

Auburn Montgomery Student Health Services

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

Date: 08/10/21

PATIENT: MOULTRIE, DEANTHONY **DOB:** 10/16/1997 **Gender:** MALE **MRN:** S00330629 **AGE:** 23 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: STI treatment for Trichomonas

ALLERGIES: No Known Drug Allergies

MEDICATIONS:

No Known Medications

ASSESSMENT:

A59.09 - Other urogenital trichomoniasis (PRIMARY)

PLAN:

Notify partners. No intercourse for 1 week. He verbalized understanding.

metronidazole 500 mg tablet

Refills: 0 Qty: 2 GRAM(S)

Instructions: TAKE 4 TABLETS (2 GRAMS) BY ORAL ROUTE NOW (Dispensed)

Electronically signed by Lindsey Barton, CRNP on 08/15/21 4:07 PM

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