



GERRISH GASTROENTEROLOGY

6860 North Dallas Pkwy, Plano, TX 75024

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Patient Name: Robert Campbell
Patient DOB: 02-14-1975
Patient Sex: Male
Visit Date: 03-06-2016

HPI

The patient is a 41-year-old male who has a history of abdominal pain off and on. He presented with a 5-day history of severe right quadrant and groin pain. It is associated with severe nausea and vomiting. Basically, the patient has not been able to keep anything down. He denies any fever, diarrhea or constipation. He had significant urgency and frequency at the time. He also had noticed some slowing and hesitancy in his urinary stream.

PROCEDURE HISTORY

Patient had colonoscopy in 2014. Image attached as follows:



No signs of ulceration.

History

Past Medical History:

atrial fibrillation,
chronic obstructive pulmonary disease,
diabetes,
binge eating disorder,
high blood pressure,
high cholesterol.

Surgical History: appendectomy in 2009.

Social History: current every day smoker, 2 pack(s)/day, drinks alcohol, approximately 2 drinks/week, single and works as a school teacher.

Family History: Denies any family history.

Allergies

No Known Drug Allergies

Problem List

Duodenal Ulcer, Unspecified As Acute Or Chronic, Without Hemorrhage Or Perforation (K26.9)

Family History Of Colonic Polyps (Z83.71)

Abnormal Weight Loss (R63.4)

Type 2 Diabetes Mellitus Without Complications (E11.9)

Essential (Primary) Hypertension (I10)

Hyperlipidemia, Unspecified (E78.5)

Current Medications

Benicar 20mg Tablet

Metformin Hydrochloride 500mg Tablet

Atorvastatin Calcium 20mg Tablet

Nexium 20mg Delayed-Release Capsule

REVIEW OF SYSTEMS

CONSTITUTIONAL: Patient complained of **appetite change**, **anorexia** and **weight loss**.

MUSCULOSKELETAL: Patient complained of **no musculoskeletal symptoms**.

HEENT: Patient complained of **no HEENT symptoms**.

GI: Patient complained of **abdominal pain**, **heartburn** and **nausea**.

GU: Patient complained of **no GU symptoms**.

NEUROLOGIC: Patient complained of **no neurological symptoms**.

SKIN: Patient complained of **no skin symptoms**.

PSYCHIATRIC: Patient complained of **no psychiatric symptoms**.

BLEEDING: Patient complained of **no blood symptoms**.

EYES: Patient complained of **no eye symptoms**.

ALL/IMMUNE: Patient complained of **no all/ immune symptoms**.

Vital Signs

Height: 72 in.

Weight: 190 lbs.

BMI: 26.

BP Systolic: 120 mm Hg.

BP Diastolic: 80 mm Hg.

Physical Exam

General: **WNWD** in **NAD**.

HEENT

Normocephalic. Atraumatic. No gross facial abnormalities, edema, facial or sinus tenderness. Sclerae and conjunctivae are clear and normal. PERRLA. Oropharynx clear and normal.

Neck: Supple. No gross abnormalities, edema or thyromegaly.

Lymph Node: No cervical or supraclavicular lymphadenopathy

CVS: S1, S2, regular rate and rhythm, no murmurs, rubs, clicks or gallops.

Respiratory: Clear to auscultation. No rales, rhonchi or wheezing.

Abdomen: Soft, obese, no masses, no organomegaly, non tender, bowel sounds present and on palpation tenderness in RUQ and RLQ.

Rectal: Normal tone, without mass or lesion. Stool brown and guaiac negative.

Skin: Warm and dry. No palmar erythema or icterus.

Extremities: Normal extremities. No edema.

Musculoskeletal: Grossly unremarkable.

Neurological: Grossly unremarkable.

Psychiatric: Well groomed. Appropriately dressed. Normal speech pattern. Normal thought pattern. No gross evidence of depression or abuse.

Assessment

Acute Abdomen (R10.0)

Duodenal Ulcer, Unspecified As Acute Or Chronic, Without Hemorrhage Or Perforation (K26.9)

Family History Of Colonic Polyps (Z83.71)

Abnormal Weight Loss (R63.4)

Vomiting, Unspecified (R11.10)

Plan

Lab

CBC

CMP

LFTS

BUN/CR

AMYLASE

LIPASE

H. PYLORI AB

CT ABD/PEL

EGD

IRON STUDIES

CELIAC PANEL

Today's Medication

Dexilant 60mg Delayed-Release Capsule is Prescribed, bd

Levsin 0.125mg Tablet is Prescribed, od

Procedure

B-12 INJECTION 90799

Recommendation

The patient is advised regarding the risks of tobacco use, both short and long term on general health and healing. We discussed in detail the impediment towards both wound and bone healing. The patient is advised to stop tobacco use and is encouraged to seek consultation through their primary care provider in regards to support and help for tobacco cessation. Patient educated that there is a risk of non-healing or delayed healing of any surgical procedure if smoking is continued. Patient states they understand this risk.

Exercise regularly: Regular aerobic exercise reduces tension and can help prevent migraines. If your doctor agrees, choose any aerobic exercise you enjoy, including walking, swimming and cycling. Warm up slowly, however, because sudden, intense exercise can cause headaches.

High Fiber: Cereal All-Bran, Bran Buds, Corn Bran, Fiber One, 100% Bran. Fruits Cooked prunes, dried figs. Meat Substitutes; Baked beans, black-eyed peas, garbanzo beans, lima beans, pinto beans, kidney beans, chili with beans, trail mix.

Limit cholesterol to less than 250-300 mg per day. Discussed lifestyle modification to improve cholesterol including a low fat diet and the addition of fruits, vegetables and whole grains. Discussed the benefit of regular aerobic exercise.

Follow Up

Followup in 4 weeks.

Health Education

ABDOMINAL PAIN
HIGH BLOOD PRESSURE
HIGH FIBER
SMOKING: HARMFUL EFFECTS

The visit was electronically signed off by Rajesh Gupta, MD on 03/06/2016 03:39:43 PM