

# **Telemedicine Clinic**

## *Rattanakiri*

### **Referral Hospital**

### **December 2010**

Report and photos compiled by Rithy Chau and Sovann Peng, SHCH Telemedicine

On Tuesday December 14 and Wednesday December 15, 2010, Rattanakiri Referral Hospital (RRH) staffs began their TM clinic. Patients 5 new cases were examined, and the data were transcribed along with digital pictures of the patients, then transmitted and received replies from their TM partners in Boston and Phnom Penh.

The following day, Thursday December 16, 2009, the TM clinic opened again to receive the same patients and other follow-up patients for further evaluation, treatment and management. Finally, the data for treatment and management would then be transcribed and transmitted to Nurse Peng Sovann at SHCH who compiled and sent for website publishing.

The followings detail e-mails and replies to the medical inquiries communicated between TM clinic at RRH and their TM partners in Phnom Penh and Boston:

From: **Hospital Rattanakiri Referral** <kirihospital@gmail.com>

Date: Thu, Dec 9, 2010 at 4:51 PM

Subject: December TM clinic at Ratanakiri Referral Hospital

To: Chau Rithy <chaurithy@gmail.com>, Joseph Kvedar <jkvedar@partners.org>, "Paul J. M.D. Heinzelmann" <paul.heinzelmann@gmail.com>, Brian Hammond <bhammond@partners.org>, "Kathleen M. Kelleher" <kfiamma@partners.org>, Kruy Lim <kruylim@yahoo.com>, Cornelia Haener <corneliahaener@sihosp.org>

Cc: Bernie Krisher <berkrish@gmail.com>, Ed & Laurie Bachrach <lauriebachrach@yahoo.com>, Noun SoThero <thero@cambodiadaily.com>

Dear All,

Please be informed that the next TM clinic at Rattanakiri Referral Hospital will be held on Wednesday, December 15, 2010 beginning at 8:00am local time for one full day. We expect to enter and transmit the patient data to those of you at SHCH and at Partner in Boston that evening.

Please try to respond before noontime the following day, Thursday, December 16, 2010. The patients will be asked to return to the hospital that afternoon on Thursday to receive treatment along with a follow up plan or referral.

Thank you very much for your cooperation and service.  
Best regards,

Channarith Ly

From: **Kiri Hospital Telemedicine** <kirihospital@gmail.com>

Date: Wed, Dec 15, 2010 at 3:32 PM

Subject: Rattanakiri TM Clinic December 2010, Case #1, AS#RK00355, 37M

To: "Choy, Garry, M.D." <GCHOY@partners.org>, rithychau@sihosp.org, Lim kruy <kruylim@yahoo.com>, kfiamma@partners.org, Paul Heinzelmann <paul.heinzelmann@gmail.com>, jkvedar@partners.org

Cc: bernie@media.mit.edu, thero@cambodiadaily.com, "Lauriebachrach@Yahoo. Com" <lauriebachrach@yahoo.com>

Dear all

We have 5 cases for Rattanakiri TM Clinic December 2010. This is case number 1, AS#RK00355, 37M and photos.

Best regards,

MA Vanthan/Polo

**Rattanakiri Provincial Hospital Telemedicine Clinic  
with  
Sihanouk Hospital Center of HOPE and Partners in Telemedicine**



**Patient:** AS#RK00355, 37M (Village I)

**Chief Complaint:** Dyspnea and chest tightness x 2 months

**HPI:** 37F presented with symptoms of chest tightness, fatigue, and dizziness. These symptoms appeared with exertion, he went to private clinic and was told he had heart disease then he was treated with Digoxin 0.25mg 1t po qd and other one medicine (unknown name) 1/2t po qd. Two weeks later, his condition became worse with face swelling in the morning, cough, and chest tightness.

The chest tightness got worse with lying flat supine, and got better with elevated head and lying on right lateral.

**PMH/SH:** Hep B diagnosed in the past 4y, past sore throat but unknown streptococcal infection

**Family Hx:** None

**Social Hx:** 3 children, casually alcohol drinking, no cig smoking

**Medication:** None

**Allergies:** NKDA

**ROS:** Unremarkable

**PE:**

**Vital Signs:** BP: 103/79      P: 91      R: 22      T: 37      Wt: 62kg

**General:** Look stable

**HEENT:** No oropharyngeal lesion, pink conjunctiva, no thyroid enlargement, no lymph node palpable, no JVD

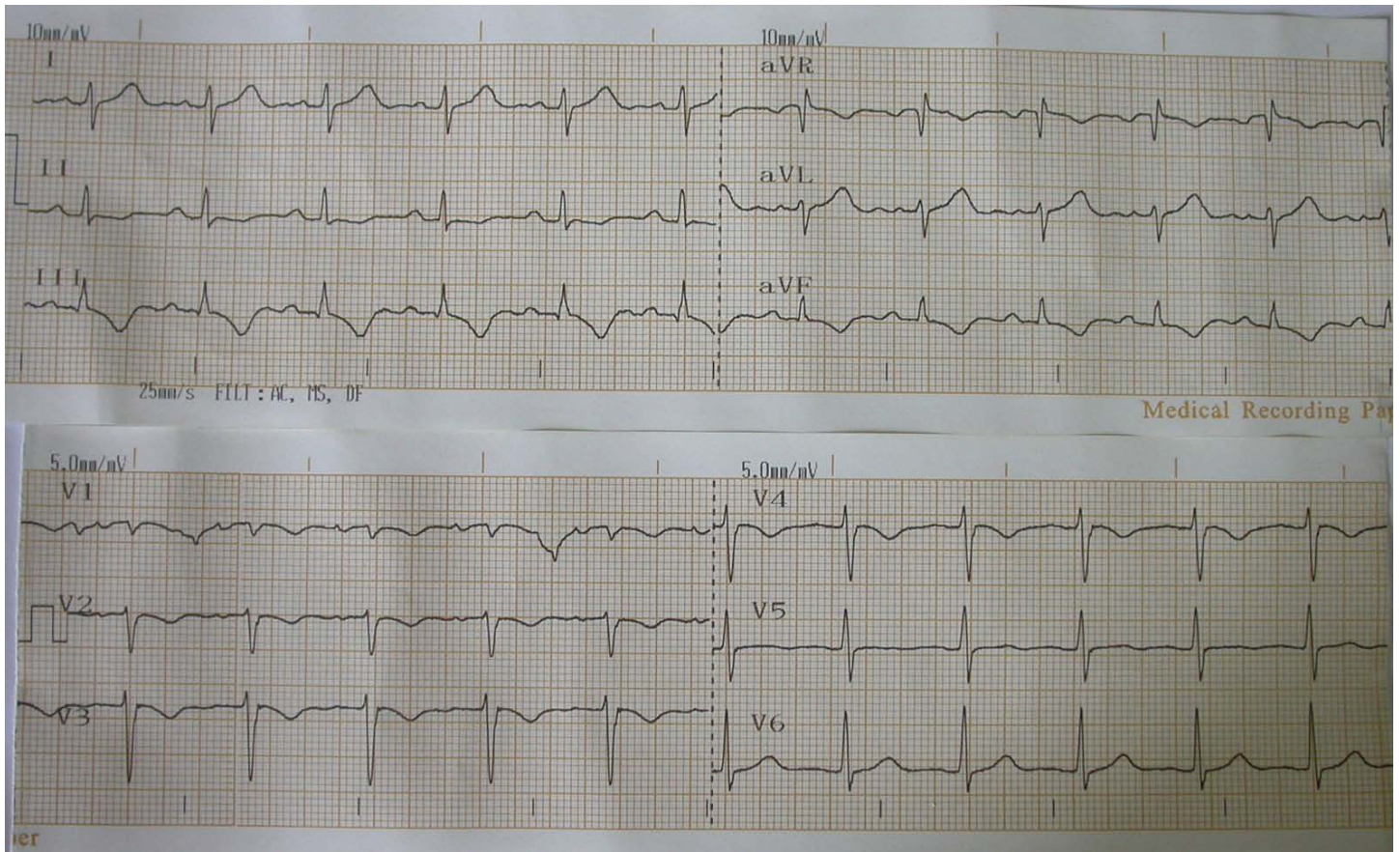
**Chest:** CTA bilaterally, no rales, no rhonchi; H RRR, +2 systolic crescendo murmur, loudest at apex

**Abdomen:** Soft, no tender, no distension, (+) BS, no HSM, no surgical scar, no abdominal bruit

**Extremities/Skin:** No leg edema, no lesion, palpable dorsalis pedis and posterior tibial pulse

**MS/Neuro:** MS +5/5, motor and sensory intact, DTRs +2/4, normal gait





**Lab/Study:**

Abdominal ultrasound on November 20, 2010 with normal conclusion  
 EKG and chest x-ray attached

**Assessment:**

1. Dilated cardiomyopathy??
2. VHD (MR/MS?)

**Plan:**

1. Digoxin 0.25mg 1t po qd
2. Furosemide 40mg 1/2t po qd for 2w
3. Draw blood for CBC, Lyte, Bun, Creat, Gluc, Tot chole, TG at SHCH
4. Send to Phnom Penh for 2D echo of the heart

**Comments/Notes: Do you agree with my assessment and plan?**

**Examined by: Nurse Sovann Peng**

**Date: December 15, 2010**

Please send all replies to [kirihospital@gmail.com](mailto:kirihospital@gmail.com) and cc: to [rithychau@sihosp.org](mailto:rithychau@sihosp.org)

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No answer replied

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From: **Kiri Hospital Telemedicine** <kirihospital@gmail.com>

Date: Wed, Dec 15, 2010 at 3:39 PM

Subject: Rattanaki TM Clinic case #2, MS#RK00358, 37F

To: Cornelia Haener <corneliahaener@sihosp.org>, Paul Heinzelmann <paul.heinzelmann@gmail.com>, jkvedar@partners.org, Lim kroy <kruylim@yahoo.com>, kfiamma@partners.org, rithychau@sihosp.org

Cc: bernie@media.mit.edu, thero@cambodiadaily.com, "Lauriebachrach@Yahoo. Com" <lauriebachrach@yahoo.com>

Dear all

this is case #2, MS#RK00358, 37F and three photos.

Best Regards,  
Vanthan/Polo

**Rattanakiri Provincial Hospital Telemedicine Clinic  
with  
Sihanouk Hospital Center of HOPE and Partners in Telemedicine**



**Patient:** MS#RK00358, 37F (Village VI, LSB)

**Chief Complaint:** Neck mass x 8y

**HPI:** 37F presented with a thumb size anterior neck mass without any symptoms and in this year, she noticed the mass increased in size and presented with symptoms of cold intolerance, dizziness, fatigue, dyspnea and weight loss. She consulted with private clinic, neck mass U/S done and advised to seek treatment for goiter. She denied of heat intolerance, tremor, hair loss, and skin change.

**PMH/SH:** Unremarkable

**Family Hx:** Father with goiter

**Social Hx:** 8 children, heavy cig smoking, casually alcohol driking

**Medication:** None

**Allergies:** NKDA

**ROS:** Unremarkable

**PE:**

**Vital Signs:** BP: 113/67      P: 67      R: 20      T: 37      Wt: 50kg

**General:** Look stable

**HEENT:** No oropharyngeal lesion, pink conjunctiva, thyroid enlargement about 5 x 6cm, soft, mobile on swallowing, no tender, no bruit, no lymph node palpable

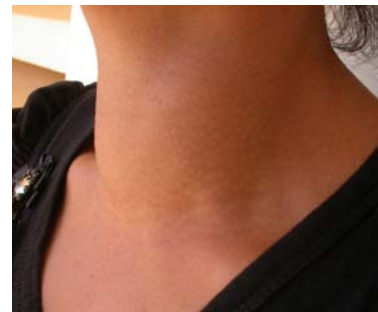


**Chest:** CTA bilaterally, no rales, no rhonchi; H RRR, no murmur

**Abdomen:** Soft, no tender, no distension, (+) BS, no HSM, no surgical scar

**Extremities/Skin:** No leg edema, no lesion

**MS/Neuro:** MS +5/5, motor and sensory intact, DTRs +2/4, normal gait



**Lab/Study:** None

**Assessment:**

1. Diffuse goiter
2. Thyroid dysfunction

**Plan:**

1. Draw blood for CBC, TSH and Free T4 at SHCH

**Comments/Notes:** Do you agree with my assessment and plan?

**Examined by:** Nurse Sovann Peng

**Date:** December 15, 2010

Please send all replies to [kirihospital@gmail.com](mailto:kirihospital@gmail.com) and cc: to [rithychau@sihosp.org](mailto:rithychau@sihosp.org)

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From: **Cornelia Haener** <corneliahaener@sihosp.org>

Date: Wed, Dec 15, 2010 at 9:04 PM

Subject: RE: Rattanaki TM Clinic case #2, MS#RK00358, 37F

To: Kiri Hospital Telemedicine <kirihospital@gmail.com>, Paul Heinzelmann <paul.heinzelmann@gmail.com>, jkvedar@partners.org, Lim kruy <kruylim@yahoo.com>, kfiamma@partners.org, rithychau@sihosp.org

Cc: bernie@media.mit.edu, thero@cambodiadaily.com, "Lauriebachrach@Yahoo. Com" <lauriebachrach@yahoo.com>

Dear all,

I agree with your assessment and plan.

Kind regards  
Dr. Cornelia

From: **Kiri Hospital Telemedicine** <kirihospital@gmail.com>  
Date: Wed, Dec 15, 2010 at 3:46 PM  
Subject: Rattanakiri TM Clinic, case #3, NN#RK00357, 65F  
To: rithychau@sihosp.org, Lim kroy <kroylim@yahoo.com>, Paul Heinzelmann <paul.heinzelmann@gmail.com>, jkvedar@partners.org, kfiamma@partners.org  
Cc: bernie@media.mit.edu, thero@cambodiadaily.com, "Lauriebachrach@Yahoo. Com" <lauriebachrach@yahoo.com>

Dear all

This is case #3, NN#RK00357, 65F and Photo

Best Regards,  
Vanthan/Polo

**Rattanakiri Provincial Hospital Telemedicine Clinic  
with  
Sihanouk Hospital Center of HOPE and Partners in Telemedicine**



**Patient:** NN#RK00357, 65F (Village IV, Kachagn)

**Chief Complaint:** Dizziness x 1y

**HPI:** 65F, farmer, presented with symptoms of dizziness, HA, neck tension, and blurred vision. The dizziness frequently attacked her during exertion and better with resting. She went to see doctor in private clinic and treated with some medicine (unknown name) and got better for a few weeks then the symptoms appeared again. She denied of cough, dyspnea, fever, CP, oliguria, and hematuria, leg edema.

**PMH/SH:** Unremarkable

**Family Hx:** None

**Social Hx:** Tobacco chewing, no alcohol drinking

**Medication:** None

**Allergies:** NKDA

**ROS:** 20y post menopausal, epigastric burning pain, worse with full eating, better with antacid, no radiation

**PE:**

**Vital Signs:** BP: 152/94      P: 77      R: 20      T: 37      Wt: 52kg

**General:** Look stable

**HEENT:** No oropharyngeal lesion, pink conjunctiva, no thyroid enlargement, no lymph node palpable, no JVD

**Chest:** CTA bilaterally, no rales, no rhonchi; H RRR, no murmur

**Abdomen:** Soft, no tender, no distension, (+) BS, no HSM, no surgical scar, no abdominal bruit

**Extremities/Skin:** No leg edema, palpable dorsalis pedis and posterior tibial pulse

**MS/Neuro:** MS +5/5, motor and sensory intact, DTRs +2/4, normal gait

**Lab/Study:**

FBS: 96mg/dl; U/A normal

**Assessment:**

1. HTN
2. Dyspepsia

**Plan:**

1. HCTZ 50mg 1/2t po qd
2. Famotidine 40mg 1t po qhs
3. Mebendazole 100mg 5t po qhs once
4. Do regular exercise
5. Draw blood for CBC, Lyte, Bun, Creat, Gluc, Tot chole, TG at SHCH

**Comments/Notes: Do you agree with my assessment and plan?**

**Examined by: Nurse Sovann Peng**

**Date: December 15, 2010**

Please send all replies to [kirihospital@gmail.com](mailto:kirihospital@gmail.com) and cc: to [rithychau@sihosp.org](mailto:rithychau@sihosp.org)

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No answer replied

From: **Kiri Hospital Telemedicine** <kirihospital@gmail.com>

Date: Wed, Dec 15, 2010 at 3:50 PM

Subject: Rattankiri TM Clinic, case#4, NS#RK00356, 60F

To: rithychau@sihosp.org, Lim kruy <kruylim@yahoo.com>, Paul Heinzelmann <paul.heinzelmann@gmail.com>, kfiamma@partners.org, jkvedar@partners.org

Cc: bernie@media.mit.edu, thero@cambodiadaily.com, "Lauriebachrach@Yahoo. Com" <lauriebachrach@yahoo.com>

Dear all

This is case #4, NS#RK00356, 60F and one photo.

Best Regards,  
Vanthan/Polo

**Rattanakiri Provincial Hospital Telemedicine Clinic  
with  
Sihanouk Hospital Center of HOPE and Partners in Telemedicine**



**Patient:** NS#RK00356, 60F (Village I, Kachagn)

**Chief Complaint:** Blurred vision x 3w

**HPI:** 60F with past 8y history of DMII, HTN and has been seen in Phnom Penh. Now she has been treated with Glibenclamide 5mg 2t po bid, Metformin 500mg 1t po bid, Captopril 25mg 2t po bid, HCTZ 50mg 1/2t po qd, ASA 81mg 1t po qd, and Fenofibrate 100mg 1t po qhs. She has become stable with medicine and in these two weeks, she has presented with dry eye and blurred vision. She denied of fever, cough, dyspnea, palpitation, CP, Oliguria, dysuria, hematuria, stool with blood/mucus and foot wound.

**PMH/SH:** Unremarkable

**Family Hx:** None

**Social Hx:** Casually alcohol drinking, no cig smoking

**Medication:**

1. Glibenclamide 5mg 2t po bid
2. Metformin 500mg 1t po bid
3. Captopril 25mg 2t po bid
4. HCTZ 50mg 1/2t po qd
5. ASA 81mg 1t po qd
6. Fenofibrate 100mg 1t po qhs
7. Amitriptylin 25mg 1/2t po qhs

**Allergies:** NKDA

**ROS:** Unremarkable

**PE:**

**Vital Signs:** BP: 133/83      P: 86      R: 20      T: 37      Wt: 54kg

**General:** Look stable

**HEENT:** No oropharyngeal lesion, pink conjunctiva, no thyroid enlargement, no lymph node palpable, no JVD, fundi exam without exudates, hemorrhage or palpilledema

**Chest:** CTA bilaterally, no rales, no rhonchi; H RRR, no murmur

**Abdomen:** Soft, no tender, no distension, (+) BS, no HSM, no surgical scar, no abdominal bruit

**Extremities/Skin:** No leg edema, no lesion, palpable dorsalis pedis and posterior tibial pulse, no foot wound



**MS/Neuro:** MS +5/5, motor and sensory intact, DTRs +2/4, normal gait

**Lab/Study:**

RBS: 305mg/dl; U/A gluc 4+, neg prot, neg leuk, neg ketone  
FBS: 86mg/dl

**Assessment:**

1. DMII with PNP
2. HTN

**Plan:**

1. Glibenclamide 5mg 2t po bid
2. Metformin 500mg 1t po bid
3. Captopril 25mg 2t po bid
4. HCTZ 50mg 1/2t po qd
5. ASA 81mg 1t po qd
6. Fenofibrate 100mg 1t po qhs
7. Amitriptylin 25mg 1/2t po qhs
8. Review on diabetic diet, do regular exercise and foot care
9. Draw blood for CBC, Lyte, Bun, Creat, Gluc, Tot chole, TG, HbA1C at SHCH

**Comments/Notes: Do you agree with my assessment and plan?**

**Examined by: Nurse Sovann Peng**

**Date: December 15, 2010**

Please send all replies to [kirihospital@gmail.com](mailto:kirihospital@gmail.com) and cc: to [rithychau@sihosp.org](mailto:rithychau@sihosp.org)

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No answer replied

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From: **Kiri Hospital Telemedicine** <kirihospital@gmail.com>

Date: Wed, Dec 15, 2010 at 4:00 PM

Subject: Rattanakiri TM Clinic December 2010, Case #5, SN#RK00354, 34F

To: "Choy, Garry,M.D." <GCHOY@partners.org>, rithychau@sihosp.org, Lim krui <kruylim@yahoo.com>,

Paul Heinzelmann <paul.heinzelmann@gmail.com>, jkvedar@partners.org, kfiamma@partners.org

Cc: bernie@media.mit.edu, thero@cambodiadaily.com, "Lauriebachrach@Yahoo. Com" <lauriebachrach@yahoo.com>

Dear all,

This is the last case for Rattanakiri TM Clinic December 2010. Case #5, SN#RK00354, 34F and photos.

Please reply to the cases before Thursday afternoon because the patients will come to get treatment at that time.

Thank you very much for your cooperation and support in this project.

Best regards,  
Vanthan/Polo

**Rattanakiri Provincial Hospital Telemedicine Clinic**

**with**  
**Sihanouk Hospital Center of HOPE and Partners in Telemedicine**



**Patient:** SN#RK00354, 34F (Bey Srok, Lumphat)

**Chief Complaint:** Chest tightness x 1 year

**HPI:** 34F, farmer, presented with symptoms of chest tightness, dyspnea, neck tension, leg tension. The chest tightness got worse with stress and exertion and radiated to the left shoulder and associated with dyspnea and diaphoresis. She was brought to provincial hospital and was advised to seek care at Phnom Penh. She went to Phnom Penh and after examination done, she was told she has heart disease then treated with Coversyl 5mg 1/2t po qd, Carvedilol 0.12mg 1/2t po qd, Trimebutine 100mg 2t po bid and Clopidogrel. She has been controlled with medicine. Because she has run out of medicine for one month and was unable to buy medicine, her symptoms of chest tightness appeared back. She denied of fever, cough, orthopnea, leg edema, oliguria, hematuria.

**PMH/SH:** Unremarkable

**Family Hx:** None

**Social Hx:** 4 children, drinking alcohol with traditional medicine 20L/delivery, no cig smoking

**Medication:** None

**Allergies:** NKDA

**ROS:** Epigastric burning pain, burping with sour taste, radiate to the left scapula and left shoulder

**PE:**

**Vital Signs:** BP: 111/79      P: 86      R: 22      T: 37      Wt: 63kg

**General:** Look stable

**HEENT:** No oropharyngeal lesion, pink conjunctiva, no thyroid enlargement, no lymph node palpable, no JVD

**Chest:** CTA bilaterally, no rales, no rhonchi; H RRR, no murmur

**Abdomen:** Soft, no tender, no distension, (+) BS, no HSM, no surgical scar, no abdominal bruit

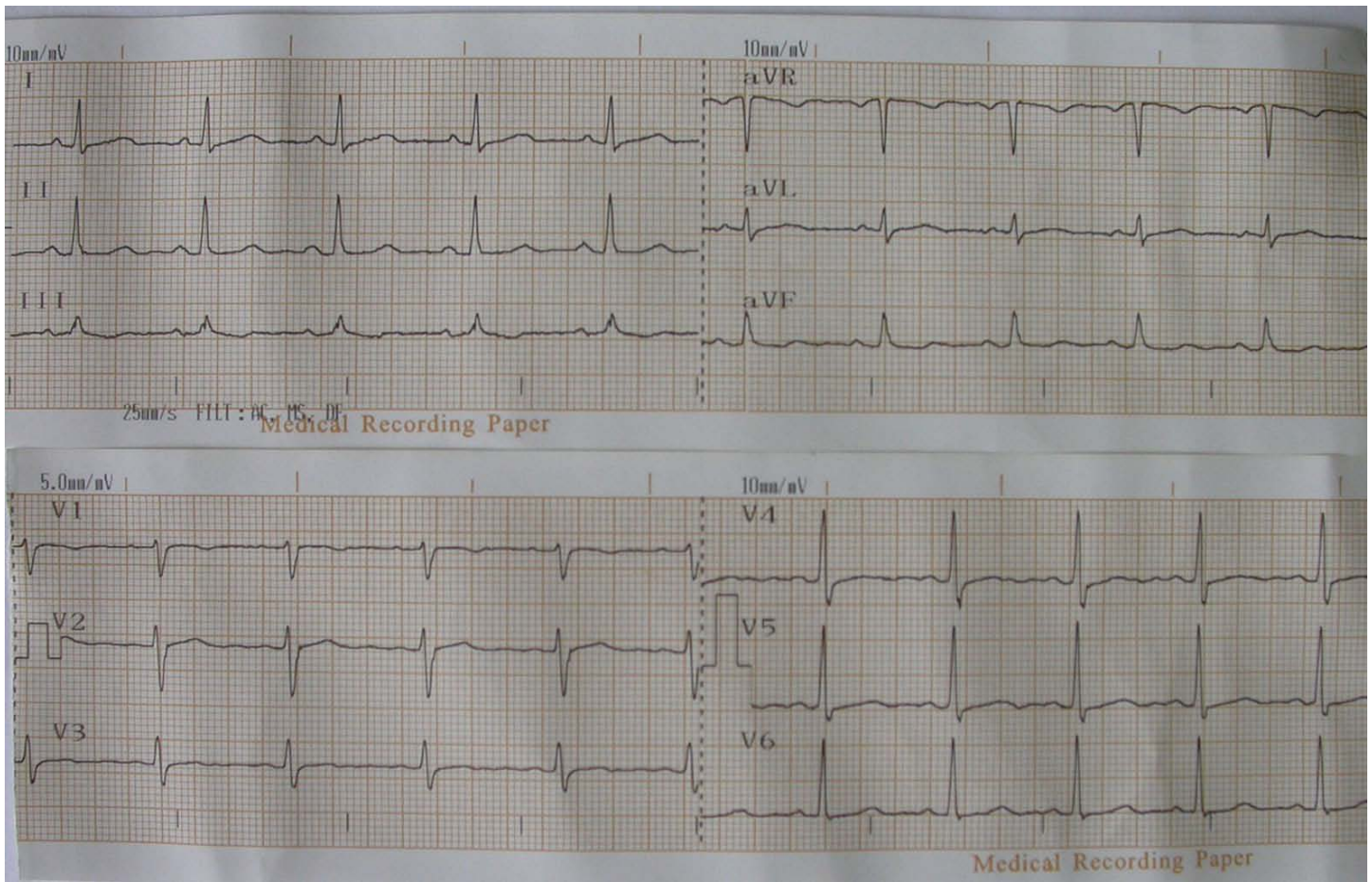
**Extremities/Skin:** No leg edema, no lesion, palpable dorsalis pedis and posterior tibial pulse

**MS/Neuro:** MS +5/5, motor and sensory intact, DTRs +2/4, normal gait

**Lab/Study:**

CXR and EKG attached





**Assessment:**

1. Cardiomyopathy?
2. GERD

**Plan:**

1. Famotidine 40mg 1t po qhs for one month
2. Mebendazole 100mg 5t po qhs once
3. GERD prevention education
4. Draw blood for CBC, Lyte, Bun, Creat, Gluc, Tot chole, TG at SHCH
5. Send to Phnom Penh for 2D echo of the heart

**Comments/Notes: Do you agree with my assessment and plan?**

**Examined by: Nurse Sovann Peng**

**Date: December 15, 2010**

Please send all replies to [kirihospital@gmail.com](mailto:kirihospital@gmail.com) and cc: to [rithychau@sihosp.org](mailto:rithychau@sihosp.org)

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No answer replied

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# Thursday, December 16, 2010

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## Follow-up Report for Rattanakiri TM Clinic

There were 5 new patients seen during this month TM clinic at Rattanakiri Referral Hospital (RRH). The data of 5 cases was transmitted and received replies from both Phnom Penh and Boston, and other 13 patients came for follow up and refill medication only. Per advice sent by Partners in Boston and Phnom Penh Sihanouk Hospital Center of HOPE as well as advices from PA Rithy on site, the following patients were managed and treated per local staff:

[Please note that in general the practice of dispensing medications at RRH for all patients is usually limited to a maximum of 7 days treatment with expectation of patients to return for another week of supplies if needed be. This practice allows clinicians to monitor patient compliance to taking medications and to follow up on drug side effects, changing of medications, new arising symptoms especially in patients who live away from the town of Banlung and/or illiterate. Nearly all medications and some lab tests not available/done at RRH are provided by SHCH to TM patients at no cost]

### Treatment Plan for Rattanakiri TM Clinic December 2010

#### 1. AS#RK00355, 37M (Village I)

##### Diagnosis:

1. MS/MR
2. Cardiomegaly

**Treatment:** (Patient come to Phnom Penh and seen by Doctor at SHCH with 2D echo of the heart done)

1. Captopril 25mg 1/4t po bid
2. Furosemide 40mg 1/2t po bid
3. Atenolol 50mg 1/8t po qd
4. Spironolactone 25mg 1t po qd
5. MTV 1t po qd

##### Lab result on December 16, 2010

WBC	=7.1	[4 - 11x10 <sup>9</sup> /L]	Na	=13	[135 - 145]
RBC	=6.0	[4.6 - 6.0x10 <sup>12</sup> /L]	K	=3.8	[3.5 - 5.0]
Hb	=12.8	[14.0 - 16.0g/dL]	Cl	=110	[95 - 110]
Ht	=43	[42 - 52%]	BUN	=1.3	[0.8 - 3.9]
MCV	=72	[80 - 100fl]	Creat	=106	[53 - 97]
MCH	=21	[25 - 35pg]	Gluc	=5.3	[4.2 - 6.4]
MHCH	=30	[30 - 37%]	T. Chol	=3.5	[<5.7]
Plt	=90	[150 - 450x10 <sup>9</sup> /L]	TG	=1.1	[<1.7]
Lym	=3.3	[1.0 - 4.0x10 <sup>9</sup> /L]			

#### 2. MS#RK00358, 37F (Village VI, LSB)

##### Diagnosis:

1. Diffuse goiter
2. Thyroid dysfunction

##### Treatment:

1. Draw blood for CBC, TSH and Free T4 at SHCH

##### Lab result on December 16, 2010

WBC	=8.1	[4 - 11x10 <sup>9</sup> /L]	TSH	=0.49	[0.27 - 4.20]
RBC	=5.1	[3.9 - 5.5x10 <sup>12</sup> /L]	Free T4	=14.97	[12.0 - 22.0]
Hb	=13.3	[12.0 - 15.0g/dL]			
Ht	=42	[35 - 47%]			
MCV	=82	[80 - 100fl]			
MCH	=26	[25 - 35pg]			

MHCH	=32	[30 - 37%]
Plt	=294	[150 - 450x10 <sup>9</sup> /L]
Lym	=2.6	[1.0 - 4.0x10 <sup>9</sup> /L]

### 3. NN#RK00357, 65F (Village IV, Kachagn)

#### Diagnosis:

1. HTN
2. Dyspepsia

#### Treatment:

1. HCTZ 50mg 1/2t po qd (#50)
2. Cimetidine 40mg 1t po qhs (buy)
3. Mebendazole 500mg 1t po qhs once (buy)
4. Do regular exercise
5. Draw blood for CBC, Lyte, Bun, Creat, Gluc, Tot chole, TG at SHCH

#### Lab result on December 16, 2010

WBC	=7.4	[4 - 11x10 <sup>9</sup> /L]	Na	=139	[135 - 145]
RBC	=5.1	[3.9 - 5.5x10 <sup>12</sup> /L]	K	=4.4	[3.5 - 5.0]
Hb	=11.6	[12.0 - 15.0g/dL]	Cl	=113	[95 - 110]
Ht	=39	[35 - 47%]	BUN	=2.2	[0.8 - 3.9]
MCV	=76	[80 - 100fl]	Creat	=87	[44 - 80]
MCH	=23	[25 - 35pg]	Gluc	=4.7	[4.2 - 6.4]
MHCH	=30	[30 - 37%]	T. Chol	=5.1	[<5.7]
Plt	=288	[150 - 450x10 <sup>9</sup> /L]	TG	=3.1	[<1.71]
Lym	=2.2	[1.0 - 4.0x10 <sup>9</sup> /L]			

### 4. NS#RK00356, 60F (Village I, Kachagn)

#### Diagnosis:

1. DMII with PNP
2. HTN

#### Treatment:

1. Glibenclamide 5mg 2t po bid (#400)
2. Metformin 500mg 1t po bid (#200)
3. Captopril 25mg 2t po bid (buy)
4. HCTZ 50mg 1/2t po qd (#50)
5. ASA 81mg 1t po qd (buy)
6. Fenofibrate 100mg 1t po qhs (buy)
7. Amitriptylin 25mg 1/2t po qhs (buy)
8. Review on diabetic diet, do regular exercise and foot care
9. Draw blood for CBC, Lyte, Bun, Creat, Gluc, Tot chole, TG, HbA1C at SHCH

#### Lab result on December 16, 2010

WBC	=7.0	[4 - 11x10 <sup>9</sup> /L]	Na	=139	[135 - 145]
RBC	=4.0	[3.9 - 5.5x10 <sup>12</sup> /L]	K	=4.9	[3.5 - 5.0]
Hb	=10.9	[12.0 - 15.0g/dL]	Cl	=111	[95 - 110]
Ht	=34	[35 - 47%]	BUN	=4.1	[0.8 - 3.9]
MCV	=84	[80 - 100fl]	Creat	=149	[44 - 80]
MCH	=27	[25 - 35pg]	Gluc	=4.7	[4.2 - 6.4]
MHCH	=32	[30 - 37%]	T. Chol	=4.3	[<5.7]
Plt	=240	[150 - 450x10 <sup>9</sup> /L]	TG	=1.6	[<1.71]
Lym	=2.3	[1.0 - 4.0x10 <sup>9</sup> /L]			
HbA1C	=9.5	[4 - 6]			

### 5. SN#RK00354, 34F (Bey Srok, Lumphat)

#### Diagnosis:

1. Cardiomyopathy?
2. GERD

**Treatment:**

1. Cimetidine 200mg 1t po qhs for one month (buy)
2. Mebendazole 500mg 1t po qhs once
3. GERD prevention education
4. Draw blood for CBC, Lyte, Bun, Creat, Gluc, Tot chole, TG at SHCH
5. Send to Phnom Penh for 2D echo of the heart

**Lab result on December 16, 2010**

WBC	=6.3	[4 - 11x10 <sup>9</sup> /L]	Na	=138	[135 - 145]
RBC	=4.5	[3.9 - 5.5x10 <sup>12</sup> /L]	K	=4.3	[3.5 - 5.0]
Hb	=12.5	[12.0 - 15.0g/dL]	Cl	=110	[95 - 110]
Ht	=41	[35 - 47%]	BUN	=1.8	[0.8 - 3.9]
MCV	=91	[80 - 100fl]	Creat	=84	[44 - 80]
MCH	=28	[25 - 35pg]	Gluc	=4.7	[4.2 - 6.4]
MHCH	=31	[30 - 37%]	T. Chol	=5.4	[<5.7]
Plt	=417	[150 - 450x10 <sup>9</sup> /L]	TG	=1.4	[<1.71]
Lym	=2.8	[1.0 - 4.0x10 <sup>9</sup> /L]			
Mxd	=1.4	[0.1 - 1.0x10 <sup>9</sup> /L]			
Neut	=2.1	[1.8 - 7.5x10 <sup>9</sup> /L]			

**Patient who come for follow up and refill medicine****1. NH#RK00010, 55F (Village III)****Diagnosis:**

1. HTN
2. DMII
3. VHD (AI/MR)

**Treatment:**

1. Atenolol 50mg 1t po bid (#200)
2. Chlorpropramide 250mg 1t po bid (buy)
3. HCTZ 50mg 1t po qd (#100)
4. Captopril 25mg 1/2t po bid (buy)
5. Draw blood for CBC, Lyte, BUN, Creat, Gluc, Tot chole, TG and HbA1C at SHCH

**Lab result on December 16, 2010**

WBC	=7.3	[4 - 11x10 <sup>9</sup> /L]	Na	=134	[135 - 145]
RBC	=5.0	[3.9 - 5.5x10 <sup>12</sup> /L]	K	=3.2	[3.5 - 5.0]
Hb	=10.9	[12.0 - 15.0g/dL]	Cl	=106	[95 - 110]
Ht	=36	[35 - 47%]	BUN	=2.7	[0.8 - 3.9]
MCV	=73	[80 - 100fl]	Creat	=78	[44 - 80]
MCH	=22	[25 - 35pg]	Gluc	=8.4	[4.2 - 6.4]
MHCH	=30	[30 - 37%]	T. Chol	=4.5	[<5.7]
Plt	=282	[150 - 450x10 <sup>9</sup> /L]	TG	=1.2	[<1.71]
Lym	=2.4	[1.0 - 4.0x10 <sup>9</sup> /L]			
Mxd	=1.8	[0.1 - 1.0x10 <sup>9</sup> /L]			
Neut	=3.1	[1.8 - 7.5x10 <sup>9</sup> /L]			
HbA1C	=7.3	[4 - 6]			

**2. KY#RK00069, 61F (Village III)****Diagnosis:**

1. DMII with PNP

**Treatment:**

1. Glibenclamide 5mg 1t po bid (#200)
2. Metformin 500mg 1t po bid (buy)
3. Captopril 25mg 1/2t po bid (buy)
4. ASA 300mg 1/4t po qd (#25)

5. Amitriptylin 25mg 1/2t po qhs (#50)
6. Draw blood for Lyte, BUN, Creat, Gluc and HbA1C at SHCH

**Lab result on December 16, 2010**

Na	=134	[135 - 145]
K	=4.9	[3.5 - 5.0]
Cl	=106	[95 - 110]
BUN	=1.8	[0.8 - 3.9]
Creat	=69	[44 - 80]
Gluc	=9.0	[4.2 - 6.4]
T. Chol	=5.1	[<5.7]
TG	=2.1	[<1.71]
HbA1C	=12.7	[4 - 6]

**3. OT#RK00155, 45F (Bor Keo)**

**Diagnosis:**

1. HTN
2. DMII

**Treatment:**

1. Metformin 500mg 2t po bid (#400)
2. Captopril 25mg 1/2t po bid (#buy)
3. Atenolol 50mg 1/2t po bid (buy)
4. ASA 300mg 1/4t po qd (#25)
5. Amitriptylin 25mg 1/2t po qhs (#50)
6. Insulin NPH 20UI qAM
7. Draw blood for Gluc and HbA1C at SHCH

**Lab result on December 16, 2010**

Gluc	=9.1	[4.2 - 6.4]
HbA1C	=11.6	[4 - 6]

**4. KK#RK00231, 45F (Village I)**

**Diagnosis:**

1. DMII

**Treatment:**

1. Chlorpropamide 250mg 1t po bid (buy)
2. Metformin 500mg 1t po bid (#200)
3. Captopril 25mg 1/4t po qd (buy)
4. ASA 300mg 1/4t po qd (#25)

**5. SV#RK00256, 43M (Village I)**

**Diagnosis:**

1. DMII

**Treatment:**

1. Glibenclamide 5mg 1t po bid (buy)
2. Metformin 500mg 2t po bid (#400)
3. Draw blood for Gluc and HbA1C at SHCH

**Lab result on December 16, 2010**

Gluc	=7.3	[4.2 - 6.4]
HbA1C	=9.2	[4 - 6]

**6. KC#RK00260, 44F (Village V)**

**Diagnosis:**

1. DMII

**Treatment:**

1. Metformin 500mg 1t po bid (#200)
2. Draw blood for Gluc and HbA1C at SHCH

**Lab result on December 16, 2010**

Gluc =9.7 [4.2 - 6.4]  
HbA1C =11.2 [4 - 6]

**7. BS#RK00265, 51M (Village VI)**

**Diagnosis:**

1. DMII

**Treatment:**

1. Glibenclamide 5mg 2t po bid (buy)
2. Metformin 500mg 1t po qhs (#100)
3. Captopril 25mg 1/4t po bid (buy)
4. ASA 500mg 1/4t po qd (#25)
5. Draw blood for Lyte, BUN, Creat, Gluc and HbA1C at SHCH

**Lab result on December 16, 2010**

Na =133 [135 - 145]  
K =4.4 [3.5 - 5.0]  
Cl =106 [95 - 110]  
BUN =1.7 [0.8 - 3.9]  
Creat =85 [53 - 97]  
Gluc =12.2 [4.2 - 6.4]  
HbA1C =19.3 [4 - 6]

**8. VC#RK00268, 66M (Bey Srok Village)**

**Diagnosis:**

1. DMII

**Treatment:**

1. Metformin 500mg 2t po qAM and 3t qPM (buy)
2. Glibenclamide 5mg 2t po bid (#400)
3. Captopril 25mg 1/4t po qd (buy)
4. ASA 300mg 1/4t po qd (#25)
5. Draw blood for Gluc and HbA1C at SHCH

**Lab result on December 16, 2010**

Gluc =9.2 [4.2 - 6.4]  
HbA1C =10.2 [4 - 6]

**9. SS#RK00299, 46F (Thmey Village)**

**Diagnosis:**

1. DMII

**Treatment:**

1. Glibenclamide 5mg 2tab bid (#400)
2. Fenofibrate 100mg 1tb qd (Buy)
3. Captopril 25mg 1/4 tab bid (buy)
4. Draw blood for Lyte, BUN, Creat, Gluc and HbA1C at SHCH

**Lab result on December 16, 2010**

Na =133 [135 - 145]  
K =4.3 [3.5 - 5.0]



Cl	=108	[95 - 110]
BUN	=1.5	[0.8 - 3.9]
Creat	=70	[44 - 80]
Gluc	=16.2	[4.2 - 6.4]
HbA1C	=10.9	[4 - 6]

**10. CT#RK00318, 31F (Village I)**

**Diagnosis:**

1. DMII

**Treatment:**

1. Metformin 500mg 2t po bid (#400)

**Lab result on December 16, 2010**

Gluc	=10.1	[4.2 - 6.4]
HbA1C	=10.7	[4 - 6]

**11. TS#RK00320, 51M (Village V)**

**Diagnosis:**

1. DMII

**Treatment:**

1. Glibenclamide 5mg 2t po bid (#400)
2. Draw blood for Gluc and HbA1C at SHCH

**Lab result on December 16, 2010**

Gluc	=10.1	[4.2 - 6.4]
HbA1C	=11.8	[4 - 6]

**12. KL#RK00328, 38F (Tus Village, Ta Ang)**

**Diagnosis:**

1. DMII

**Treatment:**

1. Glibenclamide 5mg 1tab bid one month (#200)

**13. SS#RK00340, 47M (Village I, Labansirk commune)**

**Diagnosis:**

1. DMII

**Treatment:**

1. Metformine 500mg 1t po bid (buy)
2. Glibenclamide 5mg 1t po bid (#200)
3. Draw blood for Lyte, BUN, Creat, Gluc and HbA1C at SHCH

**Lab result on December 16, 2010**

Na	=134	[135 - 145]
K	=4.8	[3.5 - 5.0]
Cl	=108	[95 - 110]
BUN	=3.5	[0.8 - 3.9]
Creat	=90	[44 - 80]
Gluc	=7.3	[4.2 - 6.4]
HbA1C	=6.0	[4 - 6]

**The next Rattanakiri TM Clinic will be held in  
March 2011**