

SUBJECTIVE: , This patient presents to the office today because he has not been feeling well. He was in for a complete physical on 05/02/2008. According to the chart, the patient gives a history of feeling bad for about two weeks. At first he thought it was stress and anxiety and then he became worried it was something else. He says he is having a lot of palpitations. He gets a fluttering feeling in his chest. He has been very tired over two weeks as well. His job has been really getting to him. He has been feeling nervous and anxious. It seems like when he is feeling stressed he has more palpitations, sometimes they cause chest pain. These symptoms are not triggered by exertion. He had similar symptoms about 9 or 10 years ago. At that time he went through a full workup. Everything ended up being negative and they gave him something that he took for his nerves and he says that helped. Unfortunately, he does not remember what it was. Also over the last three days he has had some intestinal problems. He has had some intermittent nausea and his stools have been loose. He has been having some really funny green color to his bowel movements. There has been no blood in the stool. He is not having any abdominal pain, just some nausea. He does not have much of an appetite. He is a nonsmoker.,**OBJECTIVE:** , His weight today is 168.4 pounds, blood pressure 142/76, temperature 97.7, pulse 68, and respirations 16. General exam: The patient is nontoxic and in no acute distress. There is no labored breathing. Psychiatric: He is alert and oriented times 3. Ears: Tympanic membranes pearly gray bilaterally. Mouth: No erythema,

ulcers, vesicles, or exudate noted. Eyes: Pupils equal, round, and reactive to light bilaterally. Neck is supple. No lymphadenopathy. Lungs: Clear to auscultation. No rales, rhonchi, or wheezing. Cardiac: Regular rate and rhythm without murmur. Extremities: No edema, cyanosis, or clubbing.

ASSESSMENT: ,1. Palpitations, possibly related to anxiety.,2. Fatigue.,3. Loose stools with some green color and also some nausea. There has been no vomiting, possibly a touch of gastroenteritis going on here.

PLAN: , The patient admits he has been putting this off now for about two weeks. He says his work is definitely contributing to some of his symptoms and he feels stressed. He is leaving for a vacation very soon. Unfortunately, he is actually leaving Wednesday for XYZ, which puts us into a bit of a bind in terms of doing testing on him. My overall opinion is he has some anxiety related issues and he may also have a touch of gastroenteritis. A 12-lead EKG was performed on him in the office today. This EKG was compared with the previous EKG contained in the chart from 2006 and I see that these EKGs look very similar with no significant changes noted, which is definitely a good news. I am going to send him to the lab from our office to get the following tests done: Comprehensive metabolic profile, CBC, urinalysis with reflex to culture and we will also get a chest X-ray. Tomorrow morning I will manage to schedule him for an exercise stress test at Bad Axe Hospital. We were able to squeeze him in. His appointment is at 8:15 in the morning. He is going to have the stress test done in the morning and he will come back to the office in the afternoon

for recheck. I am not going to be here so he is going to see Dr. X. Dr. X should hopefully be able to call over and speak with the physician who attended the stress test and get a preliminary result before he leaves for XYZ. Certainly, if something comes up we may need to postpone his trip. We petitioned his medical records from his former physician and with luck we will be able to find out what medication he was on about nine or ten years ago. In the meantime I have given him Ativan 0.5 mg one tablet two to three times a day as needed for anxiety. I talked about Ativan, how it works. I talked about the side effects. I told him to use it only as needed and we can see how he is doing tomorrow when he comes back for his recheck. I took him off of work today and tomorrow so he could rest.