

#6

Medical Weight Loss Progress Note

Date: 12/1/23 Name: Katherine Hines DOB: 12/21/2002

Weight: 350.8 Blood pressure: 146/87 BMI: _____

Change In Weight Since Last Visit: ↑ 7lbs. Diagnosis: Z68.43, E03.9

Diet Plan:

Include Notes from Diet Plan with PCP notes

Specify Diet: 2,000 cal diet

_____ Compliant with Diet Plan ☒ NOT Compliant with Diet Plan

Weight loss medications: NONE

Total Daily Caloric Intake: She doesn't keep track

Physical Activity/Exercise Plan:

_____ Gym _____ x's/wk ☒ Walking/Running 3 x's/wk _____ Aerobics _____ x's/wk

_____ Exercise Videos _____ x's/wk _____ Inability to Perform*

* not compliant w/ exercise regimen

Recommended Modifications: _____

Behavior Modification:

_____ Dietician Consult

Date: _____

_____ Group Counseling

Date: _____

_____ Individual Counseling

Date: _____

Recommended Modifications: _____

Comments (progress or lack of progress): up 7lbs this month. She doesn't count calories or exercise as she was before due to babysitting job.

*Physician's Signature: _____

Date: 12/1/23

Printed Physician's name: _____

Dr. Pamela Tuck

Fax to (205)838-3497 or (205)848-5255

*MID ONLY! INSURANCE DOES NOT ACCEPT NP'S SIGNATURE