

Auburn Montgomery Warhawk Health Services

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

Date: 11/26/24

PATIENT: STREATY-VARNUM, JULIET **DOB:** 08/07/1971 **Gender:** FEMALE **MRN:** 5247 **AGE:** 53 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: Possible UTI

HISTORY OF PRESENT ILLNESS: Mrs. Streaty-Varnum is a 53 yo female here today for possible UTI. She c/o burning with urination and increased urinary frequency since yesterday. Denies fever, low back pain or abdominal pain.

She also c/o dry intermittent cough for the past 2-3 months. Associated with post nasal gtt. She is taking singulair each morning for allergies.

VITALS: BP: 116/75 **Pulse:** 79; **Temp:** 98; **Resp:** 16; **Ht:** 69 in.; **Wt:** 140.2 lbs.; **BMI:** 20.7; **Pulse Oximetry:** 96%;
FDLMP: 10/27/24

ALLERGIES: No Known Drug Allergies

MEDICATIONS:

Singulair 10 mg tablet (1 tab PO once daily)
Tri-Lo-Marzia 0.18 mg/0.215 mg/0.25 mg-25 mcg tablet (TAKE 1 TABLET BY ORAL ROUTE ONCE DAILY)
amantadine HCl 100 mg tablet (1 tablet PO Bid)
amlodipine 10 mg tablet (TAKE 1 TABLET (10 MG) BY ORAL ROUTE ONCE DAILY)
carvedilol 6.25 mg tablet (1 tablet PO BID)
ciprofloxacin 250 mg tablet (TAKE 1 TABLET (250 MG) BY ORAL ROUTE EVERY 12 HOURS)
dalfampridine ER 10 mg tablet, extended release, 12 hr (BID)
dimethyl fumarate 120 mg (14)-240 mg (46) capsule, delayed release

PAST MEDICAL HISTORY: MS- diagnosed in 2000 followed by neurology every 6 months. She also gets an MRI every 6 months, HTN, seasonal allergies.

PAST SURGICAL HISTORY: C-section 2010, Right foot 1986, right knee construction

SOCIAL HISTORY: Married. Moved to the area in 2021. Works at AUM. Denies smoking, ETOH or illicit drug use

HEALTH MX HISTORY:

PCP- Dr. Myrtle-Gore

Neurologist- Paige Harris, CRNP

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.

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GASTROINTESTINAL: No CVA tenderness.

MUSCULOSKELETAL: Normal range of movement x 4 extremities

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:

UA (1 unit(s)): In-House Lab
CULTURE, URINE, ROUTINE (QUEST) (1 unit(s)): Quest Diagnostics

RESULTS:

UA:
 Appearance: cloudy
 Color: yellow
 Glucose: Negative
 Bill: Negative
 Ketones: Negative
 Sp: 1.020
 Blood: Positive
 pH: 6
 Protein: Positive
 Urobilinogen: Negative
 Nitrites: Positive
 Leukocytes: Positive
 CS: yes
 Comments: Leuks- 500, nitrites +, protein- 30, bld- 50.

ASSESSMENT:

N39.0 - URINARY TRACT INFECTION, SITE NOT SPECIFIED (PRIMARY)
J30.2 - Other seasonal allergic rhinitis
R05.9 - Cough, unspecified
G35 - Multiple sclerosis

PLAN:

Increase water intake. Rx as per below. Follow up with urine culture.

For cough- most likely related to seasonal allergies and post nasal gtt. Continue singulair. Will add claritin as it is less sedating. She has MS, if it makes her symptoms worse, then she will need to discontinue.

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

ciprofloxacin 250 mg tablet
Refills: 0 Qty: 6 TABLET(S)
Instructions: TAKE 1 TABLET (250 MG) BY ORAL ROUTE EVERY 12 HOURS

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Electronically signed by Lindsey Barton, CRNP on 11/26/24 9:35 AM

L. Barton, DNP, CRNP