

[History and Physical] [Bethany Yeend] [165953]

[Date Printed:04/21/2023] Page 1 of 4

Capital City Gastroenterology PC History and Physical

Patient Name:	Bethany Yeend	Visit Date:	April 6, 2023
Patient ID:	165953	Provider:	Brittney Barber, CRNP
Sex:	Female	Location:	East Location
Birthdate:	December 30, 1994	Location Address:	7065 Sydney Curve Montgomery, AL 36117-3509
Referring Provider:	Dana Moorer CNM	Location Phone:	(334) 495-2600

Chief Complaint

- "Abdominal pain"
- "Irregular bowel movements"

History Of Present Illness

The patient is a 28 year old Caucasian/White female, who presents on referral from Dana Moorer CNM, for a gastroenterology evaluation for abdominal pain.

She had been experiencing intermittent abdominal pain with nausea/vomiting and diarrhea for about 2 years. She reports last episode was earlier this year. However, she has not had any significant pain or nausea in about 2 months. Previously, these episodes would occur 1-2 x a month, and last for 3-4 days. She denies any weight loss. She was started on omeprazole 20mg for nausea, but has since stopped it. She denies any further nausea. BMs are now daily or EOD. She denies any blood or mucus seen with BMs. Denies FMH of CRC. Denies NSAID, tobacco or alcohol use.

Past Medical History

Disease Name	Date Onset	Notes
Anxiety	--	--
Bloated abdomen	--	--
Change in bowel movement	--	--
Collagenous/Microscopic/Lymphocytic Colitis	--	--
Constipation	--	--
Nausea	--	--

Past Surgical History

Procedure Name	Date	Notes
No surgical history	--	--

Rosi Blackwell

Medication List

Name	Date Started	Instructions
dicyclomine oral capsule 10 mg	04/06/2023	take 1 capsule (10 mg) by oral route 1 - 3 times per day as needed for abdominal pain and diarrhea
loperamide 2 mg oral capsule	02/11/2023	--
omeprazole 20 mg oral capsule, delayed release (DR/EC)	02/11/2023	--
ondansetron HCl 4 mg oral tablet	02/11/2023	--

[History and Physical] [Bethany Yeend] [165953]

[Date Printed:04/21/2023] Page 2 of 4

Allergy List

Allergen Name	Date	Reaction	Notes
PENICILLINS	--	Rash	--

Allergies Reconciled

Family Medical History

Disease Name	Relative/Age	Notes
Family history of colon cancer		--
Heart Disease		--

Social History

Finding	Status	Start/Stop	Quantity	Notes
Denies illicit substance abuse	--	0/0	0	--
Nonsmoker	--	0/0	0	--
Rare alcohol	--	0/0	0	--

Review of Systems**Constitutional**

- Denies : fever, chills, additional symptoms, except what is stated in the HPI

Eyes

- Denies : additional symptoms, except what is stated in the HPI

HEENT

- Denies : thyroid mass, recent head injury, additional symptoms, except what is stated in the HPI

Breasts

- Denies : additional symptoms, except what is stated in the HPI

Cardiovascular

- Denies : chest pain, irregular heart beats, additional symptoms, except what is stated in the HPI

Respiratory

- Denies : shortness of breath, wheezing, additional symptoms, except what is stated in the HPI

Gastrointestinal

- * See HPI

Genitourinary

- Denies : hematuria, change in urine color, additional symptoms, except what is stated in the HPI

Integument

- Denies : rash, new skin lesions, additional symptoms, except what is stated in the HPI

Neurologic

- Denies : headaches, seizures, additional symptoms, except what is stated in the HPI

Musculoskeletal

- Denies : additional symptoms, except what is stated in the HPI

Endocrine

- Denies : weight gain, weight loss, additional symptoms, except what is stated in the HPI

Psychiatric

- Denies : additional symptoms, except what is stated in the HPI

Heme-Lymph

- Denies : lymph node enlargement or tenderness, additional symptoms, except what is stated in the HPI

Allergic-Immunologic

- Denies : additional symptoms, except what is stated in the HPI

Vitals

Date	Time	BP	Position	Site	Cuff	HR	RR	TEMP	WT	HT	BMI	BSA	O2	FR
					L/R Size			(F)			kg/m ²	m ²	Sat	L/min FiO2 TIC

[Digital Signature Validated]

[History and Physical] [Bethany Yeend] [165953]

[Date Printed:04/21/2023] Page 3 of 4

04/06/2023 08:11 AM 114/73 Sitting

62 - R

97.6

154lbs 00z 5' 9" 22.74 1.84

Physical Examination**Constitutional**

- **Appearance** : Well nourished, well developed patient in no acute distress. Ambulating without difficulty.

Eyes

- **Conjunctivae and Eyelids** : Conjunctivae and eyelids appear normal
- **Sclerae** : White without injection

Neck

- **Thyroid** : Normal size without tenderness, nodules or masses

Chest

- **Respiratory Effort** : Breathing is unlabored without accessory muscle use
- **Auscultation** : Normal breath sounds

Cardiovascular

- **Heart** :
 - **Auscultation** : Heart rate is regular with normal rhythm. No murmurs are heard.
- **Peripheral Vascular System** :
 - **Abdominal Aorta** : Aortic pulse is normal without bruits
 - **Peripheral Circulation** : No evidence of edema, cyanosis or distal hair loss present. No purpura present. Normal capillary refill. No varicosities are present.

Gastrointestinal

- **Abdominal Exam** : Abdomen soft without rigidity or guarding, abdomen non-tender to palpation, normal bowel sounds, no masses present, non-distended
- **Liver and Spleen** : No hepatomegaly present. Liver is non-tender to palpation and spleen is not palpable.
- **Hernias** : No abdominal wall hernias are present.
- **Occult Blood Test** : deferred

Musculoskeletal

- **Gait and Station** : Normal gait, normal station
- **Right Lower Extremity** : normal ROM, no tenderness to palpation, no edema present, no ecchymosis present
- **Left Lower Extremity** : normal ROM, no tenderness to palpation, no edema present, no ecchymosis present

Skin

- **General Inspection** : No rashes, lesions or areas of discoloration present. Skin turgor is normal.
- **General Palpation** : No abnormalities, masses or tenderness on palpation.

Neurologic and Psychiatric

- **Orientation** : Oriented to person, place and time
- **Memory** : Short and long term memory intact.
- **Mood and Affect** : Normal mood with an appropriate affect

Assessment

- (1) Abdominal pain, generalized 789.07/R10.84
- (2) Diarrhea 787.91/R19.7

Trial of benty for flare ups.

Labs and US ordered - cbc cmp crp amylase lipase celiac ibd

Encouraged to start daily probiotic.

Low FODMAP diet discussed and handouts given.

RTC 4 months

Plan**Medications**

- Medications have been Reconciled

Instructions

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[History and Physical] [Bethany Yeend] [165953]

[Date Printed:04/21/2023] Page 4 of 4

- o Handouts were provided

Disposition

- o Call or Return if symptoms worsen or persist.
- o Care Transition
- o Return Visit Request in/on 4 months +/- 2 days (57484).

Electronically Signed by: Brittney Barber, CRNP -Author on April 6, 2023 04:10:57 PM