

Auburn Montgomery Warhawk Health Services

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

Date: 05/30/23

PATIENT: MARZETTE, CLEMENTE **DOB:** 01/19/1991 **Gender:** MALE **MRN:** 4724 **AGE:** 32 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: Upper Respiratory symptoms

HISTORY OF PRESENT ILLNESS: Mr. Marzette presents to the clinic with complaints of fever (last fever 7:30pm yesterday of 104.0), diarrhea x2-3 per day, chills, body aches, headache, cough, SOB x 5 days. He has tried Mucinex all in one along with alternating Tylenol and Ibuprofen. He states he last took Ibuprofen this am. He denies chest pain, abdominal pain, vomiting or nausea. He did not take his BP medication this morning.

VITALS: BP: 144/92 **Site:** LEFT ARM **Position:** SITTING **Pulse:** 94; **Temp:** 98.3; **Resp:** 18; **Ht:** 67 in.; **Wt:** 354 lbs.;
BMI: 55.44; **Pulse Oximetry:** 95%

ALLERGIES: No Known Drug Allergies

MEDICATIONS:

lisinopril 10 mg tablet (Daily)
metoprolol tartrate 50 mg tablet (Daily)

PAST MEDICAL HISTORY: HTN

PAST SURGICAL HISTORY: Denies

SOCIAL HISTORY: Denies smoking or illicit drug use. Admits to occasional ETOH use.

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. Left clear to auscultation without wheezes, rales, or rhonchi. Wheezing noted to right upper and middle lobe.

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.

ORDERS:

COMP METABOLIC PANEL (QUEST) (1 unit(s)): Quest Diagnostics
CBC W/ DIFF (QUEST) (1 unit(s)): Quest Diagnostics
STREP A (1 unit(s)): In-House Lab

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Chest XRAY (1 unit(s)): Outside Diagnostic
Abbott COVID Rapid Test (1 unit(s)): In-House Lab
RSV (1 unit(s)): In-House Lab
UA (1 unit(s)): In-House Lab
INFLUENZA (1 unit(s)): In-House Lab
IV START (1 unit(s)): Office Procedure
Normal saline 1L Bolus (1 unit(s)): Intervention

RESULTS:

UA:

Appearance: cloudy
Color: dark yellow
Glucose: Negative
Bill: Positive
Ketones: Positive
Sp: 1.025
Blood: Positive
pH: 5
Protein: Positive
Urobilinogen: Positive
Nitrites: Positive
Leukocytes: Positive
CS: No
Comments: Leuk 25

Pro 30
Ket 15
UBG 1
BIL 1
Blood 50

STREP A:

Value: Negative

INFLUENZA:

Value: Negative

Abbott COVID Rapid Test:

Value: Positive

RSV:

Value: Negative

ASSESSMENT:

U07.1 - COVID-19 (PRIMARY)
J18.9 - Pneumonia, unspecified organism
R50.9 - FEVER, UNSPECIFIED
R06.02 - SHORTNESS OF BREATH
R05.8 - OTHER SPECIFIED COUGH
R06.2 - WHEEZING
Z20.828 - CONTACT W AND EXPO TO OTH VIRAL COMMUNICABLE DIS

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R05.9 - COUGH, UNSPECIFIED
R19.7 - DIARRHEA, UNSPECIFIED
R51.9 - HEADACHE, UNSPECIFIED
E86.0 - DEHYDRATION

PLAN:

0851am: 20g INT started to right AC x1attempt. Blood return is present, and line flushes without difficulty. Patient denies pain at site, there is no redness or swelling present. 1 L NS is started and infuses with no difficulty.

1000 am: INT line is D/C'd due to fluids being complete. There is no redness, swelling, or pain at IV site. Catheter is intact upon removal. Pressure is held for 5 minuets and gauze dressing is applied and secured with coban.

PLAN: Pending CXR, CMP, CBC. Increase fluid intake. COVID quarantine and guidelines discussed with patient. OTC treatment for any presenting symptoms discussed with patient as well as circumstances in which patient may RTC for re check. Samples of Zyrtec given to patient. Strict ER precautions given. Recommended taking Imodium as directed, patient states he has this at home. He declined needing medication for nausea. Take BP meds today. Patient verbalized understanding.

albuterol sulfate HFA 90 mcg/actuation aerosol inhaler

Refills: 0 Qty: 1 UNIT(S)

Instructions: INHALE 2 PUFFS (180 MCG) BY INHALATION ROUTE EVERY 4-6 HOURS AS NEEDED (FOR SOB/WHEEZING)

benzonatate 200 mg capsule

Refills: 0 Qty: 21 CAPSULE(S)

Instructions: TAKE 1 CAPSULE (200 MG) BY ORAL ROUTE 3 TIMES PER DAY AS NEEDED FOR COUGH

Referral: EMIC, East Montgomery Imaging Center (Radiology)

Instructions: CXR STAT

levofloxacin 750 mg tablet

Refills: 0 Qty: 7 TABLET(S)

Instructions: TAKE 1 TABLET (750 MG) BY ORAL ROUTE ONCE DAILY

Electronically signed by Robin Blackwell, CRNP on 05/30/23 11:35 AM

Robin Blackwell CNP