

Auburn Montgomery Warhawk Health Services

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

Date: 10/16/24

PATIENT: BAKER, CYNTHIA **DOB:** 01/04/1965 **Gender:** FEMALE **MRN:** 5272 **AGE:** 59 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: Follow up

HISTORY OF PRESENT ILLNESS: Mrs. Baker is a 59 yo female here today for a follow up appt.

She has hypothyroidism on synthroid.

She has HTN on lisinopril. She was previously on metoprolol, but this was discontinued by her cardiologist secondary to fatigue. Her BP is elevated today. She does not check it at home.

She has GAD/depression on prozac. She is doing ok most days, but her brother's birthday is coming up and he passed away last December so it has been hard for her lately.

She has pre-diabetes. She was prescribed metformin, and she picked it up, but has not been taking it. She wants to discuss a GLP-1 so she can also lose weight.

VITALS: BP: 185/102 **Site:** LEFT ARM **Pulse:** 78 **BP2:** 150/105 **Site2:** LEFT ARM; **Temp:** 98.5; **Resp:** 16; **Wt:** 294.5 lbs.; **Pulse Oximetry:** 97%

ALLERGIES: No Known Drug Allergies

MEDICATIONS:

fluoxetine 60 mg tablet (TAKE 1 TABLET (60 MG) BY ORAL ROUTE ONCE DAILY IN THE MORNING)

levothyroxine 137 mcg tablet (TAKE 1 TABLET (137 MCG) BY ORAL ROUTE ONCE DAILY)

lisinopril 40 mg tablet

metformin ER 500 mg tablet, extended release 24 hr (TAKE 1 TABLET (500 MG) BY ORAL ROUTE ONCE DAILY WITH THE EVENING MEAL)

triamcinolone acetonide 0.1 % topical cream (APPLY A THIN LAYER TO THE AFFECTED AREA(S) BY TOPICAL ROUTE 2 TIMES PER DAY)

PAST MEDICAL HISTORY: hypothyroidism, HTN, GAD, PTSD, pre-diabetes.

PAST SURGICAL HISTORY: C-section

SOCIAL HISTORY: Widow. Lives in Auburn with her son. Works at AUM. Drinks rarely. Denies smoking, or illicit drug use.

FAMILY HISTORY: Brother- died at age 51 of pulmonary embolus.

HEALTH MX HISTORY:

Colonoscopy- 52 years old- reportedly normal

Mammogram- May 2024- Negative

Pap smear- March 2022- reportedly normal.

REVIEW OF SYSTEMS:

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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 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:

F41.1 - Generalized anxiety disorder (PRIMARY)
E03.9 - Hypothyroidism, unspecified
I10 - Essential (primary) hypertension
R73.03 - Prediabetes

PLAN:

She was given a referral to Quest for labs as she is a hard stick. Order for CBC, BMP, TSH, and Free T4. Follow up with lab results. She will let me know when she needs refills on her meds. Continue prozac for GAD/depression, synthroid for hypothyroidism, and lisinopril for HTN. Her BP is elevated today, it was better when rechecked towards the end of the visit. Her BP is managed by her cardiologist. Recommended that she recheck her BP at home tomorrow and if still elevated at 140/90 or greater, then to reach out to her cardiologist for a follow up.

GLP-1 discussion- she has pre-diabetes and insurance is not approving GLP-1 for this diagnosis currently. We discussed checking with her insurance about Wegovy for weight loss. She plans to call them to see if it is covered. Otherwise, encouraged her to take the metformin in addition to increase exercise and dietary modifications.

Otherwise, follow up here in 6 months for recheck.

Electronically signed by Lindsey Barton, CRNP on 10/16/24 3:44 PM

L. Barton, DNP, CRNP

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