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| **Activity 2.1.1: Medical History** |

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| Patient’s Name: | Age: | Date: |
| Anna Garcia | 14 | May 14th  |
| Height: | Weight: | Temperature: |
| 5’0” | 103 lb | 98.7°F |
| Blood Pressure: | Pulse: | Respiration Rate: |
| 110/72 | 75 bpm | 22 bpm |
| Case HistoryAnna is an active 14-year-old girl who, other than being diagnosed with sickle cell disease when she was a baby, has no other history of major illness. Recently, she reports fatigue and the inability to complete her normal activities without needing to rest. She also notes that no matter how much she drinks, she still feels thirsty. The patient’s mother has noticed that Anna seems to use the bathroom more often. Anna has lost almost 10 pounds since her last visit even though her diet and level of exercise has not changed. If anything, her activity level has decreased due to the fatigue. Anna’s mother reports a family history of high cholesterol and heart disease. Physical Exam* Patient’s pulse is normal.
* Patient shows no signs of edema (swelling) in her feet or lower legs, although she does mention an occasional tingling sensation.
* Patient said she has no ear pain or a sore throat. Upon inspection, her ears, nose, and throat all look normal.
* Patient’s glands are not swollen.
* Patient’s speech, hearing, and vision appear normal.

Laboratory Analysis* CBC results are normal – no abnormalities in red blood cell, white blood cell, or platelet count.
* Cultures for strep are negative.
* Routine urinalysis shows glucose in the urine.

Given Anna’s family history of cardiovascular disease and her stated symptoms, Anna will be sent for glucose tolerance testing to rule out diabetes. Follow-up/DiagnosisExplanation of Symptoms |