

Olathe Health Internal Medicine

20805 W. 151st Street Suite 224 Olathe, KS 66061-

Patient: **PRICE JR, THOMAS J**

DOB: 2/7/1936

Admit Age: 87 years

Gender: Male

MRN/A#: OMSI_3937778 / 502490920

Location: Internal Medicine; Room 7

Physician: Schermoly, Martin J MD

Admit Dt: 3/10/2023

Disch Dt: 3/10/2023

Prnt Dt/Tm 6/7/2023 14:01 CDT

Documents

Document	Author/Signed Date	Date of Service	Document Status
Clinic Visit Summary	Schermoly, Martin J MD (3/10/2023 15:09 CST)	3/10/2023 14:44 CST	Auth (Verified)

PRICE JR, THOMAS J

DOB: 02/07/1936

MRN: OMSI_3937778

Visit Date: 03/10/2023

Ambulatory Visit Instructions

Your Diagnosis

Type 2 diabetes mellitus with diabetic polyneuropathy E11.42
HTN - Hypertension I10
Hyperlipidemia E78.5
Dementia F03.90
Atrial fibrillation I48.91
BPH - Benign prostatic hypertrophy N40.0

Discharge Vitals

Temperature (Oral)

36.6 °C

Heart Rate (Peripheral)

75

Blood Pressure

126/80

Weight (Dosing)

88.4 kg

Tests Performed

CBC with Automated Diff -- **Results Pending** --

Comprehensive Metabolic Panel -- **Results Pending** --

HGB A1C -- **Results Pending** --

Microalbumin/Creatinine Ratio, Urine -- **Results Pending** --

You will be contacted with your results.

This Is Your Medications List

Home Medications (11) Active

glimepiride 2 mg oral tablet 2 Tablet, PO, DAILY

Glucose Monitor - One Touch Verio See Instructions

LANCET ONE TCH ULTRA SOFT See Instructions

lisinopril 20 mg oral tablet 1 Tablet, PO, DAILY

Metamucil 1 Packet, PO, DAILY

One Touch Ultra 2 lancets See Instructions

ONE TOUCH Ultra 2 TEST STRIPS See Instructions

OneTouch Ultra In Vitro Strip See Instructions

tamsulosin 0.4 mg oral capsule 1 Capsule, PO, DAILY

Vitamin B-12 1 Tablet, PO, DAILY

Xarelto 15 mg oral tablet 15 mg = 1 TAB, PO, DAILY

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What to do next

You Need to Schedule the Following Appointments

Follow Up with Return to clinic

When: In 6 months

Why: annual

Patient Feedback

At Olathe Health, it is our top priority to provide high quality patient care. To ensure our standards are met, you may receive a survey via text message or email. We would appreciate you taking 5 minutes to complete this survey as we strive to ensure that you are satisfied with every visit. Thank you in advance for taking the time to provide our teams with feedback on your experience!

Text Message: From the number 91994 with the survey link.

Email: From Olathe Health (noreply@patients.pgssurveying.com) with the subject line "Olathe Health would like your feedback."

Olathe Health Patient Portal

Send secure messages to your healthcare team, view your test results, renew your prescription(s), schedule an appointment, and more. Enroll with your care team today. You may also visit www.olathehealth.org/patients-and-visitors/patient-portal/ for more information.