

Activity 3.3.2: Medical History – Visit #3

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| Patient’s Name: | Age: | Date: |
| Melissa Martin | 11 | February 25  |
| Height: | Weight: | Temperature: |
| 52 inches | 71 lbs. | 98.9°F |
| Blood Pressure: | Pulse: | Respiration Rate: |
| 106/68 | 68 bpm | 20 bpm |
| Case HistoryAt this appointment Melissa appears a bit run down, but she is in good spirits. She reports that one day at school this week she started to wheeze during gym class. As she became more self-conscious about it, she started to feel tightness in her chest and the wheezing intensified. She used the inhaler that was provided to her and felt almost immediate improvement. She says that within a few minutes, she was able to breathe easier and the wheezing got better. She took it easy the rest of the day, and she has not had an incident of that nature since. She does report that she feels like she is, however, getting a cold and reports a low grade headache.Physical Exam* Patient’s pulse is normal. Pulse ox – 90%
* Slight wheezing is appreciated. Lungs are clear.
* Patient said she has no ear pain or a sore throat. Upon inspection, her ears are clear; however, her nasal passageways are slightly inflamed and irritated.
* Patient’s glands are not swollen.
* Patient’s speech, hearing, and vision appear normal.

Clinical Test ResultsSpirometry was completed at this visit. Results indicate an average total lung capacity. However, FEV1 was measured as **79%.** After administration of albuterol, a short-acting bronchodilator, FEV1 was measured again at **93%.** This response indicates that the impairment is reversible. Diagnosis/Follow UpHer first FEV1 was measured at 79%. This indicates mild obstruction of the lungs that is seen in asthma patients. After she was given a bronchodilator inhaler as a treatment, her FEV1 improved to a normal range. This observation can lead to a further diagnosis of asthma.MedicationsMelissa was provided prescriptions for both a short term “rescue” medication as well as a long term control medication. Copies of the prescriptions are included below. **Accolate** is a pill that must be taken regularly (twice a day) to help control asthma symptoms such as wheezing and shortness of breath. The medication works to inhibit the chemicals that cause swelling in the airways.Side effects include trouble sleeping, sore throat, chest pain, swelling, and coughing up blood. Alert your doctor if any of these occur.**Albuterol Sulfate Inhalational** is an inhaler that works to open the airways and relax the muscles of the lungs. It should be taken every 4-6 hours as needed. Side effects include nervousness, shaking, headache, and dizziness. Alert your doctor if any of these occur. |

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|  PLTW Medicine |
| 3939 Priority Way South DriveIndianapolis, IN 46240Name: Melissa MartinDate of Birth: 5/6/03Address: 1415 Anytown RoadDate: 2/25/15℞ Accolate 10mg tab60Sig 10mg PO bid pc |
| Generic Substitution Allowed XDispense as WrittenSTPSignature of PrescriberRefill 0 1 2 **3** |

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| PLTW Medicine |
| 3939 Priority Way South DriveIndianapolis, IN 46240Name: Melissa MartinDate of Birth: 5/6/03Address: 1415 Anytown RoadDate: 2/25/15℞ Albuterol sulfate 1.25mg/3mlSig 1-2 inhalations q4-6h PRN; 2 inhalations before exercise |
| Generic Substitution Allowed XDispense as WrittenSTPSignature of PrescriberRefill 0 1 **2** 3  |