

**SUBJECTIVE**

CC & HPI Patient states "I am urinating excessively, I have to go every hour or two, I am waking up throughout the night to urinate. I am drinking two to three milk jugs of water per day but still thirsty. And my urine is really clear, these are all recent since my head trauma, weakness and fatigue have worsened"

**ROS: Circle positive responses**

- CONST: neg see HPI fever - chills - wt loss - weakness - malaise - other
- EYES: neg see HPI acuity change - diplopia - photophobia - blurred vision
- ENMT: neg see HPI sore throat - hearing loss - tinnitus - earache - nasal drainage - epistaxis - dental pain
- RESP: neg see HPI SOB - cough - sputum production - wheezing - DOE
- CV: neg see HPI chest pain - PND - orthopnea - palpitations
- GI: neg see HPI nausea - vomiting - diarrhea - constipation - pain - melena - hematochezia - hematemesis
- GU: neg see HPI dysuria - urgency - frequency - hematuria - vaginal discharge - vaginal bleeding
- INTEG: neg see HPI rash - skin lesions - pruritis
- NEUR: neg see HPI HA - seizures - focal weakness - dizziness - numbness - paresthesia
- ENDO: neg see HPI polyuria - polydipsia - polyphagia - heat/cold intolerance - fatigue

ROS details: \_\_\_\_\_ as above, otherwise negative - or - \_\_\_\_\_

**OBJECTIVE**

T: 37.6	P: 110	R: 16	B/P: 90/60	PO% 96 R/A	LNMP: 10 days ago
WT: 86 kg	HT: 5'7"	Vision: L PERLA R Perla Bil equal			

**Physical Exam:**

- Constitutional: Well developed & nourished \_\_\_ Alert \_\_\_ Non-toxic \_\_\_ Pleasant, cooperative \_\_\_ Other (see below) \_\_\_
- Eyes: PERRL  EOMI  Discs/fundi nl  Lids, conjunctivae nl  Other (see below) \_\_\_
- ENMT: Oropharynx nl  Tonsils: nl NA erythematous \_\_\_ pustular \_\_\_ enlarged \_\_\_ uvula mid-line \_\_\_  
L/R/both TM's nl  L/R/both TM's: red \_\_\_ bulging \_\_\_ dull \_\_\_ purulent \_\_\_ perforated \_\_\_ scarred \_\_\_  
External ears & nose nl  Hearing grossly intact \_\_\_ Sinuses tender \_\_\_ Other (see below) \_\_\_
- Neck: Supple  No masses  Thyroid nl  Non-tender  No JVD  No cervical adenopathy   
Other (see below) \_\_\_
- Resp: Effort nl  Retractions NO Tachypnea \_\_\_ Lung sounds: Clear  Crackles \_\_\_ Rhonci \_\_\_ Wheezes \_\_\_
- CV: Rhythm: regular  irregular \_\_\_ No MRGs  Edema: none  present \_\_\_ site: \_\_\_\_\_  
Distal pulses +2  Other (see below) weak
- GI: Abdomen: non-tender  tender \_\_\_ (specify site) \_\_\_\_\_  
Bowel sounds: nl  increased \_\_\_ decreased \_\_\_ No masses  Liver/spleen nl  Rectal exam nl   
Other (see below) \_\_\_
- GU: No CVAT  External genitalia nl  Scrotal contents: nl NA tender \_\_\_ enlarged \_\_\_  
Cervix: nl  motion tenderness \_\_\_ purulent d/c \_\_\_ Uterus/adnexa nl \_\_\_ other (see below) \_\_\_
- MUSC: Gait nl  Extremities: no deformity \_\_\_ non-tender \_\_\_ FROM \_\_\_ Strength/tone nl \_\_\_ Other \_\_\_
- NEURO: CN II-XII intact  Motor 5/5 symmetric  Sensation grossly intact  Speech nl  Cerebellar fxn intact   
DTR's nl/symmetric  Oriented  Gait nl  other (see below) \_\_\_
- PSYCH: Thought/judgment nl  No homicidal-suicidal thoughts  No hallucinations  Behavior age-appropriate   
Other (see below) \_\_\_
- SKIN: No rashes  No palpable lesions  Pink/warm/dry  Mucous membranes moist \_\_\_ Other (see below)

COMMENTS: Patient's BP is much lower than normal, pulse is increased and weak



**ASSESSMENT**

Abnormal findings: BP is decreased from normal level, pulse is elevated and weak, skin dry, and skin turgor poor. Patient reports being constantly thirsty and has increased fluid consumption to 2-3 milk jugs per day, continually having to urinate, and urine is always very clear.  
 Labs - CMP (electrolytes like Na<sup>+</sup>), urine specific gravity, urine osmolality, serum osmolality, serum ADH level, ~~at~~  
 MRI of pituitary and hypothalamic regions to be scheduled

**Recommendations for Primary Care Provider**

<b>Medication:</b> Continue Current Medication(s)		Change To	<u>Add</u>
None currently			desmopressin 0.05mg twice daily
<b>Injections:</b>	Influenza	Pneumovax	PPD Td <u>MMR</u> <u>Hep B</u> Depo <u>Tdap</u> other
<b>Labs:</b>	<u>BMP</u> <u>CMP</u> <u>CBC</u>	Lipid Panel	Hepatitis Profile UA for Micro Albumin TSH T4 PSA
GC	CT	RPR	HIV
<b>Radiologic Studies:</b>	X-ray	US	Type of Study and/or Body Area Mammogram
<b>Activity:</b>	Restrict to Lifting	lbs.	Bed rest for days Work or School Release Other <u>As tolerated</u>
<b>Diet:</b>	Diabetic	Cardiac	Weight Reduction Supplement Other <u>N/A</u>
<b>Education/Discussion:</b>	Exercise <u>as tolerated but hold until MRI</u>	Diet	Weight Smoking Medication Adherence <u>Desmopressin education</u> MDI use
<u>Disease Process</u>	<u>Self-Care</u>	Family Planning	Normal Growth & Development SBE STE
<u>Self Management Goals</u>	Advance Directives	Other	Written Material Given
<b>Referrals:</b>	Mental Health Specialist	Social Services	Family Health Clinic Planned Parenthood
Nutrition	Wellness Educator for	Smoking Cessation	Drug & Alcohol Abuse <u>MRI</u>
Specialty Clinic or Other	<u>Recive MRI and come back for follow up</u>		

**Disposition Instructions**

Track I's and O's, weigh self dily (at same time with same amount of clothes)  
 medication regimen / side effects  
 Schedule MRI  
 Disease process  
 Follow up visit.  
 call if condition worsens  
 activity as tolerated.

Signature [Handwritten Signature]

Date 4-27-15 Time 1820