

06/20/2018 - Office Visit: see in 6 mo/MKJ
Provider: Mohammad Kamran MD
Location of Care: Cardiology & CV Surgery

DIAGNOSES:

1. BRADYCARDIA
2. HYPERLIPIDEMIA
3. CVA, STROKE
4. OBESITY
5. TOBACCO USE
6. CHEST PAIN
- 6.1. Echocardiogram 03/02/2016
- 6.2. EF 50% Concentric LVH.
- 6.4. Stress 12/30/15
- 6.5. LVEF 23%. Evidence of inferior wall being severely hypokinetic more than the rest of the wall. No evidence of ischemia. Dilated LV even within rest and stress both.
- 6.7. Echo 12/30/15
- 6.8. The left ventricle is moderately dilated. There is no thrombus. There is mild concentric left ventricular hypertrophy. Left ventricular systolic function is severely reduced. LVEF 25-30%. There is severe global hypokinesis of the left ventricle. The right atrium is severely dilated. The left atrium is severely dilated. The mitral valve leaflets appear thickened, but open well. There is moderate mitral regurgitation. There is moderate tricuspid regurgitation.
7. CARDIOMYOPATHY, HYPERTENSIVE
- 7.1. EF was 25%
- 7.2. after BP Rx 45%
8. MITRAL REGURGITATION
- 8.1. III/VI
9. HTN, UNSPEC
10. HEART FAILURE, SYSTOLIC
11. ARTHRITIS
12. HYPERGLYCEMIA

this is what we need
in the printed
Progress
note

Medications Prior to this update:

CLOPIDOGREL BISULFATE 75 MG ORAL TABLET (CLOPIDOGREL BISULFATE) once daily
CLONIDINE HCL 0.2 MG ORAL TABLET (CLONIDINE HCL) 1 three times daily
ATORVASTATIN CALCIUM 80 MG ORAL TABLET (ATORVASTATIN CALCIUM) 1 at bedtime
AMLODIPINE BESYLATE 10 MG ORAL TABLET (AMLODIPINE BESYLATE) 1 DAILY
ENTRESTO 49-51 MG ORAL TABLET (SACUBITRIL-VALSARTAN) 1 tablet twice a day
ASPIRIN 325 MG ORAL TABLET (ASPIRIN) 1 DAILY
SPIRONOLACTONE 25 MG ORAL TABLET (SPIRONOLACTONE) one daily
CLONAZEPAM 0.5 MG ORAL TABLET (CLONAZEPAM) AS NEEDED

Medication changes during this update:

Added new medication of ISOSORBIDE MONONITRATE ER 120 MG ORAL TABLET EXTENDED RELEASE 24 HOUR 1 DAILY.

CARDIOLOGY AND CV SURGERY

February 4, 2019

1700 Christine Avenue Suite 100
Anniston, Alabama 36205
PH: 256-238-1154 FAX: 256-237-8624

Dock D Oneal

Male DOB: 07/19/1975

29763

CELL: 2562398368 : None : None

Ins: BCBS AL ***Local Grp: 29207

Medications Reviewed: Done**Current Allergies (reviewed today):**

No known allergies

CC: fu.**History of Present Illness:**

The patient is here for a cardiology visit. He is here today for a follow up appointment. Patient had gone to Regional Medical Center ER for chest pain. He states he is doing much better now.

Past Medical History - reviewed

Hypertension

Surgical History - reviewed

No pertinent surgical history

Family History - reviewed

Diabetes

Heart Disease MGF

Heart Disease in Male <55

Hypertension father, mother

Risk Factors - reviewed**Tobacco Use:** Current every day smoker **Age began smoking:** 21**Year started:** 1996**Cigarette packs/day:** 0.25 **Pack-years:** 5.50**Cigars/Pipes per wk:** 0 **Chewing cans per week:** 0 **Counseled to quit/cut down:** yes**Passive smoke exposure:** no

Alcohol use: Drinks wine 2 times per week having 1-2 drinks per occasion, never having more than 5 drinks per occasion.

Caffeine use: Drinks coffee 1-2 times a day.**Drug use:** none**HIV high risk:** no**Exercise (times/week):** 7+ /wk **Exercise type:** Walks**Seat belt use(%):** always **Sun exposure:** frequently**Family History Risk Factors****FH Heart Disease in male < 55:** Yes**Social History - reviewed****Marital Status:** Married**Children:** 3 children

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Review of Systems**General:** Positive for weight gain.**Eyes:** Patient denies double vision, halos around lights, discharge, vision loss - 1 eye, blurring, eye irritation, vision loss - both, light sensitivity, eye pain.**ENT:** Patient denies earache, ringing in ears, ear discharge, nosebleeds, hoarseness, decreased hearing, nasal congestion, sore throat.**Cardiovascular:** Positive for shortness of breath with exertion, chest pain or discomfort, racing / skipping heartbeats.**Respiratory:** Patient denies excessive sputum, cough, sleep disturbances due to breathing, wheezing, excessive snoring, coughing up blood.**Gastrointestinal:** Patient denies excessive appetite, nausea, gas, indigestion, diarrhea, vomiting, constipation, difficulty swallowing, vomiting blood, yellowish skin color, dark tarry stools, abdominal pain, change in bowel habits, bloody stools.**Musculoskeletal:** Patient denies muscle cramps, joint pain, stiffness, muscle weakness, joint swelling, back pain, muscle aches.**Genitourinary:** Patient denies painful urination, trouble starting urinary stream, pelvic pain, blood in urine, inability to empty bladder, genital sores, urinary urgency, inability to control bladder, urinary frequency, night time urination.**Skin:** Patient denies rash, itching, suspicious lesions, changes in color of skin, dryness, poor wound healing, changes in nail beds.**Neurologic:** Positive for poor balance.**Psychiatric:** Patient denies anxiety, depression.**Endocrine:** Patient denies heat intolerance, excessive thirst, cold intolerance, excessive hunger, excessive urination.**Heme/Lymphatic:** Patient denies abnormal bruising, bleeding, skin discoloration, enlarged lymph nodes.**Allergy:** Patient denies persistent infections, seasonal allergies, HIV exposure.**Vital Signs****Weight:** 275.5 lb.**Pulse rate:** 61 bpm**BP #1 :** 142/ 91 mmHg**Calculations****Body Mass Index:** 38.42**Physical Exam****General:**

obese male in no acute distress. Left sided weakness. His wife is present.

Head:

normocephalic and atraumatic

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Eyes:

PERRLA/EOM intact; fundi benign, conjunctiva and sclera clear

Nose:

no deformity, discharge, inflammation, or lesions

Mouth:

no deformity or lesions with good dentition

Neck:

no masses, thyromegaly, or abnormal cervical nodes

Lungs:

clear bilaterally to A & P

Heart:

regular rate and rhythm, S1, S2 without murmurs, rubs, gallops, or clicks

Msk:

ambulates with a cane, left sided weakness

Pulses:

normal pedal pulses bilaterally.

Extremities:

no clubbing, cyanosis, edema, or deformity noted with normal full range of motion of all joints

Neurologic:

left side weakness

Skin:

intact without lesions or rashes

Detailed Cardiovascular Exam**Neck**

Carotids: Carotids full and equal bilaterally without bruits.

Neck Veins: flat neck veins.

Heart

Inspection: no deformities or lifts noted.

Palpation: normal PMI with no thrills palpable.

Auscultation: regular rate and rhythm, S1, S2 without murmurs, rubs, gallops, or clicks.

Vascular

Femoral Pulses: normal femoral pulses bilaterally.

Pedal Pulses: normal pedal pulses bilaterally.

Radial Pulses: normal radial pulses bilaterally.

Peripheral Circulation: no clubbing, cyanosis, or edema noted with normal capillary refill.

Assessment & Plan

Problem # 1: CHEST PAIN (ICD-786.50) (ICD10-R07.9)

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Ins: BCBS AL ***Local Grp: 29207

Assessment: Improved

Patient had chest pain earlier this month and went to RMC ER. He states he is feeling much better now.

Reviewed medications with patient.

His updated medication list for this problem includes:

Isosorbide Mononitrate Er 120 Mg Oral Tablet Extended Release 24 Hour (Isosorbide mononitrate) 1 daily

Clopidogrel Bisulfate 75 Mg Oral Tablet (Clopidogrel bisulfate) Once daily

Amlodipine Besylate 10 Mg Oral Tablet (Amlodipine besylate) 1 daily

Aspirin 325 Mg Oral Tablet (Aspirin) 1 daily

Problem # 2: TOBACCO USE (ICD-305.1) (ICD10-Z72.0)**Assessment:** Unchanged

Smoking cessation materials are provided. Discussed various therapies, including medications.

Problem # 3: CVA, STROKE (ICD-434.91) (ICD10-I63.50)**Assessment:** Comment Only

Patient has left sided weakness.

His updated medication list for this problem includes:

Clopidogrel Bisulfate 75 Mg Oral Tablet (Clopidogrel bisulfate) Once daily

Aspirin 325 Mg Oral Tablet (Aspirin) 1 daily

Problem # 4: HTN, UNSPEC (ICD-401.9) (ICD10-I10)**Assessment:** Comment Only

Discussed with patient the importance of compliance with antihypertensives, stress reduction, diet, and lifestyle modification to reduce overall blood pressure. Reviewed normal BP range and encouraged patient to be proactive in monitoring BP.

His updated medication list for this problem includes:

Clonidine Hcl 0.2 Mg Oral Tablet (Clonidine hcl) 1 three times daily

Amlodipine Besylate 10 Mg Oral Tablet (Amlodipine besylate) 1 daily

Aspirin 325 Mg Oral Tablet (Aspirin) 1 daily

Spironolactone 25 Mg Oral Tablet (Spironolactone) One daily

Problem # 5: CARDIOMYOPATHY, HYPERTENSIVE (ICD-402.90) (ICD10-I11.9)**Assessment:** Unchanged

Last echocardiogram 02/2018

EF 40-45%

His updated medication list for this problem includes:

Clonidine Hcl 0.2 Mg Oral Tablet (Clonidine hcl) 1 three times daily

Amlodipine Besylate 10 Mg Oral Tablet (Amlodipine besylate) 1 daily

Aspirin 325 Mg Oral Tablet (Aspirin) 1 daily

Spironolactone 25 Mg Oral Tablet (Spironolactone) One daily

Problem # 6: OBESITY (ICD-278.00) (ICD10-E66.9)**Assessment:** Comment Only

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Patient mostly sedentary and does not closely follow a heart healthy diet. Weight loss recommended. Diet and exercise encouraged.

Patient Instructions:

- 1) Encouraged a low fat/low cholesterol diet and handout regarding the Therapeutic Lifestyle Change Diet was given.
- 2) Please schedule a follow-up appointment in 6 months.
- 3) Check and record blood pressure daily.
- 4) Check and record weight daily.
- 5) Discussed the hazards of tobacco smoking (use). Smoking cessation recommended and techniques and options to help patient quit were discussed.
- 6) Discussed importance of regular exercise and recommended starting or continuing a regular exercise program for good health.
- 7) The patient was encouraged to lose weight for better health.
- 8) Discussed the risks-benefits and indications for preventive Aspirin therapy. Recommend that the patient start (or continue) taking 325 mg of Enteric-coated Aspirin a day.
- 9) Reviewed patient's records.

Vital Signs:

Patient Profile: 42 Years Old Male
Height: 71 inches (180.3 cm)
Weight: 275.5 pounds
BMI: 38.42
Pulse rate: 61 / minute
BP sitting: 142 / 91

Electronically signed by Mohammad Kamran MD on 06/23/2018 at 5:01 PM

~~06/20/2018 - Clinical Visit Summary: Clinical Visit Summary~~

~~Provider: Zekia Foster~~

~~Location of Care: Cardiology & CV Surgery~~

Cardiology & CV Surgery Clinical Summary

Patient	Dock Oneal	Sex	Male
Date of birth	July 19, 1975		