

Auburn Montgomery Warhawk Health Services

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

Date: 06/18/25

PATIENT: GRIGGS, KENDRA **DOB:** 03/09/1997 **Gender:** FEMALE **MRN:** 5457 **AGE:** 28 Years

VISIT TYPE: Office Visit New

CHIEF COMPLAINT: Daytime fatigue, feeling of passing out, snoring, chest pain

HISTORY OF PRESENT ILLNESS: Mrs. Griggs is a 28 yo female here today for multiple issues. She recently had colitis in April. She was seen in the ER. She is requesting a referral for a colonoscopy.

She also c/o snoring at night and she stops breathing for periods as noted by her husband. She has daytime fatigue and is so tired that she feels like she is going to pass out at times. Fatigue is worse when she is driving. She gets about 8 hrs of sleep at night on average. She reports she has increased her water intake but that has not helped.

She also feels like her heart is beating fast at times and she has intermittent chest pain.

Onset of symptoms was more than a month ago but have progressively gotten worse the past 2-3 weeks. She does not have a PCP.

She has an IUD so she does not have monthly menstrual cycles.

VITALS: BP: 124/76 **Pulse:** 101; **Temp:** 97.2; **Resp:** 16; **Ht:** 64 in.; **Wt:** 153.7 lbs.; **BMI:** 26.38; **Pulse Oximetry:** 98%

ALLERGIES: No Known Drug Allergies

MEDICATIONS:

No Known Medications

PAST MEDICAL HISTORY: GAD/depression, colitis in April 2025.

PAST SURGICAL HISTORY: C-section.

SOCIAL HISTORY: Married. Works at AUM.

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.

GASTROINTESTINAL: Abdomen is soft; Nontender; Nondistended. Bowel sounds present x 4 quadrants. No masses or

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organomegaly noted. No CVA tenderness.

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:

UA (1 unit(s)): In-House Lab
URINE PREG TEST (1 unit(s)): In-House Lab
TSH (LabCorp) (1 unit(s)): LabCorp
Vitamin B12 (1 unit(s)): LabCorp
Magnesium (1 unit(s)): LabCorp
Thyroxine (T4) Free Direct (1 unit(s)): LabCorp
CBC With Differential/Platelet (1 unit(s)): LabCorp
Vitamin D 25-Hydroxy (1 unit(s)): LabCorp
Lipid Panel w/ LDL/HDL Ratio (1 unit(s)): LabCorp
Comp. Metabolic Panel (14) (1 unit(s)): LabCorp
Orthostatic Vital Signs (1 unit(s)): Office Procedure
EKG (1 unit(s)): Office Procedure

RESULTS:

UA:
 Appearance: clear
 Color: yellow
 Glucose: Negative
 Bill: Negative
 Ketones: Negative
 Sp: 1.020
 Blood: Negative
 pH: 6
 Protein: Negative
 Urobilinogen: Negative
 Nitrites: Negative
 Leukocytes: Negative
 CS: No

URINE PREG TEST :
 Value: Negative

ASSESSMENT:

R00.2 - PALPITATIONS (PRIMARY)
R07.9 - Chest pain, unspecified
R55 - SYNCOPE AND COLLAPSE
R53.83 - OTHER FATIGUE
R06.83 - SNORING
K52.9 - NONINFECTIVE GASTROENTERITIS AND COLITIS USP

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PLAN:

Orthostatic VS:

Lying- 121/67, 72

Sitting- 120/80, 88

Standing- 143/84, 87

EKG- NSR w/ sinus arrhythmia at 78 bpm and no ischemic changes.

Follow up with lab results. Referrals as per below. Recommended she change position slowly. No driving if she has fatigue or to pull over and stop driving if fatigue develops while she is driving. Her best option would be to have her husband drive her until we have an answer as to why her symptoms are occurring. She verbalized understanding.

Referral: Barranco, Truss, and McPhail, Gastrohealth (Gastroenterology)
No Special Instructions

Referral: Diagnostics, Sleep South (Pulmonology)
No Special Instructions

Referral: Cooper, Dr. Amy (Cardiology)
No Special Instructions

Electronically signed by Lindsey Barton, CRNP on 06/18/25 1:51 PM

L. Barton, DNP, CRNP