

Gagandeep Munday
H & P: Family Medicine Rotation
05/21/2021

Identifying Data:

Full Name: SB	Religion: None
Address: Queens, NY	Reliability: Reliable
Age: 33	Source of Information: Self
Date & Time: May 10, 2021 @ 4:00pm	Source of Referral: Self
Location: South Shore Family Medical	Mode of Transport: Ambulatory

Chief Complaint: “my allergies are getting bad”

History of Present Illness:

33 y/o AA F PMH hyperlipidemia c/o nasal congestion and sore throat for the past 3 days. Pt states that she has been going out more recently and notices that her throat feels “scratchy”. Pt states that she has h/o seasonal allergies and takes OTC Claritin but has had minor relief of symptoms. Denies fever, chills, body aches, sick contacts, eye redness, ear pain, purulent nasal discharge, sinus pressure, headaches, changes in vision or hearing, chest pain, or SOB.

Past Medical History:

Present illness: Hyperlipidemia and seasonal allergies
Past illness: none
Hospitalizations: none
Immunizations: flu vaccine yearly, all others Up to Date

Past Surgical History:

Denies injuries, past surgeries, and transfusions.

Medications:

Denies taking any medications or herbal supplements.

Allergies:

Denies any known drug allergies

Family History:

Mother 66, alive, hx of type 2 diabetes
Father 69, alive, hx hypertension

Social History:

Habits: SB denies ever smoking cigarettes, drinking, or any past or present illicit drug use.
Travel: No recent travel
Marital History: Married
Sexual History: Sexually active with husband. Denies any history of STD.
Occupation: Currently not working due to the pandemic
Home: Pt lives an apartment building on the 8th floor. Denies any problems at home.

Diet: Reports that she consumes a balanced diet, lots of meats, rice and vegetables.

Sleep: Reports that she usually gets 8 hours of sleep every night

Exercise: Reports that she exercises 2 times a week, and occasionally goes for a walk in the evening.

Safety: Pt admits to wearing a seat belt

Review of Systems:

General- Denies fever, chills, night sweats, fatigue, weakness, loss of appetite, recent weight gain or loss

Head- Denies headache, vertigo, unconsciousness,

Eyes- Denies vision changes

Pulmonary- Denies dyspnea, SOB, cough, wheezing, hemoptysis, cyanosis, orthopnea, PND

Cardiovascular- Denies chest pain, HTN, palpitations, irregular heartbeat, edema/swelling of ankles or feet, syncope, known heart murmur

Gastrointestinal: Denies change in appetite, nausea, vomiting, dysphagia, abdominal pain, diarrhea, jaundice, hemorrhoids, constipation, rectal bleeding, blood in stool,

Genitourinary: Denies urinary frequency, incontinence, dysuria, nocturia, urgency, oliguria, ‘ polyuria,

Peripheral Vascular- Denies intermittent claudication, coldness, trophic changes, varicose veins, peripheral edema, color changes

Nervous System: Denies seizures, dizziness, loss consciousness, sensory disturbances, ataxia, loss of strength, change in cognition/mental status/memory, weakness

Physical

Vital Signs:

Blood Pressure: 123/68 mmhg

Heart Rate: 92 bpm

Respiration Rate: 16 breaths/min

Temperature: 97.3 F

O₂ Sat: 98% room air

Height: 69 inches

Weight: 174 lbs

BMI: 25.69

General Appearance: 33 yo female A/O x 3. Pt has small build and good posture, well dressed and groomed. Appears in no acute distress.

Skin: Warm and moist/dry, good turgor, anicteric, no lesions, no rashes, no scars, no tattoos.

Nails: No clubbing, no discoloration, capillary refill <2 sec throughout.

Hair: Average quantity and distribution, no signs of alopecia, seborrhea, or lice.

Eyes: symmetrical OU, no evidence of strabismus or ptosis noted, sclera (white/ red), conjunctiva and cornea clear. Visual fields intact, OU, PERRLA, EOMI full with no nystagmus.

Head: normocephalic, atraumatic, nontender to palpation throughout, no signs of alopecia, seborrhea, or lice. Nontender to palpation throughout

Eyes: Symmetrical OU. No strabismus, exophthalmos, or ptosis.

Nose: **Boggy turbinates.** Nose is symmetrical / no masses / lesions / deformities / trauma / discharge. Nares patent bilaterally / Nasal mucosa pink & well hydrated. No discharge noted on anterior rhinoscopy. Septum midline without lesions / deformities / injection / perforation. No foreign bodies.

Sinuses: Non tender to palpation and percussion over bilateral frontal, ethmoid and maxillary sinuses.

Oropharynx: Moist, no erythema, no exudates, no masses/lesions; no foreign bodies. Tonsil grade 1, no injection or exudates. Uvula midline and rises symmetrically with phonation, no uvular edema or lesions

Neck: Trachea midline. No masses; lesions; scars; pulsations noted. Supple; non-tender to palpation. FROM no stridor noted. 2+ Carotid pulses, no thrills; bruits noted bilaterally, no palpable adenopathy noted

Chest: Symmetrical, no deformities, no signs of trauma. Respiration unlabored/ no paradoxical respiration or use of accessory muscles noted. Lat AP diameter 2:1. Non-tender to palpation.

Lungs: Clear to auscultation bilaterally, no rales/rhonchi/wheezes, no egophony, no tactile fremitus, normal percussion.

Cardiovascular: Carotid pulses are 2+ bilaterally without bruits. Regular rate and rhythm (RRR); S1 and S2 are normal. There are no murmurs, S3, S4, splitting of heart sounds, friction rubs or other extra sounds.

Peripheral Vascular: Extremities are normal in color, size, and temperature. Pulses are 2+ bilaterally in upper and lower extremities. No bruits noted. No clubbing, cyanosis or edema noted bilaterally. No stasis changes or ulcerations noted.

Neurological: Alert and oriented to person, place, and time. Memory and attention intact. Receptive and expressive abilities intact. Thought coherent. No dysarthria, dysphonia or aphasia noted.

Labs/procedures:
none

Differential based off Chief Complaint:

1. Allergic rhinitis
2. URI
3. Sinusitis
4. Pharyngitis

Assessment

33 y/o AA F PMH hyperlipidemia and seasonal allergies c/o nasal congestion and sore throat for the past 3 days. Mild relief with OTC Claritin. Likely allergic rhinitis.

Problem List:

1. Nasal congestion

Plan:

Start on fluticasone propionate and Allegra D. Counsel patient that signs and symptoms appear consistent with her seasonal allergies. Encourage follow up if patient develops fever or if symptoms worsen.