

[REDACTED], MD, FRCPC

Endocrinology

Ashgrove Medical Centre
[REDACTED]
[REDACTED]
[REDACTED]

330 Steels Avenue, West Unit C2
Thornhill, Ontario L4J 6W9
[REDACTED]
[REDACTED]

October 28th 2004

Dr. C. [REDACTED]
[REDACTED]
[REDACTED]

Re: [REDACTED]

OHIP: [REDACTED]

Dear Dr. F [REDACTED]:

I had the pleasure of seeing [REDACTED] in follow-up. As you know, she is a pleasant woman with diabetes and hyperlipidemia as well as obesity. **She is being followed by Dr. Poon and has lost about 72 pounds.** She is currently on Novolin 30:70, 5 unites in the morning and 5 units before supper. She is also on Metformin 1 gm b.i.d. With respect to her hyperlipidemia, she is on Lipitor 10 mg. She also takes Altace, Lasix, Lozide and atenolol. She has been seen recently for her eyes and although she has diabetic retinopathy, this is stable. She was found to have a cataract. Her most recent sugars have shown that they are a bit high in the morning as she has not been as compliant as she had been with her diet and they are ranging between 8 and 9. In the afternoon, her glucose is well controlled.

Physical Examination revealed:

Weight was 306 pounds.

H&N – Thyroid gland was grossly normal.

CHEST – clear.

CV – Heart sounds were normal.

FEET

Peripheral pulses – Palpable.

Sensation – Diminished in her toes.

Skin – Slightly dry without cracking of the skin.

Labs:

Most recent blood test shows:

Hbg A1C

0.067

LDL	2.240
HDL	1.570
Triglycerides	1.610
Microalbumin to creatinine ratio	0.500

Impression and Plan

██████████ has done extremely well with weight loss. She has been able to reduce her insulin to 5 units b.i.d. I am sure she will be successful to lose more weight and come off insulin completely. I have suggested that she try to increase her social activity so that she will not have as much emotional eating. As she is doing well, I will see her in four months time.

Thank you for asking me to participate in the care of your patient.

Sincerely,

██████████, MD, FRCPC

DS/jw
Copy to chart

Dr. Poon