

GP follow-up note

Synthetic Clinical Document - For Educational Use Only

Patient ID	P019	Document ID	P019-D08
Date	2026-09-08	Type	GP follow-up note
Author	Gp	Recipient	-

Date: 8 September 2026

Patient: Maria Santos

DOB/Age: 63 years

GP: Dr Andrew King

Clinic: Kingston Road Medical Centre

Reason for contact

Follow-up for diabetes and medicine review during wound healing.

History

Maria has type 2 diabetes, chronic kidney disease stage 3, peripheral neuropathy and heart failure. She has a documented penicillin allergy with angioedema.

Recent background:

- 27 August 2026: Emergency department review at Logan Hospital for diabetic foot soft-tissue infection. No systemic sepsis. Able to offload foot. Started clindamycin 450 mg three times daily for 10 days. Empagliflozin kept withheld. Advised to attend high-risk foot clinic.
- 30 August 2026: High-risk foot clinic review. Redness reduced. Wound culture final: susceptible to current antibiotic. No exposed bone. Continue antibiotic and specialist wound plan.
- 3 September 2026: Community nursing wound care. Ulcer smaller. No purulent discharge. Healing trajectory satisfactory but ongoing care required.

Today:

- Glucose readings above usual.
- Ulcer improving.
- No heart failure symptoms.

Assessment

Type 2 diabetes with foot ulcer healing. Glycaemic readings above usual. No heart failure symptoms. Clindamycin course completed with clinical improvement. Empagliflozin remains withheld while ulcer healing and infection follow-up ongoing.

Medication changes

- Clindamycin: course completed. Ceased. Previous regimen 450 mg three times daily. Reason: planned course completed with clinical improvement.
- Empagliflozin: remains withheld. Reason: ulcer still healing and infection follow-up ongoing.

Current medications

- Bisoprolol 2.5 mg once daily - continue.
- Furosemide 40 mg once daily - continue.
- Insulin glargine 24 units nightly - continue.
- Empagliflozin - withheld.

Plan

- Continue insulin glargine 24 units nightly.
- Keep empagliflozin withheld.
- Coordinate with wound clinic.
- Continue community dressing and wound measurements.
- GP diabetes and renal monitoring while empagliflozin withheld.

Follow-up

- High-risk foot clinic follow-up: due 20 September 2026 - outstanding.
- Community dressing and wound measurements: due 20 September 2026 - outstanding.
- GP diabetes and renal monitoring while empagliflozin withheld: due 15 September 2026 - outstanding.

Safety-netting

Return for fever, spreading redness or increasing pain.