

Coordinator For Healthplans - Encounter Summary for [REDACTED]
[REDACTED] Electronically signed by Dr. [REDACTED] NP-C

Social Security Number

[REDACTED]

Encounter

Date of Start Service

[REDACTED]

Encounter Participant

Dr. [REDACTED]

Contact

[REDACTED] [REDACTED] [REDACTED] Tel:
[REDACTED]

Appointment Confirmation

Provider: Dr. [REDACTED] MD

Confirmed On: [REDACTED] 08:04 PM

Location:

[REDACTED] [REDACTED] [REDACTED] [REDACTED]

Ph. tel: [REDACTED]

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Patient Summary

[REDACTED] born on [REDACTED] 6, is a [REDACTED] male with a history of hypertension. He has been managing his condition through medication and lifestyle adjustments. Recent evaluations indicate stable vital signs, and he continues to monitor his blood pressure regularly. Follow-up appointments are scheduled to ensure continued health and well-being.

Patient Demographics

Name: [REDACTED]

DOB: [REDACTED]

Age: [REDACTED]

Sex: Male

SSN: [REDACTED]

Hospital ID: [REDACTED]

Patient Lifestyle

Smoking Status: Never

Alcohol Consumption: Occasionally

Diet Preference: Diabetic-friendly

Exercise Habits: Mild

Patient Vitals

Heart Rate: 72

Respiratory Rate: 16

Temperature Celsius: 36.8

Oxygen Saturation Percent: 98

Blood Pressure: 130/85 mmHg

Recorded Date: [REDACTED]

Doctor Information

Doctor Name:

[REDACTED]
[REDACTED]

Doctor Unique ID: [REDACTED]

Doctor Notes

Subjective Observations: Patient reports feeling well. No new complaints. Adherent to medication regimen.

Assesment: Stable hypertension and well-managed diabetes. Overall health is satisfactory.

Recommendations: Continue current medication regimen. Maintain healthy diet and exercise. Monitor blood pressure regularly at home.

Follow Up Instruction: Schedule follow-up appointment in 6 months for routine checkup and blood work.

Past Hospital Visits

Date	Reason
[REDACTED]	Routine Checkup
[REDACTED]	Hypertension Management
[REDACTED]	Blood Pressure Monitoring
[REDACTED]	Annual Physical Exam
[REDACTED]	Medication Refill
[REDACTED]	Follow-up Appointment

Current Medications

Medication Summary	Dosage	Frequency
Lisinopril	20mg	Once daily
Aspirin	81mg	Once daily
Atorvastatin	10mg	Once daily
Metformin	500mg	Twice daily
Vitamin D	2000 IU	Once daily
Multivitamin	1 Tablet	Once daily

Medical Tests

Medication Test	Status	On/Last
Complete Blood Count (CBC)	Done	[REDACTED]
Comprehensive Metabolic Panel (CMP)	Done	[REDACTED]

Lipid Panel	Done	[REDACTED]
Electrocardiogram (ECG)	Done	[REDACTED]
Urinalysis	Done	[REDACTED]
HbA1c	Done	[REDACTED]
