

Auburn Montgomery Warhawk Health Services

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

Date: 05/14/25

PATIENT: OWENS, MICKEY **DOB:** 01/23/1968 **Gender:** MALE **MRN:** 5447 **AGE:** 57 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: shortness of breath and sinus drainage

HISTORY OF PRESENT ILLNESS: Mr. Owens is a 57 yo male here today for sinus drainage that he feels like is going into his chest. Associated with shortness of breath. Onset was last night. Denies fever. He has a history of pneumonia so he was concerned. He denies chest pain or palpitations.

VITALS: BP: 131/81 **Pulse:** 87; **Temp:** 96.3; **Resp:** 15; **Ht:** 67 in.; **Wt:** 199.2 lbs.; **BMI:** 31.19; **Pulse Oximetry:** 99%

ALLERGIES: No Known Drug Allergies

MEDICATIONS:

Januvia 100 mg tablet (daily)
Jardiance 25 mg tablet (daily)
Protonix 40 mg tablet, delayed release (daily)
Toujeo Max U-300 SoloStar 300 unit/mL (3 mL) subcutaneous insulin pen
aspirin 80 mg tablet (daily)
metoprolol succinate ER 100 mg tablet, extended release 24 hr (daily)
rosuvastatin 40 mg tablet (daily)

PAST MEDICAL HISTORY: T2DM, HLD, HTN, CAD, diverticulitis, GERD, GAD. Kidney stones. Gastroparesis.

PAST SURGICAL HISTORY: Triple bypass in 2012 by Dr. Kwan. Bilateral shoulder surgery and bilateral elbow surgery.

SOCIAL HISTORY: Works at AUM in maintenance department. Married. Former smoker in which he smoked 1.5 ppd x 20 years. He quit in 2020. Denies alcohol or illicit drug use.

FAMILY HISTORY:

HEALTH MX HISTORY:

Cardiologist- MCA

CV Surgeon- Kwan

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.

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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.

PSYCHIATRIC: Appropriate mood and affect.

ORDERS:

EKG (1 unit(s)): Office Procedure

ASSESSMENT:

J20.9 - Acute bronchitis, unspecified (PRIMARY)
R06.00 - DYSPNEA, UNSPECIFIED
J01.90 - ACUTE SINUSITIS, UNSPECIFIED
E11.9 - Type 2 diabetes mellitus without complications
Z86.79 - PERSONAL HISTORY OF OTHER DIS OF THE CIRC SYSTEM
Z87.891 - PERSONAL HISTORY OF NICOTINE DEPENDENCE

PLAN:

EKG- NSR at 68 bpm w/ incomplete RBBB w/ no new ischemic changes. No old EKG for comparison. Will treat for acute sinusitis/bronchitis. Get CXR to r/o pulmonary pathology. Rx as per below. Follow up as needed.

Referral: EMIC, East Montgomery Imaging Center (Radiology)
No Special Instructions

albuterol sulfate HFA 90 mcg/actuation aerosol inhaler
Refills: 0 Qty: 1 UNIT(S)
Instructions: INHALE 2 PUFFS (180 MCG) BY INHALATION ROUTE EVERY 4-6 HOURS AS NEEDED for shortness of breath/wheezing

Symbicort 80 mcg-4.5 mcg/actuation HFA aerosol inhaler
Refills: 0 Qty: 1 UNIT(S)
Instructions: INHALE 2 PUFFS BY INHALATION ROUTE 2 TIMES PER DAY IN THE MORNING AND EVENING

Bactrim DS 800 mg-160 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 05/14/25 9:48 AM

L. Barton, DNP, CRNP

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