

Auburn Montgomery Warhawk Health Services

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

Date: 03/10/25

PATIENT: KURSUN, OLCAY **DOB:** 04/24/1976 **Gender:** MALE **MRN:** 4900 **AGE:** 48 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: Rash to bilateral arms, chest, and stomach

HISTORY OF PRESENT ILLNESS: Mr. Kursun is a 48 yo male here today for itchy rash that has been present for the past 10 days. He reports it started with his right antecube then he notice it over his back, chest, abdomen, and legs. He denies any new lotions, soaps, or laundry detergents. He had been doing yard work prior to the rash showing up. He denies recent infection or fever. He has been taking otc zyrtec for itching.

Of note, he has a rash to the left antecube as well that he states has been present for a few years. He saw his dermatologist about it before and was told it was eczema.

VITALS: BP: 109/70 **Site:** LEFT ARM **Position:** SITTING **Pulse:** 68; **Temp:** 96; **Resp:** 16; **Ht:** 72 in.; **Wt:** 177.6 lbs.;
BMI: 24.08; **Pulse Oximetry:** 97%

ALLERGIES: No Known Drug Allergies

MEDICATIONS:

No Known Medications

PAST MEDICAL HISTORY: Reactive airway disease.

PAST SURGICAL HISTORY: Denies

SOCIAL HISTORY: Married w/ children. AUM faculty member in computer science department. Denies tobacco, ETOH, recreational drug abuse.

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.

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

INTEGUMENTARY: Warm, dry, intact. Erythematous, dry, scaly oval patch to right antecube with smaller similar lesions scattered to back, chest, abdomen, and bilateral arms. Another similar rash to left antecube that is larger than the other lesions.

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

PSYCHIATRIC: Appropriate mood and affect.

ASSESSMENT:

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L42 - Pityriasis rosea (PRIMARY)
L30.9 - Dermatitis, unspecified

PLAN:

Rx as per below for the eczematous lesion and for the smaller itchier lesions. It is Ramadan and he is fasting so he is unable to take a steroid injection or pills at this time. Ok to continue antihistamine for itching. He was provided patient education on pityriasis rosea and that it could take up to 6-8 weeks to resolve on its own. Follow up as needed.

triamcinolone acetonide 0.1 % topical cream

Refills: 0 Qty: 22 GRAM(S)

Instructions: APPLY A THIN LAYER TO THE AFFECTED AREA(S) (FACE/BEARD AREA) BY TOPICAL ROUTE 2 TIMES PER DAY (Dispensed)

Electronically signed by Lindsey Barton, CRNP on 03/10/25 4:24 PM

L. Barton, DNP, CRNP