

## Hypertension Treatment Medical Report

### Patient Information:



Name: Claire Thompson



Age: 52



Gender: Female



Date of Birth: May 12, 1972



Medical Record Number: 123456789

Date of Consultation: June 15, 2024

Chief Complaint: Ms. Thompson presented for a follow-up consultation regarding her hypertension management.

History of Present Illness: Ms. Thompson has a history of hypertension for which she has been under treatment for the past five years. She reports occasional episodes of elevated blood pressure readings, particularly during times of stress. She denies any associated symptoms such as headache, dizziness, or visual disturbances. Compliance with prescribed medications and lifestyle modifications has been fair.

### Review of Systems:



Cardiovascular: No chest pain, palpitations, or shortness of breath reported.



Neurological: No headache, dizziness, or focal neurological deficits noted.



Renal: No changes in urinary frequency, urgency, or appearance.



General: No fever, chills, or unintended weight changes.

### Current Medications:

1. Amlodipine 5 mg daily

2. Hydrochlorothiazide 25 mg daily

### Physical Examination:



Vital Signs: Blood pressure 130/80 mmHg, Pulse 72 bpm, Respiratory rate 16/min, Temperature 98.6°F (37°C)



General: Well-nourished, no acute distress



Cardiovascular: Regular rate and rhythm, no murmurs or extra sounds



Abdomen: Soft, non-tender, non-distended



Extremities: No edema noted bilaterally

### Assessment:

1. Controlled hypertension on current medication regimen.

2. Patient demonstrates stable blood pressure readings without significant fluctuations.

3. Adherence to prescribed medications and lifestyle modifications remains important for long-term management.

### Plan:

1. Continue current antihypertensive regimen of amlodipine and hydrochlorothiazide.

2. Reinforce importance of medication adherence and lifestyle modifications including dietary sodium restriction, regular exercise, and stress reduction techniques.
3. Educate patient regarding potential adverse effects of medications and signs of uncontrolled hypertension.
4. Schedule regular follow-up appointments every 3 months for blood pressure monitoring and medication review.

Follow-up: Ms. Thompson to return for a follow-up appointment on September 15, 2024, for further evaluation and management of hypertension.

Signed By:

Dr. Rebecca Carter, MD  
Primary Care Physician