

Auburn Montgomery Student Health Services

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

Date: 08/25/20

PATIENT: FRAZIER, KENOTTA **DOB:** 06/15/1982 **Gender:** FEMALE **MRN:** S00359367 **AGE:** 38 Years

VISIT TYPE: Office Visit New

CHIEF COMPLAINT: UTI

HISTORY OF PRESENT ILLNESS: Has frequency and pressure over bladder for the past week or maybe two. Has history of kidney problems in the past (last year) in which she was given IVF. She reports bladder discomfort, increased frequency, feeling of needing to void after she just went to the bathroom. Denies blood in urine, back pain, or fever. This is her 3rd UTI this year. She reports 2-3 UTIs each year. She has not seen a urologist in the past. She has not been on maintenance medications for preventative. Her last antibiotic prescribed was macrobid and she reports it was a few months ago.

VITALS: BP: 126/89 **Site:** LEFT ARM **Position:** SITTING **Pulse:** 60; **Temp:** 97.8; **Resp:** 12; **Ht:** 67.5 in.; **Wt:** 246.6 lbs.; **BMI:** 38.05; **Pulse Oximetry:** 97%; **FDLMP:** 07/28/20

ALLERGIES: lisinopril (ACE inhibitor-induced angioedema)

MEDICATIONS:

ceftriaxone 250 mg solution for injection (1G administered to (R) glut.)

PAST MEDICAL HISTORY: HTN, frequent UTIs.

PAST SURGICAL HISTORY: Bilateral tubal ligation.

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.

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

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

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RESULTS:

UA:

Appearance: Clear
Color: Amber
Glucose: Negative
Bill: Positive
Ketones: Negative
Sp: 1.030
Blood: Positive
pH: 5
Protein: Positive
Urobilinogen: Negative
Nitrites: Negative
Leukocytes: Negative
CS: yes

ASSESSMENT:

N39.0 - URINARY TRACT INFECTION, SITE NOT SPECIFIED (PRIMARY)

PLAN:

Given Rocephin shot in office.
Increase water intake.
Rx for macrobid for treatment then preventative 3 days per week.
Referral to urology for eval of frequent UTIs.
Follow up as needed.

Macrobid 100 mg capsule
Refills: 0 Qty: 14 CAPSULE(S)
Instructions: TAKE 1 CAPSULE (100 MG) BY ORAL ROUTE EVERY 12 HOURS WITH FOOD

Macrochantin 50 mg capsule
Refills: 1 Qty: 30 CAPSULE(S)
Instructions: 1 capsule PO at bedtime with food for UTI prevention. Start after completing the 7 day treatment dose.

Electronically signed by Lindsey Barton, CRNP on 08/25/20 11:45 AM



J. Barton, CRNP