

Auburn Montgomery Warhawk Health Services

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

Date: 06/20/24

PATIENT: SMITH, DERRICK **DOB:** 10/08/1977 **Gender:** MALE **MRN:** 5341 **AGE:** 46 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: Chest tightness, cough, postnasal drip

HISTORY OF PRESENT ILLNESS: Mr. Smith is a 46 yo male here today for chest tightness, productive cough with occasional yellow phlegm, and post nasal drip for the past 6 days. He feels like he has to clear his throat throughout the day. Denies fever, runny nose, congestion, or earache. He states he gets bronchitis once or twice a year with similar symptoms. His PCP gave him an albuterol inhaler to use as needed but he reports he does not have asthma.

VITALS: BP: 120/84 **Pulse:** 67; **Temp:** 97.8; **Resp:** 19; **Ht:** 70 in.; **Wt:** 323.3 lbs.; **BMI:** 46.38; **Pulse Oximetry:** 98%

ALLERGIES: Phenergan; Sulfa (Sulfonamide Antibiotics)

MEDICATIONS:

Flonase Allergy Relief 50 mcg/actuation nasal spray,suspension
Singulair 10 mg tablet
Zyrtec 10 mg tablet (1 tablet PO once daily)
albuterol sulfate HFA 90 mcg/actuation aerosol inhaler (2 puffs every 4-6 hrs as needed.)
doxepin 25 mg capsule (1 tablet daily)
pantoprazole 40 mg tablet,delayed release (1 tablet daily)

PAST MEDICAL HISTORY: IBS, kidney stones, migraines, bronchitis, seasonal allergies, pneumonia

PAST SURGICAL HISTORY: cholecystectomy, knee surgery, fissure repair.

SOCIAL HISTORY: Works at AUM. Denies smoking, drinking, or illicit drug use.

FAMILY HISTORY:

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.

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.

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.

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PSYCHIATRIC: Appropriate mood and affect.

ASSESSMENT:

J20.9 - Acute bronchitis, unspecified (PRIMARY)
J45.909 - Unspecified asthma, uncomplicated
R05.9 - Cough, unspecified

PLAN:

Rx as per below. Will treat for acute bronchitis. Explained that most the time it is viral. Steroid dose pack will help with reactive airway disease symptoms. Continue albuterol as needed. He is going to Chicago next week, so a prescription for antibiotic was given if needed. He verbalized understanding.

Medrol (Pak) 4 mg tablets in a dose pack

Refills: 0 Qty: 1 UNIT(S)

Instructions: TAKE BY ORAL ROUTE AS DIRECTED PER PACKAGE INSTRUCTIONS

amoxicillin 875 mg-potassium clavulanate 125 mg tablet

Refills: 0 Qty: 20 TABLET(S)

Instructions: TAKE 1 TABLET BY ORAL ROUTE EVERY 12 HOURS

Electronically signed by Lindsey Barton, CRNP on 06/20/24 11:31 AM

L. Barton, DNP, CRNP