

* * * Communication Result Report (Oct. 23. 2023 10:26AM) * * *

1) AUM Warhawk Health Svcs.
2)

Date/Time: Oct. 23. 2023 10:24AM

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AUBURN UNIVERSITY
AT MONTGOMERY

WARHAWK HEALTH SERVICES

Attn: _____

To: Healthy Tigers From: WHSFax: _____ Pages: 3Phone: _____ Date: 10/23/23Re: 2 screening forms

☐ Urgent ☒ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

Comments: _____

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Auburn University Healthy Tigers- Provider Screening Form

Instructions: If you can not or choose not to participate in the Healthy Tigers screenings through the AUPCC, you may submit your health screening results through your physician. You are to complete **Section 1** of the form and your provider is to complete **Section 2**.

Certain lab tests associated with the Healthy Tigers Program when performed by your physician may only be covered once every 5 years by AUBCBS and you may be responsible for additional lab costs.

NAME (PLEASE PRINT): David Kodu SUBSCRIBER BANNER NUMBER: 904129339

AGE: 52 DATE OF BIRTH: 3-8-71 GENDER (CHECK ONE): ☒ MALE ☐ FEMALE

SUBSCRIBER NAME (AS APPEARS ON AU BCBS INSURANCE CARD): David Yuki Kodu

AU BCBS CONTRACT NUMBER: Q0A852107330

DAYTIME OR CAMPUS PHONE NUMBER: 334-657-2032 E-MAIL ADDRESS: dkodu@auburn.edu

What best describes your race/ethnicity?

- ☐ White ☐ Black/African American ☒ Asian ☐ Indian or Alaska Native
☐ Hispanic/Latino ☐ Native Hawaiian/Pacific Islander ☐ Other

Do you HAVE (or have you been told you had) any of the following? (Mark all that apply.)

- ☐ High Cholesterol ☐ High Blood Pressure or Hypertension ☒ Diabetes

Do you take MEDICATION for any of the following? (Mark all that apply.) Optional: Please provide a list of all of your medications on the back of this form (including prescription, over the counter, vitamins, and minerals)

- ☐ High Cholesterol ☐ High Blood Pressure or Hypertension ☒ Diabetes

SECTION 2 (To Be Completed by Healthcare Provider)

REQUIRED DATA

Blood Pressure 140 / 80 mmHg

Height 0 ft 4 in

Total Cholesterol 140 mg/dL

Weight 194.8 pounds

Blood Glucose 129

BMI 33.43

Alarm values: Total Cholesterol ≥ 250
Blood glucose ≥ 200
Blood pressure - Systolic ≥ 160 mm Hg
Diastolic ≥ 100 mm Hg
BMI ≥ 35

OPTIONAL DATA

HDL Cholesterol 55 mg/dL

TC/HDL Ratio _____

The above mentioned member has been evaluated in my office and counseled regarding his/her risk factors. In particular, I have noted any values that were above alarm values and responded as clinically indicated.

DATE TESTS PERFORMED BY PHYSICIAN (THIS DATE IS REQUIRED) 10 / 20 / 2023

Healthcare Provider's Name: (Please Print) Andrey Barton, CRNP

Healthcare Provider Signature: [Signature]

Healthcare Provider Address / Phone: 7401 E. Drive Suite 102 Montgomery, AL
334-244-3281

Please return completed form to:
AUBURN UNIVERSITY PHARMACEUTICAL CARE CENTER (AUPCC)

Attention: Healthy Tigers Program

2155 Walker Building, HSOP, 362 West Thach Avenue
Auburn University, Alabama 36849-5506

PHONE: (334) 844-4099 FAX: (334) 844-4019 E-MAIL: healthytigers@auburn.edu

For AUPCC use only: Banner ☐ EMR ☐