

Fax

Altamonte Family Practice
249 Maitland Ave Ste 1000
Altamonte Springs, FL 32701
Phone: 407-332-6366
Fax: 407-830-4300

Date: 03/09/2012
Recipient:
Fax Number: 4076885071
Sender: Zelaya, Ashley
Number of pages including Cover: 4
Comments:

Privacy message: This message is intended only for the use of the individual or entity to which it is addressed and may contain information that is privileged, confidential or exempt from disclosure under applicable federal or state law. If the reader of this message is not the intended recipient or the employee of agent responsible for delivering this message to the intended recipient, you are hereby notified that any dissemination, distribution, or copying of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone and return the original message to us at the above address via U.S. postal service.

is information has been disclosed to you from records protected under Federal confidentiality rules (42 CFR, part III). The federal rules prohibit you making any further disclosure of this information without the express written consent of the person to who it pertains or as otherwise permitted by 42 CFR, part II. The general authorization for the release of medical or other information is not sufficient for this purpose. The federal rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patient.

Altamonte Family Practice
 249 Maitland Ave Ste 1000
 Altamonte Springs, FL 32701
 Phone: 407-332-6366
 Fax: 407-830-4300

Patient: GEORGE M ZIMMERMAN, 28 year old Male, Race: White, SSN: XXX-XX-9331, DOB: 10/05/1983
Encounter Date: 02/27/2012 11:02 am
Encounter Closed Date: 03/09/2012 03:37 pm

Rx:

Drug & Dosage	QtySIG	Refill	Note
Iodine 400 mg tablet	601 tablet PO BID	0	prn pain

Diagnosis:

ICD Code	Diagnosis	Note
873.0	Open wound of scalp, without mention of complication	
802.0	Nasal bones, closed fracture	
E968.8	Assault by other specified means	
V71.6	Observation following other inflicted injury	
474.8	Other chronic disease of tonsils and adenoids	Tonsillolith
720.2	Sacroiliitis nec	

Plan:

Decision Making Process:

- * Follow up: as previously scheduled for routine follow up Call if any problems before the next visit. 5/2012 with LF.
 - * MEDS: Continue present tx. Risks, benefits & side effects were discussed. Add Lodine BID PRN for SI Joint pain. Use cautiously given dx of IBS.
 - * Pt Education (physician): Discussed Dx and Tx plan, symptomatic tx and reassurance.
1. Scalp Lacerations: No sutures needed given well-approximated skin margins. Continue to clean with soap and water daily. We discussed the red flag symptoms that would warrant imaging given the type of assault he sustained. Given the type of trauma, we discussed that it is imperative he be seen with his Psychologist for evaluation.
 2. Broken Nose: We discussed that it is likely broken, but does not appear to have septal deviation. The swelling and black eyes are typical of this injury. I recommended that he be evaluated by ENT but he refused.
 3. SI Joint pain: Likely due to the assault. May use ice/heat, massage, and Lodine as needed. Use cautiously given h/o IBS.
 4. Tonsillar Stones: May use lemon drops to promote salivation and remove the stones as they appear to prevent further issues. May be seen by ENT for further eval.
- * Specialty Referral: ENT and psychological counseling eval. Patient refused to be seen by ENT at this time and the risks were discussed.

Vital Signs:

Blood Pressure	Height (Feet'Inch")	Weight (Lbs)	Temp	Pulse	Resp	BMi
130/80	5'7.5	204	98.6	109	16	31.48

Chief Complaint:

**Acute complaint

History of Present Illness:

Presents today complaining of Nasal pain. Patient was involved in an altercation on 2/26. During the altercation he was assaulted, punched in the face, and shoved to the ground where his head was hit into the pavement multiple times. During the altercation, he had a weapon as he is authorized to carry a firearm and he fired at the attacker, killing him. He was evaluated by EMS and states his lacerations were cleaned. He was told that he had a broken nose and denies being taken to the hospital. He then returned to work and was told he needed a police report and medical clearance to return to work. He denies HA, change in VA, slurred speech, dizziness, or gait abnormality. Admits to occasional nausea when thinking about the violence last night, but denies abdominal pain. Also complaining of left SI joint tenderness since the event. Denies numbness/tingling or incontinence.

Altamonte Family Practice
 249 Maitland Ave Ste 1000
 Altamonte Springs, FL 32701
 Phone: 407-332-6366
 Fax: 407-830-4300

Patient: GEORGE M ZIMMERMAN, 28 year old Male, Race: White, SSN: XXX-XX-9331 , DOB: 10/05/1983
Encounter Date: 02/27/2012 11:02 am
Encounter Closed Date: 03/09/2012 03:37 pm

Also concerned for tonsillar stones that have been present for many years. States these become tender and bothersome. OV dominated by counseling/coordination of care lasting > 25 minutes. All data reviewed with the pt. F/U care, referrals and Rx's have been arranged.

Notes: Pt is here for a return note for work. Pt was in fight on 2/26/12, pt was punched in nose and has 2 laceration in the back of head. 911 was called and EMT said pt's nose was broken. DV

Active Medications:

Date	Drug & Dosage	Qty	SIG	Refill	Note
02/27/2012	Iodine 400 mg tablet	60	1 tablet PO BID	0	prn pain
02/13/2012	adderall 20 mg tablet	60	1 tablet PO BID	0	Written Rx Given
01/23/2012	temazepam 30 mg capsule	90	1 capsule (hard, soft, etc.) PO HS	0	
01/23/2012	omeprazole dr 40 mg capsule	30	1 capsule, delayed release (enteric coated) PO Daily	3	PRN
12/29/2011	albrax	90	1 capsule (hard, soft, etc.) PO TID	3	

Active Medications - Pre-Existing:

Drug & Dosage	SIG	Note
cvs glucosamine chondroitin tb	1 tablet PO Daily	
multiple vitamin tablet	1 tablet PO Daily	
omeprazole dr 40 mg capsule	1 capsule, delayed release (enteric coated) PO Daily	PRN
temazepam 30 mg capsule	1 capsule (hard, soft, etc.) PO HS	

Drug Family Allergy:

Description	Reaction
penicillins	Hives

Specific Drug Allergy:

Description	Reaction
lisexamfetamine dimesylate	Mood Swings

Review of Systems:

Constitutional Symptoms: Denies fevers and/or chills.

Eyes: Denies loss and blurring of vision, diplopia.

Ear, Nose, Mouth, Throat: Admits nose pain. Denies hearing loss, tinnitus.

Cardiovascular: Denies palpitations, chest pain/pressure.

Respiratory: Denies shortness of breath.

Gastrointestinal: Denies abdominal pain, nausea and/or vomiting.

Integumentary: Admits - (Scalp lacerations).

Neurological: Admits head trauma. Denies tingling, numbness, weakness, headache, dizziness, speech difficulty, gait disturbance, loss of consciousness.

Psychiatric: Admits stress. Denies suicidal thoughts or attempts.

Physical Exam:

**Altamonte Family Practice
249 Maitland Ave Ste 1000
Altamonte Springs, FL 32701
Phone: 407-332-6366
Fax: 407-830-4300**

Patient: GEORGE M ZIMMERMAN, 28 year old Male, Race: White, SSN: XXX-XX-9331, DOB: 10/05/1983
Encounter Date: 02/27/2012 11:02 am
Encounter Closed Date: 03/09/2012 03:37 pm

General Appearance: No acute distress. He is obese. He is alert & oriented and appears his stated age.
Head: Normocephalic, atraumatic. The face is symmetric. Two scalp lacerations to occiput ~ 2cm & 0.5cm respectively. Skin edges approximated well.
Eyes: PERRLA, EOMI, conjunctiva and sclerae clear. B/L black eyes.
Ears, Nose, Mouth, Throat: Bruising noted to nasolabial folds B/L with swelling. No evidence of septal deviation on visual inspection. No bleeding noted in nares. No hemotympanum to B/L ears. No evidence of tonsillar stones.
Chest: Lungs: Clear to auscultation. Breathing is normal.
Cardiovascular: Heart is RRR with normal S1 and S2. No murmurs or ectopy..
Musculoskeletal: Gait is normal. Lumbar spine reveals normal lumbar lordosis. There is tender left SI area. ROM normal for age and body habitus. Motor examination reveals muscle strength 5/5 bilateral and symmetrical in all 4 extremities.
Neurological: Neuro: No focal neurological deficits appreciated. Cranial nerves II - XII are grossly intact.
Psychiatric: Mood is appropriate. Affect is appropriate.

This chart has been electronically signed using individually secured passwords.
Attending Physician Assistant: Lindzee E. Folgate, PA-C