

Auburn Montgomery Student Health Services

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

Date: 04/04/22

PATIENT: MORRIS, DARYL **DOB:** 04/03/1980 **Gender:** MALE **MRN:** 1370 **AGE:** 42 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: cyst to upper back

HISTORY OF PRESENT ILLNESS: Mr. Morris is a 42 yo male here today for 2 cysts located to his upper back. They have been there for awhile. He typically can drain a little bit of fluid out of them and they go away then return sometime late. He was messing with one of them and now it is red and he is worried it is infected. Denies fever.

VITALS: BP: 138/96 **Site:** LEFT ARM **Position:** SITTING **Pulse:** 72; **Temp:** 96.3; **Resp:** 16; **Ht:** 68 in.; **Wt:** 183.5 lbs.;
BMI: 27.9; **Pulse Oximetry:** 98%

ALLERGIES: adhesive

MEDICATIONS:

Celebrex 200 mg capsule (1 tablet PO twice daily)

clobetasol 0.05 % topical ointment (APPLY A THIN LAYER TO THE AFFECTED AREA(S) BY TOPICAL ROUTE 2 TIMES PER DAY for up to 2 weeks if needed.)

temazepam 30 mg capsule (1 tablet PO daily)

PAST MEDICAL HISTORY: Chronic back pain. Allergic to poison ivy/sumac.

PAST SURGICAL HISTORY: back surgery x 5.

SOCIAL HISTORY: Married. Works on campus. Drinks socially. Denies smoking or illicit drug use.

FAMILY HISTORY: Mom- leukemia, lymphoma. Father- HTN, HLD.

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.

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 rash noted. 2 small sebaceous cysts to upper back just below the left shoulder blade. Both are raised nodules about the size of a dime with a black head noted in the center of each. The upper nodule is surrounded by erythema and fluctuance, but no warmth or drainage.

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

PSYCHIATRIC: Appropriate mood and affect.

ASSESSMENT:

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L72.3 - Sebaceous cyst (PRIMARY)

PLAN:

We discussed removal of the cysts by I&D, however they are small and they don't typically bother him. He was concerned about the one that is possibly infected. ABX as prescribed. Warm compresses. Follow up if no improvement or worsening symptoms. He verbalized understanding.

cephalexin 500 mg tablet

Refills: 0 Qty: 20 TABLET(S)

Instructions: TAKE 1 TABLET (500 MG) BY ORAL ROUTE PO BID x 10 days

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

Electronically signed by Lindsey Barton, CRNP on 04/04/22 1:38 PM

A handwritten signature in blue ink that reads "J. Barton, CRNP". The signature is written in a cursive, flowing style.