

## PULMONOLOGY ASSOCIATES OF TEXAS

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Patient Name: Thomas Cromwell  
Patient DOB: 02-09-1960  
Patient Sex: Male  
Visit Date: 03-06-2016

### Chief Complaint/HPI

Chief Complaint: [Shortness of Breath](#)

History of Present Illness: [he patient is an 56-year-old male. From the last few days, he is not feeling well. Complains of fatigue, tiredness, weakness, nausea, no vomiting, no hematemesis or melena. The patient relates to have some low-grade fever. The patient came to the emergency room. Initially showed atrial fibrillation with rapid ventricular response. It appears that the patient has chronic atrial fibrillation. As per the medications, they are not very clear. He denies any specific chest pain. Her main complaint is shortness of breath and symptoms as above](#)

Pulmonary symptoms: [cough, sputum, no hemoptysis, dyspnea and wheezing.](#)

### History

**Past Medical History:** [Pulmonary history includes pneumonia and sleep apnea.](#)

[Cardiac history includes atrial fibrillation and congestive heart failure.](#)

[Remainder of PMH is non-significant.](#)

**Surgical History:** [appendectomy in 2007.](#)

**Medications:** [Pulmonary medications are albuterol and Spiriva; Cardiac medications include: atenolol and digoxin;](#)

**Family History:** [Father is deceased at age 80. Father PMH remarkable for CHF, hypertension and MI; Mother is alive. Mother PMH remarkable for alzheimers, diabetes and hypertension; Cancer history in family: No Lung disease in the family: No](#)

### Social History:

[Current every day smoker - 1 pack / day](#)

[Alcohol consumption: social](#)

[Marital status: lives alone](#)

### Exposure History:

[Occupation: farmer.](#)

[Asbestos exposure: None.](#)

[No exposure to Ground Zero.](#)

**Immunization History:** [Patient has an immunization history of flu shot, H1N1shot and pneumococcal shot.](#)

### Current Medications

[Albuterol Sulfate 0.5% Solution for Inhalation](#)

[Benicar 20mg Tablet](#)

[Singulair 10mg Tablet take 1 tablet \(10mg\) by oral route once daily](#)

Advair Diskus 100mcg-50mcg/actuation Powder for Inhalation inhale 1 puff by inhalation route 2 times per day morning and evening approximately 12 hours apart  
Atenolol 50mg Tablet  
Coreg 12.5mg Tablet

## Problem List

Other Asthma (J45.998)  
Other Nonspecific Abnormal Finding Of Lung Field (R91.8)  
Essential (Primary) Hypertension (I10)  
Sleep Apnea, Unspecified (G47.30)  
Insomnia, Unspecified (G47.00)  
Heart Failure, Unspecified (I50.9)

## Allergies

Patient is allergic to **Peanuts**. **Hives** was reported as a result of allergic reaction. It was **mild to moderate** in severity. Patient is allergic to **Penicillins**. **Skin Rash** was reported as a result of allergic reaction. It was **moderate to severe** in severity.

## ROS

**Constitutional:** Patient reports **fever, chills, sweats, fatigue, anorexia** and **weight loss**.

**Eyes:** Patient reports **no dry eyes, eye irritation, change in vision**.

**HENT:** Patient reports **no nose/sinus problems, earaches, dry mouth/ulcers/sore throat**.

**CVS:** Patient reports **paroxysmal nocturnal dyspnea** and **swelling of the ankles**.

**Respiratory:** Patient reports **cough, shortness of breath** and **sputum**.

**GI:** Patient reports **no heartburn/indigestion, difficulty swallowing, nausea/vomiting, abdominal pain, jaundice/hepatitis**.

**GU:** Patient reports **no dysuria, hematuria, or incontinence**.

**Neurological:** Patient reports **no fainting, headaches, focal weakness/numbness, or syncope**.

**Musculoskeletal:** Patient reports **no muscles aches, arthralgias, deforming arthritis, morning stiffness, Raynaud's phenomena**.

**Skin:** Patient reports **no new rash**.

**Endocrine:** Patient reports **no new diagnosis of diabetes, thyroid, adrenal disease**.

**Psychiatric:** Patient reports **no psychiatric symptoms**.

**Bleeding:** Patient reports **no easy bruisability, abnormal spontaneous bleeding, abnormal procedural bleeding**.

**Sleep:** Patient reports **no snoring, gasping, or somnolence**.

## Vital Signs

Height is **70** in.

Weight is **250** lbs.

BMI is **35.9**

Temperature is **98.6** F.

BP Systolic is **160**.

BP Diastolic is **90**. BMI is **35.9**.

## Physical Exam

**General:** On examination patient is height is **70** in and weight is **250** lbs.

**HEENT:** Normocephalic. Atraumatic. No gross facial abnormalities. Sclerae and conjunctivae are clear and normal.

Mucous membranes moist. Normal palate, tongue and tonsils

**Neck:** On examination neck is supple. No gross abnormalities, edema or thyromegaly. No tenderness. No mass. Trachea is midline.

**Lymph Node:** On lymph node examination There is no cervical or supraclavicular lymphadenopathy.

**CVS:** On examination S1 and S2 are normal. No rubs, clicks or gallops. Normal carotid upstroke and pulse.

**Respiratory:** On examination chest movement is symmetric, wheeze noted, positive chest tenderness, decreased air movement and wheezing inspiratory & expiratory.

**GI:** On examination The abdomen is soft, nontender, nondistended, bowel sounds are present. No organomegaly; no masses palpated.

**Skin:** On examination No gross abnormalities.

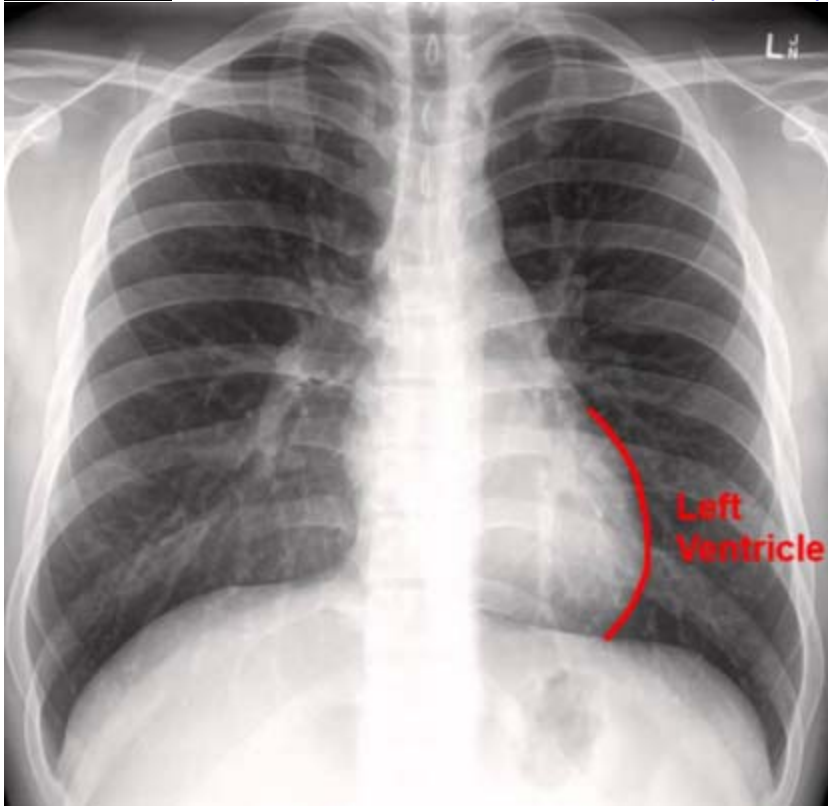
**Extremities:** On examination FROM of upper and lower extremities, bilaterally. No nail clubbing or cyanosis. Normal color and warmth.

**Musculoskeletal:** On examination Normal gait. No nail clubbing or cyanosis. No edema.

**Neurological:** On examination Normal gait. Alert and oriented. Normal mood and affect.

## Evaluation

**CXR/CT/PET:** CXR PA/Lateral Films reviewed. Studies compared to prior.



**Data Review:** Old laboratory results reviewed.

## Spirometry

The FEV1 is normal.

The FVC is mildly reduced.

FEV1/FVC ratio is mildly reduced.

The flow volume curve was scooped.

There is no response to bronchodilator at time of study.

MVV is normal.

MVV is normal.

## Assessment

Fever, Unspecified (R50.9)

Shortness Of Breath (R06.02)

Pneumonia, Unspecified Organism (J18.9)

Essential (Primary) Hypertension (I10)

Heart Failure, Unspecified (I50.9)

Sleep Apnea, Unspecified (G47.30)

## Plan

### Lab

CHEST XRAY

CBC

CMP

CHEST CT

### **Today's Medication**

Levaquin 750mg Tablet is Prescribed, Taket 2 tablets stat, followed by one tablet BID for10 days

### **Procedure**

Spiro P&P (Hospital) 94060\*H

### **Recommendation**

Avoid smoking and exposure to secondhand smoke.

Fever: Acetaminophen (e.g. Tylenol) or ibuprofen for muscle aches, headaches or fever more than 100.4°F (38° C) rectally

Exercise regularly: Regular aerobic exercise reduces tension and can help prevent migraines. If your doctor agrees, choose any aerobic exercise you enjoy, including walking, swimming and cycling. Warm up slowly, however, because sudden, intense exercise can cause headaches.

Control weight to normal or near-normal levels by eating a healthy low-fat, high-fiber diet.Keep alcohol consumption low.

### **Follow Up**

Followup in 1 week.

### **Health Education**

COUGH

QUIT SMOKING INFO

The visit was electronically signed off by Alan Smith, MD on 03/07/2016 12:24:00 AM