

Auburn Montgomery Warhawk Health Services

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

Date: 06/14/23

PATIENT: WALKER, DAVID **DOB:** 05/28/1960 **Gender:** MALE **MRN:** 5106 **AGE:** 63 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: 3 month DM follow up

Symptoms: No complaints today

VITALS: BP: 132/88 **Pulse:** 83; **Temp:** 98.2; **Resp:** 16; **Pulse Oximetry:** 98%

ALLERGIES: No Known Drug Allergies

MEDICATIONS:

Ozempic 0.25 mg or 0.5 mg (2 mg/1.5 mL) subcutaneous pen injector (Inject 0.5 MG SUBCUTANEOUSLY ONCE WEEKLY)

diclofenac 1 % topical gel

glimepiride 2 mg tablet (TAKE 1 TABLET (2 MG) BY ORAL ROUTE ONCE DAILY)

hydrochlorothiazide 12.5 mg capsule (TAKE ONE CAPSULE BY MOUTH ONE TIME DAILY)

lisinopril 20 mg tablet (TAKE ONE TABLET BY MOUTH ONE TIME DAILY)

metformin 1,000 mg tablet

methocarbamol 750 mg tablet

pantoprazole 20 mg tablet, delayed release (TAKE ONE TABLET BY MOUTH ONE TIME DAILY)

PAST MEDICAL HISTORY: T2DM, HTN, chronic joint pain, herniated disc in cervical spine with bilateral arm pain and numbness in left finger tips. He goes to orthopedist in Athens, GA.

PAST SURGICAL HISTORY: right inguinal hernia repair 10 years ago.

SOCIAL HISTORY: Works on campus. Denies smoking, drinking, or illicit drug use.

FAMILY HISTORY:

HEALTH MX HISTORY:

PCP- Dr. Patel- in process of changing to a different PCP.

Colonoscopy- 2015- reportedly normal.

Flu shot UTD.

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

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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.

ORDERS:

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

ASSESSMENT:

E11.9 - TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS (PRIMARY)

I10 - ESSENTIAL (PRIMARY) HYPERTENSION

R97.20 - Elevated prostate specific antigen [PSA]

PLAN:

A1C is trending down now that he has restarted Ozempic. Ozempic works better for him than Trulicity in regards to his daily blood sugars. His PSA is the high limit of normal. I do not have one for comparison. Will request records from previous PCPs to obtain a baseline. In the meantime, start cipro x 14 days. He denies any symptoms associated with prostatitis. He reports only getting up once at night to urinate. Will repeat PSA level after completion of antibiotics.

He verbalized understanding. Follow up in 3 months for diabetes recheck.

glimepiride 2 mg tablet

Refills: 0 Qty: 90 TABLET(S)

Instructions: TAKE 1 TABLET (2 MG) BY ORAL ROUTE ONCE DAILY

hydrochlorothiazide 12.5 mg capsule

Refills: 0 Qty: 90 TABLET(S)

Instructions: TAKE ONE CAPSULE BY MOUTH ONE TIME DAILY

metformin 1,000 mg tablet

Refills: 0 Qty: 180 TABLET(S)

Instructions: TAKE 1 TABLET (1,000 MG) BY ORAL ROUTE 2 TIMES PER DAY WITH MORNING AND EVENING MEALS

Ozempic 0.25 mg or 0.5 mg (2 mg/1.5 mL) subcutaneous pen injector

Refills: 0 Qty: 4.5 ML(S)

Instructions: INJECT 0.5 MG SUBCUTANEOUSLY ONCE WEEKLY (disp 3 month supply)

ciprofloxacin 500 mg tablet

Refills: 0 Qty: 28 TABLET(S)

Instructions: TAKE 1 TABLET (500 MG) BY ORAL ROUTE EVERY 12 HOURS

Electronically signed by Lindsey Barton, CRNP on 06/14/23 2:50 PM

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A handwritten signature in blue ink that reads "J. Barton, CRP". The signature is written in a cursive style with a large initial "J" and a stylized "B".