

Name: Jennifer Beth Cartrette | DOB: 9/13/1982 | MRN: 71030963 | PCP: Timothy Kennard, MD | Legal Name: Jennifer Beth Cartrette

## Appointment Details

### Notes

#### ED Provider Notes

##### David Locascio at 10/26/22 1656

NOVANT HEALTH MATTHEWS MEDICAL CENTER

#### ED Provider Note

Jennifer Beth Cartrette 40 y.o. female DOB: 9/13/1982 MRN: 71030963

#### History

#### Chief Complaint

Patient presents with

- Head Injury With LOC

*Fell down 6 steps of stairs yesterday at 1600; endorses LOC for approx 20 seconds, nausea, diaphoresis immediately after fall. Pt reports "fogginess" and confusion. Pt feels like she broke her tailbone. Hx broken tailbone, spinal fusion, arthritis. Pupils equal round and reactive to light.*

Medical screening initiated and orders placed by Bethany A Abernethy, PA-C.

10/26/2022 / 4:56 PM

AS above.

History provided by: **Patient**

Language interpreter used: **No**

#### Fall

The accident occurred yesterday. The fall occurred while walking. She fell from a height of 3 to 5 ft. She landed on a hard floor. Point of impact: Buttocks, back. Pain location: Lower back, buttocks. The pain is at a severity of 5/10. The pain is moderate. She was ambulatory at the scene. There was no entrapment after the fall. There was no drug use involved in the accident. Associated symptoms include nausea and loss of consciousness. Pertinent negatives include no visual change, no fever, no numbness, no abdominal pain, no bowel incontinence, no vomiting, no hematuria, no headaches, no hearing loss and no tingling. The symptoms are aggravated by activity.

#### Past Medical History:

Diagnosis	Date
• ADHD	
• Anorexia	
• Bipolar disorder (*)	
• Broken teeth <i>upper left, lower right</i>	
• Colitis <i>Ischemic</i>	age 25
• Colon polyp <i>Ischemic Colitis</i>	2005

- DDD (degenerative disc disease), cervical
- Graves' disease
- Graves' eye disease
- Presence of dental prosthetic device  
*Right lower x1*
- PTSD (post-traumatic stress disorder)

**Past Surgical History:**

## Procedure

## Laterality

## Date

- Colonoscopy
- Sinus surgery
- Spinal fusion  
*ACDF C4-5, C5-6*

2008

2008

**Social History**

## Substance and Sexual Activity

## Alcohol Use

Not Currently

*Comment: rarely***Social History**

## Tobacco Use

## Smoking Status

Former Smoker

- Packs/day: 0.25
- Years: 10.00
- Pack years: 2.50
- Start date: 1/1/2000
- Quit date: 1/1/2013
- Years since quitting: 9.8

## Smokeless Tobacco

Never Used

**E-Cigarettes**

- Vaping Use Never User
- Start Date
- Cartridges/Day
- Quit Date

**Social History**

## Substance and Sexual Activity

## Drug Use

Not Currently

- Types: Marijuana

*Comment: last used - 2 to 3 yrs. ago*

## No Known Allergies

**Home Medications**

- |  |  |
|--|--|
| AMPHETAMINE-<br>DEXTROAMPHETAMINE<br>(ADDERALL) 20 MG TABLET | Take one tablet (20 mg dose)<br>by mouth 3 (three) times a day<br>for 30 days. |
| AMPHETAMINE-<br>DEXTROAMPHETAMINE<br>(ADDERALL) 20 MG TABLET | Take one tablet (20 mg dose)<br>by mouth 3 (three) times a day.                |
| AMPHETAMINE-<br>DEXTROAMPHETAMINE<br>(ADDERALL) 20 MG TABLET | Take one tablet (20 mg dose)<br>by mouth 3 (three) times a day.                |
| CHLORHEXIDINE (PERIDEX)<br>0.12% SOLUTION                    | SMARTSIG:1 Capful(s) By<br>Mouth 3 Times Daily                                 |
| FOLIC ACID 1 MG TABLET                                       | Take one tablet (1 mg dose) by<br>mouth daily.                                 |

METHOTREXATE 2.5 MG TABLET	Take four tablets (10 mg dose) by mouth once a week.
MUIPIROCIN (BACTROBAN) 2 % OINTMENT	Apply topically 2 (two) times daily.
ONDANSETRON (ZOFRAN- ODT) 4 MG DISINTEGRATING TABLET	Take one tablet (4 mg dose) by mouth every 8 (eight) hours as needed for Nausea.
PANTOPRAZOLE SODIUM (PROTONIX) 40 MG TABLET	Take one tablet (40 mg dose) by mouth daily.

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### Review of Systems

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#### Review of Systems

Constitutional: Negative for activity change, appetite change, chills, diaphoresis, fatigue, fever and unexpected weight change.

HENT: Negative for congestion, dental problem, drooling, ear discharge, ear pain, facial swelling, hearing loss, mouth sores, nosebleeds, postnasal drip, rhinorrhea, sinus pressure, sinus pain, sneezing, sore throat, tinnitus, trouble swallowing and voice change.

Eyes: Negative for photophobia, pain, discharge, redness, itching and visual disturbance.

Respiratory: Negative for apnea, cough, choking, chest tightness, shortness of breath, wheezing and stridor.

Cardiovascular: Negative for chest pain, palpitations and leg swelling.

Gastrointestinal: Positive for nausea. Negative for abdominal distention, abdominal pain, anal bleeding, blood in stool, bowel incontinence, constipation, diarrhea, rectal pain and vomiting.

Endocrine: Negative for cold intolerance, heat intolerance, polydipsia, polyphagia and polyuria.

Genitourinary: Negative for decreased urine volume, difficulty urinating, dysuria, enuresis, flank pain, frequency, genital sores, hematuria and urgency.

Musculoskeletal: Negative for arthralgias, back pain, gait problem, joint swelling, myalgias, neck pain and neck stiffness.

Skin: Negative for color change, pallor, rash and wound.

Allergic/Immunologic: Negative for environmental allergies, food allergies and immunocompromised state.

Neurological: Positive for loss of consciousness. Negative for dizziness, tingling, tremors, seizures, syncope, facial asymmetry, speech difficulty, weakness, light-headedness, numbness and headaches.

Hematological: Negative for adenopathy. Does not bruise/bleed easily.

Psychiatric/Behavioral: Negative for agitation, behavioral problems, confusion, decreased concentration, dysphoric mood, hallucinations, self-injury, sleep disturbance and suicidal ideas.

The patient is not nervous/anxious and is not hyperactive.

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### Physical Exam

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#### ED Triage Vitals [10/26/22 1620]

BP	(!) 155/95
Heart Rate	109
Resp	18
SpO2	100 %
Temp	98.9 °F (37.2 °C)

#### Physical Exam

Constitutional: She appears well-developed and well-nourished. She does not appear distressed, does not appear ill and no respiratory distress. Not diaphoretic.

HENT:

Head: Normocephalic and atraumatic.

Right Ear: Normal external ear.

Left Ear: Normal external ear.

Nose: Nose normal.

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

Right eye: no drainage. no conjunctival injection. Left eye: no drainage. no conjunctival injection.

No scleral icterus. No conjunctival pallor. No photophobia.

Neck: Normal range of motion. Neck supple. No JVD. No palpable c-spine step off and no spinous process tenderness. No tracheal deviation and normal range of motion. No nuchal rigidity. No thyromegaly present.

Cardiovascular: Normal rate, regular rhythm, normal heart sounds and intact distal pulses. No audible murmur. No friction rub and gallop.

Pulmonary/Chest: No respiratory distress. Respiratory effort normal and breath sounds normal. No chest wall tenderness.

Abdominal: Soft. There is no abdominal tenderness. There is no guarding and no rebound.

Abdomen not distended. Bowel sounds are normal. hernia is not present. No mass present.

Musculoskeletal: No T spine tenderness and L spine tenderness. Normal range of motion. No obvious deformity noted to extremities.

Cervical back: Normal range of motion and neck supple. No spinous process tenderness. Normal range of motion. no edema.

Lymphadenopathy:

No cervical adenopathy.

Neurological: She is alert and oriented to person, place, and time. She has normal speech.

Cranial nerves intact II through XII. She has normal reflexes. She displays normal reflexes. She exhibits normal muscle tone. GCS Total Score = 15. eye opening = 4 verbal response = 5 best motor response = 6 pupil unreactive to light = 0

Skin: Skin is warm. Not diaphoretic. Skin is dry. No erythema noted. No rash noted. No pallor.

Psychiatric: She has a normal mood and affect. Her behavior is normal. Judgment and thought content normal.

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**ED Course**

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Lab results:

No data to display

Imaging:

**CT HEAD WO IV CONTRAST**

*Narrative:*

*HEAD CT WITHOUT INJECTED CONTRAST*

*TECHNIQUE: Axial scans were obtained through the brain without contrast. CT dose reduction techniques were utilized.*

*PROVIDED CLINICAL INDICATION: head injury with LOC yesterday*

*ADDITIONAL CLINICAL INDICATION: None available*

*COMPARISON: MRI orbit dated 2/24/2018*

*FINDINGS:*

*There is no acute territorial infarct, intracranial hemorrhage, or mass effect. The ventricles and sulci are age-appropriate. The paranasal sinuses are clear. The mastoid air cells are well aerated. Asymmetric protrusion of the right globe is again noted. The visualized orbits are otherwise unremarkable. There is no displaced calvarial fracture.*

*Impression:*

*IMPRESSION:*

*No acute intracranial findings.*

*Electronically Signed by: Whitney Feltus, MD, on 10/26/2022 6:03 PM*

**XR SACRUM AND COCCYX**

*Narrative:*

*XR SACRUM AND COCCYX:*

*PROVIDED CLINICAL INFORMATION: Injury-site NOS*

COMPARISON: None available

**FINDINGS:**

No evidence of acute displaced fracture or malalignment.

Electronically Signed by: Robert Dufour on 10/26/2022 5:48 PM

**XR SPINE LUMBAR 2-3 VIEWS**

**Narrative:**

XR SPINE LUMBAR 2-3 VIEWS

PROVIDED CLINICAL INDICATION: Lower Back Pain

ADDITIONAL CLINICAL INDICATION: None available

COMPARISON: None available

**INTERPRETATION:**

The alignment is normal.

There is no evidence of compression fracture.

Disc space heights are preserved. There are small multilevel endplate osteophytes.

Soft tissues are normal in appearance.

**Impression:**

IMPRESSION:

No acute compression fracture or malalignment.

Electronically Signed by: Whitney Feltus, MD, on 10/26/2022 5:52 PM

ECG:

**ECG Results**

None

Pre-Sedation  
Procedures

**MDM**

Number of Diagnoses or Management Options

Diagnosis management comments: No evidence of external trauma. No radicular symptoms

Coding

Provider Communication

**New Prescriptions**

HYDROCODONE- ACETAMINOPHEN (NORCO) 5- 325 MG PER TABLET	Take one tablet by mouth every 6 (six) hours as needed for Pain for up to 8 doses.
Quantity: 8 tablet	Refills: 0
MELOXICAM (MOBIC) 15 MG TABLET	Take one tablet (15 mg dose) by mouth daily for 7 days.
Quantity: 7 tablet	Refills: 0

**Modified Medications**

No medications on file

**Discontinued Medications**

No medications on file

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**Clinical Impression**

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Final diagnoses:

**Fall, initial encounter****Contusion of lower back, initial encounter****Closed head injury, initial encounter****ED Disposition**

ED	Conditio	Comment
Disposition	n	--
<b>Discharge</b>	Stable	

**Follow-up Information**

Novant Health First Charlotte Physicians Matthews In 5 days.

Contact information:

1401 Matthews Township Parkway, Suite 200

Matthews North Carolina 28105-5403

704-384-6901

Scott A Burbank, MD In 1 week.

Specialty: Orthopaedic Surgery

Comments: As needed

Contact information:

4601 Park Rd

Ste 250

Charlotte NC 28209-2373

704-323-2000

**Electronically signed by:**

David F Locascio, MD

10/26/22 1851

## Discharge Attachments

Coccyx Injury Discharge Instructions (English)

Concussion Discharge Instructions, Adult (English)

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