

RIVERA, Ervin DOB: 10/26/1986 (38 yo M) Acc  
No. 18243 DOS: 07/29/2025

**Patient:** RIVERA, Ervin  
**Account Number:** 18243  
**DOB:** 10/26/1986 **Age:** 38 Y **Sex:** Male  
**Phone:** 646-744-8460  
**Address:** 36 Orange St, Marlboro, NY-12542

**Provider:** Rishi Bajaj, MD  
**Date:** 07/29/2025

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## Subjective:

### Chief Complaints:

1. Dizziness and chest discomfort.

### HPI:

#### Transition of Care:

This is a 38-year-old male, a new patient referred by Zocdoc, with a past medical history of enlarged aorta, cirrhosis, and asthma. Past surgical history includes two gastric sleeve surgeries in 2015 and gastric bypass in 2017. He had an episode of one seizure in 2021. He had a full workup done by neurology for over a year and has had no other history of seizures and was found to be a one-time incident. His social history includes a former smoker and non-ETOH user. He works at Metro North with two children who currently live in Marlboro. He would like to establish care here at Epic. His only medication is a Taltz shot for his psoriasis. He has recent complaints of discomfort and swelling in his hand, dizziness when he sits to stands, and chest discomfort with burning and stomach discomfort. He denies any active chest pain, chest pressure, chest discomfort, syncope, and near syncopal events.

Carotid Doppler: Mild plaque.

Venous Reflux: No evidence of DVT but positive for reflux.

ABI/PVR: RLE 0.24 and LLE 1.23.

Today, due to his chest discomfort and heartburn, an EKG and echo will be performed. Due to his dizziness from standing to sitting, a carotid doppler will also be performed, which revealed mild plaque. Due to his discomfort in his hands, an ABI/PVR will be performed. Due to his discomfort and decreased pedal pulses, venous reflux will be performed, which revealed no evidence of DVT but was positive for reflux. A bilateral arterial will be done at his next visit due to his ABI/PVR, which revealed RLE 0.24 and LLE 1.23. Preliminary blood work including CBC, CMP, vitamin D, A1c, thyroid, testosterone, Lyme, and H. pylori will be obtained at today's visit, which he tolerated well. We will also give him a referral for a sleep study and a gastroenterologist referral due to his stomach discomfort. He currently states he has a cardiologist, Dr. Alabre Marjorie, but he has not seen her in over a year, and he still has not decided if he will follow up with her or stay with Epic. A heart-healthy diet and healthy lifestyle were encouraged and endorsed. We will see him back in one week or sooner to review all results. Patient agrees to the plan of care.

### ROS:

#### General / Constitutional:

Chills denies. Fatigue denies. Fever denies.

#### Ophthalmologic:

Blurry vision denies. Change in vision denies. Eye pain denies.

#### ENT:

Difficulty in swallowing denies. Ringing in the ears denies. Sore throat denies.

#### Endocrine:

Cold intolerance denies. Heat intolerance denies. Weakness denies.

#### Respiratory:

Chest pain admits. Cough denies. Hemoptysis denies. Shortness of breath denies.

#### Cardiovascular:

Comments See HPI for details.

#### Gastrointestinal:

Abdominal pain admits. Blood in

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stool denies. Diarrhea denies. Nausea denies. Vomiting denies.

Hematology:

Bleeding problems denies.

Genitourinary:

Blood in the urine denies. Frequent urination denies. Painful urination denies.

Musculoskeletal:

Painful joints denies. Swollen joints denies.

Peripheral Vascular:

Absent pulses in feet denies. Absent pulses in hands denies. Cold extremities denies. Painful extremities denies.

Skin:

Rash denies.

Neurologic:

Balance difficulty denies. Difficulty speaking denies. Dizziness admits. Headache denies.

**Medical History:** Medical History Verified.

**Family History:** No Family History documented..

**Objective:**

**Vitals:**

BP: **120/90** mm Hg, HR: **67** /min, RR: **16** /min, Oxygen sat %: **95** %, Wt: **210** lbs, Wt-kg: 95.26 kg.

**Examination:**

General Examination:

General appearance: well developed, well nourished, in no acute distress.

Head: normocephalic, atraumatic.

Eyes: PERRLA, EOMI.

Ears: external ear inspection normal.

Oral cavity: tongue midline, mucosa moist.

Neck / thyroid: neck is supple, full range of motion, no thyromegaly, no cervical lymphadenopathy.

Heart: regular rate and rhythm, S1, S2 normal, no murmurs, gallops, clicks or rubs, no JVD, carotid upstroke brisk bilaterally, no carotid bruit.

Lungs: symmetrical chest expansion, clear to auscultation bilaterally, no wheezes, rales, rhonchi, normal respiratory effort, no labored breathing.

Abdomen: soft, non-tender, non-distended, bowel sounds present in all four quadrants.

Extremities: full range of motion, no upper extremity edema, no lower extremity edema.

Neurologic: nonfocal, alert, awake and oriented to person, place and time.

Psych: mood and affect appear normal.

**Assessment:**

**Assessment:**

1. Dizziness - R42 (Primary)
2. Vitamin D deficiency, unspecified - E55.9
3. Annual physical exam - Z00.00
4. Encounter for screening for other metabolic disorders - Z13.228
5. Lyme disease, unspecified - A69.20
6. Chest discomfort - R07.89
7. Abdominal pain, unspecified abdominal location - R10.9
8. Pain in unspecified hand - M79.643

**Plan:**

**Treatment:**

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**1. Dizziness**

LAB: THYROID PANEL WITH TSH (7444) (Collection Date & Time - 07/29/2025 04:21 PM)

	<u>Value</u>	<u>Reference Range</u>
T3 UPTAKE	33	22-35 - %
T4 (THYROXINE), TOTAL	6.4	4.9-10.5 - mcg/dL
FREE T4 INDEX (T7)	2.1	1.4-3.8 -
TSH	0.78	0.40-4.50 - mIU/L

LAB: LIPID PANEL WITH REFLEX TO DIRECT LDL (14852) (Collection Date & Time - 07/29/2025 04:21 PM)

	<u>Value</u>		<u>Reference Range</u>
TRIGLYCERIDES	113		<150 - mg/dL
<b>CHOLESTEROL, TOTAL</b>	<b>251</b>	<b>H</b>	<b>&lt;200 - mg/dL</b>
HDL CHOLESTEROL	55		> OR = 40 - mg/dL
<b>LDL-CHOLESTEROL</b>	<b>172</b>	<b>H</b>	<b>- mg/dL (calc)</b>
CHOL/HDLRATIO	4.6		<5.0 - (calc)
<b>NON HDL CHOLESTEROL</b>	<b>196</b>	<b>H</b>	<b>&lt;130 - mg/dL (calc)</b>

LAB: COMPREHENSIVE METABOLIC PANEL (10231) (Collection Date & Time - 07/29/2025 04:21 PM)

	<u>Value</u>	<u>Reference Range</u>
GLUCOSE	93	65-99 - mg/dL
UREA NITROGEN (BUN)	10	7-25 - mg/dL
CREATININE	0.82	0.60-1.26 - mg/dL
BUN/CREATININE RATIO	SEE NOTE:	6-22 - (calc)
SODIUM	141	135-146 - mmol/L
POTASSIUM	4.5	3.5-5.3 - mmol/L
CHLORIDE	104	98-110 - mmol/L
CARBON DIOXIDE	30	20-32 - mmol/L
CALCIUM	9.2	8.6-10.3 - mg/dL
PROTEIN, TOTAL	7.2	6.1-8.1 - g/dL
ALBUMIN	4.6	3.6-5.1 - g/dL
GLOBULIN	2.6	1.9-3.7 - g/dL (calc)
ALBUMIN/GLOBULIN RATIO	1.8	1.0-2.5 - (calc)
BILIRUBIN, TOTAL	0.6	0.2-1.2 - mg/dL
<b>ALKALINE PHOSPHATASE</b>	<b>141</b>	<b>H</b> <b>36-130 - U/L</b>

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AST	14	10-40 - U/L
ALT	20	9-46 - U/L
EGFR	115	> OR = 60 - mL/min/1.73m <sup>2</sup>

LAB: CBC (H/H, RBC, INDICES, WBC, PLT) (1759) (Collection Date & Time - 07/29/2025 04:21 PM)

	<u>Value</u>	<u>Reference Range</u>
WHITE BLOOD CELL COUNT	8.9	3.8-10.8 - Thousand/uL
RED BLOOD CELL COUNT	5.10	4.20-5.80 - Million/uL
HEMOGLOBIN	14.3	13.2-17.1 - g/dL
HEMATOCRIT	44.7	38.5-50.0 - %
MCV	87.6	80.0-100.0 - fL
MCH	28.0	27.0-33.0 - pg
MCHC	32.0	32.0-36.0 - g/dL
RDW	14.3	11.0-15.0 - %
PLATELET COUNT	334	140-400 - Thousand/uL
MPV	10.9	7.5-12.5 - fL

LAB: LYME DISEASE AB W/REFL TO BLOT (IGG, IGM) (6646) (Collection Date & Time - 07/29/2025 04:21 PM)

	<u>Value</u>	<u>Reference Range</u>
LYME AB SCREEN	<0.90	- index

LAB: HEMOGLOBIN A1c (496) (Collection Date & Time - 07/29/2025 04:21 PM)

	<u>Value</u>	<u>Reference Range</u>
HEMOGLOBIN A1c	5.6	<5.7 - %

LAB: TESTOSTERONE, TOTAL, MALES (ADULT), IA (873) (Collection Date & Time - 07/29/2025 04:21 PM)

	<u>Value</u>	<u>Reference Range</u>
TESTOSTERONE, TOTAL,	657	250-827 - ng/dL

LAB: VITAMIN D,25-OH,TOTAL,IA (17306) (Collection Date & Time - 07/29/2025 04:21 PM)

	<u>Value</u>		<u>Reference Range</u>
<b>VITAMIN D,25-OH,TOTAL,IA</b>	<b>16</b>	<b>L</b>	<b>30-100 - ng/mL</b>

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Imaging: Ultrasound : Carotid Doppler Bilateral

**2. Vitamin D deficiency, unspecified**

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<b>CHOLESTEROL, TOTAL</b>	<b>251</b>	<b>H</b>	<b>&lt;200 - mg/dL</b>
HDL CHOLESTEROL	55		> OR = 40 - mg/dL
<b>LDL-CHOLESTEROL</b>	<b>172</b>	<b>H</b>	<b>- mg/dL (calc)</b>
CHOL/HDLC RATIO	4.6		<5.0 - (calc)
<b>NON HDL CHOLESTEROL</b>	<b>196</b>	<b>H</b>	<b>&lt;130 - mg/dL (calc)</b>

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BUN/CREATININE RATIO	SEE NOTE:	6-22 - (calc)
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PROTEIN, TOTAL	7.2	6.1-8.1 - g/dL
ALBUMIN	4.6	3.6-5.1 - g/dL
GLOBULIN	2.6	1.9-3.7 - g/dL (calc)
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BILIRUBIN, TOTAL	0.6	0.2-1.2 - mg/dL
<b>ALKALINE PHOSPHATASE</b>	<b>141</b> <b>H</b>	<b>36-130 - U/L</b>
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MCH	28.0	27.0-33.0 - pg
MCHC	32.0	32.0-36.0 - g/dL
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**VITAMIN D,25-OH,TOTAL,IA 16 L 30-100 - ng/mL**

**3. Annual physical exam**

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<b>LDL-CHOLESTEROL</b>	<b>172</b>	<b>H</b>	<b>- mg/dL (calc)</b>
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CREATININE	0.82	0.60-1.26 - mg/dL
BUN/CREATININE RATIO	SEE NOTE:	6-22 - (calc)
SODIUM	141	135-146 - mmol/L
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CHLORIDE	104	98-110 - mmol/L
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BILIRUBIN, TOTAL	0.6	0.2-1.2 - mg/dL

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<b>ALKALINE PHOSPHATASE</b>	<b>141</b>	<b>H</b>	<b>36-130 - U/L</b>
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HEMOGLOBIN A1c	5.6	<5.7 - %

LAB: TESTOSTERONE, TOTAL, MALES (ADULT), IA (873) (Collection Date & Time - 07/29/2025 04:21 PM)

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LAB: VITAMIN D,25-OH,TOTAL,IA (17306) (Collection Date & Time - 07/29/2025 04:21 PM)

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**4. Encounter for screening for other metabolic disorders**

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	<u>Value</u>	<u>Reference Range</u>
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**5. Lyme disease, unspecified**

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<b>NON HDL CHOLESTEROL</b>	<b>196</b>	<b>H</b>	<b>&lt;130 - mg/dL (calc)</b>

LAB: COMPREHENSIVE METABOLIC PANEL (10231) (Collection Date & Time - 07/29/2025 04:21 PM)

	<u>Value</u>	<u>Reference Range</u>
GLUCOSE	93	65-99 - mg/dL
UREA NITROGEN (BUN)	10	7-25 - mg/dL
CREATININE	0.82	0.60-1.26 - mg/dL
BUN/CREATININE RATIO	SEE NOTE:	6-22 - (calc)
SODIUM	141	135-146 - mmol/L
POTASSIUM	4.5	3.5-5.3 - mmol/L
CHLORIDE	104	98-110 - mmol/L
CARBON DIOXIDE	30	20-32 - mmol/L
CALCIUM	9.2	8.6-10.3 - mg/dL
PROTEIN, TOTAL	7.2	6.1-8.1 - g/dL
ALBUMIN	4.6	3.6-5.1 - g/dL
GLOBULIN	2.6	1.9-3.7 - g/dL (calc)
ALBUMIN/GLOBULIN RATIO	1.8	1.0-2.5 - (calc)
BILIRUBIN, TOTAL	0.6	0.2-1.2 - mg/dL
<b>ALKALINE PHOSPHATASE</b>	<b>141</b>	<b>H 36-130 - U/L</b>

RIVERA, Ervin DOB: 10/26/1986 (38 yo M) Acc  
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AST	14	10-40 - U/L
ALT	20	9-46 - U/L
EGFR	115	> OR = 60 - mL/min/1.73m <sup>2</sup>

LAB: CBC (H/H, RBC, INDICES, WBC, PLT) (1759) (Collection Date & Time - 07/29/2025 04:21 PM)

	<u>Value</u>	<u>Reference Range</u>
WHITE BLOOD CELL COUNT	8.9	3.8-10.8 - Thousand/uL
RED BLOOD CELL COUNT	5.10	4.20-5.80 - Million/uL
HEMOGLOBIN	14.3	13.2-17.1 - g/dL
HEMATOCRIT	44.7	38.5-50.0 - %
MCV	87.6	80.0-100.0 - fL
MCH	28.0	27.0-33.0 - pg
MCHC	32.0	32.0-36.0 - g/dL
RDW	14.3	11.0-15.0 - %
PLATELET COUNT	334	140-400 - Thousand/uL
MPV	10.9	7.5-12.5 - fL

LAB: LYME DISEASE AB W/REFL TO BLOT (IGG, IGM) (6646) (Collection Date & Time - 07/29/2025 04:21 PM)

	<u>Value</u>	<u>Reference Range</u>
LYME AB SCREEN	<0.90	- index

LAB: HEMOGLOBIN A1c (496) (Collection Date & Time - 07/29/2025 04:21 PM)

	<u>Value</u>	<u>Reference Range</u>
HEMOGLOBIN A1c	5.6	<5.7 - %

LAB: TESTOSTERONE, TOTAL, MALES (ADULT), IA (873) (Collection Date & Time - 07/29/2025 04:21 PM)

	<u>Value</u>	<u>Reference Range</u>
TESTOSTERONE, TOTAL,	657	250-827 - ng/dL

LAB: VITAMIN D,25-OH,TOTAL,IA (17306) (Collection Date & Time - 07/29/2025 04:21 PM)

	<u>Value</u>		<u>Reference Range</u>
<b>VITAMIN D,25-OH,TOTAL,IA</b>	<b>16</b>	<b>L</b>	<b>30-100 - ng/mL</b>

RIVERA, Ervin DOB: 10/26/1986 (38 yo M) Acc  
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**6. Chest discomfort**

Imaging: Echocardiogram

Imaging: Electrocardiogram (EKG)

**7. Abdominal pain, unspecified abdominal location**

Imaging: Sleep Study

**8. Pain in unspecified hand**

Imaging: ABI/PVR

**9. Others**

Notes:

Today, due to his chest discomfort and heartburn, an EKG and echo will be performed. Due to his dizziness from standing to sitting, a carotid Doppler will also be performed, which revealed mild plaque. Due to his discomfort in his hands, an ABI/PVR will be performed. Due to his discomfort and decreased pedal pulses, venous reflux will be performed, which revealed no evidence of DVT but was positive for reflux. A bilateral arterial will be done at his next visit due to his ABI/PVR, which revealed RLE 0.24 and LLE 1.23. Preliminary blood work including CBC, CMP, vitamin D, A1c, thyroid, testosterone, Lyme, and H. pylori will be obtained at today's visit, which he tolerated well. We will also give him a referral for a sleep study and a gastroenterologist referral due to his stomach discomfort. He currently states he has a cardiologist, Dr. Alabre Marjorie, but he has not seen her in over a year, and he still has not decided if he will follow up with her or stay with Epic. A heart-healthy diet and healthy lifestyle were encouraged and endorsed. We will see him back in one week or sooner to review all results. Patient agrees to the plan of care.

Time Spent: Total time spent 110 minutes in face-to-face conversation, examination, reviewing records, discussing treatment options and procedures, pathophysiology, and anatomy. Diet and lifestyle modifications were discussed in great detail. Images were personally reviewed by me in front of the patient and/or family member and explained on our graphic diagram. Treatment options, risks, benefits and alternative treatments discussed with the patient in detail. All questions and concerns answered.

Clinical Notes: Scribed by Sushil Rai under the supervision of Dr. Rishi Bajaj and Kaila Disciglio, FNP

**Labs:**

Lab: HELICOBACTER PYLORI, UREA BREATH TEST (14839) (Collection Date & Time - 07/29/2025 04:21 PM)

	<u>Value</u>	<u>Reference Range</u>
HELICOBACTER PYLORI,	NOT DETECTED	NOT DETECTED -

eclinicalworks, support 07/30/2025 01:05:10 : This order was created by the Interface.

**Procedure Codes:** G2211 Complex e/m visit add on, 99417 PROLNG OFF/OP E/M EA 15 MIN

**Follow Up:** 1 Week

**Billing Information:**

**Visit Code:**

99205 Office Visit, New Pt., Level 5.

**Procedure Codes:**

G2211 Complex e/m visit add on.

99417 PROLNG OFF/OP E/M EA 15 MIN.

RIVERA, Ervin **DOB:** 10/26/1986 (38 yo M) **Acc**  
**No.** 18243 **DOS:** 07/29/2025

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**Provider:** Rishi Bajaj, MD

**Date:** 07/29/2025