

Manyanthie Linans

11/16/2018

Third Hospital Visit - Internal Medicine

History

- Identifying Data

- Full Name - TD
- Address - Clearview Gardens, NY
- Date of Birth - 5/30/1935
- Date and Time - 11/13/2018, 9:15 AM
- Location - New York Presbyterian / Queens; Flushing, NY
- Religion - Catholic
- Source of Information - Self
- Source of Referral - None
- Mode of Transportation - Ambulance

- Chief Complaint

"The room was spinning and I couldn't get up" x 1 day

- History of Present Illness

TD is an 83 year old reliable ^{ML 11/16/2018} ~~caucasian~~ married caucasian female former smoker ^(75 pack yr history) with a significant past medical history of stroke, diabetes, and hypertension who presented to the ED with complaints of dizziness and inability to stand for 1 day. She states that the dizziness and inability to stand started suddenly, and that she was not doing anything significant at the time of onset. TD denies any alleviating or aggravating factors. She denies any headache, nausea, vomiting, weakness, or loss of consciousness. She sought treatment due to ^{ML 11/16/2018} ~~the~~ her prior history of stroke, ^{ML 11/16/2018} ~~at~~ 6 months ago, although that stroke presented with different symptoms.

Past Medical History

- Present illnesses:

- 1) Chronic obstructive pulmonary disease (COPD) x 20 years ✓
- 2) Diabetes x ~ 10 years ("quite a while") ✓
- 3) Hypertension x 1 year → diagnosed November 2017 ✓

- Past medical illnesses:

- 1) Ischemic stroke - May 2018 ✓

- Hospitalized at New York Presbyterian / Queens

- No deficits noted ✓

- Denies any childhood illnesses

- Immunizations:

- Up to date ✓

- Flu shot September 2018

- Does not ~~re~~ remember date of tdap, but reports that it was in the past 10 years ✓

- Screening tests and results:

- 1) Colonoscopy - does not remember year of last colonoscopy

- last screening was normal ✓

- next screening scheduled for January, but will have to be pushed back due to blood-thinning medications ✓

- 2) Mammogram - 2016 → normal ✓

- 3) Pap smear - 2 years ago → normal ✓

Past Surgical History

- Denies any surgeries, ~~tra~~ injuries, or blood transfusions. ✓

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Medications

- 1) Hypothyroidism → does not know for how long

- 5) GERD → does not know for how long

Medications

- 1) Amlodipine (Norvasc) 10 mg → for hypertension ✓

- PO, daily → last dose this morning ✓
- 2) Carvedilol (Coreg) 25 ^{ML 11/18/2018} mg → for hypertension
 - PO, daily → last dose this morning ✓
- 3) Hydralazine HCl → for hypertension (dose ?)
 - PO, twice daily → last dose this morning ✓
- 4) Losartan 100mg → for hypertension and stroke
 - PO, daily → last dose this morning
- 5) Budesonide formoterol 80/4.5 → for COPD ✓
 - inhaler, twice daily → last dose this morning
- 6) Aspirin 81 mg → for heart disease ✓
 - PO, daily → last dose
- 7) Clopidogrel bisulfate (Plavix) 75mg → for heart disease and stroke
 - PO, daily → last dose this morning ✓
- 8) Insulin glargine (Lantus, Lantus Solostar, Toujeo, Solostar) → diabetes
 - ^{ML 11/11/2018} PO, daily (night) → last dose last night
- 9) Docusat sodium cap 300mg → stool softener ✓
 - PO, 3 times daily → last dose last night
- 10) Pantoprazole delayed (Protonix) 40mg → for GERD
 - PO, daily → last dose ✓
- 11) Insulin Lispro (Humalog) → for diabetes
 - subcutaneous injection, 3 times daily → last dose this morning
- 12) Levothyroxine (Synthroid, Tirosint, Levoxyl) 50 ^{ML 11/11/2018} µg → for hypothyroidism
 - PO, daily → last dose last night ✓

subcutaneous injection

- Allergies

- Denies any drug, food, or environmental allergies ✓

- Family History

- Mother - Deceased in ^{ML 11/16/2018} ~~the~~ 70s due to liver cancer
- denies history of heart disease, diabetes, hypertension, hypercholesterolemia, or any other medical problems ✓
- Father - Deceased due to Alzheimer's Disease → can't recall age
- denies history of cancer, heart disease, diabetes, hypertension.

- hypercholesterolemia, or any other medical problems
- Information about maternal and paternal grandparents is unknown
 - 2 daughters → both healthy, no medical problems

- Social History

- TD is a married female living with her husband.
- Habits:
 - Former smoker → quit in May 2018 after first stroke
 - 1.5 packs/day for 50 years → 75 pack years
 - Does not drink alcohol
 - Denies any recreational drug use
- Travel - denies any recent travel
- Diet - TD keeps a balanced diet, but has been eating less since her first stroke
- Exercise - she tries to keep active for her age, but does not do any formal exercise
- Safety measures - recently stopped driving, but always wears a seatbelt in the car when her daughters drive her
- Sexual history:
 - She is currently sexually active with her husband of 45 years, who has been her only sexual partner
 - She is not taking any birth control measures or hormone replacements
 - Denies history of ^{ML 11/16/2018} ~~sexually~~ sexually transmitted infections.

- Review of Systems

- General

- Lost 30 lbs since first stroke in May 2018
- Denies generalized weakness/fatigue, fever, chills, and night sweats
- Skin, hair, and nails
 - Change in hair texture recently → frizzy/coarse
 - Denies any ^{ML 11/16/2018} ~~changes~~ excessive dryness or sweating, discolorations,

pigmentations, moles, rashes, pruritus, or changes in hair distribution ✓

-Head

-Denies headaches, vertigo, or head trauma ✓

-Eyes

-Denies any visual disturbances, lacrimation, photophobia, or pruritus ^{ML 11/16/2018}

-She wears glasses for reading and distance

-Last eye exam → 6 months ago ✓

-Normal exam, no vision changes

-Ears

-Denies any deafness, pain, discharge, tinnitus, or use of hearing aids ✓

-Nose / Sinuses

^{ML 11/16/2018}

~~-TD wears maxillary and mandibular dentures~~

-Denies any discharge, epistaxis, or obstruction

-Mouth and Throat ✓

-TD wears maxillary and mandibular dentures

-Denies bleeding gums, sore tongue, sore throat, mouth ulcers, and voice changes

-Last dental exam at the beginning of November → good

-Practices good dental hygiene and visits the dentist every 6 months ✓

-Neck

-Denies localized swelling/lumps, stiffness, or decreased range of motion ✓

-Breast

-Denies any lumps, nipple discharge, and pain

-Last mammogram 2 years ago → normal ✓

-Pulmonary System

-Reports history of COPD → managed with inhaler

-Denies dyspnea, dyspnea on exertion, cough, wheezing, hemoptysis, cyanosis, orthopnea, or paroxysmal nocturnal dyspnea ✓ →

- Cardiovascular System

- History of hypertension and stroke (see past medical history)
- Denies chest pain, palpitations, irregular heart beat, edema, swelling of ankles or feet, syncope, or known heart murmur

- Gastrointestinal System ✓

- Takes stool softeners for constipation (see medications)
- Denies ^{ML 11/16/2018} ~~loss of~~ appetite changes, intolerance to specific foods, nausea and vomiting, dysphagia, pyrosis, flatulence, eructations, diarrhea, jaundice, change in bowel habits, hemorrhoids, constipation, rectal bleeding, ^{or} blood in stool
- See past medical history for colonoscopy information.

- Genitourinary System ✓

- Denies any frequency, nocturia, urgency, oliguria, polyuria, dysuria, discolored urine, incontinence, awakening at night to urinate, or flank pain.

- See social history for sexual history

- Menstrual and Obstetrical

- Menarche at ~ age 12 ✓

- In menopause → does not know exactly when ("about 30 years ago")

- Denies postcoital bleeding, vaginal bleeding, and dyspareunia

- G2 P202 ✓

- Nervous System ✓

- History of ischemic stroke May 2018 → no deficits

- Denies seizures, headache, loss of consciousness, sensory disturbances, ataxia, loss of strength, change in cognition/mental status/memory, and weakness ✓

- Musculoskeletal System ✓

- Denies muscle/joint pain, deformity, swelling, redness, and arthritis

- Peripheral Vascular System ✓

- Denies intermittent claudication, coldness or trophic changes, varicose veins, peripheral edema, and color change

-Hematologic System ✓

- Denies anemia, easy bruising or bleeding, lymph node enlargement, blood transfusions, and history of DVT or PE

-Endocrine System

- Denies polyuria, polydipsia, polyphagia, heat or cold intolerance, goiter, excessive sweating, and hirsutism

-Psychiatric ✓

- Denies depression/sadness, anxiety, obsessive/compulsive disorder, and any psychiatric medications
- Denies ever having seen a mental health professional

Physical

-General

- Thin, well-nourished female, neatly groomed, looks her age
- Alert and oriented x 3 ✓

-Vital Signs

- BP (seated) - 150/72 (right arm), 148/70 (left arm)
 - Heart rate - 77 beats/minute, regular ✓
 - Respiration rate - 23 breaths/minute, quiet
 - O₂ % - 96% ✓
 - Height - 5' ✓
 - Weight - 96 lbs
 - BMI - 18.7 (normal) ✓
- Temp: ?

-Skin, Hair, Nails, and Head

- Skin - several >1mm round, sharply circumscribed dark nevi on the upper extremities
- Thin skin texture ✓
- Skin warm and moist, good turgor, nonicteric, no tattoos
- Hair - average quantity and distribution
- Nails - no clubbing, capillary refill < 2 seconds throughout ✓

- Head - normocephalic, atraumatic, nontender to palpation throughout ✓

Eyes

- Symmetrical OU, no evidence of strabismus, exophthalmos, or ptosis ✓

- Sclera white, conjunctiva pink, cornea clear

- Visual acuity (corrected) - 20/20 OS, 20/20 OD, 20/20 OU

- Visual fields full OU, EOMs intact, PERL ✓

- No nystagmus visualized ✓

- Fundoscopy:

- Red reflex intact bilaterally, cup: disc < 0.5 OU

- No evidence of AV nicking, papilledema, hemorrhage, exudate, cotton wool spots, nonvascularization OU ✓

Ears

- Symmetrical and normal size ✓

- No evidence of lesions, masses, or trauma on external ears

- No discharge or foreign bodies in external auditory canals AU

- TM pearly white and intact with cone of light in normal position AU

- Auditory acuity intact to whispered voice AU

- Weber midline, Rinne reveals AC $>$ BC bilaterally ✓

Nose and Sinuses

- Nose - symmetrical, no obvious masses/lesions/deformities/trauma/discharge ✓

- Nares patent bilaterally ✓

- Nasal mucosa pink and well-hydrated, no discharge on anterior rhinoscopy

- Septum midline without lesions/deformities/injection/perforation

- No foreign bodies ✓

- Sinuses - nontender to palpation and palpation over frontal and



Maxillary sinuses bilaterally ✓

Mouth and Pharynx

- Lips - pink, moist; no evidence of cyanosis or lesions

- Non-tender to palpation

- Mucosa - pink, well-hydrated ✓

- No masses or lesions

- No evidence of leukoplakia ✓

- Non-tender to palpation

- Palate - pink, well-hydrated

- Intact without lesions, masses, scars ✓

- Non-tender to palpation; continuity intact

- Teeth - Maxillary and mandibular dentures

- No obvious dental caries noted ✓

- Gingivae - pink, moist

- No evidence of hyperplasia, masses, lesions, erythema, or discharge

- Non-tender to palpation ✓

- Tongue - pink, well-papillated

- No masses, lesions, or deviation noted

- Non-tender to palpation ✓

- Oropharynx - well-hydrated, no evidence of injection, exudate, masses, lesions, foreign bodies

- Grade 1 tonsils present with no evidence of injection or exudate

- Uvula pink; no edema or lesions ✓

Neck, Trachea, and Thyroid

- Neck - trachea midline; no masses, lesions, scars, pulsations, noted

- Supple, non-tender to palpation ✓

- Full range of motion

- No stridor noted

- No palpable adenopathy ✓

- 2+ carotid pulses; no thrills or bruits noted bilaterally

- Thyroid - non-tender; no palpable masses, thyromegaly, or bruits ✓

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Thorax and Lungs ✓

- Chest - symmetrical; no deformities or evidence of trauma
- Respirations unlabored; no paradoxical respirations or use of accessory muscles noted
- lateral: AP diameter - 2:1 ✓
- Lungs - clear to auscultation and percussion bilaterally
- Chest expansion and diaphragmatic excursion symmetrical
- Tactile fremitus intact throughout
- No adventitious sounds ✓

95.30 @ great!