Encounter #1

History & Physical Report 6/13/2023: Urgent Care Visit - Ear pain, bilateral (H92.03) (Andrew Pham, MD) Alex Wheeler Appointment: 6/13/2023 8:59 PM Location: ContinuEM - Office South Patient #: 106369138 DOB: 2/12/1991 Undefined / Language: Undefined / Race: Undefined History of Present Illness (Andrew Pham MD; 6/13/2023 9:44 PM) The patient is a 32 year old male who presents with a complaint of ear pain after having cold symptoms x1 week ago. 32-year-old male with no significant past medical history presents with bilateral ear pain. Patient had proceeding URI symptoms with congestion and sore throat week prior. Yesterday developed pain and fullness to his right ear, which improved. Patient now endorses pain and fullness to his left ear. Hears muffled noises. Denies any trauma to the external canal, no swimming. Denies fevers, chills, headaches, chest pain, shortness of breath, nausea, Problem List/Past Medical (Andrew Pham, MD; 6/13/2023 9:44 PM) No Known Problems [06/13/2023]: (Marked as Inactive) Allergies (Alexander Rojas, MA; 6/13/2023 9:14 PM) No Known Drug Allergies [06/13/2023]: Medication History (Alexander Rojas, MA; 6/13/2023 9:14 PM) AdviL (oral) Specific strength unknown - Active. Social History (Alexander Rojas, MA; 6/13/2023 9:15 PM) Drug Use Uses marijuana. Past Surgical History (Alexander Rojas, MA; 6/13/2023 9:15 PM) None [06/13/2023]: Review of Systems (Andrew Pham MD; 6/13/2023 9:44 PM) Note: CONSTITUTIONAL: No fever, No chills, No dizziness, No weakness, Note: CONSTITUTIONAL: No fever. No chills. No dizziness. No weakness. EYES: No pain, erythema, or discharge. No blurring of vision. ENT: No sore throat, ++URI symptoms. No epistaxis. No tinnitus. CARDIOVASCULAR: No chest pain. No palpitations. No lower extremity edema. RESPIRATORY: No shortness of breath, cough, pain with respiration, pleuritic chest pain. No hemoptysis. No dyspnea. GASTROINTESTINAL: Normal appetite. No nausea, vomiting, diarrhea. No pain. No bloating. No melena. GENITOURINARY: No frequency, urgency, nocturia. No hematuria or dysuria. MUSCULOSKELETAL: No arthralgias or myalgias. INTEGUMENTARY: No swelling. No bruising. No contusions. No abrasions. No lymphangitis. NEUROLOGIC: No headache. No neck pain. No numbness or tingling of the extremities. No weakness. Vitals (Alexander Rojas MA; 6/13/2023 9:16 PM) 6/13/2023 9:15 PM Weight: 104 lb Height: 71 in Body Surface Area: 1.6 m² Body Mass Index: 14.5 kg/m² Pain Level: 0/10 **Temp.:** 98.9° F (Tympanic) **Pulse: 112 (Regular) Resp.:** 19 (Unlabored) P.OX: 99% (Room air) **BP:** 113/70 (Sitting, Left Arm, Standard) covid vaxxed, pt denies pcp Physical Exam (Andrew Pham MD; 6/13/2023 9:44 PM) The physical exam findings are as follows: Note: GENERAL: Well-developed, well-nourished. Alert and in no acute distress. Interacts appropriately. SKIN: Warm and dry, No rashes or petechiae HEAD: Normocephalic, atraumatic EYES: Normal Conjunctiva and sclera. EYES: Canals are patent. Tympanic membranes are clear. NOSE: No swelling. No rhin orrhea. MOUTH/THROAT: Posterior pharynx clear. No tonsillar swelling or exudate. Uvula midline. No oral lesions. NECK: Supple CHEST: No respiratory distress. Lungs clear to auscultation bilaterally. No Wheezing or crackles noted. CV: Normal peripheral perfusion. ABDOMEN: Non-distended.

EXTREMITIES: No cyanosis. Good strength bilaterally.

NUERO: Awake, alert, conversant and grossly nonfocal. Speech is clear. PSYCH: Normal Mood and Affect.

Assessment & Plan (Andrew Pham MD; 6/13/2023 10:39 PM)

Ear pain, bilateral (H92.03)

Impression: 32-year-old male presents with bilateral ear fullness likely due to cerumen impaction. Patient underwent lavage procedure with removal of earwax. Bilateral TM clear without effusions or bulging. Low concern for acute otitis media or externa. No mastoid tendemess or fullness. Patient was educated on home remedies including Debrox solution for cerumen removal. Discussed not to use Q-tips.

I spent 30 minutes today in the the evaluation and management of this new patient. This direct patient care time listed above included my review of prior records, review and interpretation of studies completed today, initial and repeat bedside assessments of the patient's clinical status, and documentation of the encounter. None of this time described above was spent performing separate billable procedures or ancillary services. **Current Plans**

• REMOVAL, CERUMEN, IMPACTED, WITH IRRIGATION (69209)

Signed by Andrew Pham, MD (6/13/2023 10:40 PM)

Procedures

REMOVAL, CERUMEN, IMPACTED, WITH IRRIGATION (69209) Performed: 06/13/2023 (Final, Not Reviewed)