

Auburn Montgomery Warhawk Health Services

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

Date: 09/01/22

PATIENT: CUI, RONG **DOB:** 06/02/1962 **Gender:** FEMALE **MRN:** 4800 **AGE:** 60 Years

VISIT TYPE: Lab Only

CHIEF COMPLAINT: Lab appointment- fasting.

ALLERGIES: Lipitor; Penicillins

MEDICATIONS:

Crestor 10 mg tablet (TAKE 1 TABLET (10 MG) BY ORAL ROUTE ONCE DAILY AT BEDTIME)
Enteric Coated Aspirin 81 mg tablet, delayed release (TAKE 1 TABLET (81 MG) BY ORAL ROUTE ONCE DAILY)
Lotensin 10 mg tablet (TAKE 1 TABLET (10 MG) BY ORAL ROUTE ONCE DAILY)
meclizine 25 mg tablet (TAKE 1 TABLET (25 MG) BY ORAL ROUTE 3 TIMES PER DAY AS NEEDED FOR DIZZINESS.
)
metformin 500 mg tablet (TAKE 1 TABLET (500 MG) BY ORAL ROUTE 2 TIMES PER DAY WITH MORNING AND EVENING MEALS)
nifedipine ER 30 mg tablet, extended release (TAKE 1 TABLET (30 MG) BY ORAL ROUTE ONCE DAILY)

ORDERS:

COMP METABOLIC PANEL (QUEST) (1 unit(s)): Quest Diagnostics
HEMOGLOBIN A1c (1 unit(s)): Quest Diagnostics
LIPID PANEL (QUEST) (1 unit(s)): Quest Diagnostics
CBC W/ DIFF (QUEST) (1 unit(s)): Quest Diagnostics
ALBUMIN RANDOM URINE W/CREATININE (1 unit(s)): Quest Diagnostics

ASSESSMENT:

E11.9 - Type 2 diabetes mellitus without complications (PRIMARY).
E78.5 - Hyperlipidemia, unspecified.

PLAN:

Follow up with labs.

Electronically signed by Lindsey Barton, CRNP on 09/01/22 10:19 AM

A handwritten signature in blue ink that reads "J. Barton, CRNP". The signature is cursive and fluid, with the letters "J.", "Barton", and "CRNP" clearly legible.