

Ms. Patterson

29 y/o African American

Chief complaint: wheezing

Ms. Patterson, a 29-year-old African-American woman with known bronchial asthma, comes in with wheezing. Five days ago, she started wheezing again, this time with associated purulent rhinorrhea, mild nasal obstruction and mild facial pain. She reports increased use of her albuterol inhaler, which provides temporary relief. She also tells you that she cannot seem to get a “full puff” of her inhaler during her wheezing episodes. She reports no fever, chills, palpitations, malaise or myalgia, and there is only a modest decrease in her usual activities due to her wheezing. She reports that she hasn't been eating and sleeping well and has been feeling tired in the past 2 weeks. The review of systems was otherwise negative.

Past medical history

- Bronchial asthma, mild intermittent, previously well controlled on low dose budesonide/formoterol 1 puff BID and PRN albuterol. Allergen skin test, done 5 years ago, was negative.
- Vaccinations: not updated

Family history

- Both parents have hypertension
- Father and two siblings have asthma
- No family history of colon, breast or ovarian cancer

Personal social history

- Does not smoke cigarettes, drink alcohol, or use recreational drugs. She has been married for 3 years.

On **physical examination**, patient is alert and not in respiratory distress; Temp is 98.6 deg F, BP 114/67, HR 76/min, RR 17/min and BMI 24 kg/m². Her oxygen saturation is 97% on room air. Peak expiratory flow is 73% of personal best. She has no tenderness over her left maxillary sinus on percussion. She has intermittent wheezing on auscultation, but no dullness or decreased breath sounds. The rest of the physical exam is unremarkable.