

Smith, John

DOB: January 20th, 1984

MRN: 789

Date: February 27th, 2022

Follow-up: 6 weeks

Diagnosis: cholera due to vibrio cholerae 01, biovar eltor (a00.1)

Work Duty: Light Duty no lifting, no typing, and no weight bearing greater than 1 lbs. to the left arm until next visit on 2 weeks

Chief Complaint: Left hand pain, and catching

History Of Presenting Illness:

John Smith is a very pleasant 38 year old male who presents with the complaint of catching and tender pain to his left hand. He states the symptoms have been present since February 9th, 2022, at severe to moderate level intensity. He admits to injury: "yes i have". He states symptoms are worse with getting dressed, and in & out of car and get better with massage. He denies any radiating symptoms. He has received previous treatment including physical therapy which started on Feb 27, 2022 and has completed 8 sessions. He has taken the following medications to help with this condition: Levothyroxine (Oral Pill) 6 mcg BID

Allergies:

1. Acetaminophen/Codeine (Oral Pill) Hallucinations
2. Penicillin V potassium (Oral Pill) Hives

Medications:

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

Past Medical History:

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

Past Surgical History:

- Carpal tunnel release
- I&D (NON)/INFECTED CYST
- I&D SEBACEOUS CYST-1
- I&D SEBACEOUS CYST-1
- I&D SEBACEOUS CYST-1
- I&D SEBACEOUS CYST-1
- I&D SEBACEOUS CYST

Family History:

Mother's Conditions: hypertension, and arthritis

Fathers'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 aggitation. He is able to follow instructions. He is in distress.

Vitals:

Ht: 5' 6"

Wt: 130 lbs

BMI: 20.980257

BP: 112/130

Pulse: 70

RR: 14

Skin Exam positive for:

- Erythema
- Pallor
- Laceration
- Warmth

The Patient has tenderness to palpation at:

- CMC Joint right hand at thumb
- Metacarpal right hand at index finger
- MCP Joint right hand at middle finger
- Proximal Phalanx right hand at ring finger
- Right_Medial_Epicondyle
- Right_Ulnar_Fovea

Range of motion:

- Right Hand Opposition 20-30° Left Hand Opposition 40-90°
- Right Hand Circumduction 20-40° Left Hand Circumduction 50-60°

Strength:

Right	Name	Left
3/5	Hand EPL	4/5
4/5	Hand FPL	3/5
4/5	Hand APB	3/5
5/5	Hand FDI	5/5
5/5	Hand ADM	5/5
5/5	Hand Grip	5/5
5/5	Hand Pinch	5/5
5/5	Wrist Flexion	5/5
5/5	Wrist Extension	5/5
5/5	Wrist Pronation	5/5
5/5	Wrist Supination	5/5

The patient has a positive:

- Scaphoid Shift on the left Wrist
- Tinel Median Nerve on the left Wrist
- Durkan on the left Wrist
- Durkan on the right Wrist

The patient has a negative:

- Scaphoid Shift on the right Wrist
- Mid Carpal Clunk on the right Wrist
- Tinel Ulnar Nerve on the left Wrist
- Tinel Ulnar Nerve on the right Wrist

Diagnostic Studies:

This is a test diagnostic study

This is test diagnostic study 2

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

1. Cholera due to *Vibrio cholerae* 01, biovar eltor (A00.1)

Plan: John Smith presents signs and symptoms consistent with: cholera due to *vibrio cholerae* 01, biovar eltor (a00.1)

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

Treatment plan includes:

- Prescription Medication - If ftft y y vghgv
- MRI - Ivy v v. but uyv it v
- RICE
- Surgery I&D SEBACEOUS CYST-1 I&D ABSCESS-SIMPLE INCISION AND REMOVAL OF FB/SUTURES-SIMPLE
- 2" Ace
- Walker

The patient will follow up in 6 weeks.

Work Duty:

Light Duty no lifting, no typing, and no weight bearing greater than 1 lbs. to the left arm until next visit on 2 weeks

Ali, M.D.



2/27/2022, 11:31:26 AM