

Date: [Date of Consultation]

To: [Referring Physician Name]

Address: [Clinic Address]

Fax: [Fax Number]

RE: [Patient Name]

DOB: [Patient Date of Birth]

Diagnosis: Chronic Kidney Disease, Stage [Stage Number]

Dear Dr. [Last Name],

I had the pleasure of seeing [Patient Name] via a secure telehealth video consultation today for the management of Chronic Kidney Disease (CKD). Below is a summary of our encounter.

**Subjective / History:**

The patient reports feeling [Stable/Fatigued/Describe Symptoms]. There are no current complaints of peripheral edema, shortness of breath, or gross hematuria. The patient confirmed adherence to current medications and reported home blood pressure readings averaging [BP Reading].

**Review of Systems:**

Pertinent negatives include no chest pain, no nausea, and no significant changes in urinary output.

**Objective (Telehealth Physical Exam):**

General: Well-appearing, in no acute distress.

Psychiatric: Alert and oriented x3.

Respiratory: Unlabored breathing via video observation.

Edema: Patient self-checked and reports [No/Trace/Pitting] edema in lower extremities.

**Recent Laboratory Data:**

Serum Creatinine: [Value] mg/dL

Estimated GFR: [Value] mL/min/1.73m<sup>2</sup>

Potassium: [Value] mEq/L

Bicarbonate: [Value] mEq/L

Urine Albumin/Creatinine Ratio: [Value]

**Assessment and Plan:**

The patient remains at CKD Stage [Stage]. The primary goal is to slow progression and manage cardiovascular risk.

- **Blood Pressure Management:** Maintain goal
- **Medications:** [List changes or state "Continue current meds"].
- **Diet:** Advised on low sodium and [Protein/Potassium] restriction.
- **Monitoring:** Repeat labs (BMP and Urinalysis) in [Number] months.

**Follow-up:**

A follow-up telehealth appointment has been scheduled for [Number] months.

Thank you for the opportunity to participate in this patient's care.

Sincerely,

[Your Name, MD/DO]

[Practice Name]

[Contact Information]