

Auburn Montgomery Warhawk Health Services

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

Date: 09/22/22

PATIENT: FARMER, TYRA **DOB:** 01/15/1995 **Gender:** FEMALE **MRN:** 5199 **AGE:** 27 Years

VISIT TYPE: Office Visit New

CHIEF COMPLAINT: Left side pelvic pain

HISTORY OF PRESENT ILLNESS: Patient presents to clinic with complaint of mild left side pelvic pain x 1 year off/on. Patient states she had Trich last summer and was treated but did not take the medication correctly and was never re-tested. She also reports sexual activities with the same partner she received Trich from this July. She has complains of vaginal brow/white, thin discharge with strong odor.

She is currently sexually active with 6 partners the last 6 months and uses protection sometimes.

VITALS: BP: 113/79 **Site:** LEFT ARM **Position:** SITTING **Pulse:** 62; **Temp:** 97.6; **Resp:** 16; **Ht:** 63 in.; **Wt:** 124.6 lbs.;
BMI: 22.07; **Pulse Oximetry:** 100%; **FDLMP:** 09/03/22

PAST MEDICAL HISTORY: PID, Trich

PAST SURGICAL HISTORY: Denies

SOCIAL HISTORY: Admits to smoking rarely, ETOH occasionally, Marijuana use rarely.

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.

Lymphatics: No axillary lymphadenopathy.

Pelvic: No external lesions. Cervix is pink. White thick discharge present with odor.

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.

GASTROINTESTINAL: Abdomen is soft; mild tenderness over left pelvic region; Nondistended. Bowel sounds present x 4 quadrants. No masses or organomegaly noted.

Rectal: No external masses or hemorrhoids.

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:

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GC AND CHLAMYDIA COLLECTION (1 unit(s)): In-House Lab
UA (1 unit(s)): In-House Lab
CULTURE, URINE, ROUTINE (QUEST) (1 unit(s)): Quest Diagnostics
Bacterial Vaginosis (BV Blue) (1 unit(s)): In-House Lab
Rocephin 500mg (1 unit(s)): Injection

RESULTS:

UA:

Appearance: clear
Color: yellow
Glucose: Negative
Bill: Negative
Ketones: Negative
Sp: 1.005
Blood: Negative
pH: 7
Protein: Negative
Urobilinogen: Negative
Nitrites: Negative
Leukocytes: Negative

Bacterial Vaginosis (BV Blue):
Value: Positive

Rocephin 500mg:
Site Given: Right Ventragluteal
Dosage Given: 500 milligram(s)
Administered By: Bicknell, Miranda - RN

ASSESSMENT:

Z11.3 - ECT SCREEN FOR INFECT W SEXL MODE OF TRANSMISS (PRIMARY)
N89.8 - OTHER SPECIFIED NONINFLAMMATORY DISORD OF VAGINA
R10.2 - PELVIC AND PERINEAL PAIN
N76.0 - ACUTE VAGINITIS

PLAN:

Pending urine culture and STI labs. Will treat for BV. Will also treat empirically for Gonorrhea, trich and Chlamydia and PID based on exam, sexual history and previous diagnosis. Discussed safe sex practices. Instructed no sexual activities until STI labs are known. Patient agrees to plan.

doxycycline hyclate 100 mg capsule
Refills: 0 Qty: 28 CAPSULE(S)
Instructions: TAKE 1 CAPSULE (100 MG) BY MOUTH EVERY 12 HOURS FOR 14 DAYS

metronidazole 500 mg tablet
Refills: 0 Qty: 28 TABLET(S)
Instructions: 1 TABLET BY ORAL ROUTE EVERY 12 HOURS FOR 14 DAYS

fluconazole 150 mg tablet
Refills: 0 Qty: 2 TABLET(S)

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Instructions: TAKE 1 TABLET (150 MG) BY ORAL ROUTE ONCE, MAY REPEAT DOSE AFTER 3 DAYS IF SYMPTOMS PERSIST.

Electronically signed by Robin Blackwell, CRNP on 09/23/22 8:37 AM

Robin Blackwell CNP