

10/09/2024 - Office Visit in Shreveport-Provenance Primary Care

Diagnoses

	Codes	Comments
Hyperlipidemia, unspecified hyperlipidemia type - Primary	ICD-10-CM: E78.5 ICD-9-CM: 272.4	
Type 2 diabetes mellitus with diabetic microalbuminuria, without long-term current use of insulin	ICD-10-CM: E11.29, R80.9 ICD-9-CM: 250.40, 791.0	

Problem List as of 10/9/2024 Date Reviewed: 4/9/2024

	Codes	Priority	Class	Noted - Resolved
History of herpes zoster	ICD-10-CM: Z86.19 ICD-9-CM: V12.09			12/31/1977 - Present
Type 2 diabetes mellitus	ICD-10-CM: E11.9 ICD-9-CM: 250.00			1/1/1999 - Present
History of colonic polyps	ICD-10-CM: Z86.0100 ICD-9-CM: V12.72			12/31/2013 - Present
Overview Signed 7/3/2023 8:12 AM by Callegan-Poche, Amanda L., MD Removal Reason: removed				
Lipoma of forearm	ICD-10-CM: D17.20 ICD-9-CM: 214.1			10/1/2016 - Present
Overview Signed 7/3/2023 8:12 AM by Callegan-Poche, Amanda L., MD surgical removal Removal Reason: surgical removal				
Contracture of skin of hand	ICD-10-CM: L98.8 ICD-9-CM: 709.8			11/30/2016 - Present
Overview Signed 7/3/2023 8:12 AM by Callegan-Poche, Amanda L., MD Depuytren's left hand				
Nephropathy due to secondary diabetes mellitus	ICD-10-CM: E13.21 ICD-9-CM: 249.40, 583.81			6/7/2021 - Present
Ophthalmic herpes simplex	ICD-10-CM: B00.50 ICD-9-CM: 054.40			10/27/2021 - Present
Overview Signed 7/3/2023 8:12 AM by Callegan-Poche, Amanda L., MD (10/2021) right eye				
Diverticular disease	ICD-10-CM: K57.90 ICD-9-CM: 562.10			8/17/2022 - Present
Hyperlipidemia	ICD-10-CM: E78.5 ICD-9-CM: 272.4			8/17/2022 - Present
Hypertensive disorder	ICD-10-CM: I10 ICD-9-CM: 401.9			8/17/2022 - Present
Ulcerative proctocolitis	ICD-10-CM: K51.30 ICD-9-CM: 556.2			8/17/2022 - Present
RESOLVED: Bilateral tinnitus	ICD-10-CM: H93.13 ICD-9-CM: 388.30			1/1/2003 - 8/17/2022

Patient as-of Visit

Allergies as of 10/9/2024

Allergies last reviewed by Callegan-Poche, Amanda L., MD on 4/9/2024 1041
No Known Allergies

Immunizations as of 10/9/2024

Immunization	Date
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10/09/2024 - Office Visit in Shreveport-Provenance Primary Care (continued)

Patient as-of Visit (continued)

COVID-19, vector-nr, rS-Ad26, PF (Janssen)	03/20/2021, 12/24/2021
Influenza (FLUAD) - Quadrivalent - Adjuvanted - PF *Preferred* (65+)	10/24/2022, 11/16/2023
Influenza - Trivalent - Afluria, Fluzone MDV	09/13/2018
Pneumococcal Conjugate - 20 Valent	11/29/2022
Tdap	01/01/2016

Outpatient Medications at Start of Encounter as of 10/9/2024

	Disp	Refills	Start	End
aspirin 81 MG Chew (Taking) Sig - Route: Take 2 tablets by mouth once daily. - Oral Class: Historical Med	—	—		—
cetirizine (ZYRTEC) 10 MG tablet (Taking) Sig - Route: Take 1 tablet (10 mg total) by mouth once daily. - Oral	90 tablet	1	4/8/2024	—
empagliflozin (JARDIANCE) 25 mg tablet (Taking) Sig - Route: Take 1 tablet (25 mg total) by mouth once daily. - Oral Notes to Pharmacy: DX Code E11.9	90 tablet	1	4/8/2024	—
ezetimibe (ZETIA) 10 mg tablet (Taking) Sig - Route: TAKE 1 TABLET BY MOUTH EVERY DAY - Oral	90 tablet	0	8/16/2024	—
fosinopril (MONOPRIL) 20 MG tablet (Taking) Sig - Route: Take 1 tablet (20 mg total) by mouth once daily. - Oral	90 tablet	3	4/8/2024	—
gabapentin (NEURONTIN) 300 MG capsule (Taking) Sig - Route: Take 1 capsule (300 mg total) by mouth 3 (three) times daily. - Oral	90 capsule	0	6/29/2023	—
glipizide (GLUCOTROL) 10 MG TR24 (Taking) Sig - Route: Take 1 tablet (10 mg total) by mouth 2 (two) times daily with meals. - Oral	180 tablet	1	4/9/2024	—
mesalamine (CANASA) 1000 MG Supp (Taking) Sig - Route: Place 1 suppository (1,000 mg total) rectally nightly. - Rectal	90 suppository	1	4/8/2024	—
rosuvastatin (CRESTOR) 40 MG Tab (Taking) Sig - Route: Take 1 tablet (40 mg total) by mouth once daily. - Oral	90 tablet	1	4/8/2024	—
SITagliptan-metformin (JANUMET) 50-1,000 mg per tablet (Taking) Sig - Route: Take 1 tablet by mouth 2 (two) times daily with meals. - Oral	180 tablet	3	4/16/2024	4/16/2025

Medications the Patient Reported Taking

	Disp	Refills	Start	End
aspirin 81 MG Chew (Taking) Sig: Take 2 tablets by mouth once daily. Class: Historical Med Route: Oral	—	—		—
cetirizine (ZYRTEC) 10 MG tablet (Taking) Sig: Take 1 tablet (10 mg total) by mouth once daily. Route: Oral	90 tablet	1	4/8/2024	—
empagliflozin (JARDIANCE) 25 mg tablet (Taking) Sig: Take 1 tablet (25 mg total) by mouth once daily. Notes to Pharmacy: DX Code E11.9 Route: Oral	90 tablet	1	4/8/2024	—
ezetimibe (ZETIA) 10 mg tablet (Taking) Sig: TAKE 1 TABLET BY MOUTH EVERY DAY Route: Oral	90 tablet	0	8/16/2024	—
fosinopril (MONOPRIL) 20 MG tablet (Taking) Sig: Take 1 tablet (20 mg total) by mouth once daily. Route: Oral	90 tablet	3	4/8/2024	—
gabapentin (NEURONTIN) 300 MG capsule (Taking) Sig: Take 1 capsule (300 mg total) by mouth 3 (three) times daily. Route: Oral	90 capsule	0	6/29/2023	—
glipizide (GLUCOTROL) 10 MG TR24 (Taking) Sig: Take 1 tablet (10 mg total) by mouth 2 (two) times daily with meals. Route: Oral	180 tablet	1	4/9/2024	—

10/09/2024 - Office Visit in Shreveport-Provenance Primary Care (continued)

Medications the Patient Reported Taking (continued)

	Disp	Refills	Start	End
mesalamine (CANASA) 1000 MG Supp (Taking) Sig: Place 1 suppository (1,000 mg total) rectally nightly. Route: Rectal	90 suppository	1	4/8/2024	—
rosuvastatin (CRESTOR) 40 MG Tab (Taking) Sig: Take 1 tablet (40 mg total) by mouth once daily. Route: Oral	90 tablet	1	4/8/2024	—
SITagliptan-metformin (JANUMET) 50-1,000 mg per tablet (Taking) Sig: Take 1 tablet by mouth 2 (two) times daily with meals. Route: Oral	180 tablet	3	4/16/2024	4/16/2025

Progress Notes

Progress Notes by Callegan-Poche, Amanda L., MD at 10/9/2024 8:15 AM

Author: Callegan-Poche, Amanda L., MD	Service: —	Author Type: Physician
Filed: 10/9/2024 1:17 PM	Encounter Date: 10/9/2024	Creation Time: 10/9/2024 8:31 AM
Status: Sign when Signing Visit	Editor: Callegan-Poche, Amanda L., MD (Physician)	

Ochsner-LSU Health | Provenance Primary Care - Amanda Callegan-Poche', MD

Legal Name: William F Melvin
Preferred Name: William F Melvin
DOB: 9/24/1948
MRN: 14458325
Date: 10/9/24

No chief complaint on file.

History of Present Illness

William F Melvin is a 76 y.o. White male who presents today for follow-up of chronic medical conditions. He denies any acute concerns or recent illnesses. The patient reports compliance with his medications. He denies any medication side effects.

Janumet -
Jardiance -

Walmart Eye Exam maybe 4 months ago

The patient presents today with no specific chief complaint. He denies any concerns or problems with his medications.

He reports checking his blood pressure at home and is mainly focused on his A1c levels. The patient admits to not checking his blood sugars regularly.

He mentions walking two miles daily for the past six to eight months.

The patient declines a flu shot and has not seen an eye doctor this year. He experiences occasional dizziness, particularly after consuming sugary foods like cake, but denies any trouble breathing, new rashes, skin lesions, or vision changes.

Progress Notes (continued)

Progress Notes by Callegan-Poche, Amanda L., MD at 10/9/2024 8:15 AM (continued)

The patient confirms that he is still taking all of his prescribed medications and discusses concerns about medication refills and insurance caps for the upcoming year.

He believes he had a retinopathy screen done at an eye exam approximately four months ago but is unsure if the results were sent to the clinic.

Review of Systems

Review of Systems

- Constitutional: Negative for chills and fever.
Eyes: Negative for visual disturbance.
Respiratory: Negative for shortness of breath and stridor.
Cardiovascular: Negative for chest pain and leg swelling.
Gastrointestinal: Negative for constipation, diarrhea, nausea and vomiting.
Musculoskeletal: Negative for gait problem.
Skin: Negative for rash.
Neurological: Positive for dizziness (when eating increased sugar). Negative for syncope and light-headedness.

Medical / Social / Family History

Past Medical History:

Diagnosis	Date
• Diabetes mellitus, type 2	
• Hyperlipidemia	
• Hypertension	

No past surgical history on file.

Social History

Tobacco Use	
• Smoking status:	Never
Passive exposure:	Never
• Smokeless tobacco:	Never
Substance Use Topics	
• Alcohol use:	Yes
Comment: social	
• Drug use:	Never

No family history on file.

Medications and Allergies

Current Outpatient Medications

Medication	Sig	Dispense	Refill
• aspirin 81 MG Chew	Take 2 tablets by mouth once daily.		

Progress Notes (continued)

Progress Notes by Callegan-Poche, Amanda L., MD at 10/9/2024 8:15 AM (continued)

• cetirizine (ZYRTEC) 10 MG tablet	Take 1 tablet (10 mg total) by mouth once daily.	90 tablet	1
• empagliflozin (JARDIANCE) 25 mg tablet	Take 1 tablet (25 mg total) by mouth once daily.	90 tablet	1
• ezetimibe (ZETIA) 10 mg tablet	TAKE 1 TABLET BY MOUTH EVERY DAY	90 tablet	0
• fosinopriL (MONOPRIL) 20 MG tablet	Take 1 tablet (20 mg total) by mouth once daily.	90 tablet	3
• gabapentin (NEURONTIN) 300 MG capsule	Take 1 capsule (300 mg total) by mouth 3 (three) times daily.	90 capsule	0
• glipiZIDE (GLUCOTROL) 10 MG TR24	Take 1 tablet (10 mg total) by mouth 2 (two) times daily with meals.	180 tablet	1
• mesalamine (CANASA) 1000 MG Supp	Place 1 suppository (1,000 mg total) rectally nightly.	90 suppository	1
• rosuvastatin (CRESTOR) 40 MG Tab	Take 1 tablet (40 mg total) by mouth once daily.	90 tablet	1
• SITagliptan-metformin (JANUMET) 50-1,000 mg per tablet	Take 1 tablet by mouth 2 (two) times daily with meals.	180 tablet	3

No current facility-administered medications for this visit.

Review of patient's allergies indicates:
No Known Allergies

Physical Examination

Vitals:	10/09/24 0823
BP:	133/63
Pulse:	62
Resp:	16
SpO2:	(!) 94%
Weight:	84.6 kg (186 lb 9.6 oz)

Body mass index is 27.56 kg/m².

Physical Exam

Health Maintenance / Imaging / Labs

Progress Notes (continued)

Progress Notes by Callegan-Poche, Amanda L., MD at 10/9/2024 8:15 AM (continued)

Health Maintenance

	Date Due	Completion Date
Eye Exam	Never done	---
Shingles Vaccine (1 of 2)	Never done	---
RSV Vaccine (Age 60+ and Pregnant patients) (1 - 1-dose 75+ series)	Never done	---
Diabetes Urine Screening	07/03/2024	7/3/2023
Lipid Panel	07/03/2024	7/3/2023
Hemoglobin A1c	07/08/2024	4/8/2024
Influenza Vaccine (1)	09/01/2024	11/16/2023
COVID-19 Vaccine (3 - 2024-25 season)	09/01/2024	12/24/2021
TETANUS VACCINE	01/01/2026	1/1/2016

Lab Results

Component	Value	Date
HGBA1C	8.1 (H)	04/08/2024
HGBA1C	7.9 (H)	10/04/2023

Lab Results

Component	Value	Date
MICALBCREAT	31.0 (H)	07/03/2023

No results found for: "LIPIDTOTCHOL", "LIPIDLDLCHOL", "LIPIDHDLCHOL", "LIPIDTRIG"

No results found for: "VITAMIND25HY"

Lab Results

Component	Value	Date
BUN	18	04/08/2024
CREATININE	0.8	04/08/2024
AST	28	04/08/2024
ALT	36	04/08/2024

Assessment

William F Melvin is a 76 y.o. White male seen at Ochsner LSU Health Provenance Primary Care outpatient clinic for

Plan

OLSC PRV PRIMARY CARE
1541 Kings Hwy
SHREVEPORT LA 71103-4228

Melvin, William F
MRN: 14458325, DOB: 9/24/1948, Legal Sex: M
Acct #: 28009157410
Enc. Date 10/9/2024

Progress Notes (continued)

Progress Notes by Callegan-Poche, Amanda L., MD at 10/9/2024 8:15 AM (continued)

inappropriate information in the report.

No future appointments.

Amanda Callegan-Poche', MD
Internal Medicine-Pediatrics
Ochsner LSU Health Provenance Primary Care
10/9/24

Labs

Hemoglobin A1C [1096741731] (Final result)

Electronically signed by: Callegan-Poche, Amanda L., MD on 10/09/24 0834 Status: Completed
Ordering user: Callegan-Poche, Amanda L., MD 10/09/24 0834 Authorized by: Callegan-Poche, Amanda L., MD
Ordering mode: Standard
Frequency: Routine 10/09/24 - Class: Clinic Collect
Quantity: 1 Lab status: Final result
Diagnoses
Type 2 diabetes mellitus with diabetic microalbuminuria, without long-term current use of insulin [E11.29, R80.9]

Specimen Information

ID	Type	Draw Type	Source	Collected By
24OLSH-283C0337	Blood	Venipuncture	Blood	Brown, Shaquerra, CMA 10/09/24 0846

Hemoglobin A1C [1096741731] (Abnormal)

Resulted: 10/09/24 2003, Result status: Final result

Order status: Completed Filed by: Lab, Background User 10/09/24 2003
Collected by: Brown, Shaquerra, CMA 10/09/24 0846 Resulting lab: OCHSNER LSU HEALTH SHREVEPORT

Components

Component	Value	Reference Range	Flag	Lab
Hemoglobin A1c	7.6	4.0 - 5.6 %	H ^	SHVRT
Comment: ADA Screening Guidelines: 5.7-6.4% Consistent with prediabetes >=6.5% Consistent with diabetes High levels of fetal hemoglobin interfere with the HbA1C assay. Heterozygous hemoglobin variants (HbS, HgC, etc)do not significantly interfere with this assay. However, presence of multiple variants may affect accuracy.				
Estimated Average Glucose	171	68 - 131 mg/dL	H ^	SHVRT

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
650 - SHVRT	OCHSNER LSU HEALTH SHREVEPORT	Unknown	1541 Kings Hwy SHREVEPORT LA 71103	04/27/23 0824 - Present

Indications

Type 2 diabetes mellitus with diabetic microalbuminuria, without long-term current use of insulin [E11.29, R80.9 (ICD-10-CM)]

Labs (continued)

Lipid Panel [1096741732] (Final result)

Electronically signed by: **Callegan-Poche, Amanda L., MD on 10/09/24 0834**

Status: **Completed**

Ordering user: Callegan-Poche, Amanda L., MD 10/09/24 0834

Authorized by: Callegan-Poche, Amanda L., MD

Ordering mode: Standard

Frequency: Routine 10/09/24 -

Class: Clinic Collect

Quantity: 1

Lab status: Final result

Diagnoses

Type 2 diabetes mellitus with diabetic microalbuminuria, without long-term current use of insulin [E11.29, R80.9]

Specimen Information

ID	Type	Draw Type	Source	Collected By
24OLSH- 283C0336	Blood	Venipuncture	Blood	Brown, Shaquerra, CMA 10/09/24 0846

Lipid Panel [1096741732] (Abnormal)

Resulted: 10/09/24 1956, Result status: Final result

Order status: Completed

Filed by: Lab, Background User 10/09/24 1956

Collected by: Brown, Shaquerra, CMA 10/09/24 0846

Resulting lab: OCHSNER LSU HEALTH SHREVEPORT

Components

Component	Value	Reference Range	Flag	Lab
Cholesterol Total	100	120 - 199 mg/dL	L ▼	SHVRT
Comment: The National Cholesterol Education Program (NCEP) has set the following guidelines (reference ranges) for Cholesterol: Optimal.....<200 mg/dL Borderline High.....200-239 mg/dL High.....> or = 240 mg/dL				
Triglyceride	262	30 - 150 mg/dL	H ^	SHVRT
Comment: The National Cholesterol Education Program (NCEP) has set the following guidelines (reference values) for triglycerides: Normal.....<150 mg/dL Borderline High.....150-199 mg/dL High.....200-499 mg/dL				
HDL Cholesterol	25	40 - 75 mg/dL	L ▼	SHVRT
Comment: The National Cholesterol Education Program (NCEP) has set the following guidelines (reference values) for HDL Cholesterol: Low.....<40 mg/dL Optimal.....>60 mg/dL				
LDL Cholesterol Direct	50.0	63.0 - 159.0 mg/dL	L ▼	SHVRT
Comment: The National Cholesterol Education Program (NCEP) has set the following guidelines (reference values) for LDL Cholesterol: Optimal.....<130 mg/dL Borderline High.....130-159 mg/dL High.....160-189 mg/dL Very High.....>190 mg/dL				
HDL/Cholesterol Ratio	25.0	20.0 - 50.0 %	—	SHVRT
Cholesterol/HDL Ratio	4.0	2.0 - 5.0	—	SHVRT
Non HDL Cholesterol	75	mg/dL	—	SHVRT
Comment: Risk category and Non-HDL cholesterol goals: Coronary heart disease (CHD) or equivalent (10-year risk of CHD >20%): Non-HDL cholesterol goal <130 mg/dL Two or more CHD risk factors and 10-year risk of CHD <= 20%: Non-HDL cholesterol goal <160 mg/dL 0 to 1 CHD risk factor: Non-HDL cholesterol goal <190 mg/dL				

Labs (continued)

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
650 - SHVRT	OCHSNER LSU HEALTH SHREVEPORT	Unknown	1541 Kings Hwy SHREVEPORT LA 71103	04/27/23 0824 - Present

Indications

Type 2 diabetes mellitus with diabetic microalbuminuria, without long-term current use of insulin [E11.29, R80.9 (ICD-10-CM)]

CBC Auto Differential [1096741733] (Final result)

Electronically signed by: **Callegan-Poche, Amanda L., MD on 10/09/24 0834**

Status: **Completed**

Ordering user: Callegan-Poche, Amanda L., MD 10/09/24 0834

Authorized by: Callegan-Poche, Amanda L., MD

Ordering mode: Standard

Frequency: Routine 10/09/24 -

Class: Clinic Collect

Quantity: 1

Lab status: Final result

Diagnoses

Type 2 diabetes mellitus with diabetic microalbuminuria, without long-term current use of insulin [E11.29, R80.9]

Specimen Information

ID	Type	Source	Collected By
24OLSH- 283H0221	Blood	Blood	10/09/24 0846

CBC Auto Differential [1096741733]

CBC with Differential [1180377578] (Abnormal)

Resulted: 10/09/24 1926, Result status: Final result

Order status: Completed

Filed by: Lab, Background User 10/09/24 1926

Collected by: Brown, Shaquerra, CMA 10/09/24 0846

Resulting lab: OCHSNER LSU HEALTH SHREVEPORT

Components

Component	Value	Reference Range	Flag	Lab
WBC	8.12	3.90 - 12.70 K/uL	—	SHVRT
RBC	5.07	4.60 - 6.20 M/uL	—	SHVRT
HGB	14.2	12.5 - 16.3 gm/dL	—	SHVRT
HCT	45.1	36.7 - 47.1 %	—	SHVRT
MCV	89	82 - 98 fL	—	SHVRT
MCH	28.0	27.0 - 50.0 pg	—	SHVRT
MCHC	31.5	31.0 - 37.0 g/dL	—	SHVRT
RDW	14.6	11.5 - 14.5 %	H ^	SHVRT
RDW-SD	47.6	37.5 - 49.0 fL	—	SHVRT
Platelet Count	151	150 - 450 K/uL	—	SHVRT
MPV	11.7	9.2 - 12.9 fL	—	SHVRT
Nucleated RBC	0	<=0 /100 WBC	—	SHVRT
Neut %	62.6	38 - 73 %	—	SHVRT
Lymph %	22.5	18 - 48 %	—	SHVRT
Mono %	8.6	4 - 15 %	—	SHVRT
Eos %	4.1	<=8 %	—	SHVRT
Basophil %	1.6	<=1.9 %	—	SHVRT
Relative Immature Granulocytes	0.6	0.0 - 0.5 %	H ^	SHVRT
Neut #	5.08	1.8 - 7.7 K/uL	—	SHVRT
Lymph #	1.83	1 - 4.8 K/uL	—	SHVRT
Mono #	0.70	0.3 - 1 K/uL	—	SHVRT
Eos #	0.33	<=0.5 K/uL	—	SHVRT
Baso #	0.13	<=0.2 K/uL	—	SHVRT
Absolute Immature Granulocytes	0.05	0.00 - 0.04 K/uL	H ^	SHVRT

Comment:

Mild elevation in immature granulocytes is non specific and can be seen in a variety of conditions including stress response, acute inflammation, trauma and pregnancy. Correlation with other laboratory and clinical findings is essential.

Labs (continued)

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
650 - SHVRT	OCHSNER LSU HEALTH SHREVEPORT	Unknown	1541 Kings Hwy SHREVEPORT LA 71103	04/27/23 0824 - Present

Indications

Type 2 diabetes mellitus with diabetic microalbuminuria, without long-term current use of insulin [E11.29, R80.9 (ICD-10-CM)]

Microalbumin/creatinine urine ratio [1180377570] (Final result)

Electronically signed by: **Callegan-Poche, Amanda L., MD on 10/09/24 0834** Status: **Completed**
Ordering user: Callegan-Poche, Amanda L., MD 10/09/24 0834 Authorized by: Callegan-Poche, Amanda L., MD
Ordering mode: Standard
Frequency: Routine 10/09/24 - Class: Clinic Collect
Quantity: 1 Lab status: Final result
Diagnoses
Type 2 diabetes mellitus with diabetic microalbuminuria, without long-term current use of insulin [E11.29, R80.9]

Questionnaire

Question	Answer
Specimen Source	Urine
Send normal result to authorizing provider's In Basket if patient is active on MyChart:	Yes

Order comments:

Specimen Information

ID	Type	Source	Collected By
24OLSH-283C0338	Urine	Urine, Clean Catch	Brown, Shaquerra, CMA 10/09/24 0846

Microalbumin/creatinine urine ratio [1180377570] (Abnormal)

Resulted: 10/09/24 1952, Result status: Final result

Order status: Completed
Collected by: Brown, Shaquerra, CMA 10/09/24 0846
Filed by: Lab, Background User 10/09/24 1952
Resulting lab: OCHSNER LSU HEALTH SHREVEPORT

Components

Component	Value	Reference Range	Flag	Lab
Urine Microalbumin	10.0	ug/mL	—	SHVRT
Urine Creatinine	33.0	23.0 - 375.0 mg/dL	—	SHVRT
Microalbumin/Creatinine Ratio Urine	30.3	<=30.0 ug/mg	H ^	SHVRT

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
650 - SHVRT	OCHSNER LSU HEALTH SHREVEPORT	Unknown	1541 Kings Hwy SHREVEPORT LA 71103	04/27/23 0824 - Present

Indications

Type 2 diabetes mellitus with diabetic microalbuminuria, without long-term current use of insulin [E11.29, R80.9 (ICD-10-CM)]

CBC with Differential [1180377578] (Final result)

Labs (continued)

Status: **Completed**

Order placed as a reflex to CBC Auto Differential [1096741733] ordered on 10/09/24 at 0834

Ordering user: Callegan-Poche, Amanda L., MD 10/09/24 0834

Authorized by: Callegan-Poche, Amanda L., MD

Ordering mode: Standard

Frequency: Routine 10/09/24 -

Class: Clinic Collect

Quantity: 1

Lab status: Final result

Diagnoses

Type 2 diabetes mellitus with diabetic microalbuminuria, without long-term current use of insulin [E11.29, R80.9]

Specimen Information

ID	Type	Draw Type	Source	Collected By
24OLSH- 283H0221	Blood	Venipuncture	Blood	Brown, Shaquerra, CMA 10/09/24 0846

CBC with Differential [1180377578] (Abnormal)

Resulted: 10/09/24 1926, Result status: Final result

Order status: Completed

Filed by: Lab, Background User 10/09/24 1926

Collected by: Brown, Shaquerra, CMA 10/09/24 0846

Resulting lab: OCHSNER LSU HEALTH SHREVEPORT

Components

Component	Value	Reference Range	Flag	Lab
WBC	8.12	3.90 - 12.70 K/uL	—	SHVRT
RBC	5.07	4.60 - 6.20 M/uL	—	SHVRT
HGB	14.2	12.5 - 16.3 gm/dL	—	SHVRT
HCT	45.1	36.7 - 47.1 %	—	SHVRT
MCV	89	82 - 98 fL	—	SHVRT
MCH	28.0	27.0 - 50.0 pg	—	SHVRT
MCHC	31.5	31.0 - 37.0 g/dL	—	SHVRT
RDW	14.6	11.5 - 14.5 %	H^	SHVRT
RDW-SD	47.6	37.5 - 49.0 fL	—	SHVRT
Platelet Count	151	150 - 450 K/uL	—	SHVRT
MPV	11.7	9.2 - 12.9 fL	—	SHVRT
Nucleated RBC	0	<=0 /100 WBC	—	SHVRT
Neut %	62.6	38 - 73 %	—	SHVRT
Lymph %	22.5	18 - 48 %	—	SHVRT
Mono %	8.6	4 - 15 %	—	SHVRT
Eos %	4.1	<=8 %	—	SHVRT
Basophil %	1.6	<=1.9 %	—	SHVRT
Relative Immature Granulocytes	0.6	0.0 - 0.5 %	H^	SHVRT
Neut #	5.08	1.8 - 7.7 K/uL	—	SHVRT
Lymph #	1.83	1 - 4.8 K/uL	—	SHVRT
Mono #	0.70	0.3 - 1 K/uL	—	SHVRT
Eos #	0.33	<=0.5 K/uL	—	SHVRT
Baso #	0.13	<=0.2 K/uL	—	SHVRT
Absolute Immature Granulocytes	0.05	0.00 - 0.04 K/uL	H^	SHVRT

Comment:

Mild elevation in immature granulocytes is non specific and can be seen in a variety of conditions including stress response, acute inflammation, trauma and pregnancy. Correlation with other laboratory and clinical findings is essential.

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
650 - SHVRT	OCHSNER LSU HEALTH SHREVEPORT	Unknown	1541 Kings Hwy SHREVEPORT LA 71103	04/27/23 0824 - Present

Indications

Type 2 diabetes mellitus with diabetic microalbuminuria, without long-term current use of insulin [E11.29, R80.9 (ICD-10-CM)]

OLSC PRV PRIMARY CARE
1541 Kings Hwy
SHREVEPORT LA 71103-4228

Melvin, William F
MRN: 14458325, DOB: 9/24/1948, Legal Sex: M
Acct #: 28009157410
Enc. Date 10/9/2024

Labs (continued)

Follow-up and Disposition History

10/09/2024 0843 - Amanda L. Callegan-Poche, MD
Dispositions:

- Follow up in about 6 months (around 4/9/2025).

Follow-up Information

None

Follow Up Call

No data filed

END OF REPORT