



Alfred L. Palladino (DOB 06/18/1944)

Date of Encounter: 05/12/2025

History of Present Illness

The patient is a 80 year old male who presents to discuss laboratory test results. The blood was drawn on: Date: (04/30/2025). Patient generally feels well with no new symptoms since last visit. Patient specifically denies chest pain, shortness of breath, orthopnea, edema, palpitations, or lightheadedness. He has had bleeding from minor injury requiring ER visit few times. He would like to get off the anticoagulation because he is also unsteady on his gait. He now wants to proceed with a Watchman device placement.

Additional reasons for visit:

Transition into care is described as the following:
Note for "Transition into care": to continue cardiac care.

Allergies

No Known Drug Allergies 09/13/2021

Past Medical History

ASHD (arteriosclerotic heart disease); he had 5 vessel coronary artery bypass surgery more than 20 years ago. Echocardiogram on 7/23/2021, reported LVEF of 40-45%, mild mitral regurgitation. MVI on 10/15/2021 shows a large inferolateral scar with no reversibility and an LVEF of 49%.

Permanent atrial fibrillation; he was detected to have atrial fibrillation when he was hospitalized in July 2021.

Essential hypertension

Dyslipidemia

Venous insufficiency

Hypothyroidism, adult

Heart failure, diastolic, chronic; Echocardiogram 11/6/2023 shows LVEF of 60% with mild left ventricular hypertrophy and LV relaxation abnormality.

Family History

None (09/13/2021)

Social History

No tobacco use: Former smoker, Has been smoking for 10 years; Quit: 1975, 1 pack of cigarettes weekly.

No drug use

No alcohol use

Marital status: Married

Current work status: Retired

Caffeine use: Carbonated beverages

Exercise: Inactive

Medication History

atorvastatin (40mg tablet, 2 oral at bedtime, Taken starting 11/11/2024) Active.
levothyroxine (137mcg tablet, 1 oral daily, Taken starting 11/11/2024) Active.
aspirin (81mg tablet, delayed 1 oral daily, Taken starting 11/11/2024) Active - Hx Entry.
spironolactone (25mg tablet, 1 (one) oral daily, Taken starting 01/17/2025) Active.
lisinopril (10mg tablet, 1 oral daily, Taken starting 11/11/2024) Active.
furosemide (20mg tablet, 1 oral daily, Taken starting 11/11/2024) Active.
metoprolol succinate (25mg Tablet, Extende, 1 oral daily, Taken starting 11/11/2024) Active.
Eliquis (2.5mg tablet, 1 oral two times daily, Taken starting 01/16/2025) Active.
Farxiga (5mg tablet, 1 (one) oral daily, Taken starting 05/12/2025) Active. (to replace jardiance)
Nitroglycerin (0.4MG Tablet, Subling, 1 Sublingual as directed) Active.
PreserVision AREDS 2+Multi Vit (1 Oral daily) Active.
Calcium Citrate-Mag-Minerals (1 Oral daily) Active. (Cal/Mag/Zinc)
Mature Adult Century (1 Oral daily) Active.
Vitamin C (500mg daily) Active.
Medications Reconciled.

Past Surgical

CABG, WITH TEE (93318)

Review of Systems

General Not Present- Appetite Loss and Fatigue.

HEENT Present- **Wears glasses/contact lenses**.

Respiratory Not Present- Cough, Decreased Exercise Tolerance and Difficulty Breathing.

Cardiovascular Present- **Awakening at night gasping for air or short of breath, Discoloration of feet and legs, Heart Attack, Heart Stent, Hypertension, Irregular Heart Beat, Large, discolored or varicose veins in leg and Swelling of Extremities**. Not Present- Chest Pain, Difficulty Breathing Lying Down, Elevated Blood Pressure, Leg Pain and/or Swelling, Rapid Heart Rate and Shortness of Breath.

Gastrointestinal Present- **Heartburn and Hiatal hernia and/or reflux**. Not Present- Change in Bowel Habits and Rectal Bleeding.

Musculoskeletal Present- **history of broken bones**. Not Present- Calf Pain, Muscle Cramps and Muscle Weakness.

Neurological Not Present- Dizziness, Headaches, Spinning Sensation, Visual Changes and Weakness.

Psychiatric Not Present- Anxiety, Change in Sleep Pattern and Depression.

Endocrine Present- **Thyroid Problems**. Not Present- Cold Intolerance, Hair Changes and Sexual Dysfunction.

Hematology Not Present- Anemia, Nose Bleed and Prolonged Bleeding.

Vitals

05/12/2025 02:00 PM

Weight: 216 lb **Height:** 72 in

Body Surface Area: 2.2 m² **Body Mass Index:** 29.29 kg/m²

Pulse: 87 (Regular) **P. OX:** 97% (Room air)

BP: 128/62 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

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

Inspection - Bilateral - Pigmented - Bilateral and Varicose veins - Bilateral. Palpation - Bilateral - Femoral pulse - Normal - Bilateral. Dorsalis pedis pulse - Bilateral - Normal - Bilateral. Edema - Bilateral - 1+ Pitting 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

Permanent atrial fibrillation

Problem Story: he was detected to have atrial fibrillation when he was hospitalized in July 2021.

Today's Impression: rate is controlled on metoprolol. He is also on Eliquis for anticoagulation. Because of his Recurrent bleeding, propensity to fall and cost consideration he wants to get off Eliquis. I have therefore recommended left atrial appendage closure with a Watchman device. I have described the procedure, risks, benefits, alternatives including a small risk of bleeding, stroke, infection, injury to the blood vessels, heart, lungs etc. and he is willing to proceed.

- INSERTION, WATCHMAN LEFT ATRIAL APPENDAGE CLOSURE DEVICE (33340) ; Routine ()
- Continued metoprolol succinate ER 25 mg tablet, extended release 24 hr, 1 Tablet daily, #90, 90 days starting 05/12/2025, Ref. x3.
- Continued Eliquis 2.5 mg tablet, 1 Tablet two times daily, #40, 20 days starting 05/12/2025, No Refill.
- Follow up in 3 months or as needed

Heart failure, diastolic, chronic

Problem Story: Echocardiogram 11/6/2023 shows LVEF of 60% with mild left ventricular hypertrophy and LV relaxation abnormality.

Today's Impression: BNP was 121 on 12/3/2021. BNP is 91.6 on 4/13/22. He should continue guidelines directed medical therapy. BNP increased from 132 on 10/21/22. BNP was 101 on 4/27/23. BNP was 77 on 10/24/2023. BNP was 154 on 3/19/2024. He might need additional diuretics if it increases further. He is well compensated clinically. I've asked him to continue current medical therapy and followup with me in 6 months.

- CHEM 7 (80048); Routine ()
- BNP (83880); Routine (Diagnosis: CHF)
- Continued spironolactone 25 mg tablet, 1 (one) Tablet daily, #90, 90 days starting 05/12/2025, Ref. x3.
- Continued furosemide 20 mg tablet, 1 Tablet daily, #90, 90 days starting 05/12/2025, Ref. x3.
- Continued Farxiga 5 mg tablet, 1 (one) tablet daily, #90, 90 days starting 05/12/2025, Ref. x3.

ASHD (arteriosclerotic heart disease)

Problem Story: he had 5 vessel coronary artery bypass surgery more than 20 years ago. Echocardiogram on 7/23/2021, reported LVEF of 40-45%, mild mitral regurgitation. MVI on 10/15/2021 shows a large inferolateral scar with no reversibility and an LVEF of 49%.

Today's Impression: continue risk factor modification.

- Continued aspirin 81 mg tablet, delayed release, 1 daily, 05/12/2025, No Refill.

Essential hypertension

Today's Impression: blood pressure is well-controlled.

- Continued lisinopril 10 mg tablet, 1 Tablet daily, #90, 90 days starting 05/12/2025, Ref. x3.

Dyslipidemia

Today's Impression: lipids are well controlled on statin therapy. LDL was 127 on 10/29/2024 but he ran out of his statins I have asked him to go back on them and fill his prescription.

- LIPID PANEL (80061); Routine ()
- LIVER PANEL (80076); Routine ()
- HGB A1C (83036); Routine ()
- Continued atorvastatin 40 mg tablet, 2 Tablet at bedtime, #90, 90 days starting 05/12/2025, Ref. x3.

Venous insufficiency

Hypothyroidism, adult

- Continued levothyroxine 137 mcg tablet, 1 daily, 05/12/2025, No Refill.

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A handwritten signature in blue ink, appearing to read "Sanjaya Khanal", with a horizontal line extending to the right.

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Sanjaya Khanal, MD

Electronically Signed