

Auburn Montgomery Warhawk Health Services

7461 East Dr STE 102
Montgomery AL, 36117-8092
(334) 244-3281

Date: 05/12/23

PATIENT: STALLINGS, LUCY **DOB:** 03/23/1962 **Gender:** FEMALE **MRN:** 1275 **AGE:** 61 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: Bee sting

HISTORY OF PRESENT ILLNESS: Ms. Stallings presents to the clinic with complaints of a bee sting on top of her left foot on Tuesday. She states she did get the stinger out but is not sure if she removed all of the stinger. She is also now having swelling, redness and soreness to her foot. Last Tdap was 3/09/22.

VITALS: BP: 135/81 **Site:** LEFT ARM **Position:** SITTING **Pulse:** 78; **Temp:** 98.3; **Resp:** 16; **Ht:** 66 in.; **Wt:** 164.8 lbs.;
BMI: 26.59; **Pulse Oximetry:** 98%

ALLERGIES: No Known Drug Allergies

MEDICATIONS:

amlodipine 10 mg tablet
atorvastatin 10 mg tablet

PAST MEDICAL HISTORY: HTN, Hyperlipidemia

PAST SURGICAL HISTORY: Tonsillectomy, Appendectomy

SOCIAL HISTORY: Denies smoking or illicit drug use. Admits to ETOH on occasion

PHYSICAL EXAMINATION:

GENERAL: GENERAL: No apparent distress noted; Well developed; Pleasant.

CARDIOVASCULAR: S1 S2; Regular rate and rhythm; No systolic ejection murmurs noted; No carotid bruits noted. No peripheral edema bilateral lower extremities.

RESPIRATORY: Breath sounds equal and unlabored. Clear to auscultation bilaterally without wheezes, rales, or rhonchi.

MUSCULOSKELETAL: Normal range of movement x 4 extremities; 2+ DP and PT pulses bilaterally

INTEGUMENTARY: Warm, dry, intact. No lesions or rash noted. Sting site located on dorsal side of left foot with erythema, swelling, pitting edema and warm to touch.

NEUROLOGIC: Alert and Oriented X3. CN II-XII intact. Sensation intact. Speech clear. Ambulates with steady gait.

PSYCHIATRIC: Appropriate mood and affect.

ASSESSMENT:

T63.441A - Toxic effect of venom of bees, accidental (unintentional), initial encounter (PRIMARY)
R60.0 - Localized edema

PLAN:

Will cover with antibiotics, Patient was instructed to take Zyrtec daily along with Benadryl at night and Pepcid 20mg twice per day x 3-5 days or until swelling and redness has improved. Patient was given samples of Zyrtec and hydrocortisone cream as well. Patient instructed to elevate foot and apply cold compress off and on x 15 min. Follow up next week if no improvement or worsening symptoms. Patient verbalized understanding.

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Patient gave verbal consent for removal of stinger. Area cleaned with alcohol. Scalpel and 22 gauge needle used to scrap out stinger. Was able to remove in a couple of pieces the stinger successfully. Patient tolerated procedure well. Cleaned area with alcohol and applied triple antibiotic.

mupirocin 2 % topical ointment

Refills: 0 Qty: 22 GRAM(S)

Instructions: APPLY A SMALL AMOUNT TO THE AFFECTED AREA BY TOPICAL ROUTE 3 TIMES PER DAY.

cephalexin 500 mg capsule

Refills: 0 Qty: 14 CAPSULE(S)

Instructions: TAKE 1 CAPSULE (500 MG) BY ORAL ROUTE EVERY 12 HOURS FOR 7 DAYS.

Electronically signed by Robin Blackwell, CRNP on 05/12/23 3:25 PM

Robin Blackwell CNP