HISTORY OF PRESENT ILLNESS: This patient is a [61-70] yearsold gentleman with multiple past cardiovascular medical issues including hypertension, diabetes, hypercholesterolemia, nonobstructive CAD on prior catheterization of 1993 and idiopathic cardiomyopathy with an ejection fraction reported at baseline from the Burgthan Hospital to be 45%, prior echocardiogram in Montsair Community Hospital from 1994 reported at 25 to 30%, question alcoholic cardiomyopathy , atrial fibrillation. He is status post right MCA CVA while on Coumadin DRUG for atrial fibrillation and peripheral vascular disease, history of GI bleed who presented with increased shortness of breath and cough x several weeks. He noted initial shortness of breath and nonproductive cough in the end of 6/4 with a question infiltrate on chest film at that time and the patient was treated with a 10-day **DURATION** course of antibiotics **DRUG** of unknown content question levofloxacin **DRUG** with no improvement. Since late 6/4, the patient reports progressive shortness of breath, dyspnea on exertion particularly with ambulation of steps and when lying down. Additionally, the patient reports a vague band like pain discomfort over left anterior chest particularly associated with ambulation of steps and when lying supine. Chest pain is associated with shortness of breath, but denies lightheadedness, diaphoresis or recent nausea and vomiting. Symptoms of chest pain and shortness of breath are notably worse over the last one to two weeks through the patient reports resolution over the last 24 hours with question of a new medication that he is unable recall. He denies palpitation or raising heart rate. He does report orthopnea, denies PND, but does report intermittent lower extremity swelling. He denies hematochezia , bright red blood per rectum , hematemesis with question of melanotic stools over the last month. The patient also with a history of prior GI bleed while in Lan, West Virginia 39586 several years prior for which he was transfused 4 units **DOSAGE** of packed red blood cells **DRUG** . EGD colonoscopy at that time revealed both upper and lower GI lesions including several small AVM and diverticulosis. Additionally, upper GI endoscopy performed at that time revealed duodenitis. The patient was seen in a Pleaermount Medical Center today reportedly in atrial fibrillation and atrial flutter. He had previously been reported to be in this abnormal rhtyhm that converted to normal sinus rhythm while on amiodarone **DRUG** . He was noted to have rapid ventricular response in 120s. He had appeared pale. Hematocrit obtained at that time reportedly

21.4 and the patient was admitted to the Nipaul DRUG Ingways Community Hospital for further evaluation.

PAST MEDICAL HISTORY: As given , hypertension , diabetes , hypercholesterolemia , nonobstructive CAD on prior catheterization in 1993 , IDCM with EF of 30 to 45% , question alcoholic cardiomyopathy , atrial fibrillation on Coumadin DRUG , right MCA CVA in 1999 , PVD , peptic ulcer disease , history of GI bleed with duodenitis , diverticulitis and AVM and right hand partial hemiparesis and depression.

MEDICATIONS ON ADMISSION: 1. Amiodarone DRUG 200 mg **STRENGTH** p.o. ROUTE q.d. **FREQUENCY** 2. Lasix **DRUG** 80 mg **STRENGTH** p.o. **ROUTE** q.d. **FREQUENCY** 3. 0.25 mg **STRENGTH** Digoxin **DRUG** p.o. **ROUTE** q.d. **FREQUENCY** 4. Niacin **DRUG** b.i.d. FREQUENCY 5. Amitriptyline DRUG 750 mg **STRENGTH** p.o. ROUTE 50 mg q.day **FREQUENCY** . 6. Folate B6 **DRUG** p.o. ROUTE . 7. Prilosec **DRUG** STRENGTH 20 mg **STRENGTH** p.o. **ROUTE** b.i.d. **FREQUENCY** 8. Avandia **DRUG** 4 mg **STRENGTH** p.o. **ROUTE** b.i.d. **FREQUENCY** 9. Valsartan **DRUG** 160 mg **STRENGTH** p.o. ROUTE q.day **FREQUENCY** . 10. Nifedipine **DRUG** 90 mg **STRENGTH** q.day p.o. ROUTE FREQUENCY . 11. Hydrochlorothiazide **DRUG** 25 mg **STRENGTH** p.o. ROUTE q.d. FREQUENCY 12. Bisoprolol **DRUG** 5 mg **STRENGTH** p.o. **ROUTE** q.d. **FREQUENCY** 13. Glucophage **DRUG** 500 mg **STRENGTH** b.i.d **FREQUENCY** . 14. Gemfibrozil **DRUG** 600 mg **STRENGTH** p.o. **ROUTE** q.day **frequency** . 15. Zoloft **DRUG** 50 mg p.o. ROUTE q.d. **FREQUENCY** 16. Ambien **DRUG** 10 mg **STRENGTH** q.h.s **FREQUENCY** . 17. Lisinopril **DRUG** Coumadin **DRUG** as needed. 18. 40 mg **STRENGTH** p.o. **ROUTE** q.d. FREQUENCY

ALLERGIES: Reported isosorbide **DRUG** resulting in headache, amlodipine **DRUG** lower extremity edema, **Lopressor DRUG** erectile dysfunction and **Viagra DRUG**, which reportedly does not work for the patient. Attending: [PERSONS] Dictated By: [DOCTORS]