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Primary Care Office/Clinic Note
* Final Report *

OZBURN, JUDITH A - ATH-00706852

Document Type: Primary Care Office/Clinic Note
Document Date: February 23, 2016 13:44 CST
Document Status: Modified
Document Title: CV concerns, f/u
Performed by/Author: Condon, Karen A APNP on February 23, 2016 14:19 CST
Verified By: Condon, Karen A APNP on February 26, 2016 12:04 CST
Encounter info: 617363, GTOWN, Clinic, 02/23/2016 - 02/23/2016

*** Final Report ***

Document Contains Addenda

CV concerns, f/u

Patient: OZBURN, JUDITH A MRN: ATH-00706852 FIN: 617363
Age: 57 years Sex: Female DOB: 07/07/1958
Associated Diagnoses: None
Author: Condon, Karen A APNP

Chief Complaint

02/23/2016 13:28 CST follow-up of elevated pulse and BP
02/23/2016 13:28 CST KAC- pulse ox at home is decreased, seeing Dr. Roth in March, Sat. evening and Monday night elevated pulse readings,

History of Present Illness

2/14 - woke up feeling badly at 0300 - drank coconut water - had a high pulse and irregular HR which continued for approx 12 hours
Spent the next few days eating healthy - focusing on sea salt
2/20 started same sx at 11pm - HR began to race but resolved sooner
Last night had the same episode - has a pulse ox at home and BP cuff - O2 in the low 90s, HR in the 70s
Resolved by sea salt and coconut H2O - she feels this is a balance of Na/K
Appt with Dr. Roth - 3/23/16
Holter monitoring in the fall after seeing DXS was WNL
No anxiety or new stressors in her life
Healthy diet, minimal exercise
Left side of chest feels "sore" the next day after these episodes
No SOB, chest pain, light-headedness
Excessive fatigue - this has been chronic since head injury, worse in the past few months

Histories

Problems:
ABDOMINAL PAIN
Allergic Rhinitis
ASTHMA
Atopy
Bronchospasm
Colonic polyp

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OZBURN, JUDITH A - ATH-00706852

Dyshidrotic dermatitis
Fibrocystic breast
Grave's disease
Nevus
Nevus
Post-concussional syndrome
Telangiectasia, hereditary hemorrhagic

Medications:

ProAir HFA 90 mcg/inh inhaler: 2 puff(s) Inhalation q4hr PRN for wheezing use with spacer chamber
ascorbic acid 500 mg tab: 1 tab(s) PO (oral) bid
Probiotic Formula oral capsule: 2 cap(s) PO (oral) bid
biotin 10 mg oral tablet: 1 tab(s) PO (oral) qDay
calcium (as calcium citrate) 200 mg oral tablet: 3 tab(s) PO (oral) bid
ZyrTEC 10 mg oral tablet: 1 tab(s) PO (oral) qDay PRN Allergy Symptoms
cholecalciferol 2000 intl units oral tablet: 2 tab(s) PO (oral) qDay
One Touch Ultra Mini glucose meter: Test As Directed qDay
One Touch Ultra Blue Test Strips: Test Blood Sugar As Directed bid
One Touch Delica Lancets: test As Directed bid pt requests bid testing.
diphenhydrAMINE 25 mg oral capsule: See Instructions TAKE 1 TABLET AT BEDTIME AS NEEDED FOR ALLERGY SYMPTOMS.
EpiPen 2-Pak 0.3 mg injectable kit: See Instructions PRN Allergic Reaction IM Once
Vitamin B5: PO (oral) qDay
olive leaf extract:
Vitamin B Complex oral tablet: 1 tab(s) PO (oral) qDay
MultiVitamins tab: 1 tab(s) PO (oral) qDay
Vitamin B6: 100 mg PO (oral) qDay
Co-Q10 100 mg oral capsule: 1 cap(s) PO (oral) qDay
zinc gluconate 50 mg oral tablet: 1 tab(s) PO (oral) qDay

Allergies:

Apple
aspirin
Chocolate
codeine
Dairy
Eggs
erythromycin
garlic
ibuprofen
Peanuts
penicillins
Sudafed
Tomatoes

Social History:

Tobacco

02/23/2016 Use (Cigarette/Cigar/Pipe): Never smoker. Use (Smokeless/Other): Never user.

Review of Systems

Constitutional: Negative except as documented in history of present illness.

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No. 4044 P. 18

JUL 14 2016 3:36PM CSM GERMANTOWN 262 257 7981

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OZBURN, JUDITH A - ATH-00706852

Respiratory: No shortness of breath.
Cardiovascular: Negative except as documented in history of present illness.
Gastrointestinal: No nausea, No vomiting.

Physical Examination

VS/Measurements:

02/23/2016 13:28 CST	Respiratory Rate	14 br/min
	Systolic Blood Pressure	104 mmHg
	Diastolic Blood Pressure	67 mmHg
	Mean Arterial Pressure	79.3 mmHg
	Peripheral Pulse Rate	62 bpm
	Temperature Oral (DegF)	98.7 degF HI
	Primary Pain Intensity	6

02/23/2016 13:28 CST Oxygen Saturation 97 %

02/23/2016 13:28 CST	Weight in Pounds	153.7 lb
	Clinical Weight (kg)	69.717 kg

General: Alert and oriented, No acute distress.
Eye: Pupils are equal, round and reactive to light.
HENT: Normocephalic, Tympanic membranes are clear, No pharyngeal erythema.
Neck: Supple, Non-tender, No lymphadenopathy.
Respiratory: Lungs are clear to auscultation, Respirations are non-labored, Breath sounds are equal.
Cardiovascular: Normal rate, Regular rhythm, No murmur.
Gastrointestinal: Soft, Non-tender.
Musculoskeletal: Normal range of motion, Normal gait.
Integumentary: Warm, Dry, Pink.
Psychiatric: Cooperative, Appropriate mood & affect.

Results Review

Laboratory results

02/23/2016 14:10 CST	WBC	4.4 thou/mcL
	RBC	4.53 Million/mcL
	Hemoglobin	13.9 gm/dL
	Hematocrit	42.2 %
	Platelet Count	184 thou/mcL
	MCV	93.2 fL
	MCH	30.8 pg
	MCHC	33.0 gm/dL
	RDW	13.2 %
	MPV	10.5 fL
	Differential Type	Auto
	Neutrophils	59.7 %
	Lymphocytes	30.7 %
	Monocytes	8.6 %
	Eosinophils	0.1 %
	Basophils	0.9 %
	Abs# Neut	2.6 thou/mcL
	Abs# Lymphocytes	1.3 thou/mcL

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Abs# Monocytes	0.4 thou/mcL
Abs# Eos	0.0 thou/mcL
Abs# Baso	0.0 thou/mcL
Glucose	86 mg/dL
BUN	17 mg/dL
Creatinine	1.08 mg/dL HI
Sodium Level	137 mmol/L
Potassium Level	4.4 mmol/L
Chloride	97 mmol/L LOW
Carbon Dioxide Lvl	25 mmol/L
Anion Gap	15 mmol/L
Calcium - Blood	8.8 mg/dL
GFR African American Female	63
GFR Other Female	52 LOW

Impression and Plan

Diagnosis

CV concerns.

Course/Discussion: Progressing as expected.

Plan: Follow-up: Dirk Steinert I will call you with lab results

Keep appt for stress testing in March with cardiologist

Stay well hydrated, keep stress to a minimum

Call with any questions/concerns.

Education: Counseled: Patient, Regarding diagnosis, Treatment, Medications, Diet, Activity, Verbalized understanding.

Addendum by Condon, Karen A APNP on March 01, 2016 11:03 CST (Verified)

>50% of this 25 min appt spent in counseling the above issues

Completed Action List:

- * Perform by Condon, Karen A APNP on February 23, 2016 14:19 CST
- * VERIFY by Condon, Karen A APNP on February 26, 2016 12:04 CST
- * Modify by Condon, Karen A APNP on February 26, 2016 12:04 CST
- * Sign by Condon, Karen A APNP on February 26, 2016 12:04 CST
- * Sign by Steinert, Dirk MD on February 27, 2016 12:18 CST Requested by Condon, Karen A APNP on February 26, 2016 12:04 CST
- * Sign by Condon, Karen A APNP on March 01, 2016 11:03 CST
- * Modify by Condon, Karen A APNP on March 01, 2016 11:03 CST

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OZBURN, JUDITH A - ATH-00706852

Document Type: Primary Care Office/Clinic Note
Document Date: December 07, 2015 11:44 CST
Document Status: Auth (Verified)
Document Title: Excessive thirst, Weight loss
Performed by/Author: Condon, Karen A APNP on December 07, 2015 13:03 CST
Verified By: Condon, Karen A APNP on December 07, 2015 13:03 CST
Encounter info: 5129842, GTOWN, Clinic, 12/07/2015 - 12/07/2015

*** Final Report ***

Excessive thirst, Weight loss

Patient: **OZBURN, JUDITH A** MRN: **ATH-00706852** FIN: **5129842**
Age: **57 years** Sex: **Female** DOB: **07/07/1958**
Associated Diagnoses: **None**
Author: **Condon, Karen A APNP**

Chief Complaint

12/07/2015 11:23 CST DXS, extreme thirst, weight loss,
12/07/2015 11:23 CST drank 137 ounces in one morning she is so thirsty

History of Present Illness

Father is not diabetic - no hx in entire family, 1 cousin who has JOD

Thirst has gotten worse in the past few weeks

Considering going to ER Sat - light-headed, extreme thirst, exhausted, gets better by 10-11, mid afternoon gets worse
2:45 pm - has to drink excessively

Added Na to diet - pink sea salt

Has lost 5 lbs

Did check BS at night between 9:30-10 - 101-107 - has glucometer

Fasting - 94-95

Reviewed last visit - tachy - saw Dr. Roth - wore Holter monitor

Massage therapists feel that she is "dry" - doesn't cranial sacral therapy

Histories

Problems:

ABDOMINAL PAIN

Allergic Rhinitis

ASTHMA

Atopy

Bronchospasm

Colonic polyp

Dyshidrotic dermatitis

Fibrocystic breast

Grave's disease

Nevus

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OZBURN, JUDITH A - ATH-00706852

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Nevus
Post-concussional syndrome
Telangiectasia, hereditary hemorrhagic

Medications:

ProAir HFA 90 mcg/inh inhaler: 2 puff(s) Inhalation q4hr PRN for wheezing use with spacer chamber
ascorbic acid 500 mg tab: 1 tab(s) PO (oral) bid
Probiotic Formula oral capsule: 2 cap(s) PO (oral) bid
biotin 10 mg oral tablet: 1 tab(s) PO (oral) qDay
calcium (as calcium citrate) 200 mg oral tablet: 3 tab(s) PO (oral) bid
ZyrTEC 10 mg oral tablet: 1 tab(s) PO (oral) qDay PRN Allergy Symptoms
cholecalciferol 2000 intl units oral tablet: 2 tab(s) PO (oral) qDay
diphenhydrAMINE 25 mg oral capsule: See Instructions TAKE 1 TABLET AT BEDTIME AS NEEDED FOR ALLERGY SYMPTOMS.
Jublia 10% topical solution: 1 app Topical qDay wash and dry affected area before applying
EpiPen 2-Pak 0.3 mg injectable kit: See Instructions PRN Allergic Reaction IM Once
Vitamin B5: PO (oral) qDay
olive leaf extract:
Vitamin B Complex oral tablet: 1 tab(s) PO (oral) qDay
MultiVitamins tab: 1 tab(s) PO (oral) qDay
Vitamin B6: 100 mg PO (oral) qDay
Co-Q10 100 mg oral capsule: 1 cap(s) PO (oral) qDay
zinc gluconate 50 mg oral tablet: 1 tab(s) PO (oral) qDay

Allergies:

Apple
aspirin
Chocolate
codeine
Dairy
Eggs
erythromycin
garlic
ibuprofen
Peanuts
penicillins
Sudafed
Tomatoes

Social History:

Tobacco
12/07/2015 Use (Cigarette/Cigar/Pipe): Never smoker. Use (Smokeless/Other): Never user.

Review of Systems

Constitutional: No fever, No chills, No sweats.
Respiratory: No shortness of breath.
Cardiovascular: No chest pain.
Gastrointestinal: No nausea, No vomiting.
Genitourinary: increased urination.

Physical Examination

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VS/Measurements:

12/07/2015 11:23 CST	Respiratory Rate	16 br/min
	Systolic Blood Pressure	119 mmHg
	Diastolic Blood Pressure	79 mmHg
	Mean Arterial Pressure	92.3 mmHg
	Peripheral Pulse Rate	68 bpm
	Temperature Tympanic (DegF)	98.7 degF
	Primary Pain Intensity	7

12/07/2015 11:23 CST	Height (cm)	177.8 cm
	Height (in)	70 in
	Estimated Height	Yes
	Weight in Pounds	148.8 lb
	Clinical Weight (kg)	67.494 kg
	Body Mass Index	21 kg/m2

General: Alert and oriented, No acute distress.
Eye: Pupils are equal, round and reactive to light.
HENT: Normocephalic.
Neck: Supple.
Respiratory: Lungs are clear to auscultation, Respirations are non-labored, Breath sounds are equal.
Cardiovascular: Normal rate, Regular rhythm, No murmur.
Gastrointestinal: Soft, Non-tender.
Musculoskeletal: Normal range of motion, Normal gait.
Integumentary: Warm, Dry, Pink.
Psychiatric: Cooperative, Appropriate mood & affect.

Impression and Plan

Diagnosis

Excessive thirst
Weight loss.

Course/Discussion: Progressing as expected.

Plan: Follow-up: Dirk Steinert To lab now - I will be checking electrolytes, 3 mo of glucose average, blood counts, urine

I will call you tomorrow with results

Drink electrolyte solutions that are low in sugar (e.g. coconut water).

Education: Counseled: Patient, Regarding diagnosis, Treatment, Medications, Diet, Activity, Verbalized understanding.

Completed Action List:

- * Perform by Condon, Karen A APNP on December 07, 2015 13:03 CST
- * VERIFY by Condon, Karen A APNP on December 07, 2015 13:03 CST
- * Sign by Condon, Karen A APNP on December 07, 2015 13:03 CST
- * Sign by Steinert, Dirk MD on December 07, 2015 13:42 CST Requested by Condon, Karen A APNP on December 07, 2015 13:03 CST

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