

**Use for April 2011 abstraction**

**WeServeEveryone Clinic**

1111 First Street California  
111-111-11111 Fax: 111-111-1111 Chart Summary

**Dowe Treatum**

Home: 444-444-4444  
Female DOB: 01/04/1969 0000-33333 Ins: Commercial xxxxx

**Patient Information**

<b>Name:</b> Dowe Treatum	<b>Home Phone:</b> 444-444-4444
<b>Address:</b> 1234 And How Ave Green, Utah	<b>Office Phone:</b>
<b>Patient ID:</b> 0000-7678	<b>Fax:</b>
<b>Birth Date:</b> 01/04/1969	<b>Status:</b> Active
<b>Gender:</b> Male	<b>Marital Status:</b> Married
<b>Contact By:</b> Phone	<b>Race:</b> White
<b>Soc Sec No:</b> 444-444-4444	<b>Language:</b> English
<b>Resp Prov:</b> And Howw	<b>MRN:</b> MR-111-1111
<b>Referred by:</b>	<b>Emp. Status:</b> Full-time Sens
<b>Email:</b>	<b>Chart:</b> No
<b>Home LOC:</b> WeServeEveryone	<b>External ID:</b> MR-111-1111

**Problems**

DIABETES MELLITUS (ICD-250.)  
HYPERTENSION, BENIGN ESSENTIAL (ICD-401.1)

**Medications**

PRINIVIL TABS 20 MG (LISINOPRIL) 1 po qd  
Last Refill: #30 x 2 : Carl Savem MD (08/27/2010)  
HUMULIN INJ 70/30 (INSULIN REG & ISOPHANE (HUMAN)) 20 units ac breakfast  
Last Refill: #600 u x 0 : Carl Savem MD (08/27/2010)

**Directives**

**Allergies and Adverse Reactions (! = critical)**

**Services Due**

FLU VAX, PNEUMOVAX, MICROALB URN

**3/18/2011 - Office Visit: F/u Diabetes**  
**Provider: Carl Savem MD**  
**Location of Care: WeServeEveryone Clinic**

**OFFICE VISIT**

**History of Present Illness**

**Reason for visit:** Routine follow up

**Chief Complaint:** No complaints

**History**

**Diabetes Management**

**Hyperglycemic Symptoms**

**Polyuria:** no

**Polydipsia:** no

**Blurred vision:** no

**Sympathomimetic Symptoms**

**Diaphoresis:** no

**Agitation:** no

**Tremor:** no

**Palpitations:** no

**Insomnia:** no

**Neuroglycopenic Symptoms**

**Confusion:** no

**Lethargy:** no

**Somnolence:** no

**Amnesia:** no

**Stupor:** no

**Seizures:** no

**Review of Systems**

**General:** denies fatigue, malaise, fever, weight loss

**Eyes:** denies blurring, diplopia, irritation, discharge

**Ear/Nose/Throat:** denies ear pain or discharge, nasal obstruction or discharge, sore throat

**Cardiovascular:** denies chest pain, palpitations, paroxysmal nocturnal dyspnea, orthopnea, edema  
**Respiratory:** denies coughing, wheezing, dyspnea, hemoptysis

**Gastrointestinal:** denies abdominal pain, dysphagia, nausea, vomiting, diarrhea, constipation

**Genitourinary:** denies hematuria, frequency, urgency, dysuria, discharge, impotence, incontinence

**Musculoskeletal:** denies back pain, joint swelling, joint stiffness, joint pain

**Skin:** denies rashes, itching, lumps, sores, lesions, color change

**Neurologic:** denies syncope, seizures, transient paralysis, weakness, paresthesias

**Psychiatric:** denies depression, anxiety, mental disturbance, difficulty sleeping, suicidal ideation, hallucinations, paranoia

**Endocrine:** denies polyuria, polydipsia, polyphagia, weight change, heat or cold intolerance

**Heme/Lymphatic:** denies easy or excessive bruising, history of blood transfusions, anemia, bleeding disorders, adenitis, chills, sweats

**Allergic/Immunologic:** denies urticaria, hay fever, frequent UTIs; denies HIV high risk behaviors

**Vital Signs**

Ht: 64 in. Wt: 140 lbs. T: 98.0 degF. T site: oral P: 72 Rhythm: regular R: 16 BP: 158/90

**Physical Exam**

**General Appearance:** well developed, well nourished, no acute distress

**Eyes:** conjunctiva and lids normal, PERRLA, EOMI, fundi WNL

**Ears, Nose, Mouth, Throat:** TM clear, nares clear, oral exam WNL

**Respiratory:** clear to auscultation and percussion, respiratory effort normal

**Cardiovascular:** regular rate and rhythm, S1-S2, no murmur, rub or gallop, no bruits, peripheral pulses normal and s  
no cyanosis, clubbing, edema or varicosities

**Skin:** clear, good turgor, color WNL, no rashes, lesions, or ulcerations

**Problems (including changes):** Blood pressure is lower. Feet are inspected and there are no callouses, no compromi  
No vision complaints.

**Impression:** Sub optimal sugar, control with retinopathy and neuropathy, high glucometer readings. Will work hard  
Will increase insulin by 2 units.

**Home Glucose Monitoring:**

AC breakfast 110 to 220

AC breakfast mean 142

AC dinner 100 to 250

AC dinner mean 120

**Plan**

**Medications:**

HUMULIN INJ 70/30 20 u ac breakfast

PRINIVIL TABS 20 MG 1 qd

**Treatment:** Will have annual foot exam at next visit.

**Orders:**

UA

Metabolic Panel

**Education/Counseling (time):** 5 minutes

**Coordination of Care (time):** 20 minutes

**Follow-up/Return Visit:** 3 months

**Disposition:** return to clinic

**Tests:**

(1) Metabolic Panel(ML-03CHEM)

ALK PHOS	72	35-100
BG RANDOM	125 mg/dl	70-125
BUN	16 mg/dl	7-25
CALCIUM	9.6 mg/dl	8.2-10.2
CHLORIDE	101 mmol/l	96-109
CO2	27 mmol/l	23-29
CREATININE	0.7 mg/dl	0.6-1.2
PO4	2.9 mg/dl	2.5-4.5
POTASSIUM	4.5 mmol/l	3.5-5.3
SGOT (AST)	31 U/L	0-40
BILI TOTAL	0.7 mg/dl	0.0-1.3
URIC ACID	4.8 mg/dl	3.4-7.0
LDH, TOTAL	136 IU/L	0-200
SODIUM	135 mmol/l	135-145

(2) HbA1c Test

HbA1c level 6.0%

(3) Lipid Profile

Cholesterol, Total 210 mg/dl

Triglycerides 236 mg/dl

HDL Cholesterol 36

LDL Cholesterol 107

**WeServeEveryone Clinic**

*March 24, 2011*

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Chart Summary

Female DOB: 04/04/1950

0000-44444

Ins: Commercial xxxxx

**Date 03/18/2011**

HEIGHT (in)	64
WEIGHT (lb)	140
TEMPERATURE (deg F)	98
TEMP SITE	oral
PULSE RATE (/min)	72
PULSE RHYTHM	
RESP RATE (/min)	16
BP SYSTOLIC (mm Hg)	158
BP DIASTOLIC (mm Hg)	90
CHOLESTEROL (mg/dL)	
HDL (mg/dL)	
LDL (mg/dL)	
BG RANDOM (mg/dL)	125
CXR	
EKG	
PAP SMEAR	
BREAST EXAM	
MAMMOGRAM	
HEMOCCULT	neg
FLU VAX	
PNEUMOVAX	
TDBOOSTER	0.5 ml g
Foot Exam	
Eye Exam	Complete

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