

CC: cough

HISTORIAN: patient

INTERPRETER: Vietnamese

HPI:

Patient is an 82-year-old female with history of hypertension, comes to the emergency room with a chief complaint of cough. Cough has been present for the last 4 days and is progressively getting worse. It is associated with mild shortness of breath and cough is productive of yellow sputum. She denies fever but she states that she does have chills. She denies any chest pain, or sick contacts. She did follow-up with her primary care doctor yesterday who prescribed her promethazine DM, an allergy medicine and azithromycin. She did take 2 tablets but then this evening, she was unable to sleep because of her cough. An x-ray has been ordered by her primary care doctor to be done in the morning. No other complai

Nursing notes have been reviewed by me

ROS

ROS pos for that stated in the HPI

all other systems reviewed and are negative

PMHx: As noted in the HPI

PFAMHx: NEG

SOCHx: No Smoking

MEDICATIONS: REVIEWED

ALLERGIES: REVIEWED

PHYSICAL EXAM:

VITALS:

Vital Signs: This Visit																											
Dat e/T im e	B P (m/ H g)	BP Pos n/Si te	M A P m/ H g)	H e a r t H g)	Pul se Sit e	R e s p p C)	T e m p p F)	T e m p p F)	S P 2 (%)	O L / m in	F i O 2 2 m/ H g)	Et C O 2 2 m/ H g)	O D e 2 vi c e	B I o o d S c o r g a r	P a i n d S c o r g a r	H e i g h t (c m)	H e i g h t (i n)	W ei g ht (k g)	W ei g ht (l bs /oz)	S c a l e	B M I	B S A	H e ad C ir (c m)				

01/	15	SIT	96	8	BR	2	3	9	9						1	6	4	96	0	1	1	
07/	2/	TIN		9	AC	4	7	9	6						5	2	3.	.0		7	.	
20	68	G/L			HI		.	.	%						7	in	5			.	3	
26		AR			AL		5	5							.	4	k			5	8	
01:		M			O		O								5	c	g			6		
03					R		R								m							
		A			A		A															
		L			L																	

GENERAL: well appearing, actively coughing

SKIN: normal inspection, well hydrated with no rashes

HEENT: normocephalic/atraumatic, moist mucous membranes,

NECK: nontender, no cervical midline ttp with no pain on AROM.

LYMPH: no lad

RESP: scattered rhonchi appreciated b/l

HEART: regular rate and rhythm with no murmurs appreciated

GI: abdomen normal in appearance with normal sounding bowel sounds. no distention, no ttp noted to any quadrant

GU: no cvat

MUSC: no tenderness or effusions; full ROM of all joints without pain.

NEURO: AAO x 4, cooperative and appropriate, moves all ext equally, ambulatory with steady gait.

PSYCH: normal mood, normal mentation,

LABS:

Lab Results: This Visit						
Test	Results	Units	Reference Range	Ordered	Collected	Status
GLUCOSE	113 H	mg/dL	L=74 H=106	01/07/202 6 01:03	01/07/202 6 01:50	final
BUN	21 H	mg/dL	L=7 H=17	01/07/202 6 01:03	01/07/202 6 01:50	final
AGE	82	yrs		01/07/202 6 01:03	01/07/202 6 01:50	final
CREATININE.	0.8	mg/dL	L=0.5 H=1.0	01/07/202 6 01:03	01/07/202 6 01:50	final
GFR.	73	mL/min		01/07/202 6 01:03	01/07/202 6 01:50	final

BUN/CREAT	26			01/07/202 6 01:03	01/07/202 6 01:50	final
SODIUM	131 L	mmol/ L	L=137 H=145	01/07/202 6 01:03	01/07/202 6 01:50	final
POTASSIUM	4.0	mmol/ L	L=3.5 H=5.1	01/07/202 6 01:03	01/07/202 6 01:50	final
CHLORIDE	102	mmol/ L	L=98 H=107	01/07/202 6 01:03	01/07/202 6 01:50	final
CO2	19 L	mmol/ L	L=22 H=30	01/07/202 6 01:03	01/07/202 6 01:50	final
ANION GAP	10		L=5 H=15	01/07/202 6 01:03	01/07/202 6 01:50	final
CALCIUM	8.0 L	mg/dL	L=8.4 H=10.2	01/07/202 6 01:03	01/07/202 6 01:50	final
TOTAL BILI	0.6	mg/dL	L=0.2 H=1.3	01/07/202 6 01:03	01/07/202 6 01:50	final
TOTAL PROTEIN	7.0	g/dL	L=6.3 H=8.2	01/07/202 6 01:03	01/07/202 6 01:50	final
ALBUMIN	3.7	g/dL	L=3.5 H=5.0	01/07/202 6 01:03	01/07/202 6 01:50	final
SGOT/AST	69 H	U/L	L=14 H=36	01/07/202 6 01:03	01/07/202 6 01:50	final
ALKALINE PHOS	71	U/L	L=38 H=126	01/07/202 6 01:03	01/07/202 6 01:50	final
SGPT/ALT	49	U/L	L=9 H=52	01/07/202 6 01:03	01/07/202 6 01:50	final
LACTIC ACID	1.5	mmol/ L	L=0.7 H=2.0	01/07/202 6 01:03	01/07/202 6 01:50	final
CULTURE BLOOD				01/07/202 6 01:03	01/07/202 6 01:27	registered
WBC	12.40 H	cmm	L=4.50 H=11.00	01/07/202 6 01:03	01/07/202 6 01:12	final

RBC	3.24 L	cmm	L=4.50 H=5.10	01/07/202 6 01:03	01/07/202 6 01:12	final
HEMOGLOBIN	10.4 L	g/dL	L=12.3 H=15.3	01/07/202 6 01:03	01/07/202 6 01:12	final
HEMATOCRIT	30.2 L	%	L=35.9 H=44.6	01/07/202 6 01:03	01/07/202 6 01:12	final
MCV	93	fL	L=79 H=98	01/07/202 6 01:03	01/07/202 6 01:12	final
MCH	32	pg	L=26 H=33	01/07/202 6 01:03	01/07/202 6 01:12	final
MCHC	34.4	g/dL	L=32.0 H=36.0	01/07/202 6 01:03	01/07/202 6 01:12	final
RDW	13.0	%	L=11.5 H=14.5	01/07/202 6 01:03	01/07/202 6 01:12	final
PLATELETS	185	cmm	L=130 H=400	01/07/202 6 01:03	01/07/202 6 01:12	final
MPV	9.0	fL	L=7.4 H=10.4	01/07/202 6 01:03	01/07/202 6 01:12	final
NEUT	77.70 H	%	L=40.00 H=70.00	01/07/202 6 01:03	01/07/202 6 01:12	final
LYMPH	10.90 L	%	L=20.00 H=44.00	01/07/202 6 01:03	01/07/202 6 01:12	final
MONO	9.30 H	%	L=1.00 H=8.00	01/07/202 6 01:03	01/07/202 6 01:12	final
EOS	1.70	%	L=1.00 H=4.00	01/07/202 6 01:03	01/07/202 6 01:12	final
BASO	0.40 L	%	L=0.50 H=1.00	01/07/202 6 01:03	01/07/202 6 01:12	final
NRBC				01/07/202 6 01:03	01/07/202 6 01:12	final
METAMYELOCYT E				01/07/202 6 01:03	01/07/202 6 01:12	final

MYELOCYTE				01/07/202 6 01:03	01/07/202 6 01:12	final
PROMYELOCYT E				01/07/202 6 01:03	01/07/202 6 01:12	final
BLASTS				01/07/202 6 01:03	01/07/202 6 01:12	final
ATYP LYMPH				01/07/202 6 01:03	01/07/202 6 01:12	final
#NEUT	9.60 H	K/uL	L=1.80 H=7.70	01/07/202 6 01:03	01/07/202 6 01:12	final
#LYMPH	1.40	K/uL	L=0.90 H=4.84	01/07/202 6 01:03	01/07/202 6 01:12	final
#MONO	1.20 H	K/uL	L=0.05 H=0.88	01/07/202 6 01:03	01/07/202 6 01:12	final
#EOS	0.20	K/uL	L=0.05 H=0.44	01/07/202 6 01:03	01/07/202 6 01:12	final
#BASO	0.00 L	K/uL	L=0.02 H=0.11	01/07/202 6 01:03	01/07/202 6 01:12	final
MANUAL DIFF	NOT INDICATED			01/07/202 6 01:03	01/07/202 6 01:12	final
RBC MORPH	NOT INDICATED			01/07/202 6 01:03	01/07/202 6 01:12	final
CULTURE BLOOD				01/07/202 6 01:03	01/07/202 6 01:12	register e d
PROTIME	14.6 H	sec	L=12.0 H=14.4	01/07/202 6 01:03	01/07/202 6 01:12	final
INR	1.1		L=0.9 H=1.3	01/07/202 6 01:03	01/07/202 6 01:12	final
SEND TO PHARMACY	YES			01/07/202 6 01:03	01/07/202 6 01:12	final
SOURCE.	Nasal			01/07/202 6 01:03	01/07/202 6 01:03	final

COVID 19 AG	Presumpt.Neg		NORMAL:Negative	01/07/2026 01:03	01/07/2026 01:03	final
REAGENT KIT:	Quidel QuickVue			01/07/2026 01:03	01/07/2026 01:03	final
DHS INFLU A/B AG (REPORTABLE)				01/07/2026 01:03	01/07/2026 01:03	registered
DHS RPT COVID-19 AG (REPORTABLE)				01/07/2026 01:03	01/07/2026 01:03	registered
INFLUENZA A	NEGATIVE		NORMAL:NEGATIVE	01/07/2026 01:03	01/07/2026 01:03	final
INFLUENZA B	NEGATIVE		NORMAL:NEGATIVE	01/07/2026 01:03	01/07/2026 01:03	final
BMP				01/08/2026 05:00		registered
CULTURE RESPIRATORY W GRAM STAIN				01/07/2026 02:50		registered
LACTIC ACID				01/07/2026 03:03		cancelled

EKG:

nsr, normal axis, no acute st elevations or depressions, no ectopy

RHYTHM STRIP (per my interpretation):

Rte 75, sr, no ectopy

RADIOLOGY:

CXR: no acute process per rad

I have reviewed the CXR and per my interpretation, increased markings/infiltrates in the RLL

ED COURSE AND MEDICAL DECISION MAKING:

Patient seen and evaluated by me in the emergency room. Patient placed on continuous cardiac monitoring and continuous pulse oximetry demonstrating normal sinus rhythm. Initial triage vital is no hypoxia on room air however patient's oxygen did drop to 80 90 90%. She is put on 2 L nasal cannula.

Radiologist read x-ray is normal however per my interpretation, there are increased markings in the right lower lobe suggesting a right lower lobe pneumonia. Blood cultures were sent and she was sent empirically on Zosyn. We will admit for further care. I spoke to Dr. Zhong who agrees to admit patient to her service. Patient is being admitted in fair condition

DIAGNOSTIC IMPRESSION:

1. Right lower lobe pneumonia
2. Hypoxia

DISPOSITION:

Admit under Dr. Zhong

CONDITION:

Fair

DECISION TO DISPO TIME:

2:42 a.m.