

Patient's Name: Quentin King

Clinic/UH #: 2444

Phone #: 409-599-0896

Age: 39

Today's Date: 5 / 10 / 2014

CC: Medication Refill

Allergies: NKDA

HPI: Q.K. is a 39 y/o AA male who ran out of his medications a couple of months ago. PMHx of HTN, high chol, and DM type II. Pt reports polydipsia and increased urinary frequency since running out of his meds. He also cl^o erectile dysfunction x 1 month and occasional throbbing HA that onsets when forgets to eat & resolves with OTC BC powder. He does not regularly check his BP or blood sugar.

Medications/Herbs/Supplements:

Pravastatin 10 mg
HCTZ 25mg
Amlodipine 10mg
Metformin 1000mg
Enalapril 10mg

SHx: 1 pack/yr hx of smoking. No ETOH use. No recreational drug use. Eats fast food often.

Review of Systems: Reviewed Patient Checklist on Back Page

Pertinent Positives:

Excessive thirst (polydipsia)
Increased urinary frequency

Pertinent Negatives:

Vision changes
Paresthesia
Chest pain
palpitations

BP: 163 / 105

P: 64

R: 96

T:

"F" WEIGHT:

LBS HEIGHT:

INCHES GLUCOSE:

PE: GENERAL: well-appearing, no distress

HEENT:

LUNGS: Clear to auscultation;

HEART: Regular rate and rhythm

ABDOMEN:

MS/NEURO: Sharp/dull discrimination intact
in BUE/BLE

SKIN:

OTHER:

ASSESSMENT/PLAN:

① **DM type II**

- Excessive thirst & increased urinary freq likely due to uncontrolled DM
- Refill Metformin
- counseled pt to keep log of blood sugar and return for 6 month f/u to check HbA1c

② **HTN**

- Refill HCTZ, Amlodipine, and Enalapril
- counseled pt to keep log of BP and check regularly

③ **Hyperlipidemia**

- Refill Pravastatin
- Return in 6 month f/u to check lipid panel

Faculty additions:

SIGNATURE

M. J. [Signature]

An Tran MSI

STUDENT NAME: Eric Siehoff MSI

DIRECTOR SIGNATURE: *Will Green*

Blurred vision

EA - 1 month

A little to since he's checked P. I.

Headaches

Lost 30 lbs

Excessive thirst, polyuria

No vision changes

No edema

Dull headaches - 5/10 pain
Occasionally