

AUM STUDENT HEALTH CENTER

PHONE: 244-3281

INSTRUCTION SHEET

52
195.7

My Name: Jennifer Dyess

Today's Date: 11/10/14

The Practitioner I saw today was: Carol Stewart, CRNP Ramona Lazenby, CRNP
Erin Patterson

My Problem Pharyngitis

What medications do I need to take?

- Tylenol & Ibuprofen as needed for pain or fever.
- Mucinex DM as needed for congestion
- _____
- _____
- _____

What else do I need to do?

- Rest & relax, drink plenty of fluid
- Humidifier
- If no better or worse in 3-7 days follow up
- _____

Do I need a follow-up appointment? ☒ No Yes, in _____ days

Date: _____

Time: _____

CERTIFICATE FOR RETURN TO WORK / SCHOOL

Auburn University Montgomery
Nursing Care Center
Irma B. Moore Hall, Room 102
(334) 244-3281

Name Jennifer Dyess

was seen on 11/10/14 at 1310 am / pm

and is able to return to work / school on 11/13/14

Nature of illness or injury Confidential

☐ Restrictions ☐ Light work

Physical exertion: ☐ Limited ☐ Avoid x _____ Days

☐ Other _____

CRNP / RN [Signature] Date 11/10/14

Phone (334) 244-3281

Fax (334) 244-3243

**AUM NURSING CARE CENTER
PROBLEM VISIT RECORD**

DATE: 11/10/14 TIME: 1310 PT. HISTORY REVIEWED / UPDATED: 1 / 1

PATIENT NAME: Jennifer Dyess DOB: AGE:

PRESENT COMPLAINT: Hasn't felt well, been nauseated. HA, throat sore last 2-3 days. (+) Sinus drainage. No unusual fatigue. Mother diagnosed & strep.

MEDICATIONS: Symbutol, wellbutrin LMP: -

Temp	Pulse	Resn	B/P	HT	WT	Allergies
99.5	47		137/90	61.5	203.9	PCN
INITIAL VISIT			38.0			

INITIAL VISIT	RETURN VISIT
Skin ① rashes, lesions, or areas of discoloration noted	
Sinuses ① tenderness to maxillary or frontal sinuses.	
Ears TM pink with good light reflex bilaterally.	
Eyes ① redness swelling or drainage.	
Nose Clear drainage noted bilaterally.	
Throat ① side red with small white papules tonsils 1/10	
Neck/ Back bilaterally anterior cervical lymphadenopathy non-tender, shoddy	
Heart S ₁ S ₂ at RRR no murmurs, clicks or rubors.	
Lungs Resp even + nonlabored CTX bilaterally.	
Abdomen	
GU/GI	
Extremities ① edema noted, capillary refill less than 3 seconds.	

DIAGNOSIS	TESTS	RESULTS
① Pharyngitis	Quick Strep	-Neg
② Rhinitis	Mono	Neg
	CBC	

PLAN: ① Tylenol or Ibuprofen as needed for pain or fever. Drink plenty of fluids. Rest + relax. CBC + throat culture sent will call with abnormal result + 9.

CALL BACK: 11-11-14 T.C 2 p.m. 9/21/14 250 mg cased into window 272-1510 9 am contact, CRP

PRACTITIONER SIGNATURE: Em. Patton NP student STAFF SIGNATURE: [Signature]

AUDIT DATE: COMMENTS: 11/10/14 ph state slow is much better at this time.

Carol Stewart, C.R.N.P.
Lic. #1-045437
Rx: 1178

AUBURN MONTGOMERY
STUDENT HEALTH CENTER
P. O. Box 244023
Montgomery, AL 36124-4023
(334) 244-3281

Ramona Lazenby, C.R.N.P.
Lic. #1-039092
Rx: 0703

Maryluz Fuentes, M.D.
(334) 286-2390
DEA #BF 6451520
AL #24127

Name

Jennifer Pignone

Date

9-26-14

Address

Rx

*Proctusone 5mg
60.0000 gK
These are directed*

Lozano

M.D. or C.R.N.P.

Label all prescriptions

Product Selection Permitted

Refill: 1 2 3 5 PRN *NR*

Dispense As Written

M.D. or C.R.N.P.



AUBURN

MONTGOMERY

Auburn University Student Health Services

TO: Pharmacy FROM: Alum SHS
COMPANY: Al PCC DATE: 9/26/14 @ 11:33
FAX NUMBER: 334-844-8983 TOTAL PAGES, INCLUDING COVER: 1
PHONE NUMBER: 334-844-4099 SENDER'S REFERENCE NUMBER:
RE: Jennifer Dyess CC:

☐ URGENT ☐ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY

NOTES/COMMENTS

Carol Stewart, C.R.N.P.
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Lic. #1-039092
Rx: 0703

Maryluz Fuentes, M.D.
(334) 286-2390
DEA #BF 6451520
AL #24127

Name: Jennifer Dyess Date: 9-26-14
Address: 200 10-13-166

Rx

Warrentin XL 150mg
Disp: 30
Sig: + x. o. y a.m.

Signature

M.D. or C.R.N.P.

Label all prescriptions

Product Selection Permitted

Refill: 1 2 3 5 PRN: (N/A)

Dispense As Written

M.D. or C.R.N.P.

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P. O. Box 244023 Montgomery, AL 36124/ 334-244-3281 fax 334-244-3396

Carol Stewart, C.R.N.P.
Lic. #1-045437
Rx: 1178

AUBURN MONTGOMERY
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Montgomery, AL 36124-4023
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Ramona Lazenby, C.R.N.P.
Lic. #1-039092
Rx: 0703

Maryluz Fuentes, M.D.
(334) 286-2390
DEA #BF 6451520
AL #24127

Name Jennifer Pyers Date 9-26-14
Address 202 10-13-166

Rx

Wardantun XL 150mg
Disp: 30
Sig: 1 p.o. q a.m.

L. Stewart M.D. or C.R.N.P.

Label all prescriptions

Refill: 1 2 3 5 PRN (N)

Product Selection Permitted

Dispense As Written

M.D. or C.R.N.P.

Jennifer is an Auburn
employee. Please deliver
to Auburn Campus.

L. Stewart, C.R.N.P.

**AUM NURSING CARE CENTER
PROBLEM VISIT RECORD**

DATE: 9/26/14 TIME: 905 PT. HISTORY REVIEWED / UPDATED: 1 / 1

PATIENT NAME: Jennifer Dyess DOB: _____ AGE: _____

PRESENT COMPLAINT: Poss. sinus infection, (L) side of face is painful,
(L) eye is burning, (L) congestion, drainage white showing.
Tenderness noticed Wed. HA last wk. No known fever

MEDICATIONS: Cymbalta, OTC meds LMP: NA

Temp	Pulse	Resp	B/P	HT	WT	Allergies
<u>98.5</u>	<u>97</u>		<u>137/83</u>	<u>41.7</u>	<u>203.6</u>	<u>PCN</u>

INITIAL VISIT 37.5

Skin	RETURN VISIT
<u>Neuro: CND - XII grossly intact</u>	
<u>Slit: & feeling tenderness, observed</u>	
<u>Ears: (L) superficial pain ("burning")</u>	
<u>Eyes: on palpation of (L)</u>	
<u>Nose: (L) tenderness on</u>	
<u>Throat: Swallowing noted in the</u>	
<u>Neck/Back: (L) tenderness on</u>	
<u>Heart: (L) eye.</u>	
<u>Lungs: (L) pressure on</u>	
<u>Abdomen: max</u>	
<u>GU/GI: nose: & discharge</u>	
<u>Extremities: Tenderness & redness</u>	
<u> nose: & adenopathy</u>	

DIAGNOSIS:	TESTS	RESULTS
<u>1) Facial symptoms</u>		
<u>? origin</u>		
<u>? Facial nerve</u>		
<u> inflammation</u>		

PLAN: Depression - point CALL BACK
 medication

- 1) Prozac 5mg
dose PK, let
- 2) Pant. Lyrica 150mg
was sent in XI 150mg

PRACTITIONER SIGNATURE: L. Stewart, CRNP STAFF SIGNATURE: [Signature]

AUDIT DATE: _____ COMMENTS: _____

PHYSICIAN SIGNATURE: _____

Carol Stewart, C.R.N.P.
Lic. #1-045437
Rx: 1178

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Ramona Lazenby, C.R.
Lic. #1-039092
Rx: 0703

Elizabeth H. McIntosh, C.R.N.P.
Lic. #1-096551
RX: 2230

Maryluz Fuentes, M.D.
(334) 286-3444
DEA #BF 6451520
AL #24127

Name

Address

Date

7-7-1

R

Lyndee Long
Disp: 30
Sig: 10-0-9d
Carol Stewart

Product Selection Permitted

Label all prescriptions

Refill: 1 2 3 5 PRN NR

Dispense As Written

M.D. or C

PRESCRIPTIONS MUST BE WRITTEN IN INK AND MUST BE LEGIBLE. THE PRESCRIPTIONER MUST SIGN AND DATE THE PRESCRIPTION. THE PRESCRIPTIONER MUST BE A LICENSED HEALTH CARE PROVIDER. THE PRESCRIPTIONER MUST BE A MEMBER OF THE ALABAMA BOARD OF NURSING. THE PRESCRIPTIONER MUST BE A MEMBER OF THE ALABAMA BOARD OF PHYSICIAN ASSISTANTS. THE PRESCRIPTIONER MUST BE A MEMBER OF THE ALABAMA BOARD OF NURSE PRACTITIONERS. THE PRESCRIPTIONER MUST BE A MEMBER OF THE ALABAMA BOARD OF NURSE ANESTHETISTS. THE PRESCRIPTIONER MUST BE A MEMBER OF THE ALABAMA BOARD OF NURSE MIDWIVES. THE PRESCRIPTIONER MUST BE A MEMBER OF THE ALABAMA BOARD OF NURSE PRACTITIONERS. THE PRESCRIPTIONER MUST BE A MEMBER OF THE ALABAMA BOARD OF NURSE ANESTHETISTS. THE PRESCRIPTIONER MUST BE A MEMBER OF THE ALABAMA BOARD OF NURSE MIDWIVES.

AUBURN MONTGOMERY

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RX: 2230

Maryluz Fuentes, M.D.
(334) 286-3444
DEA #BF 6451520
AL #24127

Name Jennifer Pygao Date 5-18-10
Address _____

R

Gipitan 10mg
Dose 30
Sig + po qd
Carol Stewart
M.D. or C.R.N.P.

Label all prescriptions

Product Selection: Permitted

Refill: 1/2/3 5 PRN NR

Dispense As Written

M.D. or C.R.N.P.

5-25-10

Drawing levels are made
Taking vit B-12 w/ y
Gipitan 10mg qd
vit. D 5000u a day qd
P: RTC in 1 wk for next
Vit B-12 w/ y

Carol Stewart, M.D.

6-1-10

CBC, Thyroid profile, vit B, vit B-12
Lipid Panel, Liver panel drawn
Labkey

Carol Stewart, M.D.

VOID
NOT
DONE
CD

Improving Your Cholesterol with Diet and Exercise

What are the good and bad types of cholesterol?

Low-density lipoprotein (LDL) is “bad” cholesterol. The more LDL you have in your blood, the higher your risk of heart disease. High-density lipoprotein (HDL) is “good” cholesterol. This type lowers your risk of heart disease.

Triglycerides are another type of fat in your blood. People with diabetes and those who are at risk of diabetes tend to have high triglycerides. When you make changes in your lifestyle to improve your cholesterol levels, you want to lower LDL, raise HDL, and lower triglycerides.

What are the best ways to improve my cholesterol?

There are many things you can do to improve your cholesterol, but some things work better than others. These are some of the best changes you can make:

- **Eat less saturated fats.** There are two kinds of saturated fat. One occurs naturally in animal products and some plant foods (such as coconut and palm kernel oil). The other kind is a man-made saturated fat called *trans* fat. *Trans* fats are used in margarine and many snack foods. You should limit the amount of natural saturated fats you eat, but completely avoid *trans* fats. Read the ingredients on food labels. If you see “partially hydrogenated” or “hydrogenated” oils, that means it has *trans* fats. It is important to remember that a food

can have small amounts of *trans* fats even if the label says it doesn’t. The only way to be sure is to read the ingredients.

- **Eat more unsaturated fats.** Most fats in vegetables, grains, and tree nuts are unsaturated. The two kinds of unsaturated fats are monounsaturated and polyunsaturated. These are better for you than saturated fats and should be used to replace the saturated fats you use in cooking as much as possible. For example, you can use olive oil or canola oil in cooking instead of butter.

- **Eat more nuts.** Have a small handful (1 to 2 oz) of almonds, walnuts, hazelnuts, brazil nuts, or pecans once a day instead of some other snacks. Peanuts are not as good for you as these tree nuts. Nuts are high in calories, so be careful not to eat too many.

- **Eat more high-fiber foods.** Good sources include vegetables and whole grains, such as oat bran, whole oats, beans, peas, and flax seed.

- **Eat more soy protein.** Get more protein from plant sources, such as soy, instead of from meat. Tofu and soy protein shakes are two easy ways to add soy to your diet.

- **Eat more fish.** Oily fish, such as salmon, tuna, mackerel, and sardines, are best. Fish that are caught in the wild are better for you than fish that are raised on farms. Have one or two 6-oz servings each week.

- **Drink alcohol in moderation.** Men should have up to two drinks per day, and women should have one. More than this can be bad for you. A drink is 1.5 oz of 80-proof liquor, 5 oz of wine, or 12 oz of beer or wine cooler.



AMERICAN ACADEMY OF
FAMILY PHYSICIANS

continued 

Improving Your Cholesterol *(continued)*

What about the Mediterranean diet?

The Mediterranean diet is an eating plan that improves cholesterol and lowers your risk of dying early. A big change for most people is to use olive oil instead of other fats and oils. Other parts of the Mediterranean diet include:

- Eating less red meat, dairy products, eggs, and poultry
- Eating more fish, tree nuts, vegetables, and whole grains
- Drinking wine in moderation.

Can supplements help?

Yes, there are other things you can add to your diet that can help your cholesterol:

• **Plant sterols and stanols.** These can be found in fortified spreads, such as Promise Activ. Use up to two tablespoons per day instead of margarine or butter. Benecol chews are another way to add plant stanols to your diet. Benecol spreads contain small amounts of *trans* fats in addition to stanols, so it's best to make other choices.

• **Red yeast rice.** This is a traditional Chinese seasoning that has effects

similar to "statin" cholesterol medicines. Some people can even use red yeast rice instead of statin medicines. Talk to your doctor about whether this is a good idea for you.

• **Fish oil.** If you don't eat fish regularly, you can take fish oil supplements with at least 1,000 mg of the fatty acids EPA and DHA.

Does exercise help?

Yes. Aerobic exercise is one of the few things proven to raise HDL. You need to exercise for at least 120 minutes each week to get the most benefit.

May 2010

<i>Lifestyle change</i>	<i>Improves LDL</i>	<i>Improves HDL</i>	<i>Improves triglycerides</i>
Replace saturated and <i>trans</i> fats with monounsaturated and polyunsaturated fats	✓		✓
Eat more tree nuts	✓		
Eat more high-fiber foods	✓		
Replace some red meat and other animal proteins with soy protein	✓		
Drink alcohol in moderation		✓	
Eat more fish or take fish oil supplements			✓
Eat a Mediterranean diet	✓	✓	✓
Use spreads with plant sterols or stanols instead of margarine or butter	✓		
Use red yeast rice	✓		
Get at least 120 minutes of aerobic exercise per week		✓	

This handout is provided to you by your family doctor and the American Academy of Family Physicians. Other health-related information is available from the AAFP online at <http://familydoctor.org>.

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Improving Your Cholesterol *(continued)*

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Drink alcohol in moderation		✓	
Eat more fish or take fish oil supplements		✓	✓
Eat a Mediterranean diet	✓	✓	✓
Use spreads with plant sterols or stanols instead of margarine or butter	✓		
Use red yeast rice		✓	
Get at least 120 minutes of aerobic exercise per week		✓	

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May 2010

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Replace some red meat and other animal proteins with soy protein	✓		
Drink alcohol in moderation		✓	
Eat more fish or take fish oil supplements			✓
Eat a Mediterranean diet	✓	✓	✓
Use spreads with plant sterols or stanols instead of margarine or butter	✓		
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Get at least 120 minutes of aerobic exercise per week		✓	

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AUBURN UNIVERSITY MONTGOMERY

STUDENT HEALTH CENTER

P.O. Box 244023

Montgomery AL 36124

7461 East Drive 36117

Office (334) 244-3281 Fax (334) 244-3396

This is to verify that a copy of the following records and/pr lab results were given to

Jennifer H. Dyess
Print Patient's Name

on 5-18-10
Date

Description of records(s) copied: Lab work

Jennifer H. Dyess
Patient's Signature

5-18-10

Date

Carol Stewart, C.R.N.P.
Lic. #1-045437
Rx: 1178

AUBURN MONTGOMERY
STUDENT HEALTH CENTER
P. O. Box 244023
Montgomery, AL 36124-4023
(334) 244-3281

Ramona Lazenby, C.R.N.P.
Lic. #1-039092
Rx: 0703

Elizabeth H. McIntosh, C.R.N.P.
Lic. #1-096551
RX: 2230

Maryluz Fuentes, M.D.
(334) 286-3444
DEA #BF 6451520
AL #24127

Name Jennifer Dye Date 5-3-10
Address _____

R

Cynda La Long
Pres. 30
Sig. T. P. 0.00 d
10

Product Selection Permitted

Label all prescriptions

Refill: 1 2 3 5 PRN NR

Dispense As Written

5-18 ~~10~~ 10

2m Jan review of 7th wk.
Unchanged H₁H₂, Vit D, Vit B12
and Cholesterol.

- P: Vit B-12 1m 7 wk x 6 wks → given 6 wks
2) Vit D 5000 mcg qd
3) mult. vit c 1 tab
4) Lipitor 10mg qd
5) Will repeat 7th wk in 6mo.

Leptin up

CBC

TSH

Vit B12

Vit D

Lipid Panel

Cholesterol

Carol Stewart, C.R.N.P.
Lic. #1-045437
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BURN MONTGOMERY
STUDENT HEALTH CENTER
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Ramona Laze, C.R.N.P.
Lic. #1-039092
Rx: 0703

Elizabeth H. McIntosh, C.R.N.P.
Lic. #1-096551
RX: 2230

Marilyn Fuentes, M.D.
(334) 286-3444
DEA #BF 6451520
AL #24127

Name

Address

Date

R

Lymbratta 30 mg

Disp: 14

Sig: 1 p.o. q.d. x 14 days

Loewent

M.D. or C.R.N.P.

Product Selection Permitted

Label all prescriptions

Refill: 1 2 3 5 PRN NR

Dispense As Written

M.D. or C.R.N.P.

**AUM NURSING CARE CENTER
PROBLEM VISIT RECORD**

DATE: 4-22-10 TIME: 2:30 PT. HISTORY REVIEWED/UPDATED: /

PATIENT NAME: Jennifer Dugan DOB: AGE:

PRESENT COMPLAINT: 90% decrease amt of stress at work and at home. Has become unable to cope with. Crisis easily, feels depressed once

MEDICATIONS:						LMP:
Temp	Pulse	Resp	B/P	HT	WT	Allergies
						PCW

INITIAL VISIT		RETURN VISIT
Skin	<u>anxious. States she needs</u>	<u>5-3-10</u>
Sinuses	<u>help at this point. Was</u>	<u>5! Doing well</u>
Ears	<u>attending church when</u>	<u>on Lyndatta</u>
Eyes	<u>was a source of support</u>	<u>Things at</u>
Nose	<u>for her but has stopped</u>	<u>home fairly</u>
Throat	<u>drinking. Has only cried</u>	<u>calm slight</u>
Neck/Back	<u>disrupted from HS tried</u>	<u>new.</u>
Heart	<u>year and a half for</u>	<u>A: Depressive</u>
Lungs	<u>college. This is also very</u>	<u>P: Cont. Lynd</u>
Abdomen	<u>upsetting to her. States</u>	<u>↑ to 60mg &</u>
GU/GI	<u>she was on Gynex at</u>	<u>completion</u>
Extremities	<u>one time but stopped</u>	<u>30mg.</u>
<u>taking when Dr. Cox closed</u>		<u>Stewart. N</u>
<u>this office</u>		<u>(B2R)</u>

DIAGNOSIS:	TESTS	RESULTS
<u>Depression</u>		

PLAN: Lyndatta 30mg
P.O. X 2 WKS with R/N
RTC in 2 WKS

CALL BACK:

PRACTITIONER SIGNATURE: N. Stewart, MD STAFF SIGNATURE:

AUDIT DATE: COMMENTS:

PHYSICIAN SIGNATURE:



BlueCross BlueShield
of Alabama

BLUE CROSS
PREFERRED
CARE

Subscriber Name
JENNIFER H DYESS
Contract Number
PPA851277827

AUBURN UNIVERSITY

Group Number 37655
Effective Date 01-01-2007
Rx BIN Number 004915

HEALTH

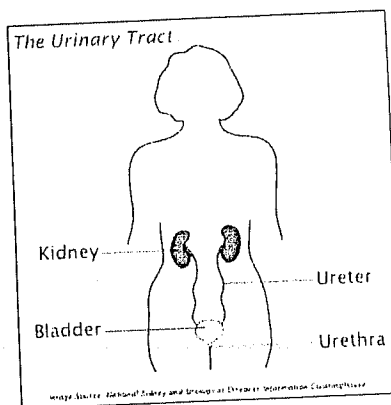
PAC



URINARY TRACT INFECTION

[Signature]

What is a urinary tract infection?
It is an infection in the bladder and/or kidneys caused by a bacteria. It is much more common in women than in men.
Bladder Infection This is an infection of the lining of the bladder caused by bacteria.
Kidney Infection This is an infection of the kidney(s), also caused by bacteria, and is more serious.



Which Problem Do I Have?	What Antibiotic Do I Need?	What other Medicines Do I Need?
Bladder Infection	<i>[Signature]</i>	<i>[Signature]</i>
Kidney Infection	<i>[Signature]</i>	<i>[Signature]</i>
	Take all of the Medicine!!!	Take only as Instructed!

What Are The Symptoms?	How Can I Get Well?	REMEMBER
-Needing to urinate often and in small amounts -Burns or hurts to urinate -Lower back pain and maybe even fever -Cloudy, bad-smelling urine	<u>Ibuprofen (Advil, Motrin)</u> Take 2-4 tablets every 6-8 hours for relief of pain. Drink 10-12 full glasses of water Don't drink alcohol or coffee and don't eat spicy foods Avoid douching and use pads instead of tampons.	1. Take antibiotic until it is all gone! 2. Drink plenty of fluids. 3. Wipe front to back each time you go to the bathroom
How Do I Keep From Getting Another Urinary Infection? -Wipe from front to back each time you go to the bathroom -Urinate before and after sexual activity -Drink more water and juices		

Do I need a follow-up appointment? ___ no ☒ yes, in 10 days

Call 244-3281 to schedule an appointment.

Revised by AUM-
NCC 2/26/08



BlueCross BlueShield
of Alabama



BLUE CROSS
**PREFERRED
CARE**

An Independent Licensee of the Blue Cross and Blue Shield Association.

JENNIFER H DYESS

Contract Number

PPA851277827

Group Number

37655
HEALTH

R

Effective Date

01-01-2007

BS Plan BC Plan

510 010
PAC

AUBURN UNIVERSITY

- Medical providers file claims to the Blue Cross and/or Blue Shield Plan serving the area where the services are rendered. All other claims (including member filed) should be sent to Blue Cross and Blue Shield of Alabama at 450 Riverchase Parkway East, Birmingham, AL 35244-2858.
- For Preadmission Certification call 1 800 248-2342 or 205 988-2245 in Birmingham.
- Providers outside Alabama call your local Blue Cross and/or Blue Shield Plan for claim payment information and call 1 800 517-6425 for verification of benefits and eligibility.
- Members call 1 800 810-2583 for information about the nearest PPO provider.

CUSTOMER SERVICE
1 800 633-8062

All Blue Cross and Blue Shield Plans are Independent Licensees of the Blue Cross and Blue Shield Association.
ENR-407 (Rev. 6-2004)

**AUM NURSING CARE CENTER
PROBLEM VISIT RECORD**

DATE: 2/26/08 TIME: 1410 PT. HISTORY REVIEWED / UPDATED: /

PATIENT NAME: Jennifer Dyes DOB: AGE:

PRESENT COMPLAINT: Urge to urinate and pain in suprapubic area. & pain on urination. & back pain (lower). (Has noticed bladder leakage & hyst.) & blood, but has noticed an occasional odor.

MEDICATIONS: Efferon Zyrtec LMP:

Temp	Pulse	Resp	B/P	HT	WT	Allergies
<u>98.8</u>						<u>PCN</u>

INITIAL VISIT		RETURN VISIT
Skin		3/12/08 1040 AM completed all of medication. feels better @ this time but may be interested in contacting a urologist due to leakage. AM UA dipstick today see lab MM
Sinuses		
Ears		
Eyes		
Nose		
Throat		
Neck/ Back	Ø CVA tenderness	
Heart		
Lungs		
Abdomen		
GU/GI		
Extremities		

DIAGNOSIS:	TESTS	RESULTS
<u>UTI</u>	<u>UA dipstick</u>	<u>see lab</u>
	<u>urine c/s</u>	<u>see lab</u>

PLAN: Cipro 500mg BID
x 10 days

CALL BACK: 2/29/08 @ 235
call NCC. AM left message to

CIPROFLOXACIN
500MG
20 Tablets
NDC: 51855-118-52
Lot: H00230701
Exp: 10/31/2008

PRACTITIONER SIGNATURE: [Signature]

STAFF SIGNATURE: [Signature]

AUDIT DATE: COMMENTS:

PHYSICIAN SIGNATURE:

**AUM NURSING CARE CENTER
PROBLEM VISIT RECORD**

DATE: 6/20/07 TIME: 10:20 PT. HISTORY REVIEWED / UPDATED 1 / 1
 PATIENT NAME: Jennifer Dyer DOB: _____ AGE: _____

PRESENT COMPLAINT: Neck to ^{upper} lower back pain, radiating to chest. Initially thought it was stress but played "chicken" 2 weeks ago. Burning sensation. Pain is better today. Difficulty moving head up & down.

EDICATIONS: Allevi / Advil for pain, Tylenol PRN, Tytorin LMP: partial hyst.

Temp	Pulse	Resn	B/P	HT	WT	Allergies

PCN

INITIAL VISIT		RETURN VISIT
Skin	Pain since Sunday, seems to be progressing.	
Sinuses	Pain meds help some but having breakthrough.	
Ears	Sleep disruptions.	
Eyes		
Nose	to J-Dox needs Jambwand	
Throat		
Neck/ Back		
Heart		
Lungs		
Abdomen		
GU/GI		
Extremities		

DIAGNOSIS:	TESTS	RESULTS
<u>musculoskeletal pain in neck</u>		

PLAN:
1) Ibuprofen 800mg tid prn
2) Flexaid 10mg 1/2-1 tabs tid prn
3) A/C Mandy

CALL BACK:
7/20/07 - ph is out of the office until 7/24/07
7/20/07 - Spoke to ph states she has improved a bit, does not have to complete rest. Will R/C if need to. C

PRACTITIONER SIGNATURE: [Signature] STAFF SIGNATURE: [Signature]

AUDIT DATE: 7/20/07 COMMENTS: _____
 PHYSICIAN SIGNATURE: [Signature]

IBUPROFEN 800MG Tablets, USP
 30 Tablets
 NDC: 51655-051-24
 Lot: H00260502
 Exp: 08/31/2007

CYCLOBENZAPRINE 10MG Tablets
 15 Tablets
 NDC: 51655-440-54
 Lot: H00260502
 Exp: 10/31/2007

Carol Stewart, C.R.N.P.
Lic. #1-045437
Rx: 1178

AUM
NURSING CARE CENTER
P. O. Box 244023
Montgomery, AL 36124-4023
(334) 244-3281

Ramona Lazenby, C.R.N.P.
Lic. #1-039092
Rx: 0703

Vivian Hamlett, M.D.
(334) 409-2800
DEA #BH 1075197
AL #13467

Maryluz Fuentes, M.D.
(334) 409-2800
DEA #BF 6451520
AL #24127

Name Jennifer Dyer Date 11-7-03
Address _____

R

Dextroprop 800mg
Disp # 30
sig: $\dot{\bar{p}}$ p.o. 3-4x/d prn

Carol Stewart, M.D. or C.R.N.P.

Label all prescriptions

Refill: 1 2 3 5 PRN NR

Product Selection Permitted

Dispense As Written

_____, M.D. or C.R.N.P.

URINARY TRACT INFECTIONS

My Name: Jennifer Reyes
 Date: 11-7-03

The Practitioner I saw today:
Carol Stewart, CRNP
Sandra Ivey, CRNP
Ramona Lazenby, CRNP

What Is a Urinary Tract Infection?

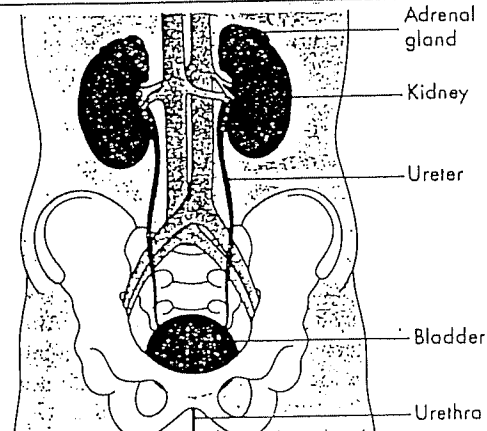
It is an infection in the bladder and/or kidneys caused by bacteria.
 It is much more common in women than in men.

Bladder Infection

This is an infection of the lining of the bladder caused by bacteria.

Kidney Infection

This is an infection of the kidney(s), also caused by bacteria, and is more serious.



Which Problem Do I Have?	What Antibiotic Do I Need?	What Other Special Medicines Do I Need?
Bladder Infection	<u>Bactrim</u>	
Kidney Infection	<u>DS + PID</u> <u>2 times a day</u>	
	TAKE ALL DON'T MISS ANY!!!	TAKE ONLY AS INSTRUCTED!

What Are the Symptoms?

- Needing to urinate often and in small amounts
- Burns or hurts to urinate
- Hurts below the tummy
- Lower back pain and maybe even fever
- Cloudy, bad-smelling urine

How Do I Keep From Getting Another Urinary Infection?

- Wipe from front to back each time you go to the bathroom
- Urinate before and after sexual intercourse
- Drink more water and juices

How Can I Get Well?

Ibuprofen (Advil, Motrin)

Take 2 - 4 tablets every 6 - 8 hours for relief of pain

Drink 10 - 12 full glasses of water

Take a warm tub bath to help relieve the pain

Don't drink alcohol or coffee and don't eat spicy foods

Avoid douching and use pads instead of tampons

Remember...

1. Take antibiotic until it is all gone!
2. Drink plenty of fluids
3. Wipe front to back each time you go to the bathroom

Do I need a follow-up appointment? ☐ no ☐ yes, in ____ days

AUM Nursing Care Center Phone # 244-3281

(Patients seen from 8:15 am to 4:30 pm, Monday - Friday)

**AUM NURSING CARE CENTER
PROBLEM VISIT RECORD**

DATE: 11/7/03 TIME: 11:00 PT. HISTORY REVIEWED / UPDATED: 1 / 1

PATIENT NAME: Jennifer Dyer DOB: _____ AGE: _____

PRESENT COMPLAINT: Back pain until yesterday afternoon, initially felt like a pull that has progressively worsened. Problems with urination.

MEDICATIONS: Prozac, tylenol, appetite suppressant LMP: 3 Partial

Temp	Pulse	Resp	B/P	HT	WT	Admission
98.4						PCN

INITIAL VISIT

INITIAL VISIT	RETURN VISIT
Skin <u>W.O</u>	
Sinuses	
Ears	
Eyes	
Nose	
Throat	
Neck/Back <u>⊕ CVA tenderness; ⊕ pain</u>	
Heart <u>low power murmur / S2</u>	
Lungs <u>clear & movement, straight</u>	
Abdomen <u>leg raised ⊕! ⊕ pain</u>	
GU/GI <u>on toilet</u>	
Extremities	

DIAGNOSIS	TESTS	RESULTS
<u>LUTE</u>	<u>UA (lipstick) see page</u>	
<u>Lower back pain</u>		

PLAN:
 1) Bactrim DS
p.o BID X 10 days
 2) Ibuprofen 800mg
800mg
 3) 800mg 3-4x/day
 4) TYLENOL 10 days
 PRACTITIONER SIGNATURE: [Signature] STAFF SIGNATURE: [Signature]

CALL BACK: 11/20/03 @ 1436 - left message to call NCC. pm

Sulfamethoxazole and Trimethoprim 800mg/160mg
 20 Tablets
 NDC: 51655-112-52
 Lot: 481773
 Exp: 09/30/2004

IBUPROFEN 800MG
 30 Tablets
 NDC: 51655-051-24
 Lot: 229051
 Exp: 07/31/2005

AUDIT DATE: _____ COMMENTS: _____

**AUM NURSING CARE CENTER
PROBLEM VISIT RECORD**

DATE: 6/9/03 TIME: _____ PT. HISTORY REVIEWED / UPDATED: _____ AGE: _____

PATIENT NAME: Jennifer Sykes DOB: _____
PRESENT COMPLAINT: went to beach over weekend, hit a cinder block divider with "little toe". Area of skin continues to separate when pt gets in shower. Last TD 1998.

MEDICATIONS: Prozac weekly LMP: _____

Insulin	Penicillin	Other	BP	HT	WT	ABG

INITIAL VISIT		RETURN VISIT
Skin	<u>Horizontal laceration of 5th digit of foot. Redness on tissue edges. Wound edges approximated.</u>	
Sinuses		
Ears		
Eyes		
Nose		
Throat		
Neck/Back		
Heart		
Lungs		
Abdomen		
GU/GI		
Extremities		

DIAGNOSIS	TESTS	RESULTS
<u>Horizontal laceration of 5th digit of foot</u>		

PLAN:
 1) Keep foot clean & dry
Careful to avoid
W of signs of infection
(redness, swelling, tenderness or discharge)
 PRACITIONER SIGNATURE: [Signature]

CALL BACK: _____
 STAFF SIGNATURE: [Signature]

COMMENTS:

URINARY TRACT INFECTIONS

My Name: Jennifer Dyson
 Date: 4-28-03

The Practitioner I saw today:
Carol Stewart, CRNP
Saundra Ivey, CRNP
Ramona Lazenby, CRNP

What Is a Urinary Tract Infection?

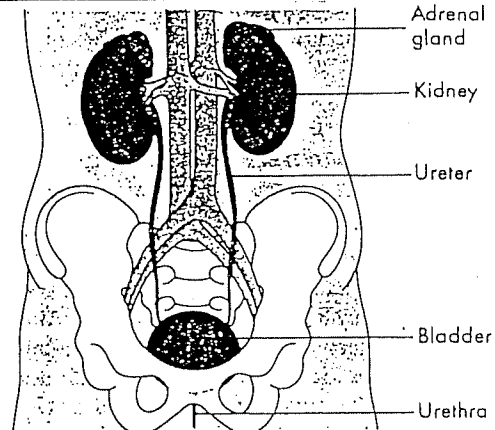
It is an infection in the bladder and/or kidneys caused by bacteria.
 It is much more common in women than in men.

Bladder Infection

This is an infection of the lining of the bladder caused by bacteria.

Kidney Infection

This is an infection of the kidney(s), also caused by bacteria, and is more serious.



Which Problem
Do I Have?

Bladder Infection

Kidney Infection

What Antibiotic Do
I Need?

Bacburn DS
1 good 2
times a day
for 3 days
TAKE ALL DON'T MISS ANY!!!

What Other Special
Medicines Do I Need?

TAKE ONLY AS INSTRUCTED!

What Are the Symptoms?

- _ Needing to urinate often and in small amounts
- _ Burns or hurts to urinate
- _ Hurts below the tummy
- _ Lower back pain and maybe even fever
- _ Cloudy, bad-smelling urine

How Do I Keep From Getting Another Urinary Infection?

- _ Wipe from front to back each time you go to the bathroom
- _ Urinate before and after sexual intercourse
- Drink more water and juices

How Can I Get Well?

Ibuprofen (Advil, Motrin)

Take 2 - 4 tablets every 6 - 8 hours for relief of pain

Drink 10 - 12 full glasses of water

Take a warm tub bath to help relieve the pain

Don't drink alcohol or coffee and don't eat spicy foods

Avoid douching and use pads instead of tampons

Remember...

1. Take antibiotic until it is all gone!
2. Drink plenty of fluids
3. Wipe front to back each time you go to the bathroom

Do I need a follow-up appointment? ☐ no ☐ yes, in ____ days

AUM Nursing Care Center Phone # 244-3281
 (Patients seen from 8:15 am to 4:30 pm, Monday - Friday)

**AUM NURSING CARE CENTER
PROBLEM VISIT RECORD**

DATE: 4/28/03 TIME: 0935 PT. HISTORY REVIEWED / UPDATED: 1 / 1 AGE:

PATIENT NAME: Jennifer Dyess DOB:

PRESENT COMPLAINT: Symptoms since yesterday, frequency & minimal output. Pain @ the end of urination. (+) Urgency. (+) back pain but just started yoga

MEDICATIONS: Zyrtec, Bentoul, Prozac LMP: 2 yrs.

Temp	Pulse	Resn	BP	HR	WT	
98.1						PCN

INITIAL VISIT	RETURN VISIT
Skin	5-2-03 10 ³⁰ am
Sinuses	S: stated all symptoms have resolved
Ears	UA dip sticked
Eyes	→ see Dr
Nose	A: UTI resolved
Throat	P: Rtc pr
Neck/ Back	
Heart	
Lungs	
Abdomen	
GU/GI	
Extremities	

DIAGNOSIS:	TESTS	RESULTS
UTI	UA (dipstick)	see Dr

PLAN:
 1) Bactrim DS 1
q.o BID x 3 days
 2) Rtc in 3 days
for rev.
 3) Dr. long start
CRP
map Stewart

CALL BACK:

STAFF SIGNATURE: [Signature]

PRACTITIONER SIGNATURE: [Signature]

SULFAMETHOXAZOLE AND
TRIMETHOPRIM 800MG/160MG
6 Tablets
NDC: 51655-112-87
Lot: 457843
Exp: 10/31/2003

**AUM NURSING CARE CENTER
PROBLEM VISIT RECORD**

DATE: 11-28-00 TIME: 1 PT. HISTORY REVIEWED / UPDATED: 1 / 1

PATIENT NAME: Jennifer Dyer DOB: _____ AGE: _____

PRESENT COMPLAINT: 9/10" Allergic symptoms since 10:00 PM

stuffy, runny nose, & cough

& fever. Has taken Zyrtec, sinus Tylenol; no other

MEDICATIONS: Nasorex; Zyrtec; LMP: _____

Temp	Pulse	Resp	BP	HR	WT	Allergies
99			124/74			PCN

INITIAL VISIT	RETURN VISIT
Skin <u>W. dry</u>	
Sinuses <u>& pressure</u>	
Ears <u>TM's intact; & redness</u>	
Eyes <u>Watery, red.</u>	
Nose <u>Congested; Clear discharge (Runny)</u>	
Throat <u>Red, & exudate</u>	
Neck/ Back <u>& Cervical adenopathy</u>	
Heart <u>S₁S₂ S₃ @</u>	
Lungs <u>Clear DAD</u>	
Abdomen	
GU/GI	
Extremities	

DIAGNOSIS:	TESTS	RESULTS
<u>1) Possible Viral URI</u>		

PLAN: 1) Sudafed 60mg P.O. q 4-6 prn

2) Cont. Nasorex

3) Cont. Zyrtec

4) RTC if symptoms not improving

PRACTITIONER SIGNATURE: Christine CRNP STAFF SIGNATURE: _____

AUDIT DATE: _____ COMMENTS: _____

PHYSICIAN SIGNATURE: _____

**AUM NURSING CARE CENTER
PROBLEM VISIT RECORD**

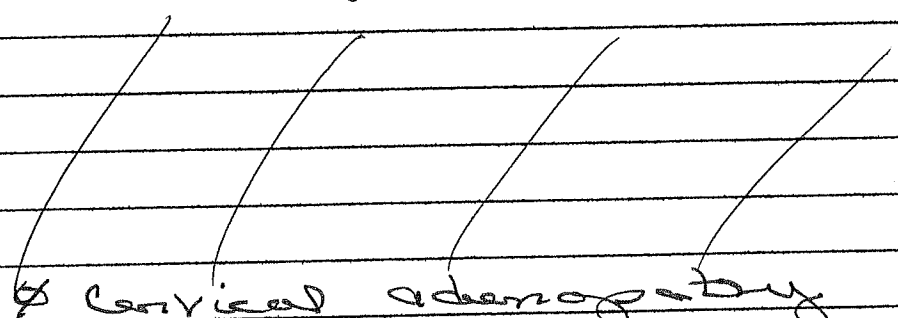
DATE: 8-18-00 TIME: 2 PM PT. HISTORY REVIEWED / UPDATED:

F: NT NAME: Jennifer Dyer DOB: AGE: 33

PRESENT COMPLAINT: Begins SOB X 3 days. No h/o asthma,
& smoking. ↑ exercise, & severe BCP h/o anxiety
X 8 yrs stopped taking Paxil 1 mo ago

MEDICATIONS: BCP, Zyrtec LMP: 7-10-00

Temp	Pulse	Resp	B/P	HT	WT	Allergies
	72	20				PCN

INITIAL VISIT						RETURN VISIT
Skin	<u>Warm? Dry</u>					
Sinuses						
Ears						
Eyes						
Nose						
Throat						
Neck/ Back	<u>& Cervical adenopathy</u>					
Heart	<u>S1S2S3 (m)</u>					
Lungs	<u>Clear bil; & wheezing RR 20/min</u>					
Abdomen	<u>& supple</u>					
GU/GI						
Extremities						

DIAGNOSIS	TESTS	RESULTS
<u>SOB? w/ anxiety</u>		
<u>? anxiety</u>		

PLAN:
 1) RTC Monday if symptoms don't
improve

2) if symptoms worse
over weekend, go to Primed
MDR.

CALL BACK:
8/24/00. Spoke to pt. states she is feeling
better, & problem at times. Advising her to
RTC per her. (CR)

ACFTIONER: Lana Stewart CRNP STAFF SIGNATURE:

AUDIT DATE: COMMENTS:

PHYSICIAN SIGNATURE:

**AUM NURSING CARE CENTER
PROBLEM VISIT RECORD**

DATE: 2/13/98 TIME: 1410 PT. HISTORY REVIEWED / UPDATED 1 / 1

PATIENT NAME: Jennifer Reyes DOB: 10/13/66 AGE:

PRESENT COMPLAINT: Pt. penetrated skin w/ electric staple in 3rd finger @ hand. State lost Td Booster '90. No active bleeding @ present. See immun sheet for Td Booster to be given today Th

MEDICATIONS: None

Temp	Pulse	Resp	B/P	HT	WT	Allergies
<u>98.1</u>	<u>96</u>	<u>20</u>	<u>120/72 @</u>	<u>5'2"</u>	<u>170 1/2</u>	<u>PCN</u>

INITIAL VISIT		RETURN VISIT
Skin	<u>hpd</u>	
Sinuses	<u>—</u>	
Ears	<u>—</u>	
Nose	<u>—</u>	
Throat	<u>—</u>	
Neck/ Back	<u>—</u>	
Heart	<u>—</u>	
Lungs	<u>—</u>	
Abdomen	<u>—</u>	
GU/GI	<u>—</u>	
Extremities	<u>2 pinpoint puncture wounds @ base of 3rd finger + 9cm third palm of hand. Area surrounding palm w/ ecchymosis in surrounding tissue. No active bleeding or swelling noted. Site cleaned w/ H₂O₂ using clean 2x2's; Mupirocin oint. applied + covered w/ Band-aids (2). Th</u>	
DIAGNOSIS:	<u>Puncture wounds (2) base of 3rd finger @ hand + palm</u>	TESTS
		RESULTS

PLAN: Tetanus Booster - see immun sheet
Clean + cover w/ - use H₂O₂ + apply Mupirocin + Bandaid done in
RTC if wound becomes red, swollen
Teaching reinforced re: Td Booster + pt given VIS.

PRACTITIONER SIGNATURE: Sandra Tracy STAFF SIGNATURE: Lissa Milan, RN

AUDIT DATE: COMMENTS:

PHYSICIAN SIGNATURE: