

Auburn Montgomery Warhawk Health Services

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

Date: 12/16/22

PATIENT: GREEN, LATARCHIA **DOB:** 08/21/1975 **Gender:** FEMALE **MRN:** 5245 **AGE:** 47 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: Follow up to discuss lab results and HTN follow up.

HISTORY OF PRESENT ILLNESS: Ms. Green is a 47 yo female here today to discuss her recent lab results. Her Hgb A1C was 6.4%. She denies having a history of prediabetes or diabetes in the past. She has been exercising more and watching her food intake. She is down 4 lbs since her last visit. She was recently started on amlodipine for HTN. She is checking her BP at home. It is running between 120s/70s- 130s/60s-70s. One day her BP got down to 112/69. She does need a refill of amlodipine.

VITALS: BP: 143/96 **Site:** LEFT ARM **Position:** SITTING **Pulse:** 85; **Temp:** 98.1; **Resp:** 16; **Ht:** 60 in.; **Wt:** 252.7 lbs.;
BMI: 49.35; **Pulse Oximetry:** 100%

ALLERGIES: adhesive tape

MEDICATIONS:

Bromfed DM 2 mg-30 mg-10 mg/5 mL oral syrup (TAKE 10 MILLILITERS BY ORAL ROUTE EVERY 8 hrs as needed for cough/congestion)

Norvasc 5 mg tablet (TAKE 1 TABLET (5 MG) BY ORAL ROUTE ONCE DAILY FOR HTN)

Multivitamin tablet

PAST MEDICAL HISTORY: Endometriosis, uterine fibroids, anemia, prediabetes, HTN.

PAST SURGICAL HISTORY: partial hysterectomy (still has ovaries) 2014. Left breast biopsy (benign) 2020. Lipoma right axilla removed in 1994. C-section 1996. Left femur surgery in 2011.

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

FAMILY HISTORY: Mother- HTN.

HEALTH MX HISTORY:

Former PCP was Dr. Chamnong until her insurance changed. Now she does not have a PCP.

GYN- Dr. Waller.

Mammogram- 2020. Referral given 11/2022.

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. 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.

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.

ASSESSMENT:

R73.03 - Prediabetes (PRIMARY)

I10 - Essential (primary) hypertension

PLAN:

We discussed her options with prediabetes to start metformin vs diet, exercise, and weight loss alone. She would like to continue the diet, exercise, and weight loss in addition to starting metformin. Follow up in 3 months to recheck Hgb A1C. Continue norvasc for HTN.

metformin ER 500 mg 24 hr tablet, extended release

Refills: 0 Qty: 90 TABLET(S)

Instructions: TAKE 1 TABLET (500 MG) BY ORAL ROUTE ONCE DAILY WITH THE EVENING MEAL

Norvasc 5 mg tablet

Refills: 0 Qty: 90 TABLET(S)

Instructions: TAKE 1 TABLET (5 MG) BY ORAL ROUTE ONCE DAILY FOR HTN

Electronically signed by Lindsey Barton, CRNP on 01/05/23 8:50 AM

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