

PAST MEDICAL/SURGICAL HISTORY: , Briefly, his past medical history is significant for hypertension of more than 5 years, asthma, and he has been on Advair and albuterol. He was diagnosed with renal disease in 02/2008 and has since been on hemodialysis since 02/2008. His past surgical history is only significant for left AV fistula on the wrist done in 04/2008. He still has urine output. He has no history of blood transfusion.,**PERSONAL AND SOCIAL HISTORY:** , He is a nonsmoker. He denies any alcohol. No illicit drugs. He used to work as the custodian at the nursing home, but now on disability since 03/2008. He is married with 2 sons, ages 5 and 17 years old.,**FAMILY HISTORY:**, No similar illness in the family, except for hypertension in his one sister and his mom, who died at 61 years old of congestive heart failure. His father is 67 years old, currently alive with asthma. He also has one sister who has hypertension. The rest of the 6 siblings are alive and well.,**ALLERGIES:** , No known drug allergies.,**MEDICATIONS:** , Singulair 10 mg once daily, Cardizem 365 mg once daily, Coreg 25 mg once daily, hydralazine 100 mg three times a day, Lanoxin 0.125 mg once daily, Crestor 10 mg once daily, lisinopril 10 mg once daily, Phoslo 3 tablets with meals, and Advair 250 mg inhaler b.i.d.,**REVIEW OF SYSTEMS:** , Significant only for asthma. No history of chest pain normal MI. He has hypertension. He occasionally will develop colds especially with weather changes. GI: Negative. GU: Still making urine about 1-3 times per day. Musculoskeletal: Negative. Skin: He complains of dry skin. Neurologic: Negative. Psychiatry: Negative. Endocrine:

Negative. Hematology: Negative.,PHYSICAL EXAMINATION:

, A pleasant 41-year-old African-American male who stands 5 feet 6 inches and weighs about 193 pounds. HEENT:

Anicteric sclera, pink conjunctiva, no cervical

lymphadenopathy. Chest: Equal chest expansion. Clear

breath sounds. Heart: Distinct heart sounds, regular rhythm

with no murmur. Abdomen: Soft, nontender, flabby, no

organomegaly. Extremities: Poor peripheral pulses. No

cyanosis and no edema.,ASSESSMENT AND PLAN:, This is

a 49-year old African-American male who was diagnosed with

end-stage renal disease secondary to hypertension. He is on

hemodialysis since 02/2008. Overall, I think that he is a

reasonable candidate for a kidney transplantation and should

undergo a complete pretransplant workup with pulmonary

clearance because of his chronic asthma. Other than that, I

think that he is a reasonable candidate for transplant.,I would

like to thank you for allowing me to participate in the care of

your patient. Please feel free to contact me if there are any

questions regarding his case.