

General

Mental Status - Alert.

General Appearance - Cooperative.

Build & Nutrition - Well nourished and Well developed.

Integumentary

General Characteristics

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

Head and Neck

Head - normocephalic, atraumatic with no lesions or palpable masses.

Neck

Global Assessment - supple.

Trachea - midline.

Thyroid

Gland Characteristics - normal size and consistency.

Chest and Lung Exam

Inspection

Chest Wall - Normal. Shape - Normal and Symmetric. Movements - Symmetrical. Accessory muscles - No use of accessory muscles in breathing.

Percussion

Quality and Intensity - Percussion normal.

Auscultation

Breath sounds - Decreased - **Both Lung Fields. Adventitious sounds - No Adventitious sounds.**

Cardiovascular

Inspection

Carotid artery - Bilateral - Inspection Normal. Jugular vein - Bilateral - Inspection Normal.

Palpation/Percussion

Examination by palpation and percussion reveals - No Thrills. Point of Maximal Impulse - Normal.

Auscultation

Rhythm - **Irregularly irregular. Heart Sounds - S1 WNL and S2 WNL, No S3. Murmurs & Other Heart Sounds -**

Auscultation of the heart reveals - No Murmurs. Carotid arteries - No Carotid bruit.

Abdomen

Inspection

Inspection of the abdomen reveals - No Hernias.

Palpation/Percussion

Palpation and Percussion of the abdomen reveal - Non Tender, No Rebound tenderness, No Rigidity (guarding) and No Abnormal dullness to percussion.

Auscultation

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

swelling of the abdominal wall and also severe ascites

Peripheral Vascular

Upper Extremity

Palpation - Bilateral - Radial pulse - 2+ - Bilateral.

Lower Extremity

Inspection - Bilateral - Inspection Normal. Palpation - Tenderness - Bilateral - Non Tender. Homan's sign - Bilateral - Negative (normal) - Bilateral. Femoral pulse - Bilateral - 2+ - Bilateral. Dorsalis pedis pulse - Bilateral - 2+ - Bilateral. Edema - Bilateral - **2+ Pitting edema - Bilateral. Note: with severe lymphedema.**

Neurologic

Neurologic evaluation reveals - able to name objects and repeat phrases. Appropriate fund of knowledge and normal coordination.

Mental Status - Normal.

Cranial Nerves - Normal Bilaterally.

Sensory - Normal.

Motor

Strength - 5/5 normal muscle strength - All Muscles.

Meningeal Signs - None.

Neuropsychiatric

Orientation - oriented X3.

The patient's mood and affect are described as - normal.

Associations - intact.

Judgment and Insight - insight is appropriate concerning matters relevant to self.

Assessment & Plan

Tricuspid regurgitation

Today's Impression: David comes back today for a follow-up. He is quite short of breath. He also has significant swelling.

He has wide-open TR. He also has significant RV dysfunction and elevated pulm artery systolic pressures. Some of his TR is due to the elevated PASP but it could also be due to the atrial fibrillation. Will get a TEE done soon. He may be a candidate for a Tri clip.

I told him to come to the ER if the shortness of breath gets worse.

Atrial fibrillation

Problem Story: On Diltiazem. Take 180 mg po qd

Not on OAC after his head bleed and had a surgery

He needs to be on OAC and I will start eliquis at a lower dose since he has fallen once and most likely has liver disease

His CHADS Vasc score is only a 2

Needs to be started on OAC but after the paracentesis

Continue eliquis for now at 2.5 bid. he is good candidate for the WATCHMAN and we will schedule it soon

His CHADS2 Vasc is a 4 and HAS BLED is 3. i will set him for a WATCHMAN Dec 2nd

#24 WATCHMAN. TEE next week and then stop the eliquis. Risks and benefits d/w patient

Today's Impression: TEE was good. He is on aspirin

- Continued diltiazem 120 mg tablet, 1 tablet daily, #90, 90 days starting 06/17/2025, Ref. x3.

(HFrEF) heart failure with preserved ejection fraction