

(202) 444-2000

**Patient: LEE, JONG HYUN HYUN HYUN**

MRN: GUH-000002380178

Date of Service: 5/24/2024

FIN: GUH-07731762576

Attending Provider: Rahman,MD,Sabrina

DOB/Age/Sex: 6/1/1993 32 years

Male

### Patient Viewable Documents

**DOCUMENT NAME:**

ED Note-Clinician

**PERFORM INFORMATION:**

Cole,MD,Rachel Marie (5/24/2024 18:35 EDT)

**RESULT STATUS:**

Auth (Verified)

**SERVICE DATE/TIME:**

5/24/2024 18:29 EDT

**SIGN INFORMATION:**

Rahman,MD,Sabrina (5/24/2024 23:55 EDT); Cole,MD,Rachel Marie (5/24/2024 23:20 EDT)

#### Clinician Assign

##### Time Seen:

 Cole, MD, Rachel Marie / 05/24/2024 18:02 - ED Resident  
 Rahman, MD, Sabrina / 05/24/2024 18:03 - ED Attending

##### Preferred Language/Interpretation Services

Preferred Language Discussing Healthcare: English

Sources reviewed:

Initial nursing notes reviewed.

#### Chief Complaint

##### As per Triage RN:

See PA, pt sent from UC r/t sore throat, difficulty swallowing, swelling to neck. difficult controlling secretions, airway intact in triage.

Arrived From for ED: Urgent Care

#### History of Present Illness

Patient is a 30-year-old previously healthy male who presents from urgent care with sore throat. Per patient, he reports a one week history of sore throat that acutely worsened in the past 2 days, prompting urgent care evaluation. In addition to sore throat, he reports pain with swallowing, voice change, and pooling secretions only while sleeping. He reports subjective chills and congestion. He denies fever, cough, dyspnea, chest pain, abdominal pain. He reports most recent dental appointment within the past year. No antibiotics for this illness. Rapid strep at UC negative.

#### Relevant Social Determinants of Health

None apparent

#### Review of Systems

ROS per HPI above

#### Physical Exam

##### Vitals:

##### Initial Vitals

**T:** 36.7 degC (Oral) **HR:** 93 (Peripheral) **RR:** 16 **BP:** 113/79 (Automated) **SpO2:** 100%

General: Well developed, well nourished. Appears comfortable.

#### Allergies

No Known Medication Allergies

#### Medication Administration

##### Administered:

##### Medications:

Decadron, 10 mg, IV Push (05/24/2024 18:52 EDT)

Tylenol, 1000 mg, PO (05/24/2024 18:52 EDT)

 Isovue 370 (Radiology Protocol), 100 mL, IV Push (05/24/2024 19:04 EDT)  
 morphine, 4 mg, IV Push (05/24/2024 21:16 EDT)

ondansetron IV, 4 mg, IV Push (05/24/2024 21:16 EDT)

EPINEPHrine-lidocaine 1:100,000-1% injectable solution, 10 mL, Infiltrate (05/24/2024 21:17 EDT)

Unasyn + Sodium Chloride 0.9% 100 mL, IVPB (05/24/2024 21:18 EDT)

morphine, 4 mg, IV Push (05/24/2024 23:47 EDT)

ondansetron IV, 4 mg, IV Push (05/24/2024 23:47 EDT)

#### Social History

##### Smoking Status

Not Previously Documented

#### Family History

#### Lab Results

HEMATOLOGY	LATEST RESULTS	
WBC	05/24/24 17:20	16.98 High
Hgb	05/24/24 17:20	14.9

**Report Request ID:**

825675847

**Print Date/Time:**

11/26/2025 08:40

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# Georgetown University Hospital

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 DOB/Age/Sex: 6/1/1993 32 years Male

Date of Service: 5/24/2024  
 Attending Provider: Rahman,MD,Sabrina

## **Patient Viewable Documents**

Head: Normocephalic, atraumatic.	Hct	05/24/24	45.5
Eyes: Sclera are non-icteric and the conjunctiva are not injected bilaterally.		17:20	
ENT: Oral mucosa moist. Asymmetric and exquisitely tender R posterior oropharynx to palpation. Uvula mildly deviated to left. Tonsils without exudates. Secretions controlled. Right cervical lymphadenopathy.	Platelet	05/24/24	320
Respiratory: No respiratory distress. Lungs are clear to auscultation bilaterally.		17:20	
CV: Regular rate. No murmur, gallop or rub.	MCV	05/24/24	89.7
Abdomen: Soft, nondistended, nontender.	MCH	05/24/24	29.4
Neuro: Alert and oriented to person, place and time. CN grossly intact.	MCHC	05/24/24	32.7
Skin: Normal color. Warm and dry.	RDW	05/24/24	13.1
Extremities: Moves all extremities spontaneously. No lower extremity edema.	RBC	05/24/24	5.07
Psych: Cooperative, normal mood and affect.		17:20	
<b>Assessment and Plan/Medical Decision Making</b>	Neutro %	05/24/24	79.6 High
Patient is a 30-year-old previously healthy male who presents from urgent care with sore throat. HDS on arrival. All VS reviewed. Patient is well-appearing. Right posterior mouth is exquisitely tender to palpation. Right cervical lymphadenopathy noted. Differential diagnosis includes but is not limited to viral URI, PTA, pharyngitis, mononucleosis. High concern for PTA. Will provide Tylenol and Decadron. Pending labs and CT neck.	Lymph %	05/24/24	8.0 Low
Disposition pending workup.	Mono %	05/24/24	11.2
I personally reviewed and interpreted the labs and imaging. CBC notable for leukocytosis to 17. CT with large right PTA. Will provide unasyn. Will consult ENT. Signed out to Dr. Burrows pending ENT evaluation and final disposition.	Eos %	05/24/24	0.5
<b>Diagnostic Results</b> (05/24/2024 19:12 EDT CT Neck w Contrast)	Basophil %	05/24/24	0.3
<b>IMPRESSION:</b> Tonsillitis with large right peritonsillar abscess that causes mass effect and mild narrowing of the oropharyngeal airways. [1]	Neutro Absolute	05/24/24	13.5 High
<b>ED Course</b> 20:44 hrs ENT paged.	Lymph Absolute	05/24/24	1.4
21:03 hrs patient discussed with ENT. To see patient. Patient updated at bedside regarding workup and plan. Will provide morphine and Zofran. Airway remains intact.	Monocyte Abs	05/24/24	1.9 High
23:12 hrs patient reevaluated bedside. Airway remains intact. Educated patient regarding importance of PTA drainage. Signed out to Dr. Burrows pending ENT evaluation and final disposition.	Eosinophil Abs	05/24/24	0.1
<b>Discussion/Consultations</b> Dr. Nable and Dr. Lewis	Basophil Abs	05/24/24	0.0
<b>Impression/Disposition</b>	Imm Gran %	05/24/24	0.4 High
<b>ED Diagnosis:</b> 1. Abscess, peritonsillar  (87514)	Imm Gran Absolute	05/24/24	0.06 High
<b>Patient Disposition</b> No qualifying data available.	MPV	05/24/24	10.3
	NRBC auto	05/24/24	0
	NRBC Abs	05/24/24	0.0

CHEMISTRY	LATEST RESULTS	
Sodium Lvl	05/24/24	141
Potassium Lvl	17:20	
	05/24/24	4.5
	17:20	

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Male

## Patient Viewable Documents

### Discharge Prescriptions:

**Augmentin 875 mg-125 mg oral tablet:** 1 tab, PO, q12h, for 14 Day(s), 28 tab, 0 Refill(s)

Ordered by: Cole, MD, Rachel Marie - 05/24/2024 23:09

### Care assumed By

Dr. Burrows

### Attending Physician Note:

Case discussed with the Resident. I have interviewed and examined the patient and agree with the plan of care unless otherwise noted.

Chloride	05/24/24	107
	17:20	
CO2	05/24/24	25
	17:20	
BUN	05/24/24	11
	17:20	
Creatinine	05/24/24	0.86
	17:20	
est. CrCl	05/24/24	112.31
	17:20	
Glucose Lvl Random	05/24/24	99
	17:20	
Calcium Lvl	05/24/24	9.6
	17:20	
Total Protein	05/24/24	7.9
	17:20	
Globulin	05/24/24	3.3
	17:20	
Bili Total	05/24/24	0.5
	17:20	
AST	05/24/24	68 High
	17:20	
ALT	05/24/24	81 High
	17:20	
AGAP	05/24/24	9
	17:20	
GFR Universal	05/24/24	119
	17:20	
Albumin Lvl	05/24/24	4.6
	17:20	
A/G Ratio	05/24/24	1.4
	17:20	
Alk Phos	05/24/24	72
	17:20	

[1] CT Neck w Contrast; CONTRIBUTOR\_SYSTEM, POWERSCRIBE 05/24/2024 19:12 EDT

Electronically signed by:

Cole, MD, Rachel Marie on: 05.24.2024 23:20 EDT

Electronically signed by:

Rahman, MD, Sabrina on: 05.24.2024 23:55 EDT

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