

Signed

CARDIOLOGY PROGRESS NOTE

Patient: XXXXXXXXXXXX

Admitted: 10/31/2019

Author: Michael P Horne, NP

Patient's continuity cardiologist is xxxxxxxxx

Assessment

61yr old female with history of of shortness of breath for over 1 year; TEE showing severe MR, admitted for MVR

1. MVP/severe MR

- Normal LV EF pre/post op , 60%
- s/p MVR 31mm Edwards LifeSciences Perimount Magna Mitral Ease Pericardial bioprosthesis, 10/31/19
- On now low dose midodrine for lower BP, improved

2. HGB from 10.2 to 6.7 after surgery

- 1 unit PRBC given 11/1 with immediate improvement; 10.6 today and has been stable last several days

3. RBBB,new post op

4. -SND, s/p single chamber, atrial lead, PPM, 9/ 2015

5. -CAD, mild, pre op cor angio

- On ASA

Recommendations:

- Rhythm/rate ok, BP better on lower midodrine - suggest near term out patient follow-up to trail d/c midodrine. Patient will check BP at home daily
- Continue all other meds per CV Surgery ; d/c today per CV surgery

Seeing pt today for cardiologist,xxxxxxx

Patient to d/c today, if not, can be seen by xxxxxxxxx, NP tomorrow

Subjective:

Pt indicates feeling "ok" but still some fatigue (improved); no shortness of breath or dizziness. Some pain around CT sites/back; no palpitations. Wants to improve faster than would normally be expected given recent surgery;

Objective:

Vitals:

Vitals:

	11/06/19 0224	11/06/19 0225	11/06/19 0342	11/06/19 0908
BP:		100/62		102/67
Pulse:			87	
Resp:	20			18
Temp:				96.2 °F (35.7 °C)
SpO2:		98%		99%
Weight:				
Height:				

I/O:

Intake/Output Summary (Last 24 hours) at 11/6/2019 0926
 Last data filed at 11/6/2019 0904

	Gross per 24 hour
Intake	350 ml
Output	275 ml
Net	75 ml

EKG: 10/31/19: SR 100, new RBBB qrsd 126

TELE: SR 80-90, BBB

ECHO9/13/19

Summary

* Bileaflet mitral valve thickening and prolapse with severe regurgitation.

Prior 8/12/2019 EF 60-65, bileaflet MVP with severe MR, mild-mod TR, PAP 31 LAE.

CATH: 9/13/19

Conclusions

1. No significant atherosclerotic disease noted in the left main (LM), left anterior descending (LAD), circumflex (LCx), or right coronary artery (RCA). Incidental note of apparent myocardial bridge in the second diagonal, with mild to moderate ectasia of mid vessel.
2. Angiography shows a right coronary dominant system.
3. Small caliber right common femoral artery with no significant obstruction. Hemostasis by manual pressure protocol.

Physical Exam:

GEN: NAD.

Pysch: Alert and oriented x 4

Neck: No JVD present

Pulmonary/Chest: Breath sounds normal posteriorly.

Cardiac: Normal rate, regular rhythm S1,S2 present, no murmur, no rubs, or gallops.

Abdomen: soft, nontender

Extremities: No/trace edema ; +2 bilateral radial pulses; +2 PT/DP pulses;

Medications:

Medications:

Scheduled Meds: aspirin, 81 mg, DAILY WITH BREAKFAST

buPROPion XL, 450 mg, DAILY
 divalproex, 750 mg, BID
 enoxaparin, 40 mg, Once Now
 flu vaccine, 4 yrs +, quad egg free (FLUCELVAX) PF, 0.5 mL syringe, 0.5 mL, ONE TIME (VACCINE)
 furosemide, 40 mg, BID
 midodrine, 2.5 mg, BID
 pantoprazole, 40 mg, DAILY WITH BREAKFAST
 polyethylene glycol 3350, 17 g, DAILY
 potassium chloride, 40 mEq, BID WITH MEALS
 sennosides-docusate sodium (8.6-50 mg/tab), 1 tablet, BID
 warfarin, 4 mg, One Time Today at 1600
 warfarin per physician, 1 each, DAILY at 1600

IV Meds: insulin regular human (HumuLIN R) 150 units in NS 150 mL drip

PRN Meds: acetaminophen, 650 mg, Q4HPRN
 acetaminophen, 650 mg, Q4HPRN
 albuterol-ipratropium (conc: 2.5-0.5 mg/3 mL), 3 mL, Q4HPRN
 sore throat, 1 Lozenge, Q1HPRN
 bisacodyl, 10 mg, Q24H PRN
 calcium carbonate, 1,000 mg, QIDPRN
 guaiFENesin 12 hr, 600 mg, Q12H PRN
 insulin regular human (HumuLIN R) 150 units in NS 150 mL drip, 0.1-20 Units/hr, CONTINUOUS PRN
 LORazepam, 0.25 mg, QHS PRN
 melatonin, 3 mg, QHS PRN
 naloxone, 0.1 mg, PRN
 nitroGLYcerin, 0.4 mg, Q5MIN PRN
 ondansetron, 4 mg, Q6HPRN
 oxyCODONE-acetaminophen (5-325 mg/tab), 1 tablet, Q4HPRN
 Or
 oxyCODONE-acetaminophen (5-325 mg/tab), 2 tablet, Q4HPRN
 prochlorperazine, 5 mg, Q6HPRN
 sodium chloride 0.65 %, 2 Spray, PRN
 0.9 % sodium chloride (flush) injection, 3 mL, PRN
 sodium chloride 0.9% (NS)(FLUSH for intermittent IV), 30-50 mL, PRN
 traMADol, 50 mg, Q4HPRN

Labs:

WBC

Date	Value	Ref Range	Status
11/06/2019	6.54	3.50 - 11.50 10 ³ /uL	Final

RBC

Date	Value	Ref Range	Status
11/06/2019	3.39 (L)	3.80 - 5.40 10 ⁶ /uL	Final

Hemoglobin

Date	Value	Ref Range	Status
11/06/2019	10.6 (L)	12.0 - 16.0 g/dL	Final

HCT

Date	Value	Ref Range	Status
11/06/2019	32.1 (L)	35.0 - 49.0 %	Final

MCV

Date	Value	Ref Range	Status
11/06/2019	95	80 - 102	Final

MCH

Date	Value	Ref Range	Status
11/06/2019	31.3	26.0 - 36.0 pg	Final

MCHC

Date	Value	Ref Range	Status
11/06/2019	33.0	30.0 - 37.0 g/dL	Final

Platelet Count

Date	Value	Ref Range	Status
11/06/2019	135 (L)	150 - 400 10 ³ /uL	Final

RDW Coefficient of Variation

Date	Value	Ref Range	Status
11/06/2019	16.5 (H)	10.0 - 15.52 %	Final

MPV

Date	Value	Ref Range	Status
11/06/2019	11.0	8.6 - 12.3	Final

Lab Results

Component	Value	Date/Time
Troponin I	<0.04	07/22/2014 10:18 AM
Troponin, 4th Generation	<0.015	10/01/2019 11:48 AM
Troponin, 4th Generation	<0.015	06/29/2019 07:04 PM

No components found for: TROPO1

No results found for: ISCTNI

Lab Results

Component	Value	Date/Time
Sodium	137	11/06/2019 02:03 AM
Potassium	4.3	11/06/2019 02:03 AM
Chloride	106	11/06/2019 02:03 AM
CO2	25	11/06/2019 02:03 AM
Anion Gap	6	11/06/2019 02:03 AM
BUN	18	11/06/2019 02:03 AM
Creatinine, Serum or Plasma	0.68	11/06/2019 02:03 AM
Glucose, Serum	105 (H)	11/06/2019 02:03 AM
Calcium	8.8	11/06/2019 02:03 AM

Lab Results

Component	Value	Date/Time
Prothrombin Time	20.2 (H)	11/06/2019 02:03 AM
INR	1.74	11/06/2019 02:03 AM

Lab Results

Component	Value	Date/Time
Albumin, Serum	3.5	10/31/2019 03:53 PM

Alkaline Phosphatase	25 (L)	10/31/2019 03:53 PM
ALT-SGPT	35	10/31/2019 03:53 PM
Bilirubin, Total	1.2 (H)	10/31/2019 03:53 PM
AST-SGOT	73 (H)	10/31/2019 03:53 PM
Total Protein	5.1 (L)	10/31/2019 03:53 PM

30 minutes spent in the care of this patient. > 50% was in direct counseling or management. I have discussed my recommendations with the primary team and/or medicine consult team.

Electronically Signed By: Michael Horne, Cardiology NP

9:26 AM 11/6/2019

(cell 704 287 7825; 730am - 1600pm)