

Patient: **LITTLE, JAMAR**
Treatment Facility: **82nd MEDICAL GROUP**
Patient Status: **Outpatient**

Date: **09 Nov 2006 1420 CST**
Clinic: **STUDENT HEALTH CARE CLINIC**

Appt Type: **ACUT**
Provider: **BOWMAN, BEVERLY A**

Reason for Appointment: ankle pain
Appointment Comments:
ankle pain

AutoCites Refreshed by BOWMAN, BEVERLY A @ 09 Nov 2006 1428 CST

Problems

• PSEUDOFOLLICULITIS BARBAE

Allergies

• No Known Allergies

Active Medications

Active Medications	Status	Sig	Refills Left	Last Filled
Ibuprofen (Motrin Eq.) Tablet 800mg Oral	Active	1 TAB Q6H #12 RF1	0 of 1	18 Jul 2006
CLIOQUINOL/HYDROCORTISONE (IODOCHLORHYDROXYQUIN W/HC EQ.) CREAM TOP	Active	USE DAILY IN AM AFTER WASHING FACE OR SHAVING.	1 of 1	05 Jul 2006
TRETINOIN, 0.05%, CREAM(GM), TOPICAL	Active	USE SPARINGLY UD EVERY 1 of 1 EVENING AFTER WASHING FACE		05 Jul 2006

Screening Written by UNDERWOOD, BRIDGET L @ 09 Nov 2006 1439 CST

Allergen information verified by UNDERWOOD, BRIDGET L @ 09 Nov 2006 1439 CST

Reason(s) For Visit (Chief Complaint):

Comments: L ankle pain

Vitals

Vitals Written by UNDERWOOD, BRIDGET L @ 09 Nov 2006 1439 CST

BP: 137/83, HR: 89, RR: 18, HT: 69 in, WT: 150 lbs, BMI: 22.15, BSA: 1.828 square meters,

Questionnaire AutoCites Refreshed by BOWMAN, BEVERLY A @ 09 Nov 2006 1428 CST

Questionnaires

No Questionnaires Found.

SO Note Written by BOWMAN, BEVERLY A @ 09 Nov 2006 1431 CST

Chief complaint

The Chief Complaint is: Left Ankle Pain.

History of present illness

The Patient is a 20 year old male.

• Left ankle soft tissue swelling • Lateral left ankle joint pain • Ankle joint swelling on the left • Ankle joint stiffness on the left
• Bone pain in the left foot ° No left knee joint pain ° No left knee joint swelling ° No anterior left ankle joint pain ° Not in the posterior region ° Not on the medial aspect ° No bone pain in the left heel

Additional History of Present Illness: twisted ankle and foot yesterday. Pain during the night from swelling. Limping slightly

Past medical/surgical history

Reported History:

Surgical / procedural: No surgical / procedural history.

Diagnosis History:

No osteoarthritis

Diagnosis History:

No fracture of the ankle

Personal history

Behavioral history: No tobacco use

Alcohol: Not using alcohol

Habits: Exercising regularly

Family history

Family medical history Not pertinent to HPI

Father:

Paternal GF:

Paternal GM:

Paternal Uncle:

Paternal Aunt:

Mother:

Maternal GF:

Maternal GM:
Maternal Uncle:
Maternal Aunt:
Brother:
Sister:
Child:

Review of systems

Systemic symptoms: No fever and no chills.

Musculoskeletal symptoms: No arthralgias.

Physical findings

Vital signs:

° Current vital signs reviewed.

General appearance:

° Alert. ° Well developed. ° In no acute distress.

Musculoskeletal system:

Knee:

Left knee: ° No tenderness on palpation.

Leg (Below Knee):

Left leg: ° Calf was not swollen. ° Achilles tendon was not tender on palpation. ° No tenderness on palpation of the proximal fibula.

Ankle:

Left ankle: • Swelling. • Tenderness on palpation of the lateral aspect. • Plantar flexion was abnormal. • Pain was elicited by motion. • Ankle was tender on ambulation. ° No erythema. ° Ankle was not warm. ° No induration. ° Achilles tendon insertion was not swollen. ° No tenderness on palpation of the anterior aspect. ° No tenderness on palpation of the medial aspect. ° No tenderness on palpation of the posterior aspect. ° No tenderness on palpation at the Achilles tendon insertion. ° Motion was normal. ° Inversion was normal. ° Eversion was normal. ° Ankle was not dislocated. ° Ankle was not subluxed. ° Ankle did not show laxity. ° Anterior drawer sign was not observed. ° Posterior drawer sign was not observed. ° A Thompson test for achilles tendon rupture was negative.

Foot:

Left foot: • Swelling. • Tenderness on palpation. ° No tenderness on palpation of the lateral midfoot.

A/P Written by BOWMAN, BEVERLY A @ 09 Nov 2006 1430 CST

1. FOOT STRAIN: xrays - unremarkable.

ace wrap

Medication(s): -IBUPROFEN--PO 800MG TAB - T1 TB PO TID WITH FOOD #30 RF0 Qt: 30 Rf: 0
Patient Instruction(s): -Ace Bandage
-Compression Of Affected Area
-Elevation of Extremity
-Modalities Cryotherapy Ice
-Rest The Extremity

2. ANKLE SPRAIN

3. TOE SPRAIN

Disposition Written by BOWMAN, BEVERLY A @ 09 Nov 2006 1444 CST

Released w/ Work/Duty Limitations

Follow up: with PCM.

Discussed: Diagnosis, Medication(s)/Treatment(s), Alternatives, Potential Side Effects with Patient who indicated understanding. 20 minutes face-to-face/floor time. >50% of appointment time spent counseling and/or coordinating care.

Signed By BOWMAN, BEVERLY A (Physician Assistant, 82nd Medical Group) @ 09 Nov 2006 1503
