

Lodi Memorial Hospital

Progress Note

Date 05/16/12

Maddula, Mallareddy MD

Subjective Nephrologist

Subjective HPI

Patient is c/o pain in left leg. Urine output is increasing.

Problem List

Active Problems

- Cellulitis and abscess of leg
- Chronic kidney disease stage 4
- Congestive heart failure
- Diabetes mellitus type 2
- Essential hypertension
- Hyperglycemia

Objective

Nursing Clinical Data

Vitals & I&O

Vital Signs

Date	Temp	Pulse	Resp	B/P	Pulse Ox	FiO2
05/15-05/16	36.2-36.9	57-62	18-20	130-151/62-68	95-996	

Intake and Output

	05/16 0600
Intake Total	1380
Output Total	700
Balance	680
Intake, IV	500
Intake, Oral	880
Number	1
Unmeasured	
Stools	
Number Voids	1
Output, Urine	700
Patient Weight	118.1 kg

M053082 V023586118

PARVIN, MARY JEAN

03/16/43 69 F 3S

Electronically signed by: Maddula, Mallareddy MD 05/22/12 1054

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PN-Nephrologist - Additional copy

Lodi Memorial Hospital

Progress Note

Date 05/16/12
Maddula, Mallareddy MD

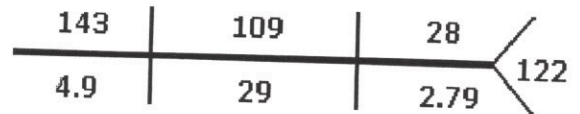
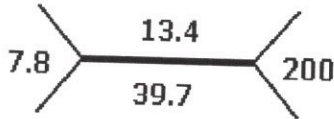
Voiding Method	Foley
Weight Measurement Method	Bed

Results

Results

Laboratory - CBC/MP

05/16/12 0556:



	Laboratory Tests				
	05/16 1115	05/16 0707	05/16 0556	05/15 2115	05/15 1725
Chemistry					
POC Glucose (70 - 110 mg/dL)	199 H	171 H		274 H	177 H
Phosphorus (2.4 - 4.7 mg/dL)			5.5 H		

Medications

Allergies

Coded Allergies:

latex (Mild, Rash 05/11/12)

Converted from Drug Class Allergy: Latex

Sulfa(Sulfonamide Antibiotics) (Sulfa (Sulfonamide Antibiotics)) (Severe, Convulsions 05/11/12)

Converted from Ingredient Allergy: Sulfa Drugs

morphine (Severe, DIFFICULTY OF BREATHING 05/12/12)

Current Medications

Current Medications

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Acetaminophen 500 mg Q4PRN PRN PO
Acetaminophen/Hydrocodone Bitart 1 tab Q4PRN PRN PO
Bisacodyl 5 mg HSPRN PRN PO
Calcium Carbonate 1000 mg Q6PRN PRN PO (DC)
Clonidine 0.2 mg Q8PRN PRN PO
Morphine HCl 2 mg Q4PRN PRN IV
Ondansetron HCl 4 mg Q6PRN PRN IV
Potassium Chloride 0 PROTOCOL PO (DC)
Potassium Chloride 40 meq PROTOCOL PRN PO (DC)
Potassium Chloride 20 meq PROTOCOL PRN PO (DC)
Potassium Chloride 10 meq PROTOCOL PRN PO (DC)
Zolpidem Tartrate 5 mg HSPRN PRN PO (DC)
Insulin Glargine 25 unit QPM SUB-Q
Carvedilol 12.5 mg BID PO
Docusate Sodium 100 mg BID PO
Famotidine 20 mg BID PO
Nystatin 0 BID TOP
Levothyroxine Sodium 100 mcg DAILY AC PO
Insulin Glargine 30 unit QAM SUB-Q
Ceftriaxone Sodium 1000 mg Q24H IV
Sodium Chloride 50 ml
Escitalopram Oxalate 20 mg DAILY PO (CKD)
Isosorbide Mononitrate 30 mg DAILY PO
Multivitamins 1 tab DAILY PO
Potassium Chloride 40 meq DAILY PO (DC)
Sitagliptin Phosphate 50 mg DAILY PO
Aspirin 81 mg DAILY PO
Insulin Aspart 0 ACHSPRN PRN SUB-Q
Vancomycin HCl 250 ml Q24H IV (DC)
Sodium Chloride 1000 ml Q24H IV
Vancomycin HCl 250 ml Q24H IV (CKD)
Simvastatin 20 mg HS PO
Calcium Acetate 667 mg WM PO (CKD)

Exam

Respiratory Clear to auscultation, Normal to air movement

Cardiovascular Regular, No murmur, No rub

Abdomen Normal Bowel Sounds, Soft

Extremities No cyanosis, No edema

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Progress Note

Date 05/16/12
Maddula, Mallareddy MD

Assessment/Plan Nephrology

Problems/Plan

- 1 Acute renal failure probably secondary to ATN : Continue IV hydration with 40ml/hr of NS.**
2. Congestive heart failure (Active): Improved.
3. Cellulitis and abscess of leg (Active)- On Vancomycin + IV rocephine
4. Proteinuria and CKD from diabetic Nephropathy: Restart ACE-I once renal function is stabilized.
5. Hyperglycemia and poorly controlled DM with HgA1c is of 14.20, Cont lantus 30 units in am and 25 units in pm and ISS anc acc checks.
6. Essential hypertension (Active)
will cont lasix, Lisinopril ,a micardiis, coreg, clonidine prn.

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DATE

5/16/12

REF: ML4S20FN 2013/02
 Description: 4F X 20cm SL MIDLINE USE BY
 Patient Chart: 84908030679 LOT MBJR670

1630pm

Midline catheter (M) (R) upper arm.
 Total length = 20 cm, external length = 0 cm.
 (R) upper circumference = 29 cm. *Delaney*

5/16/12
2300

Arth: Nti d. d. d. d.

Delaney

5-17-12

9:30 RENAL SOUND COMPLETED BY N. MANOUCOS
 RDMs

5-21-12
(1130)

Medical Nutrition Therapy
 Initial assessment completed; see "Assessment Forms" section in Meditech.
 Recommendations placed in "Physician Orders"; please sign. *Cholesterol MSAD #521*



975 S. Fairmont Ave.
 Lodi, CA 95240
 (209)334-3411



F6170-43

PARVIN, MARY JEAN
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 69/F 05/11/12



Lodi Memorial Hospital

Progress Note

Date 05/16/12
Multani,Kuljeet K MD - HOSP

Subjective

Subjective

Subjective HPI

Pt awake and alert in bed but per RN has been c/o pain in left leg

Problem List

Active Problems

- Cellulitis and abscess of leg
- Congestive heart failure
- Diabetes mellitus type 2
- Essential hypertension
- Hyperglycemia

History obtained from- Patient, Nurse, Chart
PCP/Admit Date

Primary Care Physician Freund,Edmund MD-Mills
Phone number 334-8540
Admit Date 05/11/12
Length of Stay 5

Estimated length of stay 3-4

History and Physical reviewed? Yes

Objective

Vitals & I&O

Vitals & I&O

Vital Signs

Date	Temp	Pulse	Resp	B/P	Pulse Ox	FiO2
05/15-05/16	36.3-36.9	60-62	18-20	130-147/62-68	95-96	

Intake and Output

	05/16 0600
Intake Total	1380

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PARVIN,MARY JEAN

03/16/43 69 F 3S

Electronically signed by: Multani,Kuljeet K MD - HOSP 05/16/12 1616

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Lodi Memorial Hospital

Progress Note

Date 05/16/12
Multani,Kuljeet K MD - HOSP

Output Total	700
Balance	680
Intake, IV	500
Intake, Oral	880
Number Unmeasured Stools	1
Number Voids	1
Output, Urine	700
Patient Weight	118.1 kg
Voiding Method	Foley
Weight Measurement Method	Bed

Results
Results

	Laboratory Tests				
	05/16 1115	05/16 0707	05/16 0556	05/16 0554	05/15 2115
Chemistry					
Sodium (134 - 143 mmol/L)			143		
Potassium (3.6 - 5.1 mmol/L)			4.9		
Chloride (98 - 107 mmol/L)			109 H		
Carbon Dioxide (22 - 32 mmol/L)			29		
BUN (8 - 21 mg/dL)			28 H		
Creatinine (0.44 - 1.03 mg/dL)			2.79 H		
Estimated GFR			16.8		
Glucose (70 - 110 mg/dL)			122 H		
POC Glucose (70 - 110 mg/dL)	199 H	171 H			274 H
Calcium (8.9 - 10.3 mg/dL)			8.5 L		
Phosphorus (2.4 - 4.7 mg/dL)			5.5 H		
Magnesium (1.6 - 2.4 mg/dL)				2.4	
Albumin (3.5 - 4.8 g/dL)			2.3 L		
Hematology					
WBC (5.0 - 9.5 K/mm3)			7.8		
RBC (3.70 - 5.50 M/uL)			4.44		

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Hgb (12.0 - 16.0 g/dL)			13.4
Hct (37.0 - 47.0 %)			39.7
MCV (80.0 - 99.0 fl)			89.5
MCH (27.0 - 33.0 pg)			30.2
MCHC (31.8 - 36.2 g/dL)			33.8
RDW (10.0 - 16.4 %)			17.2 H
Plt Count (140 - 450 K/mm3)			200
MPV (7.5 - 10.5 fl)			11.4 H
Neut % (37 - 80 %)			60.3
Lymph % (10.0 - 50.0 %)			22.5
Mono % (<12.0 %)			12.3 H
Eos % (<7.0 %)			4.1
Baso % (<2.5 %)			0.8
Absolute Neutrophils (2.40 - 7.56 K/uL)			4.68
Absolute Lymphocytes (0.96 - 4.75 K/uL)			1.74
Absolute Monocytes (0.10 - 1.00 K/uL)			0.96
Absolute Eosinophils (0.00 - 0.45 K/uL)			0.32
Absolute Basophils (0.00 - 0.20 K/uL)			0.06

	05/15 1725
Chemistry	
POC Glucose (70 - 110 mg/dL)	177 H

Test results personally reviewed & interpreted? Yes
Consults reviewed and discussed Nephrologist
Medical records reviewed Yes

Medications

Allergies

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Simvastatin 20 mg HS PO
Calcium Acetate 667 mg WM PO (CKD)

Exam

Date 05/16/12

General Appearance Alert, Oriented X3, Cooperative, No Acute Distress

HEENT Atraumatic, PERRLA, EOMI, Mucous Membr. moist/pink

Respiratory Clear to auscultation, Normal air movement

Neck Supple, No JVD, No thyromegaly, +2 Carotid Pulse wo Bruit, No Lymphadenopathy

Cardiovascular Regular, No murmur, No rub, No gallop, No JVD

Abdomen Normal Bowel Sounds, Soft, No Tenderness, No Hepatosplenomegaly, No Masses

Extremities severe pain upon palpating the left shin, ?ankle pain upon ROM and swelling over entire

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long term placement as well. DPOA is aware.

Chronic Problems:

Cellulitis and abscess of leg

Congestive heart failure

Diabetes mellitus type 2

Essential hypertension

Hyperglycemia

Daily plan discussed with- Patient/family, Nurse

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