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# **Debrah Singer**

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Dec 09, 2020

# **FAX COVER SHEET**

To: Jason Lo

905-480-0898

From: Singer, Debrah @ RCE MEDICAL

Notes:

Please see the attached information.

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# Debrah Singer, MD, FRCPC Endocrinology

**Dec 09, 2020 Jason Lo**3000 HIGHWAY 7
MARKHAM, ON L3R 6E1

**RE: Vinh Trung Lam** HC#: 6863843097 **DOB: 22-Jul-1965** 

RCE Medical Chart #: 13243

(416) 617-9818

Dear Dr. Jason Lo.

600 Alden Rd, Suite 610 Markham, ON L3R 0E7 Telephone: 289-844-7600 Fax: 289-472-5643

I had the pleasure of speaking with Vinh Trung Lam a pleasant 55 year old, for assessment of diabetes and hyperlipidemia.

## **Medical History**

Diabetes Fatty liver Hyperlipidemia

### Medications

ATORVASTATIN CALCIUM 20 mg TABLET: 1 Tablet(s), QD, Active Continuous, Approved JARDIANCE 25 MG TABLET: 1 Tablet(s), QD, Active Continuous, Approved

Name: Lam, Vinh Trung PHN: 6863843097

Email: Secondary Phone(s): (905) 513-1817

OZEMPIC 0.25-0.5 MG DOSE PEN (0.25 OR .5): 0.25 mg, 1x/week, 28 Day(s); then 0.5 mg, 1x/week, 90 Day(s), Active Continuous, Approved

fenofibrate, micronized 200 mg CAPSULE: 1 Capsule(s), QD, Active Continuous, Approved metformin HCI 1,000 mg TABLET, ER GASTRIC RETENTION 24 HR (1000 MG): 1 Tablet(s), BID, Active Continuous, Approved

Glucose monitoring strips 100 repeat ×1 year: n/a, Active Continuous, Approved, Non-Drug

#### **Allergies**

No Allergies

### **History of Present Illness**

Mr. Lam has COVID. He is getting better. He did his blood test before COVID. He feels he is doing well on Oxempic. He lost weight before COVID. He is eating about the same amount of take-out. He has reduced his dinner size

#### **Diabetic complications**

Known diabetic nephropathy. There is no proteinuria October 2018. Albumin to creatinine ratio 1.0 mg/mmol November 2019

No known Diabetic retinopathy last checked dec 2020

There is no diabetic neuropathy. Dec 2020

He is not had the Pneumovax

B12 268 October 2018

Last foot exam Nov 2019

Physical I	Examination
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Imperial height (feet)	5	ft.		26Aug2020
Imperial height (inches)	4.2	in.		26Aug2020
Imperial weight	158	lbs		26Aug2020
BMI	27.0	kg/m^2	18.5 -	08Sep2020
			24.9	
BP systolic1	121	mm Hg		26Aug2020
BP diastolic	77	mm Hg		26Aug2020
Pulse	90	bpm		26Aug2020

#### **Review of Lab Work**

The lab work was reviewed

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October 2018 fasting glucose 7.8. Hemoglobin A1c 7% EGFR 104 potassium 4.4 ALT 17 triglycerides 5.34 HDL 0.97 LDL non-incalculable total cholesterol 4.47 microalbumin negative B12 268

Glucose Fasting	5.3		mmol/L	01Dec2020
HbA1c	6.5	H	%	01Dec2020
Creatinine	78		umol/L	01Dec2020
Estimated GFR	97		ml/min	01Dec2020
Cholesterol	3.48		mmol/L	01Dec2020
HDL Cholesterol	0.98		mmol/L	01Dec2020
LDL Cholesterol	1.47		mmol/L	01Dec2020
Triglycerides	2.26		mmol/L	01Dec2020
TSH	1.24		mU/L	21Aua2019

## **Review of Investigations**

Abd ultrasound 2006 - fatty liver. Abdominal ultrasound on fatty liver 7 mm cyst in the right kidney.

Echo Nov 2019 -Normal EKG normal Nov 2019

Stress echo July 2015 - Normal.

# **Thyroid US**

February 2020 Isoechoic nodule in the left midpole measuring 6 x 4 x 3 mm hypoechoic nodule in the mid pole measuring 2 x 1 x 1 mm.

April 2015 - 3 and 6 mm nodules. (thyroid ultrasound in 2003 was normal)

# **Impression**

Name: Lam, Vinh Trung

Email: Secondary Phone(s): (905) 513-1817

PHN: 6863843097

Mr. Lam is doing well on Ozempic. His A1c remains at 6.5% which is excellent. His triglyceride level has dropped to 2.26. His A1c remains at 6.5%. Now his he does not have diabetic retinopathy or neuropathy. I will check for nephropathy on his next visit. I will speak to him in about 3-3-1/2 months time.

Thank you for letting me participate in the care of your patient. Dictated by voice recognition system.

Covid-19 phone consultation/follow-up disclosure. This assessment was conducted over the telephone given the restrictions on face-to-face contact in light of the Covid-19 pandemic. Informed verbal consent was obtained from the patient to communicate and provide care using virtual and other telecommunication tools. This patient has been explained the risks related to unauthorized disclosure or interception of personal health information and steps they can take to help protect your information. We have discussed that care provided through video or audio communication cannot replace the need for physical examination or an in-person visit for some disorders or urgent problems and the patient understands the need to seek urgent care

Sincerely.

arger

in an emergency department as necessary.

PHN: 6863843097