

Auburn Montgomery Student Health Services

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

Date: 06/05/17

PATIENT: PANEHALL, CHRISTINA **DOB:** 12/15/1994 **Gender:** FEMALE **MRN:** 49 **AGE:** 22 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: Needing a refill on BCPs. Last PAP in March of 2016 and was normal.

VITALS: BP: 100/71 **Site:** LEFT ARM **Position:** SITTING **Pulse:** 85; **Ht:** 64.7 in.; **Wt:** 118.1 lbs.; **BMI:** 19.83; **FDLMP:** 05/24/17

ALLERGIES: No Known Drug Allergies

MEDICATIONS:

Sprintec (28) 0.25 mg-35 mcg tablet

REVIEW OF SYSTEMS:

CONSTITUTIONALS: All negative for fever, chills, nausea, vomiting, dizziness, fatigue, infertility, & malaise.

HEENT: All negative for cough, runny nose, congestion, sinus pain, earache, sore throat, bleeding gums, dysphagia, hearing loss, hoarseness, nose bleeds, tinnitus, & rhinorrhea.

EYES: All negative for blurred vision, cataracts, diplopia, dry eyes, drainage, glaucoma, headache, itching, pain, photophobia, and visual loss.

CARDIOLOGIC: All negative for: pain, murmur, palpitations, numbness, cardiovascular, dizziness, diaphoresis, exertional SOB, syncope.

RESPIRATORY: All negative for cough, hemoptosis, orthopnea, shortness of breath, sputum, and wheeze.

GASTROINTESTINAL: All negative for abdominal pain, appetite loss, anorexia, belching, constipation, diarrhea, flatulence, heartburn, hematchezia, hematemesis, indigestion, mass, swelling and ulcers.

MUSCULOSKELETAL: All negative for extremity pain, trouble with ambulation, joint pain and varicose veins.

NEUROLOGIC: All negative for headache, difficulty with vision, numbness in hands and feet, hot flashes, and night sweats.

BREAST: All negative for discharge or mass.

PELVIC: All negative for vaginal discharge, abnormal periods, painful sex, vaginal masses, leaking urine, pain, hemorrhoids, abnormal bleeding, itching, odor, and cramps.

ASSESSMENT:

Z30.9 - Encounter for contraceptive management, unspecified (PRIMARY)

PLAN:

Sprintec (28) 0.25 mg-35 mcg tablet

Refills: 4 Qty: 84 CAPLET(S)

Instructions: Tak1po qd according to package directions. # 3 pk (28 days each). Refill prn x 1 year.

Electronically signed by Carol Stewart, NP on 06/05/17 3:33 PM

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