

# Anonymized Medical Record

## Patient Demographics

**Patient ID:**

FH-004

**Date of Birth:**

1970-01-25 (Age: 55)

**Gender:**

Female

**Ethnicity:**

African American

## Chief Complaint (CC)

:

Routine follow-up for Type 2 Diabetes Mellitus.

## History of Present Illness (HPI)

:

55-year-old female here for routine follow-up for Type 2 Diabetes Mellitus (T2DM). Diagnosed 8 years ago. Reports consistent home blood glucose monitoring, generally in range (fasting 100-120 mg/dL, post-meal 140-160 mg/dL). Adheres to diabetic diet and exercises 30 minutes, 3 times per week (walking). No symptoms of hypo/hyperglycemia. Denies blurry vision, numbness/tingling, or increased thirst/urination. Last A1C 3 months ago was 7.2%.

## Past Medical History (PMH)

:

- Type 2 Diabetes Mellitus
- Hypertension
- Obesity (BMI 32)
- No prior surgeries.

## Medications

:

- Metformin 1000mg BID
- Lisinopril 20mg daily

## Allergies

:

None known.

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## Family History (FH)

:

- Mother: Type 2 Diabetes, Hypertension, Heart Disease
- Father: Type 2 Diabetes
- Brother: Type 2 Diabetes

## Social History (SH)

:

Works as a customer service representative. Married, 2 adult children. Former smoker (quit 10 years ago). No alcohol use.

## Review of Systems (ROS)

:

- Constitutional: Denies fever, chills, weight change.
- Endocrine: Denies polydipsia, polyuria, polyphagia.
- Cardiovascular: Denies chest pain, palpitations.
- Neurological: Denies numbness, tingling, weakness.
- Ophthalmologic: Denies blurry vision.

## Physical Examination (PE)

:

- Vitals: Temp 98.4°F, HR 75, RR 16, BP 130/85.
- General: Appears well-nourished, alert and oriented.
- Skin: No diabetic dermopathy noted.
- Feet: Intact sensation to monofilament bilaterally. No ulcers or deformities. Pulses 2+ bilaterally.
- Cardiac: Regular rate and rhythm, S1S2, no murmurs.
- Lungs: Clear to auscultation bilaterally.

## Assessment

:

1. Type 2 Diabetes Mellitus, well-controlled on current therapy (A1C 6.9%).
2. Hypertension, controlled.
3. Obesity.

## Plan

:

1. Medications: Continue current medications.
2. Education: Reinforce importance of continued healthy diet and regular exercise. Discuss importance of annual eye exams and foot exams.

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3. Screening: Order microalbuminuria screen for next visit.
4. Follow-up: Return in 6 months for routine diabetes follow-up.