

<b>Vital Signs:</b> Temperature: 37	BP: 130/90	Pulse: 88	CHECK-UP : Trn. 05:51PM	Check-In: 6:15PM	Check-Out:
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**Significant Signs:** S1 S2 NO ADDED SOUND  
CHEST CLEAR.

LMP:

**Diagnosis:** D MELLITIS.

Management:	MEDICATION GIVEN.
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**ICD Princ. Code:** E11.42 Type 2 diabetes mellitus with diabetic polyneuropathy

**ICD 2nd Code:**

☐ Chronic☐ Congenital☐ RTA

**ICD 3rd Code:**

☐ Work Related☐ Vaccination☒ Check-Up

**ICD 4th Code:**

☐ Psychiatric☐ Infertility☐ Pregnancy

Trn. Type	Date	Code	Service Description + Dosage
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☐ Cleaning☐ Sports Related☐ Orthodontics

## PHARMACY

Quantity

Requisition	08/10/2020	GEN02510	INSULIN, GLARGINE 100IU/ML INJ S/C	50	IU	OD Cutaneous	Every 24 hours For 30 Days	1
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Requisition	08/10/2020	GEN025	INSULIN, GLARGINE 100U/ML INS 30	50	IU	OD	Cutaneous	Every 24 hours For 30 Days	1
Requisition	08/10/2020	00007863	NOVOPEN4 (Nordisk Insulin)	30	IU	IN	LUNCH	20 IU AT DINNER Cutaneous Every twelve hours For 30 Days	1

Requisition	08/10/2020	GEN02630	LIRAGLUTIDE 6MG/ML 3ML INJ 1/5 IU	OD Cutaneous Every 24 hours For 30 Days	1
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Requisition	08/10/2020	GEN02501	INSULIN ASPART INJ 30 IU IN MORNING 20 IU IN EVENING PL CANCEL NOVO RAPID AND GIVE ASPART INSULIN Cutaneous Every twelve hours For 30 Days	1
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Transaction	08/10/2020	00003676	NOVORAPID 30FLEXPEN Pen	1
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Transaction	08/10/2020	00005245	NOVORAPID 500 EXACTENT 500	1
Transaction	08/10/2020	00005245	LANTUS 100 I.U.Solostar 5Disp pen/Bx	1

Transaction	08/10/2020	00000210	ENTYCO 100 MG>Selectal 32Disp/pen/Box	1
Transaction	08/10/2020	00009506	VICTOZA 6MG/ML 3ML 2Pen/Box	1