#### TOTTRESS, EBONIE SONSERAE Admin Sex: Female DOB: 07/31/1993

#### **Continuity of Care Document**

Summarization of Episode Note | 06/4/2020 to 06/4/2020 Source: CHH- Centennial Hills Hospital Medical Center

Created: 07/24/2024

## **Demographics**

Contact Information:

4925 FINCA STSTE 4020, NORTH LAS VEGAS, NV 890312537, US

Tel: 7255002441 (Primary Home)

Email: EBONIETOTTRESS@GMAIL.COM

Previous Address(es):

--

Marital Status: Single Religion: None

Race: Black or African American

Previous Name(s): TOTTRESS, EBONIE

Ethnic Group: Not Hispanic or Latino

Language: English SSN: ###-##-8235

ID: URN:CERNER:IDENTITY-FEDERATION:REALM:DA0B5D99-573C-4F5E-AAF6-8D39FA93D033-

CH:PRINCIPAL:MF4SM4M49J28B354, 6232340, 7107854

#### **Care Team**

Туре	Name	Represented Organization	Address	Phone
primary care physician	No FAMILY, DR Pcp No		(Work):, 00000-0000	

## Relationships

No Data to Display

#### **Document Details**

## **Source Contact Info**

6900 N. Durango Dr., Las Vegas, NV 89149-4409, US

Tel: (702)835-9700

## **Author Contact Info**

07/24/2024 8:15 AM

CHH- Centennial Hills Hospital Medical Center

### **Recipient Contact Info**

--

### **Healthcare Professionals**

No Data to Display

## IDs & Code Type Data

Document Type ID: 2.16.840.1.113883.1.3 : POCD\_HD000040

Document Template ID: 2.16.840.1.113883.10.20.22.1.1: --, 2.16.840.1.113883.10.20.22.1.1: 2015-08-01, 2.16.840.1.113883.10.20.22.1.2

: 2015-08-01

Document ID: 2.16.840.1.113883.3.2060.999362 : 89115260

Document Type Code: 2.16.840.1.113883.6.1, 34133-9

Document Language Code: en-US

Document Set ID: --

Document Version Number: --

# **Primary Encounter**

## **Encounter Information**

Registration Date: 06/4/2020 Discharge Date: 06/4/2020

Visit ID: --

## **Location Information**

CHH- Centennial Hills Hospital Medical Center

(Work): 6900 N. Durango Dr.June D. Sigman, MD, Las Vegas, NV 89149-4409, US

## **Providers**

Туре	Name	Address	Phone
Admitting	Bicer, Elad	(Work): 500 N RAINBOW BLVDSUITE 203, LAS VEGAS, NV 89107-0000, US $$	Tel: (702)259- 1228 (Work)
Attending	Bicer, Elad	(Work): 500 N RAINBOW BLVDSUITE 203, LAS VEGAS, NV 89107-0000, US $$	Tel: (702)259- 1228 (Work)
Referring	No DOCTOR, Referring Doctor	(Work): 2075 E FLAMINGO RD, LAS VEGAS, NV, US	

#### FIN-CHH 8007894143 Date(s): 6/4/20 - 6/4/20

CHH- Centennial Hills Hospital Medical Center 6900 N. Durango Dr. June D. Sigman, MD Las Vegas, NV 89149-4409 US (702) 835-9700

#### **Encounter Diagnosis**

Headache (Discharge Diagnosis) - 6/4/20

Other long term (current) drug therapy (Final) - 6/4/20

Headache (Final) - 6/4/20

Long term (current) use of non-steroidal anti-inflammatories (NSAID) (Final) - 6/4/20

Discharge Disposition: AHR-ROUTINE DISCHARGE

Attending Physician: Bicer, Elad MD Admitting Physician: Bicer, Elad MD

Referring Physician: No, Referring Doctor MD

Author: CHH- Centennial Hills Hospital Medical Center

Last Modified: 02/6/2024 11:21 PM

#### **Reason for Visit**

**HEADACHE** 

## Allergies, Adverse Reactions, Alerts

No Known Allergies

#### **Assessment and Plan**

Extracted from:

Title: Headache Author: Bicer, Elad MD Date: 6/4/20

Impression and Plan

Headache - ICD10-CM R51,

Plan

Condition: Stable.

Patient was given the following educational materials: Headache, Unspecified.

Follow up with: ; Malihe Rivaz, NEU Within Next Available Appointment; Return to the emergency department immediately if you are experiencing worsening symptoms or new concerning symptoms including but not limited to chest pain, shortness of breath, intractable vomiting, abdominal pain, fever., Return to the emergency department immediately if you are experiencing worsening symptoms or new concerning symptoms including but not limited to chest pain, shortness of breath, intractable vomiting, abdominal pain, fever.; Malihe Rivaz, NEU Within Next Available Appointment.

Counseled: Patient, Regarding diagnosis, Regarding diagnostic results, Regarding treatment plan, Patient indicated understanding of instructions.

Disposition: Launch Disposition Order

Admit/Transfer/Observation:

Discharge Request (Order): 6/4/2020 13:55 PDT, Home Routine.

Notes: I, Dr. Bicer, personally performed the services described in this documentation. All medical record entries made by the scribe were at my direction and in my presence. I have reviewed the chart and discharge instructions (if applicable) and agree that the record reflects my personal performance and is accurate and complete. Dr. Bicer. 06/04/2020 13:55.

Author: Bicer, Elad, CHH- Centennial Hills Hospital Medical Center

Last Modified: 06/4/2020 8:55 PM

#### **Immunizations**

## Medications

gabapentin (gabapentin 300 mg oral capsule)

Status: Ordered Start Date: 6/5/20 Stop Date: 6/19/20

1 Capsules By Mouth 3 Times a Day for 14 Days. Refills: 0.

Ordering provider: Woosnam, Nicole PAC

Author: Woosnam, Nicole, CHH- Centennial Hills Hospital Medical Center

Last Modified: 06/5/2020 7:31 PM

lidocaine topical (Lidoderm 5% topical film)

Status: Ordered Start Date: 3/24/21 Stop Date: 3/31/21

1 Patches Topical Daily for 7 Days. remove patches after 12 hours. Refills: 0.

Ordering provider: Melcher, Amanda APRN

Author: Melcher, Amanda, CHH- Centennial Hills Hospital Medical Center

Last Modified: 03/24/2021 9:48 PM

#### **Problem List**

Condition	Confirmation	Course	Effective Dates	Status	Health Status	Informant
Asthma	Confirmed			Active		
Author: Adams,				Author: Adams,		
Jennifer J, CHH-				Jennifer J, CHH-		
Centennial Hills				Centennial Hills		
Hospital Medical				Hospital Medical		
Center				Center		
Last Modified:				Last Modified:		
10/4/2023 5:57 PM				10/4/2023 5:57 PM		
Cough	Confirmed			Active		
Author: Barnes,				Author: Barnes,		
Gregory A				Gregory A		
Last Modified:				Last Modified:		
12/19/2019 12:43 PM				12/19/2019 12:43 PM		
Eczema	Confirmed			Active		
Author: Belmudes -				Author: Belmudes -		
Account Disabled,				Account Disabled,		
Karen J				Karen J		
Last Modified:				Last Modified:		
07/23/2013 5:27 AM				07/23/2013 5:27 AM		
Fever	Confirmed			Active		
Author: Barnes,				Author: Barnes,		
Gregory A				Gregory A		
Last Modified:				Last Modified:		
12/19/2019 12:43 PM				12/19/2019 12:43 PM		

Condition	Confirmation	Course	Effective Dates	Status	Health Status	Informant
Influenza B	Confirmed			Active		
Author: Barnes,				Author: Barnes,		
Gregory A				Gregory A		
Last Modified:				Last Modified:		
12/19/2019 12:43 PM				12/19/2019 12:43 PM		

# **Procedures**

Procedure	Date	Related Diagnosis	Body Site	Status
Collection of venous blood by venipuncture	6/4/20			Completed
None				Completed
Author: Quintanilla Acct Disabled, Julie R, CHH- Centennial				
Hills Hospital Medical Center				
Last Modified: 05/8/2013 7:12 PM				

## **Results**

# **Laboratory List**

Name	Date
Auto Diff	6/4/20
Basic Metabolic Panel	6/4/20
Beta hCG QuaNT (HCG QuanNT)	6/4/20
CBC with Diff	6/4/20
PT INR	6/4/20

# 6/4/20:

Test	Result	Reference Range	Specimen Source	Laboratory
WBC Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:05 PM		(Normal is 3.74-10.90 x10e3/mcL)	Blood	CHH Lab
RBC Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:05 PM		(Normal is 3.62-5.76 x10e6/mcL)	Blood	CHH Lab
Hgb Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:05 PM	14.7 gm/dL	(Normal is 10.7-16.7 gm/dL)	Blood	CHH Lab

Hct Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:05 PM	44.2 %	(Normal is 33.0-50.0 %)	Blood	CHH Lab
MCV Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:05 PM		(Normal is 79.4-99.5 Femtoliters)	Blood	CHH Lab
MCH Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:05 PM	31.4 pg	(Normal is 24.8-33.8 pg)	Blood	CHH Lab
MCHC Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:05 PM		(Normal is 30.6-34.9 gm/dL)	Blood	CHH Lab
RDW-SD Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:05 PM		(Normal is 37.6-47.5 Femtoliters)	Blood	CHH Lab
RDW-CV Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:05 PM	12.9 %	(Normal is 11.0-15.1 %)	Blood	CHH Lab
Plt Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:05 PM		(Normal is 140-400 x10e3/mcL)	Blood	CHH Lab
MPV Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:05 PM		(Normal is 7.2-12.6 Femtoliters)	Blood	CHH Lab

Neut % Auto Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:05 PM	57.6 %		Blood	CHH Lab
Lymph % Auto Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:05 PM	28.2 %		Blood	CHH Lab
Mono % Auto Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:05 PM	8.5 %		Blood	CHH Lab
Eos % Auto Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:05 PM	4.9 %		Blood	CHH Lab
Baso % Auto Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:05 PM	0.8 %		Blood	CHH Lab
Immature Grans % Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:05 PM	0.3 % 1	(Normal is 0.0-0.8 %)	Blood	CHH Lab
Neut # Auto Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:05 PM		(Normal is 1.30-7.30 x10e3/mcL)	Blood	CHH Lab
Lymph # Auto Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:05 PM		(Normal is 0.80-3.60 x10e3/mcL)	Blood	CHH Lab

Mono # Auto Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:05 PM	0.52 x10e3/mcL	(Normal is 0.20-0.80 x10e3/mcL)	Blood	CHH Lab
Eos # Auto Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:05 PM	0.30 x10e3/mcL	(Normal is 0.00-0.30 x10e3/mcL)	Blood	CHH Lab
Baso # Auto Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:05 PM		(Normal is 0.00-0.10 x10e3/mcL)	Blood	CHH Lab
Immature Grans # Auto Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:05 PM	0.02 x10e3/mcL	(Normal is 0.00-0.07 x10e3/mcL)	Blood	CHH Lab
PT Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:19 PM	10.4 Seconds	(Normal is 9.5-12.0 Seconds)	Blood	CHH Lab
INR Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:19 PM	1.0 2	(Normal is 0.9-1.1)	Blood	CHH Lab
Glucose Level Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:35 PM	103 mg/dL 3	(Normal is 74-106 mg/dL)	Blood	CHH Lab
Sodium Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:35 PM	139 mmol/L	(Normal is 136-145 mmol/L)	Blood	CHH Lab

Potassium Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:35 PM	3.6 mmol/L	(Normal is 3.5-5.1 mmol/L)	Blood	CHH Lab
Chloride Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:35 PM	108 mmol/L	(Normal is 98-107 mmol/L)	Blood	CHH Lab
CO2 Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:35 PM	24 mmol/L	(Normal is 21-32 mmol/L)	Blood	CHH Lab
Anion Gap Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:35 PM	7 mmol/L	(Normal is 5-17 mmol/L)	Blood	CHH Lab
BUN Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:35 PM	4 mg/dL	(Normal is 7-18 mg/dL)	Blood	CHH Lab
Creatinine Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:35 PM	0.708 mg/dL 4	(Normal is 0.550-1.020 mg/dL)	Blood	CHH Lab
BUN/Creat Ratio Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:35 PM	6	(Normal is 6-22)	Blood	CHH Lab
Calcium Author: CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 7:35 PM	9.0 mg/dL	(Normal is 8.5-10.1 mg/dL)	Blood	CHH Lab

Estimated Creatinine	94.85 mL/min			
Clearance				
Author: CHH- Centennial				
Hills Hospital Medical				
Center				
Last Modified:				
06/4/2020 7:35 PM				
eGFR Non-African	118 mL/min/1.73m25	(Normal is >=60	Blood	
American		mL/min/1.73m2)		
Author: CHH- Centennial				
Hills Hospital Medical				
Center				
Last Modified:				
06/4/2020 7:35 PM				
eGFR African American	137 mL/min/1.73m2	(Normal is >=60	Blood	
Author: CHH- Centennial		mL/min/1.73m2)		
Hills Hospital Medical				
Center				
Last Modified:				
06/4/2020 7:35 PM				
eGFR Pediatric	Not Reported 6		Blood	
Author: CHH- Centennial				
Hills Hospital Medical				
Center				
Last Modified:				
06/4/2020 7:35 PM				
HCG QT	<1 milli intl units/mL 7	(Normal is 1-3 milli intl	Blood	CHH Lab
Author: CHH- Centennial		units/mL)		
Hills Hospital Medical				
Center				
Last Modified:				
06/4/2020 7:37 PM				

<sup>&</sup>lt;sup>1</sup> Interpretive Data: "Immature Grans" represents an automated measurement of metamyelocytes, myelocytes and promyelocytes. Bands are considered mature granulocytes by the Sysmex analyzer and are included in the automated neutrophil count.

For patients treated with Vitamin K Antagonists (VKA) a therapeutic range of 2.0 - 3.0 (Target INR 2.5) is recommended. For therapeutic range in high risk groups and other dosing recommendations see CHEST 2012; 141 (2) (Suppl 1):7s-47s.

eGFR reference range: >=60 mL/min/1.73m2

hCG mIU/mL\*

<sup>&</sup>lt;sup>2</sup> Interpretive Data: Optimal therapeutic INR Range:

<sup>&</sup>lt;sup>3</sup> Interpretive Data: Sample collection should occur prior to sulfasalazine administration due to the potential for falsely depressed results.

<sup>&</sup>lt;sup>4</sup> Interpretive Data: Where applicable, the pediatric reference ranges are based on the Canadian Laboratory Initiative on Paediatric Reference Intervals Database and have not been independently verified by the laboratory.

<sup>&</sup>lt;sup>5</sup> Interpretive Data: The eGFR CKD-EPI calculation is not recommended for use in patients < 18 years of age, or in individuals with unstable creatinine concentrations (e.g. pregnancy, acute renal failure, serious co-morbid conditions, malnutrition, neuromuscular diseases, etc.) or in patients with extremes of muscle mass (frail, bodybuilders, obese).

<sup>&</sup>lt;sup>6</sup> Result Comment: Not reported for adult patients ( > 18 years old ).

<sup>&</sup>lt;sup>7</sup> Interpretive Data: Estimated Gestational Age\*

0.2 - 1 week

5 - 50

1 - 2 weeks

50 - 500

2 - 3 weeks

100 - 5000

3 - 4 weeks

500 - 10000

4 - 5 weeks

1000 - 50000

5 - 6 weeks

10000 - 100,000

6 - 8 weeks

15000 - 200,000

2 - 3 months

10000 - 100,000

### **Laboratory Information**

### **CHH Lab**

CLIA Number: 29D1070766

Centennial Hills Hospital Laboratory Laboratory Director: Noel Yumiaco, M.D.

CLIA # 29D1070766 6900 N. Durango Drive

Las Vegas, NV 89149-4409 US

## **CHH Lab**

CLIA Number: 29D1070766

Centennial Hills Hospital Laboratory Laboratory Director: Noel Yumiaco, M.D.

CLIA # 29D1070766 6900 N. Durango Drive

Las Vegas, NV 89149-4409 US

## **CHH Lab**

CLIA Number: 29D1070766

Centennial Hills Hospital Laboratory Laboratory Director: Noel Yumiaco, M.D.

CLIA# 29D1070766 6900 N. Durango Drive

Las Vegas, NV 89149-4409 US

# Radiology Reports

Exam Date Time	Procedure	Performing Provider	Status
6/4/20 1:15 PM	CT Head or Brain w/o Contrast	Carvalho R.T. (R), Jacie;	Auth (Verified)

<sup>\*</sup>The above reference ranges should not be used as an accurate estimate of gestational age. Correlation with clinical findings is needed.

Notes:

(CT Head or Brain w/o Contrast) Reason For Exam: Headache;Other (Please Specify) CHH RADIOLOGY CT BRAIN WITHOUT CONTRAST

HISTORY: Headache, Other (Please Specify),

COMPARISON: None.

TECHNIQUE: Thin section axial CT images were obtained from the vertex of the skull to the foramen magnum without contrast. In accordance with CT protocols and the ALARA principle, radiation dose reduction techniques were utilized for this examination. All images were reviewed and interpreted.

## FINDINGS:

The ventricles are normal in size, shape, and position. There is no evidence of abnormal extra-axial fluid collections, mass effect, or midline shift. The subarachnoid cisterns appear patent. There is no evidence of acute hemorrhage, obvious infarction, or abnormal areas of parenchymal attenuation.

The visualized portions of the paranasal sinuses are unremarkable. The visualized mastoid air cells appear clear. The visualized portions of the orbits are unremarkable. No significant calvarial abnormalities are identified.

## **IMPRESSION:**

1. No acute intracranial abnormalities are identified.

Dictated By: JOHN GRIFFITH MD

\*\*\*\*\* Final \*\*\*\*\*

Dictated by: Griffith, John L MD Dictated DT/TM: 06/04/2020 1:18 pm

Transcribed By: JLGTranscribed by: JLG Transcribed DT/TM: 06/04/20 13:16:09 Electronically Signed by: Griffith, John L MD Signed DT/TM: 06/04/2020 1:18 pm

Author: Griffith, John L, CHH- Centennial Hills Hospital Medical Center

Last Modified: 06/4/2020 8:18 PM

Exam Date Time	Procedure	Performing Provider	Status
	CT Angio Head w/ Contrst Incl w/o Images	Carvalho R.T. (R), Jacie;	Auth (Verified)

# Notes:

(CT Angio Head w/ Contrst Incl w/o Images) Reason For Exam: r/o aneursym;Other (Please Specify) CHH RADIOLOGY
CTA HEAD

HISTORY: Aneurysm.

COMPARISON: Noncontrast head CT performed same date/time.

TECHNIQUE: Initially, thin section noncontrast images through portions of the head/neck were

obtained for the purpose of establishing proper bolus timing of contrast. Subsequently, thin section axial CT images were obtained from near the skull base to the pericallosal level after intravenous administration of nonionic iodinated contrast. To optimally assess the intracranial vasculature, the original axial data was used to create 3D volume rendered, multi-planar reformatted and/or maximum intensity projection images in various planes. This was performed on a separate workstation. The axial and reformatted data were reviewed for this report. Thin section sagittal and coronal images were reconstructed from the axial data set. In accordance with CT protocols and the ALARA principle, radiation dose reduction techniques were utilized for this examination.

CONTRAST: Intravenous contrast was administered. Type and amount is documented at the local institution.

### FINDINGS:

Normal bilateral anterior, middle and posterior cerebral arteries. No stenosis, major vessel cut off, aneurysm seen.

Maxillary sinus and ethmoid sinus mucosal thickening.

### **IMPRESSION:**

# 1. Negative.

Dictated By: BENJAMIN MUIR MD

\*\*\*\*\* Final \*\*\*\*\*

Dictated by: Muir MD, Benjamin Dictated DT/TM: 06/04/2020 1:35 pm

Transcribed By: BMTranscribed by: BM Transcribed DT/TM: 06/04/20 13:33:29 Electronically Signed by: Muir MD, Benjamin Signed DT/TM: 06/04/2020 1:35 pm

Author: Muir, Benjamin, CHH- Centennial Hills Hospital Medical Center

Last Modified: 06/4/2020 8:35 PM

## **Vital Signs**

#### 6/4/20

Temperature (Route Not	37.1 DegC	(Normal is 35.5-38.1 DegC)
Specified)		
Author: Lehano Account		
Disabled, Maluhia, CHH-		
Centennial Hills Hospital		
Medical Center		
Last Modified:		
06/4/2020 9:13 PM		

Peripheral Pulse Rate Author: Lehano Account Disabled, Maluhia, CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 9:13 PM	62 bpm	(Normal is 60-100 bpm)
Respiratory Rate Author: Lehano Account Disabled, Maluhia, CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 9:13 PM	18 br/min	(Normal is 12-20 br/min)
Blood Pressure	116/71 mmHg Author: Lehano Account Disabled, Maluhia, CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 9:13 PM Author: Lehano Account Disabled, Maluhia, CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 9:13 PM	(Normal is 90-140/60-90 mmHg)
Height Author: Milburn Account Disabled, Shelby, CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 6:32 PM	157.48 cm	
Weight Author: Milburn Account Disabled, Shelby, CHH- Centennial Hills Hospital Medical Center Last Modified: 06/4/2020 6:32 PM	49.9 kg	

# **Social History**

Social History Type	Response
Tobacco	Denies Author: Shin, Jun W Last Modified: 12/2/2019 7:54 AM
Smoking Status	Never smoker

Social History Type	Response
Birth Sex	Female
Last Modified:	
03/4/2024 4:31 PM	

#### Goals

No data available for this section

### **Hospital Discharge Instructions**

Section Author: Lehano Account Disabled, Maluhia, CHH- Centennial Hills Hospital Medical Center, 06/4/2020 9:15 PM

**Patient Education** 

06/04/2020 14:15:07

Headache, Unspecified

Headache, Unspecified

A number of things can cause headaches. The cause of your headache isn't clear. But it doesn't seem to be a sign of any serious illness. Headache affects almost everyone at some time. It is the most common reason people miss days from work or school.

You could have a tension headache or a migraine headache.

Stress can cause a tension headache. This can happen if you tense the muscles of your shoulders, neck, and scalp without knowing it. If this stress lasts long enough, you may develop a tension headache.

It is not clear why migraines occur, but certain things called" triggers" can raise the risk of having a migraine attack. Migraine triggers may include emotional stress or depression, or by hormone changes during the menstrual cycle. Other triggers include birth control pills and other medicines, alcohol or caffeine, foods with tyramine (such as aged cheese, wine), eyestrain, weather changes, missed meals, and lack of sleep or oversleeping.

Other causes of headache include:

- •Viral illness with high fever
- •Head injury with concussion
- •Sinus, ear, or throat infection
- •Dental pain and jaw joint (TMJ) pain

More serious but less common causes of headache include stroke, brain hemorrhage, brain tumor, meningitis, and encephalitis.

Home care

Follow these tips when taking care of yourself at home:

- •Don't drive yourself home if you were given pain medicine for your headache. Instead, have someone else drive you home. Try to sleep when you get home. You should feel much better when you wake up.
- •Apply heat to the back of your neck to ease a neck muscle spasm. Take care of a migraine headache by putting an ice pack on your forehead or at the base of your skull.
- •If you have nausea or vomiting, eat a light diet until your headache eases.
- •If you have a migraine headache, use sunglasses when in the daylight or around bright indoor lighting until your symptoms get better. Bright glaring light can make this type of headache worse.

Follow-up care

Follow up with your healthcare provider, or as advised. Talk with your provider if you have frequent headaches. He or she can help figure out a treatment plan. By knowing the earliest signs of headache, and starting treatment right away, you may be able to stop the pain yourself.

When to seek medical advice

Call your healthcare provider right away if any of these occur:

- •Your head pain suddenly gets worse after sexual intercourse or strenuous activity
- •Your head pain doesn't get better within 24 hours
- •You aren't able to keep liquids down (repeated vomiting)

- •Fever of 100.4°F (38°C) or higher, or as directed by your healthcare provider
- Stiff neck
- •Extreme drowsiness, confusion, or fainting
- •Dizziness or dizziness with spinning sensation (vertigo)
- •Weakness in an arm or leg or one side of your face
- •You have trouble talking or seeing

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#### Reason for Referral

No data available for this section

## **Health Concerns**

No data available for this section

### **Implantable Device List**

No data available for this section

### **Clinical Note**

No data available for this section

### **Patient Care team information**

## **Care Team Personnel**

Name: No, Pcp No MD

Member Role: Primary Care Physician

Address:

Address: 00000-0000

Last Modified: 03/17/2022 9:31 AM

# **Care Team Related Persons**

Name: JOHNSON, DIONNA

Address: Home

4901 W EL CAMPO GRANDE AVE LAS VEGAS, NV 891307248 US

Name: MCGLOTHAN, DEVON

Address: Home

4901 W EL CAMPO GRANDE AVE LAS VEGAS, NV 891307248 US