

Time: 4:30 pm

History:

Chief complaint: My 11 month baby is sleeping too much. She has four episodes of green mushy stool mixed with water since she woke up this am. The child was at the grandmother until this am when I picked her up. I think she had three stools there that looked the same. No one has seen any blood or mucus. During the day she was able to retain pedialyte and since 12 pm she has drank four ounces of pedialyte but after she drinks she falls asleep. The baby is not playful and is not crawling about. The child keeps on sleeping between feeding and getting up. I am not sure when she last voided since she had so much diarrhea today. Everytime I changed her diaper she had stool in it. No one in the house is ill.

History of Present Illness: No hospitalizations. Child was born full term via NSVD to a 36 year old Gravida 5005 with a birth weight of 7 pounds and 8 ounces after 39 weeks of gestation. The child has no ongoing medical problems. Has had one course of Amoxil for two weeks.

Immunizations: Up to date

Allergies: none

Medication: none

Social: Lives with her 36 year old mother who is the chief caretaker. The single mother receives Medicaid. She had five other children ages 20 year, 18year, 13 years, 10 years and 8 years. They help out with the care of this infant and are very attentive to her according to the mother. The mother is now working at night. Grandmother is actively involved and remains a good support. The mother had her first child at age 16 years. The mother is known to me since I cared for her first two children for 4 years.

Physical Exam

General Appearance:

11 month old infant comforts easily in the mother's arm. Initially the child took the pedialyte and then fell asleep. After an initial evaluation of 30 minutes, the child was still asleep and remained afebrile with an AR of 152 RR 24. Initial vital signs 170 RR 20 T 99.2

Skin: Warm, dry and pink. No rash, birthmarks, lesions, bruises or depigmentation noted. No nail abnormalities noted. Capillary refill is less than 2 seconds

Head--Normocephalic. No swelling noted.

Ears—Normal size, placement and shape. No external lesions, canal tenderness or drainage noted. Tympanic membrane is pearly grey and translucent with landmarks and light reflex visible, good mobility and no fluid present.

Nose—Normal size and shape; mucosa pink with no drainage, bleeding or lesions noted. No turbinate swelling, septum deviation or perforation noted.

Throat— tonsils +1; posterior pharynx with no lesions, inflammation or abnormal contours noted. No bifid uvula present.

Mouth: pink buccal mucosa; No teeth

Lymph: Small .5 cm Anterior cervical lymph nodes palpated

Neck: No webbing, masses or tenderness noted. Normal range of motion and position. Negative Kernig and Brudzinski signs. No bruit auscultated. Thyroid normal size with no nodules or tenderness. No adenopathy noted to cervical, sublingual, submaxillary or suboccipital nodes.

Thorax: Symmetrical structures and normal contour noted. No retractions present. Clavicles palpated; no crackling noted. No supraclavicular or axillary adenopathy noted.

Lungs: Respiration rate WNL with regular pattern noted. No audible cough or abnormal sounds auscultated. Breath sounds equal and clear bilaterally.

Cardiovascular: Normal S1 and S2 with no S3 auscultated. No murmur auscultated; normal heart rate and rhythm noted. Peripheral pulses strong and equal bilaterally. Femoral pulse present.

Abdomen: Soft and non-distended. Hyperactive bowel sounds noted. No masses palpated. No tenderness noted. Soft liver edge at 1.5 cm below the right costal margin and kidneys not palpated.

Genitalia: Normal female. No redness. Urethral meatus normal

Anus: No anal lesions, fissures or prolapse noted.

Extremities: No anomalies or deformities noted. Extremities are symmetrical with good tone and strength present. No paralysis, weakness, tenderness or inflammation noted. Good range of motion with no joint tenderness noted.

Spine: No scoliosis, kyphosis, or lordosis present.

What is your initial thought after this 30 minutes evaluation

What would you do next and why?

If you are ordering tests, what would you order and why.

If you are discharging home, what do you want to do.

Please answer by Saturday, I will ask further questions.