

Auburn Montgomery Student Health Services

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

Date: 04/30/21

PATIENT: HILYER, KIMBERLY **DOB:** 09/07/1961 **Gender:** FEMALE **MRN:** 4638 **AGE:** 59 Years

VISIT TYPE: Office Visit New

CHIEF COMPLAINT: sick visit

HISTORY OF PRESENT ILLNESS: Husband diagnosed with COVID yesterday. He has been sick since last week. She is now having chest heaviness, dry cough, runny nose, nasal congestion for the past 2-3 days. Denies fever, loss of taste/smell. She had COVID in Oct. 2020.

VITALS: BP: 161/93 **Site:** LEFT ARM **Position:** SITTING **Pulse:** 70; **Temp:** 97.8; **Resp:** 16; **Pulse Oximetry:** 96%

ALLERGIES: Penicillins

MEDICATIONS:

Nexium 40 mg capsule, delayed release (1 tablet po once daily)
Synthroid 88 mcg tablet (1 tablet PO Once daily)
aspirin 81 mg tablet, delayed release (1 tablet po once daily)
atenolol 25 mg tablet (1 tablet PO once daily)
irbesartan 150 mg-hydrochlorothiazide 12.5 mg tablet (1 tablet po once daily)

PAST MEDICAL HISTORY: hypothyroidism, HTN, GERD

PAST SURGICAL HISTORY: cholecystectomy, hysterectomy, mammoplasty/reduction, broken arm, tonsillectomy

SOCIAL HISTORY: Married w/ 2 children. Denies smoking, drinking, or illicit drug use.

FAMILY HISTORY: Mom- T2DM, COPD

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. + postnasal drip. 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; 2+ DP and PT pulses bilaterally

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.

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ORDERS:

THERAPEUTIC INJECTION ADMIN (1 unit(s)): Injection
Dexamethasone 4mg/ml (1 unit(s)): Injection
Depo-Medrol 40mg/ml (1 unit(s)): Injection
COVID Rapid Testing (1 unit(s)): In-House Lab
SARS-CoV-2 Antibody (IgG), Spike, Semi- Quantitative (1 unit(s)): Quest Diagnostics

RESULTS:

COVID Rapid Testing:
Value: Negative

Dexamethasone 4mg/ml:
Site Given: Right Ventral Gluteal
Dosage Given: 4 milligram(s)
Administered By: Barton, Lindsey - CRNP

Depo-Medrol 40mg/ml:
Site Given: Right Ventral Gluteal
Dosage Given: 40 milligram(s)
Administered By: Barton, Lindsey - CRNP

ASSESSMENT:

Z20.822 - CONTACT WITH AND (SUSPECTED) EXPOSURE TO COVID-19 (PRIMARY)
Z86.16 - PERSONAL HISTORY OF COVID-19
J20.9 - ACUTE BRONCHITIS, UNSPECIFIED
R05 - Cough

PLAN:

Bactrim DS 800 mg-160 mg tablet
Refills: 0 Qty: 20 TABLET(S)
Instructions: TAKE 1 TABLET BY ORAL ROUTE EVERY 12 HOURS

Polytussin DM 1 mg-5 mg-10 mg/5 mL oral syrup
Refills: 0 Qty: 120 ML(S)
Instructions: 10 ml PO every 6 hrs as needed for cough and congestion

Electronically signed by Lindsey Barton, CRNP on 04/30/21 5:08 PM

A handwritten signature in blue ink that reads "J. Barton, CRNP". The signature is cursive and fluid, with the last name "Barton" being the most prominent part.

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