

Smith, John

DOB: January 20th, 1984

MRN: 789

Date: February 1st, 2022

Follow-up: 2 weeks

Diagnosis: Cholera due to *Vibrio cholerae* 01, biovar eltor (A00.1), Salmonella sepsis (A02.1), and Shigellosis due to *Shigella sonnei* (A03.3)

Work Duty: Light Duty no pushing, no typing, and no climbing greater than 20 lbs. to the right arm until next visit on 1 week

Chief Complaint: Left Hand pain, weakness, and tingling,

History Of Presenting Illness:

John Smith is a very pleasant 38 year old male who presents with the complaint of weakness, tingling and tender pain at Left Hand. He states the symptoms have been present since February 3rd, 2022, at none to moderate level intensity. He "admits to sdsd". He states symptoms are worse with weightbearing, lifting, pivoting, and carrying and get better with rest, and bracing. He denies any radiating symptoms. He has received treatment for this issue in the past. Including Cortisone He has taken the following medications to help with this condition: Simvastatin (Oral Pill) 12323323 mcg 2x Daily, LEVO-T (Oral Pill) 122 mcg 2x Daily,

Allergies:

1. Levothyroxine (Oral Pill)
2. ZOCOR (Oral Pill) Reaction
3. ZOCOR (Oral Pill) Zocor reaction

Medications:

1. SYNTHROID (Oral Pill)-25-mg 2x Daily
2. amlodipine (Oral Pill) mcg 1x Daily
3. Simvastatin (Oral Pill)-100 mcg 2x Daily

Past Medical History:

1. anxiety
2. asthma
3. COPD/Emphysema
4. high blood pressure
5. seizure disorder

Past Surgical History:

- Knee arthroplasty - total
- Carpal tunnel release

Family History:

Mother's Conditions: Hypertension, and Arthritis

Father's Conditions: Heart Disease, Cancer, and Stroke

Grand Parents Conditions: Cancer, Hypertension, and Stroke

Siblings Conditions: Hypertension

Social History:

Occupation: Engineer

Martial Status: single

Smokes: yes - 1 pack/daily

Drinks: yes - 1 per sitting/daily

Hand Dominance: left

Review of Systems:

General: fever or chills, and trouble sleeping

Neurological: tingling

Skin: none

Hematologic: none

Musculoskeletal: Muscle or joint pain, and back pain

Endocrine: none

Psychiatric: none

Physical Examination: John Smith is an a&o x 2 male that appears greater than stated age. He has agitation. He is able to follow instructions. He is in no acute distress.

Vitals:

Ht: 5' 6"

Wt: 130 lbs

BMI: 20.980257

BP: 122/101

Pulse: 70

RR: 14

Skin Exam positive for:

- Erythema
- Pallor
- Abrasion

The Patient has tenderness to palpation at:

- CMC Joint right hand at thumb
- Metacarpal right hand at index finger
- Metacarpal right hand at middle finger
- MCP Joint right hand at ring finger
- Proximal Phalanx right hand at small finger
- MCP UCL left hand at index finger
- PIP RCL left hand at ring finger

- Arm_Muscles_Palmaris_Longus_Muscle_Left
- Arm_Muscles_Flexor_Carpi_Radialis_Muscle_Left

Range of motion:

- Right Hand Opposition 122° Left Hand Opposition 33°
- Right Hand Circumduction 11° Left Hand Circumduction 33°

Strength:

Right	Name	Left
3/5	Hand EPL	4/5
4/5	Hand FPL	3/5
5/5	Hand APB	5/5
5/5	Hand FDI	5/5
5/5	Hand ADM	5/5
5/5	Hand Grip	5/5
5/5	Hand Pinch	5/5

The patient has a positive:

- CMC Grind on the left Hand
- Bunnell on the left Hand
- FDS Deficiency on the left Hand

The patient has a negative:

- CMC Grind on the right Hand
- Bunnell on the right Hand
- Elsen on the right Hand

Distribution Of Radiation:

- C5-Left

Assessment: John Smith is a 38 year old male with:

1. Cholera due to *Vibrio cholerae* 01, biovar eltor (A00.1)
2. Salmonella sepsis (A02.1)
3. Shigellosis due to *Shigella sonnei* (A03.3)

Plan: John Smith presents signs and symptoms consistent with: Cholera due to *Vibrio cholerae* 01, biovar eltor (A00.1), Salmonella sepsis (A02.1), and Shigellosis due to *Shigella sonnei* (A03.3)

Diagnosis, diagnostic studies, and treatment plan was reviewed with the patient at today's visit.

Treatment plan includes:

- Prescription Medication - Sscsc
- Tylenol
- EMG - Sccsxsx
- Sxsxsxs
- Cast - Ffvf vfvfv fvvfv
- 2" Ace
- Push Brace

The patient will follow up in 2 weeks.

Work Duty:

Light Duty no pushing, no typing, and no climbing greater than 20 lbs. to the right arm until next visit on 1 week

Ali, M.D.



2/1/2022, 7:18:35 PM