

Auburn Montgomery Student Health Services

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

Date: 10/28/21

PATIENT: CUI, RONG **DOB:** 06/02/1962 **Gender:** FEMALE **MRN:** 4800 **AGE:** 59 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: follow up

HISTORY OF PRESENT ILLNESS: Mrs. Cui is a 59 yo female here today for follow up on T2DM. Her last Hgb A1C in August was 8%. She was started on metformin 500mg BID. She is on statin, asa, and ACEI. She needs a refill of all of her medications. She is having a hard time returning back to her home country due to the COVID quarantine restrictions. She is not scheduled to go back until some time in March at this point. She has not had a mammogram, pap smear, of colonoscopy in the past.

She c/o dizziness for the past week. Worse when lying down. She also c/o runny nose and cold like symptoms. Denies fever. She is concerned about the dizziness b/c she had a stroke a few years back and it started with dizziness. Denies headache or blurred vision.

VITALS: BP: 124/85 **Site:** LEFT ARM **Position:** SITTING **Pulse:** 85; **Temp:** 96.8; **Resp:** 16; **Ht:** 62 in.; **Wt:** 142.4 lbs.;
BMI: 26.04; **Pulse Oximetry:** 97%

ALLERGIES: Lipitor; Penicillins

MEDICATIONS:

Crestor 10 mg tablet (TAKE 1 TABLET (10 MG) BY ORAL ROUTE ONCE DAILY at bedtime)
Lotensin 10 mg tablet (TAKE 1 TABLET (10 MG) BY ORAL ROUTE ONCE DAILY)
aspirin 81 mg chewable tablet (CHEW 1 TABLET (81 MG) BY ORAL ROUTE ONCE DAILY)
metformin 500 mg tablet (TAKE 1 TABLET (500 MG) BY ORAL ROUTE 2 TIMES PER DAY WITH MORNING AND EVENING MEALS)

PAST MEDICAL HISTORY: HTN, DM2 diet controlled, Hyperlipidemia, Brain aneurysm, Stroke.

PAST SURGICAL HISTORY: brain aneurysm repair.

SOCIAL HISTORY: denies tobacco, alcohol, and illicit drug use.

HEALTH MX HISTORY:

Hgb A1C- 8/5/2021
Microalbumin- Due
Foot exam- Due

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.

HEENT: Head- normocephalic; atraumatic. Eyes- sclera white, conjunctiva pink, EOMI. No Nystagmus. Ears- tympanic membranes clear. Ear canals are patent. Nose- septum- midline; No maxillary or frontal sinus tenderness. Throat- pink without exudates. No anterior or posterior cervical nodes palpated; No palpable thyroid abnormality or enlargement.

CARDIOVASCULAR: S1 S2; Regular rate and rhythm; No systolic ejection murmurs noted; No carotid bruits noted. No

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peripheral edema bilateral lower extremities.

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

GASTROINTESTINAL: Abdomen is soft; Nontender; Nondistended. Bowel sounds present x 4 quadrants. No masses or organomegaly noted.

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

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

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

PSYCHIATRIC: Appropriate mood and affect.

DM foot exam- normal. See uploaded foot screen.

ORDERS:

FLU SHOT NON BILLABLE TO INSURANCE (1 unit(s)): Injection

HEMOGLOBIN A1c (1 unit(s)): Quest Diagnostics

ALBUMIN RANDOM URINE W/CREATININE (1 unit(s)): Quest Diagnostics

RESULTS:

FLU SHOT NON BILLABLE TO INSURANCE :

Site Given: Left Deltoid

Dosage Given: 0.5 milliliter(s)

Administered By: Bicknell, Miranda - RN

ASSESSMENT:

R42 - Dizziness and giddiness (PRIMARY)

E11.9 - TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS

I10 - Essential (primary) hypertension

Z23 - ENCOUNTER FOR IMMUNIZATION

PLAN:

Continue metformin at current dose. Hgb A1C is improved and down to 6.1 %. Follow up in 3 months for recheck.
Referral given for CT brain re: dizziness r/o CVA. Follow up with results.

Crestor 10 mg tablet

Refills: 1 Qty: 90 TABLET(S)

Instructions: TAKE 1 TABLET (10 MG) BY ORAL ROUTE ONCE DAILY AT BEDTIME

Lotensin 10 mg tablet

Refills: 1 Qty: 90 TABLET(S)

Instructions: TAKE 1 TABLET (10 MG) BY ORAL ROUTE ONCE DAILY

Enteric Coated Aspirin 81 mg tablet, delayed release

Refills: 1 Qty: 90 TABLET(S)

Instructions: TAKE 1 TABLET (81 MG) BY ORAL ROUTE ONCE DAILY

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metformin 500 mg tablet

Refills: 1 Qty: 180 TABLET(S)

Instructions: TAKE 1 TABLET (500 MG) BY ORAL ROUTE 2 TIMES PER DAY WITH MORNING AND EVENING MEALS

Electronically signed by Lindsey Barton, CRNP on 10/29/21 3:51 PM

A handwritten signature in blue ink that reads "J. Barton, CRNP". The signature is written in a cursive, flowing style. The "J" is large and loops around the first part of the name. "Barton" is written in a standard cursive, and "CRNP" is written in a slightly more upright, blocky cursive at the end.