Maria Rivera- 45 year old female **NOTES FROM LAST VISIT 6 MONTHS AGO**

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| **Subjective:** |

**Chief Complaint**

Patient presents with

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| **Chief Complaint** | |
| Patient presents with | |
| • | Hypertension |

**History of Present Illness**

Blood pressure uncontrolled this visit. Endorses adherence with medications, although is not sure what she takes. Didn’t take furosemide this morning, because she was coming to this appointment, and didn’t want to need to urinate. Denies chest pain or headaches. Does endorse some blurred vision—she thinks she needs reading glasses. Is reporting a little bit of a cough—COVID vaccine is up to date.

**History and Medications**

M. Rivera has a past medical history of:

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| **Patient Active Problem List** | |
| Diagnosis | |
| • | Essential hypertension  Fibroid utereus |

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| **Social History** |

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| Tobacco Use | | | |
| • | Smoking status: | | Never smoker |
| • | Smokeless tobacco: | | Never Used |
| Substance Use Topics | | | |
| • | Alcohol use: | | Never |
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| **Current Outpatient Medications on File Prior to Visit** | | | | |
| Medication | | Sig | Dispense | Refill |

* Lisinopril 20 mg 1 tablet p.o. daily
* Amlodipine 5 mg 1 tablet p.o. daily
* Furosemide 40 mg 1 tablet p.o. daily

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| No current facility-administered medications on file prior to visit. |

Remainder of review of systems negative except as noted above.  Allergies noted and reviewed.

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| **Objective:** |

**Physical Examination**

Blood pressure 190/110, pulse 78, temperature 97.8 °F (36.6 °C), temperature source Oral, SpO2 97 %.

Physical Exam

Constitutional: **Well-developed and well-nourished**

Head: Normocephalic and atraumatic.

Mouth/Throat: **Oropharynx is clear and moist.**

Eyes: Conjunctivae and EOM are normal. Pupils are equal, round, and reactive to light.

Neck: Normal range of motion. Neck supple.

Cardiovascular: **Normal rate, regular rhythm and normal heart sounds**

Pulmonary/Chest: **Breath sounds normal. No respiratory distress. No wheezes, rales, or rhonchi**

Abdominal: **Soft. Bowel sounds are normal. Non-tender, non-distended, no guarding or RT**

Musculoskeletal: Normal range of motion;**1+ edema bilateral lower extremities.**

Lymphadenopathy:

  No cervical adenopathy.

Neurological: **Oriented to person, place, and time. No cranial nerve deficit.**

Skin: Skin is warm and dry.

Psychiatric: **Normal mood and affect.**

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| **HEALTH MAINTENANCE** |

Lipid Panel:

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| **Lab Results** | | | |
| Component | | Value | Date |
|  | CHOL | 199 | 09/02/2020 |
|  | CHOL | 111 | 05/13/2019 |
|  | CHOL | 154 | 03/26/2019 |

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| **Lab Results** | | | |
| Component | | Value | Date |
|  | HDL | 51 | 09/02/2020 |
|  | HDL | 44 | 05/13/2019 |
|  | HDL | 49 | 03/26/2019 |

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| **Lab Results** | | | |
| Component | | Value | Date |
|  | TRIG | 136 | 09/02/2020 |
|  | TRIG | 96 | 05/13/2019 |
|  | TRIG | 62 | 03/26/2019 |

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| **Lab Results** | | | |
| Component | | Value | Date |
|  | LDL | 49 | 05/13/2019 |
|  | LDL | 100 (H) | 03/19/2019 |
|  | LDL | 106 | 12/21/2012 |

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| **Lab Results** | | | |
| Component | | Value | Date |
|  | LDLCALC | 124 (H) | 09/02/2020 |
|  | LDLCALC | 93 | 03/26/2019 |
|  | LDLCALC | 104 (H) | 03/14/2018 |

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| **Lab Results** | | | |
| Component | | Value | Date |
|  | CHOLHDL | 2.5 | 05/13/2019 |
|  | CHOLHDL | 3.14 | 03/26/2019 |
|  | CHOLHDL | 3.5 | 03/19/2019 |

Immunizations

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| **Immunization History** | | |
| Administered | | Date(s) Administered |
| • | Hep A/Hep B | 11/17/2014 |
| • | Hepatitis B (Adult) | 12/03/2013, 01/30/2014, 04/12/2016, 06/21/2016, 10/21/2016 |
| • | Hepatitis B (Unspecified) | 12/03/2013, 01/30/2014 |
| • | PPD Test | 11/25/2013 |
| • | Pfizer SARS-CoV-2 Vaccination | 03/12/2021, 04/02/2021 |
| • | Td | 06/07/2017 |
| • | Tdap | 05/05/2011 |
| • | Pneumovax | 012/01/2010 |

Diabetes

    Hemoglobin A1c:

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| **Lab Results** | | | |
| Component | | Value | Date |
|  | HGBA1C | 5.8% | 04/20/2021 |

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| **Assessment:** |

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|  |  | ICD-10-CM |
| **1.** | Uncontrolled Hypertension |  |
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| 2. | Cough |  |

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| **Plan:** |

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| 1. Hypertension: Lisinopril increased to 20 mg at last visit; now with cough, so will change to losartan 50 mg. Continue amlodipine, which may be causing some edema—continue furosemide for this. |
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| 1. Cough: ACEi cough? Changed to ARB as above. |