

Auburn Montgomery Warhawk Health Services

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

Date: 10/04/22

PATIENT: ALLMAN, ANITA **DOB:** 03/02/1954 **Gender:** FEMALE **MRN:** 1634 **AGE:** 68 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: dizziness and feels like she is going to faint

HISTORY OF PRESENT ILLNESS: 68 year old faculty member walks over to clinic stating she just doesn't feel right and wants her BP checked. While checking her BP she states she feels dizzy and like she is going to faint and that it feels like her heart is skipping beats. She also states she has been short of breath. Symptoms started one hour prior to coming to the clinic. Associated with pain between her shoulder blades but denies chest pain, nausea/vomiting, or sweating.

Her PCP is Dr. Schulman. She saw her last week for a check up and had some labs drawn. She states her symptoms that occurred today have been occurring intermittently for the past 1 year, but she has not told her PCP about it.

VITALS: BP: 141/72 **Site:** LEFT ARM **Position:** SITTING **Pulse:** 126; **Resp:** 17; **Wt:** 214.7 lbs.; **Pulse Oximetry:** 99%

ALLERGIES: No Known Drug Allergies

MEDICATIONS:

atorvastatin 40 mg tablet (daily)
hydralazine 25 mg tablet (daily)
lisinopril 20 mg tablet (daily)

PAST MEDICAL HISTORY: HTN, elevated cholesterol, anxiety

PAST SURGICAL HISTORY: denies

SOCIAL HISTORY: denies tobacco and illicit drug use; admits to occasional alcohol use.

FAMILY HISTORY: Father- heart disease.

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; + tachycardia with occasional irregular beats; 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 lesions or rash noted.

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

PSYCHIATRIC: + anxious mood and affect.

ORDERS:

IV START (1 unit(s)): Office Procedure
Normal saline 1L Bolus (1 unit(s)): Intervention
EKG (1 unit(s)): Office Procedure

ASSESSMENT:

R06.00 - Dyspnea, unspecified (PRIMARY)
R00.2 - Palpitations
R42 - DIZZINESS AND GIDDINESS

PLAN:

20g INT started to left hand at 1545 via L. Barton, CRNP; + blood return and flushes without difficulty. 1 L NS bolus is infusing at KVO. EKG- Sinus tachycardia at 118 bpm, no ischemic changes. Can not rule out an underlying flutter. Campus police was called to notify EMS of transport. She was transported to BMCS in stable condition.

Electronically signed by Lindsey Barton, CRNP on 10/06/22 8:45 AM

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