

Auburn Montgomery Warhawk Health Services

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

Date: 05/27/26

PATIENT: BUTLER, ROSALYN **DOB:** 03/02/1973 **Gender:** FEMALE **MRN:** 1577 **AGE:** 53 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: urinary frequency

HISTORY OF PRESENT ILLNESS: 53 YO F PTC with c/o urinary frequency, urgency, pt states since having her gallbladder out she has been more prone to UTI's, has issues with chronic constipation as well. States symptoms began a week ago with more urgency since last night. Denies pain, fever, body aches, lower back pain.

VITALS: BP: 152/95 **Site:** LEFT ARM **Position:** SITTING **Pulse:** 79; **Temp:** 97.7; **Resp:** 16; **Ht:** 67 in.; **Wt:** 245.1 lbs.;
BMI: 38.38; **Pulse Oximetry:** 96%

ALLERGIES: No Known Drug Allergies

MEDICATIONS:

amlodipine 10 mg tablet
fluticasone propionate 50 mcg/actuation nasal spray,suspension (SHAKE LIQUID AND USE 1 SPRAY IN EACH NOSTRIL EVERY DAY)
hydrochlorothiazide 25 mg tablet
meloxicam 15 mg tablet
montelukast 10 mg tablet (TAKE 1 TABLET BY MOUTH EVERY DAY)

PAST MEDICAL HISTORY: IDA, HTN, Asthma.

PAST SURGICAL HISTORY: Right hip replacement, myomectomy, uterine ablation, UFE in September 2024, cholecystectomy, back surgery due to bulging disc.

SOCIAL HISTORY: AUM Employee.

HEALTH MX HISTORY:

Has a PCP.

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.

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

MUSCULOSKELETAL: Normal range of movement x 4 extremities; 2+ DP and PT pulses bilaterally

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

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ORDERS:

UA (1 unit(s)): In-House Lab
THERAPEUTIC INJECTION ADMIN (1 unit(s)): Injection
Rocephin 1G (1 unit(s)): Injection
Urine Culture Routine (1 unit(s)): LabCorp

RESULTS:

UA:

Appearance: cloudy
Color: dark yellow
Glucose: Negative
Bill: Positive
Ketones: Positive
Sp: 1.020
Blood: Positive
pH: 5
Protein: Positive
Urobilinogen: Positive
Nitrites: Positive
Leukocytes: Positive
CS: yes
Comments: Leuk: 500Leu/uL

Nit: positive
Pro: 100 mg/dL
Ketones: 15 mg/dL
UBG: 1 mg/dL
Bil: 1 mg/dL
Blood: 250 Ery/uL
urine is malodorous

Rocephin 1G:
Site Given: Right Ventral Gluteal
Dosage Given: 1 gram(s)
Administered By: Bicknell, Miranda - RN

ASSESSMENT:

R30.0 - DYSURIA (PRIMARY)
N39.0 - URINARY TRACT INFECTION, SITE NOT SPECIFIED

PLAN:

Treatment Antibiotics: o Take exactly as prescribed, even if symptoms improve before the medicine is finished. o Do not skip doses or stop early incomplete treatment may cause recurrence or antibiotic resistance. Pain relief: o Phenazopyridine (Pyridium) may be prescribed to relieve burning (turns urine orange). o Use acetaminophen (Tylenol) or ibuprofen (Motrin) for pain or fever as needed. Hydration: o Drink 810 glasses of water per day (unless restricted) to help flush bacteria from the bladder. Rest: o Get adequate rest until fever and discomfort subside.
Home Care and Prevention Tips Wipe front to back after using the bathroom to prevent bacteria from entering the urethra. Urinate after sexual activity to flush out bacteria. Avoid holding urine for long periods empty your bladder regularly. Avoid irritants: o Skip bubble baths, douches, or perfumed feminine hygiene sprays. o Wear loose cotton underwear and avoid tight clothing. Increase fluids: Water is

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best avoid caffeine, alcohol, and carbonated drinks which can irritate the bladder. Cranberry juice or tablets may help prevent recurrence in some individuals (check with your provider).

Bactrim DS 800 mg-160 mg tablet

Refills: 0 Qty: 14 TABLET(S)

Instructions: TAKE 1 TABLET BY ORAL ROUTE EVERY 12 HOURS

Electronically signed by Breena Till, CRNP on 05/27/26 10:33 AM

