

DAMIAN FAMILY CARE CENTERS, INC.



THIRD AVE FAMILY HEALTH CENTER

2604 THIRD AVE., BRONX, NY 10454

PHONE: (718)292-0100

FAX: (718)684-8489

Fax

То:	elinda ·	madelaine	From:	Islam	n Alir	n.I
Fax: 929-333-7950			Pages: Including cover sheet			
Phone:			Date:	11-20	-2019	
Re:			cc:	-		
□ Urgent	☐ For Review	☐ Please Comment	□ P	lease Reply	☐ Please Recyc	le
Comments:	Goss	maritza	7			
	٠.					

ATTENTION: The pages compromising the facsimile transmistion contain confidential information from DAMIAN FAMILY CARE CENTERS, INC. This information is intended solely for the use by the individual entity named as the recipient hereof. If you are not the intended recipient, be aware that any disclosure, copying, distribution, or use of the contents of this transmission is prohibited. If you have received this transmission inn error, please notify us by telephone immediately so we may arrange to retrieve this transmission at no cost to you.



GOSS, MARITZA

49 Y old Female, DOB: 02/19/1970 Account Number: 110635 409 E 120TH ST, APT 3N, NY, NY-10035-3679

Home: 347-984-3283

Damian Family Care Centers, Inc. Guarantor: GOSS, MARITZA Insurance: MEDICASE USS

NY Payer ID: 12M35

Referring: Ali Islam

Appointment Facility: Third Ave Family Health Center

11/08/2019

Progress Note: Ali Islam, MD

Current Wedications

Taking

- Movantik 25 MG Tablet 1 tablet in the morning Orally Once a day PRN
- Neurontin 400 MG Capsule 1 capsule Orally Two times a day
- Flexeril 5 MG Tablet 1 tablet as needed Orally BID PRN
- Oxycodone HCl 10 MG Tablet 1 tablet as needed Orally every 12 hrs PRN Maximum 2 a day
- Ålbuterol Sulfate (2.5 MG/3ML) 0.083%
 Nebulization Solution 3 ml Inhalation Three times a day
- CompAir Nebulizer 1 Miscellaneous as directed inhalation q 4-6 hours as needed
- Simvastatin 10 MG Tablet 1 tablet in the evening Orally Once a day
- Iron (Ferrous Gluconate) 325 MG Tablet as directed Orally bid
- Montelukast Sodium 10 MG Tablet 1 tablet in the evening Orally Once a day
- Ventolin HFA 90 MCG/ACT Aerosol
 Solution 2 puffs as needed Inhalation every 6 hrs
- Vitamin C 500 MG Tablet Chewable 1 tablet Orally bid
- Omeprazole 40 MG Capsule Delayed Release 1 capsule Orally Once a day
- Senna 8.6 MG Tablet 2 tablets at bedtime as needed Orally Once a day, stop date 11/10/2019

Not-Taking/PRN

- Lisinopril 5 MG Tablet 1 tablet Orally Once a day
- Crestor 40 MG Tablet 1 tablet Orally Once a day
- Medication List reviewed and reconciled with the patient

Past Medical History

Prediabetes. Asthma. Hyperlipidemia. Former smoker. left renal Cyst.

herniated lumbar disc-Lumbar disc disease see MRI lumbosacral scanned to pt

Reason for Appointment

1. PreOp physical

History of Present Illness

Health Maintenance:

Pt presents for PreOp clearance:

- 1. Elevated AST
- 2. Elevated INR: 1.3
- 3. HOLD Hmg CoA inhibitor.

Vital Signs

Ht/ length 66, Wt 184.5, Wt Change -1.5 lb, BMI 29.78, Temp 97.6, HR 90, RR 18, BP L Arm:110/72, Oxygen sat % 98, Pain Scale 7/10.

Physical Examination

GENERAL:

General Appearance: well-developed, well-hydrated, well-nourished, no acute distress.

Hygiene: good.

Mental Status: alert and oriented X3.

Cognitive-Perception ability to understand normal.

CHEST/LUNGS:

Shape and expansion: normal shape w/o tenderness, normal diaphragmatic excursion.

Respiratory effort no distress.

Breath sounds: clear bilaterally, no adventitious sounds.

HEART

PMI: fifth intercostal space, mid-clavicular line.

Rate: normal. Rhythm: regular.

Heart sounds: normal S1&S2. Murmurs: no murmurs heard.

Assessments

- 1. Pre-operative clearance Zo1.818 (Primary)
- 2. HTN (hypertension) I10
- 3. High cholesterol E78.0
- 4. GERD (gastroesophageal reflux disease) K21.9

Treatment

Patient: GOSS, MARITZA DOB: 02/19/1970 Progress Note: Ali Islam, MD 11/08/2019
Note generated by eClinicalWorks EMR/PM Software (www eClinicalWorks com)

https://nydfccapp.ecwcloud.com/mobiledoc/jsp/catalog/xml/printChartOptions.jsp?encou... 11/20/2019

11/20/19 13:38:18 Page 002/007



Distinguished Diagnostic Imaging, P.C.

2598 Third Ave Bronx, NY, 10434

Tel: 718.828.6800 Fax: 718.828.6586

Examination Report

To:

ALI ISLAM 2604 3RD AVE **BRONX, NY 10454**

Patient Name: GOSS, MARTIZA

DOB: 02/19/1970

Gender: F

Exam Date:11/07/2019 10:00 AM

Fax#: (718)684-8485

Exam#: 1271953 - XR CHEST - 2 VIEW

INDICATION: Pulmonary evaluation. Preoperative

COMPARISON: This examination is compared to prior chest x-ray of 8/30/18

TECHNIQUE: PA and left lateral.

FINDINGS: There is no evidence of infiltration or consolidation in either lung field. Both costophrenic angles are sharp. Trachea is midline. Mediastinal contour and cardiac silhouettes are within normal limits. The osseous structures are intact. The soft tissues are unremarkable.

IMPRESSION:

There is no evidence of acute or chronic pulmonary disease.

Electronically Signed by: EARL KABNICK M.D. on 11/07/2019 11:00 AM

page 1 of 1

GOSS, MARITZA, F, 02/19/1970

Third Ave Family Health Center 2604 3RD AVE , BRONX, NY 10454-1199 718-292-0100

347-984-3283 MRN: 0000093159

FINAL RESULT

Accession ID. 31528603620 Lab Ref ID: 2564673

Order Date 11/08/2019 Result Recd: 11/12/2019 08:20:11

Coll Date 11/11/2019 10:16:00 Report: 11/12/2019 08:05:00

Requesting Physician: Islam, Ali Ordering Physician: Islam, Ali

PT/PTT/INR [Labcorp]

NAME VALUE REFERENCE RANGE LAB
F INR 1.0 0.8-1.2 RN

- Reference interval is for non-anticoagulated patients.

- .

- Suggested INR therapeutic range for Vitamin K
- antagonist therapy:
- Standard Dose (moderate intensity
- therapeutic range): 2.0 3.0
- Higher intensity therapeutic range 2.5 3.5

 F Prothrombin Time
 10.4
 9.1-12.0 (sec)
 RN

 F aPTT
 28
 24-33 (sec)
 RN

- This test has not been validated for monitoring unfractionated heparin
- therapy, aPTT-based therapeutic ranges for unfractionated heparin
- therapy have not been established. For general guidelines on
- Heparin monitoring, refer to the LabCorp Directory of Services.

 PERFORMING LAB: LabCorp Raritan, 69 First Avenue, Raritan, NJ 088691800, Phone 8006315250, Director MDReyes

GOSS MARITZA . F. 02/19/1970

Accession ID: 31528603620

GOSS, MARITZA, F, 02/19/1970

347-984-3283 MRN: 0000093159

Third Ave Family Health Center 2604 3RD AVE , BRONX, NY 10454-1199 718-292-0100

FINAL RESULT

19549		
	Accession ID. 31528603620	Lab Ref ID 2564673
	Order Date 11/08/2019	Result Recd 11/12/2019 08:20:10
	Coll Date: 11/11/2019 10:16:00	Report: 11/12/2019 08:05:00
	Requesting Physician Islam, Ali	Ordering Physician: Islam, Ali

Liver Function Tests [Labcorp]

NAME	VALUE	REFERENCE RANGE	LAB
F Protein, Total	6.8	6.0-8.5 (g/dL)	RN
F Albumin	4.6	3.5-5.5 (g/dL)	RN
F Bilirubin, Total	0.4	0.0-1.2 (mg/dL)	RN
F Bilirubin, Direct	0.09	0.00-0.40 (mg/dL)	RN
F Alkaline Phosphatase	95	39-117 (IU/L)	RN
F AST (SGOT)	17	0-40 (IU/L)	RN
F ALT (SGPT)	22	0-32 (IU/L)	RN

PERFORMING LAB: LabCorp Raritan, 69 First Avenue, Raritan, NJ 088691800, Phone - 8006315250, Director - MDReyes

GOSS MARITZA F 02/19/1970

Accession ID 31528603620

https://nydfccapp.ecwcloud.com/mobiledoc/jsp/catalog/xml/hl7/getLabResult.jsp?reportl... 11/20/201

11/20/19 13:40:41 Page 007/007

