Patient Note 5

Patient Name: Mohan Rao

Age: 58

Gender: Male

Current Problem List:

- Type 2 Diabetes (8 years, with gastroparesis)
- Hypertension (controlled)
- Dyslipidemia

Past Medical History:

- Type 2 Diabetes
- Hypertension
- Dyslipidemia
- Peptic Ulcer Disease

Allergy:

None

Family History:

Father: DyslipidemiaMother: Type 2 Diabetes

Social History:

Smoker: Quit 10 years ago, 15 pack-years

Alcohol: Occasional drinkerDiet: Irregular meal patterns

History of Present Illness: Reports bloating, early satiety, and occasional vomiting. Blood glucose levels fluctuate significantly after meals. Denies chest pain or palpitations. Admits to occasional alcohol use.

Physical Examination:

Vital Signs: BP 126/76 mmHg, HR 74 bpm, BMI 29 kg/m²

• HEENT: No abnormalities

• Abdominal: Mild distension, no rebound tenderness

• Cardiovascular: Normal S1, S2; no murmurs

• Extremities: No edema

Assessment:

- 1. Type 2 Diabetes with gastroparesis
- 2. Hypertension, controlled
- 3. Dyslipidemia, stable

Diagnosis:

- Diabetic gastroparesis
- Type 2 Diabetes, moderately controlled
- Hypertension (controlled)

Plan:

- Start Metoclopramide 10 mg TID before meals
- Adjust insulin therapy to manage postprandial spikes
- Recommend smaller, frequent meals
- Continue lipid management with Atorvastatin 40 mg nightly
- Avoid alcohol

Follow-Up: Return in 6 weeks to assess symptom improvement and glucose control.

Medications:

- Metoclopramide 10 mg TID
- Insulin Aspart as per sliding scale
- Lisinopril 20 mg daily
- Atorvastatin 40 mg nightly

Recurring Questions for Monitoring:

- 1. Have you experienced any nausea, vomiting, or bloating?
- 2. Are your blood sugar levels fluctuating post meals?
- 3. Have you adhered to meal recommendations?
- 4. Any new or worsening symptoms?
- 5. Have you experienced any side effects from medications?