

**Auburn Montgomery Student Health Services**

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

**Date:** 03/29/21

**PATIENT:** SMITH, LISA    **DOB:** 09/29/1967    **Gender:** FEMALE    **MRN:** 1403    **AGE:** 53 Years

**VISIT TYPE:** Office Visit Established

**CHIEF COMPLAINT:** Issues since Tdap

**HISTORY OF PRESENT ILLNESS:** Ms. Smith presents today for back and neck spasms, finger swelling and joint pain since receiving the Tdap on 3/22. She reports taking mobic over the weekend with little relief. Denies fever, URI symptoms, urinary symptoms, lower extremity swelling, or recent weight gain. She has a history of prediabetes. Her last Hgb A1C in May 2020 was 6%. She reports she gets up once or twice at night to urinate.

**VITALS:** BP: 121/68    **Site:** LEFT ARM    **Position:** SITTING    **Pulse:** 83;    **Temp:** 97.3;    **Resp:** 16;    **Ht:** 63 in.;    **Wt:** 178.8 lbs.;  
**BMI:** 31.67;    **Pulse Oximetry:** 99%

**ALLERGIES:** Demerol; No Known Drug Allergies

**MEDICATIONS:**

losartan 100 mg tablet (1 tablet PO QD)  
metformin 500 mg tablet  
simvastatin 5 mg tablet  
spironolactone 50 mg tablet (1 tablet PO QD)

**PAST MEDICAL HISTORY:** Arthritis, fractures, hypertension, chicken pox , HLD, prediabetes.

**PAST SURGICAL HISTORY:** Cholecystectomy

**SOCIAL HISTORY:** Denies

**FAMILY HISTORY:** Father: Diabetes, heart disease, hypertension

**HEALTH MX HISTORY:** Mammogram 2020. She had colonoscopy when she was 49 yrs old a few months before her 50th birthday.

**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.

GASTROINTESTINAL: Abdomen is soft; Nontender; Nondistended. Bowel sounds present x 4 quadrants. No masses or organomegaly noted.

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**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.

**ORDERS:**

COMP METABOLIC PANEL (QUEST) (1 unit(s)): Quest Diagnostics  
CBC W/ DIFF (QUEST) (1 unit(s)): Quest Diagnostics  
C-REACTIVE PROTEIN (QUEST) (1 unit(s)): Quest Diagnostics  
SED RATE BY MOD WEST (QUEST) (1 unit(s)): Quest Diagnostics  
Hgb A1C (1 unit(s)): Quest Diagnostics  
CREATINE KINASE TOTAL (1 unit(s)): Quest Diagnostics  
UA (1 unit(s)): In-House Lab  
Glucose (1 unit(s)): In-House Lab

**RESULTS:**

UA:

Appearance: Cloudy  
Color: yellow  
Glucose: Positive  
Bill: Negative  
Ketones: Negative  
Sp: 1.015  
Blood: Positive  
pH: 5  
Protein: Negative  
Urobilinogen: Negative  
Nitrites: Negative  
Leukocytes: Positive

Glucose:

Value: 213

**ASSESSMENT:**

R73.9 - HYPERGLYCEMIA, UNSPECIFIED (PRIMARY)  
R81 - GLYCOSURIA  
M79.10 - Myalgia, unspecified site  
M54.9 - DORSALGIA, UNSPECIFIED  
R73.03 - PREDIABETES  
E78.5 - HYPERLIPIDEMIA, UNSPECIFIED

**PLAN:**

Follow up with test results. Discussed with her hyperglycemia and glucosuria that she most likely is diabetic. Hgb A1C pending. Ok to continue tylenol or motrin as needed for pain.

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Electronically signed by Lindsey Barton, CRNP on 03/29/21 3:34 PM

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