

# Medical Report



## Patient Information:

**Name:** John Smith

**Address:** 725 5th Ave, New York, NY 10022, USA.

**Date of Birth:** January 1, 1980

**ID Number:** 987654321

**Insurance Number:** INS123456789

**Email:** [john.smith@example.com](mailto:john.smith@example.com)

**Credit Card Number:** 6592-1223-4857-1234

## Date of Consultation: February 18, 2024

*Chief Complaint:* The patient presents with complaints of persistent headaches and fatigue over the past month.

*History of Present Illness:* Mr. Smith reports experiencing frequent headaches, particularly in the frontal region, accompanied by feelings of fatigue and occasional dizziness. He notes that the symptoms have been progressively worsening over the past few weeks and are now interfering with his daily activities.

## Past Medical History:

- Hypertension, diagnosed 5 years ago.
- Allergic rhinitis, managed with over the counter antihistamines.
- No history of significant surgical procedures.

## Family History:

- Father deceased due to myocardial infarction age 60.
- Mother alive, with a history of hypertension and diabetes.
- No siblings.



*Social History:* Mr. Smith is employed as a software engineer and reports a sedentary lifestyle. He denies tobacco or recreational drug use. He consumes alcohol occasionally, socially.

## Review of Systems:

- Cardiovascular: No chest pain or palpitations.
- Respiratory: No cough or shortness of breath.
- Gastrointestinal: Occasional heartburn, otherwise unremarkable.
- Neurological: Headaches as described above.
- Musculoskeletal: No joint pain or swelling.
- Dermatological: No rashes or lesions.

## Physical Examination:

- Vital Signs: Blood pressure 130/80 mmHg, pulse 72 bpm, respiratory rate 16/min, temperature 98.6°F.
- General: Alert and oriented x3, no acute distress.
- Head: Normocephalic, atraumatic.
- Eyes: Pupils equal and reactive to light, extraocular movements intact.
- Ears, Nose, Throat: Tympanic membranes clear, nares patent.
- Cardiovascular: Regular rate and rhythm, no murmurs.
- Respiratory: Clear to auscultation bilaterally.
- Abdomen: Soft, non-tender, non-distended.
- Neurological: Cranial nerves intact, no focal deficits.

## Assessment and Plan:

- Differential diagnosis for Mr. Smith's headaches includes tension-type headaches, migraines, and secondary causes such as sinusitis or medication overuse. Further evaluation with imaging studies may be warranted if symptoms persist.
- Management of hypertension to optimize blood pressure control.
- Symptomatic relief with over-the-counter analgesics as needed for headaches.



- Lifestyle modifications including stress reduction techniques and regular physical activity.
- Follow-up appointment scheduled in two weeks to assess response to treatment and consider additional interventions as necessary.

## Follow-up Instructions:

- Mr. Smith is advised to monitor his blood pressure at home regularly and to report any significant changes or new symptoms promptly.
- He is counseled on lifestyle modifications including a heart-healthy diet, regular exercise, and smoking cessation if applicable.

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Dr. Emily Johnson, M.D.  
Board Certified Physician  
Mayo Clinic

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