

6-9-13

Lodi Memorial Hospital

Progress Note

Date 06/06/13
Hlaing, Min M MD - HOSP

M053082
PARVIN, MARY JEAN
03/16/43 70

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Vancomycin HCl 1000 mg PROTOCOL IV (CKD)
 Sodium Chloride 250 ml
 Furosemide 40 mg Q6 IV (CKD)
 Potassium Chloride 40 meq PROTOCOL PRN PO
 Potassium Chloride 20 meq PROTOCOL PRN PO
 Potassium Chloride 10 meq PROTOCOL PRN PO
 Atorvastatin Calcium 20 mg HS PO
 Clonidine 0.2 mg HS PO
 Carvedilol 12.5 mg BID PO
 Famotidine 20 mg BID PO
 Heparin Sodium (Porcine) 5000 unit TID SUB-Q
 Insulin Glargine 25 unit AM SUB-Q
 Aspirin 81 mg DAILY PO
 Escitalopram Oxalate 10 mg DAILY PO
 Isosorbide Mononitrate 30 mg DAILY PO
 Metolazone 2.5 mg DAILY PO
 Telmisartan 80 mg DAILY PO
 Ceftriaxone Sodium 1000 mg Q24H IV
 Sodium Chloride 50 ml
 Insulin Glargine 15 unit HS SUB-Q
 Levothyroxine Sodium 125 mcg DAILY AC PO

Date 06/06/13

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

HEENT Atraumatic, PERRLA

Respiratory Crackles

Neck Supple, No JVD, No thyromegaly

Cardiovascular Regular, No murmur, No rub

Abdomen Normal Bowel Sounds, Soft

Extremities No Clubbing, No Cyanosis, 1 + edema

Skin bilateral lower ext cellulitis and redness

Neurological No Focal Deficits

Pain (1-10): 0 No Pain

Oral Intake % 100

Activity level: Bedrest - immobile

Foley? Yes

Date foley placed 06/04/13

Last BM 06/05/13

Pressure ulcer? No

Isolation? Yes

Reason- MRSA HX

Assessment/Plan

Problems & Plan

Bilateral lower extremity cellulitis.

much improved.

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