FAMILY HISTORY AND SOCIAL HISTORY:, Reviewed and remained unchanged., MEDICATIONS:, List remained unchanged including Plavix, aspirin, levothyroxine, lisinopril, hydrochlorothiazide, Lasix, insulin and simvastatin., ALLERGIES:, She has no known drug allergies., FALL RISK ASSESSMENT:, Completed and there was no history of falls., REVIEW OF SYSTEMS: , Full review of systems again was pertinent for shortness of breath, lack of energy, diabetes, hypothyroidism, weakness, numbness and joint pain. Rest of them was negative., PHYSICAL EXAMINATION:, Vital Signs: Today, blood pressure was 170/66, heart rate was 66, respiratory rate was 16, she weighed 254 pounds as stated, and temperature was 98.0., General: She was a pleasant person in no acute distress., HEENT: Normocephalic and atraumatic. No dry mouth. No palpable cervical lymph nodes. Her conjunctivae and sclerae were clear., NEUROLOGICAL EXAMINATION:, Remained unchanged., Mental Status: Normal., Cranial Nerves: Mild decrease in the left nasolabial fold., Motor: There was mild increased tone in the left upper extremity. Deltoids showed 5-/5. The rest showed full strength. Hip flexion again was 5-/5 on the left. The rest showed full strength., Reflexes: Reflexes were hypoactive and symmetrical., Gait: She was mildly abnormal. No ataxia noted. Wide-based, ambulated with a cane., IMPRESSION:, Status post cerebrovascular accident involving the right upper pons extending into the right cerebral peduncle with a mild left hemiparesis, has been clinically stable with mild improvement. She is planned for

surgical intervention for the internal carotid artery.,RECOMMENDATIONS: , At this time, again we discussed continued use of antiplatelet therapy and statin therapy to reduce her risk of future strokes. She will continue to follow with endocrinology for diabetes and thyroid problems. I have recommended a strict control of her blood sugar, optimizing cholesterol and blood pressure control, regular exercise and healthy diet and I have discussed with Ms. A and her daughter to give us a call for post surgical recovery. I will see her back in about four months or sooner if needed.