

Auburn Montgomery Student Health Services

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

Date: 06/18/19

PATIENT: BRASWELL, JANICE **DOB:** 10/08/1973 **Gender:** FEMALE **MRN:** 418 **AGE:** 45 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: Headache

Symptoms: Patient reports constant headache x 2-3 days. Patient had head injury x 6-7 months ago and her BP and headaches have been worse. She reports an appointment with her PCP yesterday who started her on amlodipine.

Her last visit with neurologist was about 1.5 weeks ago.

Patient denies blurred vision or double vision. Reports dizziness.

VITALS: BP: 158/100 **Site:** LEFT ARM **Position:** SITTING **Pulse:** 106

ALLERGIES: Penicillins

MEDICATIONS:

Prilosec 10 mg oral suspension, delayed release

Reglan 10 mg tablet

amlodipine 5 mg tablet (Not sure of mg.)

cefdinir 300 mg capsule (TAKE 1 CAPSULE (300 MG) BY ORAL ROUTE EVERY 12 HOURS)

clonidine HCl 0.1 mg tablet

lorazepam 0.5 mg tablet

methocarbamol 750 mg tablet (TAKE 1 TABLET (750 MG) BY ORAL ROUTE 3 TIMES PER DAY AS NEEDED)

naproxen 500 mg tablet (TAKE 1 TABLET (500 MG) BY ORAL ROUTE 2 TIMES PER DAY WITH FOOD AS NEEDED)

PAST MEDICAL HISTORY: Hypertension;

PAST SURGICAL HISTORY: Partial Hysterectomy, cervical spine repair after an accident., tubaligation.

FAMILY HISTORY:

Mother 70 HTN

Father deceased from skull fracture at age 48

sisters all have HTN

brother unknown

grandparents all deceased

REVIEW OF SYSTEMS:

CONSTITUTIONALS: Patient is positive for: Dizziness,

HEENT: Patient denies: Blurred vision, Diplopia,

NEUROLOGIC: Patient is positive for: Headache,

PHYSICAL EXAMINATION:

GENERAL: Patient appears consistent with age, well developed/nourished, NAD, and alert and oriented x 3.

CARDIOVASCULAR: HRRR; Tachycardia

RESPIRATORY: Lungs CTA; no rhonchi wheeze or rales; breath sounds symmetric; no chest wall tenderness.

NEUROLOGIC: DTR's and +2/4 and bilaterally symmetric for upper and lower extremities. Cranial nerves grossly intact.

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No focal deficit.

PSYCHIATRIC: Alert and oriented x3; Mood and affect appropriate.

ASSESSMENT:

R51 - Headache (PRIMARY)
I10 - Essential (primary) hypertension

PLAN:

Advised patient to monitor BP at home and report to her PCP.

Advised patient to rest at home and if BP dose not decrease after taking medication, report directly to the ED.

F/U with neurologist for head injury related to continuous headache.

RTC pm

Electronically signed by Melodye Harvey, CRNP on 06/18/19 3:45 PM