

Jim Johnson (find photo)

Male – 45 years old, Blood Pressure: 165/110, Pulse: 92, Height: 5'10", Weight: 250 lb, Temperature: 96.5F, Respiratory: 55

CC: chest pain, need to sit down and take a breath after a short walk, fatigue

Encounter: add on the left encounter note as follows:

Respiratory:

- Chest symmetric, no barrel chest, normal expansion.
- No respiratory distress, no intercostal retraction, no use of accessory muscles, normal symmetric diaphragmatic movements. Normal air movement.
- No dullness on percussion.
- No tactile fremitus on palpation.
- Normal breath sounds, no rales, no rhonchi, no wheezing, no friction rubs. No stridor.

Cardiovascular:

- PMI palpable in 5th Intercostal space in midclavicular line. S1, S2 normal. No thrills, no lift. No palpable S3, S4.
- Regular sinus rhythm, no flutter or fibrillation. No S3, no S4 gallops. No systolic or diastolic murmurs. No friction rub. No opening snaps, no clicks.
- Blood pressure in upper and lower extremities is normal, symmetric bilaterally.
- Carotid arteries 2+ symmetric bilaterally, no bruits.
- Abdominal aorta is not enlarged, has no bruits, no palpable pulsatile mass in abdomen.
- Femoral arteries symmetric bilaterally, 2+ pulses, no bruits.
- Pedal pulses symmetric bilaterally, 2+ pulses.
- No peripheral edema, no varicosities. No calf tenderness.

Impression/Plan: add the following:

General appearance: Alert, anxious, well developed, well nourished, well groomed appearance in acute, mild, moderate, severe distress.

Put this in history under 'documents' chest pain angina

CC: Chest pain

HPI:

Onset: Sudden, gradual

Location and radiation: Left anterior chest, substernal radiating to left neck jaw, left arm.

Quality: Tight, dull, achy, pressure like and heaviness.

Time course: Variable duration, intermittent

Severity: Severe

Associated with: Previous heart disease history

Aggravating factors: Exertion, cold exposure, emotional stress, meal.

Alleviating factors: Nitroglycerine sublingual, Rest, Valsalva maneuver.

Review of systems:

Constitutional: Denies weight change, anorexia. Denies fatigue, weakness. Denies fever, sweating, chills. Denies insomnia, irritability.

General: Denies heat or cold intolerance. Denies change in head, glove, shoe size. Denies polydipsia, polyphagia

Respiratory system: Denies cough, sputum production. Denies shortness of breath, wheezing. Denies hemoptysis.

Cardiovascular: Has palpitation, denies syncope. Denies PND, orthopnea, peripheral edema. Denies leg/calf pain or cramps. Denies history of heart murmurs.

Gastrointestinal: Denies dysphagia, heartburn, bloating, belching and flatulence. Denies nausea, vomiting, hematemesis. Denies abdominal pain. Denies food intolerance. Denies change in bowel habits. Denies diarrhea, constipation.

Genitourinary system: Denies polyuria. Denies dysuria. Denies hematuria. Denies nocturia, hesitancy. Denies renal stones.

Musculoskeletal system: Denies acute joint pain, chronic joint pain, swelling of joint. Denies back pain.

Physical examination:

Constitutional:

- General appearance: Alert, anxious, well developed, well nourished, well groomed appearance in acute, mild, moderate, severe distress.

Neck:

- Supple. No jugular venous distension. Trachea in the midline. Normal painless ROM.
- Thyroid is normal in size and symmetric. No nodules, no tenderness.

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Gastrointestinal:

- Abdomen soft, non-tender, no mass. No abdominal distension.
- No guarding, no rigidity, no rebound tenderness, negative Murphy's sign
- Liver normal size, non-tender, smooth margin, no splenomegaly.
- Bowel sounds normal.
- No CVA tenderness. No back spasm.
- Stool occult blood negative.

Musculoskeletal:

- No clubbing, no cyanosis, no inflammatory swellings, no petechiae, no ischemia, no infection, no Herbeden's nodes, no Osler's nodes.
- Full range of motion of extremities, SLR 90 degrees, no pain, no crepitation with motion, no joint contracture.
- No motor deficit. Normal muscle strength, no rigidity, no flaccid paralysis, no cogwheel paralysis, no spasticity, no atrophy, no tremor, no fasciculation, no tardive dyskinesia. No hemiparesis, no hemiplegia.
- No kyphosis, no scoliosis