

- (13)(i) Objective.** Provide clinical summaries to patients for each office visit.
(ii) Measure. Clinical summaries provided to patients for at least 80 percent of all office visits.

Eastside Internal Medicine

120 NE Valley View Drive Gresham, OR 97030
 503-665-1010 Fax: 503-665-1011

March 16, 2010

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Chart Summary

Don C. Bassett

Male DOB: 06/12/1947

Home: 503-629-5541 Work: 503-692-8955

80-TEST011

Ins: BHI (Futura) Grp: BHI8654

Patient Information

Name: Don C. Bassett **Home Phone:** 503-629-5541
Address: 12155 SW Broadway **Work Phone:** 503-692-8955
 Beaverton, OR 97005 USA
Patient ID: 80-TEST011 **Fax:** 503-692-8956
Birth Date: 06/12/1947 **Status:** Active
Gender: Male **Marital Status:** Married
Contact By: Home Phone **Race:** White
Soc Sec No: 543-34-5621 **Language:** English
Resp Prov: Kelly G. Starr MD **MRN:** MR-000-002
Referred by: **Emp. Status:** Full-time
Email: dbassett@aol.com **Sens Chart:** No
Home LOC: Eastside Internal Medicine **External ID:** MR-000-002

Problems

CONGESTIVE HEART FAILURE (ICD-428.0)
 EFFUSION, PLEURAL (ICD-511.9)
 EDEMA (ICD-782.3)
 Sx of HOARSE VOICE QUALITY

Medications

ZAROXOLYN TAB 5MG (METOLAZONE) 1 po qd
 Last Refill: #90 x 1, 09/27/2003, Kelly G. Starr MD
 FUROSEMIDE TABS 20 MG (FUROSEMIDE) 1 po bid
 Last Refill: #60 x 1, 09/27/2003, Kelly G. Starr MD

Directives

Allergies and Adverse Reactions (! = critical)

This patient has no known allergies or adverse reactions.

Viewer: 11/17/2009 - Clinical Summary: Imported CCD

Patient name: **Don C. Bassett** **Attach**

Properties: **Clinical Summary at SOUTH on 11/17/2009 1:30 PM by Harry S. Winston MD**

Doc ID: **43**

Eastside Internal Medicine Clinical Summary on November 17, 2009 by Harry S. Winston MD

Don C. Bassett
 Gender: Male DOB: June 12, 1947 MRN: MR-000-002

Conditions or Problems

Problem Name	Problem Code	Onset Date	Status	Entry Date
CONGESTIVE HEART FAILURE	ICD-428.0	2002/04/03	Active	2003/09/27
Symptoms of HOARSE VOICE QUALITY		2002/04/03		2003/09/27
EFFUSION, PLEURAL	ICD-511.9	2003/03/25	Active	2003/09/27
EDEMA	ICD-782.3	2003/03/25	Active	2003/09/27

Allergies, Adverse Reactions, Alerts

No known active allergies or adverse reactions

Medication List

Medication	Instructions	Start Date	Stop Date	Product Name	NDC	Generic Name
ZAROXOLYN TAB 5MG	1 po qd	2002/04/03		ZAROXOLYN	00585085071	METOLAZONE
FUROSEMIDE TABS 20 MG	1 po bid	2002/04/03		FUROSEMIDE	00005370823	FUROSEMIDE

Authored by: Harry S. Winston MD on November 17, 2009

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