



AH BH Charlotte OMS Medication

501 Billingsley Rd

Charlotte, NC 28211-

Admit Date: 7/21/2020 14:20 EDT
Disch Date: 7/21/2020 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#: 6456338225
DOB: 11/1/1980 Age: 39 years Sex: Male
Location: HOMS
Print ID: 445014488

Office/Clinic Visit Notes

DOCUMENT NAME:

**WILLIAMS III, LEONARD
CLINTON**

DOB: 11/01/1980 **MRN:** 0000642066
Sex: Male **FIN:** 6456338225

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: 6/9/20. Meds: Zyprexa, Celexa, and Adderall.

- Patient reports taking medication as prescribed.
- States that he still has a lot of distress secondary all the trauma he has been through.
- Has started using Kasina mind machine which has helped significant.
- The hypnosis provide helps him relax . Has been doing daily. Wants to increase to twice daily.
- Notable improvement in amount and level of distress. Not having thoughts of wanting to die.
- He reports sleeping 7-10 hours per night. Appetite is normal for him.
- The patient also reports significant improvement in focus and states energy is fair.
- No psychosis, SI or HI reported. No reports of drugs or ETOH use.
- In the midst of applying for disability.

Review of Systems

Constitutional: Negative for chills, fever, and flushing
Musculoskeletal: Negative except as documented in HPI.
Neurologic: Negative except as documented in HPI.
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. Affect congruent (per phone call)
Thought Process: Circumstantial
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: hypertalkative, rapid

Assessment/Plan

ADD (attention deficit disorder)
Bipolar 1 disorder

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

Goody's Extra Strength, See Instructions

Med List Status - Updated

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 graffix 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.

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PTSD (post-traumatic stress disorder)

- 1) Medication: Continue meds - no changes made today.
- 2) Therapy - Patient reports speaking with therapist/advocate named John.
- 3) Labwork Ordered - Not indicated
- 4) SA Treatment - Not indicated
- 5) RTC in 3 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: Yes

Time spent in coordination of care and phone time: A total of 30 minutes was spent in review of pertinent medical records, evaluation of the patient problem, and coordination of a care plan as part of this phone visit. 20 minutes was spent on the phone portion of visit.

Electronically Signed By: PENISTON, KATHLEEN KELLY NP
07/21/2020 03:04 PM

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

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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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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

Name: WILLIAMS III, LEONARD CLINTON	MRN: 0000642066	DOB: 11/1/1980
Phone: (980) [REDACTED]	Age: 39 Years	Gender: Male
Primary Care Provider:	Race: White	Ethnicity: Not Hispanic or Latino
Preferred Language: English	Allergies: No known allergies	
Visit Date: 07/21/2020		

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:

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Discharge Information - Patient Education

Today's Diagnosis:ADD (attention deficit disorder); Bipolar 1 disorder; PTSD (post-traumatic stress disorder)

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 07/21/2020 visit)

No Laboratory and Radiology documented

My Medicine List

	New Medicines to take at Home	Prescription	Next Dose Due
1.	citalopram (citalopram 20 mg oral tablet) 1 tablet by mouth every day	Sent to Atrium Health Pharmacy Billingsley	

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		501 Billingsley Rd Charlotte, NC, 28211-1009 Phone: (704)358-2860	
2.	dextroamphetamine-amphetamine (Adderall XR 20 mg oral capsule, extended release) See Instructions 2 capsules each am	Sent to Atrium Health Pharmacy Billingsley 501 Billingsley Rd Charlotte, NC, 28211-1009 Phone: (704)358-2860	
3.	dextroamphetamine-amphetamine (Adderall XR 20 mg oral capsule, extended release) See Instructions 2 capsules each am	Sent to Atrium Health Pharmacy Billingsley 501 Billingsley Rd Charlotte, NC, 28211-1009 Phone: (704)358-2860	
4.	dextroamphetamine-amphetamine (Adderall XR 20 mg oral capsule, extended release) See Instructions 2 capsules each am	Sent to Atrium Health Pharmacy Billingsley 501 Billingsley Rd Charlotte, NC, 28211-1009 Phone: (704)358-2860	
5.	OLANzapine (ZyPREXA 5 mg oral tablet) See Instructions 1-2 tablets at bedtime	Sent to Atrium Health Pharmacy Billingsley 501 Billingsley Rd Charlotte, NC, 28211-1009 Phone: (704)358-2860	
Continue Taking These Medicines at Home			Next Dose Due
1.	APAP/ASA/caffeine (Goodys Extra Strength) See Instructions 1 packet as needed		
2.	metFORMIN (metFORMIN) 500 mg daily		
3.	misc medication (Misc Medication) 5 hour energy shots prn		

*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.

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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.

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.

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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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Patient Education

Patient Education



Patient Education Materials

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FIN: 6456338225

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Discharge Information - Patient Education

DOCUMENT NAME:

Education/Pt. Response Form - Text

Education/Pt. Response Entered On: 7/21/2020 14:46 EDT
Performed On: 7/21/2020 14:45 EDT by PENISTON , KATHLEEN KELLY NP

Response to Education

Response to Teaching : Attentive and verbalizes understanding

PENISTON , KATHLEEN KELLY NP - 7/21/2020 14:45 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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