Focused Chief Complaint H&P

I. Biographic Data

Sex <u>M</u> Date of Birth <u>02/25/1937</u>

Race, Cultural Background, Nationality: African American, Raised in Southeast

Marital Status: Married Education: High School

Occupation: Retired (formerly automobile painter) Allergies: Tramadol HCL and ASA

Current Medications:

AMBIEN 10MG 1 TAB AT BEDTIME
AMLODIPINE BESYLATE 10MG 1 TABE TWICE DAILY
BENAZEPRIL HCL 20 MG 1 TAB DAILY
CIALIS 20 MG 1 TAB DAILY
FISH OIL 1000MG 1 TAB DAILY
LIPITOR 20 MG 1 TAB DAILY

II. Chief Complaint (history of present illness): Patient was referred for renal failure and HTN

Onset: <u>Client suffered from HTN for 10-15 years. Now referred for renal failure related to HTN.</u>

<u>Location</u>: The physical examination's aim is to evaluate the client for renal failure. A thorough assessment to include: social, family and past medical history, review of all systems, physical examination, lab work, and urinalysis.

Review of all Symptoms:

Constitutional

NO WEIGHT CHANGE, FEVER, CHILLS, OR FATIGUE

Skin

NEGATIVE FOR RASH, ULCER, ABNORMAL MOLES, DRYNESS, ITCHING, OR CHANGE IN HAIR OR NAILS

Lymphatic System

NO GLAND SWELLING NOTED

Eyes

POSITIVE FOR READING/BIFOCAL GLASSES, NEGATIVE FOR DOUBLE VISION, TRASIENT LOSS OF EYE SIGHT IN RIGHT EYE, COMPLETE LOSS OF EYE SIGHT IN LEFT EYE, LEGALLY BLIND **HENT**

POSITIVE FOR DENTURES PARTIAL

NEGATIVE FOR HEADACHES, HEARING LOSS IN RIGHT AND LEFT EARS, NOSEBLEEDING, SINUS INFECTIONS, ALLERGIC SINUSITIS, HOARSNESS, SORETHROAT, CAVITIES IN TEETH, SNORING, SLEEP APNEA, FATIGUE AT TIME OF AWAKENING, DAY TIME SLEEPINESS

Neck

NEGATIVE FOR STIFFNESS, PAIN, GOITER

Chest

NEGATIVE FOR COUGH, EXPECTORATION, WHEEZING, SHORTNESS OF BREATHE ON EXERCISE

Cardiac

POSITIVE FOR HEART MURMERS

NEGATIVE FOR CHEST PAIN, TIGHTNESS, IRREGULAR, RAPID HEART BEAT, ATRIAL FIB, ATRIAL FLUTTER, VENTRICULAR FIBRILLATION, VENTRICULAR FLUTTER, TACHCARDIA, DIZZINESS, SYNCOPE, ORTHOPNEA, PAROXYSMAL NOCTURNAL DYSPNEA, SHORTNESS OF BREATH AT REST, SHORTNESS OF BREATH ON EXERCISE

Gastrointestinal

POSITVE FOR HEARTBURN

NEGATIVE FOR DIFFICULTY SWALLOWING, N/V, VOMITING BLOOD OR BLACK COLORED VOMITUS, APETITE GOOD, NEGATIVE FOR ABD PAIN, BLOOD IN STOOL, MELENA, HEMMORRHOIDS/BLEEDING/PAIN, CONSTIPATION, DIARRHEA

Urinary

POSITIVE FOR NOCTURIA 3 TIMES

NEGATIVE FOR PAIN ON URINATION, BLOOD IN URINE, TROUBLE WITH STREAM, URGENCY, KIDNEY STONES

Genitalia

NEGATIVE FOR DISCHARGE

Back

POSITIVE FOR ARTHRITIS IN BACK

NEGATIVE FOR PAIN IN BACK RADIATING TO LEGS

Extremities

NEGATIVE FOR EDEMA, PAIN ON WALKING, CRAMPS, VARICOSE VEINS

Neurological

NEGATIVE FOR TIA, SEIZURES, PARALYSIS, TINGLING ARMS, NUMBNESS HANDS FEET OR BURNING ARMS LEGS, TREMORS HANDS, MEMORY LOSS

Psychological

NEGATIVE FOR ANXIETY, DEPRESSION, HALLUCIANTIONS

Musculoskeletal

NEGATIVE FOR JOINT PAINS IN NECK SHOULDERS ARMS HANDS HIPS LEGS FEET, GOUNT SWELLING IN JOINTS, FLUID IN JOINTS

Hematologic

NEGATIVE FOR BLEEDING PROBLEMS, EASY BRUISING

Endocrinological

NEGATIVE FOR DIABETIC, THYRIOD

Allergic/Immunologic

NEGATIVE FOR ALLERGIC REACTIONS TO FOOD POLLEN DUST TREES, RHEUMATIOD ARTHRITITS, LUPUS, VASCULITIS

<u>Description of system</u>:

- Intensity of chief complaint <u>He is in beginning stage of renal failure. Patient's labs</u> are stable.
- Did chief complaint interfere with client's usual activities? The patient's HTN had lead to erectile dysfunction.
- How frequently did the chief complaint occur? How long did the chief complaint last? The patient has suffered from HTN for the past 10-15 years
- What makes the chief complaint occur? Poor adherence to HTN medication
- What makes the chief complaint worse or better? <u>His HTN is controlled by</u> medications and worsens when he does not take them as prescribed.
- What other changes have occurred? <u>HTN has lead to renal failure.</u>
- How has the chief complaint changed or progressed over time? <u>HTN has</u>
 <u>progressively worsened and caused further health complications (erectile dysfunction, renal failure)</u>

III. Plan of care

- Diagnostic tests Ultrasound of kidneys needs to be done. We will obtain 24 hours urine sample for creatinine, protein, sodium, potassium and magnesium.
- Medications No change to current regimen
- Health education teaching Medications: YES

Diet: YES Exercise: YES

Preventive Maintenance: YES

Tobacco Use/Cessation Counseling: N/A **Ethanol Use/Cessation Counseling:** N/A

• Follow-up – Next visit scheduled for three months