



AH BH Charlotte OMS Medication

501 Billingsley Rd

Charlotte, NC 28211-

Phone:

Fax:

Provider:
Date of Service: 8/9/2019
Visit #:

Pt Name: WILLIAMS III, LEONARD CLINTON
Org MRN#: 0000642066
DOB: 11/1/1980 **Sex:** Male



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BH Clinical Documentation

DOCUMENT NAME:

BH Telephone Contact Form Entered On: 8/9/2019 9:11 EDT
Performed On: 8/9/2019 9:11 EDT by HORNE , VERONICA

Medicaid Number

Medicaid Coverage : No

HORNE , VERONICA - 8/9/2019 9:11 EDT

BH Telephone Contact

Caller Name : Leonard

Relationship to Patient : Self

Provider : PENISTON , KATHLEEN KELLY NP

Call Type : Other:

Cell Phone Number : [REDACTED] *

Leave Voicemail : Yes

Reason for call : Pt would like to know if the provider spoke with Mobile Crisis. Pt stated he does not want the provider to speak with anyone until he speaks with the provider. Pt can be reached at [REDACTED]

Last Visit Date : 6/24/2019 EDT

HORNE , VERONICA - 8/9/2019 9:11 EDT

Communications - BH

Patient Agreement Comm BH : The patient gives oral or written consent for CHS to verbally share his/her health information with the individuals listed below [this includes, but is not limited to, diagnosis, prognosis, medications (dosage and side effects, if any) and progress].

BH Comm Share Info with others : Yes

OC Reviewed Contact List : 1/17/2020 14:48 EST

Consent Valid BH : This consent will be valid for one year unless revoked prior to expiration. Enter "End Date" for all BH encounters one year after "Date Identified".

WADE , KEISHA RN - 1/17/2020 14:48 EST

BH Communication Grid

1. *BH Consent Date Obtained* : 4/23/2019 EDT

BH Consent End Date - 1 year from date obtained : 4/22/2020 EDT

Contact Name : [REDACTED]

Relationship : Mother

BH Witnessed By Name : N/A - Patient signed paper consent (see scanned documents)

Provider:

Date of Service: 8/9/2019

Visit #:

Pt Name: WILLIAMS III, LEONARD CLINTON

Org MRN#: 0000642066

DOB: 11/1/1980

Sex: Male

Printed: 4/10/2020 10:25 EDT

Print ID: 367579350



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BH Witnessed By Relationship : AH Staff Member

BH Comments : consent revoked 5-1-19

WADE , KEISHA RN - 1/17/2020 14:48 EST

2. *BH Consent Date Obtained :* 4/23/2019 EDT

BH Consent End Date - 1 year from date obtained : 4/22/2020 EDT

Contact Name : Jennifer [REDACTED]

Contact Number : [REDACTED]

Relationship : Co-worker / Friend

BH Witnessed By Name : N/A - Patient signed paper consent (see scanned documents)

BH Witnessed By Relationship : AH Staff Member

BH Comments : consent revoked 5-1-19

WADE , KEISHA RN - 1/17/2020 14:48 EST

3. *BH Consent Date Obtained :* 1/17/2020 EST

BH Consent End Date - 1 year from date obtained : 1/17/2021 EST

Contact Name : [REDACTED]

Relationship : psychologist

BH Witnessed By Name : Other: Keisha Wade RN and Shannon Fang RN

BH Witnessed By Relationship : AH Staff Member

WADE , KEISHA RN - 1/17/2020 14:48 EST

Follow Up

Phone Msg Communication Grid

1. *Communication Date/Time :* 8/12/2019 9:49 EDT

Communication Comment : see message note 8/9...will close

WADE , KEISHA RN - 8/12/2019 9:49 EDT

Follow-up Appointment : 8/15/19 11am

HORNE , VERONICA - 8/9/2019 9:11 EDT

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Visit Information

Visit Information

Recorded Date	8/9/2019	
Recorded Time	09:11 EDT	
Recorded By	HORNE ,VERONICA	
Procedure		Units
Provider	PENISTON , KATHLEEN KELLY NP	

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Correspondence & Follow Up

DOCUMENT NAME:

Addendum by BENTLEY , MONICA A NP on October 15, 2019 13:17:39 EDT

From: BENTLEY , MONICA A NP
To: WILLIAMS III, LEONARD CLINTON
Sent: 10/15/2019 13:17:39 EDT
Subject: RE: Kathleen Peniston, NP - Behavioral Health - OMS: Kathleen Peniston, NP - Behavioral Health - OMS: Inquiry About Non-Authorized Disclosures

Hi there, I am covering for Kathy today in clinic. Refills have been sent for celexa and zyprexa.

Take care,
Monica Bentley NP

From: FANG , SHANNON RN (CMC Randolph OMS)
To: BENTLEY , MONICA A;
Sent: 10/11/2019 16:20:36 EDT
Subject: FW: Kathleen Peniston, NP - Behavioral Health - OMS: Kathleen Peniston, NP - Behavioral Health - OMS: Inquiry About Non-Authorized Disclosures

From: WILLIAMS III, LEONARD CLINTON
To: Kathleen Peniston, NP - Behavioral Health - OMS (CMC Randolph OMS)
Sent: 10/11/2019 03:42 p.m. EDT
Subject: RE: Kathleen Peniston, NP - Behavioral Health - OMS: Inquiry About Non-Authorized Disclosures

Thank you for your message. It has been successfully sent to the appropriate care team.

Hey Kathy,

Somehow my refills/scripts are not making it to the pharmacy. After the second to last visit I had 1 less adderall script on

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file than I should have. I just went to get some stuff filled and this time they have 1 adderall script but no remaining refills for celexa/zyprexa.

Can you shoot them over some refills for the latter 2 meds, for me to pick up next week?

Addendum by PENISTON , KATHLEEN KELLY NP on August 12, 2019 08:19:38 EDT

From: PENISTON , KATHLEEN KELLY NP
To: CMC Randolph OMS; WILLIAMS III, LEONARD CLINTON
Sent: 8/12/2019 08:19:38 EDT
Subject: RE: Kathleen Peniston, NP - Behavioral Health - OMS: Inquiry About Non-Authorized Disclosures

I have not discussed your case with Mobile Crisis.

From: FANG , SHANNON RN (CMC Randolph OMS)
To: PENISTON , KATHLEEN KELLY;
Sent: 8/9/2019 16:39:03 EDT
Subject: FW: Kathleen Peniston, NP - Behavioral Health - OMS: Inquiry About Non-Authorized Disclosures

From: WILLIAMS III, LEONARD CLINTON
To: Kathleen Peniston, NP - Behavioral Health - OMS (CMC Randolph OMS)
Sent: 08/09/2019 03:49 p.m. EDT
Subject: Inquiry About Non-Authorized Disclosures

Thank you for your message. It has been successfully sent to the appropriate care team.

Hey Kathy,
I am collecting information from the medical records department, and I wanted to shoot you a quick question. As I understand it, there is something called a "Non-authorized Disclosure" where my healthcare providers can discuss my situation with outside providers. Have you ever discussed my situation with the people at Mobile Crisis? Please reply when convenient, and I would ask that my case never be discussed with them for any reason going forward. Have a great weekend!

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Addendum by WADE , KEISHA RN on August 12, 2019 11:13:04 EDT

From: WADE , KEISHA RN (CMC Randolph OMS)
To: PENISTON , KATHLEEN KELLY;
Sent: 8/12/2019 11:13:04 EDT
Subject: FW: Kathleen Peniston, NP - Behavioral Health - OMS: Kathleen Peniston, NP - Behavioral Health - OMS: Inquiry About Non-Authorized Disclosures

From: WILLIAMS III, LEONARD CLINTON
To: Kathleen Peniston, NP - Behavioral Health - OMS (CMC Randolph OMS)
Sent: 08/12/2019 10:28 a.m. EDT
Subject: RE: Kathleen Peniston, NP - Behavioral Health - OMS: Inquiry About Non-Authorized Disclosures

Thank you for your message. It has been successfully sent to the appropriate care team.

Great. Thank you. See you Thursday.

Addendum by PENISTON , KATHLEEN KELLY NP on August 12, 2019 08:19:38 EDT

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Addendum by WADE , KEISHA RN on August 12, 2019 09:21:19 EDT

From: WADE , KEISHA RN (CMC Randolph OMS)
To: WILLIAMS III, LEONARD CLINTON
Sent: 8/12/2019 09:21:19 EDT
Subject: FW: Kathleen Peniston, NP - Behavioral Health - OMS: Inquiry About Non-Authorized Disclosures

Addendum by PENISTON , KATHLEEN KELLY NP on August 12, 2019 08:19:38 EDT

From: PENISTON , KATHLEEN KELLY NP
To: CMC Randolph OMS; WILLIAMS III, LEONARD CLINTON
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