

**PROGRESS NOTE - HISTORY**

Name Martinez, Carolina  
 Gender F  
 Facility Lexington Health Care Center of Chicago  
 Ridge  
 Room # 236  
 Admission 11/26/16  
 Date  
 Date Form Opened 12/14/2019

MR # 85780  
 Birth Date 09/26/1934  
 Marital Widowed  
 Status  
 Reason For Visit hip and knee pain

**Chief Complaint****History of Present Illness:**

82 y/o AAF LTC resident, current skilled, with a PMH of Wolff-Parkinson-white syndrome(WPW), atrial fibrillation, aortic valve replacement, pacemaker, hiatal hernia, GERD, and dementia. Hospitalized on 6/26/17 at palos, hospital for GI bleed, anemia and sepsis/pna. She was discharged back to this facility on 7/10/17.

Seen per nursing request. patient has been complaining of lower extremities pain today. she has been on Coumadin management for AFib and AVR. INR has been low, recently increase to 6 mg Coumadin. Patient sits in her wc most day non ambulatory poor historian 2/2 adv dementia primarily Spanish speaking. Can answer simple questions in Spanish. No reported CP SOB No reported f/c/n/v/d dysuria or constipation. Participates in activities. CNA was getting patient up in wheel chair when she c/o pain at the knees and hip Pt remains a FULL CODE at this time

<b>Past Medical History Reviewed</b>	Yes
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**Past Medical/Surgical History:**

PMH: Dementia, Wolff-Parkinson-White syndrome(WPW), atrial fibrillation, hiatal hernia, GERD.  
 PSH: (R) ORIF, Aortic valve replacement, pacemaker.

**Health Status****Advanced Directives:**

Full Code/Attempt  
 Resuscitation/CPR, Full  
 Code/Attempt Resuscitation/CPR,

**Additional Notes Regarding Advanced Directives:**

Select dropdown arrow to see all diagnoses. Admitting diagnosis is at the top.

G20 — Parkinson's disease

**Recent Physician Progress**

Notes (Click links to view):

Recent Laboratory and Diagnostic Tests (Click Link to Access Laboratory Attachments):

Reviewed Laboratory Results

Labs/Radiology (List reviewed labs with dates)

12/02/2019: WBC 5.87, RBC 3.32, Hgb 10.0,  
 Hct 32.6, plt 175, creat 0.66, BUN 18, glu 83,  
 Na 143, K 4.3, Cl 111, CO2 25

*Jaqueline K. Hall*  
 APRN

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**Health Status (Continued)**

**Allergy List:** No Known Allergies

**Medication List (Click link to view all orders):**

Reviewed Medications

## Review of Systems

<b>CONST</b>	Y	N	<b>RESP</b>	Y	N	<b>GU</b>	Y	N	<b>MS</b>	Y	N
WNL to ALL Constitution			WNL to ALL RESP			WNL to ALL GU			WNL to ALL MS		
Fever	No		SOB	No		Dysuria			Joint Pain		
Δ Mental Status			Cough	No		Hematuria			Swelling	Yes	
Δ Function			Wheezing	No		Frequency			Myalgia	Yes	
Δ Weight			Phlegm	No		Urgency			Arthralgia	Yes	
Pain	Yes		Hx Smoking			Nocturia			Fall last 30 days	No	
						Foley			Hx of Falls		
									Gait D/O		

<b>HEENT</b>	Y	N	<b>GI</b>	Y	N	<b>NEURO</b>	Y	N	<b>PSYCH</b>	Y	N
WNL to ALL HEENT			WNL to ALL GI			WNL to ALL NEURO			WNL to ALL PSYCH		
Eye Discharge			Nausea			Syncope			Anxiety		
Δ Visual			Vomiting			Aphasia			Depression		
HOH			Obesity			HA			Sleep Disturbance		
Epistaxis			Abd Pain			Vertigo			Agitation		
Rhinitis			Diarrhea			Focal Weakness			Combative		
Tinnitus			Constipation			Paraesthesia			Hallucination		
Sore Throat			Melena			Seizures			Psychosis		
			Hemoccult			Confused	Yes		Δ Mood		
			Dysphagia								
			Dyspepsia								
			Δ Appetite								
			Δ Stools								
			G tube								

<b>CV/PV</b>	Y	N	<b>DERM</b>	Y	N	Other:
WNL to ALL CV/PV			WNL to ALL DERM			
Chest Pain	No		Rash			
Palpitation			Pruritus			
Dizzy	No		Bruising	No		
DOE						
Edema	Yes					

**Physical Examination****Latest Vitals:**

Weight: 119.20

Temperature: 97.80 [ Temporal]

Blood Pressure: 167 / 93 [ L Arm Sitting]

Pulse: 85.00 [ Radial]

Respiration: 18.00

Pulse Ox: 97.00 [ Room Air]

**Past Vitals (Click link to view all vitals)****Physical Examination:**

LOC:	Alert	Change from baseline?	Comments
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Orientation:	Person	Change from baseline?	Comments
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Neuro	Dementia	Comments
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HEENT:	Normocephalic	Comments
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Apical/Radial Pulse:	Regular	Change from baseline?	Comments
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Murmur?	No	If Yes, describe Murmur
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Edema:	Non-Pitting	Pitting Edema, scale +	Change from baseline?	Comments knee
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Peripheral Pulses:	Right:WNL	Right Capillary refill <3 seconds:	Comments
	Left:WNL	Left Capillary refill <3 seconds:	

Skin:	Warm Dry	Turgor:	Change from Baseline
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Skin Color:	WNL	Abnormal:	Skin Comments
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Respiration:	WNL	Abnormal:	Respiratory Comments
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Breath Sounds:	Right:	Clear	Change from baseline?
	Left:	Clear	

Cough:	No	Describe:	Change from baseline?
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Abdomen:	Soft	Change from baseline?	Abdomen/Bowel Comments
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<b>Bowel Sounds:</b>	Normoactive	Change from baseline?
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<b>Urinary:</b>		Comments
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<b>Psych</b>	Normal Mood	Comments
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<b>Pain: Scale 0 - 10</b>	5	Change from baseline?	Comments - Sites knee and hips
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<b>Other:</b>	
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## Assessment/Plan

**Problem 1**

Select Problem M19.90 — Unspecified osteoarthritis, unspecified site

bil hip and knee pain

pain , swelling of both knees and hip

x-ray done- showed mod arthritic left knee and marked arthritic right knee, left hip arthritis and s/p right hip arthroplasty

continue Tylenol ES, Vit D

continue to monitor pain

**Problem 2**

Select Problem

Afib (I48.91) AVR (Z95.2)

monitor INR for Coumadin dosing

monitor for CP SOB Palpitations or bleeding

no bleeding noted

**Problem 3**

Select Problem

Weakness (M62.81) Parkinsons (G20)

activity as able/as tolerated

Assistance with ADLs

Fall precautions

**Problem 4**

Select Problem

Dysphagia, unspecified (R13.10)

swallow precautions

ensure

mech soft diet

ST eval and treat

family does not want feeding tube

**Problem 5**

Select Problem

Dementia (F03.90)

redirect/reorient prn

continue current meds

assist w/ meals

dependent for care

full code

**Problem 6**

Select Problem

**Problem 7**

Select Problem

**Problem 8**

Select Problem

**Signature (Click on the check box to sign)**

Jackie Kimball, NP

(12/14/2019 03:14 PM  
(CST))