HISTORY OF PRESENT ILLNESS: PR is a 17-year-old female for whom psychiatric evaluation is requested due to the risk of possible suicidal attempt. The child denies any depression or suicidal thoughts. She states that she was cleaning the bedroom and she drank the liquid pinesol instead of the tea. The child took one swallow and realized that she was drinking pine sol. The child admits that she broke up with her boyfriend on Monday. She also admits to morning sickness symptoms of vomiting and since she was late for her period, there was concern that she might be pregnant. Otherwise: (-) trauma, (-) fever, (-) headache, (-) dyspnea, (-) vomiting, (-) substance abuse, (-) vaginal bleeding or discharge, (-) abdominal pain. The child thinks she might be pregnant. The child denies depression or any suicidal ideations. The child states that she is happy

REVIEW OF SYSTEMS: Is unremarkable.

PAST MEDICAL HISTORY: . No hospitalizations, No surgery and no ongoing or prior medical problems..

FAMILY/SOCIAL HISTORY: (-) smoking. .Lives with her grandmother who she has lived with for the past four years. The child has is happy with her grandmother. The mother is out on the street doing drugs.

MEDICATIONS: No medications.

ALLERGIES: No allergies.

PHYSICAL EXAMINATION:

APPEARANCE: Alert, active, ambulatory, well hydrated, cooperative teenager, in no distress. No drooling, no stridor present.

VITAL SIGNS: Per nurse's note, reviewed by me T 98.9 AR 79 RR 18 oxygenation 99%

SKIN: Warm, dry; (-) cyanosis, (-) rashes, (-) marks, capillary refill less than 2 seconds...

HEAD: (-) scalp swelling, (-) scalp tenderness.

EYES: (-) conjunctival pallor, (-) scleral icterus, (-) nystagmus.

ENMT: TM's: (-) erythema. Nose: (-) purueIntdischarge, (-) nasal flaring. Pharynx: (-) tonsillar erythema, (-) tonsillar exudates. Mucous membranes moist. Airway patent: (-) stridor.

NECK: (-) tenderness, (-) stiffness, (-) lymphadenopathy.

CHEST/RESPIRATORY: (-) rales, (-) rhonchi, (-) wheezes; breath sounds equal bilaterally.

HEART/CARDIOVASCULAR: (-) irregularity; (-) murmur, (-) gallop.

ABDOMEN/GI: Soft; (-) tenderness, (-) distention, (-) mass, (-) organoemgaly, (+) BS.

CVS; (-) tenderness.

GU; Female tanner stage V. Normal female external genitalia. No clinical evidence of vaginal bleeding or discharge at this time..

EXTREMITIES: (-) deformity, symmetric, good muscular tone and arterail pulses..

NEURO/PSYCH: Mental status as above, oriented . (-) apparent hallucinations or delusions. Affect: flat and depressed. Memory: intact. CNs: PERRL; (-) facial symmetry; tongue and uvula midline. Strength: Symmetric. Gait normal

INITIAL CONSIDERATIONS BASED ON PRESENTING PROBLEM INCLUDED BUT WERE NOT LIMITED TO: Psychiatric disorder, substance abuse or withdrawal, medical illness, trauma.

DIAGNOSTICS:

What do you want to order?

What is your assessment?

What is your plan?