

Progress Notes

Cherylyn K Black at 8/18/2022 2:30 PM

Reason for visit:

Chief Complaint

Patient presents with

- Recurrent Skin Infections
Right lower leg

Subjective:

HPI:

HPI
Patient comes in with a large red area on her right lower leg. Earlier this summer she was treated with an infected boil on the neck which has mostly healed. She noticed a white pimple on the right lower extremity and has been trying to keep this area clean but did wear some taller boots that she thinks irritated this area. Recently she has noted some increase in swelling and scabbing as well as redness. She denies any headaches or fevers but she has noted fatigue. She likes to go outside but has not noticed any tick bites. She states that her dad is obese and has similar lesions quite frequently but has never been to a doctor. She has had blood work done in Europe but nothing here to evaluate her sugars.

Review of systems:

Review of Systems
Constitutional: Positive for fatigue. Negative for chills and fever.
HENT: Negative.
Gastrointestinal: Negative.
Musculoskeletal: Negative.
Skin: Positive for rash and wound.
Neurological: Negative.
Psychiatric/Behavioral: Negative.

There is no problem list on file for this patient.

Current Outpatient Medications Ordered in Epic

Medication	Sig
• sulfamethoxazole-trimethoprim (BACTRIM DS) 800-160 mg per tablet	Take 1 tablet (160 mg of trimethoprim total) by mouth 2 (two) times a day for 10 days.

Objective:

Vitals:

	08/18/22 1451
BP:	110/74
BP Location:	Left arm
Patient	Sitting
Position:	
Cuff Size:	Medium
Pulse:	81
Temp:	36.9 °C (98.4 °F)
SpO2:	98%

There is no height or weight on file to calculate BMI.

Physical Exam

Constitutional:

Appearance: Normal appearance.

HENT:

Head: Normocephalic and atraumatic.
Nose: Nose normal.
Mouth/Throat:
Mouth: Mucous membranes are dry.

Musculoskeletal:

Comments: Right lateral lower leg with 1 x 2 cm eschar noted surrounded by 2 cm of indurated erythema surrounded by another 3 cm of erythema, mild tenderness to palpation, no fluctuance

Skin:

General: Skin is warm and dry.
Findings: Erythema and lesion present.

Neurological:

General: No focal deficit present.
Mental Status: She is alert and oriented to person, place, and time.

Psychiatric:

Mood and Affect: Mood normal.
Behavior: Behavior normal.

Plan:

Problem List Items Addressed This Visit

None

Visit Diagnoses

Fatigue, unspecified type - Primary
Recurrent infection of skin
Cellulitis of right lower extremity

Start her on Bactrim twice a day for 10 days. She will soak this area and keep it clean and dry. If this worsens she will follow-up. She will avoid wearing boots that irritate this area. I have put in blood work for Lyme and blood sugar which she can do in the morning.

Follow-up appointments:

No future appointments.

I have used electronic speech recognition to prepare this document. The transcription errors which may arise from this process are unusual and can easily evade proofreading. For example, short words such as "not" may simply be omitted - completely changing the meaning of a sentence. Please beware such errors and do not hesitate to call me for anything which does not make sense.