

Name: David
Date: 2024-07-10 12:58:02
DOB: 1977-02-06
H.T
W.T

Chief Complaint:

History:

Medical History:

Surgical History:

Family History:

Social History:

Allergies:

meat - Situation

Medications:

pandol - 01

Review of Systems:

Constitutional: Denies weight loss, weight gain, or fatigue. Denies fever, chills, or night sweats.
</br>
Heent: Denies headaches, vision changes, hearing loss, nasal congestion, and sore throat. Normal
examination findings as described above for head, eyes, ears, nose, and throat.
</br> General: Weight
loss, weight gain, or fatigue. Denies fever, chills, or night sweats.
</br> Skin: Denies rashes, itching, or
bruising. Skin is warm and dry with normal turgor.
</br> Head: Denies headaches, trauma, or dizziness.
Scalp and skull are normal upon.
</br> Eyes: Denies vision changes, redness, or discharge. Pupils are
equal, round, and reactive to light and accommodation. Extraocular movements are intact.
</br> Ears:
Denies hearing loss, tinnitus, or ear pain. Tympanic membranes are clear with normal landmarks.
</br> Nose: Denies nasal congestion, discharge, or nosebleeds. Nasal passages are clear.
</br> Mouth &

Throat: Denies sore throat, difficulty swallowing, or mouth sores. Oral mucosa is moist, and oropharynx is clear without erythema or exudates.
</br> Neck: Denies lumps, swelling, or stiffness. Neck is supple with full range of motion. No lymphadenopathy.
</br> Respiratory: Denies cough, shortness of breath, or wheezing. Breath sounds are clear to auscultation bilaterally. No rales, rhonchi, or wheezes.
</br> Cardiovascular: Denies chest pain, palpitations, or edema. Heart rate and rhythm are regular. No murmurs, rubs, or gallops. Peripheral pulses are intact.
</br> Gastrointestinal: Denies abdominal pain, nausea, vomiting, diarrhea, or constipation. Abdomen is soft, non-tender, and non-distended. Bowel sounds are normal.
</br> Genitourinary: Denies dysuria, hematuria, or urinary frequency. Denies genital lesions or discharge. Normal urination.
</br> Musculoskeletal: Denies joint pain, swelling, or stiffness. Full range of motion in all extremities. No deformities or tenderness.
</br> Neurological: Denies weakness, numbness, or seizures. Cranial nerves II-XII are intact. Strength and sensation are normal. Reflexes are 2+ and symmetrical.
</br> Psychiatric: Denies anxiety, depression, or mood changes. Normal affect and behavior. Oriented to person, place, and time.
</br> Endocrine: Denies polyuria, polydipsia, or heat/cold intolerance. Thyroid is not enlarged.
</br> Hematologic/Lymphatic: Denies easy bruising, bleeding, or lymph node enlargement. No pallor or cyanosis.
</br> Allergic/Immunologic: Denies known allergies. Denies history of frequent infections.
</br> Integumentary: Denies rashes, itching, or bruising. Skin is warm and dry with normal turgor.

Vital Sign:

1994-11-20 00:00:00 -

Physical Exam:

General Appearance: Patient is alert, oriented, and appears well-nourished and well-developed
</br> Head and Neck:
</br> Eyes:
</br> Ears:
</br> Nose:
</br> Mouth & Throat:
</br> Cardiovascular:
</br> Respiratory System:
</br> Abdomen:
</br> Musculoskeletal System:
</br> Neurological System:
</br> Genitourinary System:
</br> Psychosocial Assessment:

ASSESSMENTS/CARE PLAN:

Code: I10.

Description: Essential (primary) hypertension

Follow Up:

Follow Up:

- Follow Up with PCP for Further Medical Management
- Follow Up with Psychiatrist

VISIT CODES:

99345; Home/res Visit New Patient 99349 Home Visit Established