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Medical Record Summaries, Made Clear.

Summary

Summary Type: Reference Pack Summary Enhancement

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HIPAA

Disclaimer & Agreement Summary

Purpose and Scope

This document is an informational summary of medical records prepared by **YourMedReview LLC** ("the Company") under a fully executed **Terms & Conditions** and **Business Associate Agreement (BAA)** between the Company and the User.

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• Completed summaries are retained for thirty (30) days solely to verify delivery, after which they are permanently deleted.

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I. Medication History (Reference Pack)

(January 2021 – September 2025)

A. Current Long-Term Medications (as of September 2025)

Medication / Dosage	Indication	Start Date	Status / Response	Page Reference
Metformin 1000 mg BID	Type 2 Diabetes Mellitus	2018 (continued)	Maintained A1C 6.9–8.2 %; well-tolerated.	(41, 453, 748)
Lisinopril 20 mg daily	Hypertension	2018 (continued)	Consistent BP control (~122/74 mmHg).	(46, 681)
Gabapentin 400 mg TID	Neuropathic Pain / Radiculopathy	Aug 2021	Reduces nerve pain ≈30 %; mild sedation.	(183, 567, 720)
Duloxetine 60 mg daily	Neuropathic Pain & Depression	Feb 2022	Improved mood and pain modulation (~20 % relief).	(275, 425, 720)
Sertraline 100 mg daily	Depression / Anxiety	Jan 2023	Improved sleep and affect; no side effects.	(471, 649, 865)
Tramadol 50 mg q6h PRN	Breakthrough Pain	May 2024	Used intermittently; effective for flares.	(657–672)
Hydrochlorothiazide 25 mg daily	Adjunct for BP control	2020 (continued)	Maintains stable BP; no electrolyte issues.	(52, 742)

B. Previous / Trial Medications

Medication / Dosage	Indication	Date Range	Outcome / Reason Discontinued	Page Reference
Cyclobenzaprine 5 mg TID PRN	Muscle spasm (acute injury)	May–Jul 2021	Caused drowsiness; stopped after initial phase.	(120–128)
Naproxen 500 mg BID	Acute pain post-fall	May–Aug 2021	Gastrointestinal irritation; replaced with OTC NSAIDs.	(119, 150)
Epidural Steroid Injections (3 total)	Lumbar radiculopathy	Oct 2021 – Oct 2024	Temporary 30–40 % relief; no lasting effect.	(243, 269, 704)

Medication / Dosage	Indication	Date Range	Outcome / Reason Discontinued	Page Reference
Duloxetine 30 mg trial dose	Neuropathic pain	Jan–Feb 2022	Dose titrated up for better response.	(275)
Sertraline 50 mg daily	Depression initiation phase	Jan–Apr 2023	Dose increased to 100 mg for partial response.	(471–480)
NSAIDs (OTC Ibuprofen 800 mg PRN)	Pain control throughout course	2021 – Present	Continued adjunct; intermittent use.	(345, 657)

C. Medication Effect and Tolerance Summary

- **Analgesics / Neuropathic Agents:** Gabapentin and Duloxetine produce moderate relief; no evidence of opioid dependence.
- **Antidepressants:** Sertraline well-tolerated and effective for secondary depression.
- **Antihypertensives / Diabetes Control:** Metformin and Lisinopril remain cornerstones of chronic disease management with consistent laboratory stability.
- **Side Effects:** Occasional sedation (Gabapentin), dry mouth (Duloxetine); no serious adverse reactions.
- **Polypharmacy Review:** No drug-drug interactions identified; regimen reviewed semi-annually by primary care.

D. Therapeutic Notes

- Patient remains highly compliant with daily medication regimen; pill counts and refill logs consistent through 2025 (748–755).
- Pain management adjustments followed evidence-based sequencing before considering invasive procedures.
- Current combination therapy has optimized symptom stability without progression of pharmacologic risk.

II. Provider History (Reference Pack)

(January 2021 – September 2025)

A. Treating and Consulting Providers

Provider / Facility	Specialty / Role	Date Range of Care	Key Involvement / Notes	Page Reference
Dr. L. Hart, MD – Lakeside Primary Care	Primary Care / Internal Medicine	Jan 2021 – Present	Oversaw chronic conditions (diabetes, hypertension); coordinated referrals to ortho, pain, and psych; maintained long-term medical leave documentation.	(41–52, 681–875)
Dr. R. Patel, MD – Metro Orthopedics	Orthopedic Spine Surgery	Sept 2021 – Jul 2025	Evaluated post-injury back pain; performed exams, reviewed MRIs; administered first epidural; discussed but deferred surgical options.	(231–617, 812)
Dr. J. Owens, DO – Pain Management Specialists	Interventional Pain Medicine	Jan 2022 – Aug 2025	Managed chronic lumbar radiculopathy; performed multiple epidurals; adjusted Gabapentin / Duloxetine dosing; monitored opioid use; considered stimulator trial.	(262–275, 704–718)
Dr. R. Lewis, MD – Endocrine Associates	Endocrinology	Mar 2023 – Feb 2025	Monitored diabetes and metabolic effects of limited activity; optimized Metformin dosing; reviewed A1C trends.	(453, 748)
Dr. S. Nguyen, PhD / LP – Behavioral Health Services	Clinical Psychology / CBT	Feb 2023 – Oct 2025	Provided weekly CBT; coordinated with psychiatry for medication adjustments; noted improved coping and mood stabilization.	(471–498, 865)

Provider / Facility	Specialty / Role	Date Range of Care	Key Involvement / Notes	Page Reference
Dr. T. Miller, MD – Psychiatric Associates	Psychiatry / Medication Management	Jan 2023 – Sept 2025	Managed antidepressant therapy (Sertraline); documented reduction in depressive symptoms; supported ongoing disability claim.	(471–498, 649–865)
ABC Physical Therapy Center	Physical Therapy / Rehabilitation	Jul 2021 – May 2024	Conducted outpatient and aquatic therapy programs; detailed functional tolerance, pain scores, and limited improvement.	(194–215, 628–642)
Metro General Hospital	Acute Care / Emergency Department	May 2021 & Jun 2022	Treated initial fall injury and later chest-pain admission; provided diagnostic imaging and short-term PT assessment.	(112–128, 301–338)
Advanced Imaging Center	Radiology / Diagnostic Services	2021 – 2025	Performed serial MRIs (2021, 2022, 2024, 2025); findings document degenerative progression then stabilization.	(177, 243, 603–610, 835–840)
ABC Pain Psychology Group	Behavioral Pain Rehabilitation	Oct 2022 – Dec 2024	Provided cognitive-behavioral pain coping sessions; integrated biofeedback; noted partial improvement.	(392–498, 649)
Occupational Health & Vocational Services	Disability / Work Capacity Review	2021 – 2025	Completed FCEs (2023, 2025); confirmed sedentary-light functional status; unable to return to prior employment.	(505–519, 733)
Primary Care Nursing Team	RN / Clinical Support	2021 – 2025	Coordinated refills, vitals, and patient communication; ensured medication compliance documentation.	(681–755)
Pharmacy Records – CVS and OptumRx	Dispensing Pharmacy	2021 – 2025	Dispensed chronic medications; refill adherence consistent; no controlled-substance discrepancies.	(720–755)

B. Provider Interaction Summary

- **Primary coordination:** Dr. Hart (PCP) served as the central medical coordinator and certifying physician for disability paperwork.
- **Specialist network:** Orthopedic and pain-management specialists managed the spine condition; psychiatry and psychology addressed secondary depression and coping.
- **Therapy continuum:** PT records demonstrate compliance with all recommended rehabilitation programs, including aquatic therapy and FCE evaluations.
- **Continuity:** Documentation shows unbroken medical follow-up from 2021–2025 with consistent treatment philosophy emphasizing conservative management and symptom stability.

III. Thank You & Next Steps

(Prepared by YourMedReview LLC)

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