

Patient: **Test Patient**

Date of Birth: 10/14/2000

Date: 03/25/2025 11:30 AM

Visit Type: Nurse Visit

This 24 year old patient.

History of Present Illness

1. back pain

Location of pain is upper back. Pain is radiated to the back. The patient describes the pain as shooting. Context: bending forward, bending over, pulling and pushing. Symptoms are relieved by ice, lying down, injection: trigger point injection and over the counter medication: ibuprofen.

Screening Tools

Social Determinants of Health (Reviewed, updated)

Performed Date: 03/25/2025

Financial Resource Strain

How hard is it for you to pay for the very basics like food, Somewhat hard

housing, medical care and heating?

Education

What is the highest grade or level of school you have High school graduate

completed or the highest degree you have received?

Stress

Do you feel stress - tense, restless, nervous, or anxious, or unable to sleep at night because your mind is troubled all the

time - these days?

Depression

Over the last 2 weeks, how often have you been bothered by any of the following problems?

(Q1) Little interest or pleasure in doing things?

Not at all

(Q2) Feeling down, depressed, or hopeless?

Not at all

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Patient Health Questionnaire 2 items (PHQ-2) total score:	0
Physical Activity	
1. How many days of moderate to strenuous exercise, like a brisk walk, did you do in the last 7 days?	4 days
2. On those days that you engage in moderate to strenuous exercise, how many minutes, on average, do you exercise?	45 minutes/day
Alcohol Use	
 How often do you have a drink containing alcohol? How many standard drinks containing alcohol do you have on a typical day? 	Never
3. How often do you have 6 or more drinks on 1 occasion?	Never
Comments:	
Total score [AUDIT-C]	0
Social Connection and Isolation	
1. Are you now married, widowed, divorced, separated, never married or living with a partner?	Married
2. In a typical week, how many times do you talk on the	20/week
telephone with family, friends, or neighbors? 3. How often do you get together with friends or relatives?	2/week
4. How often do you attend church or religious services?	2 annually
5. Do you belong to any clubs or organizations such as church groups unions, fraternal or athletic groups, or school groups?	Yes
Comments:	
Social isolation score	3
Exposure to Violence	
1. Within the last year, have you been humiliated or	No
emotionally abused in other ways by your partner or ex-partner? 2. Within the last year, have you been afraid of your partner or ex-partner?	No
3. Within the last year, have you been raped or forced to have	No
any kind of sexual activity by your partner or ex-partner? 4. Within the last year, have you been kicked, hit, slapped, or otherwise physically hurt by your partner or ex-partner	No
Comments:	
Total score	0

Other Screenings

Encounter Date	Performed Date	Screening Tool	Score	Severity/ Interpretation	MDD Classification	Scanned Document
03/25/2025	03/25/2025	Exposure to violence	0			
03/25/2025	03/25/2025	AUDIT-C Screening Instrument	0			
03/25/2025	03/25/2025	Patient Health Questionnaire (PHQ-2)	0	Further testing is not required		
03/25/2025	03/25/2025	Social connection and isolation	3			

Patient Health Questionnaire

Performed Date:

Over the last 2 weeks, how often have you been bothered by any of the following problems?

	NOT AT ALL	SEVERAL	MORE THEN	NEARLY
		DAYS	HALF THE	EVERY DAY
			DAYS	
1. Little interest or pleasure in doing things	Χ			
2. Feeling down, depressed or hopeless	X			

Problem List

Problem Description	Onset Date	Chronic	Clinical Status	Notes
Hypertension	02/11/2025	N		
Breast Ca	02/11/2025	N		Sent for US and BX
Type 1 diabetes mellitus	02/11/2025	N		
HHH - Hyperornithinaemia-ho yperammonaemia-ho mocitrullinuria syndrome		N		
Breast neoplasm screening status	03/06/2025	N		

Medications (active prior to today)

Medication Name	Sig Description	Start Date	Stop Date	Refilled	Rx Elsewhere
Tydemy 3 mg-0.03 mg-0.451 mg (21)(7) tablet		//			Υ
Tyenne 80 mg/4 mL (20 mg/mL) intravenous solution	infuse (8MG/KG) by intravenous route every 4 weeks over not to exceed 800 mg per infusion	10/23/2024			N

Allergies

Ingredient	Reaction (Severity)	Medication Name	Comment
DIAZEPAM	Abscess	VALIUM	
METRONIDAZOLE	Abnormal vision	FLAGYL	
NAPROXEN	Acute abdominal pain	NAPROSYN	
TESTIS	Burning Eyes (mild)		

Immunizations Entered by History

Date	Immunization
3/28/2025 11:04:42 AM	COVID 19
2/5/2025 3:20:15 PM	HPV
2/5/2025 3:20:17 PM	DTaP (younger than 7 yrs)
2/5/2025 3:20:20 PM	Hep B (ped/adol, 3 dose)
2/5/2025 3:20:22 PM	Hib (PRP-T)
2/5/2025 3:19:00 PM	MCV4
2/5/2025 3:19:28 PM	polio, inactive
2/5/2025 3:19:41 PM	Rotavirus (3 dose)
2/5/2025 3:19:44 PM	Varicella
2/5/2025 3:19:45 PM	TDaP
2/5/2025 3:19:46 PM	MMR
2/5/2025 3:19:50 PM	Pneumococcal, PCV-13
2/5/2025 3:19:51 PM	Hep A (ped/adol, 2 dose)
	Influenza virus vaccine, intranasal
	Influenza virus vaccine, intranasal

Orders Completed Today

Order	Details	Reason	Side	Interpretation	Result	Additiona I Info	Initial Treatment Date	Region
Exposure to violence					0			
AUDIT-C Screening Instrument					0			
Patient Health Questionnaire (PHQ-2)				Further testing is not required	0			
Social connection and isolation					3			
Depo-estradio I cypionate injStrength 150, Dose 150 mg Intramuscular Left buttock			Left					buttock
Depo-estradio I cypionate injStrength	000000000001 10/1	4 (2000 22	Left	005 44 20 44 4	-			buttock

150, Dose 150 mg Intramuscular Left buttock

Assessment/Plan

#	Detail Type	Description
1.	Assessment	Encounter for surveillance of injectable contraceptive (Z30.42).
	Plan Orders	follow-up visit with Jean Pellegalle for asthma in 3 Months or by 11/20/2025. The patient had the following order(s): Depo-estradiol cypionate inj. Strength 150 Dose 150 mg via Intramuscular on Left buttock and Depo-estradiol cypionate inj. Obtained on 03/25/2025, Strength 150 Dose 150 mg via Intramuscular on Left buttock.
2.	Other Orders	Orders not associated to today's assessments.
	Plan Orders	The patient had the following order(s): Exposure to violence. Result details: 0, Social connection and isolation. Result details: 3, AUDIT-C Screening Instrument. Result details: 0 and Patient Health Questionnaire (PHQ-2). Interpretation: Further testing is not required, Result details: 0.

Medications (Added, Continued or Stopped today)

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Start Date	Medication	Directions	PRN Status	PRN Reason	Instruction	Stop Date
	Tydemy 3 mg-0.03 mg-0.451 mg (21)(7) tablet		N			
10/23/2024	Tyenne 80 mg/4 mL (20 mg/mL) intravenous solution	infuse (8MG/KG) by intravenous route every 4 weeks over not to exceed 800 mg per infusion	N			

The patient was checked out at 11:00 AM by Lane Stringfield.

Provider

Hinton, Carrie 09/18/2025 4:58 PM

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