

Alena Rakhman
H&P #3
Rotation 7 – Ambulatory Medicine

Location: AG Urgent Care, Broadway

Date: 9/23/19

Time: 6:40 PM

Source of Info: self

CC: “elevated blood pressure” x5 days

HPI

45 y/o African American F, nonsmoker, w/ PMHx anemia, presents today c/o elevated blood pressure x5 days. Pt states that she was seen on 9/19/19 for intermittent lightheadedness, fatigue and nausea x2 weeks. Other than the elevated BP, further workup consistent of PE, blood sugar level, urine hCG, EKG, CBC, CMP and thyroid panel were unremarkable. Pt’s BP was elevated on 2 readings, but she stated that she was feeling anxious about her sx’s and was told to come back the following day to recheck her BP, which was also elevated on 2 readings. Pt was not having past sx’s of lightheadedness, fatigue and nausea at that time. Pt was prescribed a BP pressure machine to monitor her BP at home and to keep a log, as well as to avoid salt, caffeine, and alcohol, which she has been doing. Pt states that she has been checking her BP in the AM and PM, which has been ranging around 145-150s/99-106s. Pt has not seen a PCP for the past 5 years, and recently made this location her PCP. Denies fever, chills, bodyaches, recent head traumas/falls, dizziness, N/V, HA, vision changes, photophobia, SOB, CP, palpitations, abd pain, diarrhea, constipation, back or flank pain, urinary sx’s, recent sick contacts, recent prolonged travel or travel outside of the country.

Differential Diagnosis

- Primary stage 1 HTN
- Drug induced
- Renal artery stenosis
- Pheochromocytoma

PMH

Iron deficiency anemia x2 yrs

Immunizations

Up to date

No influenza vaccine this year

Past surgical hx

None

Past hospitalizations

See surgical hx

Medications

None

Allergies

No known drug, food or seasonal allergies

Family history

Denies family hx cancer, HTN, MI, DM, stroke, or early deaths

Social History

- She is single, lives with her boyfriend, no pets, and has never been pregnant.
- She works as an office receptionist.
- Denies hx of smoking cigarettes, alcohol consumption, or illicit drug use.
- She states that she tries to eat healthy, incorporating fruits and vegetables into her diet.

ROS

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

- G0P0, menarche at age 11, LMP 9/05/19, denies vaginal d/c, 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.

Vitals

	9/23/19	9/20/19	9/19/19
BP	152/103 (right arm, sitting) 147/105 (left arm, sitting)	156/99 (right arm, sitting) 152/102 (left arm, sitting)	162/97(right arm, sitting) 161/106 (left arm, sitting)
HR	91 bpm, regular	94 bpm, regular	98 bpm, regular
RR	16 bpm, unlabored	16 bpm, unlabored	16 bpm, unlabored

Temp	98.0 F (oral)	99.2 F (oral)	98.5 F (oral)
SpO2	99% (room air)	99% (room air)	98% (room air)
Height	62 inches	62 inches	62 inches
Weight	163.8 pounds	163.8 pounds	163.8 pounds
BMI	29.96	29.96	29.96

Skin

- 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

Lungs

- 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

MSK

- 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

Neuro

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

Labs

Blood sugar fingerstick – 9/19/19 → 92

Urine hCG – 9/19/19 → negative

EKG – 9/19/19 → normal

CBC w/ automated diff – 9/19/19

	Result	Reference
WBC	6.4	3.8 – 10.4 THOUS/MCL
RBC	4.41	3.80 – 5.10 MILL/MCL
Hemoglobin	12.3	11.7 – 15.5 G/DL
Hematocrit	36.2	35.0 – 45.0 %
MCV	82.1	80.0 – 100.0 FL
MCH	27.8	27.0 – 33.0 PG
MCHC	33.8	32.0 – 36.0 G/DL
RDW	14.9	11.0 – 15.0 %
Platelets	313	140 – 400 THOUS/MCL

MPV	8.6	7.4 – 11.6 FL
Neutrophils %	46	40 – 75 %
Lymphocytes %	40.0	13.1 – 56.2 %
Monocytes %	10	0 – 13 %
Eosinophils %	3	0 – 8 %
Basophils%	1	0 – 2 %
Neutrophils	3.00	1.00 – 5.50 THOUS/MCL
Lymphocytes	2.60	1.00 – 4.30 THOUS/MCL
Monocytes	0.70	0.10 – 1.00 THOUS/MCL
Eosinophils	0.2	<0.8 THOUS/MCL
Basophils	0.1	<0.2 THOUS/MCL

CMP - 9/19/19

	Result	Reference
Glucose	91	70 – 99 mg/dL
Sodium	140	136 – 145 mEq/L
Potassium	4.7	3.7 – 5.3 mEq/L
Chloride	107	98 – 107 mEq/L
Carbon dioxide	26	21 – 31 mEq/L
Urea nitrogen	9.0	7.0 – 25.0 mg/dL
Creatinine	0.9	0.6 – 1.3 mg/dL
BUN/Cr ratio	9.8	6.0 – 22.0 Ratio
Calcium	9.6	8.6 – 10.3 mg/dL
Protein, total	7.7	6.4 – 8.9 g/dL
Albumin	4.1	3.7 – 5.3 g/dL
Bilirubin, total	0.20	0.30 – 1.00 mg/dL
Alkaline phosphatase	63	34 – 104 U/L
AST	14	13 – 39 U/L
ALT	13	7- 52 U/L

Thyroid panel – 9/19/19

	Result	Reference
T3 UP	43.00	32.00 – 48.40 %
T4	5.98	4.42 – 10.79 ug/dL
TSH	5.06	0.45 – 5.33 Uiu/mL
T4 Free	0.64	0.58 – 1.64 ng/dL
T3 Total	119.00	56.00 – 144.53 ng/dL
T3 Free	2.86	1.70 – 4.60 pg/mL

Urinalysis w/ microscopic review - 9/19/19

	Result	Reference
Color	Yellow	Yellow – amber
Appearance	Clear	Clear
Blood	Neg	Neg
Glucose	Neg	Neg MG/DL
Bilirubin	Neg	Neg
SG	1.011	1.001-1.030
pH	6.0	5.0 – 8.5
Protein	Neg	Neg MG/DL
Urobilinogen	Neg	0.0 – 2.0 MG/DL
Leukocyte esterase	Neg	Neg
Ketones	Neg	Neg
Nitrite	Neg	Neg
Microscopic RBC	1/HPF	0 – 3 HPF
Microscopic WBC	1/HPF	0 – 3 HPF
Epithelial cell	Occasional	Neg HPF

Bacteria	Few	Neg HPF
Mucous	Occasional	Neg HPF

Assessment

45 y/o African American F, nonsmoker, w/ PMHx anemia, presents today c/o elevated blood pressure x5 days. Her BP was elevated in office on 3 separate visits as well as when pt was monitoring BP at home. Remainder of PE and labs were unremarkable, she is not taking any medication, denies drinking alcohol or illicit drugs use and is asymptomatic, which is most consistent with primary/essential type 1 HTN.

Management/Plan

- Lifestyle modifications (weight loss, Dash diet – increase fruits and vegetables and decreased saturated/total fats and low sodium, exercise, limited coffee and alcohol consumption)
- Hydrochlorothiazide 12.5 mg PO daily x14 days
- f/u in 2 weeks to reassess BP and for any SEs
- continue monitoring BP at home and keeping a log
- go to the nearest ED if start to develop significant sx

Patient Education/Follow-up care

- Hypertension is high blood pressure. Your blood pressure is the force of your blood moving against the walls of your arteries. Hypertension causes your blood pressure to get so high that your heart has to work much harder than normal. This can damage your heart. The cause of hypertension may not be known. This is called essential or primary hypertension. Hypertension caused by another medical condition, such as kidney disease, is called secondary hypertension.

Call 911 for any of the following:

- You have chest pain.
- **You have any of the following signs of a heart attack:**
 - o Squeezing, pressure, or pain in your chest
 - o You **may** also have any of the following:
 - Discomfort or pain in your back, neck, jaw, stomach, or arm
 - Shortness of breath
 - Nausea or vomiting
 - Lightheadedness or a sudden cold sweat
- You become confused or have difficulty speaking.
- You suddenly feel lightheaded or have trouble breathing.

Seek care immediately if:

- You have a severe headache or vision loss.
- You have weakness in an arm or leg.
- Today we prescribed you medication called hydrochlorothiazide, a diuretic, which helps decrease extra fluid that collects in your body. This will help lower your blood pressure. You may urinate more often while you take this medicine. Follow up in 2 weeks to check your blood pressure and to assess if the medication is working. Continue checking your blood pressure at home and writing it down. Bring the log with you on your next visit. Limit salt (sodium) in your diet, increase intake of fruits and vegetables, and decrease your intake of saturated/total fats. Exercise to maintain a healthy weight, decrease stress, limit intake of alcohol, and do not smoke.