

Comprehensive Adult History and Physical (Dummy H&P)

Patient Name: John Doe

Age: 55-year-old Caucasian male

Chief Complaint: "I have chest pain and dizziness"

Source and Setting: Outpatient clinic visit on March 15 2025

History of Present Illness:

Patient reports episodes of chest tightness and dizziness occurring over the past 2 weeks.

Pain is described as sharp, 7/10, radiating to left arm, worsened by exertion and relieved by rest.

Past Medical History:

- Type 2 Diabetes Mellitus, diagnosed January 2020.
- Hypertension, diagnosed June 2018.
- Hyperlipidemia, diagnosed March 2019.

Medications:

- Metformin 1000mg PO BID
- Lisinopril 10mg PO daily
- Atorvastatin 20mg PO at bedtime

Allergies:

- Penicillin: rash

Family History:

- Father: Coronary artery disease, bypass surgery at age 60.
- Mother: Type 2 Diabetes Mellitus.

Social History:

Patient is a non-smoker, social alcohol use (1-2 drinks/week), works as an accountant.

Review of Systems:

- Cardiovascular: Positive for chest pain, negative for palpitations or edema.
- Respiratory: Negative for cough or dyspnea.
- Gastrointestinal: Negative for nausea or vomiting.
- Neurological: Positive for dizziness, negative for headaches or seizures.

Physical Exam:

Vitals: T 98.6 F, HR 78, BP 142/88, RR 16, SpO2 98% on room air.

Heart: Regular rate and rhythm, mild S4 present.

Lungs: Clear to auscultation bilaterally.

Extremities: No edema, pulses 2+ bilaterally.

Pertinent Diagnostics:

March 15 2025 - ECG: Normal sinus rhythm, no ST changes.

March 15 2025 - Labs: HbA1c 7.4%, LDL 130 mg/dL.

Assessment and Plan:

1. Stable angina - begin aspirin 81mg PO daily, follow-up stress test.
2. Diabetes control - increase Metformin to 1500mg PO BID.
3. Hypertension - monitor BP at home, consider dose increase if >150/90.