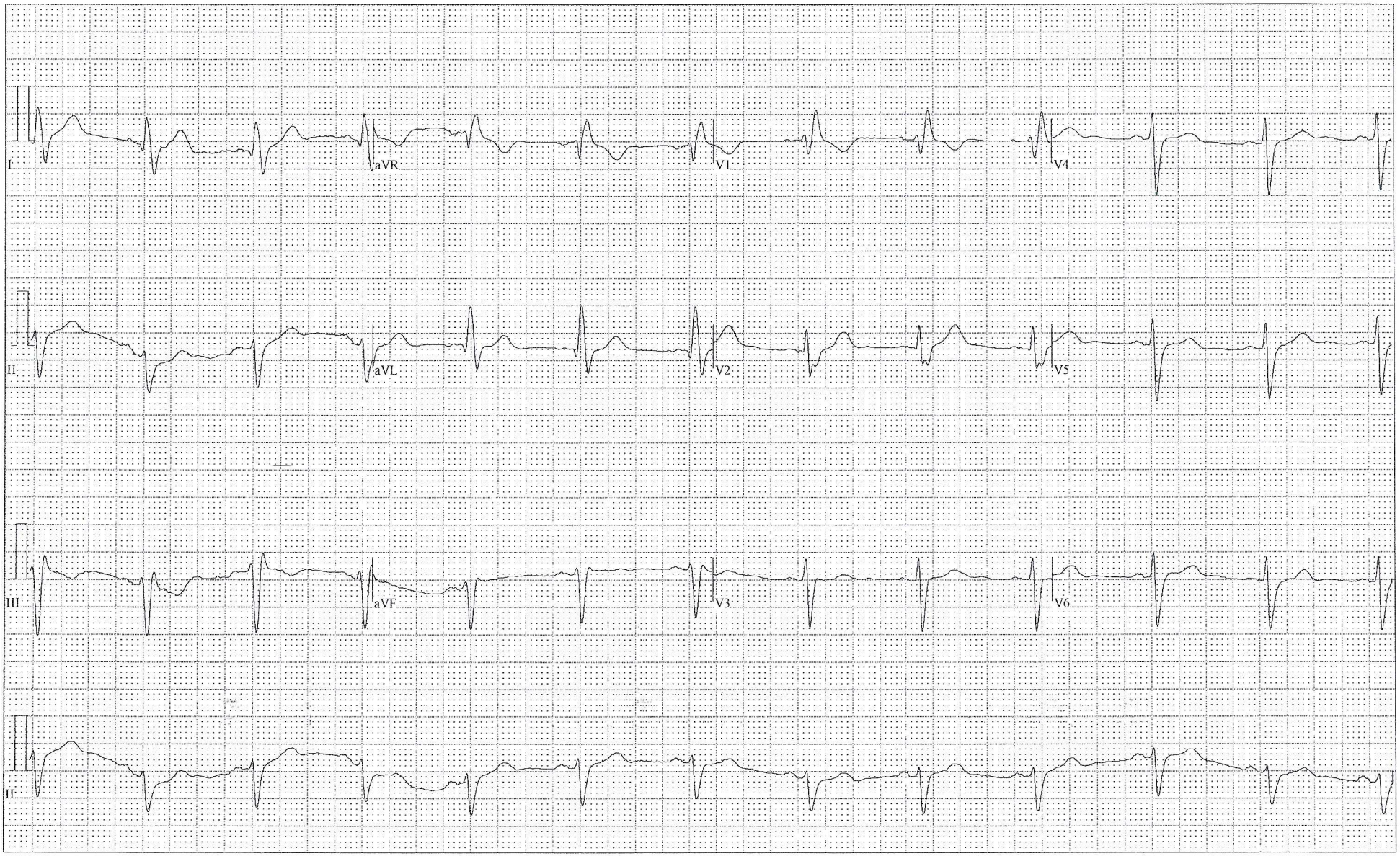
Texas Health Resources

Name:	Bagley Kevin	Req. Physician:			Rate:	72	BPM
ID:	5466234	Technician:	ED		PR:	128	msec
Sex:	Male	History:			QT:	412	msec
BP:		Medication:			QTcH:	433	msec
Weight:	lbs	Date of Report:	10/08/20	14:55:05	QRSD:	144	msec
Height:	inches	Reviewed By:	Dr. Le		P-QRS-T:	54/-89/-1	degree
DOB:	09/24/1958 (62 Years)	Review Date:	10/08/20	14:55:27			
Comments:							

Interpretation:
Sinus Rhythm
-Right bundle branch block with left axis -bifascicular block.

ABNORMAL



Bagley, Kevin

MRN: 5466234

Le, Tu Khac Phan, MD, FACC
Physician
Specialty: Internal Medicine / Cardiovascular Disease.

Progress Notes
Signed

Encounter Date: 10/8/2020

FOLLOW-UP

VISIT DATE: 10/8/2020

RE: Kevin Bagley

Cardiologist: Tu K. Le, M.D., F.A.C.C.

ASSESSMENT/PLAN:

Abnormal ekg:
current ekg with bifascicular block;
Strong FH of coronary artery disease
Tremendous risk factors for coronary artery disease including diabetes also

Lexiscan nuclear stress test with no evidence of ischemia, normal EF.
Echo with normal EF and no significant valvular abnormality.

10/82020
Patient denies chest pain or other ischemic equivalent at this visit
Patient is still not exercising as much
I counseled on moderate exercise for 30 minutes a day and 6 days a week. Also discussed his target HR and calculating target hr as well.

Hypertension:
9/26/2019
Patient's blood pressure elevated this visit
Pressure well controlled on ambulatory blood pressure 130's

Hyperlipidemia:
Controlled with low HDL as well; on statin; per his pcp

Diabetes:
8/18/2017
tchol 98 hdl 33 ldl 49 tg 81 cr 0.9 k 4.1 alt30 A1C 6.9

11/13/18
A1C:6.8, per PCP

OBSTRUCTIVE SLEEP APNEA:
Diagnosed with obstructive sleep apnea and recently started on CPAP. apneic episodes went from 60 to 0.5/hr

ORDER / FOLLOW-UP:

Orders Placed This Encounter
- ECG-Routine 12 Lead; w/Intrpt & Rpt (CPT93000)

12mos follow up

The patient is a 62 y.o. male with the following medical problems:

1. **Sleep apnea, unspecified type**
2. HTN (hypertension), benign
3. RBBB (right bundle branch block with left anterior fascicular block)
4. Mixed hyperlipidemia
5. Uncontrolled type 2 diabetes mellitus with hyperglycemia (HCC)
6. Abnormal ECG

Mr. Kevin Bagley is here for an annual follow-up visit. Patient does not have any cardiac complaints at this time. Patient denies any edema, palpitations, fatigue/ weakness, dizziness, light-headedness, near-syncope, syncope, or numbness/ tingling. Patient states that he does note exercise at this time and does not keep a BP log at home. Pt did want to as about his occasional leg cramping.

PAST CARDIAC AND VASCULAR HISTORY:

Hypertension
Diabetes
Hyperlipidemia
Family history of heart disease-FH, father quadruple heart bypass, 3 heart attacks- at 40 , pulmonary hypertension.

CARDIOVASCULAR PROCEDURES:

Cardiac Caths: None

Echo/MUGA:
Echo 09/2017
Ejection fraction is 55 - 60%.
Pseudonormal left ventricular diastolic dysfunction.
RVSP is 37 mmHg

Electrophysiology/Holter: None

Stress Tests:
Stress Test 09/2017

1. Normal left ventricular size. Ejection fraction 58%.
2. No perfusion defects seen to suggest any evidence of ischemia or infarct.
3. No other available for study for comparison.

Vascular Ultrasound: None

EKG:
10/8/2020 normal sinus rhythm right bundle branch block left anterior fascicular block
9/26/19 Normal sinus rhythm right bundle branch block left anterior fascicular block
9/6/2017 normal sinus rhythm right bundle branch block and left anterior fascicular block

Current Outpatient Medications

Medication	Sig
• aspirin EC (ECOTRIN) 81 mg EC tablet	Take 81 mg by mouth every day
• atorvastatin (Lipitor) 10 mg tablet	TAKE ONE-HALF (1/2) TABLET AT BEDTIME
• buPROPion XL (Wellbutrin XL) 150 mg tablet 24hr	TAKE 1 TABLET BY MOUTH EVERY DAY
• cloNIDine HCl (CATAPRES) 0.1 mg tablet	TAKE 1 TAB (0.1 MG TOTAL) BY MOUTH AS NEEDED ONLY AS DIRECTED BY PHYSICIAN IF BP > 170/90
• Farxiga 10 mg tablet	TAKE 1 TABLET EVERY DAY
• glipiZIDE XL (GLUCOTROL XL) 10 mg tablet	TAKE 2 TABLETS DAILY (Patient taking differently: Take 10 mg by mouth two(2) times daily for: 1tablet a day)
• ibuprofen (MOTRIN) 800 mg tablet	TAKE 1 TAB (800 MG TOTAL) BY MOUTH FOUR(4) TIMES DAILY AS NEEDED FOR PAIN
• JANUVIA 100 mg tablet	TAKE 1 TABLET DAILY
• metFORMIN (GLUCOPHAGE) 1,000 mg tablet	TAKE 1 TABLET WITH BREAKFAST AND SUPPER
• multivitamin tablet	Take 1 Tab by mouth every day
• Omega-3-DHA-EPA-Fish Oil (FISH OIL) 1,000 mg (120 mg-180 mg) cap	Take by mouth every day
• terbinafine HCl (LAMISIL) 250 mg tablet	TAKE 1 TABLET DAILY FOR ONYCHOMYCOSIS
• trandolapril (MAVIK) 2 mg tablet	TAKE 1 TABLET DAILY
• TRULICITY 1.5 mg/0.5 mL pen injector	INJECT 0.5 ML (1.5 MG) UNDER THE SKIN ONCE EVERY WEEK, ON THE SAME DAY EACH WEEK
• verapamil SR (Calan SR) 240 mg tablet	TAKE 1 TABLET TWICE A DAY

No current facility-administered medications for this visit.

Social History

Tobacco Use
- Smoking status: Never Smoker
- Smokeless tobacco: Never Used
- Tobacco comment: Smoking History Packs/day: Tobacco use: Never smoker.

Substance Use Topics
- Alcohol use: Yes
  Alcohol/week: 3.0 standard drinks

Types:	1 Glasses of wine, 2 Cans of beer per week
Frequency:	2-3 times a week
Drinks per session:	1 or 2
Binge frequency:	Never
Comment: 3 drinks weekly	

- Drug use: No

Review of Systems
Constitutional: Negative for chills, diaphoresis, fever, malaise/fatigue and weight loss.
HENT: Negative for congestion, ear discharge, ear pain, hearing loss, nosebleeds, sore throat and tinnitus.
Eyes: Negative for blurred vision, double vision, photophobia, pain, discharge and redness.
Respiratory: Negative for cough, hemoptysis, sputum production, shortness of breath, wheezing and stridor.
Cardiovascular: Negative for chest pain, palpitations, orthopnea, claudication, leg swelling and PND.
Gastrointestinal: Negative for abdominal pain, blood in stool, constipation, diarrhea, heartburn, melena, nausea and vomiting.
Genitourinary: Negative for dysuria, flank pain, frequency, hematuria and urgency.
Musculoskeletal: Negative for back pain, falls, joint pain, myalgias and neck pain.
Skin: Negative for itching and rash.
Neurological: Negative for dizziness, tingling, tremors, sensory change, speech change, focal weakness, seizures, loss of consciousness, weakness and headaches.
Endo/Heme/Allergies: Negative for environmental allergies and polydipsia. Does not bruise/bleed easily.
Psychiatric/Behavioral: Negative for depression, hallucinations, memory loss, substance abuse and suicidal ideas. The patient is not nervous/anxious and does not have insomnia.

VITALS:
Pulse 72, temperature 97 °F (36.1 °C), height 5' 8" (172.7 cm), weight 101.5 kg (223 lb 12.8 oz). Body mass index is 34.03 kg/m².

Physical Exam
Constitutional: He is oriented to person, place, and time. He appears well-developed and well-nourished. No distress.
HENT:
Head: Normocephalic and atraumatic.
Right Ear: External ear normal.
Left Ear: External ear normal.
Nose: Nose normal.
Mouth/Throat: No oropharyngeal exudate.
Eyes: Pupils are equal, round, and reactive to light. Conjunctivae and EOM are normal. Right eye exhibits no discharge. Left eye exhibits no discharge. No scleral icterus.
Neck: Normal range of motion. Neck supple. No JVD present. No tracheal deviation present. No thyromegaly present.
Cardiovascular: Normal rate, regular rhythm, normal heart sounds and intact distal pulses. Exam reveals no gallop and no friction rub.
No murmur heard.
Pulmonary/Chest: Effort normal and breath sounds normal. No stridor. No respiratory distress. He has no wheezes. He has no rales. He exhibits no tenderness.
Abdominal: Soft. Bowel sounds are normal. He exhibits no distension and no mass. There is no abdominal tenderness. There is no rebound and no guarding.

Musculoskeletal: Normal range of motion.
General: No tenderness, deformity or edema.
Lymphadenopathy:
He has no cervical adenopathy.
Neurological: He is alert and oriented to person, place, and time. He displays normal reflexes. No cranial nerve deficit. He exhibits normal muscle tone. Coordination normal.
Skin: Skin is warm and dry. No rash noted. He is not diaphoretic. No erythema. No pallor.
Psychiatric: He has a normal mood and affect. His behavior is normal. Judgment and thought content normal.
Nursing note and vitals reviewed.

No results found for this or any previous visit (from the past 8736 hour(s)).

LABS:

Recent Labs

	05/14/20 1004	09/28/20 0929
NA	138	142
K	4.2	4.4
CL	102	104
CO2	25	26
BUN	20	14
CREAT	0.92	0.91
GLU	**116***	**105***
ALB	4.4	4.6

Recent Labs

	05/14/20 1004	09/28/20 0929
AST	17	19
ALT	22	28

Recent Labs

	09/28/20 0929
WBC	8.0
HGB	15.3
HCT	44.5
PLT	352
CHOL	113
TRIG	67
HDL	44
LDL	55
TSH	2.92

Plan/Recommendations:

Orders Placed This Encounter

- ECG-Routine 12 Lead; w/Intrpt & Rpt (CPT93000)

Tu K. Le, M.D., F.A.C.C.
Electronically signed by Le, Tu Khac Phan, MD, FACC at 10/08/20 1520

Office Visit
on
10/8/2020