

Name: Ethan Fischer | DOB: 5/5/1993 | MRN: 5737029 | PCP: Nymisha A Rao, M.D. | Legal Name: Ethan Fischer

# Office Visit - Apr 03, 2025

with Nymisha Rao, M.D. at River East Family Medicine

## Notes from Care Team

### Progress Notes

Nymisha Rao, M.D. at 4/3/2025 10:40 AM

#### AMBULATORY PROGRESS NOTE

##### Subjective

##### SUBJECTIVE

##### CHIEF COMPLAINT

Medical Evaluation (Chronic cough 2 months./ issue with muscle in back on going)

##### HISTORY OF PRESENT ILLNESS

Ethan Fischer is a 31 yo male here for new patient evaluation:

PMHx: no known medical diagnosis

PSHx: updated

SocHx: denies tobacco use; rest updated. Works as software engineer.

FamHx: updated

Meds: updated

Allergies: bee sting

Has had a cough x 2 mo

Preceded by cold like symptoms

Dry, non productive

Denies recent fevers, shortness of breath, trouble breathing

Stayed the same

Has taken a few cough drops

Has noticed the cough in the mornings typically after showering -- tends to go away as the day goes on

Works from home remotely

No cough or shortness of breath w/ physical activity

Sometimes will experience acid reflux, not daily. No burning sensation in throat or cough while laying supine at nighttime.

Occasionally will experience nasal congestion.

Reports cough likely even more than 2 mo ago -- became more apparent about two mo ago

Notes that more chronic cough is similar in nature

He notes his Mom was worried about this as his Dad may have a chronic cough issue.  
He was able to confirm with his Mom who notes Dad suffered from chronic bronchitis.

He is also concerned about a back issue  
 Behind R shoulder blade, feels that there is a muscle that will flare usually after a workout -- becomes "tense, inflamed."  
 Noticed for first time 3 to 4 years ago and he had sharp pain in this area.  
 Has come/gone since then  
 Recently a massage gun has been helpful. Provides immediate but not long acting relief.  
 Resolves if he does not utilize muscles in this area  
 No bad enough to require OTC Oral medication  
 Occurring fairly often, usually most times when going to gym

### **PAST MEDICAL, SURGICAL, SOCIAL, AND FAMILY HISTORY**

#### **Past Surgical History:**

Procedure	Laterality	Date
• HX HEMORRHOID SURGERY		

#### **Family History**

Problem	Relation	Age of Onset
• Diabetes	Father	
• Lung Disease <i>chronic bronchitis</i>	Father	
• Diabetes	Maternal	
	Grandmother	
• Diabetes	Paternal Grandfather	

#### **Social History**

##### Tobacco Use

- Smoking status: Never
- Smokeless tobacco: Never

##### Vaping Use

- Vaping status: Former
- Substances: THC

##### Substance Use Topics

- Alcohol use: Yes  
*Comment: occ*
- Drug use: Yes  
*Comment: marijuana/ occ*

#### **Social History**

##### Substance and Sexual Activity

Sexual Activity                      Not on file

##### Allergen

- Bee Pollen

##### Reactions

Hives

### **CURRENT MEDICATIONS**

#### **Current Outpatient Medications**

Medication	Sig	Dispense	Refill

- mv-min/folic/vit K/lycop/coQ10      Take by mouth.  
(DAILY MULTIVITAMIN ORAL)

No current facility-administered medications for this visit.

### **OBJECTIVE**

**Vitals:**

04/03/25 1040  
BP: 117/66  
Pulse: **(!)** 56  
Temp: 36.2 °C (97.2 °F)  
TempSrc: Temporal  
SpO2: 100%  
Weight: 89.4 kg (197 lb)  
Height: 188 cm (6' 2")

**BP Readings from Last 4 Encounters:**

04/03/25      117/66

**Physical Exam****Constitutional:**

General: He is not in acute distress.

Appearance: He is not ill-appearing.

**HENT:**

Head: Normocephalic and atraumatic.

Mouth/Throat:

Mouth: Mucous membranes are moist.

**Eyes:**

General: No scleral icterus.

Extraocular Movements: Extraocular movements intact.

**Cardiovascular:**

Rate and Rhythm: Normal rate and regular rhythm.

Heart sounds: Normal heart sounds. No murmur heard.

No gallop.

**Pulmonary:**

Effort: Pulmonary effort is normal. No respiratory distress.

Breath sounds: Normal breath sounds. No wheezing.

**Musculoskeletal:**

General: No swelling.

Comments: **No evidence of scapular winging**

**Normal active ROM of bilateral shoulder joints****No pain w/ palpation of R scapular region****No swelling or redness present on exam in this area****Skin:**

General: Skin is warm and dry.

**Neurological:**

General: No focal deficit present.

Mental Status: He is alert.

**Psychiatric:**

Mood and Affect: Mood normal.

Behavior: Behavior normal.

Thought Content: Thought content normal.

Judgment: Judgment normal.



**REVIEW OF LABORATORY DATA**

N/A

**REVIEW OF IMAGES & STUDIES**

N/A

**ASSESSMENT & PLAN**

Ethan Fischer is a 31Yrs old male patient here for new patient evaluation

**1. Chronic cough (Primary)**

Dry cough for a few months

Advised CXR

Tx as if he has seasonal allergies

Consider PPI if not improving (at times has heartburn but not consistently)

- XR CHEST PA/LATERAL; Future

**2. Chronic scapular pain**

Will refer to PT for further evaluation

- OUTPATIENT REFERRAL TO ATHLETICO PHYSICAL THERAPY (EXTERNAL);  
Future

**3. Hyperpigmented skin lesion**

Incidentally noted some skin lesions in back while examining scapular area -- see pics above

Will send to derm for further eval

- OUTPATIENT REFERRAL TO DERMATOLOGY; Future

Return in about 2 months (around 6/3/2025), or if symptoms worsen or fail to improve, for f/up cough, back pain.

Nymisha Rao, MD  
Family Medicine

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