



Gloria Bailey (DOB 11/20/1956)

Date of Encounter: 06/25/2025

History of Present Illness

The patient is a 68 year old female presenting to discuss diagnostic procedure results. The patient had echocardiography. The diagnostic test was performed on - Date: (06/17/2025 labs done 06/20/2025). She describes dyspnea on minimal exertion and occasional orthopnea but no chest pain, palpitations, or syncope. She does have occasional orthostatic pedal edema.

Additional reasons for visit:

Transition into care is described as the following:
To establish care

Allergies

Penicillins

Past Medical History

Shortness of breath on exertion

Dyslipidemia

Essential hypertension

Diabetes mellitus treated with oral medication

ASHD (arteriosclerotic heart disease); She reportedly had atherosclerotic vascular disease by imaging test a few years ago

Morbid obesity

Family History

None (03/17/2025)

Social History

No alcohol use

No tobacco use: Light tobacco smoker; quit 2007

No drug use

Caffeine use: Coffee, Carbonated beverages

Marital status: Divorced; 1 kid

Exercise: Inactive

Current work status: Retired, Part-time

Medication History

simvastatin (20mg tablet 1 oral daily, Taken starting 03/17/2025) Active - Hx Entry.
losartan (25mg tablet, 1 oral daily, Taken starting 03/17/2025) Active.
chlorthalidone (25mg tablet, 1 oral daily, Taken starting 03/17/2025) Active.
metFORMIN (500mg tablet, 1 oral daily, Taken starting 03/17/2025) Active.
aspirin (81mg tablet, delayed, 1 oral daily, Taken starting 03/17/2025) Active.
famotidine (20mg tablet, 1 oral daily) Active.
loratadine (10mg tablet, 1 oral as needed) Active.
ibuprofen (800mg tablet, 1 oral as needed) Active.
ibuprofen (400mg tablet, 1 oral as needed) Active.
trospium (60mg Capsule, ER 24 , 1 oral daily) Active.
fluticasone propionate (50mcg/actuat spray, suspensi, 2 sprays intranasal as needed) Active.
albuterol sulfate (90mcg/actuat HFA Aerosol Inh, 2 puff inhalation as needed) Active.
Medications Reconciled.

Past Surgical

Cesarean Delivery; 1

Review of Systems

Skin Not Present- Bruising, Itching and Rash.

HEENT Present- **Ringing in the Ears** and **Wears glasses/contact lenses**. Not Present- Blurred Vision, Dentures, Headache, Hearing Loss, Loose teeth, Nasal polyps, Nose Bleed, Permanent blindness in either eye, Sore Throat and Vertigo.

Neck Not Present- Neck Pain and Neck Stiffness.

Respiratory Present- **Pneumonia**. Not Present- Bloody sputum, Cough, Decreased Exercise Tolerance, Difficulty Breathing, Hemoptysis, Recent bronchitis or chest cold, Sputum Production and Wheezing.

Cardiovascular Present- **Chest Pain**, Paroxysmal Nocturnal Dyspnea and **Shortness of breath with exertion**. Not Present- Awakening at night gasping for air or short of breath, Calf Cramps, Claudications, Difficulty Breathing Lying Down, Difficulty Breathing On Exertion, Discoloration of feet and legs, Fainting / Blacking Out, Leg Cramps, Palpitations, Require more than one pillow at night to breathe, Shortness of Breath and Swelling of Extremities.

Gastrointestinal Not Present- Abdominal Pain, Bloody Stool, Constipation, Diarrhea, Dysphagia, Heartburn, Indigestion, Nausea and Vomiting.

Female Genitourinary Present- **Bladder infection during past year** and **Multiple trips to bathroom to urinate at night**.

Musculoskeletal Present- **Arthritis or other joint disease**. Not Present- Back Pain, Joint Pain, Joint Swelling, Muscle Atrophy and Muscle Pain.

Neurological Present- **Depression**. Not Present- Decreased Memory, Difficulty Speaking, Dizziness, Epilepsy or seizures, Fainting, Headaches, Incontinence Urine, Loss of Consciousness, Migraines, Numbness, Paresthesias, Sudden visual disturbances in either eye, Temporary blindness in either eye, Temporary speech loss or difficulty talking, Tremor, Trouble walking, Unsteadiness and Weakness or paralysis of one side of the body.

Endocrine Not Present- Appetite Changes, Excessive Thirst, Excessive Urination and Recent weight gain or loss(>10 lbs.).

Hematology Not Present- Abnormal Bleeding, Anemia, Easy Bruising, Excessive bleeding, Nose Bleed and Recent fever.

Vitals

06/25/2025 09:47 AM

Weight: 267 lb **Height:** 62 in

Body Surface Area: 2.16 m² **Body Mass Index:** 48.83 kg/m²

Pulse: 109 (Regular) **P. OX:** 94% (Room air)

BP: 118/90 Manual (Sitting, Left Arm, Standard)

Physical Exam

The physical exam findings are as follows:

General

Mental Status - Alert.

General Appearance - Cooperative, Not in acute distress, Not Sickly.

Orientation - Oriented X4.

Build & Nutrition - Well nourished and Well developed.

Integumentary

Global Assessment

Examination of related systems reveals - Examination of digits and nails reveals no abnormalities, no digital clubbing, cyanosis or petechiae.

General Characteristics

Color - normal coloration of skin. Skin Moisture - normal skin moisture.

Head and Neck

Neck

Carotid Arteries - Bilateral - normal upstroke and runoff.

Thyroid

Gland Characteristics - normal size and consistency.

Eye

Fundi - Bilateral - Normal.

Sclera/Conjunctiva - Bilateral - Normal.

ENMT

Mouth and Throat

Oral Cavity/Oropharynx - Gingiva - no inflammation present.

Chest and Lung Exam

Inspection

Shape - Normal. Accessory muscles - No use of accessory muscles in breathing.

Auscultation

Breath sounds - Normal. Adventitious sounds - No Adventitious sounds.

Cardiovascular

Inspection

BP In 2+ Extremities - Not Indicated.

Palpation/Percussion

Point of Maximal Impulse - Normal.

Auscultation

Rhythm - Regular. Heart Sounds - S1 WNL and S2 WNL, No S3, No S4. Murmurs & Other Heart Sounds -

Auscultation of the heart reveals - No Murmurs.

Abdomen

Palpation/Percussion

Palpation and Percussion of the abdomen reveal - Non Tender. Liver - Other Characteristics - No

Hepatomegaly. Spleen - Other Characteristics - No Splenomegaly.

Auscultation

Auscultation of the abdomen reveals - Bowel sounds normal and No Abdominal bruits.

Rectal

Anorectal Exam

Residue - Occult blood testing is not indicated for this patient.

Peripheral Vascular

Lower Extremity

Palpation - Bilateral - Femoral pulse - Normal - Bilateral. Dorsalis pedis pulse - Bilateral - Normal - Bilateral.

Edema - Bilateral - No edema - Bilateral.

Neurologic

Motor - Normal.

Musculoskeletal

Global Assessment

Gait and Station - normal gait and station and normal posture. Head and Neck - normal strength and tone, no laxity. Spine, Ribs and Pelvis - no deformities, malalignments, masses or tenderness, no known fractures.

Right Lower Extremity - normal strength and tone. Left Lower Extremity - normal strength and tone.

Assessment & Plan

Aortic stenosis, severe

Problem Story: Echocardiogram on 6/17/2025 showed LVEF of 60 to 65%, moderate concentric left ventricular hypertrophy, severe aortic stenosis with a valve area of 0.9 cm² and mild aortic regurgitation.

Today's Impression: In view of her dyspnea on exertion and some orthopnea which is progressive, she likely has symptomatic severe aortic stenosis. I have therefore recommended CT TAVR and right and left heart catheterization to plan for aortic valve replacement. She would likely be candidate for TAVR based on the results. I have explained to her the procedure, risks, benefits, and alternatives including a small risk of bleeding, infection, damage to the blood vessels, nerves, heart, brain, etc. and she is willing to proceed.

- BNP (83880); Routine (Diagnosis: CHF)
- COMPUTED TOMOGRAPHY ANGIOGRAPHY TRIPLE PHASE STUDY FOR PLANNING OF transcatheter AORTIC VALVE IMPLANTATION (TAVI) (76497) ; Routine ()
- Schedule - Left and Right Heart Cath
- Follow up in 3 months or as needed

ASHD (arteriosclerotic heart disease)

Problem Story: She reportedly had atherosclerotic vascular disease by imaging test a few years ago

Today's Impression: She should continue aspirin and risk factor modification.

- CHEM 7 (80048); Routine ()
- CBC & PLATELETS (AUTO) (85027); Routine ()
- Continued aspirin 81 mg tablet, delayed release, 1 tablet daily, #90, 90 days starting 06/25/2025, Ref. x3.

Dyslipidemia

Problem Story: LDL cholesterol is 140 on 6/20/2025.

Today's Impression: I have switched her from simvastatin to rosuvastatin to try to get her LDL less than 70.

- LIPID PANEL (80061); Routine ()
- LIVER PANEL (80076); Routine ()
- TSH (THYROID STIMULATING HORMONE) (84443); Routine ()
- FREE T4 (84439); Routine ()
- HGB A1C (83036); Routine ()
- HSCRP (86140); Routine ()
- Started rosuvastatin 20 mg tablet, 1 (one) tablet daily, #90, 90 days starting 06/25/2025, Ref. x3.

Essential hypertension

- Continued chlorthalidone 25 mg tablet, 1 tablet daily, #90, 90 days starting 06/25/2025, Ref. x3.
- Continued losartan 25 mg tablet, 1 tablet daily, #90, 90 days starting 06/25/2025, Ref. x3.

Diabetes mellitus treated with oral medication

- Continued metFORMIN 500 mg tablet, 1 tablet daily, #90, 90 days starting 06/25/2025, Ref. x3.

Morbid obesity

Today's Impression: In view of her cardiovascular comorbidities I have recommended GLP-1 agonist therapy.

- Continued Wegovy 0.25 mg/0.5 mL subcutaneous pen injector, 0.25 mg weekly, 12 Applicator, 90 days starting 06/25/2025, Ref. x3.

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Sanjaya Khanal, MD

Electronically Signed