



Case Presentation Form

Presenting Provider Name: Coddy Lehman

Presentation Date: 4.2.20

Patient Biological Gender: Male

Patient Age: 80 yr/old

Race:

American Indian/Alaskan
Native Asian

Native Hawaiian/Pacific
Islander

Multi-racial Other

Prefer not to say

Black/African American

White/Caucasian

Ethnicity:

Hispanic/Latino

Not Hispanic/Latino

Prefer not to say

Topics to discuss/areas of concern:

Team would like ideas on how to help support member to go back living in his preferred environment. Member started cancer treatment started 01/14/2011 after a routine colonoscopy screening. Member was not symptomatic. Member is very positive and has a great demeanor which tremendously helped throughout his treatments. Member has now been cancer free since 2015. Currently receiving Skilled Care Services but is looking forward to receiving his services in IDD group home living again soon.

Pertinent Medical History:

Diagnosis:

Moderate I/DD

Glucose intolerance

Osteoarthritis in hips and bilateral knees

Varicose veins

Chronic venous insufficiency

Environmental allergies

Hypertension

Hyperlipidemia

Morbid Obesity

Periodontal Disease

Gastroesophageal Reflux disease w/out esophagitis

Colectomy for Colon Cancer

Colon Cancer, stage III

Anemia

BPH without urinary obstruction

Incontinence

Obstructive sleep apnea / CPAP use

Congestive heart failure



Hx prostatic cancer (free of all cancers as of 05/02/2018) **Case Presentation Form**

Left shoulder rotator cuff syndrome and frozen shoulder
History of small bowel blockage
Abdominal hernia
Cataracts bilateral eyes
Idiopathic anemia

Surgical Hx:
Hx of incisional hernia repair
Hx of Appendectomy
Hx of colon resection
Hx of prostate biopsy
H/O colonoscopy
Hx of prostatectomy

Psychiatric History: None noted

Diagnosis:

Medication summary:



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DICLOFENAC	GEL 3% TD
TAMSULOSIN	CAP 0.4MG OR
METRONIDAZOL	TAB 500MG OR
LACTOBACILLU	TAB OR
DEBROX	SOL 6.5% OT OT
DESITIN	CRE 13% EX
NYSTATIN	POW XX
MYLANTA	SUS OR
METOLAZONE	TAB 2.5MG OR
FLUTICASONE	SPR 50MCG NA
IRON	TAB 325MG OR
MIRALAX	POW 3350 NF OR
VITAMIN D3	CAP 1000UNIT OR
TRIPLE ANTIB	OIN EX
MAALOX MAX	SUS OR
ACETAMIN	TAB 325MG OR
MYRBETRIQ	TAB 50MG OR
CALCIUM	TAB 600MG OR
OXYBUTYNIN	TAB 5MG OR
MILK OF MAGN	SUS OR

ROBITUSSIN	LIQ CGH/CLD OR
TRAMADOL HCL	TAB 100MG ER OR
COZAAR	TAB 100MG OR
DEXILANT	CAP 60MG DR OR
POT CL MICRO	TAB 20MEQ ER OR
LASIX	TAB 40MG OR

Trauma History: (Age of significant traumas and brief summary) N/A

Details:

Social History: (Current living situation, employment status, pertinent legal history, level of education, relationship status, children, support system, etc.)

Details:

Trauma: N/A



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School: None

Employment: Currently retired – previously was contracted with an IDD provider for employment – sewing machine work, janitorial cleaning crew

Pertinent Lab Work: N/A

Summary of recent Urine Toxicology (if applicable): N/A

Substance Use History, if applicable: N/A