| | PROGRESS N | OTE | |
|----------------|------------------|----------------|------------|
| Patient Name | Mary Johnson | Patient Number | 987654321 |
| Admission Date | January 10, 2025 | | -101434321 |
| | | Discharge Date | |

Visit Summary

Chief Complaint

Post-operative follow-up after laparoscopic appendectomy.

History of Present Illness

Mary Johnson is a 34-year-old female returning for a post-operative evaluation following her laparoscopic appendent on January 6, 2025. She reports that her abdominal pain has significantly described as a dull ache, rated 3/10, without any radiation.

She notes improvement in her appetite and no episodes of nausea or vomiting, post-operatively. She denies fever, chills, or increased redness or drainage at the surgical sites. Mary's slowly resuming her normal activities but is advised to avoid heavy lifting or strenuous exercise during the recovery period

Migraines, managed with sumatriptan as needed. History of acute appendicitis managed with laparoscopic appendectomy on January 6, 2025.

Past Surgical History

Cholecystecton, y at age 29.

on January 6, 2025.

Family History

- 1. Mother: Alive, age 62, with hypothingroidism.
- 2. Father: Deceased at age 67 from colon cancer.
- 3. Sibling: Brother, age 38, with no significant medical history.

Social History

- -1. Non-smoker.
 - 2. Occasional alcohol use (1-2 glasses of wine per week).
 - 3. Works as a school teacher.
 - 4. No illicit drug use.

Review of Systems

- 1. General: Mild Post-operative fatigue; no weight changes.
- 2. Gastrointestinal: Wild, localized dull abdominal pain; improved appetite; no nausea/vomiting. 3. Genitourinary: No dysuria or hematuria.
- 4. Reproductive: Regular menstrual cycles.

5. Neurological: No new headaches or dizziness.

Medications

- 1. Sumatriptan 50 mg as needed for migraines.
- 2. Post-operative analgesics (Acetaminophen 650 mg every 6 hours as needed for pain).
- 3. Prophylactic antibiotic (completed post-operative course).

Allergies

Rash.

Physical Examination

Vit: al Signs:

- 1. Temperature: 98.6XF

- 1. The rt Rate: 76 bpm
 2. Hear tratory Rate: 16 breaths/min
 3. Resp. ressure: 124/78 mmHg
 4. Blood ressure: 124/78 mmHg
 5. Oxygen Saturation: 99% on room air

General:

Patient appears well, in no acute distress.

Abdomen:

- 1. Inspection: Incision sites with minimal erythema, no drainage.
- 2. Palpation: Mild tenderness localized to the right lower quadrant near incision sites; no rebound tenderness or guarding.
- 3. Bowel sounds: Present and normal.

Cardiovascular:

Regular rate and rhythm, no murmurs.

Respiratory:

Clear to auscultation bilaterally.

Extremities:

No edema; normal range of motion.

Assessment and Plan

Assessment:

- 1. Post-operative status following laparoscopic appendectomy for acute appendictis.
- 2. Wild residual post-operative pain, currently well-controlled with analgesics.

Plan:

- 1. Post-operative Management:
 - o Continue current pain management with acetaminophen.
 - o Encourage gradual increase in activity as tolerated.
 - o Maintain incision site care and monitor for signs of infection.
- 2. Follow-UP:
 - o Schedule a follow-up appointment in one week to monitor recovery progress.
 - o Instruct to contact the office if fever, increasing pain, or changes at the incision sites occur.
- 3. Patient Education:
 - o Advise on wound care and activity restrictions.
 - o Discuss signs of post-operative complications and when to seek urgent care.

