



## Clinical Note Activity: People-First Language

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**Chief Complaint:** Evaluation for positive human immunodeficiency virus (HIV) rapid test

**History of Present Illness:** Mr. Green is an unfortunate 40-year-old man referred for further evaluation after a positive HIV screening test. The patient was tested at a community health screening booth that was part of a gay pride event about 2 weeks ago. The rapid test was positive, and the patient has scheduled an appointment at this clinic for further evaluation.

Mr. Green says that his test was a “surprise,” despite the fact that he has had sex with a lot of men in the past. His last HIV test was about 5 years ago at a health department, and he says that “it must have been negative because they never called me.” He says he is a “transgender woman” but does not take any medications or had any surgery.

In regard to HIV risk factors, he has had sex with men in the past. When I asked how many, Mr. Green said he wasn’t sure (perhaps because he can’t remember how many). He also is an addict and an injection drug user; he regularly uses methamphetamines as well as other drugs including heroin, marijuana, and cocaine. He has multiple tattoos, some of which appear as if they may have been placed in jail or prison.

He reports feeling tired. He says he is “depressed” about his diagnosis and what this means for his health in the future.

**Review of Systems:** All systems reviewed and negative other than noted above.

**Past Medical History:** Prior diagnosis of gonorrhea and syphilis treated at another state’s health department. History of depression, not currently on treatment.

**Past Surgical History:** Appendectomy at age 15.

**Family History:** Mother with hypertension and diabetes. Father was an alcoholic with liver disease.

**Social History:** Smokes 1 pack of cigarettes per day. Alcoholic; drinks 4-6 drinks per day and more on weekends. Intravenous drug addict, predominantly methamphetamines and sometimes heroin. Abuses marijuana and cocaine. Unemployed, has never held a job more than 6 months at a time.

**Medications:** No current prescription medications.

**Allergies:** No known drug allergies.

**Physical Exam:**

Vitals: Temperature 97.6 deg F, Pulse 89 beats/min, Blood Pressure 135/80 mm Hg, Respiratory rate 16 breaths/minute, Oxygen saturation 98% on room air

General: Appears generally well, inappropriately dressed as a drag queen, nervously looking around

Head: Normocephalic, atraumatic, wearing a wig

Eyes: Pupils equal, round and reactive; no conjunctival icterus

Nose: Nasal piercing of left nare

Mouth: Prior dental work noted; tongue piercing noted; no oral thrush

Cardiovascular: S1 and S2 heard, no murmurs or rubs

Lungs: Clear to auscultation bilaterally, no crackles, no wheezes

Abdomen: Nontender, nondistended, bowel sounds present in all four quadrants

Genitourinary: Uncircumcised penis without skin lesions

Extremities: No cyanosis, clubbing, or edema

Skin: Multiple tattoos on all four extremities; no rash or bruises noted

Neurologic: Moving all 4 extremities; ambulates without aid

**Laboratory and Radiology Studies:** Reviewed in medical record.

**Assessment:** Mr. Green is a 40-year-old man referred for further evaluation after a positive HIV screening test. The patient certainly has multiple risk factors for HIV infection, including promiscuous homosexual sex and intravenous drug abuse. He will be assessed with the tests noted below. In addition, he is at risk for sexually transmitted diseases and will be screened appropriately. Finally, he is confused regarding his sexual orientation and warrants mental health assessment.

**Plan By Problem:**

1. Acquired Immune Deficiency Syndrome (ICD10 B24)
  - a. Check HIV p24 antigen and antibody tests
  - b. Check HIV RNA PCR tests
  - c. Check flow T-cell subsets (i.e. CD4 count)
  - d. If tests positive and confirm active infection, obtain further testing
2. High risk homosexual behavior (ICD10 Z72.52)
  - a. Screen for syphilis with Treponemal IgG and RPR
  - b. Screen for gonorrhea and chlamydia with urine G/C PCR
  - c. Patient counseled regarding importance of using condoms to reduce risk of transmission
3. Gender dysphoria (ICD10 F64.9)
  - a. Refer to psychiatry for further evaluation