Patient Medical History

Patient Information:

Name: Jane Smith

• Date of Birth: February 25, 1975

Gender: FemaleHeight: 5'6"Weight: 150 lbsBlood Type: A-

Marital Status: DivorcedOccupation: Teacher

Address: 456 Oak Avenue, Anytown, USA

• Phone: (555) 234-5678

• Email: jane.smith@example.com

• Emergency Contact: Emily Smith (Daughter) - (555) 876-5432

Chief Complaint:

• Chronic fatigue and frequent headaches for the past month.

Medical History:

Chronic Conditions:

1. Hypothyroidism

o Diagnosed: April 2010

Current Treatment: Levothyroxine 75 mcg daily

2. Migraine Headaches

o Diagnosed: October 2005

Current Treatment: Sumatriptan 50 mg as needed

3. Generalized Anxiety Disorder

o Diagnosed: January 2018

 Current Treatment: Escitalopram 10 mg daily, Cognitive Behavioral Therapy (CBT)

4. Irritable Bowel Syndrome (IBS)

o Diagnosed: July 2012

 Current Treatment: Dietary management, occasional use of loperamide for diarrhea

Acute Conditions:

1. Bronchitis

Diagnosed: December 2022

Treatment: Amoxicillin 500 mg three times daily for 7 days

2. Sinus Infection

o Diagnosed: September 2021

Treatment: Augmentin 875 mg twice daily for 10 days

Surgeries:

1. Cholecystectomy (Gallbladder Removal)

o Date: May 2003

o Outcome: Successful, no complications

2. Cesarean Section

o Date: August 1999

Outcome: Successful, no complications

Allergies:

• Sulfa drugs: Causes hives

• Shellfish: Causes swelling and difficulty breathing

Medications:

- 1. Levothyroxine 75 mcg daily
- 2. Sumatriptan 50 mg as needed
- 3. Escitalopram 10 mg daily
- 4. Loperamide as needed
- 5. Ibuprofen 200 mg as needed for pain
- 6. Calcium with Vitamin D 600 mg daily

Immunizations:

- 1. Influenza Vaccine: Annually
- 2. Tetanus, Diphtheria, Pertussis (Tdap): Last received 2018

- 3. Hepatitis B: Completed series
- 4. COVID-19 Vaccine: Completed series and booster
- 5. HPV Vaccine: Completed series

Family Medical History:

- Father: Hypertension, Chronic Kidney Disease, Deceased (stroke at age 75)
- Mother: Osteoporosis, Rheumatoid Arthritis, Alive
- Siblings: One sister with Multiple Sclerosis, one brother with Type 1 Diabetes

Social History:

- Smoking: Never smoked
- Alcohol: Drinks wine socially, 1-2 glasses per week
- Recreational Drugs: No history of use
- Exercise: Yoga and walking 4 times a week
- **Diet:** Vegetarian, focuses on high-fiber and low-fat foods
- **Sexual History:** Heterosexual, currently single, sexually active with use of barrier protection, no history of sexually transmitted infections (STIs)
- **Living Situation:** Lives alone, two children (one adult daughter living independently, one teenage son living at home)
- Mental Health: History of anxiety, managed with medication and therapy, history of postpartum depression
- Occupation Stress: Moderate stress levels due to teaching responsibilities and class size

Recent Tests and Results:

- 1. Thyroid Function Test:
 - Last Reading: TSH 2.5 mIU/L (April 2024)
- 2. Complete Blood Count (CBC):
 - Last Reading: Normal (March 2024)
- 3. Lipid Panel:
 - o Total Cholesterol: 180 mg/dL
 - LDL: 100 mg/dLHDL: 60 mg/dL
 - Triglycerides: 110 mg/dL (February 2024)
- 4. Abdominal Ultrasound:
 - o Date: October 2023
 - Result: Normal

5. Electrocardiogram (EKG):

o Date: January 2024

Result: Normal sinus rhythm

6. Upper Endoscopy:

o Date: June 2022

• Result: Mild gastritis, no H. pylori

7. Mammogram:

o Date: December 2023

o Result: Normal

Review of Systems:

• Constitutional: No fever, weight stable, chronic fatigue

• Eyes: No changes in vision

• ENT: Frequent sinus congestion, occasional sore throat

• Cardiovascular: No chest pain, no palpitations

• Respiratory: No shortness of breath, occasional cough

Gastrointestinal: Frequent bloating, alternating constipation and diarrhea

• **Genitourinary:** No dysuria, no hematuria

• Musculoskeletal: Joint pain, particularly in knees and hands

• Neurological: Frequent headaches, no dizziness

• **Psychiatric:** History of anxiety and depression, currently managed with medication and therapy

• Endocrine: Stable on thyroid medication

• Hematologic/Lymphatic: No easy bruising, no lymphadenopathy

• Allergic/Immunologic: No new allergies

Plan:

1. Chronic Fatigue and Headache Evaluation:

- o Check for anemia, thyroid function, and sleep disorders
- Consider referral to a neurologist for headache management

2. Anxiety Management:

- Continue current medication (Escitalopram 10 mg daily)
- o Regular follow-ups with mental health professional
- Consider increasing frequency of CBT sessions

3. IBS Management:

- Review and adjust dietary plan
- Consider probiotics and fiber supplements

4. Lifestyle Modifications:

Encourage maintaining regular yoga and walking routine

o Discuss potential benefits of mindfulness and stress reduction techniques

5. Routine Health Maintenance:

- Annual flu shot
- o Regular dental and vision check-ups
- Update vaccinations as needed

6. Follow-Up Appointments:

o Schedule follow-up in 3 months to reassess symptoms and review test results