROM: grossly intact and with pain Inspection: Left Wrist: Tenderness to palpation 1st dorsal compartment, swelling. Tenderness to palpation over distal ulna, and TTP over TFCC and positive tenderness to palpation over flexor carpi ulnaris. Positive tenderness to palpation over the quadriceps tendon Special: Right Knee: Lateral joint line tenderness, medial joint line tenderness, patellar tendon tenderness, and swelling and positive tenderness to palpation over the q	83-85, 93

Date	Provider	Occurrence/Treatment	PDF REF
		 Contusion, knee, right - Contusion of right knee, Initial encounter – distributed on the right knee. Contusion of right knee, Initial encounter distributed on the right knee. Epsom salt baths. Continue physical therapy and use Diclofenac gel. Contusion, wrist, left - Epsom salt baths. Continue physical therapy and use Diclofenac gel. Contusion, ankle, right - Epsom salt baths. Continue physical therapy and use Diclofenac gel. 	
03/08/2022	Oak Hill Family Care Center Inc. Liza Byatt, APRN	Follow-up in four weeks. Follow up visit for swelling of both legs: Subjective: Here today for follow-up status post slip and fall. Patient states her pain has improved but still noticing off and on swelling of both legs. She is currently doing physical therapy (PT) 4 times per week at Bahri Orthopedics and has appt with Dr. Bahri on 03/23/2022. X-ray was unremarkable. MRI done at Bahri Ortho. Review of systems: Musculoskeletal: Bilateral lower extremity swelling, right knee pain, right ankle pain, left shin, left wrist pain from falling, chronic low back and upper back pain. Psychiatric: Positive for anxiety and depressive symptoms. Objective: Same as 02/08/2022. Assessment: Pedal edema Falling injury Ankle sprain Fall from other slipping, tripping, or stumbling Pain in left wrist Pain of bilateral knee joints Left knee pain Pain in right ankle Plan: Advised to elevate both legs when at rest. Continue physical therapy 4 times per week. Follow up with Dr. Bahri on 03/23/2022.	124-126
03/08/2022	Oak Hill Family Care Center Inc. Liza Byatt, APRN	Office visit for sore throat, cough, pedal edema, dysphagia	127-129

Date	Provider	Occurrence/Treatment	PDF REF
Date 03/23/2022	Provider OrthoOne Jacksonville Excellence Orthopedic Care Fady El-Bahri, M.D., Jennifer Scott (Credential unavailable)	Follow-up visit for right ankle injury and left wrist injury: Right ankle contusion-She states that she has been attending physical therapy 4 times per week, and has four visits remaining. She states that her symptoms are improving and the therapy is helping. She complains of pain with range of motion, pain along anterolateral aspect of her ankle, and her Achilles tendon. She states she is taking Ibuprofen to help manage her symptoms Left wrist contusion - She states that she has been attending physical therapy 4 times per week, and has four visits remaining. She states that her symptoms are improving and the therapy is helping. She complains of pain that radiates into her pinky finger and pain along the lateral aspect of her wrist. She is currently taking Ibuprofen to manage her symptoms. Right knee contusion - She states that she has been attending physical therapy 4 times per week, and has four visits remaining. She states that her symptoms are improving and the therapy is helping. She is able to drive for longer periods of time without pain. She complains of occasional pain in her knee and she is taking Ibuprofen to help manage her symptoms. Physical examination: Left wrist range of motion: Flexion 65 degrees and extension 70 degrees. Ulnar deviation with pain and 45 degrees Pronation - 80 degrees Supination - 80 degrees Left Wrist: Tenderness to palpation over TFCC (triangular fibrocartilage complex) positive tenderness to palpation over extensor carpi ulnaris Right Knee ROM: With pain Inspection: Right Knee: Lateral joint line tenderness, medial joint line tenderness, patellar tendon tenderness, and swelling and positive tenderness to palpation over the quadriceps tendon Special: Right Knee: McMurray Test: Positive medial and McMurray Test:	PDF REF 80-82
		-	
		 Assessment and plan: Contusion of right knee, initial encounter - distributed on the right knee and right knee joint. Associated diagnosis: Knee Pain. Epsom salt baths Continue physical therapy. Use Diclofenac gel. Continue physical therapy. A prescription for Diclofenac gel 3% was e-prescribed today, apply as directed. A Medrol dose pack as was e-prescribed today, take as directed. 	

Date	Provider	Occurrence/Treatment	PDF REF
		 Wrist tendinitis, left-Other synovitis and tenosynovitis left hand - located on the left wrist joint. Continue physical therapy. A prescription for Diclofenac gel 3% was e-prescribed today, apply as directed. A Medrol dose pack as was e-prescribed today, take as directed. Ankle Synovitis, Right Other synovitis and tenosynovitis, right ankle, and foot - located on the right ankle joint. A prescription for Diclofenac gel 3% was e-prescribed today, apply as directed. A Medrol dose pack as was e- 	
04/18/2022	Express Medical Experts	prescribed today, take as directed. Follow-up in four weeks. Laboratory report	224
04/19/2022	Oak Hill Family Care Center Inc. Liza Byatt, APRN.	Follow up visit for swelling of both legs: Subjective: Here today for follow-up status post slip and fall. Patient states her pain has improved but still noticing off and on swelling of both legs. She is currently doing PT 4 times per week at Bahri Orthopedics and has appointment with Dr in the next few weeks. Review of systems: Same as 03/08/2022. Objective: Back: Lower back tenderness. Extremities: Positive for trace pedal edema, left wrist, right knee and right ankle tenderness, decrease range of motion. Assessment: Pain in right ankle Pain in left wrist Pain of bilateral knee joints Left knee pain Fall from other slipping, stripping, or stumbling Ankle sprain Bruising from injury Plan: Continue physical therapy previously ordered. Continue to follow up with orthopedics as scheduled. Dall precaution. May take NSAIDs as needed for pain.	133-135
04/19/2022	Oak Hill Family Care Center Inc. Liza Byatt, APRN	Follow up visit for sore throat, dysphagia, nasal congestion, red eye, diarrhea, abdominal pain, and cough	130-132
04/26/2022	CORA Physical	Physical therapy discharge summary for right knee pain: Certification period: 04/08/2022-05/06/2022.	22-23

Date	Provider		PDF REF							
	Therapy- Westside	Evaluation 02/08/								
	Kristi Link,	Medical/treatmen								
	PT	Patient attended 10	Patient attended 10 visits from evaluation.							
		Patient cancelled/r								
	Fady Bahri, M.D.	Discharge Criteri Should the patient			cribed the					
		prognosis is good			.					
		Patient is independent Patient is compliant								
		r attent is compilar	it with Home Exer	cise riogram.						
		Motion AROM		Re-evaluation	Re-evaluation					
		(indicates with pain	evaluation (02/08/2022)	(04/01/2022)	(04/22/2022)					
		Knee flexion	Left 135	left 140 degrees	left 130 degrees					
			degrees, right 110 degrees	and right 140 degrees	and right 135 degrees					
		Knee extension	-	-	Left 0 and right					
		AX: CI	Y 0 115	X 0 115	0					
		Hip flexion	Left 115 degrees and	Left 115 degrees and	Left 110 degrees and					
			right 105	right 115	right 110					
		Ankle	degrees Left 15 degrees	degrees Left 20 degrees	degrees					
		dorsiflexion	and right 10	and right 15	-					
			degrees	degrees						
		Ankle plantarflexion	Left 45 degrees and right 30	Left 45 degrees and right 40	-					
			degrees	degrees						
		Muscle motion/strengt	Initial evaluation	Re-evaluation (04/01/2022)	Re-evaluation (04/22/2022)					
		h	(02/08/2022)	(04/01/2022)	(04/22/2022)					
		Knee flexion	left 5/5		left 5/5, right					
		Knee extension	left 5/5	4+/5	4+/5 left 5/5, right					
					4+/5					
		Hip flexion	Left 5/5, right 2+/5	left 5/5, right 4+/5	left 5/5, right					
		Hip Extension	∠T/J	→ ⊤/ <i>J</i>	left 5/5, right					
		Hip Abduction	Left 5/5, right 3+/5		left 5/5, right					
		Hip Adduction	Left 5/5 right 3/5		left 5/5, right					
		*Reviewer's comm evaluation, 04/01/2 are unavailable fo	2022 and 04/08/20	apy evaluation date 22 and interim the						

Date	Provider	Occurrence/Treatment	PDF REF
Date 05/04/2022	Provider OrthoOne Jacksonville Excellence Orthopedic Care Fady El-Bahri, M.D., Jennifer Scott (Credential unavailable)	Follow-up visit for right ankle, left wrist injury and right knee pain: Right ankle contusion - Patient states that her symptoms are unchanged. She complains of swelling and increased pain with driving. She states that she has completed physical therapy and her insurance did not approve the prescribed Diclofenac gel. Left wrist contusion - She states that her symptoms are unchanged. She complains of swelling and continued pain after completing the Medrol dose pak. She states that she has completed physical therapy and her insurance did not approve the prescribed Diclofenac gel. Right knee contusion - She states that her symptoms are unchanged. She states that she has completed physical therapy and her insurance did not approve the prescribed Diclofenac gel. Physical examination: Left Wrist ROM: With pain Inspection: Left Wrist: TTP (Tenderness to palpation) over distal ulna and tenderness to palpation over TFCC and positive TTP (Tenderness to palpation) over flexor carpi ulnaris Left Hand: Strength: 2/5, normal muscle tone. Inspection: Right Knee: Swelling positive tenderness to palpation over quadriceps tendon Special: Right Knee: J sign: Positive Right Ankle ROM: Positive inversion/Eversion 10/10 Inspection; Right Ankle: Swelling and TTP (Tenderness to palpation) peroneal Additional Exam Findings: Ankle tenderness antalgic gait tenderness to palpation Assessment and plan: Ankle tendon tear, right: Order for surgery. Right ankle arthroscopy possible peroneal retinaculum repair. Procedure Location: Right ankle Contusion, knee, right - Epsom salt baths and ice application Wrist tendinitis, left - Epsom salt baths and ice application	PDF REF 11-13, 87-90, 173-177, 187- 189
		Follow-up in four weeks. Related records: Assessment.	
05/24/2022	Oak Hill	Follow up visit for swelling of both legs:	136-138
	Family Care Center Inc. Liza Byatt, APRN	Subjective: Right ankle arthroscopy peroneal retinaculum repair: Here today for followup status post slip and fall and for pre-op labs for right ankle arthroscopy. Patient states her pain has improved but still noticing off and on swelling of both legs. She is currently doing PT 4 times per week at Bahri Orthopedics and has appointment with Dr in the next few weeks.	
		Review of systems: Same as 03/08/2022.	

Date	Provider	Occurrence/Treatment	PDF REF
05/24/2022	Oak Hill Family Care Center Inc. Liza Byatt, APRN	Objective: Same as 04/19/2022. Assessment: Falling injury Pain in right ankle Pain of bilateral knee joints Pain in left wrist Sprain of right ankle, subsequent encounter Plan: Chest X-ray. Return to clinic 1 week for pre op clearance. Follow up visit for medication refill: Review of systems: Same as 03/08/2022. Objective: Same as 04/19/2022. Assessment: Idiopathic scoliosis Recurrent major depressive episodes, mild Thoracic back pain Generalized anxiety disorder Plan: Medication refill. Return to clinic in 3 months. Prescriptions: Escitalopram Oxalate 20 mg Buspirone HCL 15 mg Ibuprofen 800 mg.	139-141
05/25/2022	Express Medical Experts	Reviewer's comment: Case focus information alone captured in detail. Laboratory report	193-195
05/26/2022	Akumin Riverside Clifford Spohr, M.D.	 X-ray of chest: Clinical data: Preoperative. Non-smoker. Hypertension. Impression: Clear lungs with normal heart and pulmonary vasculature S-shaped scoliosis of the thoracolumbar spine 	213
06/08/2022	Oak Hill Family Care Center Inc. Liza Byatt, APRN.	Follow up visit for preoperative clearance for right ankle arthroscopy peroneal retinaculum repair: Subjective: Preop clearance for right ankle arthroscopy peroneal retinaculum repair. Review of systems: Same as 03/08/2022.	144-146

Date	Provider	Occurrence/Treatment	PDF REF
		Objective: Same as 04/19/2022.	
		Assessment: Preop examination Falling injury Sprain of right ankle, subsequent encounter Pedal edema Pain in left wrist Left knee pain Pain of bilateral knee joints	
		Plan: Electrocardiogram: Normal sinus rhythm.	
		Chest X-ray normal. Cleared for right knee arthroscopy.	
06/08/2022	Oak Hill Family Care	Electrocardiogram report: Sinus rhythm. Heart rate 83 bpm. Normal EKG.	190
	Provider unavailable		
06/27/2022	Memorial Hospital- Jacksonville	Operative report of right ankle surgery: Preoperative diagnosis: Right ankle internal derangement.	18-19
	Fady A El- Bahri, M.D. Lena Haddad. PA.	 Procedure performed: Right ankle arthroscopy. Abrasion chondroplasty of the ankle. Removal of loose body. Extensive excision of scar tissue Extensive synovectomy. 	
		Post Operative Diagnoses : Right ankle severe scar tissue. Chondromalacia grade 4 of the talus. Loose body. Extensive synovitis.	
		Anesthesia: General anesthesia.	
		Postprocedure plan: The patient awakened, taken to recovery-room in stable condition.	
06/29/2022	OrthoOne Jacksonville Excellence Orthopedic Care Fady El-Bahri, M.D.,	Follow-up visit for right ankle surgery: History of present illness: This is a 29 year old female who is status post right ankle arthroscopy that was performed on 6/26/22. She states that she is in a lot of pain and her pharmacy was not able to fill her pain prescription as they were out of Percocet. She states that she changed pharmacy's and was only allowed three days of pain medication instead of the prescribed 7 days. She states that the medication makes her feel nauseous, dizzy, and sleepy. It does not help to reduce her pain and she would like a different medication. She states that she changed her post op bandage and has continued to ambulated using crutches.	14-15

Date	Provider	Occurrence/Treatment	PDF REF
	Jennifer Scott (Credential unavailable)	Physical examination: Postoperative ankle: Patient declined right ankle ROM exam secondary to pain Skin: Right Ankle: Ecchymosis and positive sutures intact Inspection: Right Ankle: Bruising/ ecchymoses and swelling positive calf, ankle, and foot is swollen and bruised Gait: Ambulating with assistance Additional Exam Findings: Joint swelling ROM limited by pain wound clean, dry, intact lower extremity neurovascularly intact Assessment and plan: Post-op ankle arthroscopy Encounter for other orthopedic aftercare - distributed on the right ankle joint. Postoperative examination Plan: RICE. RICE: Rest: Rest the affected area for 24-48 hours. RICE: ice: Apply ice to the affected area for 20 minutes. Place a towel or cloth between the skin and ice. If continued icing is needed remove ice for 20 minutes then reapply. RICE: Compression: Keep compression wrap in place for 24-48 hours. If the compressive dressing feels too tight, then loosen as needed. RICE: Elevation: Elevate the affected extremity above your heart. Plan: Additional Notes. A prescription for Zofran was e-prescribed today, take as directed. A prescription for Norco 10 mg was e-prescribed today, take as directed. Continue Ice application and elevation. Continue crutches. Patient is to proceed with gentile range of motion and remain non weight bearing.	
07/04/2022	HCA Florida Orange Park Hospital	Follow up in 1 week Emergency department visit for right foot pain: 29-year-old female presents today with right foot pain. States on June 23rd patient underwent surgical procedure to the right foot involving tendon with Dr. Fady Ei-Bahri. States she has had worsening pain to this	95-103
	Raza Master, D.O.,	region therefore called the office on 07/01/2022 where she was prescribed Keflex and told to call back if her symptoms do not improve by today. States she called the office again today and they recommended	
	Justin Deaton, M.D.,	patient come to the emergency room. Home medications : Lortab 10/325 mg, Aspirin EC 81 mg	
		Reported medications: Norvasc 5 mg, Multivitamin	

Date	Provider	Occurrence/Treatment	PDF REF
		Physical examination: Skin: Normal color -Dry Right foot appear edematous, two surgical wounds with sutures in place in the proximal anterior foot, no purulent drainage, no bleeding, no surrounding erythema, non-fluctuant. 2 + DP pulse on the right. Sensation to the right distal foot intact. Able to move all toes on the right.	
		Pulse Oximetry: 98%.	
		Re-evaluation: Approximately 1405, called Dr. Fady El-Bahri's office, they stated they will page out Dr. El-Bahri the head and have him call back. 1519 called again, they stated they will contact Dr. El-Bahri and to call back if no response from Dr. El-bahri in 20 minutes. Dr. El-bahri, called back, case was discussed with him including benign physical exam without concerning findings for postoperative infection. Plan was discussed with him to have the patient continue the Keflex. He stated the patient should follow-up in office tomorrow. Patient was advised of this recommendation to follow-up with orthopedic surgeon in office tomorrow and advised patient to continue using the antibiotics. Patient's presentation and plan discussed with my attending physician. Patient stable. Discharged home with return precautions and appropriate follow up for complete management and resolution of symptoms. Findings, result, and diagnostic uncertainties were discussed with the patient. Patient was provided with information regarding symptoms to look out for and when to return to the Emergency Room Differential diagnosis includes but is not limited to: Cellulitis, abscess, postoperative infection	
		Clinical impression:	
		Encounter for postoperative wound check	
		Counseled Regarding Diagnosis, Need for follow-up, When to return to ED Patient Instructions ED Post Op Wound Check, General Additional Instructions You must follow up with your orthopedic surgeon Dr. Fahdi El-Bahri within 24 hours for complete management of your symptoms. Please continue taking your antibiotics as prescribed. Please return to the emergency room for any worsening symptoms or new symptoms or any concerns whatsoever. Due to the short nature of most emergency room visits, there can be uncertainty regarding the diagnosis therefore it is very important that if you experience new symptoms, worsening symptoms, or anything else that concerns you, please return to this Emergency Room or go to any emergency room or call 911 immediately.	
		Supervising Physician Note- Resident Saw	

Date	Provider	Occurrence/Treatment	PDF REF
07/06/2022	OrthoOne	This patient was seen by a resident. I have personally seen the patient, performed the critical or key portions of the service, and participated in the management of the patient. I have reviewed and agree with the resident's note, and I have reviewed all labs, ECGs, and imaging studies or reports. I agree with this resident's findings, exam, and plan. Follow-up visit for left ankle surgery:	16-17
	Jacksonville Excellence Orthopedic Care Fady El-Bahri,	Patient is status post a left ankle arthroscopy that was performed on 6/26/22. She states that she went to the ER due to the pain and swelling in her ankle. She states that her sutures are intact and she has continued to use crutches. Physical examination:	
	M.D., Jennifer Scott	Postop Ankle Patient declined right ankle ROM exam secondary to pain. Skin:	
	(Credential unavailable)	Right Ankle: Ecchymosis positive sutures intact Inspection:	
		Right Ankle: Bruising/ ecchymoses and swelling, positive calf, ankle, and foot is swollen Gait: Ambulating with assistance Additional Notes: Neurovascular intact, sensation intact, good pulse and	
		Calf soft and non-tender Additional Exam Findings: ROM limited by pain joint swelling wound clean, dry, intact lower extremity neurovascularly intact.	
		Assessment and plan:	
		 Post-op ankle arthroscopy Encounter for other orthopedic aftercare - distributed on the right ankle joint. 	
		Associated diagnosis: Postoperative Exam. Physical therapy/occupational therapy prescription.	
		• Indication: Post-op Ankle Arthroscopy - right ankle joint. Instructions: evaluate and treat per diagnosis/objective exam and post-operative protocol. Recommend frequency of 3 times per week for 6 weeks.	
		 Therapeutic Exercises: All exercises prn per therapist. Manual Therapy: All manual therapy prn per therapist. Modalities: All modalities prn per therapist. All modalities prn per 	
		 therapist. Plan: Suture Removal. Sutures were removed in standard fashion. Steri-strips were applied. 	
		Plan: Additional Notes. A prescription for Percocet 10 mg was e- prescribed today, take as directed. Followup in six weeks.	
07/13/2022	CORA Physical	Interim physical therapy visit for right ankle pain: Subjective:	24-27, 70-72
	Therapy- Westside	History/Symptoms: Patient presents to physical therapy status post right arthroscopic ankle debridement as well abrasion chondroplasty. At this time she has max difficulty standing and walking at all as well as with transfers and impairing her ability to take care of her children. At this	

Christopher Heffernan, PT		ax difficulty	1.1 11					
Fady Bahri, M.D.	Patient is aware goals. Patient al Family Support ascend/descend Objective	Family Support: Patient lives with family. Patient needs to be able to ascend/descend 3 steps in order to negotiate the home. Objective						
	Ankle	AROM (i	ndicates	PRO	streng			
	function			M	th			
	Donaiflavian				1	_		
	Dorsillexion	degrees	degree s	degree	4+/5			
	Plantarflexio n	50	55	-	4/5			
				-	1	_		
	Diagnosis: Pain in right and Assessment: Patient presenting the right ankle. mobility, and further services for progression of the RLE to allow	ng s/p arthro At this time nctional mo gression thr w her to retu	oscopic su she prese obility. Sho ough a fur arn to PLC	rgery as v nts with s e would t nctional s DF. Patier	severe im enefit fro trengther at will rec	pairments in gait, om skilled PT sing program of quire extensive		
	Plan: Hot pack for Cold pack to Therapeutic Therapeutic flexibility	r muscle rel o decrease p activities to Exercise fo	laxation, in pain and ir to improve or strength	ncrease ci iflammati functiona ening, sta	rculatior ion al perfora abilizatio	nance n, endurance, and		
		goals. Patient al Family Suppor ascend/descend Objective Patient has not had not have not h	goals. Patient alert and orie Family Support: Patient li ascend/descend 3 steps in original steps in	goals. Patient alert and oriented x3. P Family Support: Patient lives with fa ascend/descend 3 steps in order to nead the step of the same st	goals. Patient alert and oriented x3. Patient is a Family Support: Patient lives with family. Pa ascend/descend 3 steps in order to negotiate the Objective Patient has not had therapy for the same condition with pain) Ankle	goals. Patient alert and oriented x3. Patient is able to fo Family Support: Patient lives with family. Patient need ascend/descend 3 steps in order to negotiate the home. Objective Patient has not had therapy for the same condition. Ankle function Right Right Left Right Left Dorsiflexion Lack 30 Regrees Re	goals. Patient alert and oriented x3. Patient is able to follow directions. Family Support: Patient lives with family. Patient needs to be able to ascend/descend 3 steps in order to negotiate the home. Objective Patient has not had therapy for the same condition. Ankle	

Date	Provider		Oc	currence/	Гreatment	PDF REF		
				note tissue	and joint mobility via mobilization			
		and myofas						
		Gait training						
			-		vation, safety			
		Patient will	be seen 3 ti	mes per we	eek for 6 weeks.			
07/15/2022	CORA	Multiple physic	cal therapy	visits for 1	right ankle pain:	28-34		
-	Physical	Total no of visi	ts: 3					
07/22/2022	Therapy-							
	Westside			apeutic exe	ercise, neuromuscular re-education,			
	GI I I	therapeutic activ	vities.					
	Christopher	Ciamificant and	4					
	Heffernan, PT	Significant ever		e with no n	ew complaints today Patient able			
	Jakob Davis,		•		Patient Reports Pain 4/10			
	PTA		·		•			
	Kristi Link,	present. Patient			ew complaints today. Swelling still			
	PT		1					
					ew complaints today. Swelling still			
		•	•		ients session further continued with			
					making progress towards ADL oduced today to further promote			
		_			ment, patient tolerated the treatment			
					nt will further continue to make			
					tion of skilled treatment.			
				tiple physic	cal therapy visits are summarized			
		with significant						
07/27/2022	CORA				ight ankle pain:	35-37		
	Physical	Patient attended			on.			
	Therapy- Westside	Patient cancelle	d/no snowe	a 2 visits				
	Westside	Ankle	AROM (i	ndicates				
	Jakob Davis,	function	with pain					
	PTA		Right	Left				
	TZ 1 T 1	Dorsiflexion	8degrees 48	36 55				
	Kristi Link, PT	Plantarflexio n						
		Eversion						
	Fady Bahri, M.D.	Inversion						
		Accessory joint						
		Posture: Within normal limit						
		Flexibility: Dec		•				
					ed due to swelling			
		Gait: Antalgic						
		Balance: Dimir	ished all du	e to pain a	nd crutch use			

Date	Provider		(Occurrence/	Treatment	t		PDF REF
		Assessment: Patient continue evaluation. Patie but HEP carryo ability with toe further continue ability with con Treatment ren therapeutic activ						
		Plan:						
		Continue therap	y 3 times	per week for	4 weeks.			
07/29/2022	CORA	Multiple physic	cal therap	y visits for	right ankl	e pain:		38-45
-	Physical	Total no of visi	ts: 4					
08/05/2022	Therapy-					_		
	Westside	Treatment ren		ierapeutic ex	ercise, neui	romuscular re	-education,	
	Christopher	therapeutic activ	vities.					
	Heffernan, PT	Significant eve	ntc•					
	Tierreman, 1 1	07/29/2022: Pat		ents with no r	new compla	aints today		
	Jakob Davis,	08/01/2022: Rig	•		_	•		
	PTA	08/03/2022: No						
		08/05/2022: Pat	tient repor	ts decrease in	n swelling	but still some	present.	
	Kristi Link, PT	Pain level as 4/1	10.					
		*Reviewer's con	mment: M	ultiple physic	cal therapy	visits are sur	nmarized	
		with significant						
08/10/2022	CORA	Physical therap						46-48
	Physical	Patient attended	9 visits f	rom evaluatio	on. Patient	cancelled/no	showed 2	
	Therapy- Westside	visits. Certification p	eriod: 08/	/10/2022-09/0	07/2022			
			1.00.5				1	
	Jakob Davis, PTA	Ankle function	with pa	(indicates	Muscle	strength		
	117	Tuncuon	Right	Left	Left	Right		
	Kristi Link,	Dorsiflexion	10	-	4+/5	3+/5	1	
	PT	Plantarflexio	50	-	4+/5	3+/5	_	
		n				- 1,5		
	Fady Bahri, Eversion 10 - 4+/5 3+/5							
	M.D.	Inversion						
		Accessory joint Palpation: Glo Posture: WNL Flexibility: Dec Sensation: Inta Gait: Antalgic,	bal discon creased an	nfort with pa				

Date	Provider		O	ccurrence/T	reatment		PDF REF		
		Balance: Dimin PT.	Balance: Diminished due to pain and swelling, WS still being done in PT.						
		Assessment: Patient has made still has same de has pain with stafurther continue PLOF return with the same therapeutic activities.							
		Plan:	2 ti		41				
08/12/2022 - 08/19/2022 08/24/2022	CORA Physical Therapy- Westside Christopher Heffernan, PT Jakob Davis, PTA Kristi Link, PT CORA Physical	Multiple physic Total no of visi Treatment rene therapeutic activ Significant ever 08/12/2022: Pat swelling and pai any foot and and 08/19/2022: Pat Reports Pain 4/1 *Reviewer's con with significant Physical therap	Plan: Continue therapy 3 times per week for 4 weeks. Multiple physical therapy visits for right ankle pain: Total no of visits: 2 Treatment rendered: Therapeutic exercise, neuromuscular re-education, therapeutic activities. Significant events: 08/12/2022: Patient states she is really sore today. Patient with moderate swelling and pain on the lateral aspect of the ankle. She struggles with any foot and ankle movement in standing. 08/19/2022: Patient presents with no new complaints today. Patient Reports Pain 4/10 *Reviewer's comment: Multiple physical therapy visits are summarized with significant events. Physical therapy progress note for right ankle pain:						
	Therapy- Westside Jakob Davis,	visits.	Patient attended 12 visits from evaluation. Patient cancelled/no showed 3 visits. Certification period: 08/24/2022-09/21/2022						
	PTA	Ankle							
	TZtt. 1	function							
	Kristi Link, PT	Dorsidania							
	1 1	Dorsiflexion Plantarflexio							
	Fady Bahri,	n n							
	M.D.	Eversion	20	-	4+/5				
		Inversion							
		Accessory joint	mobility:	Нуро ТС					

Date	Provider	Occurrence/Treatment	PDF REF
		Palpation: Moderate palpation global ankle, sore with moderate	
		palpation	
		Posture: Within normal limits	
		Flexibility: Decreased gastroc	
		Sensation: Intact	
		Gait: Antalgic Balance: Diminished tandem and NBOS	
		balance. Diminished tandem and NBOS	
		Assessment:	
		Patient has made improvements with ROM as well as functional ability	
		but still gets very swollen and has issues with walking tolerance as well	
		ADL function. Patient will further continue to make PLOF return with	
		continuation of skilled treatment focused on goals	
		Treatment rendered : Therapeutic exercise, neuromuscular re-education,	
		therapeutic activities.	
		and of the state o	
		Plan:	
		Continue therapy 2 times per week for 4 weeks.	
08/26/2022	CORA	Physical therapy daily note for right ankle pain:	56-57
	Physical	Patient states she is doing well. Mild pain today. Patient reports pain 3/10	
	Therapy-		
	Westside	Patient had difficult time with short foot in standing. She was able to	
	Kristi Link,	have improved posterior tib control when working on it eccentrically. She will benefit from skilled PT to address impairments and achieve	
	PT	functional goals.	
		Tunctional goals.	
		Treatment rendered: Neuromuscular re-education, therapeutic	
		activities.	
09/13/2022	Oak Hill	Follow up visit for right ankle sprain, anxiety, depression:	147-148
	Family Care	A	
	Center Inc.	Assessment:	
	Liza Byatt,	Sprain of right ankle, subsequent encounter Congressional agricultural disorder.	
	APRN	Generalized anxiety disorderModerate recurrent major depression	
	7 H TCC	Idiopathic scoliosis	
		• Idiopatine sconosis	
		Prescription:	
		Escitalopram Oxalate 20 mg.	
		Buspirone HCL 15 mg.	
		Ibuprofen 800 mg	
01/12/2023	Oak Hill	Follow up visit for right knee, and right ankle pain:	149-151
	Family Care	Subjective: Right knee and right ankle pain from previous falling injury.	
	Center Inc.	Right ankle arthroscopy 06/2022 with Dr. Bahri.	
	Liza Byatt,	Review of systems:	
	APRN	Musculoskeletal: Right knee and right ankle pain- history of surgery	
	'	right ankle.	
		Objective:	

Date	Provider	Occurrence/Treatment	PDF REF
		Extremities: Decrease range of motion right ankle, right knee tenderness, trace edema knee and right ankle.	
		A 222 222 224	
		Assessment: • Moderate recurrent major depression	
		Generalized anxiety disorder	
		Idiopathic scoliosis of thoracic spine	
		Plan:	
		Seen by Dr. Bahri with follow up on 02/20/2023- currently taking	
		Prednisone.	
		Medication refill.	
		Return to clinic in 4 weeks for physical examination.	
		Prescription:	
		Hydroxyzine HCL 50 mg.	
00/00/000	0.1.7711	Seroquel 300 mg.	150 151
03/02/2023	Oak Hill	Follow up visit for physical examination:	152-154
	Family Care Center Inc.	Review of systems: Musculoskeletal: Right knee and right ankle pain- history of surgery	
	Center Inc.	right ankle.	
	Liza Byatt, APRN	Psychological: Positive for depression and anxiety.	
		Objective:	
		Extremities: Decrease range of motion right ankle, right knee tenderness, trace edema knee and right ankle.	
		Assessment:	
		Moderate recurrent major depression	
		Generalized anxiety disorder	
		Herniation lumbar disc	
		Plan:	
		Counseled on generalized anxiety disorder and depression. Start	
		Quetiapine and Hydroxyzine. Return to clinic in 2 weeks for physical	
		examination.	
03/06/2023	Oak Hill	Office visit for allergic reaction, weakness:	155-157
	Family Care	Review of systems:	
	Center Inc.	Musculoskeletal: Right knee and right ankle pain. Psychiatric: Positive for depression and anxiety.	
	Liza Byatt,	1 Sychiatric, I ostave for depression and analety.	
	APRN.	Physical examination: Same as 03/02/2023.	
		Plan:	
		Discontinue Quetiapine due to allergic reaction, re-start Sertraline as per	
		patient's request.	
		Counseled on generalized anxiety disorder, depression.	
		Medication refill Follow up in 4 weeks.	
		TOHOW up III 4 WEEKS.	

Date	Provider	Occurrence/Treatment	PDF REF
04/19/2023	Oak Hill Family Care Center Inc. Liza Byatt,	Follow up visit for routine adult physical examination, elevated triglycerides, idiopathic scoliosis of thoracic spine, thoracic back pain, generalized anxiety disorder, pain in right foot, iron deficiency anemia:	158-161, 214
	APRN.	Review of systems: Same as 04/19/2023	
		Physical examination: Same as 03/02/2023.	
		Assessment: Idiopathic scoliosis of thoracic spine Thoracic back pain Generalized anxiety disorder	
		Pain in right foot	
		Plan: Generalized anxiety disorder, depression counseling. Right foot X-ray regarding plantar pain for 1 month.	
		Related records: Patient information.	
0.5/02/2022		Reviewer's comment: Case focus information alone captured in detail.	215
06/02/2023	Akumin Riverside Johnathan	X-ray of right foot: Clinical data: Right foot pain, ruling cut bone spur. History off arthroscopic of foot and ankle 06/27/2022.	215
06/06/2023	Hadley, M.D. Oak Hill	Impression: Unremarkable exam Follow up visit for pain in right foot, and sprain of right ankle:	162-164, 212
00,00,2025	Family Care Center Inc.	Review of systems: Same as 04/19/2023	102 10 1, 212
	Liza Byatt,	Physical examination: Same as 03/02/2023.	
	APRN.	Assessment: • Pain in right foot	
		 Sprain of right ankle, subsequent encounter 	
		Plan: Right foot X-ray regarding plantar pain for 3 months- results unremarkable. MRI without contrast. Return to clinic for results.	
06/16/2023	Oak Hill Family Care Center Inc.	Related records: Patient information. Follow up visit for fatigue, sore throat, dysphagia, right ovarian cyst, frequent and heavy menstruation	165-167
	Liza Byatt, APRN		

Date	Provider	Occurrence/Treatment	PDF REF
08/24/2023	Oak Hill	Follow up visit for nasal congestion, sore throat, moderate recurrent	168-169
	Family Care	major depression, generalized anxiety disorder:	
	Center Inc.	Assessment:	
		Moderate recurrent major depression	
	Liza Byatt, APRN.	Generalized anxiety disorder	
		Plan:	
		Sertraline HCL 50 mg.	
		Ibuprofen 800 mg.	
00/40/2022	0 1 7711	Reviewer's comment: Case focus information alone captured in detail.	150.50
09/18/2023	Oak Hill	Follow up visit for cervical endometriosis, depression, hypertension,	170-72
	Family Care	frequent and heavy menstruation, right ovarian cyst, pedal edema,	
	Center Inc.	iron deficiency anemia, generalized anxiety disorder:	
	Liza Byatt,	Assessment:	
	APRN.	Recurrent major depressive episodes, mild	
		Generalized anxiety disorder	
		, , , , , , , , , , , , , , , , , , ,	
		Plan:	
		GAD and depression counseling.	
		Return to clinic in 3 months.	
		Prescription:	
		Sertraline HCL 50 mg.	
		Ibuprofen 800 mg.	
		Reviewer's comment: Case focus information alone captured in detail.	