

TYPE OF REPORT: CHART NOTE

SUBJECTIVE:

This is a 27-year-old married Bengali female, who complains of urinary burning, and frequency beginning approximately five days ago. She denies any prior urinary problem. She has had no chills, fever, flank pain, or hematuria. She has noted nocturia X 3 since the onset of her symptoms. She has had no nausea or abdominal pain. She denies vaginal discharge or itching. Last menstrual period began seventeen days ago. She is on xxxxxx 1/35, 28 for birth control, but has taken no other medicines. She is sexually active and stable, and apparently exclusive marital relationship. Her general health is good, and she denies recent URI. She has never been pregnant.

OBJECTIVE AS PER PHONE CONSULTATION:

Temperature normal pulse 72 and regular, blood pressure 116/80. The patient is alert, and in no distress. She had a negative (class I) Pap smear about eight months ago. Urine examination report shows clean voided urine shows 15 to 20 white blood cell per highpower field, 8 to 10 red cells, 4+ occult blood, 1+ protein, negative for sugar and pH 5.5.

ASSESSMENT:

Acute cystitis.

PLAN:

1. xxxxxx 1 b.i.d X 7 days.
2. xxxxxx 200 mg q 4h. to q.6h. p.r.n. for burning.
3. Increase oral fluids.
4. I discussed the probable origin of her condition with the patient and advised her to make a practice of voiding immediately after intercourse in future.
5. The patient is to report back in 1 week for repeat urinalysis, and to call in the day after tomorrow if she has any persisting symptoms.