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Name: Kibo Connor

Date: 19-Jul-2024

DOB: 15-Jul-1940

H.T

W.T

Chief Complaint:

ghgfhfgh

History:

Medical History:

Surgical History:

Family History:

Social History:

Allergies:

Medications:

Review of Systems:

General: Denies weight loss, weight gain, or fatigue. Denies fever, chills, or night sweats.uyuytuytu

Skin: Denies rashes, itching, or changes in moles.

Head: Denies headaches, dizziness, or trauma.

Eyes: Denies vision changes, pain, redness, or discharge.

Ears: Denies hearing loss, pain, tinnitus, or discharge.

Nose: Denies congestion, discharge, nosebleeds, or sinus pain.

Throat: Denies sore throat, difficulty swallowing, or hoarseness.

Neck: Denies lumps, pain, or stiffness.

Chest: Denies lumps, pain, or discharge.

Respiratory: Denies cough, shortness of breath, or wheezing.

Cardiovascular: Denies chest pain, palpitations, or edema.

Gastrointestinal: Denies nausea, vomiting, diarrhea, or constipation.

Genitourinary: Denies frequency, urgency, dysuria, or hematuria.

Musculoskeletal: Denies joint pain, stiffness, or muscle weakness.

Neurological: Denies numbness, tingling, weakness, or seizures.

Psychiatric: Denies anxiety, depression, or sleep disturbances.

Endocrine: Denies polyuria, polydipsia, or heat/cold intolerance.

Lymphatic: Denies easy bruising, bleeding, or swollen glands.

Immunologic: Denies allergies, frequent infections, or immunodeficiency.

Vital Sign:

2024-07-23 00:00:00 - BP: Height (in): Weight (lb): BMI Interp: Temp (F): °F Pulse (beats/min): Resp Rate (breaths/min): Waist (in):
Glucose:

Physical Exam:

Appearance: Well-nourished, well-developed, no acute distress.hgfhgfh

Skin: Warm, dry, intact, no rashes or lesions.

Head: Normocephalic, atraumatic.

Mouth & Throat: PERRLA (Pupils Equal, Round, Reactive to Light and Accommodation), EOMI (Extraocular Movements Intact), sclerae white, conjunctivae pink.

Eyes: Tympanic membranes intact, no erythema or discharge.

Ears: Mucosa pink, no discharge, septum midline.

Throat: Mucosa pink, no lesions, tonsils absent or not enlarged, uvula midline.

Mouth & Throat: No lymphadenopathy, thyroid non-palpable, trachea midline.

Lungs: Clear to auscultation bilaterally, no wheezes, rales, or rhonchi.

Heart: Regular rate and rhythm, no murmurs, gallops, or rubs.

Abdomen: Soft, non-tender, no masses or organomegaly, bowel sounds normal.

Genitourinary: No costovertebral angle tenderness.

Musculoskeletal: Full range of motion, no joint swelling or deformity.

Neurological: Alert and oriented x3, cranial nerves II-XII intact, motor strength 5/5, sensation intact, reflexes 2+ and symmetric.

Psychiatric: Appropriate affect and behavior, normal mood and cognition, speech clear and coherent.

ASSESSMENTS/CARE PLAN:

Code: A00.0 Description: Cholera due to *Vibrio cholerae* 01, biovar cholerae Code: I10. Description: Essential (primary) hypertension

Procedure:

A00.0 Cholera due to *Vibrio cholerae* 01, biovar cholerae

Follow Up:

VISIT CODES:

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