

Auburn Montgomery Warhawk Health Services

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

Date: 02/15/23

PATIENT: THORNE, MATTHEW **DOB:** 04/24/1984 **Gender:** MALE **MRN:** 1343 **AGE:** 38 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: wheezing in his upper chest and throat

HISTORY OF PRESENT ILLNESS: Mr. Thorne is a 38 yo male here today for wheezing in his throat and upper chest at night when he lays down for the past 2 weeks. He has been recently diagnosed with EIB. He has not tried using his albuterol for his wheezing at night. He does use it 30 min before exercise and does not have any issues exercising. He was prescribed singulair but has not picked it up from the pharmacy yet. He is requesting a CXR and a referral to pulmonary.

He also c/o sore throat for the past 3 days but that has since resolved.

VITALS: BP: 124/78 **Site:** LEFT ARM **Position:** SITTING **Pulse:** 84; **Temp:** 97.8; **Resp:** 16; **Ht:** 73 in.; **Wt:** 239.1 lbs.;
BMI: 31.54; **Pulse Oximetry:** 98%

ALLERGIES: No Known Drug Allergies

MEDICATIONS:

Singulair 10 mg tablet (TAKE 1 TABLET (10 MG) BY ORAL ROUTE ONCE DAILY IN THE EVENING)
albuterol sulfate HFA 90 mcg/actuation aerosol inhaler (INHALE 2 PUFFS (180 MCG) BY INHALATION ROUTE EVERY 4-6 HOURS AS NEEDED and 30 min to 1 hr prior to exercise)

PAST MEDICAL HISTORY: Exercise-induced asthma

PAST SURGICAL HISTORY: Right humerus surgery

SOCIAL HISTORY: Men's soccer coach at AUM. Married with 3 children. Denies smoking, drinking, or illicit drug use.

FAMILY HISTORY: Mother-asthma, Grandmother- stroke in her 60s-70s. Aunt- stroke

REVIEW OF SYSTEMS:

CONSTITUTIONALS: All 14 point review of systems negative except those listed in HPI.

PHYSICAL EXAMINATION:

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

HEENT: Head- normocephalic; atraumatic. Eyes- sclera white, conjunctiva pink, EOMI. Ears- tympanic membranes clear. Ear canals are patent. Nose- septum- midline; No maxillary or frontal sinus tenderness. Throat- pink without exudates. No anterior or posterior cervical nodes palpated; No palpable thyroid abnormality or enlargement.

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

INTEGUMENTARY: Warm, dry, intact. No lesions or rash noted.

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

PSYCHIATRIC: Appropriate mood and affect.

ORDERS:

STREP A (1 unit(s)): In-House Lab
Abbott COVID Rapid Test (1 unit(s)): In-House Lab
INFLUENZA (1 unit(s)): In-House Lab

RESULTS:

STREP A:
Value: Negative

INFLUENZA:
Value: Positive
Comment: Influenza B

Abbott COVID Rapid Test:
Value: Negative

ASSESSMENT:

R06.00 - DYSPNEA, UNSPECIFIED (PRIMARY)
R06.2 - WHEEZING
J10.1 - Influenza due to other identified influenza virus with other respiratory manifestations
J45.990 - Exercise induced bronchospasm
J02.9 - ACUTE PHARYNGITIS, UNSPECIFIED

PLAN:

Recommended he try using his albuterol inhaler at night to see if it helps resolve his symptoms. His lungs sound clear. He is able to reproduce the wheezing sound and it appears to be coming from his throat. If the albuterol does not help, then recommend he start pepcid twice a day for GERD. He is positive for Flu B today. Outside of the window for tamiflu. He is requesting a CXR and referral to pulmonary. He has a stress test with cardiology in the next week or so.

Referral: EMIC, East Montgomery Imaging Center (Radiology)
Instructions: CXR- referral given to patient in office.

Referral: Montgomery Pulmonary, Montgomery Pulmonary Consultants (Pulmonology)
No Special Instructions

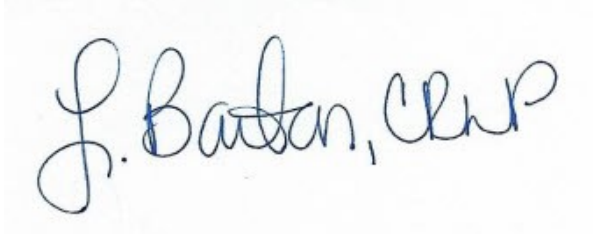
Electronically signed by Lindsey Barton, CRNP on 02/21/23 8:35 AM

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A handwritten signature in blue ink that reads "J. Barton, CRP". The signature is written in a cursive style with a large initial "J" and a stylized "B".