

**Bureau of Prisons  
Health Services  
Clinical Encounter**

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Inmate Name: EPSTEIN, JEFFREY EDWARD	Sex: M	Race: WHITE	Reg #: 76318-054
Date of Birth: 01/20/1953	Provider: [REDACTED]	RN	Facility: NYM
Encounter Date: 07/28/2019 20:25			Unit: H01

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Nursing - Follow up encounter performed at Health Services.

**SUBJECTIVE:**

**COMPLAINT 1**      Provider: [REDACTED] RN

**Chief Complaint:** Neuropathy - Tingling/Numbness of Extremity(ies)

**Subjective:** Inmate seen for F/U after returning from attorney conference offers no new complaints or worsening S/S stats " My R hand still has pins and needles sometimes" No change in appearance from previous exam.

**Pain:** No

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**OBJECTIVE:**

**Pulse:**

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Location</u>	<u>Rhythm</u>	<u>Provider</u>
07/28/2019	20:28	81			[REDACTED] RN

**Respirations:**

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Provider</u>
07/28/2019	20:28 NYM	14	[REDACTED] RN

**Blood Pressure:**

<u>Date</u>	<u>Time</u>	<u>Value</u>	<u>Location</u>	<u>Position</u>	<u>Cuff Size</u>	<u>Provider</u>
07/28/2019	20:28 NYM	157/91				[REDACTED] RN

**SaO2:**

<u>Date</u>	<u>Time</u>	<u>Value(%)</u>	<u>Air</u>	<u>Provider</u>
07/28/2019	20:28 NYM	98		[REDACTED] RN

**Exam:**

**General**

**Affect**

Yes: Cooperative

**Appearance**

Yes: Appears Well, Alert and Oriented x 3

**Nutrition**

Yes: Within Normal Limits

**Skin**

**General**

Yes: Within Normal Limits, Dry, Skin Intact

**ASSESSMENT:**

No Significant Findings/No Apparent Distress

**PLAN:**

**Disposition:**

To be Evaluated by Provider

Inmate Name: EPSTEIN, JEFFREY EDWARD

Date of Birth: 01/20/1953

Encounter Date: 07/28/2019 20:25

Sex: M Race: WHITE  
Provider: [REDACTED] RN

Reg #: 76318-054

Facility: NYM

Unit: H01

Follow-up in 12-24 Hours

**Patient Education Topics:**

<u>Date Initiated</u>	<u>Format</u>	<u>Handout/Topic</u>	<u>Provider</u>	<u>Outcome</u>
07/28/2019	Counseling	Plan of Care	[REDACTED]	Verbalizes Understanding

Copay Required: No

Cosign Required: Yes

Telephone/Verbal Order: No

Completed by [REDACTED] RN on 07/28/2019 20:30

Requested to be cosigned by [REDACTED] MD.

Cosign documentation will be displayed on the following page.

**Bureau of Prisons  
Health Services  
Cosign/Review**

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Inmate Name:	EPSTEIN, JEFFREY EDWARD	Sex:	M	Reg #:	76318-054
Date of Birth:	01/20/1953	Provider:	[REDACTED] RN	Race:	WHITE
Encounter Date:	07/28/2019 20:25			Facility:	NYM

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Cosigned by [REDACTED] MD on 07/28/2019 20:50.

**Bureau of Prisons  
Health Services  
Clinical Encounter**

Inmate Name: EPSTEIN, JEFFREY EDWARD	Sex: M	Race: WHITE	Reg #: 76318-054
Date of Birth: 01/20/1953	Provider: [REDACTED]	RN	Facility: NYM
Encounter Date: 07/28/2019 06:51			Unit: H01

Nursing - Triage Note encounter performed at Health Services.

**SUBJECTIVE:**

**COMPLAINT 1**      Provider: [REDACTED] RN

**Chief Complaint:** Neuropathy - Tingling/Numbness of Extremity(ies)

**Subjective:** " I woke up and I had no control over my Right arm for a few minutes it was just doing what it wanted to do"

**Pain:** No

**OBJECTIVE:**

**Pulse:**

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Location</u>	<u>Rhythm</u>	<u>Provider</u>
07/28/2019	06:57	82			[REDACTED] RN

**Respirations:**

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Provider</u>
07/28/2019	06:57 NYM	14	[REDACTED] RN

**Blood Pressure:**

<u>Date</u>	<u>Time</u>	<u>Value</u>	<u>Location</u>	<u>Position</u>	<u>Cuff Size</u>	<u>Provider</u>
07/28/2019	06:57 NYM	138/80				[REDACTED] RN

**SaO2:**

<u>Date</u>	<u>Time</u>	<u>Value(%)</u>	<u>Air</u>	<u>Provider</u>
07/28/2019	06:57 NYM	98		[REDACTED] RN

**Exam:**

**General**

**Affect**

Yes: Cooperative

**Appearance**

Yes: Appears Well, Alert and Oriented x 3

**Skin**

**General**

Yes: Within Normal Limits, Dry, Skin Intact

**Head**

**General**

Yes: Symmetry of Motor Function, Atraumatic/Normocephalic

No: Facial Asymmetry, Battle's Sign, Raccoon Eyes, Deformity

**Eyes**

**General**

Yes: PERRLA, Extraocular Movements Intact

**Face**

**General**

Yes: Symmetric

Inmate Name: EPSTEIN, JEFFREY EDWARD

Date of Birth: 01/20/1953

Encounter Date: 07/28/2019 06:51

Sex: M Race: WHITE  
Provider: [REDACTED] RN

Reg #: 76318-054

Facility: NYM

Unit: H01

**Exam:**

No: Ecchymosis, Numbness, Swelling, Periorbital Edema

**Neck**

**General**

Yes: Abrasion(s)

**Pulmonary**

**Observation/Inspection**

Yes: Within Normal Limits

No: Respiratory Distress, Tachypnea, Hyperventilation

**Cardiovascular**

**Observation**

Yes: Normal Rate

**Musculoskeletal**

**Shoulder**

Yes: Full Range of Motion R, Symmetric R

No: Swelling R, Inflammation R

**Humerus**

Yes: Within Normal Limits R

**Elbow**

Yes: Normal Exam R, Full Range of Motion R, Non-Tender on Palpation R

**Radius / Ulna**

Yes: Normal Exam R, Full Range of Motion R

**Wrist/Hand/Fingers**

Yes: Full Range of Motion R, Non-Tender on Palpation R, Swelling R

No: Inflammation R, Ecchymosis R, Erythema R, Tenderness R, Laceration(s) R, Abrasion(s) R, Contusion(s) R

**ROS Comments**

Received inmate AAOX3 in no acute distress, speaking in full sentences ambulating independently C/O Right arm numbness after waking up from "sleeping on my side" that has since subsided. Inmate interviewed in psych obs through the slot. V/S noted WNL, RR even and unlabored, no neurological deficits noted, no facial droop slurred speech or dysphagia, Inmate with Full ROM to all extremities with 4/4 strength bilaterally, slight swelling noted to right phalanges when compared to left, no edema, erythema or ecchymosis noted. Denies any pain numbness or tingling at this time. Denies any Chest pain, Headache, Dizziness, SOB or Blurred vision. Eyes PERRLA. MD on Call notified, Re-evaluate this evening or sooner if S/S persist.

**ASSESSMENT:**

Alteration in comfort

**PLAN:**

**Disposition:**

Follow-up at Sick Call as Needed

Notify Medical Duty Officer

**Patient Education Topics:**

Date Initiated Format  
07/28/2019 Counseling

Handout/Topic  
Plan of Care

Provider  
[REDACTED]

Outcome  
Verbalizes Understanding

Inmate Name: EPSTEIN, JEFFREY EDWARD

Date of Birth: 01/20/1953

Encounter Date: 07/28/2019 06:51

Sex: M Race: WHITE

Provider: [REDACTED] RN

Reg #: 76318-054

Facility: NYM

Unit: H01

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<u>Date Initiated</u>	<u>Format</u>	<u>Handout/Topic</u>	<u>Provider</u>	<u>Outcome</u>
Copay Required: No		Cosign Required: Yes		
Telephone/Verbal Order: No				
Completed by [REDACTED] RN on 07/28/2019 07:22				
Requested to be cosigned by [REDACTED] MD.				
Cosign documentation will be displayed on the following page.				

**Bureau of Prisons  
Health Services  
Cosign/Review**

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Inmate Name: EPSTEIN, JEFFREY EDWARD  
Date of Birth: 01/20/1953  
Encounter Date: 07/28/2019 06:51

Sex: M  
Provider: [REDACTED] RN

Reg #: 76318-054  
Race: WHITE  
Facility: NYM

---

Cosigned by [REDACTED] MD on 07/28/2019 20:51.

**Bureau of Prisons  
Health Services  
Clinical Encounter - Administrative Note**

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Inmate Name:	EPSTEIN, JEFFREY EDWARD	Sex:	M	Race:	WHITE	Reg #:	76318-054
Date of Birth:	01/20/1953	Provider:	[REDACTED]			Facility:	NYM
Note Date:	07/26/2019 08:57					Unit:	H01

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Cosign Note - Clinical Encounter Cosign encounter performed at Health Services.

**Administrative Notes:**

**ADMINISTRATIVE NOTE 1**      Provider: [REDACTED] MD

THE MLP NOTIFIED THE OP LT OF THE INMATE STATEMENT REGARDING WHAT HAPPENED TO HIM 2 NIGHTS AGO.

**New Medication Orders:**

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
	Docusate Sodium Capsule	07/26/2019 08:57	TAKE ONE 100 MG CAP Orally - Two Times a Day x 180 day(s)

Indication: Constipation, unspecified

Copay Required: No      Cosign Required: No

Telephone/Verbal Order: No

Completed by [REDACTED] MD on 07/26/2019 08:58

**Bureau of Prisons  
Health Services  
Clinical Encounter - Administrative Note**

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Inmate Name:	EPSTEIN, JEFFREY EDWARD	Sex:	M	Race:	WHITE	Reg #:	76318-054
Date of Birth:	01/20/1953	Provider:	[REDACTED]	MD		Facility:	NYM
Note Date:	07/24/2019 16:10					Unit:	H01

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Cosign Note - Clinical Encounter Cosign encounter performed at Health Services.

**Administrative Notes:**

**ADMINISTRATIVE NOTE 1**      Provider: [REDACTED] MD

THE MLP NOTIFIED THE OP LT OF THE INMATE STATEMENT REGARDING WHAT HAPPENED TO HIM 2 NIGHTS AGO.

Copay Required: No      Cosign Required: No

Telephone/Verbal Order: No

Completed by [REDACTED] MD on 07/24/2019 16:12

Spec Amendment

**Bureau of Prisons  
Health Services  
Clinical Encounter - Administrative Note**

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Inmate Name:	EPSTEIN, JEFFREY EDWARD	Sex:	M	Race:	WHITE	Reg #:	76318-054
Date of Birth:	01/20/1953	Provider:	[REDACTED]			Facility:	NYM
Note Date:	07/24/2019 16:10					Unit:	H01

---

Cosign Note - Clinical Encounter Cosign encounter performed at Health Services.

**Administrative Notes:**

**ADMINISTRATIVE NOTE 1**      Provider: [REDACTED] MD

THE MLP NOTIFIED THE OP LT OF THE INMATE STATEMENT REGARDING WHAT HAPPENED TO HIM 2 NIGHTS AGO.

Copay Required: No      Cosign Required: No

Telephone/Verbal Order: No

Completed by [REDACTED] MD on 07/24/2019 16:12

Spec Amendment

**Bureau of Prisons  
Health Services  
See Amendment**

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Inmate Name: EPSTEIN, JEFFREY EDWARD  
Date of Birth: 01/20/1953  
Encounter Date: 07/26/2019 08:57

Sex: M

Reg #: 76318-054  
Race: WHITE  
Facility: NYM

---

Amendment made to this note by [REDACTED] MD on 07/26/2019 08:58.

**Bureau of Prisons  
Health Services  
Clinical Encounter - Administrative Note**

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Inmate Name:	EPSTEIN, JEFFREY EDWARD	Sex:	M	Race:	WHITE	Reg #:	76318-054
Date of Birth:	01/20/1953	Provider:	[REDACTED]	MD		Facility:	NYM
Note Date:	07/24/2019 15:10					Unit:	H01

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Admin Note - General Administrative Note encounter performed at Health Services.

**Administrative Notes:**

**ADMINISTRATIVE NOTE 1**                      Provider: [REDACTED] MD

PATIENT WAS OFFERED TO HAVE AN OPTOMETRIST EVALUATION. HE REFUSED. REFUSAL FORM SIGNED.

Copay Required: No                                      Cosign Required: No

Telephone/Verbal Order: No

Completed by [REDACTED] MD on 07/24/2019 15:17

**Bureau of Prisons  
Health Services  
Clinical Encounter**

Inmate Name: EPSTEIN, JEFFREY EDWARD  
Date of Birth: 01/20/1953  
Encounter Date: 07/24/2019 13:08

Sex: M Race: WHITE  
Provider: [REDACTED] MLP

Reg #: 76318-054  
Facility: NYM  
Unit: H01

Mid Level Provider - Follow up Visit encounter performed at Receiving & Discharge.

**SUBJECTIVE:**

**COMPLAINT 1**      Provider: [REDACTED] MLP

**Chief Complaint:** Other Problem

**Subjective:** I still do not want to talk about. But, between you and me. I think my room mate had to do with what happened to me. Do not ask me. I am not going to say anything.

**Pain:** No

**OBJECTIVE:**

**Temperature:**

<u>Date</u>	<u>Time</u>	<u>Fahrenheit</u>	<u>Celsius</u>	<u>Location</u>	<u>Provider</u>
07/24/2019	13:12 NYM	97.8	36.6	Oral	[REDACTED] MLP

**Pulse:**

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Location</u>	<u>Rhythm</u>	<u>Provider</u>
07/24/2019	13:12	83	Via Machine	Regular	[REDACTED] MLP

**Blood Pressure:**

<u>Date</u>	<u>Time</u>	<u>Value</u>	<u>Location</u>	<u>Position</u>	<u>Cuff Size</u>	<u>Provider</u>
07/24/2019	13:12 NYM	132/89	Right Arm	Sitting	Adult-regular	[REDACTED] MLP

**SaO2:**

<u>Date</u>	<u>Time</u>	<u>Value(%)</u>	<u>Air</u>	<u>Provider</u>
07/24/2019	13:12 NYM	96	Room Air	[REDACTED] MLP

**Exam:**

**General**

**Affect**

Yes: Cooperative

**Appearance**

Yes: Appears Well, Alert and Oriented x 3

No: Appears Distressed, Appears in Pain

**Exam Comments**

Follow up evaluation done for inmate Epstein.

He does not look in any pain or distress.

He still has the erythema around his neck. Central part of this erythema has some abrasion. Patient does not complaint of any respiratory problem or distress. He still does not want to explain how the skin injury on his neck happed. he insinuates that injuries on his neck have to do with his room mate. But does not want to talk about it.

**ASSESSMENT:**

Injury, unspecified, T1490 - Current

**PLAN:**

**Disposition:**

Inmate Name: EPSTEIN, JEFFREY EDWARD

Date of Birth: 01/20/1953

Encounter Date: 07/24/2019 13:08

Sex: M Race: WHITE

Provider: [REDACTED] MLP

Reg #: 76318-054

Facility: NYM

Unit: H01

Follow-up at Sick Call as Needed

**Patient Education Topics:**

<u>Date Initiated</u>	<u>Format</u>	<u>Handout/Topic</u>	<u>Provider</u>	<u>Outcome</u>
07/24/2019	Counseling	Access to Care	[REDACTED]	Verbalizes Understanding
07/24/2019	Counseling	Preventive Health	[REDACTED]	Verbalizes Understanding

**Copay Required:** No

**Cosign Required:** Yes

**Telephone/Verbal Order:** No

Completed by [REDACTED] MLP on 07/24/2019 13:24

Requested to be cosigned by [REDACTED] MD.

Cosign documentation will be displayed on the following page.

**Bureau of Prisons  
Health Services  
Cosign/Review**

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Inmate Name:	EPSTEIN, JEFFREY EDWARD	Sex:	M	Reg #:	76318-054
Date of Birth:	01/20/1953	Provider:	[REDACTED], MLP	Race:	WHITE
Encounter Date:	07/24/2019 13:08			Facility:	NYM

---

Cosigned with New Encounter Note by [REDACTED] MD on 07/24/2019 16:10.

**Bureau of Prisons  
Health Services  
Clinical Encounter**

Inmate Name: EPSTEIN, JEFFREY EDWARD  
Date of Birth: 01/20/1953  
Encounter Date: 07/23/2019 06:20

Sex: M Race: WHITE  
Provider: [REDACTED] MLP

Reg #: 76318-054  
Facility: NYM  
Unit: H01

Injury Assessment - Non-work related encounter performed at Health Services.

**SUBJECTIVE:**

**INJURY 1** Provider: [REDACTED] MLP

Date of Injury: 07/23/2019 01:27 Date Reported for Treatment: 07/23/2019 08:25

Work Related: No Work Assignment: UNASSG

Pain Location:

Pain Scale: 0

Pain Qualities:

Where Did Injury Happen (Be specific as to location):

Special Housing Unit Z05-Cell 124 L

Cause of Injury (Inmate's Statement of how injury occurred):

"I do not know. Just went to drink a little water and wake up snorting".

Symptoms (as reported by inmate):

None

**OBJECTIVE:**

**Temperature:**

Date	Time	Fahrenheit	Celsius	Location	Provider
07/23/2019	06:30 NYM	97.5	36.4	Oral	[REDACTED] MLP

**Pulse:**

Date	Time	Rate Per Minute	Location	Rhythm	Provider
07/23/2019	06:30	92	Via Machine	Regular	[REDACTED] MLP

**Respirations:**

Date	Time	Rate Per Minute	Provider
07/23/2019	06:30 NYM	16	[REDACTED] MLP

**Blood Pressure:**

Date	Time	Value	Location	Position	Cuff Size	Provider
07/23/2019	06:30 NYM	140/85	Right Arm	Sitting	Adult-regular	[REDACTED] MLP

**SaO2:**

Date	Time	Value(%)	Air	Provider
07/23/2019	06:30 NYM	96	Room Air	[REDACTED] MLP

**Exam:**

**General**

**Affect**

Yes: Cooperative

**Appearance**

Yes: Appears Well, Alert and Oriented x 3

No: Appears Distressed, Lethargic, Dyspneic, Appears in Pain, Pallor, Cyanotic, Diaphoretic, Disheveled,

Inmate Name: EPSTEIN, JEFFREY EDWARD

Date of Birth: 01/20/1953

Encounter Date: 07/23/2019 06:20

Sex: M Race: WHITE

Provider: [REDACTED] MLP

Reg #: 76318-054

Facility: NYM

Unit: H01

**Exam:**

Acutely Ill

**Pulmonary**

**Auscultation**

Yes: Clear to Auscultation, Vesicular Breath Sounds Bilaterally

No: Crackles, Rhonchi, Wheezing

**Exam Comments**

Inmate for injury report as requested by Operational Lt.

He is ambulatory, oriented x 3. In not apparent distress, smiling during this clinical encounter. Alleges, that he does not know what happened. Can not explain the marks on his neck. Responded: "I don't know".

He does not want to talk of the events leading to the marks on his neck.

He does not look in any distress or pain.

Has an circular line of erythema at the base of the neck. Reaching 2/3 of the neck circumference, 2 inches wide, sparing the back of the neck. Has one section of this erythema in the front with marks of friction.

No inflammation, no deformities, no hematomas, no lacerations, no tenderness. Patient moving his neck without any restriction. Denies having any pain or discomfort. Denies any respiratory problem.

Has another small erythema on left knee about 2cm in diameter(mild).

As per information from custody staff inmate Epstein was found in his cell with a rope around his neck and sitting on the floor.

Inmate is currently placed on suicide watch.

**ASSESSMENT:**

Injury, unspecified, T1490 - Current - *R/O self inflicted injuries.*

**PLAN:**

**Disposition:**

Follow-up at Sick Call as Needed

Placed on Suicide Watch

Follow-up in 2-4 Hours

**Other:**

For follow up with psychology service.

**Patient Education Topics:**

<u>Date Initiated</u>	<u>Format</u>	<u>Handout/Topic</u>	<u>Provider</u>	<u>Outcome</u>
07/23/2019	Counseling	Access to Care	[REDACTED]	Verbalizes Understanding
07/23/2019	Counseling	Plan of Care	[REDACTED]	Verbalizes Understanding

Copay Required: No

Cosign Required: Yes

Telephone/Verbal Order: No

Completed by [REDACTED] MLP on 07/23/2019 09:05

Requested to be cosigned by [REDACTED] MD.

Cosign documentation will be displayed on the following page.

**Bureau of Prisons  
Health Services  
Cosign/Review**

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Inmate Name: EPSTEIN, JEFFREY EDWARD  
Date of Birth: 01/20/1953  
Encounter Date: 07/23/2019 06:20

Sex: M  
Provider: [REDACTED], MLP

Reg #: 76318-054  
Race: WHITE  
Facility: NYM

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Cosigned by [REDACTED] MD on 07/23/2019 15:44.

**Bureau of Prisons  
Health Services  
Clinical Encounter**

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Inmate Name: EPSTEIN, JEFFREY EDWARD	Sex: M Race: WHITE	Reg #: 76318-054
Date of Birth: 01/20/1953	Provider: [REDACTED] MD	Facility: NYM
Encounter Date: 07/14/2019 17:36		Unit: Z05

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Chronic Care - 14 Day Physician Eval encounter performed at Health Services.

**SUBJECTIVE:**

**COMPLAINT 1**      Provider: [REDACTED] MD

**Chief Complaint:** ENDO/LIPID

**Subjective:** 66 YR OLD WHITE MALE WITH HX OF HYPERTRIGLYCERIDEMIA X 5 YEARS ON VASCEPA FOR 1 YEAR. STATES TRIGL WAS 800 , NOW 431. STATES HE COULD NOT TOLERATE OTHER ANTI-TRIGLYCERIDE MEDS DUE TO THEIR GI SIDE EFFECTS. HX OF OBSTRUCTIVE SLEEP APNEA X 5 YEARS FOR WHICH HE USED A CPAP MACHINE. STATES HE HAD HIS CPAP MACHINE WITH HIM WHEN HE ARRESTED. STATES THE FBI LOKELY HAS L4 - L5 SEVERE STENOSIS CASUING NUMBNESS AND SHOOTING PAIN IN THE LOWER EXTREMITIES. SURGICAL HX: NONE MENTAL HEALTH HX: NONE

**Pain:** Yes

**Pain Assessment**

**Date:** 07/12/2019 13:25  
**Location:** Back-Middle  
**Quality of Pain:** Shooting  
**Pain Scale:** 5  
**Intervention:** MEDROL DOSE PACK  
**Trauma Date/Year:**  
**Injury:**  
**Mechanism:**  
**Onset:** 5+ Years  
**Duration:** 5+ Years  
**Exacerbating Factors:** NO EXERCISE  
**Relieving Factors:** MEDROL DOSE PACK  
**Reason Not Done:**  
**Comments:**

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**Seen for clinic(s):** Orthopedic/Rheumatology, Pulmonary/Respiratory, Endocrine/Lipid  
**Added to clinic(s):** Orthopedic/Rheumatology, Pulmonary/Respiratory, Endocrine/Lipid

**OBJECTIVE:**

**Exam:**

**General**

**Appearance**

Yes: Appears Well, Alert and Oriented x 3

No: Appears Distressed, Dyspneic, Appears in Pain, Writhing in Pain, Pale, Pallor, Cyanotic, Diaphoretic, Disheveled, Unkempt, Acutely Ill

**Nutrition**

No: Appears Obese

Inmate Name: EPSTEIN, JEFFREY EDWARD	Sex: M	Race: WHITE	Reg #: 76318-054
Date of Birth: 01/20/1953	Provider: [REDACTED]	MD	Facility: NYM
Encounter Date: 07/14/2019 17:36			Unit: Z05

**Exam:**

**Eyes**

**General**

Yes: PERRLA, Extraocular Movements Intact

**Pulmonary**

**Auscultation**

Yes: Clear to Auscultation

**Cardiovascular**

**Auscultation**

Yes: Regular Rate and Rhythm (RRR), Normal S1 and S2

No: M/R/G

**Abdomen**

**Auscultation**

Yes: Normo-Active Bowel Sounds

**Palpation**

Yes: Within Normal Limits

**Musculoskeletal**

**Tibia / Fibula**

No: Edema

**Back**

Yes: Tenderness

**Neurologic**

**Cranial Nerves (CN)**

Yes: Within Normal Limits

**Motor System-General**

Yes: Normal Exam

**ASSESSMENT:**

- Constipation, unspecified, K5900 - Current
- Hyperlipidemia, unspecified, E785 - Current
- Low back pain, M545 - Current
- Neuralgia and neuritis, unspecified, M792 - Current
- Sleep apnea, G4730 - Current

**PLAN:**

**New Medication Orders:**

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
	Omega 3 ( Vascepa) 1 GM Capsule	07/14/2019 17:36	TAKE 2 CAPS Orally - Two Times a Day x 180 day(s) -- TAKE WITH FOOD.

Indication: Hyperlipidemia, unspecified

**New Laboratory Requests:**

<u>Details</u>	<u>Frequency</u>	<u>Due Date</u>	<u>Priority</u>
Lab Tests-H-Hemoglobin A1C	One Time	10/10/2019 00:00	Routine
Lab Tests-L-Lipid Profile			

**Additional Information:**

