

Auburn Montgomery Warhawk Health Services:

7461 East Dr STE 102
Montgomery AL, 361178092
(334) 244-3281

Date: 12/16/22

PATIENT:STUART,LINDA **DOB:** 12/29/1964 **Gender:** FEMALE **MRN:** 5255 **AGE:** 58 Years

Addendum Date: 2/15/2023 3:42:34 PM by Robin Blackwell

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: Medication Refill

HISTORY OF PRESENT ILLNESS: Ms. Stuart presents to the clinic requesting refills on her Trulicity, Fosinopril and Metoprolol. She recently moved to Alabama from Texas in July and has not found a new PCP here to take over her medications. She is currently in the process of finding a new PCP here. She took her last injection of Trulicity last week, she has a few pills left of her Metoprolol and ran out of her fosinopril 1 month ago. She states normally her BP readings at home is in the 120's/80's but recently has been slightly elevated due to not taking her Fosinopril. Her last A1c in June was 5.2. She is aware we cannot write for her Gabapentin. She denies any side effects to these medications and has been taking Trulicity for over 1 year and Fosinopril and Metoprolol for 10 years.

VITALS: BP: 147/85 **Site:** LEFT ARM **Position:** SITTING **Pulse:** 82; **Temp:** 98.3; **Resp:** 16; **Pulse Oximetry:** 96%

MEDICATIONS:

gabapentin 300 mg capsule

PAST MEDICAL HISTORY: HTN, DM, Pneumonia, Eczema

PAST SURGICAL HISTORY: Tonsillectomy and Adenoidectomy

SOCIAL HISTORY: Denies smoking or illicit drug use. She admits to ETOH use socially

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.

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

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

CBC W/ DIFF (QUEST) (1 unit(s)): Quest Diagnostics

Glucose (1 unit(s)): In-House Lab

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RESULTS:

Glucose:

Value: Negative

Comment: 99

ASSESSMENT:

I10 - ESSENTIAL (PRIMARY) HYPERTENSION (PRIMARY)

E11.9 - TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS

Z76.0 - Encounter for issue of repeat prescription

PLAN:

Pending CBC, CMP, A1C. Patient is aware to establish care with a PCP who can also write her Gabapentin. Continue taking BP readings at home daily and take to her first appt with her PCP. Patient verbalized understanding.

fosinopril 20 mg tablet

Refills: 0 Qty: 90 TABLET(S)

Instructions: TAKE 1 TABLET (20 MG) BY ORAL ROUTE ONCE DAILY

metoprolol succinate ER 50 mg tablet, extended release 24 hr

Refills: 0 Qty: 90 TABLET(S)

Instructions: TAKE 1 TABLET (50 MG) BY ORAL ROUTE ONCE DAILY

Trulicity 3 mg/0.5 mL subcutaneous pen injector

Refills: 2 Qty: 4 PEN NEEDLE(S)

Instructions: INJECT 3 MG BY SUBCUTANEOUS ROUTE ONCE WEEKLY

Electronically signed by Robin Blackwell, CRNP on 12/16/22 3:01 PM

Robin Blackwell CNP