

NOTICE OF CLAIM AND CLAIM FOR DAMAGES
PURSUANT TO WIS. STAT. § 893.80 (1b) & § 893.80 (1d)

RECEIVED
JUN 12 2026
WEST ALLIS
CITY ATTORNEY

To: City of West Allis
Attn: City Clerk's Office
7525 W. Greenfield Ave.
West Allis, WI 53214

Claimant:
Joanne M. Wied
5401 Mansfield Drive
Greendale, WI 53129

Driver: Esteban Perez Vieyra
c/o City of West Allis
7525 W. Greenfield Ave.
West Allis, WI 53214

CORP SERVICE
6-12-26 1:00 PM
By Pat L...

Pursuant to the provisions of § 893.80, Wis. Stats., the Claimant, Joanne M. Wied, hereby gives formal Notice of Claim and makes a claim for relief in the form of monetary damages, as set forth below.

1. That, the Claimant, Joanne M. Wied resides at 5401 Mansfield Drive, in the Village of Greendale, County of Milwaukee, Wisconsin 53129.
2. That on or about December 16, 2025, Joanne M. Wied was driving a motor vehicle and traveling northbound through the intersection of S. 68th Street and W. Hayes Avenue, in the City of West Allis, County of Milwaukee, State of Wisconsin.
3. That on that date and at said intersection, Esteban Perez Vieyra, operator of a vehicle owned by the City of West Allis, while in the course and scope of his employment, was negligent and careless in the operation of said vehicle, causing a collision with Joanne M. Wied's vehicle. Esteban Perez Vieyra was careless and negligent in failing to properly manage and control his vehicle, and failing to keep a proper lookout, among other negligent acts and omissions.
4. As a result of these circumstances, Joanne M. Wied suffered injuries to her head, neck, and back, among other injuries, and she has incurred property damage, medical costs and other injuries and damages.
5. Below is an itemized list of Joanne M. Wied's medical bills.

CITY OF WEST ALLIS

JUN 12 2026

RECEIVED

Medical Records/Bills:

Aurora Advanced Healthcare

- 12/16/2025 \$ 535.00

Froedtert & the Medical College of WI

- 12/17/2025 – 4/7/2026 \$ 15,885.00

TOTAL DAMAGES: \$ 16,420.00

Based on the above information, we demand \$16,420.00 for past medical expenses and \$20,000.00 for pain and suffering, for a total of \$36,420.00. Please contact me as soon as possible to discuss an amicable settlement of Joanne M. Wied's claim.

Dated: 6/9/2026



Sperling Law Offices LLC
Attorneys for Joanne M. Wied
By Ricardo F. Estrada
State Bar No. 1056278

Sperling Law Offices LLC
411 E. Wisconsin Ave., Suite 2300
Milwaukee, WI 53202
(414) 273-7100
restrada@milwaukeeelawfirm.com

The following document contains the requested services for Joanne M Wied (Guarantor #800044218).

<u>Charges</u>	<u>Insurance Payments</u>	<u>Patient Payments</u>	<u>Adjustments</u>	<u>Total Balance</u>
535.00	0.00	0.00	0.00	535.00

Walk-In Visit to Aurora Health Care-Greenfield (Acct #682879095)

December 16, 2025

Patient: Wied,Joanne M (MRN 1132564)

Tx Num	Code	Description	Diagnosis Code	Svc Date	Amount
--------	------	-------------	----------------	----------	--------

Charges

Charges for visit with King, Sussy L, MD

1	99203	Office or Other Outpatient Visit New PT 30 Muscle spasm of back [M62.830] or More Low Mdm Lvl 3		12/16/25	535.00
---	-------	--	--	----------	--------

Health Insurance Claim Form

AARP MEDICARE ADVANTAGE
PO BOX 31362

SALT LAKE CITY, UT 84131-0362

PICA										PICA									
1. MEDICARE ☐ (Medicare#) MEDICAID ☐ (Medicaid#) TRICARE ☐ (ID#/DoD#) CHAMPVA ☐ (Member ID#) GROUP HEALTH PLAN ☐ (ID#) FECA BLK LUNG ☐ (ID#) OTHER ☒ (ID#)										1a. INSURED'S ID NUMBER (For Program in Item 1) 912119254									
2. PATIENT'S NAME (Last Name, First Name, Middle Initial) WIED, JOANNE, M										3. PATIENT'S BIRTH DATE 12 16 1943									
5. PATIENT'S ADDRESS (No., Street) 5401 MANSFIELD DR										6. PATIENT'S RELATIONSHIP TO INSURED Self ☒ Spouse ☐ Child ☐ Other ☐									
CITY GREENDALE										CITY									
STATE WI										STATE									
ZIP CODE 53129-1355										TELEPHONE (Include Area Code) 414 421-4919									
9. OTHER INSURED'S NAME (Last Name, First Name, Middle Initial)										10. IS PATIENT'S CONDITION RELATED									
a. OTHER INSURED'S POLICY OR GROUP NUMBER										a. EMPLOYMENT? (Current or Previous) ☐ YES ☒ NO									
b. RESERVED FOR NUCC USE										b. AUTO ACCIDENT? ☒ YES ☐ NO PLACE (State) <u>WI</u>									
c. RESERVED FOR NUCC USE										c. OTHER ACCIDENT? ☐ YES ☒ NO									
d. INSURANCE PLAN NAME OR PROGRAM NAME										10d. CLAIM CODES (Designated by NUCC)									
12. PATIENT'S OR AUTHORIZED PERSON'S SIGNATURE SIGNED SIGNATURE ON FILE DATE 12 16 2025										11. INSURED'S POLICY GROUP OR FECA NUMBER 70000 a. INSURED'S BIRTH DATE SEX ☐ M ☐ F b. OTHER CLAIM ID (Designated by NUCC) c. INSURANCE PLAN NAME OR PROGRAM NAME AARP MEDICARE ADVANTAGE d. IS THERE ANOTHER HEALTH BENEFIT PLAN? ☐ YES ☒ NO If yes, complete items 9, 9a, and 9d.									
14. DATE OF CURRENT ILLNESS, INJURY, PREGNANCY (LMP) QUAL										15. OTHER QUAL 439 12 16 2025									
17. NAME OF REFERRING PROVIDER OR OTHER SOURCE DN SUSSY KING										18. HOSPITALIZATION DATES RELATED TO CURRENT FROM TO									
19. ADDITIONAL CLAIM INFORMATION (Designated by NUCC) SPEC01										20. OUTSIDE LAB? ☐ YES ☒ NO \$ CHARGES 000									
21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY Relate A-L to service line below (24E) ICD Ind. 0										22. RESUB. CODE ORIGINAL REF. NO.									
24 A. DATES OF SERVICE From To MM DD YY MM DD YY										23. PRIOR AUTHORIZATION NUMBER									
B. PLACE OF SVC. C. EMG D. PROCEDURES, SERVICES, OR SUPPLIES CPT/HCPCS MODIFIER E. DIAGNOSIS POINTER										F. \$ CHARGES G. DAYS OR UNITS H. FAM PLAN I. ID. QUAL J. RENDERING PROVIDER ID. #									
1 12 16 25 11 99203 A 535.00 1 ZZ 20700000X										NPI 1942325923									
2										NPI									
3										NPI									
4										NPI									
5										NPI									
6										NPI									
25. FEDERAL TAX I.D. 391678306 SSN EIN ☐ ☒										26. PATIENT'S ACCOUNT NO. G1606869600									
27. ACCEPT ASSIGNMENT? ☒ YES ☐ NO										28. TOTAL CHARGE \$ 535.00									
29. AMOUNT PAID \$ 0.00										30. Rsvd for NUCC Use									
31. SIGNATURE OF PHYSICIAN OR SUPPLIER INCLUDING DEGREES OR CREDENTIALS SIGNED SUSSY KING DATE 12 23 2025										32. SERVICE FACILITY LOCATION INFORMATION AURORA MEDICAL GROUP EDGER 6901 W EDGERTON AVE MILWAUKEE WI 53220-4420 a. 1427271378 b.									
33. BILLING PROVIDER INFO & PH # 800 326-2250 AURORA MEDICAL GROUP, INC 3301 W FOREST HOME AVE MILWAUKEE WI 53215-2843 a. 1427271378 b. ZZ193200000X																			

12/16/2025 - Walk In in Aurora Health Care-Greenfield**Reason for Visit****Chief Complaint**

- Motor Vehicle Crash

Visit Diagnosis

- Back spasm (primary)

Visit Information**Provider Information****Encounter Provider**

King, Sussy L, MD

Authorizing Provider

King, Sussy L, MD

Department

Name	Address	Phone	Fax
Aurora Health Care-Greenfield	6901 W EDGERTON AVE Milwaukee WI 53220	414-421-8400	414-421-9557

Follow-up and Dispositions

Return in about 1 week (around 12/23/2025); or F/U with PCP.

Level of Service**Level of Service**

OFFICE OR OTHER OUTPATIENT VISIT NEW PT 30 OR MORE LOW MDM LVL 3

Medication List**Medication List**

ⓘ This report is for documentation purposes only. The patient should not follow medication instructions within. For accurate instructions regarding medications, the patient should instead consult their physician or after visit summary.

Active at the End of Visit**Calcium 600 MG tablet**

Instructions: Take 1 tablet by mouth daily.

Entered by: Higgins, Katherine A, RN

Start date: 6/8/2015

Entered on: 6/8/2015

Cholecalciferol (VITAMIN D3) 2000 UNITS capsule

Instructions: Take 2,000 Units by mouth daily.

Entered by: Higgins, Katherine A, RN

Start date: 6/8/2015

Entered on: 6/8/2015

amlODIPine (NORVASC) 5 MG tablet

Instructions: Take 1 tablet by mouth daily.

Ordered on: 7/21/2025

Quantity: 90 tablet

Medication fill status: Preparation

Start date: 7/21/2025

Refill: 3 refills by 7/21/2026

lisinopril (ZESTRIL) 40 MG tablet

Instructions: Take 1 tablet by mouth daily.

Ordered on: 7/21/2025

Quantity: 90 tablet

Medication fill status: Preparation

Start date: 7/21/2025

Refill: 3 refills by 7/21/2026

12/16/2025 - Walk In in Aurora Health Care-Greenfield (continued)

Medication List (continued)

simvastatin (ZOCOR) 40 MG tablet

Instructions: Take 1 tablet by mouth nightly.

Ordered on: 7/21/2025

Quantity: 90 tablet

Medication fill status: Preparation

Start date: 7/21/2025

Refill: 3 refills by 7/21/2026

latanoprost (XALATAN) 0.005 % ophthalmic solution

Instructions: Apply 1 drop to eye daily.

Entered by: Trotter, Kristina, RN

Entered on: 12/16/2025

tiZANidine (ZANAFLEX) 2 MG tablet

Instructions: Take 1 tablet by mouth every 8 hours as needed for Muscle spasms.

Authorized by: King, Sussy L, MD

Start date: 12/16/2025

Refill: No refills remaining

Medication fill status: Completed

Ordered on: 12/16/2025

Quantity: 15 tablet

Last dispensed: 12/17/2025

Stopped in Visit

nitrofurantoin, macrocrystal-monohydrate, (MACROBID) 100 MG capsule

Discontinued by: Trotter, Kristina, RN

Reason for discontinuation: Therapy Completed

Discontinued on: 12/16/2025

mirabegron ER (MYRBETRIQ) 25 MG 24 hour tablet

Discontinued by: Trotter, Kristina, RN

Reason for discontinuation: Therapy Completed

Discontinued on: 12/16/2025

mirabegron ER (MYRBETRIQ) 50 MG 24 hr tablet

Discontinued by: Trotter, Kristina, RN

Reason for discontinuation: Therapy Completed

Discontinued on: 12/16/2025

ciprofloxacin (CIPRO) 250 MG tablet

Discontinued by: Trotter, Kristina, RN

Reason for discontinuation: Therapy Completed

Discontinued on: 12/16/2025

Na Sulfate-K Sulfate-Mg Sulf (Suprep Bowel Prep Kit) 17.5-3.13-1.6 GM/177ML Solution

Discontinued by: Trotter, Kristina, RN

Reason for discontinuation: Therapy Completed

Discontinued on: 12/16/2025

alendronate (FOSAMAX) 70 MG tablet

Discontinued by: Trotter, Kristina, RN

Reason for discontinuation: Therapy Completed

Discontinued on: 12/16/2025

Action: Patient not taking

Clinical Notes

Progress Notes

Trotter, Kristina, RN at 12/16/2025 1742

Author: Trotter, Kristina, RN

Filed: 12/16/2025 5:53 PM

Editor: Trotter, Kristina, RN (Registered Nurse)

Service: —

Encounter Date: 12/16/2025

Author Type: Registered Nurse

Status: Signed

Patient accompanied by her daughter

Patient presents with back stiffness. Patient was in a MVC. Patient states a dump truck pulled out in front of

12/16/2025 - Walk In in Aurora Health Care-Greenfield (continued)**Clinical Notes (continued)**

her. She states he had a stop sign but she doesn't think he stopped. She tried to brake, but could not stop in time. She thinks she may have been going 15 mph she had recently left from a different stop sign. Air bags did not deploy. She was wearing a seat belt. She denies hitting her head on the steering wheel, but her head whipped back against the head rest. She denies loss of consciousness. She had some dizziness. Symptoms started about 8:25 am today.

OTCs used: no

No order(s) completed during rooming per urgent care protocols.

Work or school note needed: No

Patient would like communication of their results via:

Cell Phone:

Telephone Information:

Mobile 414-517-7338

Okay to leave a message containing results? Yes

Writer was wearing N95 respirator during rooming process.

Electronically signed by Trotter, Kristina, RN at 12/16/2025 5:53 PM

King, Sussy L, MD at 12/16/2025 1855

Author: King, Sussy L, MD
Filed: 12/17/2025 10:35 AM
Editor: King, Sussy L, MD (Physician)

Service: —
Encounter Date: 12/16/2025

Author Type: Physician
Status: Signed

Chief complaint:**Chief Complaint**

Patient presents with

- Motor Vehicle Crash

Vitals:**Visit Vitals**

BP	120/70 (BP Location: RUE - Right upper extremity, Patient Position: Sitting, Cuff Size: Small Adult)	
Pulse	86	
Temp	98.2 °F (36.8 °C) (Oral)	
Resp	(!) 28	
Ht	5' 5" (1.651 m)	
Wt	68 kg (150 lb)	Comment: pt stated
SpO2	95%	
BMI	24.96 kg/m ²	

HISTORY OF PRESENT ILLNESS

12/16/2025 - Walk In in Aurora Health Care-Greenfield (continued)
Clinical Notes (continued)

Patient is an 82-year-old female presenting urgent care with her daughter. Patient reports concern for back pain after MVC. She was a restrained driver proceeding through an intersection when a dump truck ran through intersection and she collided her front and into the dump truck. She reports the car is totaled; however front windshield is intact and airbags did not deploy. She does report that her head hit the seat rest, but she denies LOC and headache. She has developed thoracic and lumbar back pain. No shortness of breath. No neck pain.

Other significant problems:

There are no active problems to display for this patient.

PAST MEDICAL, FAMILY AND SOCIAL HISTORY
Medications:
Current Outpatient Medications

Medication	Sig	Dispense	Refill
• latanoprost (XALATAN) 0.005 % ophthalmic solution	Apply 1 drop to eye daily.		
• tiZANidine (ZANAFLEX) 2 MG tablet	Take 1 tablet by mouth every 8 hours as needed for Muscle spasms.	15 tablet	0
• amLODIPine (NORVASC) 5 MG tablet	Take 1 tablet by mouth daily.	90 tablet	2
• lisinopril (ZESTRIL) 40 MG tablet	Take 1 tablet by mouth daily.	90 tablet	2
• simvastatin (ZOCOR) 40 MG tablet	Take 1 tablet by mouth nightly.	90 tablet	2
• Calcium 600 MG tablet	Take 1 tablet by mouth daily.		
• Cholecalciferol (VITAMIN D3) 2000 UNITS capsule	Take 2,000 Units by mouth daily.		

No current facility-administered medications for this visit.

Allergies:

Allergies

ALLERGIES:

No Known Allergies

Past Medical History/Surgeries:

History - past medical

Past Medical History:

Diagnosis	Date
• Colon polyp	
• Diverticulosis	
• Eye hemorrhage right	
• Hemorrhoids	

12/16/2025 - Walk In in Aurora Health Care-Greenfield (continued)

Clinical Notes (continued)

- HH (hiatus hernia)
- Hyperlipidemia
- Hypertension

History - past surgical

Past Surgical History:

Procedure	Laterality	Date
• COLONOSCOPY <i>sessile and transverse benign polyp; 10 yr recall per Dr. Hanson</i>		09/08/2005
• COLONOSCOPY <i>hemorrhoids; diverticulosis</i>		05/18/2001
• COLONOSCOPY <i>severe diverticulosis; mild internal hemorrhoids</i>		09/08/2000
• COLONOSCOPY <i>chronically inflamed colonic mucosa showing focal mild atypia consistent with tubular adenoma, no evidence of malignancy</i>		12/16/1998
• COLONOSCOPY W/ POLYPECTOMY <i>diverticulosis; external hemorrhoids; transverse colon - clinically polypoid colonic mucosa with focal glandular hyperplasia, negative for dysplasia</i>		03/08/2005
• ESOPHAGOGASTRODUODENOSCOPY TRANSORAL FLEX W/BX SINGLE OR MULT <i>hiatus hernia; antral-type gastric mucosa with mild chronic non-specific gastritis with focal activity, intestinal metaplasia and mild foveolar hyperplasia, superficial epithelial erosion noted, negative for h pylori; squamous mucosa with moderate reactive epithelial changes of the type that may be seen with gastroesophageal reflux; chronic inflammation of cardiac-type gastric mucosa</i>		03/08/2005
• EXCISION OF LINGUAL TONSIL <i>as child</i>		
• HYSTERECTOMY		

Family History:

History - family

History reviewed. No pertinent family history.

Social History:

Social History

Tobacco Use

- Smoking status: Every Day
- Current packs/day: 0.50
- Types: Cigarettes
- Smokeless tobacco: Not on file

Substance Use Topics

- Alcohol use: No

REVIEW OF SYSTEMS

Review of Systems

Constitutional: Negative for activity change, appetite change, chills, fatigue and fever.

HENT: Negative for congestion and sore throat.

Respiratory: Negative for cough and shortness of breath.

12/16/2025 - Walk In in Aurora Health Care-Greenfield (continued)**Clinical Notes (continued)**

Cardiovascular: Negative for chest pain.
Gastrointestinal: Negative for abdominal pain, diarrhea, nausea and vomiting.
Genitourinary: Negative for dysuria.
Musculoskeletal: Positive for **back pain**.
Skin: Negative for rash.
Neurological: Negative for weakness and headaches.

PHYSICAL EXAM**Physical Exam**

Vitals and nursing note reviewed.

Constitutional:

General: She is not in acute distress.

Appearance: Normal appearance. She is normal weight. She is not ill-appearing, toxic-appearing or diaphoretic.

Cardiovascular:

Rate and Rhythm: Normal rate and regular rhythm.

Heart sounds: Normal heart sounds.

Pulmonary:

Breath sounds: Normal breath sounds.

Abdominal:

Tenderness: There is no abdominal tenderness. There is no right CVA tenderness, left CVA tenderness or guarding.

Musculoskeletal:

Thoracic back: **Spasms** present. No tenderness or bony tenderness. Normal range of motion.

Lumbar back: **Spasms** present. No bony tenderness. Negative right straight leg raise test and negative left straight leg raise test.

Comments: **No midline tenderness**

Neurological:

Mental Status: She is alert.

Motor: No weakness.

Gait: Gait normal.

Psychiatric:

Mood and Affect: Mood normal.

Behavior: Behavior normal.

Thought Content: Thought content normal.

Judgment: Judgment normal.

ASSESSMENT/PLAN

Back spasm (primary encounter diagnosis)

1. Discussed with patient and daughter no concern for fracture based on mechanism of injury and exam. Discussed muscle spasm present.
2. Ordered tizanidine 2 mg and discussed side effects.

12/16/2025 - Walk In in Aurora Health Care-Greenfield (continued)
Clinical Notes (continued)

3. Discussed f/u with PCP in 1-2 weeks.
4. Discussed symptoms to return to urgent care or emergency department.

Electronically signed by King, Sussy L, MD at 12/17/2025 10:35 AM

Other Orders
Medications
tIZANidine (ZANAFLEX) 2 MG tablet (Active)

Electronically signed by: **King, Sussy L, MD on 12/16/25 1811**
Ordering user: King, Sussy L, MD 12/16/25 1811
Authorized by: King, Sussy L, MD
PRN reasons: Muscle spasms
Frequency: Routine Q8H PRN 12/16/25 - Until Discontinued
Package: 55111-179-15

Ordering provider: King, Sussy L, MD
Ordering mode: Standard

Status: **Active**

Class: Eprescribe

Ordering & Authorizing Provider Audit Trail

Date/Time	Ordering provider	Authorizing Provider	User
12/16/25 1811	King, Sussy L, MD	King, Sussy L, MD	King, Sussy L, MD
12/16/25 1811	—	King, Sussy L, MD	King, Sussy L, MD

Flowsheets
Custom Formula Data

Row Name	12/16/25 1750
OTHER	
BSA (Calculated - 1.77 sq m)	
English Weight 150 lbs	
English Weight oz 0 oz	
BSA (Calculated - 1.75 m2) - DuBois & DuBois	
BMI (Calculated) 24.96	
BSA (Calculated - 1.77 sq m)	
BMI (Calculated) 25.01	
Calculated MAP 87 mm Hg (mmHg)	
Shock Index (SI) 0.7	
BSA (Calculated - 1.78 sq m)	
BSA (Calculated - 1.77 sq m) (oncology)	
Vt 6.5 mL/kg 370.5	
Vt 7mL/kg 399	
Vt 7.5 mL/kg 427.5	
Vt 4 mL/kg 228	
Vt 5 mL/kg 285	
Needs No : Preferred	

12/16/2025 - Walk In in Aurora Health Care-Greenfield (continued)

Flowsheets (continued)

Interpreter?	Language - English
BSA (Calculated - sq m)	1.77 sq meters
BMI (Calculated)	24.96
Low Range Vt 6cc/kg MALE	369
Adult Moderate Range Vt 8cc/kg MA	492
Adult High Range Vt 10cc/kg MALE	615
Low Range Vt 6cc/kg FEMALE	342
Adult Moderate Range vt 8cc/kg FEMALE	456
BMI (Calculated)	24.961
Percent Weight Change Since Birth	0
IBW/kg (Calculated)	57
Vt 6 mL/kg	342
Vt 8 mL/kg	456
Vt 10 mL/kg	570
Vital Signs	
Vitals Score	2
History Risk Factors	
Age	82
Race	White
Weight and Growth Recommendation	
IBW/kg (Calculated) FEMALE	57
IBW/kg (Calculated) Male	61.5
Relevant Labs and Vitals	
Temp (in Celsius)	36.78

ED Vital Signs

Row Name	12/16/25 1750
Vitals Timer	
Restart Vitals Timer	Yes

Encounter Vitals

Row Name	12/16/25 1750
Encounter Vitals	
BP	120/70
BP Location	RUE - Right upper extremity
Patient Position	Sitting
Cuff Size	Small Adult
Pulse	86

12/16/2025 - Walk In in Aurora Health Care-Greenfield (continued)

Flowsheets (continued)

Temp	98.2 °F (36.8 °C)
Temp src	Oral
Weight	68 kg (150 lb)  pt
	stated
Height	5' 5" (1.651 m)
Resp	28 !
SpO2	95 %

**12/16/2025 - Walk In in Aurora Health Care-Greenfield
Billing Report**

Level of Service

Level of Service

OFFICE OR OTHER OUTPATIENT VISIT NEW PT 30 OR MORE LOW MDM LVL 3 [99203]

All Charges for This Encounter

Code	Description	Service Date	Service Provider	Modifiers	Qty
99203	OFFICE OR OTHER OUTPATIENT VISIT NEW PT 30 OR MORE LOW MDM LVL 3	12/16/2025	King, Sussy L, MD		1

Reviewed this Encounter

	Medications	Problems	Allergies	History
King, Sussy L, MD	✓	✓	Reviewed	Family, Medical, Surgical
Trotter, Kristina, RN	✓		Reviewed	Tobacco

THIS IS NOT A BILL

Joanne M Wied
5401 MANSFIELD DR
GREENDALE WI 53129

The following document contains the requested services for Joanne M Wied (Guarantor #9442633) for date(s) of service December 17, 2025. If you have any questions, please contact customer service at 800-466-9670.

<u>Charges</u>	<u>Insurance Payments</u>	<u>Patient Payments</u>	<u>Adjustments</u>	<u>Total Balance</u>
7,098.00	0.00	0.00	-5,189.81	1,908.19

Svc Date	Code	Description	Payor	Qty	Amount
----------	------	-------------	-------	-----	--------

CT Exam Visit to Imaging Services at Specialty Clinics on Froedtert Hospital Campus

(Acct #6510245123, Patient Joanne M Wied)

December 17, 2025

Charges

12/17/25	70450	CT Scan of Head or Brain, Without Contrast		1	2,418.00
12/17/25	72125	CT Scan of Upper Spine, Without Contrast		1	3,000.00
Total Charges					5,418.00

Insurance Payments and Adjustments

12/22/25	3000	Contractual Write-Off	UHC MEDICARE	1	-5,189.81
----------	------	-----------------------	--------------	---	-----------

Established Patient Visit to Imaging Services at Specialty Clinics on Froedtert Hospital Campus

(Acct #8069720425, Patient Joanne M Wied)

December 17, 2025

Charges

Charges for visit with **Digrazia, Gianna N, DO**

12/17/25	70450	CT Scan,Head/Brain,W/O Contrast Matl	UHC MEDICARE	1	519.00
12/17/25	72125	CT Scan,Cervical Spine,W/O Contrast	UHC MEDICARE	1	673.00
Total Charges					1,192.00

Established Patient Visit to Family Medicine, Lincoln Avenue Health Center

(Acct #8069839220, Patient Joanne M Wied)

December 17, 2025

Charges

Charges for visit with **Clawson, Erin, APNP**

12/17/25	99214	Office/Outpt Established Mod Mdm 30 Min	UHC MEDICARE	1	432.00
12/17/25	G2211	Ongoing Care Complexity	UHC MEDICARE	1	56.00

THIS IS NOT A BILL

Joanne M Wied
5401 MANSFIELD DR
GREENDALE WI 53129

The following document contains the requested services for Joanne M Wied (Guarantor #9442633) for date(s) of service December 22, 2025 to January 21, 2026. If you have any questions, please contact customer service at 800-466-9670.

<u>Charges</u>	<u>Insurance Payments</u>	<u>Patient Payments</u>	<u>Adjustments</u>	<u>Total Balance</u>
11,629.00	-284.94	0.00	-8,905.26	2,438.80

Svc Date	Code	Description	Payor	Qty	Amount
----------	------	-------------	-------	-----	--------

Established Patient Visit to Family Medicine, Greendale Health Center (Acct #8069899367,
Patient Joanne M Wied)
December 22, 2025

Charges

Charges for visit with **Siddiqui, Ali H, MD**

12/22/25	99214	Office/Outpt Established Mod Mdm 30 Min	UHC MEDICARE	1	432.00
----------	-------	---	--------------	---	--------

Insurance Payments and Adjustments

01/20/26	2000	Insurance Payment (Insurance)	UHC MEDICARE	1	-117.05
01/20/26	3000	Contractual Write-Off	UHC MEDICARE	1	-2.38
01/20/26	3000	Contractual Write-Off	UHC MEDICARE	1	-312.57

Total Insurance Payments and Adjustments **-432.00**

Lab Only Visit to Laboratory, Drexel Town Square Health Center (Acct #8069969292, Patient Joanne M Wied)
December 22, 2025

Charges

Charges for visit with **Kroft, Steven H, MD**

12/22/25	80048	Basic Metabolic Panel Calcium Total	UHC MEDICARE	1	119.00
12/22/25	85025	Complete Cbc & Auto Diff Wbc	UHC MEDICARE	1	108.00

Charges for visit with **Miller, Amy L, MD**

12/22/25	36415	Collection Venous Blood,Venipuncture	UHC MEDICARE	1	14.00
----------	-------	--------------------------------------	--------------	---	-------

Total Charges **241.00**

Insurance Payments and Adjustments

01/20/26	2000	Insurance Payment (Insurance)	UHC MEDICARE	1	-3.75
----------	------	-------------------------------	--------------	---	-------

Svc Date	Code	Description	Payor	Qty	Amount
01/20/26	2000	Insurance Payment (Insurance)	UHC MEDICARE	1	-6.68
01/20/26	3000	Contractual Write-Off	UHC MEDICARE	1	-0.07
01/20/26	3000	Contractual Write-Off	UHC MEDICARE	1	-10.18
01/20/26	3000	Contractual Write-Off	UHC MEDICARE	1	-0.07
01/20/26	3000	Contractual Write-Off	UHC MEDICARE	1	-115.45
01/20/26	3000	Contractual Write-Off	UHC MEDICARE	1	-0.06
01/20/26	3000	Contractual Write-Off	UHC MEDICARE	1	-104.74
Total Insurance Payments and Adjustments					-241.00

MR Exam Visit to Department of Magnetic Resonance Imaging, RAYUS Oak Creek (Acct

#6510273050, Patient Joanne M Wied)

December 29, 2025

Charges

12/29/25	70551	MRI Scan of Brain, Without Contrast		1	5,039.00
----------	-------	-------------------------------------	--	---	----------

Insurance Payments and Adjustments

01/02/26	3000	Contractual Write-Off	UHC MEDICARE	1	-4,793.36
01/29/26	2000	Insurance Payment (Insurance)	UHC MEDICARE	1	-93.73
		Copay: 150.00			
01/29/26	3000	Contractual Write-Off	UHC MEDICARE	1	-1.91
Total Insurance Payments and Adjustments					-4,889.00

MR Exam Visit to Department of Magnetic Resonance Imaging, RAYUS Oak Creek (Acct

#8070103267, Patient Joanne M Wied)

December 29, 2025

Charges

Charges for visit with Beck, Ryan T, MD

12/29/25	70551	MRI Brain	UHC MEDICARE	1	894.00
----------	-------	-----------	--------------	---	--------

Insurance Payments and Adjustments

01/26/26	2000	Insurance Payment (Insurance)	UHC MEDICARE	1	-63.73
01/26/26	3000	Contractual Write-Off	UHC MEDICARE	1	-1.30
01/26/26	3000	Contractual Write-Off	UHC MEDICARE	1	-828.97
Total Insurance Payments and Adjustments					-894.00

Svc Date	Code	Description	Payor	Qty	Amount
----------	------	-------------	-------	-----	--------

Medicare Annual Wellness Visit to Family Medicine, Greendale Health Center (Acct

#8064235647, Patient Joanne M Wied)

January 21, 2026

Charges

Charges for visit with **Dement, Kristin E, DO**

01/21/26	90662	Influenza Vacc (liv) Prserv Free Im (49281-125-88)	UHC MEDICARE	1	71.00
01/21/26	99397	Preventive Visit,Est,65 & Over	UHC MEDICARE	1	550.00
01/21/26	G0008	Admin Influenza Virus Vac	UHC MEDICARE	1	14.00
01/21/26	G0439	Ppps, Subseq Visit	UHC MEDICARE	1	432.00
Total Charges					1,067.00

Lab Only Visit to Laboratory, Greendale Health Center (Acct #8071009234, Patient Joanne M Wied)

January 21, 2026

Charges

Charges for visit with **Kroft, Steven H, MD**

01/21/26	80053	Metabolic Panel,Comprehensive	UHC MEDICARE	1	156.00
01/21/26	80061	Lipid Panel	UHC MEDICARE	1	160.00
01/21/26	83036	Glycosylated Hemoglobin Test	UHC MEDICARE	1	80.00

Charges for visit with **Miller, Amy L, MD**

01/21/26	36415	Collection Venous Blood,Venipuncture	UHC MEDICARE	1	14.00
----------	-------	--------------------------------------	--------------	---	-------

Total Charges **410.00**



THIS IS NOT A BILL

Joanne M Wied
5401 MANSFIELD DR
GREENDALE WI 53129

The following document contains the requested services for Joanne M Wied (Guarantor #9442633) for date(s) of service January 28, 2026. If you have any questions, please contact customer service at 800-466-9670.

<u>Charges</u>	<u>Insurance Payments</u>	<u>Patient Payments</u>	<u>Adjustments</u>	<u>Total Balance</u>
704.00	0.00	-58.28	-645.72	0.00

Svc Date	Code	Description	Payor	Qty	Amount
Ultrasound Exam Visit to Department of Radiology Ultrasound, Moorland Reserve Health Center (Acct #8071278059, Patient Joanne M Wied)					
January 28, 2026					
Charges					
Charges for visit with Ealba, Justin M, MD					
01/28/26	76604	US, Chest,Real Time	UHC MEDICARE	1	704.00
Insurance Payments and Adjustments					
02/23/26	3000	Contractual Write-Off	UHC MEDICARE	1	-645.72
Patient Payments and Adjustments					
04/02/26	1026	Patient Payment		1	-58.28



Lincoln Avenue Health Center - Wied, Joanne M
Froedtert & the Medical College of Wisconsin Community Physicians
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Visit date: 12/17/2025
11211 W LINCOLN AVE
WEST ALLIS WI 53227

Face Sheet (continued)

GUARANTOR EMPLOYER

Employer:

Status: **RETIRED**

COVERAGE

PRIMARY INSURANCE

Payor: **UHC MEDICARE**

Plan: **MEDICARE UHC MEDICARE**

Group Number: **70000**

Subscriber DOB: **12/16/1943**

Subscriber Name: **WIED, JOANNE M**

Subscriber ID: **912119254**

Pat. Rel. to Subscriber: **Self**

SECONDARY INSURANCE

Payor:

Plan:

Group Number:

Subscriber DOB:

Subscriber Name:

Subscriber ID:

Pat. Rel. to Subscriber:

Contact Serial # (237772831)



Reason for Visit

Chief Complaints [last edited by Hernandez, Isabel, MA on 12/17/2025 0937]

- Follow-up (Following up from car accident yesterday. Pt hit her head and is dizzy.)
- Pain (Initially had mid back pain and now this morning has shoulder pain.)

Visit Diagnoses [last edited by Clawson, Erin, APNP on 12/17/2025 1005]

- **Motor vehicle accident, subsequent encounter (primary)**
- Dizziness
- Neck pain
- Localized swelling of back

Revision History

Action	Name	User	Date/Time
Diagnosis #1			
Add	Motor vehicle accident, subsequent encounter (primary)	Clawson, Erin, APNP	12/17/2025 1005
Diagnosis #2			
Add	Dizziness	Clawson, Erin, APNP	12/17/2025 1005
Diagnosis #3			
Add	Neck pain	Clawson, Erin, APNP	12/17/2025 1005
Diagnosis #4			
Add	Localized swelling of back	Clawson, Erin, APNP	12/17/2025 1005

Visit Information

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F



Lincoln Avenue Health Center - Wied, Joanne M
Froedtert & the Medical College MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
of Wisconsin Community Physicians Visit date: 12/17/2025
11211 W LINCOLN AVE
WEST ALLIS WI 53227

Current Medications (continued)

Instructions: Chew and swallow by mouth daily.
Entered by: Howard, Cleonia, MA Entered on: 7/18/2023

amLODIPine (NORVASC) 5 MG tablet

Instructions: Take 1 tablet (5 mg total) by mouth daily.
Authorized by: Dement, Kristin E, DO Ordered on: 7/21/2025
Start date: 7/21/2025 Quantity: 90 tablet
Refill: 2 refills by 7/21/2026

lisinopril (PRINIVIL OR ZESTRIL) 40 MG tablet

Instructions: Take 1 tablet (40 mg total) by mouth daily.
Authorized by: Dement, Kristin E, DO Ordered on: 7/21/2025
Start date: 7/21/2025 Quantity: 90 tablet
Refill: 2 refills by 7/21/2026

simvastatin (ZOCOR) 40 MG tablet

Instructions: Take 1 tablet (40 mg total) by mouth nightly.
Authorized by: Dement, Kristin E, DO Ordered on: 7/21/2025
Start date: 7/21/2025 Quantity: 90 tablet
Refill: 2 refills by 7/21/2026

tiZANidine (ZANAFLEX) 2 MG tablet [reconciled by Hernandez, Isabel, MA on 12/17/2025 0938]

Instructions: Take 2 mg by mouth every 8 hours as needed.
Entered by: Hernandez, Isabel, MA Entered on: 12/17/2025
Start date: 12/16/2025

Stopped in Visit

None

Progress Notes

Progress Notes by Clawson, Erin, APNP at 12/17/2025 0938

Version 1 of 1

Author: Clawson, Erin, APNP	Service: —	Author Type: Advanced Practice Nurse Prescriber
Filed: 12/17/2025 10:17 AM	Encounter Date: 12/17/2025	Creation Time: 12/17/2025 9:38 AM
Status: Signed	Editor: Clawson, Erin, APNP (Advanced Practice Nurse Prescriber)	

CC: Follow-up (Following up from car accident yesterday. Pt hit her head and is dizzy.) and Pain (Initially had mid back pain and now this morning has shoulder pain.)

History of Present Illness

The patient is an 82-year-old female who presents for follow-up after a car accident that occurred yesterday. She is accompanied by her daughter.

She was involved in a vehicular collision with a dump truck, resulting in a head-on impact at approximately 15 to 20 miles per hour. The airbags did not deploy, and her seatbelt locked, causing her to lurch forward

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F



Lincoln Avenue Health Center - Wied, Joanne M
Froedtert & the Medical College MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
of Wisconsin Community Physicians Visit date: 12/17/2025
11211 W LINCOLN AVE
WEST ALLIS WI 53227

Progress Notes (continued)

and hit the back of her head on the headrest. She sought immediate medical attention at an urgent care facility where no imaging studies were conducted. Initially, she experienced pain in her midback region. She reports no presence of any bumps on her head or headaches. However, she did experience an episode of dizziness upon standing from a chair, which has since resolved. She reports no nausea or vomiting. She has noticed a slight blurring of her vision compared to her baseline. She does not report any photophobia, confusion, memory loss, speech difficulties, word-finding issues, increased anxiety, irritability, depression, or fatigue. She recalls the events before and after the accident and did not lose consciousness. She is able to focus on tasks and does not report any speech issues. This morning, she began experiencing pain across her shoulder blades and mild midback pain. She also reports feeling slightly lightheaded but does not feel like she is going to pass out. She reports no numbness, tingling, or weakness. She has not been informed of any swelling in her upper back prior to this incident. She was prescribed a muscle relaxant, tizanidine, which she took last night and found beneficial. She also used a neck massager with heat and rotating massage balls, which provided some relief.

Concussion symptoms:

Headache ☐
Dizziness ☒
Nausea ☐
Vomiting ☐
Visual disturbances ☒
Phonophobia ☐
Photophobia ☐
Confusion ☒
Antegrade/retrograde amnesia ☐
LOC ☐
Disorientation ☐
Trouble focusing ☐
Decrease in responsiveness ☐
Speech difficulty ☐
Trouble finding words ☐
Irritability ☐
Anxiety ☐
Depression ☐
Sadness ☐
Emotional lability ☐
Increase in fatigue ☐
Decrease ability to fall asleep ☐
Difficulty awakening in the AM ☐

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F

Progress Notes (continued)

Review of Systems

Constitutional: Negative for activity change, appetite change, chills, diaphoresis and fatigue.

Respiratory: Negative for cough, chest tightness, shortness of breath and wheezing.

Cardiovascular: Negative for chest pain, palpitations and leg swelling.

Gastrointestinal: Negative for constipation, diarrhea, nausea and vomiting.

Musculoskeletal: Positive for **back pain** and **gait problem**.

Skin: Negative for rash.

Neurological: Positive for **dizziness** and **light-headedness**. Negative for tremors, syncope, facial asymmetry, speech difficulty, weakness, numbness and headaches.

Vitals:

12/17/25 0938

BP: 122/66

Pulse: 72

Patient Sitting

Position

During BP:

BP taken on: Right Upper Arm

Cuff Size: Adult Regular

Temp: 97.4 °F (36.3 °C)

Weight: 64.6 kg (142 lb 6.4 oz)

Physical Exam

Vitals reviewed.

Constitutional:

Appearance: Normal appearance.

HENT:

Head: Normocephalic.

Right Ear: Tympanic membrane, ear canal and external ear normal.

Left Ear: Tympanic membrane, ear canal and external ear normal.

Nose: Nose normal.

Eyes:

Extraocular Movements: Extraocular movements intact.

Conjunctiva/sclera: Conjunctivae normal.

Pupils: Pupils are equal, round, and reactive to light.

Cardiovascular:

Rate and Rhythm: Normal rate and regular rhythm.

Pulses: Normal pulses.

Heart sounds: Normal heart sounds.

Progress Notes (continued)

Pulmonary:

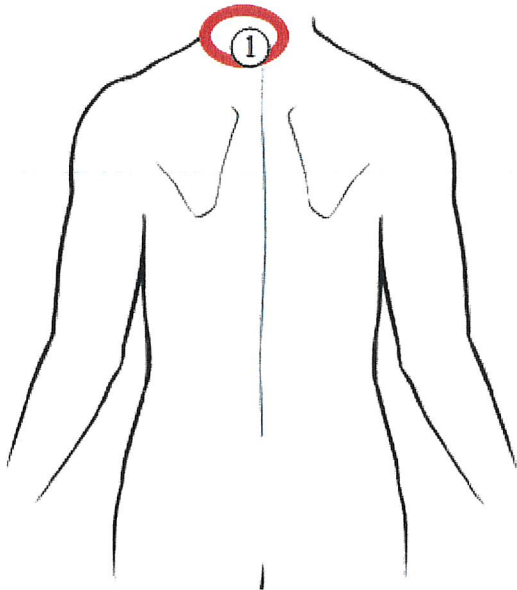
Effort: Pulmonary effort is normal.

Breath sounds: Normal breath sounds.

Musculoskeletal:

Cervical back: Normal range of motion and neck supple.

Back:



1: Notable swelling noted to area- no bruising, no pain with palpation

Right lower leg: No edema.

Left lower leg: No edema.

Lymphadenopathy:

Cervical: No cervical adenopathy.

Skin:

General: Skin is warm.

Neurological:

Mental Status: She is alert and oriented to person, place, and time.

Motor: No weakness.

Coordination: Coordination normal.

Gait: Gait normal.

Psychiatric:

Mood and Affect: Mood normal.

Behavior: Behavior normal.

Thought Content: Thought content normal.

Judgment: Judgment normal.



Lincoln Avenue Health Center - Wied, Joanne M
Froedtert & the Medical College of Wisconsin Community Physicians
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Visit date: 12/17/2025
11211 W LINCOLN AVE
WEST ALLIS WI 53227

Progress Notes (continued)

ASSESSMENT/PLAN:

Assessment & Plan

1. Post-accident follow-up:

- Symptoms include dizziness, shoulder blade pain, and swelling in the upper back, likely due to the recent car accident.
- Neurological examination results are normal. Swelling in the upper back is noted.
- A CT scan of the head and imaging of the upper back and neck area will be ordered as STAT. If dizziness, confusion, balance issues, or new onset of headaches occur, immediate medical attention at the emergency room is advised.
- Continue with tizanidine, apply heat, and engage in light stretching exercises. Soreness may last for multiple weeks after MVA

Orders Placed This Encounter

- CT Head W/O Cont
- CT C Spine W/O Cont

Depression Screen:

Patient Health Questionnaire-2 Score: (Patient-Rptd) 0 (1/20/2025 6:35 AM)

Erin Clawson, APNP

A total of 30 minutes was spent today including face to face & non face to face time with the patient, reviewing relevant history, results and records, and coordination of care.

Please note the following information:

This entry was created using DAX Copilot software. The medical record entry has been reviewed, however sound alike/inadvertent words, phrases substitutions errors may still exist and also there may be some typographical, grammatical, and punctuation errors

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F

Printed by 96891 at 12/30/25 7:59 AM



Lincoln Avenue Health Center - Wied, Joanne M
Froedtert & the Medical College MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
of Wisconsin Community Visit date: 12/17/2025
Physicians
11211 W LINCOLN AVE
WEST ALLIS WI 53227

Progress Notes (continued)

Progress Notes by Hernandez, Isabel, MA at 12/17/2025 0940

Version 1 of 1

Author: Hernandez, Isabel, MA
Filed: 12/17/2025 10:17 AM
Status: Signed

Service: —
Encounter Date: 12/17/2025
Editor: Hernandez, Isabel, MA (Medical Assistant)

Author Type: Medical Assistant
Creation Time: 12/17/2025 9:40 AM

Joanne M Wied is a 82 Y female presenting today for Follow-up (Following up from car accident yesterday. Pt hit her head and is dizzy.) and Pain (Initially had mid back pain and now this morning has shoulder pain.).
Accompanied by: Self and Daughter

Health Maintenance Due

Topic	Date Due
• Initial PFT (w/ Bronchodilator) for Patient with COPD	Never done
• RSV Vaccine Adults - Pregnant (Abrysvo) and Older Adults (1 - 1-dose 75+ series)	Never done
• Bone Density Monitoring	03/10/2023
• Seasonal Flu Immunization (1)	09/01/2025
• COVID-19 Vaccine (3 - 2025-26 season)	09/01/2025

Vital signs taken. Medications and allergies reviewed with patient.

Isabel Hernandez, MA

Electronically signed by Hernandez, Isabel, MA at 12/17/2025 10:17 AM

Prior to Admission Medication Review

Medication List

ⓘ This report is for documentation purposes only. The patient should not follow medication instructions within. For accurate instructions regarding medications, the patient should instead consult their physician or after visit summary.

Active at the End of Visit

latanoprost (XALATAN) 0.005 % ophthalmic drops

Instructions: Apply 1 Drop to each eye daily.

Entered by: Mims, Aleatha, RMA

Entered on: 7/20/2016

Calcium Carb-Cholecalciferol 600-20 MG-MCG Chew Tab

Instructions: Chew and swallow by mouth daily.

Entered by: Howard, Cleonia, MA

Entered on: 7/18/2023

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F

Printed by 96891 at 12/30/25 7:59 AM



Lincoln Avenue Health Center - Wied, Joanne M
Froedtert & the Medical College MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
of Wisconsin Community Visit date: 12/17/2025
Physicians
11211 W LINCOLN AVE
WEST ALLIS WI 53227

12/17/2025 - Office Visit in Family Medicine, Lincoln Avenue Health Center (continued)

Documents

After Visit Summary - Document on 12/17/2025 10:07 AM: After Visit Summary

Document (below)

AFTER VISIT SUMMARY

Joanne M. Wied DoB: 12/16/1943
CEID: FCH-WP9F-8MS6-VRFZ

12/17/2025 9:30 AM Family Medicine, Lincoln
Avenue Health Center 414-454-8300



Instructions from Erin Clawson, APNP

You may receive a survey via mail or email and we would appreciate your feedback!

Thank you for choosing Froedtert Hospital and the Medical College of Wisconsin as your healthcare provider. Our organization uses information from the survey to grade our performance. We are always looking to improve the service we provide you and we strive to provide exceptional care. We value your opinion. If you can, please take a few minutes to respond and let us know how we are performing. It was a pleasure to care for you today!

Schedule CT of head and neck- call 414-777-1900 to schedule imaging

If noting dizziness, new onset headaches, change in speech, confusion, balance issues- go to ED immediately



Imaging ordered today

CT C Spine W/O Cont
Expected 12/17/2025

CT Head W/O Cont
Expected 12/17/2025

Today's Visit



You saw Erin Clawson, APNP on Wednesday December 17, 2025. The following issues were addressed: Motor vehicle accident, subsequent encounter; Dizziness; Neck pain; and Localized swelling of back.



Blood Pressure
122/66



BMI
24.44



Weight
142 lb
6.4 oz



Temperature (Tympanic)
97.4 °F



Pulse
72

What's Next

JAN
21
2026

Medicare Annual Wellness Visit
with Kristin Dement, DO
Wednesday January 21 8:00 AM
(Arrive by 7:45 AM)

Family Medicine,
Greendale Health
Center
6220 W Loomis Rd
GREENDALE WI 53129
414-805-6644



Lincoln Avenue Health Center - Wied, Joanne M
Froedtert & the Medical College of Wisconsin Community Physicians
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
11211 W LINCOLN AVE
Visit date: 12/17/2025
WEST ALLIS WI 53227

12/17/2025 - Office Visit in Family Medicine, Lincoln Avenue Health Center (continued)

Documents (continued)

What You Need to Know About Lab and Test Results

- If you had labs and/or tests done, you will receive your results via MyChart. You can access MyChart through the Froedtert & MCW mobile app or online at froedtert.com/mychart.
- To help you stay as informed as possible, we send results when they are final, which may be before your provider has reviewed them. Your provider may wait for more tests or information before adding comments or contacting you directly. Please ask your provider when you should expect to hear from them.
- You can choose to view your results as soon as they are sent or wait to discuss them with your provider – whatever makes you most comfortable.

MyChart Scheduling of Imaging Orders

Some of your imaging orders may be scheduled online or through the Froedtert & MCW app at a time that is convenient for you.

If you have a MyChart account, you will see a scheduling ticket for the test ordered for you.

Tap or select "**Schedule Now**" and follow the prompts.

If you don't have a MyChart account or prefer to schedule over the phone, please call 414-777-1900. If you do not schedule, our team will call you to schedule a time for your test.

Stay Connected

Log into MyChart to view this After Visit Summary and more at my.froedtert.com.

Don't miss important updates. Text **START** to **50127** to start or keep receiving text messages about your appointments, health, billing, prescriptions and more.

Text messages related to your relationship with Froedtert Health and its affiliates, including updates related your visits, Froedtert & MCW (MyChart) account, one-time passcode, billing notifications, prescription reminders and care management will be sent to the phone number you provided. Message and data rates may apply. Message frequency may vary. Text HELP for help and text STOP to opt out of notifications from a specific short code. Please review the terms and conditions and privacy policy at froedtert.com.

12/17/2025 - Office Visit in Family Medicine, Lincoln Avenue Health Center (continued)

Documents (continued)

Changes to Your Medication List

① Accurate as of December 17, 2025 10:07 AM.
If you have any questions, ask your nurse or doctor.

CONTINUE taking these medications

amLODIPine 5 MG tablet Commonly known as: NORVASC	Take 1 tablet (5 mg total) by mouth daily.
Calcium Carb-Cholecalciferol 600-20 MG-MCG Chew Tab	Chew and swallow by mouth daily.
latanoprost 0.005 % ophthalmic drops Commonly known as: XALATAN	Apply 1 Drop to each eye daily.
lisinopril 40 MG tablet Commonly known as: PRINIVIL or ZESTRIL	Take 1 tablet (40 mg total) by mouth daily.
simvastatin 40 MG tablet Commonly known as: ZOCOR	Take 1 tablet (40 mg total) by mouth nightly.
tiZANidine 2 MG tablet Commonly known as: ZANAFLEX	Take 2 mg by mouth every 8 hours as needed.

Find Support for Your Health Goals in the Wellness Marketplace

During your visit, you may have discussed health goals with your doctor. The Froedtert & MCW health network partners with Vale Health to offer health and wellness products to support those goals. You can feel confident knowing that the products and resources available in the Wellness Marketplace are carefully vetted. Find wellness solutions at froedtert.valehealth.com, or scan the QR code for quick access.



ValeHealth





Froedtert Hospital
9200 W. Wisconsin Avenue
Milwaukee WI 53226

Wied, Joanne M
MRN: 07130023, DOB: 12/16/1943, Legal Sex: F
Acct #: 6510245123
Adm: 12/17/2025, D/C: 12/17/2025

All Orders (continued)

No orders and results found

Imaging

Imaging

CT C Spine W/O Cont (Final result) [627916077]

Electronically signed by: **Clawson, Erin, APNP on 12/17/25 1005**

Status: **Completed**

This order may be acted on in another encounter.

Ordering user: Clawson, Erin, APNP 12/17/25 1005

Authorized by: Clawson, Erin, APNP

Ordering mode: Standard

Frequency: Routine 12/17/25 1244 - 1 occurrence

Class: Ancillary Performed

Quantity: 1

Lab status: Final result

Instance released by: Sanchez-Ramirez, Arleth 12/17/2025 12:44 PM

Diagnoses

Motor vehicle accident, subsequent encounter [V89.2XXD]

Neck pain [M54.2]

Localized swelling of back [R22.2]

Provider Details

Provider	NPI
Clawson, Erin, APNP	1508494279

Questionnaire

Question	Answer
Clinical Indication	car accident, neck pain, dorsal neck/upper back swelling
If IV and/or oral contrast is needed per radiology protocol, imaging staff to order and administer.	Yes
Release to patient	Immediate

End Exam Questions

	Answer	Comment
Was patient identified with two identifiers?	Yes	
Was contrast injected?	No	
IV Gauge/Type		
IV Placement (RT/LT - extremity)		
IV Contrast Injection Rate (ml/sec)		
Scan Delay (seconds)		
Was the patient premedicated due to a contrast allergy?		
Type of Premedication Regimen:		
Type of Enteric Contrast	NA or None	
Route of Enteric Contrast		
Amount of Enteric Contrast (ML)		
Were there any complications during the exam?	None	
Once in the exam area, did you have the patient remove jewelry, hearing aide, dentures, clothing or jackets, etc for the exam?	No	
Appointment where the Documentation Resides:		
What belongings were removed?		
Where were belongings stored?		
Were the patient belongings returned upon patient leaving the exam area?		
Did you ask the patient and did they state that they had all their personal		

Wied, Joanne M
MRN: 07130023, DOB: 12/16/1943, Legal Sex: F

Imaging (continued)

belongings before leaving the exam area?

CT C Spine W/O Cont [627916077]

Resulted: 12/19/25 0849, Result status: Final result

Order status: Completed
Filed by: Interface, Fh_Inbound_Rad 12/19/25 0852
Accession number: FH00016177585
Acknowledged by
Clawson, Erin, APNP on 12/19/25 1159
Perez, Monica, RN on 12/19/25 1303

Resulted by: Digrazia, Gianna N, DO
Performed: 12/17/25 1315 - 12/17/25 1330
Resulting lab: RADIOLOGY FROEDTERT

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
209 - RADFH	RADIOLOGY FROEDTERT	Unknown	Unknown	08/06/04 0100 - Present

Study Result

Examination(s): CT head and cervical spine without contrast.

Clinical information: Recent car accident, dizziness, neck pain.

Comparison(s): None.

Technique:

CT of the head and cervical spine obtained without contrast.

CT exam(s) performed using one or more of the following dose-reduction techniques: automated exposure control, adjustment of the mA and/or kV according to patient size, and/or iterative reconstruction technique.

Findings:

CT head:

Brain parenchyma: No acute hemorrhage or blurring of grey-white differentiation.
Nonspecific scattered hypoattenuating foci in the supratentorial white matter.
Age-related generalized parenchymal volume loss.

Extra-axial: No acute hemorrhage, fluid collection or mass effect. Nonspecific prominence of the biparietal CSF spaces. Thin probable chronic hygroma along the left convexity given the slight inward displacement of the cortical vessels.

Ventricles: Ventriculomegaly proportionate to extent of nonspecific brain volume loss. No hydrocephalus.

Vessels: Atherosclerotic calcifications in the intracranial carotid, vertebral and M1 and A2 arteries.

Orbits: Symmetric bilateral enophthalmos. Bilateral lens implants and arcus senilis.
Otherwise atraumatic.

Imaging (continued)

Paranasal sinuses and mastoids: Minimal mucosal thickening in the ethmoid air cells.. Small osteoma in the right ethmoid and sphenoid sinuses. Mastoid air cells are clear.

Bones: No acute skull fractures. Nonspecific well-circumscribed lucency in the right parietal bone, favored benign.

Soft tissues: No suspicious findings. Tiny mineralized presumed benign dermal calcification along the left lateral supraorbital ridge.

CT cervical spine:
Numbering: There are 7 cervical vertebrae.

Alignment: Preserved atlanto-occipital and atlanto-axial articulations. Trace anterolisthesis of C3-C4 and C7-T1. Nonspecific straightening of the normal cervical lordosis.

Bones, discs and soft tissues: No acute fractures. Diffuse osseous demineralization. Advanced degenerative changes at the anterior atlantoaxial joint. Chronic degenerative mild anterior wedging and height loss at C5 and C6. Suspected Schmorl's node along the C7 superior endplate. Complete ankylosis across the left C2-C3 facets and partial ankylosis across the right facet and vertebral bodies. Multilevel degenerative disc disease most pronounced at C5-C6 with severe disc height loss, degenerative endplate subchondral cystic change, sclerosis and osteophytosis. Multilevel facet arthropathy, most pronounced at right C3-C4, left C4-C5 and C7-T1. No prevertebral edema.

Detailed assessment of spinal canal and neural foramina limited secondary to technique (CT versus MR). With this caveat, pertinent level-wise findings as follows: No critical osseous spinal canal or neural foraminal narrowing. Moderate neural foraminal stenosis at right C3-C4, left C4-C5 and C5-C6 related to uncovertebral/facet arthropathy.

Other: 5 mm left apical pulmonary nodule. Atherosclerotic calcifications at the carotid bifurcations.

Impression:

CT Head:

1. No acute intracranial abnormality.
2. Suspected thin chronic subdural hygroma along the left cerebral convexity. No midline shift.
3. Presumed mild chronic microvascular ischemic disease.

CT Cervical Spine:

1. No acute fracture or traumatic subluxation of the cervical spine.
2. Multilevel cervical spondylosis most pronounced at C5-C6 without critical spinal canal stenosis.
3. Left apical pulmonary micronodule. Consider dedicated CT chest for complete

Imaging (continued)

characterization, especially if the patient is high risk.

Indications

Motor vehicle accident, subsequent encounter [V89.2XXD (ICD-10-CM)]
Neck pain [M54.2 (ICD-10-CM)]
Localized swelling of back [R22.2 (ICD-10-CM)]

Study Signed

Electronically signed by Digrazia, Gianna N, DO on 12/19/25 at 0849 CST

Result Notes

Erin Clawson, APNP
12/19/2025 11:59 AM CST

Can we please let patient know the following:

No acute concerns with her head or neck after her car accident. There was no brain bleeds or neck fractures. There is a little bit of fluid collection noted on head CT from her accident but should resolve on it's own.

There was a small pulmonary nodule noted incidentally. I would recommend scheduling with her PCP to discuss further to see if she should have a chest CT.

Erin Clawson, APNP

All Reviewers List

Perez, Monica, RN on 12/19/2025 13:03
Clawson, Erin, APNP on 12/19/2025 11:59

Procedures

No documentation.

Other Orders

No documentation.

**12/17/2025 - CT Exam in Imaging Services at Specialty Clinics on Froedtert Hospital Campus
Discharge Instructions**

Discharge Instructions

No notes of this type exist for this encounter.

12/17/2025 - CT Exam in Imaging Services at Specialty Clinics on Froedtert Hospital Campus (continued)

Flowsheets



Froedtert Hospital
9200 W. Wisconsin Avenue
Milwaukee WI 53226

Wied, Joanne M
MRN: 07130023, DOB: 12/16/1943, Legal Sex: F
Acct #: 6510245123
Adm: 12/17/2025, D/C: 12/17/2025

Prior to Admission Medication Review (continued)

Active at the End of Visit

Iatanoprost (XALATAN) 0.005 % ophthalmic drops

Instructions: Apply 1 Drop to each eye daily.

Entered by: Mims, Aleatha, RMA

Entered on: 7/20/2016

Calcium Carb-Cholecalciferol 600-20 MG-MCG Chew Tab

Instructions: Chew and swallow by mouth daily.

Entered by: Howard, Cleonia, MA

Entered on: 7/18/2023

amLODIPine (NORVASC) 5 MG tablet

Instructions: Take 1 tablet (5 mg total) by mouth daily.

Authorized by: Dement, Kristin E, DO

Start date: 7/21/2025

Refill: 2 refills by 7/21/2026

Ordered on: 7/21/2025

Quantity: 90 tablet

lisinopril (PRINIVIL OR ZESTRIL) 40 MG tablet

Instructions: Take 1 tablet (40 mg total) by mouth daily.

Authorized by: Dement, Kristin E, DO

Start date: 7/21/2025

Refill: 2 refills by 7/21/2026

Ordered on: 7/21/2025

Quantity: 90 tablet

simvastatin (ZOCOR) 40 MG tablet

Instructions: Take 1 tablet (40 mg total) by mouth nightly.

Authorized by: Dement, Kristin E, DO

Start date: 7/21/2025

Refill: 2 refills by 7/21/2026

Ordered on: 7/21/2025

Quantity: 90 tablet

tiZANidine (ZANAFLEX) 2 MG tablet

Instructions: Take 2 mg by mouth every 8 hours as needed.

Entered by: Hernandez, Isabel, MA

Start date: 12/16/2025

Entered on: 12/17/2025

Stopped in Visit

None

Labs

No documentation.

All Orders

No orders and results found

Imaging

Imaging

CT Head W/O Cont (Final result) [627916218]

Electronically signed by: **Clawson, Erin, APNP on 12/17/25 1005**

Status: **Completed**

This order may be acted on in another encounter.

Ordering user: Clawson, Erin, APNP 12/17/25 1005

Authorized by: Clawson, Erin, APNP

Ordering mode: Standard

Frequency: STAT 12/17/25 1244 - 1 occurrence

Class: Ancillary Performed

Quantity: 1

Lab status: Final result

Wied, Joanne M
MRN: 07130023, DOB: 12/16/1943, Legal Sex: F



Froedtert Hospital
9200 W. Wisconsin Avenue
Milwaukee WI 53226

Wied, Joanne M
MRN: 07130023, DOB: 12/16/1943, Legal Sex: F
Acct #: 6510245123
Adm: 12/17/2025, D/C: 12/17/2025

Imaging (continued)

Instance released by: Sanchez-Ramirez, Arleth 12/17/2025 12:44 PM

Diagnoses

Motor vehicle accident, subsequent encounter [V89.2XXD]

Dizziness [R42]

Provider Details

Provider	NPI
Clawson, Erin, APNP	1508494279

Questionnaire

Question	Answer
Clinical Indication	car accident, dizziness
If IV and/or oral contrast is needed per radiology protocol, imaging staff to order and administer.	Yes
Release to patient	Immediate
ICH?	Intracranial Hemorrhage,false

End Exam Questions

	Answer	Comment
Was patient identified with two identifiers?	Yes	
Was contrast injected?	No	
IV Gauge/Type		
IV Placement (RT/LT - extremity)		
IV Contrast Injection Rate (ml/sec)		
Scan Delay (seconds)		
Was the patient premedicated due to a contrast allergy?		
Type of Premedication Regimen:		
Type of Enteric Contrast	NA or None	
Route of Enteric Contrast		
Amount of Enteric Contrast (ML)		
Were there any complications during the exam?	None	
Once in the exam area, did you have the patient remove jewelry, hearing aide, dentures, clothing or jackets, etc for the exam?	No	
Appointment where the Documentation Resides:		
What belongings were removed?		
Where were belongings stored?		
Were the patient belongings returned upon patient leaving the exam area?		
Did you ask the patient and did they state that they had all their personal belongings before leaving the exam area?		

CT Head W/O Cont [627916218]

Resulted: 12/19/25 0849, Result status: Final result

Order status: Completed
Filed by: Interface, Fh_Inbound_Rad 12/19/25 0852
Accession number: FH00016177586
Acknowledged by
Clawson, Erin, APNP on 12/19/25 1159
Perez, Monica, RN on 12/19/25 1303

Resulted by: Digrazia, Gianna N, DO
Performed: 12/17/25 1316 - 12/17/25 1324
Resulting lab: RADIOLOGY FROEDTERT

Wied, Joanne M
MRN: 07130023, DOB: 12/16/1943, Legal Sex: F

Imaging (continued)**Testing Performed By**

Lab - Abbreviation	Name	Director	Address	Valid Date Range
209 - RADFH	RADIOLOGY FROEDTERT	Unknown	Unknown	08/06/04 0100 - Present

Study Result

Examination(s): CT head and cervical spine without contrast.

Clinical information: Recent car accident, dizziness, neck pain.

Comparison(s): None.

Technique:

CT of the head and cervical spine obtained without contrast.

CT exam(s) performed using one or more of the following dose-reduction techniques: automated exposure control, adjustment of the mA and/or kV according to patient size, and/or iterative reconstruction technique.

Findings:

CT head:

Brain parenchyma: No acute hemorrhage or blurring of grey-white differentiation.

Nonspecific scattered hypoattenuating foci in the supratentorial white matter.

Age-related generalized parenchymal volume loss.

Extra-axial: No acute hemorrhage, fluid collection or mass effect. Nonspecific prominence of the biparietal CSF spaces. Thin probable chronic hygroma along the left convexity given the slight inward displacement of the cortical vessels.

Ventricles: Ventriculomegaly proportionate to extent of nonspecific brain volume loss. No hydrocephalus.

Vessels: Atherosclerotic calcifications in the intracranial carotid, vertebral and M1 and A2 arteries.

Orbits: Symmetric bilateral enophthalmos. Bilateral lens implants and arcus senilis. Otherwise atraumatic.

Paranasal sinuses and mastoids: Minimal mucosal thickening in the ethmoid air cells.. Small osteoma in the right ethmoid and sphenoid sinuses. Mastoid air cells are clear.

Bones: No acute skull fractures. Nonspecific well-circumscribed lucency in the right parietal bone, favored benign.

Soft tissues: No suspicious findings. Tiny mineralized presumed benign dermal calcification along the left lateral supraorbital ridge.

CT cervical spine:

Imaging (continued)

Numbering: There are 7 cervical vertebrae.

Alignment: Preserved atlanto-occipital and atlanto-axial articulations. Trace anterolisthesis of C3-C4 and C7-T1. Nonspecific straightening of the normal cervical lordosis.

Bones, discs and soft tissues: No acute fractures. Diffuse osseous demineralization. Advanced degenerative changes at the anterior atlantoaxial joint. Chronic degenerative mild anterior wedging and height loss at C5 and C6. Suspected Schmorl's node along the C7 superior endplate. Complete ankylosis across the left C2-C3 facets and partial ankylosis across the right facet and vertebral bodies. Multilevel degenerative disc disease most pronounced at C5-C6 with severe disc height loss, degenerative endplate subchondral cystic change, sclerosis and osteophytosis. Multilevel facet arthropathy, most pronounced at right C3-C4, left C4-C5 and C7-T1. No prevertebral edema.

Detailed assessment of spinal canal and neural foramina limited secondary to technique (CT versus MR). With this caveat, pertinent level-wise findings as follows: No critical osseous spinal canal or neural foraminal narrowing. Moderate neural foraminal stenosis at right C3-C4, left C4-C5 and C5-C6 related to uncovertebral/facet arthropathy.

Other: 5 mm left apical pulmonary nodule. Atherosclerotic calcifications at the carotid bifurcations.

Impression:

CT Head:

1. No acute intracranial abnormality.
2. Suspected thin chronic subdural hygroma along the left cerebral convexity. No midline shift.
3. Presumed mild chronic microvascular ischemic disease.

CT Cervical Spine:

1. No acute fracture or traumatic subluxation of the cervical spine.
2. Multilevel cervical spondylosis most pronounced at C5-C6 without critical spinal canal stenosis.
3. Left apical pulmonary micronodule. Consider dedicated CT chest for complete characterization, especially if the patient is high risk.

Indications

Motor vehicle accident, subsequent encounter [V89.2XXD (ICD-10-CM)]
Dizziness [R42 (ICD-10-CM)]

Study Signed

Electronically signed by Digrazia, Gianna N, DO on 12/19/25 at 0849 CST

Wied, Joanne M
MRN: 07130023, DOB: 12/16/1943, Legal Sex: F

Imaging (continued)

Result Notes

Erin Clawson, APNP
12/19/2025 11:59 AM CST

Can we please let patient know the following:

No acute concerns with her head or neck after her car accident. There was no brain bleeds or neck fractures. There is a little bit of fluid collection noted on head CT from her accident but should resolve on it's own.

There was a small pulmonary nodule noted incidentally. I would recommend scheduling with her PCP to discuss further to see if she should have a chest CT.

Erin Clawson, APNP

Procedures

No documentation.

Other Orders

No documentation.

**12/17/2025 - CT Exam in Imaging Services at Specialty Clinics on Froedtert Hospital Campus
Discharge Instructions**

Discharge Instructions

No notes of this type exist for this encounter.

12/17/2025 - CT Exam in Imaging Services at Specialty Clinics on Froedtert Hospital Campus (continued)

Flowsheets

IP WALTER SCORE

Row Name 12/18/25 0024

OTHER

IP Walter Score 4 -CH at 12/18/25 0024

Workload Acuity Score

Row Name	12/17/25 1401	12/17/25 1601	12/17/25 1801	12/17/25 2001	12/18/25 0001
----------	---------------	---------------	---------------	---------------	---------------

OTHER

Workload Acuity Score	10 -SB at 12/17/25 1421	10 -SB at 12/17/25 1620	10 -SB at 12/17/25 1819	10 -SB at 12/17/25 2020	10 -SB at 12/18/25 0021
-----------------------	-------------------------	-------------------------	-------------------------	-------------------------	-------------------------

User Key

(r) = Recorded By, (t) = Taken By, (c) = Cosigned By

Initials	Name	Provider Type	Discipline	Dates Documented
CH	Him Integrity, Checker	—	—	12/18/2025

Wied, Joanne M
MRN: 07130023, DOB: 12/16/1943, Legal Sex: F



Greendale Health Center -
Froedtert & the Medical College
of Wisconsin Community
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Visit date: 12/22/2025

Face Sheet (continued)

City:	GREENDALE, WI 53129	Race:	White			
Primary Phone:	414-517-7338	Ethnicity:	Not Hispanic, Latino/a, *			
Primary Care Provider:	Dement, Kristin E, DO					
EMERGENCY CONTACT						
<u>Contact Name</u>	<u>Guardian</u>	<u>Relationship</u>	<u>Home Phone</u>	<u>Work Phone</u>	<u>Mobile Phone</u>	<u>Preferred</u>
1. Knoke, Jennifer		Daughter	262-696-4017		715-281-0232	
2. COTTREAU, JEANNE		Daughter			414-803-5432	Mobile phone

GUARANTOR

Guarantor:	WIED, JOANNE M	DOB:	12/16/1943
Address:	5401 MANSFIELD DR GREENDALE, WI 53129	Sex:	Female
Relation to Patient:	Self	Home Phone:	
Guarantor ID:	9442633	Work Phone:	
GUARANTOR EMPLOYER			
Employer:		Status:	RETIRED

COVERAGE

PRIMARY INSURANCE			
Payor:	UHC MEDICARE	Plan:	MEDICARE UHC MEDICARE
Group Number:	70000	Subscriber DOB:	12/16/1943
Subscriber Name:	WIED, JOANNE M		
Subscriber ID:	912119254		
Pat. Rel. to Subscriber:	Self		
SECONDARY INSURANCE			
Payor:		Plan:	
Group Number:		Subscriber DOB:	
Subscriber Name:			
Subscriber ID:			
Pat. Rel. to Subscriber:			

Contact Serial # (238089828)



Reason for Visit

Chief Complaint [last edited by Brekke, Jordan K, MA on 12/22/2025 1204]

- Follow-up (MVA 12/16/2025 Dizziness)

Revision History

Brekke, Jordan K, MA on 12/22/2025 1203

- Follow-up (MVA 12/16/2025)

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F

Printed by 97165 at 2/4/26 1:49 PM



Greendale Health Center -
Froedtert & the Medical College
of Wisconsin Community
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Visit date: 12/22/2025

Reason for Visit (continued)

Visit Diagnoses *[last edited by Siddiqui, Ali H, MD on 12/22/2025 1230]*

- Subdural hygroma (primary)
- Lightheadedness
- Essential hypertension

Revision History

Action	Name	User	Date/Time
Diagnosis #1			
Add	Subdural hygroma (primary)	Siddiqui, Ali H, MD	12/22/2025 1225
Diagnosis #2			
Add	Lightheadedness	Siddiqui, Ali H, MD	12/22/2025 1229
Diagnosis #3			
Add	Essential hypertension	Siddiqui, Ali H, MD	12/22/2025 1230

Visit Information

Provider Information

Encounter Provider	Authorizing Provider
Siddiqui, Ali H, MD	Siddiqui, Ali H, MD

Department

Name	Address	Phone	Fax
Family Medicine, Greendale Health Center	6220 W Loomis Rd Greendale WI 53129	414-423-0555	414-423-8268

Level of Service

Level of Service
PR OFFICE/OUTPATIENT ESTABLISHED MOD MDM 30-39 MIN

Patient as-of Visit

Problem List as of 12/22/2025

Problems last reviewed by Siddiqui, Ali H, MD on 12/22/2025 1740

COPD (chronic obstructive pulmonary disease) *[last edited by Dement, Kristin E, DO on 7/18/2023 0708]*

Diagnosis: COPD (chronic obstructive pulmonary disease) Noted on: 07/18/2023 Chronic: No

Essential hypertension *[last edited by Dement, Kristin E, DO on 7/18/2023 0708]*

Diagnosis: Essential hypertension Noted on: 07/18/2023 Chronic: No

Glaucoma *[last edited by Dement, Kristin E, DO on 7/18/2023 0708]*

Diagnosis: Glaucoma Noted on: 09/24/2014 Chronic: No

Hyperlipidemia *[last edited by Dement, Kristin E, DO on 7/18/2023 0709]*

Diagnosis: Hyperlipidemia Noted on: 07/18/2023 Chronic: No

Incomplete bladder emptying *[last edited by Dement, Kristin E, DO on 7/18/2023 0708]*

This problem has been resolved.

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F



Greendale Health Center -
Froedtert & the Medical College
of Wisconsin Community
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Visit date: 12/22/2025

Current Medications (continued)

Start date: 7/21/2025
Refill: 2 refills by 7/21/2026

Quantity: 90 tablet

tiZANidine (ZANAFLEX) 2 MG tablet [reconciled by Hernandez, Isabel, MA on 12/17/2025 0938]

Instructions: Take 2 mg by mouth every 8 hours as needed.
Entered by: Hernandez, Isabel, MA
Start date: 12/16/2025

Entered on: 12/17/2025

Stopped in Visit

None

Progress Notes

Progress Notes by Siddiqui, Ali H, MD at 12/22/2025 1213

Version 1 of 1

Author: Siddiqui, Ali H, MD
Filed: 12/22/2025 5:40 PM
Status: Signed

Service: —
Encounter Date: 12/22/2025
Editor: Siddiqui, Ali H, MD (Physician)

Author Type: Physician
Creation Time: 12/22/2025 12:13 PM

HPI**History of Present Illness**

The patient is an 82-year-old female who presents today for a follow-up after a motor vehicle accident. Patient is accompanied by her daughter

She was involved in a head-on collision with a city truck that ran a stop sign last Tuesday, which was her birthday. Despite wearing her seatbelt, she experienced a sudden jolt forward and backward, resulting in a head impact against the headrest and a subsequent lump on her back. She did not seek immediate medical attention but visited an urgent care facility later that day. The following morning, she consulted with her primary care physician's assistant, Erin Clawson, who recommended CT scans of her head, upper back, and neck. These scans revealed no acute abnormalities, suspected subdural hygroma, microvascular ischemic disease, no fracture of the cervical spine, multiple cervical spondylosis, and a left upper lobe pulmonary micronodule. Airbags were not deployed and the incident

She reports intermittent lightheadedness, which began post-accident and has been persistent for the past few days. Her symptoms typically manifest after physical activity, such as attending church or taking out the garbage. She maintains good balance and has no significant vision issues, although she has experienced mild blurriness. She has no known eye conditions. She has a new lump on her back, extending across her spine just below her neck, with some discoloration underneath. This lump was not present before the accident. She has not undergone any blood work.

Hobbies: Knitting and crocheting
Living Condition: Lives alone

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F

Progress Notes (continued)

ROS

BP 118/70 (BP taken on: Left Upper Arm, Patient Position During BP: Sitting, Cuff Size: Adult Regular) | Pulse 88 | Resp 16 | Ht 1.626 m (5' 4") | Wt 64.5 kg (142 lb 3.2 oz) | BMI 24.41 kg/m²

Physical Exam

HENT:

Head: Normocephalic and atraumatic.
Right Ear: Tympanic membrane normal.
Left Ear: Tympanic membrane normal.
Nose: Nose normal. No congestion.

Eyes:

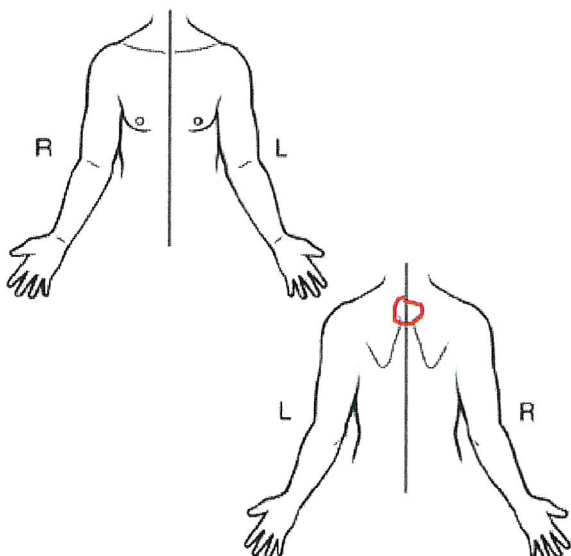
General:
Right eye: No discharge.
Left eye: No discharge.
Conjunctiva/sclera: Conjunctivae normal.
Pupils: Pupils are equal, round, and reactive to light.

Cardiovascular:

Rate and Rhythm: Normal rate.

Musculoskeletal:

Arms:



Cervical back: **Rigidity** present. No tenderness.

Comments: **Localized swelling noted on the upper back, appears to be a subcutaneous swelling**

Neurological:

General: No focal deficit present.
Mental Status: She is alert.
Cranial Nerves: No cranial nerve deficit.
Sensory: No sensory deficit.
Motor: No weakness.

Progress Notes (continued)

Coordination: Coordination normal.

Gait: Gait normal.

Deep Tendon Reflexes: Reflexes normal.

Psychiatric:

Mood and Affect: Mood normal.

Cognition and Memory: Cognition normal.

CT C Spine W/O Cont

Result Date: 12/19/2025

Examination(s): CT head and cervical spine without contrast. Clinical information: Recent car accident, dizziness, neck pain. Comparison(s): None. Technique: CT of the head and cervical spine obtained without contrast. CT exam(s) performed using one or more of the following dose-reduction techniques: automated exposure control, adjustment of the mA and/or kV according to patient size, and/or iterative reconstruction technique. Findings: CT head: Brain parenchyma: No acute hemorrhage or blurring of grey-white differentiation. Nonspecific scattered hypoattenuating foci in the supratentorial white matter. Age-related generalized parenchymal volume loss. Extra-axial: No acute hemorrhage, fluid collection or mass effect. Nonspecific prominence of the biparietal CSF spaces. Thin probable chronic hygroma along the left convexity given the slight inward displacement of the cortical vessels. Ventricles: Ventriculomegaly proportionate to extent of nonspecific brain volume loss. No hydrocephalus. Vessels: Atherosclerotic calcifications in the intracranial carotid, vertebral and M1 and A2 arteries. Orbits: Symmetric bilateral enophthalmos. Bilateral lens implants and arcus senilis. Otherwise atraumatic. Paranasal sinuses and mastoids: Minimal mucosal thickening in the ethmoid air cells.. Small osteoma in the right ethmoid and sphenoid sinuses. Mastoid air cells are clear. Bones: No acute skull fractures. Nonspecific well-circumscribed lucency in the right parietal bone, favored benign. Soft tissues: No suspicious findings. Tiny mineralized presumed benign dermal calcification along the left lateral supraorbital ridge. CT cervical spine: Numbering: There are 7 cervical vertebrae. Alignment: Preserved atlanto-occipital and atlanto-axial articulations. Trace anterolisthesis of C3-C4 and C7-T1. Nonspecific straightening of the normal cervical lordosis. Bones, discs and soft tissues: No acute fractures. Diffuse osseous demineralization. Advanced degenerative changes at the anterior atlantoaxial joint. Chronic degenerative mild anterior wedging and height loss at C5 and C6. Suspected Schmorl's node along the C7 superior endplate. Complete ankylosis across the left C2-C3 facets and partial ankylosis across the right facet and vertebral bodies. Multilevel degenerative disc disease most pronounced at C5-C6 with severe disc height loss, degenerative endplate subchondral cystic change, sclerosis and osteophytosis. Multilevel facet arthropathy, most pronounced at right C3-C4, left C4-C5 and C7-T1. No prevertebral edema. Detailed assessment of spinal canal and neural foramina limited secondary to technique (CT versus MR). With this caveat, pertinent level-wise findings as follows: No critical osseous spinal canal or neural foraminal narrowing. Moderate neural foraminal stenosis at right C3-C4, left C4-C5 and C5-C6 related to uncovertebral/facet arthropathy. Other: 5 mm left apical pulmonary nodule. Atherosclerotic calcifications at the carotid bifurcations.

Impression CT Head: 1. No acute intracranial abnormality. 2. Suspected thin chronic subdural hygroma along the left cerebral convexity. No midline shift. 3. Presumed mild chronic microvascular ischemic

Progress Notes (continued)

disease. CT Cervical Spine: 1. No acute fracture or traumatic subluxation of the cervical spine. 2. Multilevel cervical spondylosis most pronounced at C5-C6 without critical spinal canal stenosis. 3. Left apical pulmonary micronodule. Consider dedicated CT chest for complete characterization, especially if the patient is high risk.

CT Head W/O Cont

Result Date: 12/19/2025

Examination(s): CT head and cervical spine without contrast. Clinical information: Recent car accident, dizziness, neck pain. Comparison(s): None. Technique: CT of the head and cervical spine obtained without contrast. CT exam(s) performed using one or more of the following dose-reduction techniques: automated exposure control, adjustment of the mA and/or kV according to patient size, and/or iterative reconstruction technique. Findings: CT head: Brain parenchyma: No acute hemorrhage or blurring of grey-white differentiation. Nonspecific scattered hypoattenuating foci in the supratentorial white matter. Age-related generalized parenchymal volume loss. Extra-axial: No acute hemorrhage, fluid collection or mass effect. Nonspecific prominence of the biparietal CSF spaces. Thin probable chronic hygroma along the left convexity given the slight inward displacement of the cortical vessels. Ventricles: Ventriculomegaly proportionate to extent of nonspecific brain volume loss. No hydrocephalus. Vessels: Atherosclerotic calcifications in the intracranial carotid, vertebral and M1 and A2 arteries. Orbits: Symmetric bilateral enophthalmos. Bilateral lens implants and arcus senilis. Otherwise atraumatic. Paranasal sinuses and mastoids: Minimal mucosal thickening in the ethmoid air cells.. Small osteoma in the right ethmoid and sphenoid sinuses. Mastoid air cells are clear. Bones: No acute skull fractures. Nonspecific well-circumscribed lucency in the right parietal bone, favored benign. Soft tissues: No suspicious findings. Tiny mineralized presumed benign dermal calcification along the left lateral supraorbital ridge. CT cervical spine: Numbering: There are 7 cervical vertebrae. Alignment: Preserved atlanto-occipital and atlanto-axial articulations. Trace anterolisthesis of C3-C4 and C7-T1. Nonspecific straightening of the normal cervical lordosis. Bones, discs and soft tissues: No acute fractures. Diffuse osseous demineralization. Advanced degenerative changes at the anterior atlantoaxial joint. Chronic degenerative mild anterior wedging and height loss at C5 and C6. Suspected Schmorl's node along the C7 superior endplate. Complete ankylosis across the left C2-C3 facets and partial ankylosis across the right facet and vertebral bodies. Multilevel degenerative disc disease most pronounced at C5-C6 with severe disc height loss, degenerative endplate subchondral cystic change, sclerosis and osteophytosis. Multilevel facet arthropathy, most pronounced at right C3-C4, left C4-C5 and C7-T1. No prevertebral edema. Detailed assessment of spinal canal and neural foramina limited secondary to technique (CT versus MR). With this caveat, pertinent level-wise findings as follows: No critical osseous spinal canal or neural foraminal narrowing. Moderate neural foraminal stenosis at right C3-C4, left C4-C5 and C5-C6 related to uncovertebral/facet arthropathy. Other: 5 mm left apical pulmonary nodule. Atherosclerotic calcifications at the carotid bifurcations.

Impression CT Head: 1. No acute intracranial abnormality. 2. Suspected thin chronic subdural hygroma along the left cerebral convexity. No midline shift. 3. Presumed mild chronic microvascular ischemic disease. CT Cervical Spine: 1. No acute fracture or traumatic subluxation of the cervical spine. 2. Multilevel cervical spondylosis most pronounced at C5-C6 without critical spinal canal stenosis. 3. Left apical pulmonary micronodule. Consider dedicated CT chest for complete characterization, especially if the patient is high risk.

Progress Notes (continued)

Impression and Plan:

Joanne M Wied is a 82 Y female with

Diagnoses this encounter:

Subdural hygroma
Lightheadedness
Essential hypertension

Orders Placed This Encounter

- MR Brain W/O Cont
- Complete Blood Count & Differential
- Basic Metabolic Panel

Assessment & Plan**1. Post-concussion syndrome:**

Subdural hygroma noted on the initial imaging, unclear if this is as a result of the recent impact

- Symptoms of lightheadedness and dizziness are consistent with post-concussion syndrome following a recent motor vehicle accident.
- Neurologically intact with no significant deficits noted during the examination.
- An MRI will be ordered to further investigate the findings from the CT scan. Blood work will also be conducted to rule out any other potential causes of symptoms.
- Advised to limit physical activity, avoid excessive reading or exposure to bright lights, ensure stability before walking, monitor blood pressure at home, and limit screen time. A general post-concussion guideline will be provided for reference.

2. Lump on back:

- Lump on the back, which could be a hematoma or lipoma, noted. It is not causing pain and appears to be decreasing in size.
- If the lump does not resolve, an ultrasound will be considered to further evaluate it.

Follow-up: The patient will follow up in 01/2026.

A total of 32 minutes was personally spent today during both the patient's face-to-face encounter and for non-face-to-face time preparing to see the patient.

Services performed during this time include reviewing medical records, obtaining and/or reviewing separately obtained history, performing a medically appropriate examination and/or evaluation, counseling and educating the patient/family/caregiver, and documenting clinical information in the electronic record and when applicable communication with other medical personnel involved in patient care.

See patient instructions, and follow up recommendations in Epic.



Greendale Health Center -
Froedtert & the Medical College
of Wisconsin Community
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Visit date: 12/22/2025

Progress Notes (continued)

Electronically signed by Siddiqui, Ali H, MD at 12/22/2025 5:40 PM

Additional Notes

Nursing Note

Brekke, Jordan K, MA at 12/22/2025 1206

Version 1 of 1

Author: Brekke, Jordan K, MA
Filed: 12/22/2025 12:09 PM
Status: Signed

Service: —
Encounter Date: 12/22/2025
Editor: Brekke, Jordan K, MA (Medical Assistant)

Author Type: Medical Assistant
Creation Time: 12/22/2025 12:06 PM

Joanne M Wied is a 82 Y female presenting today for Follow-up (MVA 12/16/2025/Dizziness).
Accompanied by: Self

Patient is here for follow up on MVA. Still having dizziness. Patient states vision is blurry when getting light headed and dizziness.

Health Maintenance Due

Topic	Date Due
• Initial PFT (w/ Bronchodilator) for Patient with COPD	Never done
• RSV Vaccine Adults - Pregnant (Abrysvo) and Older Adults (1 - 1-dose 75+ series)	Never done
• Bone Density Monitoring	03/10/2023
• Seasonal Flu Immunization (1)	09/01/2025
• COVID-19 Vaccine (3 - 2025-26 season)	09/01/2025
• Lipid Panel	01/20/2026
• Depression Screening	01/20/2026
• Diabetes Screening	01/20/2026

Vital signs taken. Medications and allergies reviewed with patient.

Jordan K Brekke, MA

Electronically signed by Brekke, Jordan K, MA at 12/22/2025 12:09 PM

Labs

Lab

Complete Blood Count & Differential (Completed) [628817476]

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F

Printed by 97165 at 2/4/26 1:49 PM



Greendale Health Center -
Froedtert & the Medical College
of Wisconsin Community
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Wied, Joanne M

MRN: 3654555, DOB: 12/16/1943, Legal Sex: F

Visit date: 12/22/2025

Labs (continued)

Electronically signed by: **Siddiqui, Ali H, MD on 12/22/25 1237**

Status: **Completed**

Ordering user: Siddiqui, Ali H, MD 12/22/25 1237

Authorized by: Siddiqui, Ali H, MD

Ordering mode: Standard

Frequency: Routine 12/22/25 -

Class: Lab Collect

Quantity: 1

Diagnoses

Lightheadedness [R42]

Provider Details

Provider	NPI
Siddiqui, Ali H, MD	1922210178

Specimen Information

ID	Type	Source	Collected By
—	Blood	Blood Venous	—

Complete Blood Count & Differential [628832467]

Resulted: 12/22/25 1558, Result status: Final result

Order status: Completed

Filed by: Lab, Background User 12/22/25 1558

Collected by: Anderson, Sharoniquira 12/22/25 1323

Resulting lab: DREXEL TOWN CENTER LAB - CP

CLIA number: 52D2140776

Acknowledged by

Siddiqui, Ali H, MD on 12/22/25 1729

Maranowicz, Bethany, RN on 12/31/25 1427

Components

Component	Value	Reference Range	Flag	Lab
WBC	6.9	4.0 - 10.0 10e3/uL	—	12301017
RBC	4.5	3.7 - 5.2 10e6/uL	—	12301017
Hemoglobin	13.5	11.3 - 15.1 g/dL	—	12301017
Hematocrit	42	34 - 45 %	—	12301017
MCV	93	79 - 98 fL	—	12301017
MCH	30.2	26.0 - 33.0 pg	—	12301017
MCHC	32	32 - 36 g/dL	—	12301017
RDW	12.2	11.0 - 14.9 %	—	12301017
Platelet Count	204	160 - 400 10e3/uL	—	12301017
MPV	10.5	9.0 - 11.8 fL	—	12301017
Automated Nucleated RBC	0	/100 WBC	—	12301017
Auto Neutrophil %	70	43 - 74 %	—	12301017
Auto Lymphocyte %	20	17 - 46 %	—	12301017
Auto Monocyte %	9	4 - 13 %	—	12301017
Auto Eosinophil %	1	0 - 6 %	—	12301017
Auto Basophil %	0	0 - 1 %	—	12301017
Auto Immature Granulocyte %	0	0 - 1 %	—	12301017
Auto Absolute Neutrophil	4.76	1.90 - 7.00 10e3/uL	—	12301017
Auto Absolute Lymphocyte	1.35	0.90 - 3.20 10e3/uL	—	12301017
Auto Absolute Monocyte	0.65	0.26 - 0.86 10e3/uL	—	12301017
Auto Absolute Eosinophil	0.06	0.03 - 0.50 10e3/uL	—	12301017
Auto Absolute Basophil	0.03	0.01 - 0.10 10e3/uL	—	12301017

Wied, Joanne M

MRN: 3654555, DOB: 12/16/1943, Legal Sex: F



Greendale Health Center - Wied, Joanne M
Froedtert & the Medical College MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
of Wisconsin Community Visit date: 12/22/2025
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Labs (continued)

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
12301017 - Unknown	DREXEL TOWN CENTER LAB - CP	Nerenz, Robert D, PHD	7901 S. 6th Stl. Oak Creek WI 53154	06/20/24 1405 - Present

Indications

Lightheadedness [R42 (ICD-10-CM)]

Result Notes

Ali H Siddiqui, MD
12/22/2025 5:29 PM CST

Patient informed via MyChart

Basic Metabolic Panel (Completed) [628817477]

Electronically signed by: Siddiqui, Ali H, MD on 12/22/25 1237

Status: Completed

Ordering user: Siddiqui, Ali H, MD 12/22/25 1237

Authorized by: Siddiqui, Ali H, MD

Ordering mode: Standard

Frequency: Routine 12/22/25 -

Class: Lab Collect

Quantity: 1

Diagnoses

Lightheadedness [R42]

Provider Details

Provider	NPI
Siddiqui, Ali H, MD	1922210178

Specimen Information

ID	Type	Source	Collected By
—	Blood	Blood Venous	—

Basic Metabolic Panel [628832468] (Abnormal)

Resulted: 12/22/25 1615, Result status: Final result

Order status: Completed

Filed by: Lab, Background User 12/22/25 1615

Collected by: Anderson, Sharoniqua 12/22/25 1323

Resulting lab: DREXEL TOWN CENTER LAB - CP

CLIA number: 52D2140776

Acknowledged by

Siddiqui, Ali H, MD on 12/22/25 1729

Maranowicz, Bethany, RN on 12/31/25 1427

Components

Component	Value	Reference Range	Flag	Lab
Blood Urea Nitrogen	10	6 - 23 mg/dL	—	12301017
Sodium	140	136 - 145 mmol/L	—	12301017
Potassium	3.7	3.4 - 5.1 mmol/L	—	12301017
Chloride	102	98 - 107 mmol/L	—	12301017
CO2, Total	29	22 - 29 mmol/L	—	12301017
Anion Gap	9	7 - 15 mmol/L	—	12301017
Glucose	72	70 - 180 mg/dL	—	12301017
Creatinine	0.49	0.50 - 1.10 mg/dL	L v	12301017
eGFR (CKD-EPI 2021)	94	>=60 mL/min/1.73 m2	—	12301017
Calcium	9.0	8.6 - 10.2 mg/dL	—	12301017

Wied, Joanne M

MRN: 3654555, DOB: 12/16/1943, Legal Sex: F



Greendale Health Center -
Froedtert & the Medical College
of Wisconsin Community
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Visit date: 12/22/2025

Labs (continued)

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
12301017 - Unknown	DREXEL TOWN CENTER LAB - CP	Nerenz, Robert D, PHD	7901 S. 6th Stl. Oak Creek WI 53154	06/20/24 1405 - Present

Indications

Lightheadedness [R42 (ICD-10-CM)]

Result Notes

Ali H Siddiqui, MD
12/22/2025 5:29 PM CST

Patient informed via MyChart

All Orders

No orders and results found

Imaging

Imaging

MR Brain W/O Cont (Completed) [628817478]

Electronically signed by: Siddiqui, Ali H, MD on 12/22/25 1237

Status: Completed

Ordering user: Siddiqui, Ali H, MD 12/22/25 1237

Authorized by: Siddiqui, Ali H, MD

Ordering mode: Standard

Frequency: Routine 12/22/25 -

Class: Ancillary Performed

Quantity: 1

Diagnoses

Subdural hygroma [G96.08]

Lightheadedness [R42]

Provider Details

Provider	NPI
Siddiqui, Ali H, MD	1922210178

Questionnaire

Question	Answer
Clinical Indication	Subdural Hygroma
Is the patient claustrophobic?	No
Does the patient have a pacemaker, defibrillator, stimulator, or pump? (Safety review of implanted devices must be completed before scheduling; this may require additional coordination for scheduling.)	No
If IV and/or oral contrast is needed per radiology protocol, imaging staff to order and administer.	Yes
Is any sedation necessary?	None
Are any advanced series required?	No
Does this require TRICKS/TWIST for AVM (arterial venous malformation) evaluation?	No
Release to patient	Immediate

Wied, Joanne M

MRN: 3654555, DOB: 12/16/1943, Legal Sex: F

Imaging (continued)

MR Brain W/O Cont [629756782]

Resulted: 12/30/25 0935, Result status: Final result

Order status: Completed
Filed by: Interface, Fh_Inbound_Rad 12/30/25 0938
Accession number: FH00016221145
Acknowledged by
Siddiqui, Ali H, MD on 12/30/25 1719
Maranowicz, Bethany, RN on 12/31/25 1427

Resulted by: Beck, Ryan T, MD
Performed: 12/29/25 0845 - 12/29/25 0901
Resulting lab: RADIOLOGY FROEDTERT

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
209 - RADFH	RADIOLOGY FROEDTERT	Unknown	Unknown	08/06/04 0100 - Present

Study Result

Examination(s): MR brain without contrast.

Clinical information: Reported subdural hygroma.

Comparison(s): CT head and cervical spine without contrast: 12/17/2025.

Technique:

Multisequence, multiplanar MR of the brain obtained without contrast.

Findings:

Brain parenchyma: No acute infarct or hemorrhage. Nonspecific scattered foci of T2 prolongation in the supratentorial white matter. No encephalomalacia, vasogenic edema or abnormal susceptibility artifact.

Extra-axial: Nonspecific convex superior margin of pituitary gland (2:11). Normal pineal region. An 11 mm maximal axial thickness left cerebral convexity subdural fluid collection with tiny foci of susceptibility artifact at far superior margin (4:79-87) and signal isointense to CSF elsewhere with similar-sized hypodense correlates and similar minimal underlying cerebral deformity on prior CT. No midline shift. Patent basal cisterns.

Ventricles: Normal. Tiny benign variant left atrial xanthogranuloma.

Vessels: Preserved major intracranial flow voids. Partially imaged probable loop or variant tortuosity of distal left cervical ICA.

Orbits: Nonspecific symmetric enophthalmos and disconjugate gaze. Bilateral lens implants.

Paranasal sinuses and mastoids: Minimal bilateral ethmoid sinus mucosal thickening. Normal right mastoid air cells. Trace fluidlike-like signal in left mastoid tip.



Greendale Health Center -
Froedtert & the Medical College
of Wisconsin Community
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Visit date: 12/22/2025

Imaging (continued)

Bones: No suspicious findings. Benign variant hyperostosis frontalis interna.

Soft tissues: No suspicious findings.

Impression:

No acute findings or mass.

Thin left cerebral convexity chronic subdural hygroma of unknown cause (e.g. coagulopathy, prior trauma, possible cerebral amyloid angiopathy) and minimal local mass effect similar to CT from 12/17/2025.

Mild presumed small vessel disease.

Indications

Subdural hygroma [G96.08 (ICD-10-CM)]
Lightheadedness [R42 (ICD-10-CM)]

Study Signed

Electronically signed by Beck, Ryan T, MD on 12/30/25 at 0935 CST

Result Notes

Ali H Siddiqui, MD
12/30/2025 5:19 PM CST

Please inform patient of following results-findings of the subdural hygroma confirmed on the MRI, if patient is asymptomatic, it appears to be stable and patient can follow-up with neurology

Procedures

No documentation.

Other Orders

Appointment Requests**Primary Care Follow-Up Appt Request (Active) [628806810]**

Electronically signed by: **Siddiqui, Ali H, MD on 12/22/25 1237**
Ordering user: Siddiqui, Ali H, MD 12/22/25 1237
Ordering mode: Standard
Frequency: Routine 12/22/25 -
Quantity: 1

Status: **Active**
Authorized by: Siddiqui, Ali H, MD
Class: Clinic Performed
Released by: Siddiqui, Ali H, MD 12/22/25 1237

Provider Details

Provider	NPI
Siddiqui, Ali H, MD	1922210178

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F

12/22/2025 - Office Visit in Family Medicine, Greendale Health Center (continued)

Documents

After Visit Summary - Document on 12/22/2025 12:34 PM: After Visit Summary

Document (below)

AFTER VISIT SUMMARY

Joanne M. Wied DoB: 12/16/1943
 CEID: FCH-WP9F-8MS6-VRFZ

12/22/2025 12:15 PM Family Medicine, Greendale
 Health Center 414-423-0555

Instructions from Ali Siddiqui, MD



Read the attached information

Returning to Sports and Activities After a Concussion Adult
 (English)

What's Next

JAN
21
2026

**Medicare Annual Wellness Visit
 with Kristin Dement, DO**
 Wednesday January 21 8:00 AM
 (Arrive by 7:45 AM)

Family Medicine,
 Greendale Health
 Center
 6220 W Loomis Rd
 GREENDALE WI 53129
 414-805-6644

What You Need to Know About Lab and Test Results

- If you had labs and/or tests done, you will receive your results via MyChart. You can access MyChart through the Froedtert & MCW mobile app or online at froedtert.com/mychart.
- To help you stay as informed as possible, we send results when they are final, which may be before your provider has reviewed them. Your provider may wait for more tests or information before adding comments or contacting you directly. Please ask your provider when you should expect to hear from them.
- You can choose to view your results as soon as they are sent or wait to discuss them with your provider – whatever makes you most comfortable.

Today's Visit



You saw Ali Siddiqui, MD on
 Monday December 22, 2025.
 The following issues were
 addressed: Subdural hygroma,
 Lightheadedness, and Essential
 hypertension.



**Blood
 Pressure**
 118/70



BMI
 24.41



Weight
 142 lb
 3.2 oz



Height
 5' 4"



Pulse
 88



Respiration
 16



Greendale Health Center - Wied, Joanne M
Froedtert & the Medical College MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
of Wisconsin Community Visit date: 12/22/2025
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

12/22/2025 - Office Visit in Family Medicine, Greendale Health Center (continued)

Documents (continued)

Stay Connected

Log into MyChart to view this After Visit Summary and more at my.froedtert.com.

Don't miss important updates. Text **START** to **50127** to start or keep receiving text messages about your appointments, health, billing, prescriptions and more.

Text messages related to your relationship with Froedtert Health and its affiliates, including updates related your visits, Froedtert & MCW (MyChart) account, one-time passcode, billing notifications, prescription reminders and care management will be sent to the phone number you provided. Message and data rates may apply. Message frequency may vary. Text HELP for help and text STOP to opt out of notifications from a specific short code. Please review the terms and conditions and privacy policy at froedtert.com.



Greendale Health Center - Wied, Joanne M
Froedtert & the Medical College MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
of Wisconsin Community Visit date: 12/22/2025
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

12/22/2025 - Office Visit in Family Medicine, Greendale Health Center (continued)

Documents (continued)

Changes to Your Medication List

ⓘ Accurate as of December 22, 2025 12:34 PM.
If you have any questions, ask your nurse or doctor.

CONTINUE taking these medications

amLODIPine 5 MG tablet Commonly known as: NORVASC	Take 1 tablet (5 mg total) by mouth daily.
Calcium Carb-Cholecalciferol 600-20 MG-MCG Chew Tab	Chew and swallow by mouth daily.
latanoprost 0.005 % ophthalmic drops Commonly known as: XALATAN	Apply 1 Drop to each eye daily.
lisinopril 40 MG tablet Commonly known as: PRINIVIL or ZESTRIL	Take 1 tablet (40 mg total) by mouth daily.
simvastatin 40 MG tablet Commonly known as: ZOCOR	Take 1 tablet (40 mg total) by mouth nightly.
tiZANidine 2 MG tablet Commonly known as: ZANAFLEX	Take 2 mg by mouth every 8 hours as needed.

12/22/2025 - Office Visit in Family Medicine, Greendale Health Center (continued)

Documents (continued)

 Attached Information

Returning to Sports and Activities After a Concussion Adult (English)

Returning to Sports and Activities After a Concussion, Adult

It is important to know when you can return to sports and activities after a concussion. Wait to return to activities until your symptoms are all gone and your health care provider says that it is safe. If you return to activities too soon, you may have serious and long-term (*chronic*) problems.

If you have had a bad concussion, you may also need to take time away from work or other activities that require you to focus. Concussions can have serious effects on your brain. If you have more than one concussion, you are at greater risk of having chronic headaches and problems with learning.

When can I return to sports or other activities?

You should stop doing an activity right away after you hit your head, or when you think you have a concussion. You need to rest your body and mind. You should also be watched closely by another adult. How soon you can return to sports and other activities depends on:

- Your age.
- How bad your concussion is.
- Your health before the injury.
- Whether you have had a concussion in the past.

How should I return to sports or other activities?



You should not return to sports or activities until you are free from symptoms for at least 24 hours without taking medicine. Your health care provider will decide when your symptoms are gone, and it is safe for you to return to normal activities.

Return to sports slowly. **Do not** try to do too much too soon. Follow these steps when you return to sports or other activities:

1. Start with only light activity that causes your heart to beat faster (*aerobic activity*). You may bike, walk, or jog for up to 10 minutes. **Do not** jump, run, or lift weights.
2. Get moderate physical activity with some head and body movements. You may run short distances, jog fast, use a stationary bike, and lift weights of moderate intensity.
3. Do high-intensity exercise without physical contact.
4. Return to your normal practice routine. This may include full contact with others.
5. Return to play in games, matches, or competitions.

12/22/2025 - Office Visit in Family Medicine, Greendale Health Center (continued)

Documents (continued)

Some people can move quickly through these steps. Others will need a few days to go from one step to the next. **Do not** move on to the next step until you have been free from symptoms for at least 24 hours after doing activity at a prior step. Symptoms to watch for include:

- Tiredness (*fatigue*).
- Headache.
- Problems with balance, coordination, or memory.

If you notice any of these signs, rest for at least 24 hours or until the symptoms go away. You can then start the activity again. Start at the step that you were on before your symptoms began.

What symptoms should I report to my health care provider?

Symptoms may not appear right away. They could also get worse at any time. Let your health care provider know if you have any new symptoms or if your symptoms get worse. These may include:

Physical symptoms

- Headaches.
- Dizziness and problems with coordination or balance.
- Being sensitive to light or noise.
- Nausea or vomiting.
- Fatigue.
- Problems with vision or hearing.
- Seizure.

Mental and emotional symptoms

- Irritability or mood changes.
- Memory problems.
- Trouble focusing, organizing, or making decisions.
- Changes in eating or sleeping patterns.
- Slowness in thinking, acting or reacting, speaking, or reading.
- Anxiety or depression.

Other health problems

Some health problems may make your recovery take longer. Let your health care provider know if you have:

- A history of migraines.
- Depression.
- Mood disorders.
- Anxiety.
- A disorder that affects how you learn and grow (*developmental disorder*). This includes attention-deficit/hyperactivity disorder (ADHD).
- Had any concussions in the past.

12/22/2025 - Office Visit in Family Medicine, Greendale Health Center (continued)

Documents (continued)

Questions to ask your health care provider

Learn as much as you can about your injury to help protect your long-term health. Ask your health care provider questions about treatment, side effects, and what to do if you have another concussion. These may include:

Questions about recovery and treatment

- Is it safe for me to return to sports or other activities?
- Should I limit how much time I watch TV, play video games, or use a computer?
- Do I need to take time away from work?
- Do I need more sleep than normal?

Questions about the effects of a concussion

- What are some short-term and long-term problems I might have from my injury?
- How might this affect my career?
- Could I have problems with memory or learning?

Questions about getting another concussion

- When should I go to the emergency room?
- What happens if I get another concussion?
- What are the warning signs of a concussion?
- Could I have a concussion without knowing it?
- How can I prevent another concussion?
- Should I think about not playing sports anymore?

Where to find more information

- Centers for Disease Control and Prevention: [cdc.gov](https://www.cdc.gov)

This information is not intended to replace advice given to you by your health care provider. Make sure you discuss any questions you have with your health care provider.

Document Revised: 05/17/2023 Document Reviewed: 05/17/2023
Elsevier Patient Education © 2023 Elsevier Inc.



Greendale Health Center -
Froedtert & the Medical College
of Wisconsin Community
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Visit date: 12/22/2025

12/22/2025 - Office Visit in Family Medicine, Greendale Health Center (continued)

Documents (continued)

Find Support for Your Health Goals in the Wellness Marketplace

During your visit, you may have discussed health goals with your doctor. The Froedtert & MCW health network partners with Vale Health to offer health and wellness products to support those goals. You can feel confident knowing that the products and resources available in the Wellness Marketplace are carefully vetted. Find wellness solutions at froedtert.valehealth.com, or scan the QR code for quick access.



ValeHealth

A Partnership With

Froedtert





Greendale Health Center -
Froedtert & the Medical College
of Wisconsin Community
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Visit date: 12/22/2025

Additional Notes

Nursing Note

Anderson, Sharoniquira at 12/22/2025 1318

Version 1 of 1

Author: Anderson, Sharoniquira
Filed: 12/22/2025 1:23 PM
Status: Signed

Service: —
Encounter Date: 12/22/2025
Editor: Anderson, Sharoniquira (Sensitive Viewing)

Author Type: Sensitive Viewing
Creation Time: 12/22/2025 1:18 PM

Non fasting

Electronically signed by Anderson, Sharoniquira at 12/22/2025 1:23 PM

Labs

Lab

Complete Blood Count & Differential (Final result) [628832467]

Electronically signed by: Siddiqui, Ali H, MD on 12/22/25 1237

Status: **Completed**

This order may be acted on in another encounter.

Ordering user: Siddiqui, Ali H, MD 12/22/25 1237

Authorized by: Siddiqui, Ali H, MD

Ordering mode: Standard

Frequency: Routine 12/22/25 -

Class: Lab Collect

Quantity: 1

Lab status: Final result

Instance released by: Anderson, Sharoniquira 12/22/2025 1:23 PM

Diagnoses

Lightheadedness [R42]

Provider Details

Provider

Siddiqui, Ali H, MD

NPI

1922210178

Specimen Information

ID	Type	Draw Type	Source	Collected By
25DX- 356HE0086	Blood	Venipuncture	Blood Venous	Anderson, Sharoniquira 12/22/25 1323

Complete Blood Count & Differential [628832467]

Resulted: 12/22/25 1558, Result status: Final result

Order status: Completed

Filed by: Lab, Background User 12/22/25 1558

Collected by: Anderson, Sharoniquira 12/22/25 1323

Resulting lab: DREXEL TOWN CENTER LAB - CP

CLIA number: 52D2140776

Acknowledged by

Siddiqui, Ali H, MD on 12/22/25 1729

Maranowicz, Bethany, RN on 12/31/25 1427

Components

Component	Value	Reference Range	Flag	Lab
WBC	6.9	4.0 - 10.0 10e3/uL	—	12301017
RBC	4.5	3.7 - 5.2 10e6/uL	—	12301017
Hemoglobin	13.5	11.3 - 15.1 g/dL	—	12301017
Hematocrit	42	34 - 45 %	—	12301017
MCV	93	79 - 98 fL	—	12301017
MCH	30.2	26.0 - 33.0 pg	—	12301017

Wied, Joanne M

MRN: 3654555, DOB: 12/16/1943, Legal Sex: F

Printed by 97165 at 2/4/26 1:49 PM



Greendale Health Center - Wied, Joanne M
Froedtert & the Medical College MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
of Wisconsin Community Visit date: 12/22/2025
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Labs (continued)

MCHC	32	32 - 36 g/dL	—	12301017
RDW	12.2	11.0 - 14.9 %	—	12301017
Platelet Count	204	160 - 400 10e3/uL	—	12301017
MPV	10.5	9.0 - 11.8 fl	—	12301017
Automated Nucleated RBC	0	/100 WBC	—	12301017
Auto Neutrophil %	70	43 - 74 %	—	12301017
Auto Lymphocyte %	20	17 - 46 %	—	12301017
Auto Monocyte %	9	4 - 13 %	—	12301017
Auto Eosinophil %	1	0 - 6 %	—	12301017
Auto Basophil %	0	0 - 1 %	—	12301017
Auto Immature Granulocyte %	0	0 - 1 %	—	12301017
Auto Absolute Neutrophil	4.76	1.90 - 7.00 10e3/uL	—	12301017
Auto Absolute Lymphocyte	1.35	0.90 - 3.20 10e3/uL	—	12301017
Auto Absolute Monocyte	0.65	0.26 - 0.86 10e3/uL	—	12301017
Auto Absolute Eosinophil	0.06	0.03 - 0.50 10e3/uL	—	12301017
Auto Absolute Basophil	0.03	0.01 - 0.10 10e3/uL	—	12301017

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
12301017 - Unknown	DREXEL TOWN CENTER LAB - CP	Nerenz, Robert D, PHD	7901 S. 6th Stl. Oak Creek WI 53154	06/20/24 1405 - Present

Indications

Lightheadedness [R42 (ICD-10-CM)]

Result Notes

Ali H Siddiqui, MD

12/22/2025 5:29 PM CST

Patient informed via MyChart

All Reviewers List

Maranowicz, Bethany, RN on 12/31/2025 14:27

Siddiqui, Ali H, MD on 12/22/2025 17:29

Basic Metabolic Panel (Final result) [628832468]

Electronically signed by: Siddiqui, Ali H, MD on 12/22/25 1237

Status: Completed

This order may be acted on in another encounter.

Ordering user: Siddiqui, Ali H, MD 12/22/25 1237

Authorized by: Siddiqui, Ali H, MD

Ordering mode: Standard

Frequency: Routine 12/22/25 -

Class: Lab Collect

Quantity: 1

Lab status: Final result

Instance released by: Anderson, Sharoniquira 12/22/2025 1:23 PM

Diagnoses

Lightheadedness [R42]

Provider Details

Wied, Joanne M

MRN: 3654555, DOB: 12/16/1943, Legal Sex: F

Labs (continued)

Provider	NPI
Siddiqui, Ali H, MD	1922210178

Specimen Information

ID	Type	Draw Type	Source	Collected By
25DX-356CH0216	Blood	Venipuncture	Blood Venous	Anderson, Sharoniquira 12/22/25 1323

Basic Metabolic Panel [628832468] (Abnormal)

Resulted: 12/22/25 1615, Result status: Final result

Order status: Completed
 Collected by: Anderson, Sharoniquira 12/22/25 1323
 CLIA number: 52D2140776
 Acknowledged by
 Siddiqui, Ali H, MD on 12/22/25 1729
 Maranowicz, Bethany, RN on 12/31/25 1427

Filed by: Lab, Background User 12/22/25 1615
 Resulting lab: DREXEL TOWN CENTER LAB - CP

Components

Component	Value	Reference Range	Flag	Lab
Blood Urea Nitrogen	10	6 - 23 mg/dL	—	12301017
Sodium	140	136 - 145 mmol/L	—	12301017
Potassium	3.7	3.4 - 5.1 mmol/L	—	12301017
Chloride	102	98 - 107 mmol/L	—	12301017
CO2, Total	29	22 - 29 mmol/L	—	12301017
Anion Gap	9	7 - 15 mmol/L	—	12301017
Glucose	72	70 - 180 mg/dL	—	12301017
Creatinine	0.49	0.50 - 1.10 mg/dL	L ▼	12301017
eGFR (CKD-EPI 2021)	94	>=60 mL/min/1.73 m2	—	12301017
Calcium	9.0	8.6 - 10.2 mg/dL	—	12301017

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
12301017 - Unknown	DREXEL TOWN CENTER LAB - CP	Nerenz, Robert D, PHD	7901 S. 6th Stl. Oak Creek WI 53154	06/20/24 1405 - Present

Indications

Lightheadedness [R42 (ICD-10-CM)]

Result Notes

Ali H Siddiqui, MD
 12/22/2025 5:29 PM CST

Patient informed via MyChart

All Reviewers List

Maranowicz, Bethany, RN on 12/31/2025 14:27
 Siddiqui, Ali H, MD on 12/22/2025 17:29



Center for Diagnostic Imaging
10050 S. 27th Street
Oak Creek WI 53154

Wied, Joanne M
MRN: 07130023, DOB: 12/16/1943, Legal Sex: F
Acct #: 6510273050
Adm: 12/29/2025, D/C: 12/29/2025

12/29/2025 - MR Exam in Department of Magnetic Resonance Imaging, RAYUS Oak Creek (continued)

Flowsheets (continued)

Score

Row Name	12/29/25 2001	12/30/25 0001
----------	---------------	---------------

OTHER

Workload Acuity Score	10 -SB at 12/29/25 2019	10 -SB at 12/30/25 0019
-----------------------	-------------------------	-------------------------

User Key

(r) = Recorded By, (t) = Taken By, (c) = Cosigned By

Initials	Name	Provider Type	Discipline	Dates Documented
CH	Him Integrity, Checker	—	—	12/30/2025
SB	Batchjob, Scoring System	—	—	12/29/2025, 12/30/2025

Coding Summary

Account Information

Hospital Account	Primary Payor	Affiliated Recurring Accounts	Combined from HAR
6510273050 - WIED, JOANNE M	UHC MEDICARE [25249]	None	None

Admission Information

Arrival Date/Time:		Admit Date/Time:	12/29/2025 0841	IP Adm. Date/Time:	
Admission Type:	Elective	Point of Origin:	Non-health Care Facility	Admit Category:	
Means of Arrival:		Primary Service:		Secondary Service:	
Transfer Source:		Service Area:	FROEDTERT & THE MEDICAL COLLEGE OF WISCONSIN HEALTH NETWORK	Unit:	Department of Magnetic Resonance Imaging, RAYUS Oak Creek
Admit Provider:		Attending Provider:	Beck, Ryan T, MD	Referring Provider:	Siddiqui, Ali H, MD

Discharge Information

Discharge Date/Time	Discharge Disposition	Discharge Destination	Discharge Provider	Unit
12/29/2025 2359	Home Or Self Care	None	None	Department of Magnetic Resonance Imaging, RAYUS Oak Creek

Admission Diagnoses / Reasons for Visit (ICD-10-CM)

Code	Description	Comments
G96.08	Other cranial cerebrospinal fluid leak	
R42	Dizziness and giddiness	

Final Diagnoses (ICD-10-CM)

Code	Description	POA	CC	HAC	Affects DRG
G96.08	Other cranial cerebrospinal fluid leak				
[Principal]					
R42	Dizziness and giddiness				

**12/29/2025 - MR Exam in Department of Magnetic Resonance Imaging, RAYUS Oak Creek
Communication Routing**

Communication Routing History

None

Wied, Joanne M
MRN: 07130023, DOB: 12/16/1943, Legal Sex: F

Printed by 97165 at 2/4/26 1:49 PM



Center for Diagnostic Imaging
10050 S. 27th Street
Oak Creek WI 53154

Wied, Joanne M
MRN: 07130023, DOB: 12/16/1943, Legal Sex: F
Acct #: 6510273050
Adm: 12/29/2025, D/C: 12/29/2025

Face Sheet (continued)

Address: 5401 MANSFIELD DR GREENDALE, WI 53129	Sex: Female
Relation to Patient: Self	Home Phone:
Guarantor ID: 9442633	Work Phone:
GUARANTOR EMPLOYER	
Employer:	Status: RETIRED

COVERAGE

PRIMARY INSURANCE	
Payor: UHC MEDICARE	Plan: MEDICARE UHC MEDICARE
Group Number: 70000	Subscriber DOB: 12/16/1943
Subscriber Name: WIED,JOANNE M	
Subscriber ID: 912119254	
Pat. Rel. to Subscriber: Self	
SECONDARY INSURANCE	
Payor:	Plan:
Group Number:	Subscriber DOB:
Subscriber Name:	
Subscriber ID:	
Pat. Rel. to Subscriber:	

Contact Serial # (238150101)



Reason for Visit

Visit Diagnoses [last edited by Bkguser, Ltc Orders on 12/29/2025 0841]

- (primary)
- Subdural hygroma
- Lightheadedness

Revision History

Action	Name	User	Date/Time
Diagnosis #1			
Add	Subdural hygroma	Bkguser, Ltc Orders	12/29/2025 0841
Diagnosis #2			
Add	Lightheadedness	Bkguser, Ltc Orders	12/29/2025 0841

Visit Information

Provider Information

Referring Provider

Siddiqui, Ali H, MD

Department

Name	Address	Phone	Fax
Department of Magnetic Resonance	10050 S. 27th Street	414-774-7226	414-761-1536

Wied, Joanne M
MRN: 07130023, DOB: 12/16/1943, Legal Sex: F



Center for Diagnostic Imaging
10050 S. 27th Street
Oak Creek WI 53154

Wied, Joanne M
MRN: 07130023, DOB: 12/16/1943, Legal Sex: F
Acct #: 6510273050
Adm: 12/29/2025, D/C: 12/29/2025

Current Medications (continued)

Stopped in Visit

None

Events

Hospital Outpatient at 12/29/2025 0841

Unit: Department of Magnetic Resonance Imaging, RAYUS Oak Creek
User: Olivas, Amayrani Patient class: Outpatient

Discharge at 12/29/2025 2359

Unit: Department of Magnetic Resonance Imaging, RAYUS Oak Creek
User: Phtwoadt, Batchjob Patient class: Outpatient

Treatment Team

Provider	Service	Role	Provider Team	Specialty	From	To
Siddiqui, Ali H, MD	—	Attending	—	Family Practice	12/22/25 1522	12/29/25 2359

Treatment Team Audit Trail

User	Date/Time	Action	Provider	Role	ED
Cooke, Adrienne	12/22/25 1522	Add	Siddiqui, Ali H, MD	Attending	No

Labs

No documentation.

All Orders

No orders and results found

Imaging

Imaging

MR Brain W/O Cont (Final result) [629756782]

Electronically signed by: Siddiqui, Ali H, MD on 12/22/25 1237

Status: Completed

This order may be acted on in another encounter.

Ordering user: Siddiqui, Ali H, MD 12/22/25 1237

Authorized by: Siddiqui, Ali H, MD

Ordering mode: Standard

Frequency: Routine 12/29/25 0841 - 1 occurrence

Class: Ancillary Performed

Quantity: 1

Lab status: Final result

Instance released by: Olivas, Amayrani 12/29/2025 8:41 AM

Diagnoses

Subdural hygroma [G96.08]

Lightheadedness [R42]

Provider Details

Provider	NPI
Siddiqui, Ali H, MD	1922210178

Questionnaire

Wied, Joanne M

MRN: 07130023, DOB: 12/16/1943, Legal Sex: F

Printed by 97165 at 2/4/26 1:49 PM

Imaging (continued)

Question	Answer
Clinical Indication	Subdural Hygroma
Is the patient claustrophobic?	No
Does the patient have a pacemaker, defibrillator, stimulator, or pump? (Safety review of implanted devices must be completed before scheduling; this may require additional coordination for scheduling.)	No
If IV and/or oral contrast is needed per radiology protocol, imaging staff to order and administer.	Yes
Is any sedation necessary?	None
Are any advanced series required?	No
Does this require TRICKS/TWIST for AVM (arterial venous malformation) evaluation?	No
Release to patient	Immediate

Screening Form

General Information

Patient Name: Wied, Joanne M
Date of Birth: 12/16/1943
Legal Sex: Female

MRN: 07130023
Mobile: 414-517-7338

Procedure	Ordering Provider	Authorizing Provider	Appointment Information
MR BRAIN W/O CONT		Siddiqui, Ali H, MD 414-423-0555	12/29/2025 8:55 AM RAYUS OAK CREEK MR 1 OAK CREEK MRI RAYUS

Screening Form Questions

	Answer	Comment
For patient safety, please have the patient or POA to answer the following questions. These questions will be reviewed by a Registered MRI Technologist.		
I obtained the answers to the following questions directly from the patient or knowledgeable relative		
If patient was unable to provide the answers, who provided them to you? (name of individual required)		
Is the patient claustrophobic?		
Does the patient currently have or have they ever had any of the following: (Answer the questions listed below)		
Pacemaker or Defibrillator or Cardiac Leads or Wires?	No	
Neuro, Bone or Bladder Stimulator or Wires?	No	
Deep Brain Stimulator (DBS)?	No	
Pump? (Medication, insulin, pain)	No	
Rods, Pins, or Screws from Surgery?	No	
If so, where in your body?		
Spinal Surgery?	No	
If so, name of surgeon:		
Joint Replacement?	No	
Prosthesis? (Artificial Limbs, etc.)	No	
Metallic Stent, Filter, or Shunt?	No	
If so, type:		
Worked with metal without eye protection? (Welding, Grinding, etc.)	No	

Wied, Joanne M
MRN: 07130023, DOB: 12/16/1943, Legal Sex: F

Imaging (continued)

Aneurysm Clips?	No
Aneurysm Coils?	No
Ear Implant?	No
If so, type?	
Eye Implant?	No
If so, type?	
Hearing Aid?	No
Dentures, Braces, or Orthodontic Implant?	Yes
Penile Implant?	No
Breast tissue expanders?	No
Ventricular Assist Device? (VAD)	No
Are you currently undergoing Dialysis?	No
Do you receive iron infusions?	No
Gastric capsule camera?	No
Any surgery in the area being scanned?	No
Wearing a patch? (medications, nicotine, etc)	No
Over the counter silver bandage?	No
Continuous Glucose Monitor (CGM)?	No
Body Piercings?	No
Magnet on or inside of your body?	No
If so, what/where?	
Tattoos?	No
Electronic Ankle Bracelet?	No
Gunshot, Bullet, or Shrapnel?	No
Birth Control Implant?	No
If so, type?	
Wig, hairpiece or hair extensions with clips, combs or metal threading?	No
Other:	
Have you ever had a reaction or problem related to IV contrast?	No
If you are receiving contrast (dye) today, are you interested in receiving additional information in the form of a Medication Guide Approved by the FDA? (If so, please notify your technologist.)	

Ris Mr Bi Mychart Screening

Question

**12/29/2025 8:05 AM CST
- Filed by Patient**

For your safety, please answer the following questions found on pages 1-8 for your upcoming MRI appointment.

These questions will be reviewed with you by a Registered MRI Technologist.

Do you have or have you ever had:

Pacemaker, Defibrillator, Cardiac Leads, or Wires?	No
Neuro, Bone or Bladder Stimulator or Wires?	No
Deep Brain Stimulator (DBS)?	No
Pump? (Medication, Insulin, Pain)	No
Rods, Pins, or Screws from Surgery?	No
Spinal Surgery?	No
Joint Replacement?	No
Page 1 of 6	

Prosthesis? (Artificial Limbs, etc.)	No
Metallic Stent, Filter, or Shunt?	No

Imaging (continued)

Worked with metal (Welding, grinding, etc.) with out eye protection? No
Aneurysm Clips? No
Aneurysm Coils? No
Ear Implant? No
Eye Implant? No
Hearing Aid? No
Page 2 of 6

Dentures, Braces, or Orthodontic Implant? Yes
Penile Implant? No
Breast Tissue Expanders? No
Ventricular Assist Device? (VAD) No
Are you currently undergoing Dialysis? No
Do you receive iron infusions? No
Gastric Capsule Camera? No
Page 3 of 6

History of surgery in the area being scanned? No
Medication Patch? (Nicotine, Lidocaine, Birth Control, etc) No
Over-the-counter silver bandage? No
Continuous Glucose Monitor (CGM)? No
Body Piercing? No
Magnet on or inside of your body? No
Tattoos? No
Page 4 of 6

Electronic Ankle Bracelet? No
Gunshot, Bullet, or Shrapnel? No
Birth Control Implant? No
Wig, hairpiece or hair extensions with clips, combs or metal threading? No
Other Implanted Devices?

Have you ever had a reaction or problem related to IV contrast? No
If you are receiving contrast (dye) today, are you interested in receiving additional information in the form of a Medication Guide Approved by the FDA? (If so, please notify your technologist.) No
Page 5 of 6

Are you having a breast MRI? No
Page 6 of 6

Form History

Status	User	Time
Created	N/A	12/22/2025 12:37 PM CST
Accessed	Olivas, Amayrani	12/29/2025 08:15 AM CST

Scan on 12/29/2025 8:55 AM by Malecki, Samantha, RTR (below)

Imaging (continued)

Was patient identified with two identifiers? Yes

Was sedation provided during this procedure? No

What type of sedation was provided during this procedure?

Were there any complications during the exam? None

Were additional MR Safety related tasks required for this exam? No

MRI safety assessment of implanted device and/or a foreign body, completed by Physician or Physicist. Includes review of MRI conditions, risk assessment, benefit evaluation, and determination of equipment requirements and/or image acquisition parameters.

Type of Enteric Contrast NA or None

Route of Enteric Contrast

Amount of Enteric Contrast (ML)

Once in the exam area, did you have the patient remove jewelry, hearing aide, dentures, clothing or jackets, etc for the exam? No

Appointment where the Documentation Resides:

What belongings were removed?

Where were belongings stored?

Were the patient belongings returned upon patient leaving the exam area?

Did you ask the patient and did they state that they had all their personal belongings before leaving the exam area?

MR Brain W/O Cont [629756782]

Resulted: 12/30/25 0935, Result status: Final result

Order status: Completed
Filed by: Interface, Fh_Inbound_Rad 12/30/25 0938
Accession number: FH00016221145
Acknowledged by
Siddiqui, Ali H, MD on 12/30/25 1719
Maranowicz, Bethany, RN on 12/31/25 1427

Resulted by: Beck, Ryan T, MD
Performed: 12/29/25 0845 - 12/29/25 0901
Resulting lab: RADIOLOGY FROEDTERT

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
209 - RADFH	RADIOLOGY FROEDTERT	Unknown	Unknown	08/06/04 0100 - Present

Study Result

Examination(s): MR brain without contrast.

Clinical information: Reported subdural hygroma.

Comparison(s): CT head and cervical spine without contrast: 12/17/2025.

Imaging (continued)

Technique:

Multisequence, multiplanar MR of the brain obtained without contrast.

Findings:

Brain parenchyma: No acute infarct or hemorrhage. Nonspecific scattered foci of T2 prolongation in the supratentorial white matter. No encephalomalacia, vasogenic edema or abnormal susceptibility artifact.

Extra-axial: Nonspecific convex superior margin of pituitary gland (2:11). Normal pineal region. An 11 mm maximal axial thickness left cerebral convexity subdural fluid collection with tiny foci of susceptibility artifact at far superior margin (4:79-87) and signal isointense to CSF elsewhere with similar-sized hypodense correlates and similar minimal underlying cerebral deformity on prior CT. No midline shift. Patent basal cisterns.

Ventricles: Normal. Tiny benign variant left atrial xanthogranuloma.

Vessels: Preserved major intracranial flow voids. Partially imaged probable loop or variant tortuosity of distal left cervical ICA.

Orbits: Nonspecific symmetric enophthalmos and disconjugate gaze. Bilateral lens implants.

Paranasal sinuses and mastoids: Minimal bilateral ethmoid sinus mucosal thickening. Normal right mastoid air cells. Trace fluidlike-like signal in left mastoid tip.

Bones: No suspicious findings. Benign variant hyperostosis frontalis interna.

Soft tissues: No suspicious findings.

Impression:

No acute findings or mass.

Thin left cerebral convexity chronic subdural hygroma of unknown cause (e.g. coagulopathy, prior trauma, possible cerebral amyloid angiopathy) and minimal local mass effect similar to CT from 12/17/2025.

Mild presumed small vessel disease.

Indications

Subdural hygroma [G96.08 (ICD-10-CM)]
Lightheadedness [R42 (ICD-10-CM)]

Study Signed

Electronically signed by Beck, Ryan T, MD on 12/30/25 at 0935 CST

Wied, Joanne M
MRN: 07130023, DOB: 12/16/1943, Legal Sex: F

Imaging (continued)

Result Notes

Ali H Siddiqui, MD
12/30/2025 5:19 PM CST

Please inform patient of following results-findings of the subdural hygroma confirmed on the MRI, if patient is asymptomatic, it appears to be stable and patient can follow-up with neurology

All Reviewers List

Maranowicz, Bethany, RN on 12/31/2025 14:27
Siddiqui, Ali H, MD on 12/30/2025 17:19

Procedures

No documentation.

Other Orders

No documentation.

Questionnaires

Legend:

Triggered an OurPractice Advisory Scoring question

Ris Mr Bi Mychart Screening

Question	12/29/2025 8:05 AM CST - Filed by Patient
For your safety, please answer the following questions found on pages 1-8 for your upcoming MRI appointment.	
These questions will be reviewed with you by a Registered MRI Technologist.	
Do you have or have you ever had:	
Pacemaker, Defibrillator, Cardiac Leads, or Wires?	No
Neuro, Bone or Bladder Stimulator or Wires?	No
Deep Brain Stimulator (DBS)?	No
Pump? (Medication, Insulin, Pain)	No
Rods, Pins, or Screws from Surgery?	No
Spinal Surgery?	No
Joint Replacement?	No
Page 1 of 6	
Prosthesis? (Artificial Limbs, etc.)	No
Metallic Stent, Filter, or Shunt?	No
Worked with metal (Welding, grinding, etc.) with out eye protection?	No
Aneurysm Clips?	No
Aneurysm Coils?	No
Ear Implant?	No
Eye Implant?	No
Hearing Aid?	No



North Hills Health Center -
Froedtert & the Medical College
of Wisconsin Community
Physicians
W129N7055 Northfield Dr
Ste A304
MENOMONEE FALLS WI
53051

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Visit date: 1/2/2026

Current Medications (continued)

lisinopril (PRINIVIL OR ZESTRIL) 40 MG tablet

Instructions: Take 1 tablet (40 mg total) by mouth daily.

Authorized by: Dement, Kristin E, DO

Start date: 1/21/2026

Refill: 2 refills by 1/21/2027

Ordered on: 1/21/2026

Quantity: 90 tablet

simvastatin (ZOCOR) 40 MG tablet

Instructions: Take 1 tablet (40 mg total) by mouth nightly.

Authorized by: Dement, Kristin E, DO

Start date: 1/21/2026

Refill: 2 refills by 1/21/2027

Ordered on: 1/21/2026

Quantity: 90 tablet

Stopped in Visit

None

Additional Notes

Telephone Encounter

Giemza, Kelly, RN at 1/7/2026 1524

Version 1 of 1

Author: Giemza, Kelly, RN

Filed: 1/7/2026 3:26 PM

Status: Signed

Service: —

Encounter Date: 1/2/2026

Editor: Giemza, Kelly, RN (Registered Nurse)

Author Type: Registered Nurse

Creation Time: 1/7/2026 3:24 PM

Chart review-

Pt scheduled for SJHC

Future Appointments

Date	Time	Provider	Department	Center
1/7/2026	5:30 PM	TOSA CT 1	CTTOSA	Radtosa
1/21/2026	8:00 AM	Dement, Kristin E, DO	FAMGDHCLM	GDHC
4/7/2026	8:00 AM	Nspfwc, Neuropsychology Tbi Clinic	SCBNSP	SCB
4/7/2026	2:00 PM	Voegeli, Mary K, APNP	PMRFEC	SCB
1/21/2027	9:00 AM	Champeau, Daniel D, MD	NEUSJHC	PVHC

Referral reason:

Diagnosis Information

Diagnosis

G96.08 (ICD-10-CM) - Subdural hygroma

V89.2XXD (ICD-10-CM) - Motor vehicle accident, subsequent encounter

Wied, Joanne M

MRN: 3654555, DOB: 12/16/1943, Legal Sex: F

Printed by 97165 at 2/4/26 1:49 PM



North Hills Health Center -
Froedtert & the Medical College
of Wisconsin Community
Physicians
W129N7055 Northfield Dr
Ste A304
MENOMONEE FALLS WI
53051

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Visit date: 1/2/2026

Additional Notes (continued)

Note from 1/2/2026

Background: Pt was in MVC on 12/16/25. Saw Dr. Siddiqui in follow up on 12/22/25. Pt was given a referral to neurology, but the first appt is in January 2027. Neurology staff recommended that she be referred for TBI, as she will be seen sooner

Electronically signed by Giemza, Kelly, RN at 1/7/2026 3:26 PM

Woo, Lynn M, RN at 1/2/2026 1237

Version 1 of 1

Author: Woo, Lynn M, RN
Filed: 1/2/2026 12:37 PM
Status: Signed

Service: —
Encounter Date: 1/2/2026
Editor: Woo, Lynn M, RN (Registered Nurse)

Author Type: Registered Nurse
Creation Time: 1/2/2026 12:37 PM

----- Message from Amanda B sent at 1/2/2026 12:36 PM CST -----
Just making sure Dr Champeau will see for this? Pt is already scheduled.

Thank you,

Amy

Electronically signed by Woo, Lynn M, RN at 1/2/2026 12:37 PM

Labs

No documentation.

All Orders

No orders and results found

Imaging

No documentation.

Procedures

No documentation.

Other Orders

No documentation.

**01/02/2026 - Telephone in Neurology, North Hills Health Center Building A
Discharge Instructions**

Discharge Instructions

No notes of this type exist for this encounter.

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F

Printed by 97165 at 2/4/26 1:49 PM



Greendale Health Center - Wied, Joanne M
Froedtert & the Medical College MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
of Wisconsin Community Visit date: 1/21/2026
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Face Sheet (continued)

PATIENT

Name:	Wied,Joanne M	DOB:	12/16/1943			
Address:	5401 MANSFIELD DR	Sex:	Female			
City:	GREENDALE, WI 53129					
Primary Phone:	414-517-7338	Race:	White			
Primary Care Provider:	Dement, Kristin E, DO	Ethnicity:	Not Hispanic, Latino/a, *			
EMERGENCY CONTACT						
<u>Contact Name</u>	<u>Guardian</u>	<u>Relationship</u>	<u>Home Phone</u>	<u>Work Phone</u>	<u>Mobile Phone</u>	<u>Preferred</u>
1. Knoke,Jennifer		Daughter	262-696-4017		715-281-0232	
2. COTTREAU,JEANNE		Daughter			414-803-5432	Mobile phone

GUARANTOR

Guarantor:	WIED,JOANNE M	DOB:	12/16/1943
Address:	5401 MANSFIELD DR	Sex:	Female
	GREENDALE, WI 53129		
Relation to Patient:	Self	Home Phone:	
Guarantor ID:	9442633	Work Phone:	
GUARANTOR EMPLOYER			
Employer:		Status:	RETIRED

COVERAGE

PRIMARY INSURANCE			
Payor:	UHC MEDICARE	Plan:	MEDICARE UHC MEDICARE
Group Number:	70000	Subscriber DOB:	12/16/1943
Subscriber Name:	WIED,JOANNE M		
Subscriber ID:	912119254		
Pat. Rel. to Subscriber:	Self		
SECONDARY INSURANCE			
Payor:		Plan:	
Group Number:		Subscriber DOB:	
Subscriber Name:			
Subscriber ID:			
Pat. Rel. to Subscriber:			

Contact Serial # (226899025)



Reason for Visit

Chief Complaint [last edited by Howard, Cleonia, MA on 1/21/2026 0756]

- Annual Wellness Visit (C/o lump on back; upper back/neck. Patient was in an accident 12/16)

Visit Diagnoses [last edited by Dement, Kristin E, DO on 1/21/2026 0816]

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F

Printed by 97165 at 2/4/26 1:48 PM



Greendale Health Center -
Froedtert & the Medical College
of Wisconsin Community
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Visit date: 1/21/2026

Reason for Visit (continued)

- Medicare annual wellness visit, subsequent (primary)
- Well adult exam
- Mass of subcutaneous tissue of back
- Chronic obstructive pulmonary disease, unspecified COPD type (CMS-HCC)
- Essential hypertension
- Mixed hyperlipidemia
- Screening for diabetes mellitus
- Laboratory exam ordered as part of routine general medical examination

Revision History

Action	Name	User	Date/Time
Diagnosis #1			
Add	Medicare annual wellness visit, subsequent (primary)	Dement, Kristin E, DO	01/21/2026 0750
Diagnosis #2			
Add	Well adult exam	Dement, Kristin E, DO	01/21/2026 0750
Diagnosis #3			
Add	Essential hypertension	Dement, Kristin E, DO	01/21/2026 0750
Diagnosis #4			
Add	Mixed hyperlipidemia	Dement, Kristin E, DO	01/21/2026 0750
Diagnosis #5			
Add	Screening for diabetes mellitus	Dement, Kristin E, DO	01/21/2026 0750
Diagnosis #6			
Add	Laboratory exam ordered as part of routine general medical examination	Dement, Kristin E, DO	01/21/2026 0750
Diagnosis #7			
Add	Mass of subcutaneous tissue of back	Dement, Kristin E, DO	01/21/2026 0805
Diagnosis #8			
Modify	Chronic obstructive pulmonary disease, unspecified COPD type (CMS-HCC)	Dement, Kristin E, DO	01/21/2026 0816
Add	Chronic obstructive pulmonary disease, unspecified COPD type (CMS-HCC)	Dement, Kristin E, DO	01/21/2026 0814

Visit Information

Provider Information

Encounter Provider	Authorizing Provider	Referring Provider
Dement, Kristin E, DO	Dement, Kristin E, DO	Dement, Kristin E, DO

Department

Name	Address	Phone	Fax
Family Medicine, Greendale Health Center	6220 W Loomis Rd Greendale WI 53129	414-423-0555	414-423-8268

Level of Service

Level of Service	Modifiers
PR ANNUAL WELLNESS VISIT SUBSEQUENT	SIGNIFICANT, SPRTLY IDABLE EVAL & MGMT ON SAME DAY BY SAME PROV

Log History

LOS History
Additional EM Code History

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F



Greendale Health Center - Wied, Joanne M
Froedtert & the Medical College MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
of Wisconsin Community Visit date: 1/21/2026
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Current Medications (continued)

Start date: 12/16/2025

amLODIPine (NORVASC) 5 MG tablet

Instructions: Take 1 tablet (5 mg total) by mouth daily.

Authorized by: Dement, Kristin E, DO

Start date: 1/21/2026

Refill: 2 refills by 1/21/2027

Ordered on: 1/21/2026

Quantity: 90 tablet

lisinopril (PRINIVIL OR ZESTRIL) 40 MG tablet

Instructions: Take 1 tablet (40 mg total) by mouth daily.

Authorized by: Dement, Kristin E, DO

Start date: 1/21/2026

Refill: 2 refills by 1/21/2027

Ordered on: 1/21/2026

Quantity: 90 tablet

simvastatin (ZOCOR) 40 MG tablet

Instructions: Take 1 tablet (40 mg total) by mouth nightly.

Authorized by: Dement, Kristin E, DO

Start date: 1/21/2026

Refill: 2 refills by 1/21/2027

Ordered on: 1/21/2026

Quantity: 90 tablet

Stopped in Visit

None

Progress Notes

Progress Notes by Dement, Kristin E, DO at 1/21/2026 0800

Version 1 of 1

Author: Dement, Kristin E, DO

Filed: 1/21/2026 8:19 AM

Status: Signed

Service: —

Encounter Date: 1/21/2026

Editor: Dement, Kristin E, DO (Physician)

Author Type: Physician

Creation Time: 1/20/2026 11:50 AM

Name: Joanne M Wied

MRN: 3654555

Age: 82 Y

DOB: 12/16/1943

Today's Date: 1/21/2026

Joanne is here for the Subsequent Annual Wellness Visit (Medicare)

Allergies: Allergies^[1]

Wied, Joanne M

MRN: 3654555, DOB: 12/16/1943, Legal Sex: F

Printed by 97165 at 2/4/26 1:48 PM



Greendale Health Center -
Froedtert & the Medical College
of Wisconsin Community
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Visit date: 1/21/2026

Progress Notes (continued)

HISTORIES:

Problem list, medical history, surgical history, and family history reviewed and updated as necessary. At today's visit, attention was directed towards modifiable risk factors for disease detection, as part of Medicare Visit.

Current Problems: Problem List^[2]

Past Medical: Past Medical History^[3]

Surgical: Past Surgical History^[4]

Family: Family History^[5]

Marital Status: Widowed

Weight Readings from Last 3 Encounters

Wt Readings from Last 3 Encounters:

01/21/26	64.4 kg (142 lb)
12/22/25	64.5 kg (142 lb 3.2 oz)
12/17/25	64.6 kg (142 lb 6.4 oz)

Blood Pressure Readings from Last 3 Encounters

BP Readings from Last 3 Encounters:

01/21/26	124/60
12/22/25	118/70
12/17/25	122/66

Vitals

BP 124/60 | Pulse 81 | Temp 97.6 °F (36.4 °C) (Tympanic) | Resp 15 | Ht 1.626 m (5' 4") | Wt 64.4 kg (142 lb) | SpO2 99% | BMI 24.37 kg/m²

Prior to Visit Medications, Supplements, and Vitamins

Medications Prior to Visit^[6]

Preferred Pharmacy

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F



Greendale Health Center -
Froedtert & the Medical College
of Wisconsin Community
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Visit date: 1/21/2026

Progress Notes (continued)

Patient's preferred pharmacy was reviewed and updated as necessary. OPTUM HOME DELIVERY - OVERLAND PARK, KS - 6800 W 115TH STREET

Care Team (including outside providers/suppliers regularly involved in providing care):

Patient Care Team:

Dement, Kristin E, DO as PCP - General (Family Practice)

Providers and Hospitalizations Since Last Seen

<u>Care Team</u>	
Have you seen a healthcare provider outside our clinic since we last saw you?	No
<u>Hospitalizations</u>	
Have you been hospitalized since we last saw you?	No

Screenings for behavioral, psychosocial, function/safety/risks, and cognitive dysfunction were performed. These results, as well as other patient data from the Health Risk Assessment are documented in full in flowsheets linked to this patient.

General Health Risk Assessment:

Self-Assessment	Good
Life Satisfaction	Very Satisfied
Daily Stress	No stress concern present
Socialization	Social Drivers of Health Social Connections: Not At Risk (1/18/2026)
Chronic Pain	No

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F

Printed by 97165 at 2/4/26 1:48 PM



Greendale Health Center - Wied, Joanne M
Froedtert & the Medical College MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
of Wisconsin Community Visit date: 1/21/2026
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Progress Notes (continued)

Depression Screening was complete.

Patient Health Questionnaire-2 Score: (Patient-Rptd) 0

Depression Screening Plan: 0-3. Plan to follow up for rescreening in 1 year.

Memory / Cognitive Assessment

Patient-Reported Memory Concern: No

In clinic, clinician detection of Cognitive Impairment: No evidence of cognitive impairment by direct observation.

Behavioral Health Risk

OPIOID? No, not taking opioids

Tobacco	Joanne reports that she has been smoking cigarettes. She started smoking about 68 years ago. She has a 54.7 pack-year smoking history. She has never used smokeless tobacco.
Drug Use	Never
Alcohol Use	Alcohol Use: Not At Risk (1/18/2026) Audit C Ambulatory • Frequency of Alcohol Consumption: Monthly or less • Average Number of Drinks: 1 or 2 • Frequency of Binge Drinking: Never
Sexual Health Concerns	No
Physical Activity	Social Drivers of Health Physical Activity: Insufficiently Active (1/18/2026)
Oral Health	Excellent
Seatbelt Use	Yes
Healthy Diet/Nutrition	(!) No

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F

Progress Notes (continued)

Estimated body mass index is 24.37 kg/m² as calculated from the following:

Height as of this encounter: 1.626 m (5' 4").

Weight as of this encounter: 64.4 kg (142 lb).

Functional Ability

Activities of Daily Living Concern	No
Instruments of Activities of Daily Living Concern	No
Adequate Sleep	Yes
Hearing Concern	No
Urinary Incontinence	(!) Yes Affects daily activities or interferes with sleep: No

Level of Safety

Fall Risk: Level of Safety-Fall Risk Do you feel unsteady when you are standing or walking?	No
Do you worry about falling?	No
Have you fallen in the past year?	No
Home Safety Functioning Smoke Alarms:	Yes

Notes for personal health advice and referral: see Patient Instructions.

Assessment/Plan and Risk Review

Diagnosis:

Medicare annual wellness visit, subsequent

Well adult exam

Mass of subcutaneous tissue of back

Chronic obstructive pulmonary disease, unspecified COPD type (CMS-HCC)

Essential hypertension

Mixed hyperlipidemia



Greendale Health Center - Wied, Joanne M
Froedtert & the Medical College MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
of Wisconsin Community Visit date: 1/21/2026
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Progress Notes (continued)

Screening for diabetes mellitus

Laboratory exam ordered as part of routine general medical examination

Orders: The following orders (including any referrals) placed during this visit are:

Orders Placed This Encounter

- US Chest or Back Soft Tissue Mass
- Influenza High Dose, Trivalent (Fluzone), PF (65+ or post solid organ transplant 18yr+)
- Lipid Panel
- Hemoglobin A1C
- Comprehensive Metabolic Panel
- amLODIPine (NORVASC) 5 MG tablet
- lisinopril (PRINIVIL OR ZESTRIL) 40 MG tablet
- simvastatin (ZOCOR) 40 MG tablet

Medications: Patient should take all medications, supplements, and vitamins as instructed and should notify provider of any side effects or concerns.

Counseling and Education:

1. See Patient Instructions
2. For establishment of written screening schedule, please refer to Patient Orders.

1. Immunizations:

Pneumococcal: 1/20/25

Annual influenza: today

Tetanus: check at retail pharmacy

Shingles: check with insurance

COVID: declines

2. Colorectal cancer screening: Colonoscopy 2/24/17, aged out

3. Diabetes screen: ordered

4. Cholesterol screen: on statin

5. AAA screen: n/a

6. Mammogram: 12/22/21, aged out

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F



Greendale Health Center -
Froedtert & the Medical College
of Wisconsin Community
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Visit date: 1/21/2026

Progress Notes (continued)

7. Pap Smear: aged out
8. DEXA: 3/10/21, osteoporosis
9. Smoking cessation counseling: Yes
10. Advised to see eye doctor for glaucoma screening
11. Nutritional counseling: Advised following a primarily plant-based diet heavy in vegetables, fruits, beans, nuts and whole grains and limiting the amount of meat and dairy intake which includes milk, cheese, ice cream and yogurt, as well as sugar in the form of cakes, cookies, candies and in processed foods.
12. Physical activity counseling: Advised 30 minutes of physical activity 3-4 times/week.

EDUCATION Joanne M Wied was educated as to the above assessment and plan and did express understanding and agreement.

Follow-Up Visit

Future Labs/Procedures	Expected by	Expires
Primary Care Follow-Up Appt Request	7/21/2026 (Approximate)	1/21/2027
Questions: Reason for follow-up: Follow-Up Visit Duration: Established Visit Method: In-Person Who is the follow-up with?: Myself Follow up details: follow up PRN?: Patient instructions for labs: Pre-Visit Labs:		

Kristin E Dement, DO, IBCLC
1/21/2026

FAMILY PRACTICE OFFICE VISIT**CHIEF COMPLAINT:****Chief Complaint****Patient presents with**

- Annual Wellness Visit
C/o lump on back; upper back/neck. Patient was in an accident 12/16

SUBJECTIVE:

Chart reviewed: Patient was last seen on 7/21/25

Was in a car accident on 12/16, had some dizziness, shoulder blade pain, upper back swelling. CT head was ordered, incidental pulmonary nodule noted, subdural hygroma, likely incidental but MRI was ordered

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F



Greendale Health Center -
Froedtert & the Medical College
of Wisconsin Community
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Visit date: 1/21/2026

Progress Notes (continued)

Had CT chest done, left apical micronodules, recommend repeat in 12 months

HTN: amlodipine 5mg, lisinopril 40mg

HLD: simvastatin 40mg

COPD and current tobacco use

Osteoporosis: calcium, vitamin D

Urinary incontinence and prolapse: has seen urogyn, trialed on medication, surgery recommended.

Last labs 2025

Joanne M Wied is a 82 Y female who presented for annual exam.

Lump on upper back/neck since the accident but could have been there prior, she is not sure. No pain associated with it

Breathing has been fine

Diet: healthy

Fluids: water

Exercise: shoveled this morning, physically active

Sleep: sleep is good

Mood: no concerns

Supplements: per chart

PAST HISTORIES:

I have reviewed the past medical history, family history, social history, medications and allergies listed in the medical record as obtained by my nursing staff and support staff and agree with their documentation.

OBJECTIVE:

Physical Exam:

Vital Signs: BP 124/60 | Pulse 81 | Temp 97.6 °F (36.4 °C) (Tympanic) | Resp 15 | Ht 1.626 m (5' 4") | Wt 64.4 kg (142 lb) | SpO2 99% | BMI 24.37 kg/m²

General: Alert, cooperative, conversive in no acute distress

Head: Normocephalic atraumatic.

Neck: Trachea is midline.

Eyes: Normal conjunctivae and sclerae.

ENT: Canals clear without redness, swelling, or discharge. TM's pearly gray, landmarks intact, no perforation. Nares patent. Nasal mucosa pink, without lesions, discharge, or polyps. No sinus tenderness. Oral mucosa and gingiva pink without lesions, masses, or bleeding. Tongue moist, and pink. Posterior pharynx without increased erythema, no tonsillar swelling or exudates.

Cardiovascular: Regular rate and rhythm without murmur.

Respiratory: Normal respiratory effort. Clear to auscultation. No wheezes, rales or rhonchi.

Abdomen: Soft, non-distended, non-tender. Normal bowel sounds. No rebound tenderness or guarding. No masses or hepatosplenomegaly appreciated.

Musculoskeletal: ROM and motor strength grossly normal. No LE edema. Normal gait and station. Soft tissue mass, upper back as below, it is not firm, it is soft

Skin: Warm and dry without rash.

Neurologic: Oriented x3. No focal deficits.

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F

Progress Notes (continued)

Psychiatric: Cooperative. Appropriate mood and affect.





Greendale Health Center -
Froedtert & the Medical College
of Wisconsin Community
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Visit date: 1/21/2026

Progress Notes (continued)

LAB RESULTS:

All pertinent laboratory results were reviewed.

Depression Screen:

Patient Health Questionnaire-2 Score: (Patient-Rptd) 0 (1/18/2026 12:20 PM)

A depression screening was performed today with a score of 0-3. Plan to follow up for rescreening in 1 year.

Assessment and plan:

Joanne was seen today for annual wellness visit.

Diagnoses and all orders for this visit:

Medicare annual wellness visit, subsequent

Well adult exam

Discussed healthy lifestyle modifications. Recommendations for a diet heavy in plant based foods, engagement in physical activity 4-5x/week, and good sleep hygiene. Preventive health recommendations were discussed and ordered accordingly unless patient declined after counseling.

Mass of subcutaneous tissue of back

- US Chest or Back Soft Tissue Mass; Future

Chronic obstructive pulmonary disease, unspecified COPD type (CMS-HCC)

Asymptomatic at this time, doing well

Essential hypertension

Well controlled. Continue current management.

- amLODIPine (NORVASC) 5 MG tablet; Take 1 tablet (5 mg total) by mouth daily.
- lisinopril (PRINIVIL OR ZESTRIL) 40 MG tablet; Take 1 tablet (40 mg total) by mouth daily.

Mixed hyperlipidemia

- simvastatin (ZOCOR) 40 MG tablet; Take 1 tablet (40 mg total) by mouth nightly.

Screening for diabetes mellitus

- Hemoglobin A1C; Future

Laboratory exam ordered as part of routine general medical examination

- Lipid Panel; Future
- Comprehensive Metabolic Panel; Future

Other orders

- Primary Care Follow-Up Appt Request
- Influenza High Dose, Trivalent (Fluzone), PF (65+ or post solid organ transplant 18yr+)
- Primary Care Follow-Up Appt Request; Future

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F



Greendale Health Center - Wied, Joanne M
Froedtert & the Medical College MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
of Wisconsin Community Visit date: 1/21/2026
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Social Services Referral Notes (continued)

Labs

Lab

Lipid Panel (Completed) [634410327]

Electronically signed by: **Dement, Kristin E, DO on 01/21/26 0810** Status: **Completed**
Ordering user: Dement, Kristin E, DO 01/21/26 0810 Authorized by: Dement, Kristin E, DO
Ordering mode: Standard Class: Lab Collect
Frequency: Routine 01/21/26 - Released by: Dement, Kristin E, DO 01/21/26 0810
Quantity: 1
Diagnoses
Laboratory exam ordered as part of routine general medical examination [Z00.00]

Provider Details

Provider	NPI
Dement, Kristin E, DO	1205220233

Specimen Information

ID	Type	Source	Collected By
—	Blood	Blood Venous	—

Lipid Panel [634423359] (Normal)

Resulted: 01/21/26 1411, Result status: Final result

Order status: Completed Filed by: Lab, Background User 01/21/26 1411
Collected by: Anderson, Sharoniqua 01/21/26 0835 Resulting lab: DREXEL TOWN CENTER LAB - CP
CLIA number: 52D2140776
Acknowledged by: Dement, Kristin E, DO on 01/21/26 1426

Components

Component	Value	Reference Range	Flag	Lab
Cholesterol	186	<200 mg/dL	—	12301017
Comment: Adult (>=20 years) Total Cholesterol Target Values according to the National Heart Lung and Blood Institute ATPIII guidelines: Desirable: <200 mg/dL Borderline high: 200 - 239 mg/dL High: >=240 mg/dL				
Triglycerides	79	<150 mg/dL	—	12301017
Comment: Adults (>=20 years) Triglyceride target values according to the National Lipid Association and the National Cholesterol Education: Desirable: <150 mg/dL Borderline high: 150-199 mg/dL High: 200-499 mg/dL Very High: >=500 mg/dL				
Cholesterol HDL	79	40 - 60 mg/dL	—	12301017
Comment: Adult (>=20 years) HDL Target Values according to the National Heart Lung and Blood Institute ATPIII guidelines: Low: <40 mg/dL Desirable: 40 - 60 mg/dL High: >60 mg/dL				
Cholesterol LDL	93	<=100 mg/dL	—	12301017

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F

Labs (continued)

Comment:
 Adult (≥ 20 years) LDL target values according to the National Lipid Association and the National Cholesterol Education Program guidelines:
 Desirable: < 100 mg/dL
 Above Desirable: 100-129 mg/dL
 Borderline high: 130-159 mg/dL
 High: 160-189 mg/dL
 Very High: ≥ 190 mg/dL

The LDL concentration is calculated using the Sampson-NIH equation (Sampson M et al. JAMA Cardiol. 2020;5(5):540-548).

Total Cholesterol/HDL Ratio	2.35	< 5.00	—	12301017
-----------------------------	------	----------	---	----------

Comment:
 Cholesterol/HDL Ratio target values according to AHA Guideline:
 Optimum: < 3.5
 Goal: < 5.0

Non-HDL Cholesterol	107	≤ 129 mg/dL	—	12301017
---------------------	-----	------------------	---	----------

Comment:
 Adult (≥ 20 years) Non-HDL target values according to the National Lipid Association:
 Desirable: < 130 mg/dL
 Above desirable: 130-159 mg/dL
 Borderline high: 160-189 mg/dL
 High: 190-219 mg/dL
 Very High: ≥ 220 mg/dL

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
12301017 - Unknown	DREXEL TOWN CENTER LAB - CP	Nerenz, Robert D, PHD	7901 S. 6th Stl. Oak Creek WI 53154	06/20/24 1405 - Present

Indications

Laboratory exam ordered as part of routine general medical examination [Z00.00 (ICD-10-CM)]

Result Notes

Kristin E Dement, DO
 1/21/2026 2:26 PM CST
 Forwarded Result

Hemoglobin A1C (Completed) [634410328]

Electronically signed by: Dement, Kristin E, DO on 01/21/26 0810	Status: Completed
Ordering user: Dement, Kristin E, DO 01/21/26 0810	Authorized by: Dement, Kristin E, DO
Ordering mode: Standard	
Frequency: Routine 01/21/26 -	Class: Lab Collect
Quantity: 1	Released by: Dement, Kristin E, DO 01/21/26 0810
Diagnoses	
Screening for diabetes mellitus [Z13.1]	

Provider Details

Provider	NPI
----------	-----

Wied, Joanne M
 MRN: 3654555, DOB: 12/16/1943, Legal Sex: F



Greendale Health Center -
Froedtert & the Medical College
of Wisconsin Community
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Wied, Joanne M

MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Visit date: 1/21/2026

Labs (continued)

Dement, Kristin E, DO

1205220233

Specimen Information

ID	Type	Source	Collected By
—	Blood	Blood Venous	—

Hemoglobin A1C [634423360]

Resulted: 01/21/26 1331, Result status: Final result

Order status: Completed

Filed by: Lab, Background User 01/21/26 1331

Collected by: Anderson, Sharoniquira 01/21/26 0835

Resulting lab: DREXEL TOWN CENTER LAB - CP

CLIA number: 52D2140776

Acknowledged by: Dement, Kristin E, DO on 01/21/26 1426

Components

Component	Value	Reference Range	Flag	Lab
Hemoglobin A1C	5.5	<=5.6 %	—	12301017

Comment:

Prediabetes: 5.7 - 6.4%

Diabetes: >=6.5%

If the glycated hemoglobin A1c result seems inconsistent with clinical presentation or other lab results, factors that may cause inaccurate glycated hemoglobin measurement include hemoglobin variants (heterozygous or homozygous), hemoglobin F levels above 10%, conditions with shortened erythrocyte survival, iron deficiency, and chronic kidney disease (stages 4/5 or those treated with erythropoietin). Alternatives such as fructosamine measurement or tests using capillary electrophoresis or ion-exchange chromatography methods can be considered.

For consultation or assistance with interpretation, contact Pathology during weekdays by calling Wisconsin Diagnostic Laboratories Client Services at 414-805-7600.

Estimated Average Glucose	111	mg/dL	—	12301017
---------------------------	-----	-------	---	----------

Comment:

Estimated Average Glucose is a calculated result based on the A1C level and is used to relate results to the everyday glucose monitoring levels.

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
12301017 - Unknown	DREXEL TOWN CENTER LAB - CP	Nerenz, Robert D, PHD	7901 S. 6th Stl. Oak Creek WI 53154	06/20/24 1405 - Present

Indications

Screening for diabetes mellitus [Z13.1 (ICD-10-CM)]

Result Notes

Kristin E Dement, DO

1/21/2026 2:26 PM CST

Forwarded Result

Comprehensive Metabolic Panel (Completed) [634410329]

Electronically signed by: Dement, Kristin E, DO on 01/21/26 0810

Status: Completed

Ordering user: Dement, Kristin E, DO 01/21/26 0810

Authorized by: Dement, Kristin E, DO

Wied, Joanne M

MRN: 3654555, DOB: 12/16/1943, Legal Sex: F

Printed by 97165 at 2/4/26 1:48 PM



Greendale Health Center - Wied, Joanne M
Froedtert & the Medical College MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
of Wisconsin Community Visit date: 1/21/2026
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Labs (continued)

Ordering mode: Standard
Frequency: Routine 01/21/26 -
Quantity: 1
Diagnoses

Class: Lab Collect
Released by: Dement, Kristin E, DO 01/21/26 0810

Laboratory exam ordered as part of routine general medical examination [Z00.00]

Provider Details

Provider	NPI
Dement, Kristin E, DO	1205220233

Specimen Information

ID	Type	Source	Collected By
—	Blood	Blood Venous	—

Comprehensive Metabolic Panel [634423361] (Normal)

Resulted: 01/21/26 1411, Result status: Final result

Order status: Completed
Collected by: Anderson, Sharoniquira 01/21/26 0835
CLIA number: 52D2140776
Acknowledged by: Dement, Kristin E, DO on 01/21/26 1426

Filed by: Lab, Background User 01/21/26 1411
Resulting lab: DREXEL TOWN CENTER LAB - CP

Components

Component	Value	Reference Range	Flag	Lab
Blood Urea Nitrogen	17	6 - 23 mg/dL	—	12301017
Sodium	142	136 - 145 mmol/L	—	12301017
Potassium	3.7	3.4 - 5.1 mmol/L	—	12301017
Chloride	102	98 - 107 mmol/L	—	12301017
CO ₂ , Total	27	22 - 29 mmol/L	—	12301017
Anion Gap	13	7 - 15 mmol/L	—	12301017
Glucose	91	70 - 180 mg/dL	—	12301017
Creatinine	0.56	0.50 - 1.10 mg/dL	—	12301017
eGFR (CKD-EPI 2021)	91	>=60 mL/min/1.73 m ²	—	12301017
Albumin	4.6	3.8 - 5.0 g/dL	—	12301017
Protein, Total	7.1	6.1 - 8.2 g/dL	—	12301017
Calcium	9.3	8.6 - 10.2 mg/dL	—	12301017
Alkaline Phosphatase	74	35 - 104 U/L	—	12301017
Aspartate Aminotransferase	19	<35 U/L	—	12301017
Bilirubin Total	0.8	0.2 - 1.2 mg/dL	—	12301017
Alanine Aminotransferase	8	<30 U/L	—	12301017

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
12301017 - Unknown	DREXEL TOWN CENTER LAB - CP	Nerenz, Robert D, PHD	7901 S. 6th Stl. Oak Creek WI 53154	06/20/24 1405 - Present

Indications

Laboratory exam ordered as part of routine general medical examination [Z00.00 (ICD-10-CM)]

Result Notes

Kristin E Dement, DO
1/21/2026 2:26 PM CST
Forwarded Result

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F



Greendale Health Center - Wied, Joanne M
Froedtert & the Medical College MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
of Wisconsin Community Visit date: 1/21/2026
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Labs (continued)

All Orders

No orders and results found

Imaging

Imaging

US Chest or Back Soft Tissue Mass (Completed) [634415382]

Electronically signed by: **Dement, Kristin E, DO on 01/21/26 0810** Status: **Completed**
Ordering user: Dement, Kristin E, DO 01/21/26 0810 Authorized by: Dement, Kristin E, DO
Ordering mode: Standard
Frequency: Routine 01/21/26 - Class: Ancillary Performed
Quantity: 1
Diagnoses
Mass of subcutaneous tissue of back [R22.2]

Provider Details

Provider	NPI
Dement, Kristin E, DO	1205220233

Questionnaire

Question	Answer
Clinical Indication	upper back mass
Release to patient	Immediate

US Chest or Back Soft Tissue Mass [635839760]

Resulted: 01/28/26 1057, Result status: Final result

Order status: Completed
Filed by: Interface, Fh_Inbound_Rad 01/28/26 1100
Accession number: FH00016475913
Acknowledged by: Dement, Kristin E, DO on 01/28/26 1338
Resulted by: Ealba, Justin M, MD
Performed: 01/28/26 0806 - 01/28/26 0826
Resulting lab: RADIOLOGY FROEDTERT

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
209 - RADFH	RADIOLOGY FROEDTERT	Unknown	Unknown	08/06/04 0100 - Present

Study Result

Examination: Focused ultrasound soft tissue mass.

Clinical Information: upper back mass.

Comparison: None.

Technique: Focused grayscale and color Doppler ultrasound of the area of concern.

Imaging location: Upper back

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F



Greendale Health Center - Wied, Joanne M
Froedtert & the Medical College MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
of Wisconsin Community Visit date: 1/21/2026
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Imaging (continued)

Findings:

Targeted ultrasound of the area of concern in the left upper back demonstrates a subcutaneous circumscribed lesion with internal echogenicity equal to background subcutaneous fat, most consistent with a benign subcutaneous lipoma. This measures 5.9 x 1.1 x 5.4 cm. No thick internal septation or internal color Doppler flow.

Impression:

Target ultrasound of the area of concern in the upper back demonstrates a 5.9 cm subcutaneous lesion, most consistent with a lipoma.

Indications

Mass of subcutaneous tissue of back [R22.2 (ICD-10-CM)]

Study Signed

Electronically signed by Ealba, Justin M, MD on 1/28/26 at 1057 CST

Result Notes

Kristin E Dement, DO

1/28/2026 1:38 PM CST

Forwarded Result

Procedures

No documentation.

Other Orders

Appointment Requests

Primary Care Follow-Up Appt Request (Active) [634417057]

Electronically signed by: **Dement, Kristin E, DO** on 01/21/26 0815

Status: **Active**

This order may be acted on in another encounter.

Ordering user: Dement, Kristin E, DO 01/21/26 0815

Authorized by: Dement, Kristin E, DO

Ordering mode: Standard

Frequency: Routine 01/21/26 -

Class: Clinic Performed

Quantity: 1

Provider Details

Provider	NPI
Dement, Kristin E, DO	1205220233

Questionnaire

Question	Answer
Reason for follow-up:	Follow-Up
Visit Duration:	Established
Visit Method:	In-Person
Who is the follow-up with?	Myself

Wied, Joanne M

MRN: 3654555, DOB: 12/16/1943, Legal Sex: F



Greendale Health Center -
Froedtert & the Medical College
of Wisconsin Community
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Visit date: 1/21/2026

Other Orders (continued)

Follow up details:

follow up

Primary Care Follow-Up Appt Request (Active) [634409022]

Electronically signed by: **Dement, Kristin E, DO on 07/21/25 0802**

Status: **Active**

This order may be acted on in another encounter.

Ordering user: Dement, Kristin E, DO 07/21/25 0802

Authorized by: Dement, Kristin E, DO

Ordering mode: Standard

Frequency: Routine 07/21/25 -

Class: Clinic Performed

Quantity: 1

Instance released by: Shimek, Lori 1/21/2026 7:47 AM

Provider Details

Provider	NPI
Dement, Kristin E, DO	1205220233

Questionnaire

Question	Answer
Reason for follow-up:	Preventive Visit
Type of visit:	Routine Preventive (RPV)/Medicare Wellness (AWV)
Follow up details:	Routine Preventative/Annual Wellness Visit
Visit Method:	In-Person
Who is the follow-up with?	Myself

Immunization/Injection

Influenza High Dose, Trivalent (Fluzone), PF (65+ or post solid organ transplant 18yr+) (Completed) [634416670]

Electronically signed by: **Dement, Kristin E, DO on 01/21/26 0813**

Status: **Completed**

Ordering user: Dement, Kristin E, DO 01/21/26 0813

Authorized by: Dement, Kristin E, DO

Ordering mode: Standard

Frequency: Routine 01/21/26 -

Class: Clinic Performed

Quantity: 1

Provider Details

Provider	NPI
Dement, Kristin E, DO	1205220233

Medications

amLODIPine (NORVASC) 5 MG tablet (Active) [634410324]

Electronically signed by: **Dement, Kristin E, DO on 01/21/26 0810**

Status: **Active**

Ordering user: Dement, Kristin E, DO 01/21/26 0810

Authorized by: Dement, Kristin E, DO

Ordering mode: Standard

Frequency: q DAY 01/21/26 - 270 days

Class: Normal

Released by: Dement, Kristin E, DO 01/21/26 0810

Diagnoses

Essential hypertension [I10]

Provider Details

Provider	NPI
Dement, Kristin E, DO	1205220233

Reordered from: amLODIPine (NORVASC) 5 MG tablet [598327422]

lisinopril (PRINIVIL OR ZESTRIL) 40 MG tablet (Active) [634410325]

Electronically signed by: **Dement, Kristin E, DO on 01/21/26 0810**

Status: **Active**

Wied, Joanne M

MRN: 3654555, DOB: 12/16/1943, Legal Sex: F



Greendale Health Center - Wied, Joanne M
Froedtert & the Medical College MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
of Wisconsin Community Visit date: 1/21/2026
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Other Orders (continued)

Ordering user: Dement, Kristin E, DO 01/21/26 0810 Authorized by: Dement, Kristin E, DO
Ordering mode: Standard
Frequency: q DAY 01/21/26 - 270 days Class: Normal
Released by: Dement, Kristin E, DO 01/21/26 0810
Diagnoses
Essential hypertension [I10]

Provider Details

Provider	NPI
Dement, Kristin E, DO	1205220233

Reordered from: lisinopril (PRINIVIL OR ZESTRIL) 40 MG tablet [598327423]

simvastatin (ZOCOR) 40 MG tablet (Active) [634410326]

Electronically signed by: **Dement, Kristin E, DO on 01/21/26 0810** Status: **Active**
Ordering user: Dement, Kristin E, DO 01/21/26 0810 Authorized by: Dement, Kristin E, DO
Ordering mode: Standard
Frequency: Nightly 01/21/26 - 270 days Class: Normal
Released by: Dement, Kristin E, DO 01/21/26 0810
Diagnoses
Mixed hyperlipidemia [E78.2]

Provider Details

Provider	NPI
Dement, Kristin E, DO	1205220233

Reordered from: simvastatin (ZOCOR) 40 MG tablet [598327424]

Questionnaires

Legend:

Triggered an OurPractice Advisory Scoring question

Fmcw Personal Safety Questionnaire

Question	1/18/2026 12:14 PM CST - Filed by Patient
Because violence and abuse happens to a lot of people and affects their health we are asking the following questions.	
How often does anyone, including family and friends, physically hurt you?	Never
How often does anyone, including family and friends, insult or talk down to you?	Never
How often does anyone, including family and friends, threaten you with harm?	Never
How often does anyone, including family and friends, scream or curse at you?	Never

Vaping And E-Cigarette Usage

Question	1/18/2026 12:14 PM CST - Filed by Patient
Which option best describes your E-cigarette/Vaping usage?	Never Used

Mychart Drug Use History Questionnaire

Question	1/18/2026 12:14 PM CST - Filed by Patient
This information will be visible only to your care team and people who have access to your account. Your care team uses this information to provide care that helps prevent or respond to future medical conditions. Answers to all questions are optional.	

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F



Greendale Health Center -
Froedtert & the Medical College
of Wisconsin Community
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Visit date: 1/21/2026

01/21/2026 - Office Visit in Family Medicine, Greendale Health Center (continued)

Documents

After Visit Summary - Document on 1/21/2026 8:42 AM: After Visit Summary

Document (below)

AFTER VISIT SUMMARY

Joanne M. Wied DoB: 12/16/1943
CEID: FCH-WP9F-8MS6-VRFZ

1/21/2026 8:00 AM Family Medicine, Greendale
Health Center 414-423-0555



Instructions from Kristin Dement, DO

Your personalized instructions can be found at the end of this document.



Please confirm with your mail order pharmacy a date of shipment and anticipated arrival.

- amLODIPine

Your estimated payment per fill: \$0

- lisinopril

Your estimated payment per fill: \$0

- simvastatin

Your estimated payment per fill: \$0

From: Optum Home Delivery - Overland Park, KS - 6800 W 115th Street

Phone: 800-791-7658



Orders placed today

US Chest or Back Soft Tissue Mass
Expected 1/21/2026

Primary Care Follow-Up Visit

Scheduled for 7/22/2026

Reason for follow-up: Follow-Up

Visit Duration: Established

Visit Method: In-Person

Who is the follow-up with?: Myself

Follow up details: follow up

01/21/2026 - Office Visit in Family Medicine, Greendale Health Center (continued)

Documents (continued)

Today's Visit



You saw Kristin Dement, DO on Wednesday January 21, 2026. The following issues were addressed:

- Medicare annual wellness visit, subsequent
- Well adult exam
- Mass of subcutaneous tissue of back
- Chronic obstructive pulmonary disease, unspecified COPD type (CMS-HCC)
- Essential hypertension
- Mixed hyperlipidemia
- Screening for diabetes mellitus
- Laboratory exam ordered as part of routine general medical examination



Blood Pressure
124/60



BMI
24.37



Weight
142 lb



Height
5' 4"



Temperature (Tympanic)
97.6 °F



Pulse
81



Respiration
15



Oxygen Saturation
99%

Done Today

Lipid Panel for Laboratory exam ordered as part of routine general medical examination

Hemoglobin A1C for Screening for diabetes mellitus

Comprehensive Metabolic Panel for Laboratory exam ordered as part of routine general medical examination

Immunizations Given

Influenza (FLUZONE HD TRI, P-FREE) - high dose, split virus, trivalent preservative free vaccine

What's Next

APR
7
2026

New Patient with Neuropsychology Nspfwc
Tuesday April 7 8:00 AM (Arrive by 7:45 AM)

Neuropsychology, Specialty Clinics
8850 William Coffey Dr
MILWAUKEE WI 53226
414-955-0660

APR
7
2026

New Patient with Mary Voegeli, APNP
Tuesday April 7 2:00 PM (Arrive by 1:45 PM)

Rehabilitation Medicine Clinic, Specialty Clinics
8850 William Coffey Dr.
Milwaukee WI 53226
414-805-7342

JUL
22
2026

Established Patient with Kristin Dement, DO
Wednesday July 22 8:30 AM (Arrive by 8:15 AM)

Family Medicine, Greendale Health Center
6220 W Loomis Rd
GREENDALE WI 53129
414-805-6644

JAN
21
2027

New Patient with Daniel Champeau, MD
Thursday January 21 9:00 AM

Neurology, Froedtert Pleasant Valley Health Center
3200 PLEASANT VALLEY RD
WEST BEND WI 53095
262-836-7300

What You Need to Know About Lab and Test Results



Greendale Health Center - Wied, Joanne M
Froedtert & the Medical College MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
of Wisconsin Community Visit date: 1/21/2026
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

01/21/2026 - Office Visit in Family Medicine, Greendale Health Center (continued)

Documents (continued)

- If you had labs and/or tests done, you will receive your results via MyChart. You can access MyChart through the Froedtert & MCW mobile app or online at froedtert.com/mychart.
- To help you stay as informed as possible, we send results when they are final, which may be before your provider has reviewed them. Your provider may wait for more tests or information before adding comments or contacting you directly. Please ask your provider when you should expect to hear from them.
- You can choose to view your results as soon as they are sent or wait to discuss them with your provider – whatever makes you most comfortable.

MyChart Scheduling of Imaging Orders

Some of your imaging orders may be scheduled online or through the Froedtert & MCW app at a time that is convenient for you.

If you have a MyChart account, you will see a scheduling ticket for the test ordered for you. Tap or select "**Schedule Now**" and follow the prompts.

If you don't have a MyChart account or prefer to schedule over the phone, please call 414-777-1900. If you do not schedule, our team will call you to schedule a time for your test.

Stay Connected

Log into MyChart to view this After Visit Summary and more at my.froedtert.com.

Don't miss important updates. Text **START** to **50127** to start or keep receiving text messages about your appointments, health, billing, prescriptions and more.

Text messages related to your relationship with Froedtert Health and its affiliates, including updates related your visits, Froedtert & MCW (MyChart) account, one-time passcode, billing notifications, prescription reminders and care management will be sent to the phone number you provided. Message and data rates may apply. Message frequency may vary. Text HELP for help and text STOP to opt out of notifications from a specific short code. Please review the terms and conditions and privacy policy at froedtert.com.

01/21/2026 - Office Visit in Family Medicine, Greendale Health Center (continued)

Documents (continued)

Changes to Your Medication List

① Accurate as of January 21, 2026 8:42 AM.
If you have any questions, ask your nurse or doctor.

CONTINUE taking these medications

amLODIPine 5 MG tablet
Commonly known as: NORVASC

Take 1 tablet (5 mg total) by mouth daily.

Calcium Carb-Cholecalciferol 600-20 MG-MCG Chew Tab

Chew and swallow by mouth daily.

latanoprost 0.005 % ophthalmic drops
Commonly known as: XALATAN

Apply 1 Drop to each eye daily.

lisinopril 40 MG tablet
Commonly known as: PRINIVIL or ZESTRIL

Take 1 tablet (40 mg total) by mouth daily.

simvastatin 40 MG tablet
Commonly known as: ZOCOR

Take 1 tablet (40 mg total) by mouth nightly.

tiZANidine 2 MG tablet
Commonly known as: ZANAFLEX

Take 2 mg by mouth every 8 hours as needed.



Greendale Health Center -
Froedtert & the Medical College
of Wisconsin Community
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Visit date: 1/21/2026

01/21/2026 - Office Visit in Family Medicine, Greendale Health Center (continued)

Documents (continued)

Instructions from Kristin Dement, DO

PLAN:

To help promote social distancing and reduce wait times, we are requesting patients schedule an appointment for all lab draws.

You can have your labs drawn at any Froedtert lab.

To find a location, please visit www.froedtert.com/lab.

Greenfield Highlands Health Center: 414-427-5310

Greendale Health Center: 414-423-0555

Moorland Reserve Health Center: 262-798-7200

Drexel Town Square Health Center: 414-346-8000

You may receive a survey via mail or email and we would appreciate your feedback.

Our organization uses information from the survey to grade our performance as we strive to provide **exceptional** care. We value your opinion and thank you in advance for taking the time to do this. It was our pleasure to care for you today!

Your Care Team is:

Kristin Dement, DO

Cleonia Howard, MA

Test Results: If you had any lab or radiology test(s) performed, we will contact you by phone, letter or MyChart regarding your results **within the next 7 days**.

MyChart: Please sign up! This is a way for you to communicate with your Care Team electronically, as well as see all of your test results, appointments and notes from your appointments. You can also schedule and cancel appointments via MyChart. We encourage everyone to sign-up! If you prefer to not sign up, but would like a proxy to have access to your MyChart, please ask at the front desk for instructions.

IMAGING SCHEDULING

FROEDTERT RADIOLOGY

To schedule outpatient radiology/imaging test(s) or exam(s), call **Froedtert & the Medical College of Wisconsin Medical Services Scheduling at 414-777-1900**.

RAYUS IMAGING

Imaging exams can also be scheduled at a Froedtert & the Medical College of Wisconsin Center for Diagnostic Imaging (CDI) location by calling **414-774-7226**.

APPOINTMENT SCHEDULING

Call **414-805-3666** to schedule an appointment in the following departments:
Urology



Greendale Health Center -
Froedtert & the Medical College
of Wisconsin Community
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Visit date: 1/21/2026

01/21/2026 - Office Visit in Family Medicine, Greendale Health Center (continued)

Documents (continued)

Allergy
Dermatology
Hand Center/Plastics
Nephrology (Kidney)
Neuropsychology
Otolaryngology (ENT)
Plastic Surgery

Call **414-955-6688** to schedule an appointment in the following departments:

Ophthalmology (Eye)
Neurology
Sleep medicine

Call **414-805-6633** to schedule an appointment in the following departments:

Cardiology (Heart) (**for cardiology procedures/imaging call 414-805-6070**)
Infectious Disease
Pulmonary (Lungs)
Wound Care Clinic

Call **414-805-6644** to schedule an appointment in the following departments:

Nutrition
OB/GYN
Geriatrics
Family Medicine
Internal Medicine

Call **414-805-6655** to schedule an appointment in the following departments:

Orthopaedics
Pre-Op Testing
Sports Medicine
Physical Medicine & Rehab (PM&R)
Pain Management
Podiatry

Call **414-955-6660** to schedule an appointment in the following departments:

Endocrine
Diabetes Care
GI
Rheumatology

For information regarding a particular physician including contact information, use the Froedtert & the Medical College of Wisconsin's Find a Doctor website:

<http://doctors.froedtert.com>

Greendale Health Center

6220 W. Loomis Ave
Greendale, WI 53129
Ph (414) 423-0555
Fax (414) 423-8268



Greendale Health Center - Wied, Joanne M
Froedtert & the Medical College MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
of Wisconsin Community Visit date: 1/21/2026
Physicians
6220 W Loomis Rd
GREENDALE WI 53129

01/21/2026 - Office Visit in Family Medicine, Greendale Health Center (continued)

Documents (continued)

Greendale Health Center Hours

Monday 8:00am - 6:00pm
Tuesday 7:00am - 6:00pm
Wednesday 7:00am - 6:00pm
Thursday 7:00am - 6:00pm
Friday 7:00am - 5:00pm

We are accepting new patients of ALL ages (babies and kids, too)! Please refer your family and friends. We love to take care of you, so we know we will love to take care of those who mean the most to you.

Learn about All Of Us Program:

The Medical College of Wisconsin is a partner in the All of Us Research Program. We share a simple mission. We want to speed up health research breakthroughs. To learn more about All of Us visit www.joinallofus.org, call 414-955-AOUW (2689) or email us at allofus@mcw.edu.

Find Support for Your Health Goals in the Wellness Marketplace

During your visit, you may have discussed health goals with your doctor. The Froedtert & MCW health network partners with Vale Health to offer health and wellness products to support those goals. You can feel confident knowing that the products and resources available in the Wellness Marketplace are carefully vetted. Find wellness solutions at froedtert.valehealth.com, or scan the QR code for quick access.



ValeHealth





Moorland Health Center - Wied, Joanne M
Froedtert & the Medical College MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
of Wisconsin Community Adm: 1/28/2026, D/C: 1/28/2026
Physicians
4805 S MOORLAND RD
NEW BERLIN WI 53151

Face Sheet (continued)

Guarantor ID: 9442633	Work Phone:
GUARANTOR EMPLOYER	
Employer:	Status: RETIRED

COVERAGE

PRIMARY INSURANCE	
Payor: UHC MEDICARE	Plan: MEDICARE UHC MEDICARE
Group Number: 70000	Subscriber DOB: 12/16/1943
Subscriber Name: WIED,JOANNE M	
Subscriber ID: 912119254	
Pat. Rel. to Subscriber: Self	
SECONDARY INSURANCE	
Payor:	Plan:
Group Number:	Subscriber DOB:
Subscriber Name:	
Subscriber ID:	
Pat. Rel. to Subscriber:	

Contact Serial # (240156978)



Reason for Visit

Visit Diagnoses [last edited by Bkguser, Ltc Orders on 1/28/2026 0755]

- (primary)
- Mass of subcutaneous tissue of back

Revision History

Action	Name	User	Date/Time
Diagnosis #1			
Add	Mass of subcutaneous tissue of back	Bkguser, Ltc Orders	01/28/2026 0755

Visit Information

Provider Information

Referring Provider

Dement, Kristin E, DO

Department

Name	Address	Phone	Fax
Department of Radiology Ultrasound, Moorland Reserve Health Center	4805 S MOORLAND RD New Berlin WI 53151	414-777-1900	262-798-7201

Patient as-of Visit

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F



Moorland Health Center -
Froedtert & the Medical College
of Wisconsin Community
Physicians
4805 S MOORLAND RD
NEW BERLIN WI 53151

Wied, Joanne M
MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Adm: 1/28/2026, D/C: 1/28/2026

All Orders (continued)

Imaging

Imaging

US Chest or Back Soft Tissue Mass (Final result) [635839760]

Electronically signed by: **Dement, Kristin E, DO on 01/21/26 0810**

Status: **Completed**

This order may be acted on in another encounter.

Ordering user: Dement, Kristin E, DO 01/21/26 0810

Authorized by: Dement, Kristin E, DO

Ordering mode: Standard

Frequency: Routine 01/28/26 0755 - 1 occurrence

Class: Ancillary Performed

Quantity: 1

Lab status: Final result

Instance released by: Schwinn, Karen 1/28/2026 7:55 AM

Diagnoses

Mass of subcutaneous tissue of back [R22.2]

Provider Details

Provider	NPI
Dement, Kristin E, DO	1205220233

Questionnaire

Question	Answer
Clinical Indication	upper back mass
Release to patient	Immediate

End Exam Questions

	Answer	Comment
Confirm Resource:	MRHC US 2	
Was patient identified with two identifiers?	Yes	
Once in the exam area, did you have the patient remove jewelry, hearing aide, dentures, clothing or jackets, etc for the exam?	N/A	
Appointment where the Documentation Resides:		
What belongings were removed?		
Where were belongings stored?		
Were the patient belongings returned upon patient leaving the exam area?		
Did you ask the patient and did they state that they had all their personal belongings before leaving the exam area?		

US Chest or Back Soft Tissue Mass [635839760]

Resulted: 01/28/26 1057, Result status: Final result

Order status: Completed

Resulted by: Ealba, Justin M, MD

Filed by: Interface, Fh_Inbound_Rad 01/28/26 1100

Performed: 01/28/26 0806 - 01/28/26 0826

Accession number: FH00016475913

Resulting lab: RADIOLOGY FROEDTERT

Acknowledged by: Dement, Kristin E, DO on 01/28/26 1338

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
209 - RADFH	RADIOLOGY FROEDTERT	Unknown	Unknown	08/06/04 0100 - Present

Wied, Joanne M

MRN: 3654555, DOB: 12/16/1943, Legal Sex: F



Moorland Health Center -
Froedtert & the Medical College
of Wisconsin Community
Physicians
4805 S MOORLAND RD
NEW BERLIN WI 53151

Wied, Joanne M

MRN: 3654555, DOB: 12/16/1943, Legal Sex: F
Adm: 1/28/2026, D/C: 1/28/2026

Imaging (continued)

Study Result

Examination: Focused ultrasound soft tissue mass.

Clinical Information: upper back mass.

Comparison: None.

Technique: Focused grayscale and color Doppler ultrasound of the area of concern.

Imaging location: Upper back

Findings:

Targeted ultrasound of the area of concern in the left upper back demonstrates a subcutaneous circumscribed lesion with internal echogenicity equal to background subcutaneous fat, most consistent with a benign subcutaneous lipoma. This measures 5.9 x 1.1 x 5.4 cm. No thick internal septation or internal color Doppler flow.

Impression:

Target ultrasound of the area of concern in the upper back demonstrates a 5.9 cm subcutaneous lesion, most consistent with a lipoma.

Indications

Mass of subcutaneous tissue of back [R22.2 (ICD-10-CM)]

Study Signed

Electronically signed by Ealba, Justin M, MD on 1/28/26 at 1057 CST

Result Notes

Kristin E Dement, DO

1/28/2026 1:38 PM CST

Forwarded Result

All Reviewers List

Dement, Kristin E, DO on 1/28/2026 13:38

Procedures

No documentation.

Other Orders

No documentation.

01/28/2026 - Ultrasound Exam in Department of Radiology Ultrasound, Moorland Reserve Health Center

Wied, Joanne M

MRN: 3654555, DOB: 12/16/1943, Legal Sex: F

Printed by 96891 at 4/16/26 10:23 PM



Froedtert & the Medical College Wied, Joanne M
of Wisconsin MRN: 07130023, DOB: 12/16/1943, Legal Sex: F
9200 W Wisconsin Ave Visit date: 4/7/2026
MILWAUKEE WI 53226

Face Sheet

Froedtert & the Medical College of Wisconsin

Encounter Date: 4/7/2026

Discharge Date:

MRN: 07130023

Hospital Account:

Contact Serial #: 238889502

ENCOUNTER

Patient Class: No patient class for patient encounter

Unit:

Hospital Service: No service for patient encounter.

Bed: Room/bed info not found

Admitting Provider:

Referring Physician: Siddiqui, Ali H

Attending Provider:

Obsrv Admit D/T:

Adm Diagnosis:

Inpt Admit D/T:

PATIENT

Name: Wied, Joanne M

DOB: 12/16/1943 (82 Y)

Address: 5401 MANSFIELD DR

Sex: Female

City: GREENDALE, WI 53129

Primary Phone: 414-517-7338

Race: White

Primary Care Provider: Dement, Kristin E, DO

Ethnicity: Not Hispanic, Latino/a, *

EMERGENCY CONTACT

Contact Name	Guardian	Relationship	Home Phone	Work Phone	Mobile Phone	Preferred
1. Knoke, Jennifer		Daughter	262-696-4017		715-281-0232	
2. COTTREAU, JEANNE		Daughter			414-803-5432	Mobile phone

GUARANTOR

Guarantor: WIED, JOANNE M

DOB: 12/16/1943

Address: 5401 MANSFIELD DR

Sex: Female

GREENDALE, WI 53129

Relation to Patient: Self

Home Phone:

Guarantor ID: 9442633

Work Phone:

GUARANTOR EMPLOYER

Employer:

Status: RETIRED

COVERAGE

PRIMARY INSURANCE

Payor: UHC MEDICARE

Plan: MEDICARE UHC MEDICARE

Group Number: 70000

Subscriber DOB: 12/16/1943

Subscriber Name: WIED, JOANNE M

Subscriber ID: 912119254

Pat. Rel. to Subscriber: Self

SECONDARY INSURANCE

Payor:

Plan:

Group Number:

Subscriber DOB:

Wied, Joanne M

MRN: 07130023, DOB: 12/16/1943, Legal Sex: F

Face Sheet (continued)

Subscriber Name:

Subscriber ID:

Pat. Rel. to Subscriber:

Contact Serial # (238889502)



Reason for Visit

Chief Complaint [last edited by Bartlett, Aislinn M, PSYD on 4/7/2026 0825]

- Cognitive Concerns

Visit Diagnosis [last edited by Brett, Benjamin L, PHD on 4/14/2026 1224]

- Traumatic brain injury without loss of consciousness, initial encounter (CMS-HCC) (primary)

Revision History

Action	Name	User	Date/Time
Diagnosis #1			
Add	Traumatic brain injury without loss of consciousness, initial encounter (CMS-HCC) (primary)	Brett, Benjamin L, PHD	04/14/2026 1224

Visit Information

Provider Information

Encounter Provider	Authorizing Provider	Referring Provider
Brett, Benjamin L, PHD	Brett, Benjamin L, PHD	Siddiqui, Ali H, MD

Department

Name	Address	Phone	Fax
Neuropsychology, Specialty Clinics	8850 William Coffey Dr Milwaukee WI 53226	414-955-0660	414-955-0076

Follow-up and Dispositions

Level of Service

Level of Service
PR UNLISTED E/M SERVICE

Patient as-of Visit

Problem List as of 4/7/2026

Problems last reviewed by Dement, Kristin E, DO on 1/21/2026 0749

COPD (chronic obstructive pulmonary disease) [last edited by Dement, Kristin E, DO on 7/18/2023 0708]

Diagnosis: COPD (chronic obstructive pulmonary disease) Noted on: 07/18/2023 Chronic: No

Essential hypertension [last edited by Dement, Kristin E, DO on 7/18/2023 0708]

Wied, Joanne M
MRN: 07130023, DOB: 12/16/1943, Legal Sex: F



Froedtert & the Medical College of Wisconsin
9200 W Wisconsin Ave
MILWAUKEE WI 53226

Wied, Joanne M
MRN: 07130023, DOB: 12/16/1943, Legal Sex: F
Visit date: 4/7/2026

Current Medications (continued)

Progress Notes

Progress Notes by Bartlett, Aislinn M, PSYD at 4/7/2026 0823

Version 1 of 1

Author: Bartlett, Aislinn M, PSYD	Service: —	Author Type: Psychologist
Filed: 4/14/2026 12:24 PM	Encounter Date: 4/7/2026	Creation Time: 4/7/2026 8:23 AM
Status: Signed	Editor: Bartlett, Aislinn M, PSYD (Psychologist)	
Cosigner: Brett, Benjamin L, PHD at 4/14/2026 12:24 PM		

Date of Service: 4/7/26

Ms. Joanne Wied is an 82 Y, white female who was referred to the Traumatic Brain Injury Clinic for evaluation of symptoms related to a head injury resulting from a motor vehicle crash on 12/16/2025. The patient presented to her appointment on 4/7/26. The nature of the appointment was discussed. The patient reported no cognitive concerns at this time. She reported she is back to 100% of her baseline feeling and functioning. After discussion, the mutual decision was made not to proceed with the testing.

Aislinn M. Bartlett, PsyD
Neuropsychology Fellow
Department of Neurology
Division of Neuropsychology

Benjamin Brett, PhD, ABPP
Clinical Neuropsychologist
Assistant Professor
Department of Neurosurgery

No charges for this encounter.

Electronically signed by Bartlett, Aislinn M, PSYD at 4/14/2026 12:24 PM
Electronically signed by Brett, Benjamin L, PHD at 4/14/2026 12:24 PM

Labs

No documentation.

All Orders

No orders and results found

Imaging

No documentation.

Procedures

No documentation.

Wied, Joanne M
MRN: 07130023, DOB: 12/16/1943, Legal Sex: F

Printed by 96891 at 4/16/26 10:23 PM

Other Orders

No documentation.

Questionnaires

Legend:

Triggered an OurPractice Advisory Scoring question

Learning Needs Assessment

Question	4/6/2026 6:52 PM CDT - Filed by Patient
Does the patient/guardian have any barriers to learning?	No Barriers
What is the patient's preferred written language?	English
What is the patient's preferred language to discuss healthcare needs?	English
How does the patient/guardian prefer to learn new concepts?	Doing
Colearner present?	No

**04/07/2026 - Office Visit in Neuropsychology, Specialty Clinics
Discharge Instructions**

Discharge Instructions

No notes of this type exist for this encounter.

04/07/2026 - Office Visit in Neuropsychology, Specialty Clinics (continued)

Flowsheets

Patient-Reported Data

Row Name	04/06/26 1852
Language Cognition	
What is the patient's preferred written language?	English [1] - patient at 04/06/26 1852
What is the patient's preferred language to discuss healthcare needs?	English [2] - patient at 04/06/26 1852
Learning Barriers	
Does the patient/guardian have any barriers to learning?	No Barriers [3] - patient at 04/06/26 1852
Learning Preference	
How does the patient/guardian prefer to learn new concepts?	Doing [4] -patient at 04/06/26 1852
OTHER	
Co-Learner present?	No [5] -patient at 04/06/26 1852

Audit Information

Wied, Joanne M
MRN: 07130023, DOB: 12/16/1943, Legal Sex: F

04/07/2026 - Office Visit in Neuropsychology, Specialty Clinics (continued)

Flowsheets (continued)

Ref #	Row Name	Time Taken	Time Recorded	Value	User
1	What is the patient's preferred written language?	04/06/26 1852	04/06/26 1852	English 	patient
1	What is the patient's preferred written language?	04/06/26 1852	04/06/26 1852	English 	patient
2	What is the patient's preferred language to discuss healthcare needs?	04/06/26 1852	04/06/26 1852	English 	patient
2	What is the patient's preferred language to discuss healthcare needs?	04/06/26 1852	04/06/26 1852	English 	patient
3	Does the patient/guardian have any barriers to learning?	04/06/26 1852	04/06/26 1852	No Barriers 	patient
3	Does the patient/guardian have any barriers to learning?	04/06/26 1852	04/06/26 1852	No Barriers 	patient
4	How does the patient/guardian prefer to learn new concepts?	04/06/26 1852	04/06/26 1852	Doing 	patient
4	How does the patient/guardian prefer to learn new concepts?	04/06/26 1852	04/06/26 1852	Doing 	patient
5	Co-Learner present?	04/06/26 1852	04/06/26 1852	No 	patient
5	Co-Learner present?	04/06/26 1852	04/06/26 1852	No 	patient

User Key

(r) = Recorded By, (t) = Taken By, (c) = Cosigned By

Initials	Name	Provider Type	Discipline	Dates Documented
patient	Joanne M Wied	—	—	04/06/2026



Froedtert & the Medical College Wied, Joanne M
of Wisconsin MRN: 07130023, DOB: 12/16/1943, Legal Sex: F
9200 W Wisconsin Ave Visit date: 4/7/2026
MILWAUKEE WI 53226

04/07/2026 - Office Visit in Neuropsychology, Specialty Clinics (continued)

Documents

After Visit Summary - Document on 4/14/2026 12:24 PM: After Visit Summary

Document (below)

AFTER VISIT SUMMARY

Joanne M. Wied DoB: 12/16/1943
CEID: FCH-WP9F-8MS6-VRFZ



4/7/2026 8:00 AM Neuropsychology, Specialty
Clinics 414-955-0660

Today's Visit



You saw Benjamin Brett, PHD on Tuesday April 7, 2026. The following issue was addressed: Traumatic brain injury without loss of consciousness, initial encounter.

What's Next

JUL
22
2026

Established Patient with Kristin Dement, DO
Wednesday July 22 8:30 AM (Arrive by 8:15 AM)

Family Medicine, Greendale Health Center
6220 W Loomis Rd
GREENDALE WI 53129
414-805-6644

JAN
21
2027

New Patient with Daniel Champeau, MD
Thursday January 21 9:00 AM

Neurology, Froedtert Pleasant Valley Health Center
3200 PLEASANT VALLEY RD
WEST BEND WI 53095
262-836-7300

What You Need to Know About Lab and Test Results

- If you had labs and/or tests done, you will receive your results via MyChart. You can access MyChart through the Froedtert & MCW mobile app or online at froedtert.com/mychart.
- To help you stay as informed as possible, we send results when they are final, which may be before your provider has reviewed them. Your provider may wait for more tests or information before adding comments or contacting you directly. Please ask your provider when you should expect to hear from them.
- You can choose to view your results as soon as they are sent or wait to discuss them with your provider – whatever makes you most comfortable.

Stay Connected

Log into MyChart to view this After Visit Summary and more at my.froedtert.com.

Don't miss important updates. Text **START** to **50127** to start or keep receiving text messages about your appointments, health, billing, prescriptions and more.

Text messages related to your relationship with Froedtert Health and its affiliates, including updates related your visits, Froedtert & MCW (MyChart) account, one-time passcode, billing notifications, prescription reminders and care management will be sent to the phone number you provided. Message and data rates may apply. Message frequency may vary. Text HELP for help and text STOP to opt out of notifications from a specific short code. Please review the terms and conditions and privacy policy at froedtert.com.

04/07/2026 - Office Visit in Neuropsychology, Specialty Clinics (continued)

Documents (continued)

Changes to Your Medication List

① Accurate as of April 7, 2026 11:59 PM.
If you have any questions, ask your nurse or doctor.

CONTINUE taking these medications

amLODIPine 5 MG tablet Commonly known as: NORVASC	Take 1 tablet (5 mg total) by mouth daily.
Calcium Carb-Cholecalciferol 600-20 MG-MCG Chew Tab	Chew and swallow by mouth daily.
latanoprost 0.005 % ophthalmic drops Commonly known as: XALATAN	Apply 1 Drop to each eye daily.
lisinopril 40 MG tablet Commonly known as: PRINIVIL or ZESTRIL	Take 1 tablet (40 mg total) by mouth daily.
simvastatin 40 MG tablet Commonly known as: ZOCOR	Take 1 tablet (40 mg total) by mouth nightly.
tizANidine 2 MG tablet Commonly known as: ZANAFLEX	Take 2 mg by mouth every 8 hours as needed.

Find Support for Your Health Goals in the Wellness Marketplace

During your visit, you may have discussed health goals with your doctor. The Froedtert & MCW health network partners with Vale Health to offer health and wellness products to support those goals. You can feel confident knowing that the products and resources available in the Wellness Marketplace are carefully vetted. Find wellness solutions at froedtert.valehealth.com, or scan the QR code for quick access.



ValeHealth

