

Auburn Montgomery Warhawk Health Services

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

Date: 02/06/24

PATIENT: RECK, MELISSA **DOB:** 02/04/1973 **Gender:** FEMALE **MRN:** 4262 **AGE:** 51 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: nasal congestion and chest pressure

HISTORY OF PRESENT ILLNESS: Mrs. Reck is a 51 yo female here today for nasal congestion, ears feeling full, and head pressure since yesterday. She also reports chest pressure and a feeling of "her child sitting on her chest". Denies shortness of breath or dizziness.

VITALS: BP: 136/90 **Pulse:** 87; **Temp:** 98.8; **Resp:** 16; **Ht:** 63 in.; **Wt:** 215.6 lbs.; **BMI:** 38.19; **Pulse Oximetry:** 98%;
FDLMP: 02/06/24

ALLERGIES: No Known Drug Allergies

MEDICATIONS:

ergocalciferol (vitamin D2) 1,250 mcg (50,000 unit) capsule
lisinopril 10 mg-hydrochlorothiazide 12.5 mg tablet (TAKE 1 TABLET BY ORAL ROUTE ONCE DAILY)
terbinafine HCl 250 mg tablet (1 tablet PO once daily)

PAST MEDICAL HISTORY: HTN, anxiety, insomnia, SAR.

PAST SURGICAL HISTORY: Tubal ligation,

FAMILY HISTORY:

Mother- died at 72 COPD
Father- died 76 colon cancer, HTN

HEALTH MX HISTORY:

Last colonoscopy Oct 2018
Last mammogram September 2018
Last pap- September 2022- reportedly normal

GYN- Brittany Mount, CRNP

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.

MUSCULOSKELETAL: Normal range of movement x 4 extremities

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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:

INFLUENZA (1 unit(s)): In-House Lab
EKG (1 unit(s)): Office Procedure
Abbott COVID Rapid Test (1 unit(s)): In-House Lab

RESULTS:

INFLUENZA:
Value: Negative

Abbott COVID Rapid Test:
Value: Positive

ASSESSMENT:

U07.1 - COVID-19 (PRIMARY)
R07.9 - CHEST PAIN, UNSPECIFIED
R09.81 - NASAL CONGESTION
I10 - Essential (primary) hypertension

PLAN:

EKG- NSR at 75 bpm with no ischemic changes. Most likely chest pain is related to COVID. Her pain has been ongoing since yesterday and EKG is normal. Tylenol or ibuprofen as needed for pain/fever. Recommended otc tylenol cold/sinus for sinus congestion. We discussed risks and benefits of Paxlovid for treatment of covid. She declines a prescription today, but states she will call back if she changes her mind.

Electronically signed by Lindsey Barton, CRNP on 02/06/24 4:44 PM

