

Progress Notes

Timothy Kennard, MD at 10/22/2024 1:30 PM

Subjective

Patient ID: Jennifer Beth Cartrette is a 42 y.o. female.

Chief Complaint

Patient presents with

- Medication Refill
adderall

HPI

History of Present Illness

The patient presents for evaluation of multiple medical concerns.

She does not need an Adderall refill currently. She had a 3-hour meeting with her patient advocate, who suspects Ehlers-Danlos syndrome. She is considering genetic testing and treatment options for Ehlers-Danlos syndrome.

She has experienced nausea for 5-6 years and has a history of bulimia with daily vomiting for 30 years. She also reports chest pain since 2017 and seeks definitive answers.

She has knee inflammation, starting with the right knee 4-5 years ago, now affecting the left knee. She stopped methotrexate and is considering more specialists. She uses compression and ice, which helps. She avoids movement to prevent symptom exacerbation.

She has felt unwell for 3 months with shoulder and arm issues and is concerned about needing another back surgery due to an unstable spine.

She reports new tinnitus, described as ocean-like, possibly related to blood pressure. She also experiences brain fog and mental exhaustion, attributing it to a lack of oxygen. She is out of Adderall and feels her brain is not functioning properly.

She seeks an autism assessment and deals with sensory issues.

FAMILY HISTORY

- Family history of stroke and aneurysms
- Grandmother died of an aneurysm
- Uncle had an aneurysm at age 60



Objective

Physical Exam

Vitals:

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BP:	122/76
BP Location:	Left arm
Patient Position:	Sitting
Pulse:	74
Temp:	97.7 °F (36.5 °C)
TempSrc:	Oral
SpO2:	100%
Weight:	65.2 kg (143 lb 12.8 oz)
Height:	1.6 m (5' 3")

Physical Exam

Constitutional:

Appearance: Normal appearance.

HENT:

Head: Normocephalic.

Eyes:

Extraocular Movements: Extraocular movements intact.

Conjunctiva/sclera: Conjunctivae normal.

Pupils: Pupils are equal, round, and reactive to light.

Cardiovascular:

Rate and Rhythm: Normal rate and regular rhythm.

Pulmonary:

Effort: Pulmonary effort is normal.

Breath sounds: Normal breath sounds.

Neurological:

Mental Status: She is alert.

Psychiatric:

Mood and Affect: Mood normal.

Physical Exam

Results

Assessment and Plan

1. Bipolar affective disorder, remission status unspecified (CMD)

As below

2. PTSD (post-traumatic stress disorder)

Mood overall stable, cont to monitor currently.

3. ADHD (attention deficit hyperactivity disorder), combined type

ADD -

-Medication working well at this time

-Tolerating medication well, no side effects

-Counseled and reviewed that this is a schedule II medication and can only prescribed for 90 days per prescribing episode. Discussed need for follow-up every 90 days or 3 months for ongoing refills.

-Medication refills were provided today for 3 months. Given prescriptions dated today, one month and 2 months from now.

-Follow up to review and reevaluate medications in 3 months, sooner as needed

4. POTS (postural orthostatic tachycardia syndrome)

As below

5. EDS (Ehlers-Danlos syndrome)

H/O POTS and EDS, working with pt advocate currently and awaiting eval review for guidance on additional eval and f/up

6. Chronic bilateral low back pain without sciatica

Reviewed prior notes from rheumatology, minimal DDD on l-spine xray and straightening normal curvature. Rec PT. She reports working with pt advocate about PT that also specializes in EDS

Pulsatile Tinnitus

On the right. Check ct angio neck. Consider carotid US but may not show vasculature behind middle ear

Electronically signed:

Timothy P Kennard, MD

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