Synthetic Medical History - John Doe John Doe - Full Medical History (2020-2025)

Extended Synthetic Medical History for John Doe (Age 27, AB+) Primary Profile:

- Pre-existing Conditions: Asthma (since childhood), IBS (diagnosed 2021), Allergic Rhinitis
- Medications: Albuterol (PRN), Cetirizine, Dicyclomine (as needed), Vitamin D3 (since 2024)
- Lifestyle: Office worker, sedentary with intermittent exercise; non-smoker; moderate alcohol use
- Family History: Mother has Type 2 Diabetes, father has hypertension

Urgent Care Visit – April 2025

- Complaint: Fever
 - (101.8°F), malaise, itchy rash with vesicles starting on trunk, spreading to face and li mbs over 24 hours.
- **History:** No prior varicella infection or vaccination confirmed; recent contact with co worker's child who had "a rash."
- **Exam Findings:** Multiple small vesicular lesions on erythematous bases, some crusting noted; no secondary bacterial infection.
- **Diagnosis:** Varicella (chickenpox) clinically confirmed.
- **Plan:** Symptomatic treatment
 - acetaminophen for fever, calamine lotion and oral antihistamines for itching.
- **Precautions:** Advised isolation until lesions crusted over (~7 days); return to work clearance to be re-evaluated by PCP.
- **Follow-up:** PCP appointment recommended in 10–14 days to ensure resolution and monitor for complications (e.g., pneumonia).

Primary Care Follow-up Visit – April 2025 (2 weeks post-diagnosis)

- S: Patient reports improvement in energy and resolution of fever. Rash has mostly cru sted, some residual scabbing. No breathing issues or new symptoms.
- **O:** Temp 98.4°F, HR 72, BP 118/76. Skin: healing lesions with no signs of secondary infection. Lungs clear on aus cultation.
- A: Recovering varicella infection, no complications noted.
- **P:** Cleared to return to work. Advised moisturizers for skin healing. No further follow -up needed unless symptoms recur.