

Auburn Montgomery Warhawk Health Services

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

Date: 04/17/23

PATIENT: MARTIN, PEPPER **DOB:** 12/03/1975 **Gender:** FEMALE **MRN:** 136 **AGE:** 47 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: Cough

HISTORY OF PRESENT ILLNESS: Ms. Martin presents to the clinic with complaints of cough (yellow/green mucous) with PND going on 3 weeks. She states she had Flu B three weeks ago and the cough has lingered off/on since. She states the cough is worse at night when lying down. She does report dyspnea at times on exertion. She has tried Mucinex and cold sinus meds. She last took these meds last night. She denies fever.

VITALS: BP: 143/97 **Site:** LEFT ARM **Position:** SITTING **Pulse:** 70; **Temp:** 97.9; **Resp:** 18; **Ht:** 68 in.; **Wt:** 329 lbs.;
BMI: 50.02; **Pulse Oximetry:** 98%

ALLERGIES: almond

MEDICATIONS:

losartan 50 mg tablet
naproxen 250 mg tablet (3 tabs daily as needed for pain)

PAST MEDICAL HISTORY: HTN, deaf (uses hearing aides). Obese

PAST SURGICAL HISTORY: Right ankle replacement and Reconstructive surgery x 4.

SOCIAL HISTORY: Drinks alcohol socially. Denies smoking or illicit drug use.

FAMILY HISTORY:

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; 2+ DP and PT pulses bilaterally

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

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

PSYCHIATRIC: Appropriate mood and affect.

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ORDERS:

Dexamethasone 4mg/ml (2 unit(s)): Injection

RESULTS:

Dexamethasone 4mg/ml:
Site Given: Right Ventral Gluteal
Dosage Given: 8 milligram(s)
Administered By: Blackwell, Robin - CRNP

ASSESSMENT:

R05.9 - COUGH, UNSPECIFIED (PRIMARY)
R09.82 - POSTNASAL DRIP
R09.89 - Other specified symptoms and signs involving the circulatory and respiratory systems

PLAN:

Can discontinue Mucinex at this time. Take RXs as directed. Discussed how decongestants in OTC meds can increase her BP and options she can take in the future for her cough with HBP. She did take her BP med this am. Consider CXR if symptoms do not improve or worsen. Drink plenty of water. Follow up if no improvement or worsening symptoms.

albuterol sulfate HFA 90 mcg/actuation aerosol inhaler
Refills: 1 Qty: 1 UNIT(S)
Instructions: INHALE 2 PUFFS (180 MCG) BY INHALATION ROUTE EVERY 4-6 HOURS AS NEEDED (FOR SOB/WHEEZING)

amoxicillin 875 mg-potassium clavulanate 125 mg tablet
Refills: 0 Qty: 14 TABLET(S)
Instructions: TAKE 1 TABLET BY ORAL ROUTE EVERY 12 HOURS FOR 7 DAYS

Ninjacof 12.5 mg-12.5 mg/5 mL oral liquid
Refills: 0 Qty: 473 ML(S)
Instructions: TAKE 2 TSP (10ML) EVERY 6-8 HOURS. DO NOT EXCEED 6 TSP IN 24 HOURS.

Electronically signed by Robin Blackwell, CRNP on 04/17/23 12:33 PM

Robin Blackwell CNP