

## 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

**\*\*\* AMENDED REPORT NOW INCLUDES DATE OF SERVICE - ESIGNED BEFORE ADJUSTMENT \*\***

PROGRESS NOTE:

DATE OF SERVICE: 09/20/18

SUBJECTIVE: The patient was seen and examined. Meds and labs reviewed. The patient is status post closed reduction of her left humeral anterior dislocation.

REVIEW OF SYSTEMS: On review of systems, she mentions that she has some left-sided chest pain given her left lateral 9th rib is known to be fractured after her trauma and refuses to wear her sling. I was called later on in the afternoon and the patient also refuses necessary medications such as antihypertensive medications. The patient does not have the capacity to refuse.

PHYSICAL EXAMINATION: Shows the most recent vital signs of records with blood pressure of 191/124 from 167/107 from previous of 100/76, heart rate of 116 per minute, 20 per minute respiratory rate, saturating at 96% on room air. General Appearance: The patient is awake, not in acute distress. HEENT: Normocephalic, atraumatic. PERRLA. Extraocular muscles intact. Negative for icterus. Moist oral mucosa. Negative throat erythema. Neck is soft, supple, with no cervical lymphadenopathy. No JVD. Heart: S1, S2 within normal limits. Regular rate and rhythm. No murmurs, rubs, or gallops. Chest: Clear to auscultation bilaterally. Good air entry. No wheezes, rales, or rhonchi. Abdomen is soft, nondistended, nontender. Normoactive bowel sounds x4 quadrants. Extremities: No cyanosis, clubbing, or edema. Psychiatric: No active psychosis, depression, suicidal or homicidal ideation. Skin is warm to touch.

ASSESSMENT AND PLAN:

1. Anterior subcoracoid dislocation of the humeral head, status post closed reduction with anesthesia support by Orthopedics last night. I have spoken with Sarah, the ortho PA, this morning who mentions to continue to encourage the patient to wear the sling despite her refusing to do so and hence we will continue to encourage p.r.n. nonweightbearing on the left upper extremity and had to repeat a left shoulder x-ray, which was done and it showed Hill-Sachs deformity of the humeral head and there are bone fragments the acromiohumeral interval and we will touch base with Orthopedics tomorrow given the patient's noncompliance.
2. Unspecified psychotic disorder for possible discharge to BSU once medically stable. Unfortunately, her hypertension is further exacerbated by her psychotic disorder given her noncompliance and we will touch base with Psych in a.m.
3. Leukocytosis. Unfortunately, she refused her morning labs today and unclear whether her leukocytosis is improving or worsening.
4. Fracture of the left nasal bone. She can see a plastic surgeon on discharge from the BSU.
5. Minimally displaced rib fracture. We will continue watchful waiting.
6. DVT prophylaxis: Continue SCDs and patient now able to ambulate and no longer sedated.
7. Disposition: As above.

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BLAYK,BONZE ANNE ROSE  
18

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09/19/

157831/806663221/CPS #: 12374868

<Electronically signed by Frederick R Caballes MD> 10/03/18 1006

Frederick R Caballes MD  
Dictated Date/Time: 09/20/18 1805

Transcribed Date/Time 09/21/18 0628

Copy to:

CC:

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