



## AH BH Charlotte OMS Medication

501 Billingsley Rd

Charlotte, NC 28211-

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Admit Date: 6/9/2020 17:00 EDT  
Disch Date: 6/9/2020 23:59 EDT  
Admitting: PENISTON ,KATHLEEN KELLY NP  
Attending: MURRAY ,PHILLIP MICHAEL MD  
Printed: 3/5/2021 14:02 EST

Pt Name: WILLIAMS III, LEONARD CLINTON  
MRN: 0000642066 Acct#: 6454918570  
DOB: 11/1/1980 Age: 39 years Sex: Male  
Location: HOMS  
Print ID: 445014486

## Office/Clinic Visit Notes

DOCUMENT NAME:

**WILLIAMS III, LEONARD  
CLINTON**

**DOB:** 11/01/1980 **MRN:** 0000642066  
**Sex:** Male **FIN:** 6454918570

### Patient Information:

Provider licensed to provide medical care in the location/state of patient: Yes

### History of Present Illness

Patient is a 39 year old male with diagnoses of Bipolar D/O, PTSD and ADD.  
Last visit: 4/29/20. Meds: Zyprexa, Celexa, and Adderall.

- Patient reports overall he is feeling better and attributes this improvement to his case was successful with Discovery CC.
- He is going through the process of applying for disability which is also very stressful and he is struggling to complete the process.
- He describes waves of being overtaken by traumatic feelings that paralyze him and make it difficult to function.
- he reports that he called because he would like to have an increase in his Adderall as "it is the only thing that helps".
- Discussed reasons why this would not be a good long term strategy including any lack indication for Adderall in PTSD.
- The patient is very talkative and speech is rapid. I am able to get all needed questions answered and he answers appropriately.
- He reports good sleep. Appetite is regular and energy level is unchanged. He states his concentration remains poor especially when stressed.
- He reports that he is able to complete ADLs and take care of his home even though it is a struggle at times. Mom is financially supportive.
- No SI/HI/Psychosis. Patient denies any ETOH or drug use. Has not seen PCP regular. Does still speak with therapist (john) by phone.

### Review of Systems

Constitutional: Negative for chills, fever, and flushing  
Musculoskeletal: Negative except as documented in HPI.  
Neurologic: Negative for abnormal balance, confusion, headache, or tremors.  
Psychiatric: Negative except as documented in HPI.  
ROS reviewed as documented in chart

### Exam

#### Psychiatric:

Attention and Concentration: Normal, patient is able to follow and interact through interview.  
Orientation: Oriented x4.  
Fund of Knowledge: Average  
Recent & Remote Memory: Normal  
Insight: Fair  
Judgment: Fair  
Mood and Affect: Anxious, intense. Affect congruent (per phone call)  
Thought Process: Ruminative.  
Associations: Intact  
Thought Content: Denies any homicidal ideation. Denies suicidal ideation.  
Perceptions: Denies any auditory or visual hallucinations. Denies any symptoms of paranoia.  
Language: Normal  
Speech: Rapid

### Problem List/Past Medical History

#### Ongoing

None

#### Historical

Obesity

Obesity

### Medications

Adderall XR 20 mg oral capsule, extended release,  
See Instructions  
Adderall XR 20 mg oral capsule, extended release,  
See Instructions  
Adderall XR 20 mg oral capsule, extended release,  
See Instructions  
citalopram 20 mg oral tablet, 20 mg, 1 tablet,  
ORAL, Daily, 2 refills  
Goodys Extra Strength, See Instructions  
metFORMIN, 500 mg, **Not taking**  
Misc Medication  
ZYPREXA 5 mg oral tablet, See Instructions, 2  
refills

### Allergies

No known allergies

### Social History

#### Abuse/Neglect

History of Abuse: Past. Abuse Type: Mental,  
Sexual. Comments: Sexual abuse by MGM,  
emotional abuse by step-father.

#### Alcohol

Denies

#### Drug Abuse

Denies

#### Employment/School

Highest Education: College graduate.

Frelance graffit art

#### Home/Environment

Marital Status: Single. lives in an apartment by  
himself

#### Nutrition/Health

Home Diet: Diabetic.

#### Tobacco

Smokeless Tobacco Use: Never. Never smoker,  
0 Yrs Smoker. 0 Avg # Packs Per Day.

#### Vape/E-Cigarette

Use: Never.

### Family History

Cancer: Father, GF, Paternal, GM, Maternal and  
GM, Paternal.  
Coronary artery disease (CAD): Negative: Mother,  
Father, Sister, Brother, GF, Maternal, GF,

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### **Assessment/Plan**

ADD (attention deficit disorder)

Ordered:

Est OV Level 4 - 99214

Follow-Up Appt

Bipolar disorder

Ordered:

Est OV Level 4 - 99214

Follow-Up Appt

Paternal, GM, Maternal, GM, Paternal and Grandparent.

Diabetes mellitus: Negative: Mother, Father, Sister, Brother, GF, Maternal, GF, Paternal, GM, Maternal, GM, Paternal and Grandparent.

HYPERTENSION: GM, Maternal.

1) Medication: Explained that patient has a buffer to take one or two extra Adderall if needed (based on fill dates) but I am not comfortable with increasing daily dose of this medication. Gave multiple reasons and explained that he is welcome to seek another opinion if he would like.

- Continue Zyprexa and Celexa

2) Therapy - Patient talks to counselor John by phone

3) Labwork Ordered - Not indicated

4) SA Treatment - Not indicated

5) RTC in 1-2 month for further evaluation of medication.

6) Patient was provided with education regarding medication and treatment plan.

7) Patient is aware of emergency services availability including Psychiatric ED and Mobile Crisis.

8) Patient is fully aware to contact OMS for any changes in symptoms, medication adjustments, development of side effects, or if in crisis.

### **Patient Education**

Patient counseled on risks/benefits of current medication regimen and diagnosis, as well as the importance of consistently taking medications as prescribed.

Patient counseled on the usefulness of therapy in conjunction with medications to help with symptoms.

Patient was also counseled on sleep hygiene techniques and the importance of physical activity in health and wellness.

### **Consent:**

- Patient's identity was confirmed.
- Medical condition or illness was discussed with the patient/personal representative.
- Current proposed treatment for medical condition or illness was explained to patient/personal representative along with the likely benefits, significant risks and complications associated with the treatment.
- The patient/personal representative verbally authorized treatment to be provided by telephone, which may include a limited review of patient's current health status, medication or other treatment recommendations, patient education and an opportunity to ask questions about condition and treatment.

Verbal Consent Granted: select one

**Time spent in coordination of care and phone time:** A total of 60 minutes was spent in review of pertinent medical records, evaluation of the patient

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## Office/Clinic Visit Notes

problem, and coordination of a care plan as part of this phone visit.45 minutes was spent on the phone portion of visit.

**Electronically Signed By: PENISTON, KATHLEEN KELLY NP**  
**06/09/2020 06:22 PM**

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## Medication Compliance Status

### Admission Medication Reconciliation

#### Med Name

acetaminophen/aspirin/caffeine (Goodys Extra Strength)

**Display Line** See Instructions, 1 packet as needed, 0, 11/03/11 16:02:00 EDT

**Compliance Status:** **Compliance Comments:**

Still taking, as prescribed

OLANzapine (ZyPREXA 5 mg oral tablet)

**Display Line** 5 mg per 1 tablet, ORAL, BID (2 times a day), 60 tablet, 1, 1, 02/15/21 12:56:00 EST

**Compliance Status:** **Compliance Comments:**

dextroamphetamine-amphetamine (Adderall XR 20 mg oral capsule, extended release)

**Display Line** 40 mg per 2 capsule, ORAL, qAM (every morning), 60 capsule, 0, 0, 02/15/21 12:56:00 EST

**Compliance Status:** **Compliance Comments:**

metFORMIN (metFORMIN)

**Display Line** 500 mg per, daily, 0, 04/15/16 15:22:00 EDT

**Compliance Status:** **Compliance Comments:**

Not taking

misc medication (Misc Medication)

**Display Line** 5 hour energy shots prn, 0, 04/29/20 9:24:00 EDT

**Compliance Status:** **Compliance Comments:**

Still taking, as prescribed

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## Electronic Orders

The current National Provider Identifier value is displayed with the ordering physician

Order: **Est OV Level 4 -99214**

Ordering Physician: PENISTON ,KATHLEEN KELLY NP (National Provider Identifier: 1346260254)

Electronically Signed By: PENISTON ,KATHLEEN KELLY NP

Order Details: 6/9/20 5:57:00 PM EDT VVI, ADD (attention deficit disorder) | Bipolar disorder

Order Comment:

Action Type: Order

Action Date/Time: 6/9/2020 17:58 EDT

Entered By: PENISTON ,KATHLEEN  
KELLY NP

Ordering Provider: PENISTON ,KATHLEEN KELLY NP

Supervising Provider: CASTRO ,MANUEL A MD

Order Details: 06/09/20 17:57:00 EDT VVI, Bipolar disorder | ADD (attention deficit disorder)

Review Information:

Doctor Cosign: Not Required

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## Discharge Information - Patient Education

DOCUMENT NAME:

Amb Depart Summary

Amb Depart Summary



Atrium Health

AH BH Charlotte OMS Medication

501 Billingsley Rd  
Charlotte, NC 28211

### Patient Visit Summary

<b>Name:</b> WILLIAMS III, LEONARD CLINTON	<b>MRN:</b> 0000642066	<b>DOB:</b> 11/1/1980
<b>Phone:</b> (980) [REDACTED]	<b>Age:</b> 39 Years	<b>Gender:</b> Male
<b>Primary Care Provider:</b>	<b>Race:</b> White	<b>Ethnicity:</b> Not Hispanic or Latino
<b>Preferred Language:</b> English	<b>Allergies:</b> No known allergies	
<b>Visit Date:</b> 06/09/2020		

*Atrium Health thanks you for allowing us to assist you with your healthcare needs. The following includes patient education materials and some information regarding your health. Information from today's visit may be missing or incomplete if your Atrium Health facility/provider has yet to transition to all aspects of the electronic medical record. Should you have any questions or concerns regarding your visit, please contact your physician or healthcare provider at your convenience.*

**Your regular doctor is:**MURRAY , PHILLIP MICHAEL MD

**Your doctor or location today:**PENISTON , KATHLEEN KELLY NP

**Reason for Visit:**

**Today's Diagnosis:**ADD (attention deficit disorder); Bipolar disorder

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## Discharge Information - Patient Education

### Today's Clinical Information:

Height:  
Weight:  
BMI:  
Blood Pressure: /

### Additional Information:

### Problem List:

No Problems  
found

### Recorded at this visit:

### Procedures

No Procedures documented

### Medications and Immunizations Administered During This Visit

No medication administered during this visit

### Orders this Visit

No visit orders documented

### Completed Information:

### Laboratory and Radiology this Visit (last charted value for your 06/09/2020 visit)

No Laboratory and Radiology documented

### My Medicine List

	New Medicines to take at Home	Prescription	Next Dose Due
1.	<b>dextroamphetamine-amphetamine (Adderall XR 20 mg oral capsule, extended release)</b> See Instructions 2 capsules each am	Sent to Atrium Health Pharmacy Billingsley 501 Billingsley Rd Charlotte, NC, 28211-1009	

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## Discharge Information - Patient Education

Phone: (704) [REDACTED]

Continue Taking These Medicines at Home		Next Dose Due
1.	<b>APAP/ASA/caffeine (Goodys Extra Strength)</b> See Instructions 1 packet as needed	
2.	<b>citalopram (citalopram 20 mg oral tablet)</b> 1 tablet by mouth every day	
3.	<b>dextroamphetamine-amphetamine (Adderall XR 20 mg oral capsule, extended release)</b> See Instructions 2 capsules each am	
4.	<b>dextroamphetamine-amphetamine (Adderall XR 20 mg oral capsule, extended release)</b> See Instructions 2 capsules each am	
5.	<b>metFORMIN (metFORMIN)</b> 500 mg daily	
6.	<b>misc medication (Misc Medication)</b> 5 hour energy shots prn	
7.	<b>OLANzapine (ZyPREXA 5 mg oral tablet)</b> See Instructions 1-2 tablets at bedtime	

\*This is a list of current information in your Atrium Health medical record. It may include information from your visits to other offices or medications you told us were prescribed by other physicians or health care providers. If you have questions about this information, please contact your physician or health care provider.

### Reminders:

1. If you have questions about your medicines, please ask your Doctor or a pharmacist.
2. Please bring your medicine list and pill bottles to **all** Doctor visits, medical testing, or if you are going to the ER or Hospital.
3. Remember to discard old medicine lists and update any records.

### Follow-Up

#### Appointments You Need to Make

#### Appointments You Already Have

You will get a text message or phone call with appointments already made for you. If you do not receive a text message or phone call, please call the doctor's office listed.

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## Patient Safety Information

### Call 911 for All Emergencies

### Quit Smoking or Tobacco Use

For more information, call **1-800-784-8669**

### Poison Control Center:

A poison can be anything if it is used in the wrong way, amount, or by the wrong person. Poisons can include household cleaning products, plants, and medicines. Snake and spider bites are also poisons. Nurses, pharmacists, or doctors answer your questions. For help, call the poison control center at **1-800-222-1222**.

**National Suicide Prevention Lifeline 1-800-273-TALK (8255)**

**National Domestic Violence Hotline 1-800-799-SAFE**

**National Human Trafficking Hotline 1-888-373-7888**

**Substance Abuse and Mental Health Services Administration (SAMHSA) 1-800-662-HELP (4357)**

### Patient Online Access:

Atrium Health now offers MyAtriumHealth. It provides easy and secure online access to your health information. With MyAtriumHealth, you can:

- Send a message to your doctor
  - Look at your health record, medications and health videos
  - View lab and other test results
  - Pay your bill

These are just some of the things you can do with MyAtriumHealth. For more information and to get started, visit **<https://my.atriumhealth.org>** Choose **Enroll Online**.

## Non-Discrimination Policy Statement

Atrium Health complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex.

Atención: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-821-1535.

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-800-821-1535

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## Discharge Information - Patient Education

DOCUMENT NAME: Patient Education

### Patient Education



## Patient Education Materials

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**FIN:** 6454918570

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## Discharge Information - Patient Education

DOCUMENT NAME: Education/Pt. Response Form - Text

Education/Pt. Response Entered On: 6/9/2020 17:57 EDT  
Performed On: 6/9/2020 17:57 EDT by PENISTON , KATHLEEN KELLY NP

### Response to Education

*Response to Teaching :* Attentive and verbalizes understanding

PENISTON , KATHLEEN KELLY NP - 6/9/2020 17:57 EDT

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## Allergy History

Substance **No known allergies**

Recorded Date/Time

11/3/2011 16:19 EDT

**Allergy Type** Allergy; **Recorded On Behalf Of** FERRARO,NICHOLAS P RN; **Reaction Status** Active; **Reviewed Date/Time** 6/9/2020 16:36 EDT; **Reviewed By** PENISTON , KATHLEEN KELLY NP;

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