

Auburn Montgomery Student Health Services

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

Date: 04/02/19

PATIENT: MARSHALL, RICKEY **DOB:** 12/01/1996 **Gender:** **MRN:** 156 **AGE:** 22 Years

VISIT TYPE: Office Visit New

CHIEF COMPLAINT: Eye irritation

Symptoms: Symptoms since December. Red, watery with yellow discharge. Some mornings his eyes are shut with matting. Does have blurred vision. Has been taking Benadryl and using eye drops. Has thrown out his contacts.

Location: Started in (L) eye and now is in his (R).

Severity: Worsening

Duration: Since December.

Other: Patient reports that he continues to wear contacts.

VITALS: BP: 126/71 **Site:** LEFT ARM **Position:** SITTING **Pulse:** 80

ALLERGIES: No Known Drug Allergies

PAST MEDICAL HISTORY: Denies

PAST SURGICAL HISTORY: Ulna repair, nasal passage surgery and TM repair.

SOCIAL HISTORY: Does smoke 1/2 packs a day. For _6_ years. Cigarettes; Exercises regularly; Does not live alone; Single; Sexual orientation--Gay Consumes alcohol. Frequency: on the weekends. Type: Beer

FAMILY HISTORY: Mother with history of: ovarian, High cholesterol; Father with history of: HTN; Maternal Grandfather with history of: diabetes, HTN; Maternal Grandmother with history of: HTN, sudden cardiac arrest; Paternal Grandfather with history of: diabetes; Paternal Grandmother with history of: diabetes, HTN; Maternal aunt with history of Cancer, HTN; Paternal side of family with history of diabetes, HTN; Paternal Aunt with history of TIA; Paternal uncle with history of sudden cardiac death

REVIEW OF SYSTEMS:

CONSTITUTIONALS: Patient denies: Fever, Chills,

ENMT: Patient is positive for: runny nose,

HEENT: Patient is positive for: Burning, Pain, Photophobia, Blurred vision, Diplopia, yellow eye discharge

PHYSICAL EXAMINATION:

GENERAL: Well/Developed/Nourished; NAD; Appears Consistent with Age;

HEENT: Normocephalic; Both eyes injected and hyperemic--L>R; Sclera red; Airways patent; No cyanosis of lips or mucosa; Membranes moist; Tongue and uvula midline; Good Dentation;

EARS: Left TM Red; TMs intact; External Auditory Canal clear;

NOSE: Septum without Deviation; Clear rhinorrhea; Turbinate Hypertrophy on Right; Turbinate Hypertrophy on Left;

THROAT: Throat red without pustules; Posterior Nasal Drainage; Tonsillar Hypertrophy--2+; No exudates;

NECK: Neck Supple; Full Range of Motion; No Lymphadenopathy;

CARDIOVASCULAR: HRRR , no extra heart sounds, no murmur

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RESPIRATORY: Lungs CTA; no rhonchi wheeze or rales; breath sounds symmetric; no chest wall tenderness.

NEUROLOGIC: No Focal Deficit;

PSYCHIATRIC: Mood and Affect Appropriate; Alert and Oriented x3;

ASSESSMENT:

H10.13 - ACUTE ATOPIC CONJUNCTIVITIS, BILATERAL (PRIMARY)

J30.9 - ALLERGIC RHINITIS, UNSPECIFIED

J02.9 - ACUTE PHARYNGITIS, UNSPECIFIED

PLAN:

cetirizine 10 mg tablet

Refills: 2 Qty: 30 TABLET(S)

Instructions: TAKE 1 TABLET (10 MG) BY ORAL ROUTE ONCE DAILY

Polytrim 10,000 unit-1 mg/mL eye drops

Refills: 0 Qty: 5 ML(S)

Instructions: INSTILL 1 DROP INTO AFFECTED EYE(S) BY OPHTHALMIC ROUTE EVERY 6 HOURS

fluticasone propionate 50 mcg/actuation nasal spray,suspension

Refills: 2 Qty: 1 BOTTLE(S)

Instructions: SPRAY 1 - 2 SPRAYS (50 - 100 MCG) IN EACH NOSTRIL BY INTRANASAL ROUTE DAILY

Avoid wearing contacts for the next several days---7 days.

Apply cool compress to eyes 2-3 times per day.

Follow up PRN or if condition worsens

Excuse

Electronically signed by Melodye Harvey, CRNP on 04/02/19 10:55 AM