



AUBURN

MONTGOMERY

Auburn University Student Health Services

TO: Michelle FROM: Stewart CAMP
COMPANY: OB/Gyn Associates DATE: 10/10/00
FAX NUMBER: 334-279-9057 TOTAL PAGES, INCLUDING COVER: 1
PHONE NUMBER: _____ SENDER'S REFERENCE NUMBER: _____
RE: _____ CC: _____

Methodys Harvey
☒ URGENT ☒ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY

NOTES/COMMENTS

Dr. Grigg

Urgent ASAP

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P. O. Box 244023 Montgomery, AL 36124/ 334-244-3281 fax 334-244-3396

TRANSMISSION VERIFICATION REPORT

TIME : 01/24/2018 09:20
 NAME : AU STUDENT HEALTH
 FAX : 3342443396
 TEL : 3342443281
 SER.# : BROBJ254642

DATE, TIME 01/24 09:17
 FAX NO./NAME 92799057
 DURATION 00:02:31
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 RESULT OK
 MODE STANDARD

P. O. Box 244023 Montgomery, AL 36124/ 334-244-3281 fax 334-244-3396

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Handwritten: D. G. [Signature]
 [Signature] ASAP

NOTES/COMMENTS
☒ URGENT ☒ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY

Patient Information	Specimen Information	Client Information
HARVEY, MELODY DOB: 07/13/1975 AGE: 42 Gender: F Fasting: U Phone: NG Patient ID: NG	Specimen: AL410489N Requisition: 0485554 Collected: 01/23/2018 / 10:00 CST Received: 01/24/2018 / 00:12 CST Reported: 01/24/2018 / 03:41 CST	Client #: 49100638 QATL0000 TUCK, PAMELA P AUM NURSING CARE CENTER 7461 EAST DRIVE #102 MONTGOMERY, AL 36117

Test Name	In Range	Out Of Range	Reference Range	Lab
COMPREHENSIVE METABOLIC PANEL				AT
GLUCOSE		130 H	65-99 mg/dL	

Fasting reference interval

For someone without known diabetes, a glucose value >125 mg/dL indicates that they may have diabetes and this should be confirmed with a follow-up test.

UREA NITROGEN (BUN)	12	7-25 mg/dL
CREATININE	0.84	0.50-1.10 mg/dL
eGFR NON-AFR. AMERICAN	86	> OR = 60 mL/min/1.73m2
eGFR AFRICAN AMERICAN	99	> OR = 60 mL/min/1.73m2
BUN/CREATININE RATIO	NOT APPLICABLE	6-22 (calc)
SODIUM	136	135-146 mmol/L
POTASSIUM	4.5	3.5-5.3 mmol/L
CHLORIDE	103	98-110 mmol/L
CARBON DIOXIDE	22	20-31 mmol/L
CALCIUM	9.4	8.6-10.2 mg/dL
PROTEIN, TOTAL	7.1	6.1-8.1 g/dL
ALBUMIN	4.2	3.6-5.1 g/dL
GLOBULIN	2.9	1.9-3.7 g/dL (calc)
ALBUMIN/GLOBULIN RATIO	1.4	1.0-2.5 (calc)
BILIRUBIN, TOTAL	0.7	0.2-1.2 mg/dL
ALKALINE PHOSPHATASE	61	33-115 U/L
AST	22	10-30 U/L
ALT	18	6-29 U/L
CBC (H/H, RBC, INDICES, WBC, PLT)		
WHITE BLOOD CELL COUNT	6.6	3.8-10.8 Thousand/uL
RED BLOOD CELL COUNT	3.97	3.80-5.10 Million/uL
HEMOGLOBIN	12.0	11.7-15.5 g/dL
HEMATOCRIT	35.0	35.0-45.0 %
MCV	88.2	80.0-100.0 fL
MCH	30.2	27.0-33.0 pg
MCHC	34.3	32.0-36.0 g/dL
RDW	12.3	11.0-15.0 %
PLATELET COUNT	298	140-400 Thousand/uL
MPV	10.2	7.5-12.5 fL

AT

PERFORMING SITE:

AT QUEST DIAGNOSTICS-ATLANTA, 1777 MONTREAL CIRCLE, TUCKER, GA 30084-6802 Laboratory Director: ANDREW N YOUNG, MD, PHD, CLIA: 11D0255931

LIST OF RESULTS PRINTED IN THE OUT OF RANGE COLUMN:

GLUCOSE	130 H	65-99 mg/dL	AT
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Fasting reference interval

For someone without known diabetes, a glucose value >125 mg/dL indicates that they may have diabetes and this should be confirmed with a

Patient Information	Specimen Information	Client Information
HARVEY, MELODYE DOB: 07/13/1975 AGE: 42 Gender: F Fasting: U Patient ID: NG	Specimen: AL410489N Collected: 01/23/2018 / 10:00 CST Received: 01/24/2018 / 00:12 CST Reported: 01/24/2018 / 03:41 CST	Client #: 49100638 TUCK, PAMELA P

LIST OF RESULTS PRINTED IN THE OUT OF RANGE COLUMN:
follow-up test.

**BAPTIST MEDICAL CENTER EAST
EAST MONTGOMERY IMAGING CENTER**

6880 Winton Blount Boulevard
Montgomery, Alabama 36117
(334) 277-1210

Name: HARVEY, MELODYE MILLER

MR#: E000400613

Sex: Female

DOB: 7/13/1975

Account: E1802300729

Admit: 1/23/2018

Room/Bed:

Location: E-East Imaging

Admit Type: ECT

Discharge Date:

Age: 42 years

Admitting Physician: Stewart, Carol M, CRNP

R a d i o l o g y

Procedure Name:
US Pelvic GYN Transabd/
Vaginal/Doppler

Accession Number:
US-18-0003322

Procedure Date / Time:
1/23/2018 2:17:50 PM CST

Ordering Physician:
Stewart, Carol M, CRNP

Reason for exam:

ABD PN

FINDINGS

HARVEY, MELODYE MILLER

PELVIC ULTRASOUND TRANSABDOMINAL AND TRANSVAGINAL

HISTORY: Abdominal pain, hysterectomy with left oophorectomy.

FINDINGS: No comparison. This study was performed both transabdominally and transvaginally. There is post surgical change compatible with partial hysterectomy. Normal appearing residual cervical tissue is present. There are multiple cysts or there is a large multilocular cyst of the right ovary measuring 11 cm in diameter. There is a small amount of free pelvic fluid.

IMPRESSION:

Large cystic structure within the pelvis, likely representing an ovarian cyst.

MR#: E000400613
Printed: 1/23/2018 6:26 PM
Name: HARVEY, MELODYE MILLER

Room/Bed:
Sex: Female

Account: E1802300729
DOB: 7/13/1975

BAPTIST MEDICAL CENTER EAST
EAST MONTGOMERY IMAGING CENTER
6880 Winton Blount Boulevard
Montgomery, Alabama 36117
(334) 277-1210

Name: HARVEY, MELODYE MILLER

Account: E1802300729

R a d i o l o g y

Procedure Name:
US Pelvic GYN Transabd/
Vaginal/Doppler

Accession Number:
US-18-0003322

Procedure Date / Time:
1/23/2018 2:17:50 PM CST

Ordering Physician:
Stewart, Carol M, CRNP

wc/626286
EE

ELECTRONICALLY SIGNED BY: Stanton Jr., Ronald A, MD
PHYSICIAN SIGNED DATE AND TIME 01/23/2018 16:58
TECHNOLOGIST: TE
TRANSCRIBED DATE AND TIME: 01/23/2018 15:50
TRANSCRIPTIONIST: WSC

MR#: E000400613
Printed: 1/23/2018 6:26 PM
Name: HARVEY, MELODYE MILLER

Room/Bed:
Sex: Female

Account: E1802300729
DOB: 7/13/1975

**BAPTIST MEDICAL CENTER EAST
EAST MONTGOMERY IMAGING CENTER**

6880 Winton Blount Boulevard
Montgomery, Alabama 36117
(334) 277-1210

Name: HARVEY, MELODYE MILLER

MR#: E000400613

Sex: Female

DOB: 7/13/1975

Account: E1802300729

Admit: 1/23/2018

Room/Bed:

Location: E-East Imaging

Admit Type: ECT

Discharge Date:

Age: 42 years

Admitting Physician: Stewart, Carol M, CRNP

R a d i o l o g y

Procedure Name:
DX Abdomen (KUB)

Accession Number:
DX-18-0013755

Procedure Date / Time:
1/23/2018 2:32:27 PM CST

Ordering Physician:
Stewart, Carol M, CRNP

Reason for exam:

ABDOMINAL PAIN

FINDINGS

HARVEY, MELODYE

ABDOMEN:

HISTORY: Lower abdominal pain for 6 days.

Supine view of the abdomen with the hemidiaphragms excluded shows gas in the stomach, colon, and small bowel. There is one minimally dilated loop of small bowel in the left lower quadrant. No unusual calcifications are noted.

IMPRESSION:

Minimal small bowel dilatation is present. This is nonspecific. Follow-up images are suggested for continued evaluation of this finding.

bk-626334

MR#: E000400613
Printed: 1/23/2018 6:27 PM
Name: HARVEY, MELODYE MILLER

Room/Bed:
Sex: Female

Account: E1802300729
DOB: 7/13/1975

BAPTIST MEDICAL CENTER EAST
EAST MONTGOMERY IMAGING CENTER
6880 Winton Blount Boulevard
Montgomery, Alabama 36117
(334) 277-1210

Name: HARVEY, MELODYE MILLER

Account: E1802300729

R a d i o l o g y

Procedure Name:
DX Abdomen (KUB)

Accession Number:
DX-18-0013755

Procedure Date / Time:
1/23/2018 2:32:27 PM CST

Ordering Physician:
Stewart, Carol M, CRNP

AA

ELECTRONICALLY SIGNED BY: Gaillard, David H, MD
PHYSICIAN SIGNED DATE AND TIME 01/23/2018 16:59
TECHNOLOGIST: NGH
TRANSCRIBED DATE AND TIME: 01/23/2018 16:14
TRANSCRIPTIONIST: BAK

MR#: E000400613
Printed: 1/23/2018 6:27 PM
Name: HARVEY, MELODYE MILLER

Room/Bed:
Sex: Female

Account: E1802300729
DOB: 7/13/1975