

Auburn Montgomery Student Health Services

7461 East Dr
Montgomery AL, 36117
(334) 244-3281

Date: 04/28/20

PATIENT: YU, WANBING **DOB:** 12/24/1999 **Gender:** FEMALE **MRN:** 1022 **AGE:** 20 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: Pt in for immunizations.

Temp: 98

ALLERGIES: No Known Drug Allergies

MEDICATIONS:

amoxicillin 500 mg tablet (TAKE 2 TABLETS (1000 MG) BY ORAL ROUTE EVERY 12 HOURS)

clarithromycin 500 mg tablet (TAKE 1 TABLET (500 MG) BY ORAL ROUTE EVERY 12 HOURS)

fluconazole 150 mg tablet (TAKE 1 TABLET (150 MG) BY ORAL ROUTE ONCE, MAY REPEAT IN 3 DAYS FOR PERSISTING SYMPTOMS.)

omeprazole 20 mg capsule, delayed release (TAKE 1 CAPSULE (20 MG) BY ORAL ROUTE ONCE DAILY 30 MINUTES TO 1 HOUR BEFORE MEAL)

trazodone 50 mg tablet (TAKE 1/2-1 TABLET (25-50 MG) BY ORAL ROUTE ONCE DAILY AT BEDTIME)

ASSESSMENT:

Z23 - Encounter for immunization (PRIMARY)

Electronically signed by Amy Morris, RN on 04/28/20 1:48 PM