Alena Rakhman H&P #1 Rotation 7 – Ambulatory Medicine

Location: AG Urgent Care, Broadway Date: 9/16/19 <u>Time:</u> 1:30 PM <u>Source of Info:</u> self

CC: "vaginal discharge" x 1.5 weeks

### HPI

24-year-old F w/ no PMHx presents today to an urgent care c/o vaginal d/c x 1.5 weeks. She describes the d/c as white, thin, watery and non-malodorous. She is currently sexually active with 1 male partner, reports her last sexual activity 2 days ago. She did not use any barrier protection and states that her partner is asymptomatic. She has been receiving Depo-Provera injection for BC for the past 7 months, her last injection administered on 9/13/19. She is currently on her period, which started yesterday on 9/15/19, and has been irregular since starting BC. Her period usually lasts for 5 days and is heavier the first 3 days. Pt was empirically treated for gonorrhea and chlamydia 5 months ago, after being sexually active with a different male partner with diagnosed gonorrhea. She was asymptomatic at the time and her STI screening came back negative for all. Denies fever, chills, bodyaches, nausea, vomiting, diarrhea, constipation, abd pain, hematuria, dysuria, urinary urgency, urinary frequency, vaginal pruritis, back or flank pain, recent sick contacts, or recent travel outside of the country.

#### Differential Diagnosis

- bacterial vaginosis
- candida albicans
- trichomoniasis
- chlamydia
- gonorrhea

## PMH

None

<u>Immunizations</u> Up to date

<u>Past surgical hx</u> None

Past hospitalizations See surgical hx

<u>Medications</u> No known current medications

#### <u>Allergies</u>

No known drug, food or seasonal allergies

<u>Family history</u> Denies family hx cancer, HTN, MI, DM, stroke, or early deaths

#### Social History

- She is single, lives with a female roommate, no pets, and has never been pregnant.
- She works as a paraprofessional.
- Denies hx of smoking cigarettes or alcohol consumption, occasionally smokes marijuana, every other day.
- She does not follow any specific diet and admits that she frequently eats unhealthily.

#### <u>ROS</u> General

- denies generalized weakness/fatigue, loss of appetite, recent weight loss or gain, fever or chills, or night sweats *Skin, hair and nails* 
  - denies change in texture, excessive dryness or sweating, discolorations, pigmentations, moles/rashes, pruritus, or changes in hair distribution

Head

- denies HA, vertigo, or head trauma

Eyes

- denies visual disturbance, lacrimation, photophobia, or pruritus; does not wear glasses or contacts

Ears

- denies deafness, pain, discharge, or tinnitus

Nose/Sinuses

- denies congestion, rhinorrhea, epistaxis or obstruction

Mouth and throat

- denies sore tongue, sore throat, mouth ulcers, voice changes, or bleeding gums

Neck

- denies localized swelling/lumps, or stiffness/decreased range of motion

Breast

- denies lumps, nipple discharge, or pain

Pulmonary System

- denies cough, SOB, DOE, orthopnea, wheezing, hemoptysis, cyanosis, or PND

Cardiovascular System

- denies CP, palpitations, HTN, irregular heartbeat, edema/swelling of ankles or feet, syncope or known heart murmur *Gastrointestinal System* 

- denies loss of appetite, intolerance to specific foods, nausea, vomiting, dysphagia, pyrosis, flatulence, eructations,

abdominal pain, abdominal distention, constipation, diarrhea, change in bowel habit, hemorrhoids, or melena Genitourinary System

- denies urinary urgency, urinary frequency, flank pain, nocturia, oliguria, polyuria, dysuria, incontinence, or awakening at night to urinate

# Menstrual and Obstetrical

- **vaginal d/c**; G0P0, menarche at age 10, LMP 9/15/19; denies menorrhagia, dysmenorrhea, metrorrhagia, premenstrual symptoms, dyspareunia

Nervous System

- denies HA, seizures, loss of consciousness, weakness, sensory disturbances, ataxia, loss of strength, or change in cognition/mental status/memory

Musculoskeletal System

- denies muscle/joint pain, deformity/swelling, redness, or arthritis

Peripheral Vascular System

- denies intermittent claudication, coldness or trophic changes, varicose veins, peripheral edema, or color change *Hematologic System* 

- denies easy bruising or bleeding, hx of blood transfusions, lymph node enlargement, or history of DVT/PE *Endocrine System* 

- denies polyuria/polydipsia/polyphagia, heat or cold intolerance, goiter, excessive sweating, or hirsutism *Psychiatric* 

- denies anxiety, depression/sadness, obsessive/compulsive disorder, or seeing a mental health professional

# Physical Exam

### General appearance

Alert, cooperative, appears stated age, well-developed, well-groomed and well-nourished, in no distress.

<u>Vitals</u>

BP → 114/76 (right arm, sitting) HR → 76 bpm, regular RR → 16 bpm, unlabored Temp → 98.6 F (oral) SpO2 → 98% (room air) Height → 65 inches Weight → 116.4 pounds

#### BMI → 19.37

#### <u>Skin</u>

- No rashes, lesions, ulcers, or bruises visible or reported
- Warm/dry to touch, no nodules

#### Psychiatric

- Alert and oriented to person, place and time; recent and remote memory intact; good affect congruent with mood
- Judgment and insight appropriate for age

### HEENT

- Pupils equal, round, and reactive to light and accommodation
- Pupils equal in size and symmetry
- No lesions or masses of ears and nose
- Oral mucosa pink and moist without obstruction, throat without erythema or exudates

#### Neck

- Trachea midline, no midline bony tenderness
- Thyroid: no mass, size grossly WNL

### CVS

- S1/S2 present, no murmurs auscultated
- No thrills palpated, heart on left side of chest
- Peripheral pulses present and bounding at all extremities

### <u>Lungs</u>

- Clear to auscultation bilaterally, breath sounds present in all lung field
- No use of accessory muscles

#### GI

- Bowel sounds present, soft, non-distended, non-tender to palpation at all four quadrants
- No hernia appreciated on examination
- No CVA tenderness

### Female genitalia

- Not performed

# <u>MSK</u>

- Ambulates without assistance with steady gait
- Upper and lower extremity symmetrical without defects. Full range of motion at all joints without pain or crepitus
- Muscle tone and strength to resistance intact

### <u>Neuro</u>

- CN 1-12 function intact
- Touch and proprioception sensation intact

### <u>Labs</u>

### POC pregnancy, urine - negative

### Assessment

24-year-old F w/ no PMHx, currently on her period, presents today to an urgent care c/o white, thin, watery and non-malodorous vaginal  $d/c \ge 1.5$  weeks. Most consistent with bacterial vaginosis and yeast infection.

### Management/Plan

- No pelvic exam on account that pt just started her period
- Treat empirically for BV w/ Metronidazole (Flagyl) 500 mg PO BID x 7 days
- Treat empirically for candida albicans w/ Fluconazole (Diflucan) 150 mg PO now and another 150 mg 5 days after completing course of Metronidazole
- STI screening panel (blood and urine)
- f/u in 5 days for results
- consider tx of pt and pt's partner depending on results
- no sexual activity until sxs resolve and finished all medication
- discuss vaginal hygiene with pt
- discuss importance of using barrier protection

#### Patient Education/Follow-up care

- You were seen today at AG Urgent Care for a complaint of vaginal discharge
- Since you are currently on your period, a vaginal culture/swab might not provide accurate results

- Today we treated you for bacterial vaginosis and candida albicans, also known as an yeast infection
- It is important to finish the whole course of medication even if sxs start to improve after several days
- Metronidazole (Flagyl) can exacerbate an yeast infection, which is why we are prescribing you a second dose of Fluconazole (Diflucan) to take 5 days after finishing a course of Metronidazole (Flagyl)
- Come back to the AG Urgent Care in 5 days for your STI results
- If any results come back abnormal, we will manage them accordingly
- It is also very important to treat your sexual partner as well to avoid passing of STI to either other people or reinfecting each other
- Avoid sexual activity until you finish all of your medications and your symptoms resolve
- Even though you are currently on birth control, you might still get STIs unless you use barrier protection, such as condoms
- Avoid douching, keep vagina dry, wear cotton underwear, avoid tight-fitting clothes, avoid use of feminine deodorants and bubble baths 2