



Timothy Johnson

Medical History

Information contained here is in reference to the  
medical history of Mr. Johnson.

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7-27-05 wt 140 lbs. BP 122/80

9/6 anxiety + insomnia - L Smith RMA

NETA  
Rx Fluoxetine PRN

Timothy D Johnson - C: 49142 - DOB: 02/03/1958 7/27/2005

SUB: Timothy comes in today and describes his symptoms as consistent with generalized anxiety disorder. Said he feels nervous most of the time and sometimes shaky. Particularly at nighttime he is anxious and worried, thinks about things and is unable to go to sleep. Really doesn't describe many symptoms that would be consistent with panic disorder. We have talked about signs/symptoms of depression. He does admit to having some of those symptoms such as fatigue and wanting to sleep a lot and feeling down. Doesn't appear to be anything in particular going on socially that has bothered him. He says his sister has a similar type condition.

IMP: Generalized anxiety disorder. (2) Insomnia, possibly secondary to #1.

PLAN: After long discussion, we have decided to put him on Effexor XR 37.5 mg p.o. q.d. for a week increasing to 75 mg. I have given him enough samples to last for a month. We will see him back at that time. He does not like to take medicine. He said he would rather wait and see if we get the anxiety under control and if he sleeps better then he might not need

anything for sleep. IF he can't sleep, he will let us know and we will add something else or if he doesn't tolerate the Effexor he will let us know.

Terrence R. Yates, MD/lf *TY*

268: 9305

C-49142

PHONE CALL

DATE- 2-20-04

NAME- Terin Johnson

TIME-

COMPLAINT- Refused Flexural

DOB- 2-2-58

Name

Address:

Tel. No:

Change of Address:

ALLERGIES-

REC-

OK  
3 ref  
B

Date S M D W

6/8/04 WT 150lbs. BP 98/70 Done - D. Churner NKDA  
c/o episode on May 19th he had laying R & Flexural  
down to go to sleep + his arms + legs started "having  
spasms". Pt says this lasted about 2 hours. Pt says  
he has felt weak since that time. — L. Smith RMA

TIMOTHY JOHNSON 49142 6/8/04

SUB: Mr. Johnson comes in today with history of an episode about .  
three weeks ago where he was lying down. He said he began to shake  
or have muscle spasms all over his body. He said this lasted about  
30 minutes. He went on to sleep and woke up the next morning  
feeling very weak and tired. He felt that way for several days  
after that but then seemed to resolve. Doesn't feel like he had  
any fever. Denied any other symptoms such as sore throat, cough,  
indigestion, heartburn, diarrhea, constipation, nausea, or  
vomiting. He never had similar symptoms before. He was on no new  
medications. Did not take anything unusual over the counter. He  
had not gotten hot or exerted himself as far as he knows.

OBJ: BP 98/70. WT 150. P 70. R 16. Generally, he is a well  
developed, well nourished white male. Alert and cooperative, in no  
acute distress. HEENT exam negative. Neck revealed no carotid

bruits. No thyromegaly. Lungs clear. Heart RR&R. Abdomen is soft  
and nontender. No organomegaly. Extremities show no edema.

IMP: Muscle spasm. Weakness. Symptoms are somewhat non-specific.  
Possibilities might include a viral illness.

PLAN: He is somewhat anxious about it and wants evaluation. We  
will check UA, CBC, CMP, and TSH. If all these prove normal, I  
recommended we simply observe. If his symptoms return or develops  
new symptoms, etc, we may need to consider further evaluation.

Terrence R. Yates, M.D. / jf my

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SEARCY MEDICAL CENTER

2900 HAWKINS DRIVE  
SEARCY, ARKANSAS 72143

049142 FOLLOW UP EXAMINATIONS

2020-03-10

JOHNSON, TIMOTHY

H

Name: \_\_\_\_\_ SMC No: \_\_\_\_\_ Acct. No: 4507-21-0234  
 Address: \_\_\_\_\_ Bill to: \_\_\_\_\_  
 Tel. No: 501-268-9305 Ref. by: \_\_\_\_\_  
 Change of Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Date	S M D W-	Occup.	Insurance	
11-16-05		WT 151 lbs.	BP 122/80	NKDA
		Follow up	Smith RMA	1) Flonase 2) Effexor XR
<p>TIMOTHY D JOHNSON C#2000049142 DOB:02/03/1958 11/16/2005                      SUB: Mr. Johnson comes in today for follow up of generalized anxiety disorder and insomnia. He continued on the Effexor XR 75mg p.o. q. day. He says he is doing very well on this. He has not had any side-effects that he can tell. He is still very pleased with his current level of functioning. He has much less anxiety, nervousness and overall just feels much better. He said his sleep is still going very well as well. Otherwise, he is feeling well and has no other complaints.                      IMP:                      1. Generalized anxiety disorder, stable.                      2. Insomnia stable.                      PLAN:                      We have refilled Effexor 75 mg p.o. q. day #30 with 5 refills. We will recheck him in 6 months unless he is having a problem.                      Terrence R. Yates, MD/sc <i>rw</i></p>				
5-3-06		WT 165 lbs.	BP 138/84	NKDA
		Follow up	Smith RMA	1) Flonase 2) Effexor XR
<p>TIMOTHY D JOHNSON C#2000049142 DOB:02/03/1958 5/3/2006                      SUB: Timothy comes in today for follow up of generalized anxiety disorder and insomnia. He is happy to report overall he is doing well. He is not having any side effects that he can tell of the Effexor. He feels like he is doing as well as he would like to at this point. He says he is sleeping very well. He still has some allergy problems from time to time but the Flonase usually takes care of this.                      OBJ: Affect is appropriate today and seems to be doing well.                      IMP:                      1. Generalized anxiety disorder stable.                      2. Insomnia resolved.                      3. Allergic rhinitis.                      PL: Will continue Effexor XR 75 mg p.o. qd. We will recheck him in 6 months unless he has problems sooner. We can decide at that point whether we might want to try tapering him off and see if he still needs it. He will continue on his Flonase. I have offered him a Kenalog shot or Zyrtec but right now he feels like it is managing his symptoms.                      Terrence R. Yates, MD/im <i>rw</i></p>				

Date 7-27-05 wt 140 lbs. BP 122/80

NKDA

c/o anxiety + insomnia - L Smith RMA

Rx Fluoxetine

Timothy D Johnson C: 49142 DOB: 02/03/1958 7/27/2005  
 SUB: Timothy comes in today and describes his symptoms as consistent with generalized anxiety disorder. Said he feels nervous most of the time and sometimes shaky. Particularly at nighttime he is anxious and worried, thinks about things and is unable to go to sleep. Really doesn't describe many symptoms that would be consistent with panic disorder. We have talked about signs/symptoms of depression. He does admit to having some of those symptoms such as fatigue and wanting to sleep a lot and feeling down. Doesn't appear to be anything in particular going on socially that has bothered him. He says his sister has a similar type condition.  
 IMP: Generalized anxiety disorder. (2) Insomnia, possibly secondary to #1.  
 PLAN: After long discussion, we have decided to put him on Effexor XR 37.5 mg p.o. q.d. for a week increasing to 75 mg. I have given him enough samples to last for a month. We will see him back at that time. He does not like to take medicine. He said he would rather wait and see if we get the anxiety under control and if he sleeps better then he might not need

anything for sleep. IF he can't sleep, he will let us know and we will add something else or if he doesn't tolerate the Effexor he will let us know.  
 Terrence R. Yates, MD/jf *mf*

8/24/05 wt 139 1/2 lb BP 128/80  
 Follow-up - L Smith RMA

NKDA

Rx Fluoxetine PA  
2) Effexor XR 75

Timothy D Johnson C: 2000049142 DOB: 02/03/1958 8/24/2005  
 SUB: Mr. Johnson comes in for follow-up of what feel like was generalized anxiety disorder, possibly secondary to mild depression and insomnia. We started him on Effexor XR 75 mg p.o. qd. He is happy to report he is doing much better. Noticed marked decrease in generalized anxiety and nervousness. He feels much more calm. He is also happy to report that in turn has improved his sleep, and he is doing much better with that. He has not noticed any particular side effects and seems to be tolerating it well. He feels at this point that, as he is doing as well as he would like to and is pleased and does not feel like he needs to increase the dose any.

IMPRESSION:

1. Generalized anxiety disorder, improved
2. Insomnia, improved

PLAN: Continue Effexor XR 75 mg p.o. qd #30 with 3 refills. I will recheck in 3 months. We have talked about the length of treatment and I have recommended that we consider treating him for a year. His symptoms

seem to be chronic, and he has family history of a sister with similar symptoms. That may be something he will have to stay on, but if he would like in one year he could try tapering off.

Terrence R. Yates, MD/bh *mf*

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JOHNSON, TIMOTHY  
Date

SEARCY MEDICAL CENTER WEST, SEARCY, AR 72143  
PHONE CALL

C-249142

LINE # 501-268-931  
CRO ROLL

DATE- 2-27-07 TIME-  
NAME- Timothy Johnson DOB- 2-3-58  
COMPLAINT- 268-9305  
ALLERGIES- refill Flonase NS  
REC- DONE - L. Smith R.M.A.

Lowery's (main st)

TS

SEARCY MEDICAL CENTER WEST, SEARCY, AR 72143  
PHONE CALL

268-9305 C-2-49142

DATE- 5/22/07 TIME-  
NAME- Timothy Johnson DOB- 2/3/58  
COMPLAINT- refill Effexor #30  
ALLERGIES-  
REC- sched flu 6-4-07  
Lowery's 5 main

Flu before my  
more refills

DONE - L. Smith R.M.A.

6-4-07 wt 174 BP 122/80 T. 97.7

NKA

follow-up depression GENERALIZED ANXIETY DISORDER needs refill  
Effexor XR 75mg - L. Smith R.M.A.

R/Effexor XR 75mg qd  
2) Flonase

TIMOTHY D JOHNSON C: 2000049142 DOB: 2/3/58 6/4/07  
SUB: Mr. Johnson comes in today for follow up of generalized anxiety disorder. He continues on Effexor XR 75 MG p.o. q day. Says he is doing very well on this. He is currently in school at Beebe. He is studying computer. He also works at Conway at Target. He says he continues to do very well and is pleased. He had anxiety for a number of years before starting on the Effexor. Said he didn't just really realize what it was. He continues to do well as far as his sleep. He is not having any side effects as far as he can tell with Effexor. He is pleased with how he is doing. He has never tried to taper off the medication.  
OBJ: Afebrile. Vital signs are stable today. His affects is appropriate today. He is not anxious and appears to be doing well.  
IMPRESSION: Generalized anxiety disorder stable.  
PL: I've talked to him about if he wanted to taper off how he could do this. If he would like though as his sister suffers with the same problem and the fact that he has this for a number of years before we started him on the Effexor he probably will have to stay on this. If he would like to try to taper off though I've given him instructions on how to do this. Give him refills for a year.

Terrence R Yates, MD/mm

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**SEARCY MEDICAL CENTER**

2900 HAWKINS DRIVE  
SEARCY, ARKANSAS 72143

**FOLLOW-UP EXAMINATIONS**

Name: Timothy Johnson SMC No: \_\_\_\_\_ Acct. No: \_\_\_\_\_  
 Address: \_\_\_\_\_ Bill to: \_\_\_\_\_  
 Tel. No: \_\_\_\_\_ Ref. by: \_\_\_\_\_  
 Change of Address: \_\_\_\_\_ Date of Birth: 2-3-58 Age: \_\_\_\_\_

Date	S M D W	Occup.	Insurance
<u>4/20/08</u>		<u>WT-172 lbs.</u>	<u>BP 130/84</u>
		<u>Followup - refill med</u>	<u>Smith RMA</u>

RD Effexor X  
75mg qd  
Flonase P.

**JOHNSON, TIMOTHY** SMC#: 2-49142 DOB: 02/03/58 06/20/08  
**HISTORY OF PRESENT ILLNESS:** Mr. Johnson comes in today for followup of generalized anxiety disorder. We have him on Effexor XR 75 mg 1 p.o. daily. He has been on this really for a number of years. He has done extremely well with it. He comes in today and says he is still doing well, and he is very pleased with his response to it. He has no side effects as far as he knows. His sister has similar problems. We talked about different times that he could try to taper off of it, but he, I think, feels like he does well, and it has been a long-term problem for him, that he is probably going to need to be on something, and so has just chosen to continue on it. He is currently continuing school at Beebe. He wants to finish this year in the spring and then he will go to Jonesboro for a couple of years and finish his degree in computers. He is working on a network administrator-type degree. He also still works at Target in Conway, driving back and forth about 4-5 days a week. We did talk today about the health maintenance. He has turned 50 this year. I do suggest we consider a prostate screening, as well as a check on the cholesterol and a blood sugar. I also would like to get a baseline chest x-ray and EKG. He continues on Flonase as needed for allergies. Otherwise, he denies any problems.

**PHYSICAL EXAMINATION: VITAL SIGNS:** Weight today is 172 pounds. Blood pressure is 130/84. Heart rate is 70. Respirations are 16. He is afebrile. His affect is bright and appropriate. He seems calm, and he seems to be doing well. He is able to converse normally. He has good insight.

- IMPRESSION:**
1. Generalized anxiety disorder, stable on Effexor.
  2. Allergic rhinitis, stable.

- PLAN:**
1. We will continue Effexor XR 75 mg p.o. daily. I have given him refills for a year.
  2. Suggested he check with his insurance to see if they will cover health maintenance issues or a physical, and that he consider coming in and having this done. Certainly, if they do not, we would still make some of the same recommendations, and he understands this and will decide if he would like to have it done.

Terrence R. Yates, M.D. TRY/cmd *TR*

*6/2/08*

If Yes, please provide the name and address of the physician.

5. Other \_\_\_\_\_

6-24-04  
Date

Terrence Yados, MD  
Provider's Signature

Your assistance in providing this information is appreciated. If you have any questions, please call 501-378-2538.

Sincerely,

Lori D Nichols

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