

Progress Note

Patient: BLAYK, BONZE ANNE ROSE
DOB/Age: 05/01/1956 62
Admission Date: 09/19/18

Account Number: A00088518428
Medical Record#: M000597460

Provider: Frederick R Caballes MD

Subjective

Date of Service: 09/22/18

Interval History:

Pt seen and examined. Meds and labs reviewed. Pt refused all meds this AM

CC: N/A

ROS: Denied HA/dizziness, F/C, N/V, SOB, increased cough, sputum production, abd pain, diarrhea, constipation, dysuria, myalgias, arthralgias, throat pain, and new skin lesions. The rest of the 14 point ROS are unremarkable.

PHYSICAL EXAM:

GEN APPEARANCE: Awake, not in acute distress
HEENT: NC/AT, PERRLA, moist oral mucosa, (-) throat erythema
NECK: Soft, supple, (-) cervical LAD, (-)JVD
HEART: S1S2 WNL, RRR, No MRG
CHEST: CTA, BL, GAE, No W/R/R, tender left lateral chest wall
ABD: Soft, ND/NT, NABS 4x Q
EXT: No C/C/E
SKIN: Warm to touch
PSYCH: Pt delusional

Objective

Active Medications:

Acetaminophen (Tylenol Tab*) 975 mg PO BID SCH
Last Admin: 09/22/18 09:34 Dose: Not Given
Amlodipine Besylate (Norvasc Tab*) 10 mg PO DAILY SCH
Last Admin: 09/22/18 09:35 Dose: Not Given
Haloperidol Lactate (Haldol Inj Iv/Im*) 5 mg IV SLOW PU Q2H PRN

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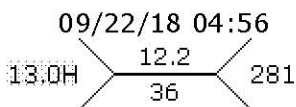
PRN Reason: AGITATION/ANXIETY/INSOMNIA
 Last Admin: 09/19/18 23:51 Dose: 5 mg
 Hydralazine HCl (Apresoline Iv*) 10 mg IV SLOW PU Q6H PRN
 PRN Reason: BLOOD PRESSURE
 Hydromorphone HCl (Dilaudid Inj1s*) 0.5 mg IV SLOW PU Q6H PRN
 PRN Reason: PAIN
 Last Admin: 09/19/18 12:14 Dose: 0.5 mg
 Lorazepam (Ativan Inj*) 2 mg IV PUSH Q4H PRN
 PRN Reason: AGITATION
 Metoprolol Tartrate (Lopressor Tab*) 25 mg PO BID SCH
 Last Admin: 09/22/18 09:35 Dose: Not Given
 Olanzapine (Zyprexa *Odt*) 10 mg PO DAILY SCH
 Last Admin: 09/22/18 09:35 Dose: Not Given
 Oxycodone/Acetaminophen (Percocet 5/325 Tab*) 1 tab PO Q6H PRN
 PRN Reason: PAIN

Vital Signs - 8 hr

	09/22/18 05:16	09/22/18 08:00	09/22/18 08:14
Temperature	99.7 F		98.0 F
Pulse Rate	87		88
Respiratory Rate	18	20	20
Blood Pressure (mmHg)	180/100		
O2 Sat by Pulse Oximetry	95		96

	09/22/18 09:33	09/22/18 11:18
Temperature		98.9 F
Pulse Rate		84
Respiratory Rate		20
Blood Pressure (mmHg)	180/110	
O2 Sat by Pulse Oximetry		97

Oxygen Devices in Use Now: None
Result Diagrams:



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09/22/18 04:56		
135	103	10
3.9	27	0.69

Assess/Plan/Problems-Billing

Assessment:

- Patient Problems

(1) Unspecified psychosis

Current Visit: No **Status:** Acute **Comment:**

-Continue Olanzapine PO daily and PRN Haldol ordered and will defer with further adjustments of antipsychotics with Dr. Ehmke and BSU team

(2) Fever

Current Visit: Yes **Status:** Acute **Code(s):** R50.9 - FEVER, UNSPECIFIED **SNOMED Code(s):** 386661006

Comment:

-Low grade
-Afebrile for two days and given improving leukocytosis today when she allowed phlebotomist to draw and continued refusal of meds, will D/C Levaquin
-Spoke with Dr. Ehmke; left a message in voicemail earlier that pt was mildly febrile early on in hospitalization, likely due to mild traumatic rhabdomyolysis and multiple bruises sustained from physical altercation with police
-CXR and U/A not suggestive of PNA and UTI
-Will continue to observe

(3) Leukocytosis

Current Visit: Yes **Status:** Acute **Code(s):** D72.829 - ELEVATED WHITE BLOOD CELL COUNT, UNSPECIFIED **SNOMED Code(s):** 111583006

Comment:

-Please see above discussion

(4) Nasal bone fracture

Current Visit: Yes **Status:** Acute **Code(s):** S02.2XXA - FRACTURE OF NASAL BONES, INIT ENCNR FOR CLOSED FRACTURE **SNOMED Code(s):** 263171005

Comment:

-For F/U with plastic surgeon in outpt

(5) Rib fracture

Current Visit: Yes **Status:** Acute **Code(s):** S22.39XA - FRACTURE OF ONE RIB, UNSP SIDE, INIT FOR CLOS FX **SNOMED Code(s):** 33737001

Comment:

#Minimally displaced 9th rib fx, left:
-Will encourage to use incentive spirometry
-Given pt has shallow breathing due to pain, will place pt on incentive spirometry, however, her psychosis creates barrier to her compliance

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(6) DVT prophylaxis

Current Visit: Yes **Status:** Acute **Code(s):** IM00001 - **SNOMED Code(s):** 305058001

Comment:

-Continue SCD
-Pt ambulates

Status and Disposition:

-For transfer to BSU when BSU has bed

<Electronically signed by Frederick R Caballes MD> 09/22/18 1240

Entered by: Frederick R Caballes MD
Entered Date/Time: 09/22/18 1238

Copy to:

CC: Frederick R Caballes MD

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