

<b>SPRINGFIELD GENERAL HOSPITAL</b>	
500 Medical Center Drive	Phone: (217) 555-0100
Springfield, IL 62702	Fax: (217) 555-0101

## MEDICAL RECORD

<b>Patient Name:</b>	Sarah Elizabeth Johnson	<b>MRN:</b>	MR-2024-87542
<b>Date of Birth:</b>	07/15/1985	<b>Age:</b>	38 years
<b>Gender:</b>	Female	<b>Phone:</b>	(217) 555-0123
<b>Address:</b>	1247 Maple Street, Springfield, IL 62701		
<b>Emergency Contact:</b>	Michael Johnson (Husband) - (217) 555-0124		
<b>Insurance:</b>	Blue Cross Blue Shield - Policy #BC789654		

<b>Admission Date:</b>	07/20/2024	<b>Discharge Date:</b>	07/22/2024
<b>Attending Physician:</b>	Dr. Amanda Richards, MD	<b>Department:</b>	Internal Medicine
<b>Physician ID:</b>	PHY-4567	<b>Length of Stay:</b>	2 days

### CLINICAL INFORMATION

**Chief Complaint:**

Chest pain and shortness of breath for 2 days

**History of Present Illness:**

Patient is a 38-year-old female who presents with a 2-day history of chest pain described as sharp, stabbing pain in the left chest that worsens with deep inspiration. Associated with shortness of breath, especially on exertion. Denies fever, cough, or recent travel. Pain not relieved by rest or over-the-counter medications.

**Past Medical History:**

- Hypertension (diagnosed 2020)
- Seasonal allergies
- Appendectomy (2010)

**Current Medications:**

- Lisinopril 10mg daily
- Multivitamin daily
- Ibuprofen 400mg as needed for pain

**Allergies:**

Penicillin (rash)

**Family History:**

Father: Hypertension, diabetes. Mother: Breast cancer (age 55). No family history of cardiac disease.

**Social History:**

Non-smoker. Occasional alcohol use (1-2 drinks per week). Works as a teacher. Exercises regularly. Married with two children.

**VITAL SIGNS**

Temperature:	98.6°F (37°C)	Blood Pressure:	145/92 mmHg
Heart Rate:	88 bpm	Respiratory Rate:	18/min
O2 Saturation:	97% on room air	Weight:	150 lbs (68 kg)
Height:	5'6" (168 cm)	BMI:	24.2

**PHYSICAL EXAMINATION**

General:	Alert, oriented x3, in mild distress due to chest pain
HEENT:	Normocephalic, atraumatic. PERRL. No lymphadenopathy.
Cardiovascular:	Regular rate and rhythm. No murmurs, rubs, or gallops. Point tenderness over left 4th intercostal space.
Pulmonary:	Clear to auscultation bilaterally. No wheezes, rales, or rhonchi.
Abdomen:	Soft, non-tender, non-distended. Bowel sounds present.
Extremities:	No edema, cyanosis, or clubbing.
Neurological:	Grossly intact

**DIAGNOSTIC TESTS & RESULTS**

Test	Date	Result
Chest X-ray	07/20/2024	No acute cardiopulmonary abnormalities. Clear lung fields.
EKG	07/20/2024	Normal sinus rhythm. No acute ST changes.
Troponin I	07/20/2024	< 0.04 ng/mL (Normal)
CBC	07/20/2024	WBC: 7.2, RBC: 4.5, Hgb: 13.8, Hct: 41.2, Platelets: 285

**ASSESSMENT & PLAN**

**Primary Diagnosis:** Costochondritis

**Secondary Diagnoses:** Hypertension, controlled

**Treatment Plan:**

- NSAIDs for anti-inflammatory effect

- Heat/ice therapy as tolerated
- Activity modification - avoid aggravating movements
- Follow-up with primary care physician in 1 week
- Return to ED if symptoms worsen or new symptoms develop

**Discharge Medications:**

- Ibuprofen 600mg TID with food for 7 days
- Continue home Lisinopril 10mg daily

**PROGRESS NOTES**

Date/Time	Progress Note
07/20/2024 14:30	Patient admitted with chest pain. Initial workup negative for cardiac causes. Started on NSAIDs for suspected
07/21/2024 08:00	Patient reports improvement in chest pain overnight. Tolerating PO well. Vital signs stable.
07/22/2024 10:00	Significant improvement in symptoms. Patient ready for discharge with outpatient follow-up.

**PHYSICIAN ATTESTATION**

Attending Physician:	Dr. Amanda Richards, MD
License Number:	IL-MD-45678
Date of Service:	07/22/2024
Electronic Signature:	Amanda Richards, MD
Time Signed:	07/22/2024 15:30

*This is a sample medical record created for demonstration purposes only. All patient information is fictitious. This document follows standard medical record documentation guidelines and contains typical components found in hospital medical records.*