

Auburn Montgomery Student Health Services

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

Date: 05/11/21

PATIENT: SMITH, FREDDIE **DOB:** 01/25/1977 **Gender:** MALE **MRN:** 1448 **AGE:** 44 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: Gout

HISTORY OF PRESENT ILLNESS: Mr. Smith presents today for gout. He reports he noticed tenderness under his (L) great toe Friday which has now spread into his ankle. He has been taking Uloric 40mg which is his mom's rx. He reports taking Ibuprofen 200mg around 4hrs ago and icing and elevating his ankle w/ no relief. He has a history of gout that began about 10 years ago. He changed his diet and quit eating meats. He did not have a flare up until about 4-6 months ago. He drank a 6-pack of beer last week and afterwards is when he started to have the pain. He is inquiring about being on medication long term to prevent gout flare ups.

VITALS: BP: 131/79 **Site:** LEFT ARM **Position:** SITTING **Pulse:** 86; **Temp:** 97.9; **Resp:** 15; **Ht:** 71 in.; **Wt:** 217.1 lbs.;
BMI: 30.27; **Pulse Oximetry:** 98%

ALLERGIES: No Known Drug Allergies

PAST MEDICAL HISTORY: Gout

PAST SURGICAL HISTORY: 2 left foot surgeries and esophageal dilatation.

SOCIAL HISTORY: Married. Wife is employed here at AUM. Drinks alcohol socially. Denies smoking or illicit drug use.

FAMILY HISTORY: Father- deceased. Mother- diabetes. Grandparents- colon cancer, diabetes, heart disease, HTN, high cholesterol, and sudden cardiac arrest.

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. Left great toe MCP joint with erythema, tenderness, and soft tissue swelling. Medial side of left ankle with tenderness, soft tissue swelling, and erythema.

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:

THERAPEUTIC INJECTION ADMIN (2 unit(s)): Injection
Toradol 60 MG (1 unit(s)): Injection

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Dexamethasone 4mg/ml (1 unit(s)): Injection
Depo-Medrol 40mg/ml (1 unit(s)): Injection
URIC ACID (1 unit(s)): Quest Diagnostics
BASIC METABOLIC PANEL (1 unit(s)): Quest Diagnostics

RESULTS:

Toradol 60 MG :
Site Given: Right Gluteus Maximus
Dosage Given: 1 unit(s)
Administered By: Havard, Jyssica - MA

Dexamethasone 4mg/ml:
Site Given: Left Gluteus Maximus
Dosage Given: 1 milligram(s)
Administered By: Havard, Jyssica - MA

Depo-Medrol 40mg/ml:
Site Given: Left Gluteus Maximus
Dosage Given: 40 milligram(s)
Administered By: Havard, Jyssica - MA

ASSESSMENT:

M10.9 - GOUT, UNSPECIFIED (PRIMARY)

PLAN:

Follow up in 1 month to recheck uric acid level. If uric acid level remains elevated then start maintenance therapy for prevention or if he has 3 or more flare ups in 1 year. He verbalized understanding.

indomethacin 50 mg capsule
Refills: 1 Qty: 30 CAPSULE(S)
Instructions: TAKE 1 CAPSULE (50 MG) BY ORAL ROUTE 3 TIMES PER DAY WITH FOOD AS NEEDED FOR GOUT FLARE UP

Electronically signed by Lindsey Barton, CRNP on 05/11/21 4:04 PM

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