

Dr. Schwartz - New Patient Visit

Patient Name: Berns , Mary

DOB: 1958-09-06

Age: 63 **Height:** 5'7" **Current Weight:** 214

BMI: 33.59 **Highest Weight:** **When:**

Medical History: Hashimotos, sinus infections/post nasal drip, osteoporosis, obesity, arthritis, acid reflux

Surgical History: Torn meniscus, Broken ankle (1995), Breast tissue removed under left arm

Medications: Omeprazole, Levothyroxine and Liothyroxine

[Medications were reviewed]

Social History: 0 Packs per day. If quit, when N/A. Recreational Drugs: No

Allergies: Penicillin, recent hives from cephalexin and

Women: Period: 15 Gravita: 3 Para: 3 Menopause: 42 Last Mammogram: 2019

Family History: None

Occupation:

Other Information:

Referring Physician: Patient has provider for hormone testing and treatment. Her name is Carol Brinkman. Her primary care doctor that I go to for illnesses and preventative care is Dr. Omann at Allina Clinic in Annandale, MN.

Phone number: Carol Brinkman: 320-227-5000

Dr. Omann: 320-274-3744

Fax number: Carol Brinkman fax :320-227-5025

Allina Clinic fax: 320-274-8194

Pharmacy Name: Thrifty White Pharmacy

246 Elm Street West, Annandale, MN 55302

Phone: 320-274-3062. Fax: 320-274-6546

Patient Phone: 320-492-7404

Patient Email: Mary.berns@gmail.com

CC: The patient is seeking a consultation for diagnosis and treatment of lipedema by Dr. Schwartz.

History of Present Illness

Mary Berns is a 63 year old woman who presents for care of lipedema. The patient's medical and surgical histories are not significant. She has a prior diagnosis of lipedema by Dr. Karen Herbst in August 2021. Patient is new to lipedema.

Dr. Herbst agrees with lipedema reduction surgery.

The patient reports her daughter also has lipedema and has had surgery in Twin Cities (doctor flew in). Patient has done MLD for six weeks and wears compression, she is unsure of whether or not it is helping. Patient experiences swelling in her ankles. Her legs and inner knees are her biggest area of concern. They feel like tree trunks and inhibit her movement. Patient did a venous ultrasound yesterday.

Patient would also like breast reduction.

Previous Diagnosis with Lipedema: Yes

By Whom: Dr. Herbst, August 2021

Lymphedema: Lipolymphedema diagnosed by Dr. Herbst

Onset:

Swelling worse during summer when standing?

Areas with lipedema are unaffected by caloric restriction?

Limbs tight and heavy especially at end of day and even with elevation?

Reduced ability to get around (ambulation)?

Any decrease in social activity?

Previous Conservative treatments: Compression, MLD

PT/MLD Name:

Previous Surgical Treatment: None

Diet: Keto, whole foods

Exercise: It is difficult for her to exercise, she walks when she can and uses a stationary bike

Pain

Average Daily Pain Score (1-10): 5

Worst Daily Pain Score (1-10): 5

Lowest Daily Pain Score (1-10): 5

Conservative Therapy

Compression Garments: Yes

Sequential Pneumatic Compression Pump: Yes

Manual Lymphatic Drainage Therapy: Yes

Deep Tissue Therapy: No

Weight

Any history of weight gain:

Any history of weight loss:

Ever use of the following meds

Phentermine: No

Dextroamphetamine: No

Adderall: No

Metformin: No

PHYSICAL EXAM

Weight: 214 Height: 5'7" BMI: 33.59

General: Woman in no apparent distress

Gait:
HEENT: PERRLA; EOMI; does not wear glasses
Neck: No thyroid enlargement or nodules
Heart: Regular rate and rhythm; no murmurs, rubs or gallops
Lungs: Clear to auscultation
Abdomen:
Vascular: Stemmer negative on the hands and feet; No pitting edema; no evidence of acrocyanosis

LOOSE CONNECTIVE (FAT) TISSUE EXAM

Arms

Full and tender: Yes
Wrist cuff: No
Hand fat base thumb: No
Hand fat between MCPs: No
Stemmer hand: Negative

Abdomen

Nodules palpated under the umbilicus: Yes
Tender: Yes
Nodules palpated mons pubis: Yes
Tender: Yes
Panniculus: Moderate

Legs

Mattress pattern thigh tissue: Yes
Fat overhanging knee: Yes
Lobules: Yes
Striae: Yes
Ankle cuff: Yes
Stovepipe legs: No
Enlargement around lateral malleoli: Yes
Enlargement around medial malleoli: Yes
Enlargement around Achilles: Yes
Enlargement on top of foot: Yes
Stemmer foot: Negative

Cherry angiomas: No
Bruising: Yes
Pitting edema: Yes
Fibrotic Tissue: Yes
Heavy Tissue: Yes

Vascular Exam

Telangiectasia/Spider Veins: Yes
Visible Varicose Veins: Yes

Pitting edema anterior calf right: Yes
Pitting edema ankle right: Yes
Pitting edema anterior calf left: Yes
Pitting edema ankle left: Yes

Areas of Hypothermia

Arms: Yes
Legs: Yes
Buttocks: Yes
Hips: Yes

Joints

Valgus of knees: Yes
Varus of ankles: Yes

General

Bilateral symmetric adiposity in the limbs and trunk (normal upper torso/back)
Non-Pitting edema
Tissue tender in areas affected
Negative Stemmer's Sign (not in late stages)
Cuffing at ankles or wrists
Hands and Feet Not Affected
Hypothermia of the skin
Bruising
Telangiectasias, petechiae or cherry angiomas (dilated blood vessels)

ASSESSMENT

1. R60.9 Lipedema
- Classical
2. M79. 605 Pain in the left leg
3. M79. 604 Pain in the right leg
4. M79.601 Pain in the right arm
5. M79.602 Pain in the left arm

PLAN

1. Lipedema reduction surgery anterior Legs
2. Lipedema Reduction surgery to abdomen with skin excision
3. Lipedema Reduction surgery to Posterior Legs
3. Lipedema Reduction Surgery to Trunk (hips, buttocks shelf)
- 4.. Lipedema Reduction to upper arms

ICD-10 codes

I89.0 Lymphedema
E88.2 Dercum's disease
I86.8 Varicose veins
I87.2 Chronic venous insufficiency
R60.9 Lipedema
M79. 605 Pain in the left leg
M79. 604 Pain in the right leg
M79.601 Pain in the right arm
M79.602 Pain in the left arm
Q79.62 Hypermobility Ehlers Danlos Syndrome
D89.40 Mast cell activation disease
I78.8 Other diseases of capillaries
L90.5 Scar conditions and fibrosis of skin
G89.4 Chronic pain syndrome

This visit was 60 minutes with >50% time spent counseling on lipedema, Dercum's disease and other causes of fat tissue growth and possible treatments that may help Mary.

Electronically signed by Jaime S Schwartz MD, FACS

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