Sarah Allen

**ANSWER QUESTIONS 118-130 REGARDING THIS ENCOUNTER**

**NOTE:** The claim form data below is merely informational ONLY and WILL NOT IMPACT ANY OF THE TESTING QUESTIONS OR HAVE ANY IMPACT ON SELECTING THE CORRECT ANSWER

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Patient Name: Sarah Allen  
Date of Birth: November 19, 2007  
Date of Service: November 19, 2017

Chief Complaint Cold and respiratory type symptoms  

Established patient to this practice comes in with mother and reporting a week of ongoing upper respiratory complaints. The problems seem to be getting worse, and are not any better in any way. Mother has tried giving her over the counter medications but they have not offered any help. Sarah has a history of asthma and these symptoms have caused her asthma to be aggravated and she has also been using her inhaler. She has a productive cough and nasal drainage with sneezing with the cough being constant with not much relief.

She has fever, irritated eyes, upset stomach, but no nausea or vomiting. She denies any other problems and all other systems are negative as they relate to the chief complaint.

During the visit Sarah has a coughing spasm and while she is coughing she had a hard time catching her breath and became quite lethargic after.

Past Medical History: Asthma with multiple hospitalizations  
Social History: Plays volleyball at school- no practice or games at this time  
Family History: Asthma and respiratory issues noted on maternal side

EXAM:  
Temp: 102.4 Weight: 125 Height: 5’7”  
Patient presents very sickly looking and lethargic  
Eyes: Watery and red  
ENT: Ear canals are full and otoscope shows red and inflamed tympanic membranes and throat are red and inflamed  
Respiratory: All 4 quadrants: wheezing with some wet qualities. She also appears to be labored in her breathing with minor accessory muscle use.  
Cardiovascular: RRR  
Lymph: The neck has enlarged lymph nodes  
Abdomen: No pain with palpation and normal bowel sounds  
Neurologic: Alert and focused

Orders:  
Chest Xray: 2 views with diffuse airspace opacity, lobar consolidation, and interstitial opacities  
Saturation: 89% so 2 liters of oxygen was started
Nebulizer: The patient was given a nebulizer treatment to try and increase air movement and reduce wheezing. After the treatment, there was not much improvement and a second treatment was given. After the second treatment there were less wheezes, but the lungs still sound wet. Improvement in air movement was noted.

Assessment and Findings:
Pneumonia
Acute Status Asthmaticus

If Sarah did not have asthma, her situation would not be as severe as it is now, but the asthma has severely exacerbated the current problem. Although she does not wish to be hospitalized, I feel it is in her best interest to be admitted. I phoned the hospital and talked with Dr. Stelara on the pediatric floor. She will be transported by her mother via car and go to the hospital for direct admission.

Electronically signed by Todd Gluten, M.D.