SETMA I - 2929 Calder, Suite 100 SETMA II - 3570 College, Suite 200 Mark Wilson Clinic - 2010 Dowlen
Nederland/Port Arthur - 2400 Highway 365, Suite 201
Orange - 601 Strickland Drive, Suite 140
(409) 833-9797
www.setma.com

Hospital Care Summary & Post Hospital Plan of Care and Treatment Plan

Baptist Hospital

Patient
Sex **Female**
Date of Birth **10/ /**

Admit Date **07/12/2013**
Discharge Date **07/15/2013**

Admitting Assessment	Status
Atrial fibrillation	New

Discharge Assessment	Status
Atrial fibrillation	Stable-New onset
HLD (hyperlipidemia)	Chronic
HTN (hypertension)	Chronic
Hx of left mastectomy	Chronic
Hx of breast cancer	Chronic
Warfarin anticoagulation	Stable
Hyponatremia	Chronic
Cardiac LV ejection fraction >40%	Stable

Discharge Chronic Conditions **Status**

1. Hypertension
2. Lipid Hyperlipidemia NOS
3. Esophageal Reflux
4. Sodium Hyponatremia Hyposmolal
5. Obesity Overweight
6. Allergic Rhinitis NOS
7. Cardiac, PAC's
8. Urinary Incontin Stress Female
9. Hx Malig Neop Breast
10. Hypertensive retinopathy of both eyes
11. Cataract, nuclear sclerotic, both eyes
12. Atrial fibrillation
13. Warfarin anticoagulation
14. Hx of left mastectomy
15. HTN (hypertension)

Consulted Specialist(s)

Last Name	First Name	Date	Reason
Bransford	Paris		

I have reviewed and agree with the consultants documentation and plan. *Yes*

Procedure Results

None

Histories

The patient's histories were reviewed today.

Social History

Ethnicity - Caucasian
Occupation - Housewife
Marital Status - married

Past Medical History

Hospital
- Chest Pain, Atypical, 2012
- Atrial Fibrillation, 2013

Surgical
- Lt mastectomy

Family History

The patient's health maintenance was reviewed today.

Physical Exam - 10/22/2012
BMP - 07/12/2013
Bone Density - 09/18/2012
CBC - 07/12/2013
Chemistry - 08/15/2012
Chest X-Ray - 07/12/2013
Colonoscopy - 03/05/2009
Creatinine - 07/12/2013
Dilated Eye Exam - 04/03/2012
Echocardiogram - 07/13/2013
EKG - 07/12/2013
Eye Exam - 04/03/2012
Flu Shot - 09/10/2012
Hemoccult08/27/2012
HFP - 08/15/2012
HGB - 08/15/2012
Lipids - 08/15/2012
Mammogram - 02/15/2013
Microalbumin - 08/15/2012
Pap Smear - 10/22/2012
Pelvic Ultrasound - 09/13/2002
Pneumovax - 11/10/2008
Breast Exam - 10/19/2011
PT/INR - 07/12/2013
Stress Test - 08/05/2012
Thyroid Profile - 11/01/2011
Urinalysis - 04/03/2013
uTSH - 08/21/2012

Review of Systems

Source of Information
- Patient
- Family member

Caregiver
Hospital Chart

Allergies

Description	Onset
No Known Allergies	05/10/2007

Constitutional

Patient Confirms
Weakness,
Patient Denies
Malaise, Fatigue, Fever, Chills, Headache, Dizziness, Syncope, Shortness of breath, Diaphoresis, Lethargy,

Eyes

Last Eye Exam - 04/03/2012
Last Dilated Eye Exam - 04/03/2012
Patient Denies
Redness, Swollen lids, Purulent discharge,

Cardiac

Patient Confirms
Irregular heart beat, Peripheral edema,
Patient Denies
Chest pain at rest, Chest pain with exertion, Chest pressure, Tachycardia, Diaphoresis, Nausea, Fatigue, Cough, Syncope, Orthopnea,

Respiratory

Patient Confirms
Peripheral edema,
Patient Denies
Cough, Chest pain, Fever, Shortness of breath,

Gastrointestinal

Patient Confirms
Fall risk
Patient Denies
Nausea, Vomiting, Diarrhea, Abdominal pain, Distention,

Female Genitourinary

Patient Denies
Dysuria, Urge incontinence, Stress incontinence, Foul smelling urine, Dark Urine,

Musculoskeletal

Patient is right-handed.
Patient Confirms
Weakness
Patient Denies
Trauma,

I**ntegumentary**

Patient Confirms
Paleness, Intact, Warm/Dry
Patient Denies
Nail abnormalities, Excessive dryness, Sweaty,

Neurologic

Patient Denies
Convulsions, Disorientation, Headache, Loss of consciousness, Memory loss, Syncope,

Psychiatric
Patient Denies
Anxiety, Apprehension,

Endocrine
Patient Confirms
Hyponatremia
Patient Denies
Diabetes Mellitus, Weakness, Nausea, Vomitting,

Hematologic
Last Updated/Reviewed - 07/12/2013
Patient Confirms
Edema - 1 +
Patient Denies
Anticoagulants, Jaundice,

Physical Exam

Vital Signs

Blood Pressure
Trial 1 - 152 / 70 mmHg
Mid-Arm Circumference - 12.5 inches (Performed 08/15/2012)

Temperature - 97.70 *F
Pulse - 58.00/min
Resp Rate - 18/min
Weight - 220.00 pounds
Height - 66.00 inches
BMI - 35.59 kg/m^2
Body Fat - 47.9 %
Protein Requirement - 120 grams/day
Pulse Oximetry - 95 %

Circumferences (Performed 08/10/2012)
Waist - 40.25 inches
Hips - 51.00 inches
Abdomen - 44 inches
Chest - 43.50 inches
Neck - 15.5 inches

Constitutional
Level of Consciousness - Normal
Orientation - Normal
Level of Distress - Normal
Nourishment - moderately obese

Head/Face
Hair and Scalp - Normal
Skull - Normal
Facial Features - Normal

Eyes
General
Right - Normal
Left - Normal

External
Right - Normal
Left - Normal
Last Dilated Eye Exam - 04/03/2012
Last Eye Exam - 04/03/2012

Ears
External Ear
Inspection
Right - Normal
Left - Normal
Internal Ear
Hearing
Right - Normal
Left - Normal

Nasopharynx
Nose and Sinuses
External Nose - Normal
Nares
Right - Normal
Left - Normal
Mucosa - Normal
Mouth
Tongue - Normal
Buccal Mucosa - Normal

Neck
Inspection - Normal
Range of motion without resistance.

Respiratory
Inspection - Normal
Auscultation - Normal
Cough - Absent

Cardiovascular
Auscultation - irregularly irregular
Palpation - Normal
Peripheral Edema - Yes
Bilateral - 1+

Cardio Intima Media Thickening	Left	Right
Thickening (mm)		
Blockage Present		
Percent Blocked	0 %	0 %

Abdomen
Inspection - rounded contour
Auscultation - Normal
Palpation - Normal

Female Genitourinary
Last Pap Smear - 10/22/2012
Last Mammgoram - 02/15/2013
Foley Catheter - No
Suprapubic Catheter - No
Bowel Incontinent - No

Bladder Incontinent - No
Surgeries - Mastectomy

Musculoskeletal
Overview - weakness

Neurological
Mental Status
Cognitive Abilities - Normal
Emotional Stability - Normal
Sensory Function
Coordination - Normal
Fine Motor Skills - Normal

Integumentary
Inspection - Normal
Palpation - Normal
Hair - Normal
Decubitus or skin ulcers seen? *No*

Procedures Performed
Test Date: 07/13/2013
Reading Physician: Dr Bransford
Indication
Cardiomegaly
Atrial Fribrilation
Interpretation
Ejection Fraction: 60.00
Ventricular Dysfunction: None
Dilation: Yes
Location:
Atrial
Valvular Abnormalities
Aortic
Abnormal
Inusfficiency/Regurgitation
Severity: Mild
Mitral
Abnormal
Insufficiency/Regurgitation
Severity: Mild
Pulmonary Artery Pressure: 0

Radiology

Chest

Comments
CHEST-ONE VIEW, 0453 HOURS
FINDINGS: There is stable mild to moderate cardiomegaly.

There is no focal lung consolidation, pleural effusion, or pneumothorax.

There are degenerative changes of the AC joints.

Laboratory

CBC

	Admission	Discharge
WBC	6.4	4.7
Hgb	16.6	13.5
MCV	90.1	92.3
Plate	153	134
Bands		

CMP

	Admission	Discharge
Na	133.0	136
K	4.1	3.6
BUN	9	7
Creat	.7	0.6
Ca	10.0	8.6
Alp		3.0
Ast		21
Bil		
Glucose	105.0	83.0
Chloride	98.0	103.0
ALT		30
ALP		45
Protein		5.7

Other

	Admission	Discharge
Hemoglobin A1C		
Cholesterol		154
Triglycerides		60
LDL		64
HDL		78
Magnesium		
Phosphorus		
BNP		
D-Dimer		
Acetone		
ESR		
TSH		3.32
T3		
T4		8.2
B12		
Folate		
Ferritin		
Iron		

PTINR

	Admission	Discharge
PT	13.7	20.2
INR	1.0	1.7

Follow-Up Instructions

Hospital Discharge Instructions
Consult Altus Home Health agency
Discussed condition, medications, and follow-up care with patient and/or family
Give patient a copy of discharge summary
Ensure patient understands follow-up instructions

Review all follow-up instructions with patient
Review medications with patient before discharge

Post Hospital Follow-Up Instructions
Bring ALL medications to next office appointment
Continue medications per Post Hospital Follow-up Instructions document
Diet:1800Low chol/coumadin/ADA diet
Have a PT/INR in1 Day
Follow-Up
Please see Dr. Holly with SETMA on 07/17/2013 at 845a.
Please make an appointment to see Dr. Bransford .
Comments - Altus home health to follow up at home
INR to be drawn by Altus - send to SETMA coumadin clinic
Arrive 15 min early to Dr Holly's appt on Wed for INR lab draw at coumadin clinic

Guidelines

Follow-Up Locations

The physician recommended the following location(s) for additional care if needed:

City of Beaumont Public Health
950 Washington Blvd.
Beaumont, Texas 77705
(409) 832-4000

Continue Medications as Listed

Start Date	Brand	Dose	Sig Desc
07/15/2013	Vitamin E	200 Unit	take 2 Capsule by Oral route once
07/15/2013	Aspirin	81 Mg	chew 1 tablet by oral route 2 times every day
07/15/2013	Lovenox	100 Mg/ml	inject 100mg by subcutaneous route 2 times every day until INR >1.9
07/15/2013	Coumadin	5 Mg	take 1 tablet by oral route every day
02/15/2013	Hydrochlorothiazide	25 Mg	Take one tablet by mouth daily
02/15/2013	Zocor	10 Mg	Take one tablet by mouth daily
08/06/2012	Vitamin C	500 Mg	take 1 by Oral route every day
08/06/2012	Calcium	600 Mg (1,500 Mg)	take 0.5 Tablet by Oral route every day
08/06/2012	Fish Oil Omega-3	360 Mg-1,200 Mg	take 1 Capsule by Oral route 2 times every day
08/06/2012	Centrum Silver		take 1 Tablet by Oral route every day

The patient was stable upon release from the hospital.

The patient's prognosis is good.

At least thirty-one minutes were required to complete the discharge process.

Hospital Course Summary

Admission
Patient was admitted through the emergency room, For the treatment of Atrial fibrillation.

Treatment
The patient was treated with the following fluids and antibiotics intravenously: Heplock, NS, .
The patient received the following medications intravenously: Diltiazem, .

Diagnostics

Appropriate cultures were obtained and reviewed. Appropriate lab tests were obtained and reviewed. Appropriate diagnostic tests were obtained and reviewed.

Complications

The patient experienced no complications. The hospital course was uneventful. Gradual improvement took place.

Discharge Condition

The patient has improved.
Patient is ambulatory.

Reason for Discharge

Patient has recovered from acute condition
Maximum benefit reached in hospital setting
Patient is stable

_____

Approved By James L. Holly, MD 07/15/2013 9:45 AM
Southeast Texas Medical Assoc

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Post Hospital Follow-Up Instructions

Patient
Date of Birth 10/ /

Bring ALL medications to next office appointment
Continue medications per Post Hospital Follow-up Instructions document
Diet: 1800 Low chol/coumadin/ADA diet
Have a PT/INR in 1 Day

Follow-Up With
You have an appointment to see **Dr. Holly with SETMA I - 2929 Calder, Suite 100 on 07/17/2013 at 845a**
Please make an appointment to see Dr. Bransford .

Comments

----Altus home health to follow up at home
----INR to be drawn by Altus - send to SETMA coumadin clinic
***----Arrive 15 min early to Dr Holly's appt --for INR lab draw at coumadin clinic*--SETMA I -2929 Calder, Suite 100**

Active Medications

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James L. Holly MD
Southeast Texas Medical Associates, LLP