

SOAP document

SOAP Document

Student's name

University

Professor's name

Course

Date

SOAP Document

Subjective

Historian

It is not required since the patient is 17 years of age, i.e. above the standard age of 16 years.

Chief Complaint

A 17-year-old female student suffering from fever, sore throat, and malaise since few days with a new rash developed just on that day.

History of Present Illness (HPI)

Patient is a normal looking female who suffers from general malaise, headaches, nausea which started 6 days ago. She complains about her temperatures rising to 103°F and not lowering further. She also has sore throats which makes it hard for her to swallow solid foods. She has tried ibuprofen for pain and cetirizine for the colds but the illness persists.

Objective

Age, Gender, General Appearance

The patient is 17-year-old female student

Vitals

Her temperature is 102.2°F, BP 130/80, HR 105, and RR 20. She has a height of 64 inches and weight of 120 pounds.

Physical Exam

She has been diagnosed with diffuse morbilliform rash along with mild supraorbital edema, a few petechiae not only on the palate but also on the uvula, bilaterally enlarged tonsils, which deems to be covered with gray exudates. She is also found to be suffering from bilateral posterior cervical lymphadenopathy, as well as a palpable spleen of 3 cm (below the costal margin).

Lab Section

The laboratory data entails a WBC count of 17,000 cells/mm³ (50% lymphocytes and 15% atypical lymphocytes), along with the platelet count of 100,000/mm³.

Assessment

Considering the ICD-10 codes, it can be stated that the student is suffering from

Epstein – Barr virus (EBV) infection/disease also known by the names of Infectious mononucleosis falling under the segment of B27.90 (ICD10data, 2021). In this context, it can be stated that “B27.90 is a billable ICD code used to specify a diagnosis of infectious mononucleosis, unspecified without complication. A 'billable code' is detailed enough to be used to specify a medical diagnosis” (ICD.Codes, 2021). Infectious mononucleosis (mono) can be defined as “a contagious illness typically caused by the Epstein–Barr virus (EBV)” (Stoppler, 2020). Considerably, ECV actually refers to “a common virus that remains dormant in most people. It causes infectious mononucleosis and has been associated with certain cancers, including Burkitt lymphoma, immunoblastic lymphoma, and nasopharyngeal carcinoma” (NIH, n.d.).

The main diagnostic details of this infection deem to show up in 4 to 6 weeks. The symptoms, which are commonly evidenced in case of EBV infection entail, fatigue/tired feeling, fever, sore throat, rash, weakness. All these seem to be similar to the ones being suffered by the student. Besides, her laboratory and physical examination results deem to have the similarities with the corresponding findings of the students' health condition in the case study. These outcomes comprise enlarged spleen and patched tonsil as well. The laboratory tests of WBCs were conducted to test the immune system of the student, as is evidenced in the case of Infectious Mononucleosis. The positives of the diagnosis procedure takes into due consideration the fact that these can effectively identify the occurrence of more critical diseases, such as hepatitis (liver inflammation), spleen enlargement, and most importantly transmission of the disease on a wider circle. On the other hand the negatives of the diagnosis cover the issues associated with blood transfusion, organ transplantation, and transmission of the virus through touch and semen as well (Watson, 2019).

Planning (Treatment & Management Plan)

Pharmacologic Treatment

For treating the issues of fever, sore throat, and malaise, acetaminophen or nonsteroidal anti-inflammatory drugs (NSAIDs) can be recommended along with phenol or benzocaine sprays and throat lozenges. Antoviral medication of Acyclovir can also be prescribed in critical cases. For treating pharyngeal inflammation, Corticosteroids must be suggested to the patient (Hellwig, 2013). Amoxicillin or other antibiotics, such as penicillin can be prescribed to the patient to treat her issues of rashes, as well as that of sore throat, tonsillitis, and sinus infections as well (MFMER, 2021).

Non-Pharmacologic Treatment

For treating infection without taking medications, it is important to manage

nutrition and stay hydrated, as Infectious Mononucleosis is known for reducing the appetite of the patients. Besides, some amount of rest and isolation is required to avoid getting fatigued and exercises as well as physical activities must be avoided so that splenomegaly and pain can be kept under control at least to some extent (Hellwig, 2013). Besides, the home or lifestyle remedies entails drinking lots of water as well as fruit juices, gargling with salt water, and consuming over-the-counter pain relievers, such as ibuprofen, acetaminophen to reduce pain and fever among others. It is also important to stay at home and maintain distance from others till the patient has completely recovered so that the transmission of the virus can be avoided to the utmost level possible (MFMER, 2021).

References

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