

Auburn Montgomery Warhawk Health Services

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

Date: 05/11/23

PATIENT: WALDROFF, BARRETT **DOB:** 01/12/2015 **Gender:** MALE **MRN:** 347 **AGE:** 8 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: abdominal pain, nausea, vomiting.

HISTORY OF PRESENT ILLNESS: Barrett is a 8 yo male accompanied by his mother. He was sent home from school with abdominal pain and 2-3 episodes of N/V. He states his nausea is better and has been able to eat and hold down his lunch. He points to his left upper quadrant when asked where his stomach hurts. His last BM was yesterday and he states it was normal. His mom states he holds his poop for several days before going to the bathroom and that it is large and clogs up the toilet almost every time he goes. She states he has been having intermittent abdominal pain for the past few months. Typically, it is lower abdominal pain around his waist. She has recently taken him to a pediatric urologist in Birmingham and his work up was negative.

VITALS: BP: 117/66 **Site:** RIGHT ARM **Position:** SITTING **Pulse:** 64; **Temp:** 97.8; **Ht:** 51.3 in.; **Wt:** 65.5 lbs.; **BMI:** 17.49; **Pulse Oximetry:** 99%

GROWTH PERCENTILES:

Weight/Age: 72

Height/Age: 53

Weight/Height: N/A

BMI/Age: 78

Head Circumference/Age: N/A

ALLERGIES: No Known Drug Allergies

MEDICATIONS:

ProAir HFA 90 mcg/actuation aerosol inhaler (2 puffs every 4-6 hrs as needed)

albuterol sulfate 2.5 mg/3 mL (0.083 %) solution for nebulization (INHALE 3 MILLILITERS (2.5 MG) BY NEBULIZATION ROUTE 3 TIMES PER DAY as needed for sob/wheezing)

PAST MEDICAL HISTORY: History of motion sickness, exercise-induced asthma.

PAST SURGICAL HISTORY: none

SOCIAL HISTORY: Lives with both parents. Attends school.

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.

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

MUSCULOSKELETAL: Normal range of movement x 4 extremities

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

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

PSYCHIATRIC: Appropriate mood and affect.

ORDERS:

UA (1 unit(s)): In-House Lab

STREP A (1 unit(s)): In-House Lab

RESULTS:

UA:

Appearance: clear

Color: yellow

Glucose: Negative

Bilirubin: Negative

Ketones: Negative

Sp: 1.015

Blood: Negative

pH: 7

Protein: Negative

Urobilinogen: Negative

Nitrites: Negative

Leukocytes: Negative

STREP A:

Value: Negative

ASSESSMENT:

R10.9 - UNSPECIFIED ABDOMINAL PAIN (PRIMARY)

K59.00 - Constipation, unspecified

J35.1 - HYPERTROPHY OF TONSILS

PLAN:

Referral: EMIC, East Montgomery Imaging Center (Radiology)

No Special Instructions

Follow up with x-ray results. Recommend stool softener daily for constipation.

Electronically signed by Lindsey Barton, CRNP on 05/11/23 3:31 PM

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A handwritten signature in blue ink that reads "J. Barton, CRP". The signature is written in a cursive style with a large initial "J" and a stylized "B".