

Dragon, NS

D.O.B.: 2/1/95

4 April 2005

SUBJECTIVE

10 year-old male presents with headache of one day's duration. He and his family flew back from San Jose yesterday. The headache originates in the occipital region of his neck or no fevers, chills. Does not otherwise feel sick.

Unrelated to the above, NS has had persistent cough for about two months. Denies any dyspnea.

<i>Allergies:</i>	None
<i>Current Medications:</i>	OTC products
<i>Previous Medical History:</i>	Unremarkable
<i>Social History:</i>	Attends local grade school.
<i>Family History:</i>	Noncontributory

OBJECTIVE

Alert, oriented x 4, NAD Vitals: 5 feet 6"; 96 pounds; 125/75; pulse 84

HEENT: Ears, nose and throat all within normal limits. There is no facial tenderness.

CHEST: HRRR, lungs CTA but there are rhonchi with cough.

ABDOMEN: Soft, nontender.

NEUROLOGICAL: Cranial nerves II-XII grossly intact. No obvious sensory or motor deficits are detected.

MUSCULOSKELETAL: OA joints are restricted, tender bilaterally.

ASSESSMENT

1. Occipital neuralgia: Probably secondary to posture while in the airplane
2. Bronchitis, mild, chronic
3. Somatic dysfunction: OA

DISCUSSION & PLANS

I reviewed my impressions with NS, in the presence of his father. Treatment options were discussed.

With his permission, soft tissue stretches were performed followed by direct mobilization using OMT. This was well-tolerated and his headache dissipated almost immediately.

For his cough, I would go with over-the-counter preparations at this time. If it persists, asthma might be considered and will consider trial of inhaled corticosteroid.

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