

Auburn Montgomery Warhawk Health Services

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

Date: 10/23/24

PATIENT: GRAY, DEVONNA **DOB:** 03/25/1961 **Gender:** FEMALE **MRN:** 4959 **AGE:** 63 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: headache, neck pain, fever Sunday of 101, and nausea since Sunday

HISTORY OF PRESENT ILLNESS: Ms. Gray is a 63 yo female here today for headache, neck pain, fever of 101 Sunday, and nausea. She states she has not had any fever since Sunday and she thinks most of her symptoms are related to her high BP and being out of her BP meds. She denies runny nose, congestion, cough, or sore throat.

VITALS: BP: 159/67 **Site:** LEFT ARM **Position:** SITTING **Pulse:** 64; **Temp:** 96; **Resp:** 16; **Ht:** 62 in.; **Wt:** 205.1 lbs.; **BMI:** 37.51; **Pulse Oximetry:** 98%

ALLERGIES: No Known Drug Allergies

MEDICATIONS:

cyclobenzaprine 5 mg tablet (TAKE 1 TABLET (5 MG) BY ORAL ROUTE 3 TIMES PER DAY AS NEEDED FOR MUSCLE SPASMS.)
hydrochlorothiazide 25 mg tablet (1 TABLET PO ONCE DAILY FOR HTN)
ibuprofen 800 mg tablet (1 TABLET EVERY 8 HRS AS NEEDED FOR PAIN.)
meclizine 25 mg tablet (TAKE 1 TABLET (25 MG) BY ORAL ROUTE 3 TIMES PER DAY AS NEEDED for dizziness.)
omeprazole 40 mg capsule, delayed release (1 TABLET DAILY for GERD)
ondansetron HCl 4 mg tablet (TAKE 1 tablet PO every 8 hrs as needed for nausea.)
valacyclovir 1 gram tablet (1 TABLET PO DAILY)

PAST MEDICAL HISTORY: HTN, GERD; COVID August 2021. LLE DVT Sept. 2021. Chronic low back pain with left sciatica. Chronic neck pain w/ Cervical disc disease.

PAST SURGICAL HISTORY: Cholecystectomy

SOCIAL HISTORY: Recently moved here from New York with family. Works at AUM. Denies tobacco and illicit drug use. Admits to occasional alcohol intake.

FAMILY HISTORY:

HEALTH MX HISTORY:

Colonoscopy 2012 reportedly normal. Hemoccult cards normal in 2019.
Mammogram- 3/25/2022- Negative.
Pap smear- 2020- reportedly normal.

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.

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CARDIOVASCULAR: S1 S2; Regular rate and rhythm w/ occasional skipped beats; 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.

ORDERS:

INFLUENZA Rapid Test (1 unit(s)): In-House Lab
COVID Rapid Testing (1 unit(s)): In-House Lab
EKG (1 unit(s)): Office Procedure
COMP METABOLIC PANEL (QUEST) (1 unit(s)): Quest Diagnostics
CBC W/ DIFF (QUEST) (1 unit(s)): Quest Diagnostics

RESULTS:

INFLUENZA Rapid Test:
Value: Negative

COVID Rapid Testing:
Value: Negative

ASSESSMENT:

I10 - ESSENTIAL (PRIMARY) HYPERTENSION (PRIMARY)
R00.2 - PALPITATIONS
R51.9 - HEADACHE, UNSPECIFIED
R50.9 - FEVER, UNSPECIFIED
R11.0 - NAUSEA

PLAN:

EKG- Sinus arrhythmia w/ occasional PVCs at 60 bpm w/ no ischemic changes. Check labs. Restart BP med. She was previously on HCTZ but wants to try lisinopril because her daughter is on it.

Fever was most likely viral. She has not had a fever since Sunday.

Follow up in 1 month for recheck HTN.

lisinopril 10 mg tablet
Refills: 0 Qty: 30 TABLET(S)
Instructions: TAKE 1 TABLET (10 MG) BY ORAL ROUTE ONCE DAILY

Electronically signed by Lindsey Barton, CRNP on 10/23/24 4:31 PM

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L. Barton, DNP, CRNP