

Auburn Montgomery Warhawk Health Services

7461 East Dr STE 102
Montgomery AL, 36117-8092
(334) 244-3281

Date: 09/01/22

PATIENT: CHEN, YUN **DOB:** 12/30/1961 **Gender:** MALE **MRN:** 4240 **AGE:** 60 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: Follow up

HISTORY OF PRESENT ILLNESS: Mr. Chen is a 60 yo male here today for 6 month follow up. He denies chest pain, SOB, or dizziness. He has occasional heart racing when he lays on his right side. His wife states that he snores a lot and has pauses in breathing and that has them concerned. It's been going on for the past 8 years. He has not been tested for OSA that he is aware of.

He c/o bilateral shin pain upon awakening this morning. He denies calf pain. He also has knee pain at times and stiff joints in his hands. Denies injury or history of arthritis that he's aware of.

He would like to change from Lipitor to Crestor as that is what his wife is on also.

VITALS: BP: 144/99 **Site:** LEFT ARM **Position:** SITTING **Pulse:** 61; **Temp:** 98.8; **Resp:** 16; **Ht:** 68 in.; **Wt:** 166.3 lbs.;
BMI: 25.28; **Pulse Oximetry:** 98%

ALLERGIES: No Known Drug Allergies

MEDICATIONS:

Enteric Coated Aspirin 81 mg tablet, delayed release (TAKE 1 TABLET (81 MG) BY ORAL ROUTE ONCE DAILY)
amlodipine 2.5 mg tablet (TAKE 1 TABLET (2.5 MG) BY ORAL ROUTE ONCE DAILY)
atorvastatin 20 mg tablet (1 tablet PO at bedtime.)
levamlodipine 2.5 mg tablet (daily)

PAST MEDICAL HISTORY: CAD s/p stent, HTN, HLD, kidney stones.

PAST SURGICAL HISTORY: Heart cath with stent placement in 2015.

SOCIAL HISTORY: Married. Lives with daughter and SIL. Former smoker. Quit in 2017. Drinks liquor most days of the week. Denies illicit drug use.

FAMILY HISTORY: Unknown.

REVIEW OF SYSTEMS:

CONSTITUTIONALS: All 14 point review of systems negative except those listed in HPI.

PHYSICAL EXAMINATION:

GENERAL: GENERAL: No apparent distress noted; Well developed; Pleasant.

CARDIOVASCULAR: S1 S2; Regular rate and rhythm; No systolic ejection murmurs noted; No carotid bruits noted. No peripheral edema bilateral lower extremities.

RESPIRATORY: Breath sounds equal and unlabored. Clear to auscultation bilaterally without wheezes, rales, or rhonchi.

MUSCULOSKELETAL: Normal range of movement x 4 extremities; 2+ DP and PT pulses bilaterally

INTEGUMENTARY: Warm, dry, intact. No lesions or rash noted.

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NEUROLOGIC: Alert and Oriented X3. CN II-XII intact. Sensation intact. Speech clear. Ambulates with steady gait.

PSYCHIATRIC: Appropriate mood and affect.

ORDERS:

COMP METABOLIC PANEL (QUEST) (1 unit(s)): Quest Diagnostics
CBC W/ DIFF (QUEST) (1 unit(s)): Quest Diagnostics
LIPID PANEL (QUEST) (1 unit(s)): Quest Diagnostics

ASSESSMENT:

I10 - ESSENTIAL (PRIMARY) HYPERTENSION (PRIMARY)
E78.5 - HYPERLIPIDEMIA, UNSPECIFIED
M25.50 - PAIN IN UNSPECIFIED JOINT
R06.83 - Snoring

PLAN:

Referral for sleep study. Change lipitor to crestor. Recommended otc tylenol arthritis for joint pain. Follow up in 6 months or sooner if needed.

amlodipine 2.5 mg tablet
Refills: 1 Qty: 90 TABLET(S)
Instructions: TAKE 1 TABLET (2.5 MG) BY ORAL ROUTE ONCE DAILY

Enteric Coated Aspirin 81 mg tablet, delayed release
Refills: 3 Qty: 90 TABLET(S)
Instructions: TAKE 1 TABLET (81 MG) BY ORAL ROUTE ONCE DAILY

Crestor 10 mg tablet
Refills: 1 Qty: 90 TABLET(S)
Instructions: TAKE 1 TABLET (10 MG) BY ORAL ROUTE ONCE DAILY at bedtime

Referral: Diagnostics, Sleep South (Pulmonology)
No Special Instructions

Electronically signed by Lindsey Barton, CRNP on 09/01/22 11:21 AM

A handwritten signature in blue ink that reads "J. Barton, CRNP". The signature is written in a cursive, flowing style.