

Auburn Montgomery Warhawk Health Services

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

Date: 01/17/24

PATIENT: EASTERWOOD, DORA **DOB:** 08/11/1977 **Gender:** FEMALE **MRN:** 3254 **AGE:** 46 Years

VISIT TYPE: Office Visit New

CHIEF COMPLAINT: Patient presents with c/o pain to left thumb. Reports pain to base of left thumb began approximate 3-4 days ago. She works in grounds keeping and thought she may have a thorn in it. Yesterday, she decided to see if she could "dig" it out of her skin, with no success. Last evening her left thumb began swelling and pain, with redness. No discharge or drainage. Denies fever.

VITALS: BP: 151/88 **Site:** LEFT ARM **Position:** SITTING **Pulse:** 98; **Temp:** 99.2; **Resp:** 16; **Ht:** 65.5 in.; **Wt:** 174 lbs.;
BMI: 28.51; **Pulse Oximetry:** 97%

PAST MEDICAL HISTORY: Hypertension; Hypothyroidism; Hypercholesterolemia

PAST SURGICAL HISTORY: Total Hysterectomy

SOCIAL HISTORY: Does not use tobacco, but is a former smoker; Does not use recreational drugs; uses ETOH socially on occasion.

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; 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. Left thumb with mild swelling, pain with manipulation, and redness. No obvious foreign body noted.

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

PSYCHIATRIC: Appropriate mood and affect.

ASSESSMENT:

L03.012 - CELLULITIS OF LEFT FINGER (PRIMARY)

PLAN:

Referral: EMIC, East Montgomery Imaging Center (Radiology)

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Instructions: XRAY LEFT HAND, R/O RETAINED FOREIGN BODY BASE OF LEFT THUMB

clindamycin HCl 300 mg capsule

Refills: 0 Qty: 40 CAPSULE(S)

Instructions: TAKE 1 CAPSULE (300 MG) BY ORAL ROUTE EVERY 6 HOURS FOR 10 DAYS.

Patient was advised to elevate hand, keep warm and dry and wear gloves for protection while working outdoors. Medication prescribed, to be take for 10 days. However, if no improvement by Friday, patient is it return to clinic for reevaluation. Also, X-ray was suggested, however patient requests to wait to see in medication resolves the problem. I have given patient an order for an X-ray, she is to go Friday morning to have X-ray preformed if symptoms have not improved. She is to notify clinic if she goes so we can get X-ray results. Patient verbalized understanding and agreement to this plan, will return Friday if symptoms not improved, or sooner if symptoms worsen.

Electronically signed by Joyce Williford, CRNP on 01/17/24 11:44 AM

Handwritten signature of J. Williford CRNP in black ink.