

Diagnostic Imaging Report

Lodi Health
975 S. Fairmont Ave
Lodi, CA 95240

Patient Name:
MRN#
Account#

PARVIN, MARY JEAN
M053082
V024703878

DOB: 03/16/43

Accession:
US

17503.001LMH
Extremity Veins Bilateral Legs
(mGy-cm)

Total exam DLP:

06/06/13

History: Pain and swelling.

Duplex exam was performed with color flow Doppler and spectral wave analysis.

Common femoral, superficial femoral and popliteal veins bilaterally demonstrate normal flow. Normal augmented flow and normal compression. No thrombus is seen.

Impression: No evidence of deep venous thrombosis.

Report Signed in other vendor system by: Rankin, R. Brandon III MD on 06/06/13 1457
Reported By: Rankin, R. Brandon III MD

CC: Min M - HOSP Hlaing, MD

Technologist: MAMOULELIS, NIKI
Date/Time: 06/06/13

PARVIN, MARY JEAN
M053082 V024703878 DOB: 03/16/43
Phys: Min M - HOSP Hlaing, MD
Loc: 2S Exam Date: 06/06/13
Status: ADM IN

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Progress Note

Date **06/06/13**
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Subjective

Subjective HPI

complaint of leg swelling. No pain.

Problem List

Active Problems

Cellulitis and abscess of leg

History obtained from- Patient, Nurse PCP/Admit Date

Primary Care Physician Freund, Edmund MD-Mills
 Phone number 334-8540
 Admit Date 06/04/13
 Length of Stay 2

Estimated length of stay 2 days

History and Physical reviewed? Yes

Objective

Vitals & I&O

Vital Signs

Date	Temp	Pulse	Resp	B/P	Pulse Ox	FiO2
06/05-06/06	35.3-36.8	60-70	17-20	100-131/53-74	94-98	

Intake and Output

	06/06 0600
Intake Total	1710
Output Total	4100
Balance	-2390
Intake, IV	110
Intake, Oral	1600
Number Unmeasured Stools	1
Number Voids	4
Output, Urine	4100
Patient Weight	102.11 kg
Voiding Method	Foley
Weight Measurement Method	Bed

Results

Laboratory Tests

	06/06	06/06	06/06	06/06	06/06
	1139	1117	0734	0540	0540

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Chemistry				
Sodium (134 - 143 mmol/L)				139
Potassium (3.6 - 5.1 mmol/L)	4.0			3.9
Chloride (98 - 107 mmol/L)				106
Carbon Dioxide (22 - 32 mmol/L)				29
BUN (8 - 21 mg/dL)				42 H
Creatinine (0.44 - 1.03 mg/dL)				2.19 H
Estimated GFR				22.2
BUN/Creatinine Ratio (6.0 - 20.0)				19.2
Glucose (70 - 110 mg/dL)				149 H
POC Glucose (70 - 110 mg/dL)	202 H	209 H		
Calcium (8.9 - 10.3 mg/dL)				8.3 L
Phosphorus (2.4 - 4.7 mg/dL)				4.8 H
Total Bilirubin (0.1 - 2.0 mg/dL)				0.6
AST (15 - 41 IU/L)				19
ALT (14 - 54 IU/L)				12 L
Alkaline Phosphatase (38 - 126 IU/L)				72
B-Natriuretic Peptide (< 176 pg/mL)			792 H	
Total Protein (6.1 - 7.9 g/dL)				4.8 L
Albumin (3.5 - 4.8 g/dL)				2.3 L
Globulin (2.0 - 3.8 gm/dL)				2.5
Albumin/Globulin Ratio (1.2 - 2.5)				0.9 L
Triglycerides (45 - 250 mg/dL)				115
Cholesterol (<200 mg/dL)				112
LDL Cholesterol, Calc (10 - 130 mg/dL)				53
HDL Cholesterol (35 - 85 mg/dL)				36
Cholesterol/HDL Ratio (<4.5)				3.1
Hematology				
WBC (5.0 - 9.5 K/mm ³)				5.2
RBC (3.70 - 5.50 M/uL)				4.06
Hgb (12.0 - 16.0 g/dL)				12.4
Hct (37.0 - 47.0 %)				36.5 L
MCV (80.0 - 99.0 fl)				89.9
MCH (27.0 - 33.0 pg)				30.4
MCHC (31.8 - 36.2 g/dL)				33.9
RDW (10.0 - 16.4 %)				18.0 H
Plt Count (140 - 450 K/mm ³)				192
MPV (7.5 - 10.5 fl)				8.4
Neut % (37 - 80 %)				49.4
Lymph % (10.0 - 50.0 %)				34.3
Mono % (<12.0 %)				10.7
Eos % (<7.0 %)				4.3
Baso % (<2.5 %)				1.3
Absolute Neutrophils (2.40 - 7.56 K/uL)				2.57
Absolute Lymphocytes (0.96 - 4.75 K/uL)				1.79
Absolute Monocytes (0.10 - 1.00 K/uL)				0.56
Absolute Eosinophils (0.00 - 0.45 K/uL)				0.22
Absolute Basophils (0.00 - 0.20 K/uL)				0.07

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	06/05 2128	06/05 1710	06/05 1125	06/05 0917	06/05 0902
Chemistry					
POC Glucose (70 - 110 mg/dL)	157 H	171 H	85	96	
Free T4 (0.58 - 1.64 ng/dL)					0.99

	06/05 0719	06/05 0541	06/05 0541	06/05 0541	06/04 2201
Chemistry					
Sodium (134 - 143 mmol/L)				144 H	
Potassium (3.6 - 5.1 mmol/L)				4.0	
Chloride (98 - 107 mmol/L)				110 H	
Carbon Dioxide (22 - 32 mmol/L)				28	
BUN (8 - 21 mg/dL)				37 H	
Creatinine (0.44 - 1.03 mg/dL)				2.02 H	
Estimated GFR				24.3	
BUN/Creatinine Ratio (6.0 - 20.0)				18.3	
Glucose (70 - 110 mg/dL)				44CL	
POC Glucose (70 - 110 mg/dL)	105				286 H
Hemoglobin A1c (4.4 - 6.4 %)			11.96 H		
Estim Average Glucose (mg/dL)			297		
Calcium (8.9 - 10.3 mg/dL)				8.7 L	
Phosphorus (2.4 - 4.7 mg/dL)				4.0	
Magnesium (1.6 - 2.4 mg/dL)				1.8	
Total Bilirubin (0.1 - 2.0 mg/dL)				0.8	
AST (15 - 41 IU/L)				24	
ALT (14 - 54 IU/L)				16	
Alkaline Phosphatase (38 - 126 IU/L)				80	
Total Protein (6.1 - 7.9 g/dL)				5.3 L	
Albumin (3.5 - 4.8 g/dL)				2.6 L	
Globulin (2.0 - 3.8 gm/dL)				2.7	
Albumin/Globulin Ratio (1.2 - 2.5)				1.0 L	
TSH 3rd Generation (0.34 - 5.60 uIU/mL)		12.30 H			
Hematology					
WBC (5.0 - 9.5 K/mm3)				7.5	
RBC (3.70 - 5.50 M/uL)				4.50	
Hgb (12.0 - 16.0 g/dL)				13.7	
Hct (37.0 - 47.0 %)				40.1	
MCV (80.0 - 99.0 fl)				89.1	
MCH (27.0 - 33.0 pg)				30.4	
MCHC (31.8 - 36.2 g/dL)				34.1	
RDW (10.0 - 16.4 %)				18.1 H	
Plt Count (140 - 450 K/mm3)				259	
MPV (7.5 - 10.5 fl)				9.6	
Neut % (37 - 80 %)				58.5	
Lymph % (10.0 - 50.0 %)				25.1	
Mono % (<12.0 %)				10.9	
Eos % (<7.0 %)				4.4	
Baso % (<2.5 %)				1.2	

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Absolute Neutrophils (2.40 - 7.56 K/uL)	4.41
Absolute Lymphocytes (0.96 - 4.75 K/uL)	1.89
Absolute Monocytes (0.10 - 1.00 K/uL)	0.82
Absolute Eosinophils (0.00 - 0.45 K/uL)	0.33
Absolute Basophils (0.00 - 0.20 K/uL)	0.09

	06/04 1829	06/04 1640
Chemistry		
POC Glucose (70 - 110 mg/dL)	327 H	
Urines		
Urine Color (YELLOW)		YELLOW
Urine Appearance (CLEAR)		CLOUDY
Urine pH (5.5 - 8.0)		6.0
Ur Specific Gravity (1.001 - 1.099)		1.019
Urine Protein (NEGATIVE mg/dL)		300 H
Urine Glucose (UA) (NEGATIVE mg/dL)		250
Urine Ketones (NEGATIVE mg/dL)		NEGATIVE
Urine Blood (NEGATIVE)		NEGATIVE
Urine Nitrite (NEGATIVE)		NEGATIVE
Urine Bilirubin (NEGATIVE)		NEGATIVE
Urine Urobilinogen (0.2 - 1.0 E.U./dL)		0.2
Ur Leukocyte Esterase (NEGATIVE)		NEGATIVE
Urine RBC (0 - 2 rbc/hpf)		6-10 H
Urine WBC (0 - 5 wbc/hpf)		< 2
Ur Squamous Epith Cells (NONE - FEW epi/hpf)		MODERATE
Urine Crystals (NONE SEEN /hpf)		AMORPHOUS URATES 3+
Urine Bacteria (NONE SEEN)		NONE SEEN
Hyaline Casts (NONE - FEW /hpf)		FEW
Pathogenic Casts (NONE SEEN /hpf)		NONE SEEN

Test results personally reviewed & interpreted? Yes

Medical records reviewed Yes

Allergies

Coded Allergies:

latex (Mild, Rash 06/04/13)

Converted from Drug Class Allergy: Latex

Sulfa (Sulfonamide Antibiotics) (Severe, Convulsions; REACTION AS A CHILD. OK TO TAKE LASIX 06/04/13)

Converted from Ingredient Allergy: Sulfa Drugs

morphine (Mild, MAKES HER FEEL FUNNY 06/04/13)

Current Medications

Current Medications

Acetaminophen/Hydrocodone Bitart 1 tab Q6PRN PRN PO

Insulin Aspart Enter units administered

ACHSPRN PRN SUB-Q

Potassium Chloride 0 PROTOCOL PO

6-9-13

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- Vancomycin HCl 1000 mg PROTOCOL IV (CKD)
- Sodium Chloride 250 ml
- Furosemide 40 mg Q6 IV (CKD)
- Potassium Chloride 40 meq PROTOCOL PRN PO
- Potassium Chloride 20 meq PROTOCOL PRN PO
- Potassium Chloride 10 meq PROTOCOL PRN PO
- Atorvastatin Calcium 20 mg HS PO
- Clonidine 0.2 mg HS PO
- Carvedilol 12.5 mg BID PO
- Famotidine 20 mg BID PO
- Heparin Sodium (Porcine) 5000 unit TID SUB-Q
- Insulin Glargine 25 unit AM SUB-Q
- Aspirin 81 mg DAILY PO
- Escitalopram Oxalate 10 mg DAILY PO
- Isosorbide Mononitrate 30 mg DAILY PO
- Metolazone 2.5 mg DAILY PO
- Telmisartan 80 mg DAILY PO
- Ceftriaxone Sodium 1000 mg Q24H IV
- Sodium Chloride 50 ml
- Insulin Glargine 15 unit HS SUB-Q
- Levothyroxine Sodium 125 mcg DAILY AC PO

Date 06/06/13

General Appearance Alert, Oriented X3, Cooperative, No Acute Distress

HEENT Atraumatic, PERRLA

Respiratory Crackles

Neck Supple, No JVD, No thyromegaly

Cardiovascular Regular, No murmur, No rub

Abdomen Normal Bowel Sounds, Soft

Extremities No Clubbing, No Cyanosis, 1 + edema

Skin bilateral lower ext cellulitis and redness

Neurological No Focal Deficits

Pain (1-10): 0 No Pain

Oral Intake % 100

Activity level: Bedrest - immobile

Foley? Yes

Date foley placed 06/04/13

Last BM 06/05/13

Pressure ulcer? No

Isolation? Yes

Reason- MRSA HX

Assessment/Plan

Problems & Plan

Bilateral lower extremity cellulitis.

much improved.

Handwritten initials/signature in purple ink.

6-19-13

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Patient failed outpatient antibiotic therapy with Keflex and doxycycline. Patient is placed on vancomycin and Rocephin since admit 5/4/13

Hypoglycemia

- likely because of Lantus. Patient might not be compliant at home.
- night lanstus dose adjusted

Hypothyroidism

- TSH more than 12
- levoxyll increased.

#CHF exacerbation.

Patient has ejection fraction of only 30 percent. BNP is elevated at more than 2000. On IV diuretic.

#Hypertension

- controlled with home meds.

#diabetes mellitus

Lantus and sliding scale will be continued. Hemoglobin A1c 11.96. Poorly controlled.

#Chronic renal failure

- We will monitor for now. Cre 2.02 which is her baseline
- she was consulted by Dr. Madulla in the past
- will reconsult him if Cre worsens

disposition *

- patient is non-complaint. She admitted to forgetting taking medications.
- I tried to convince her to go to SNF
- She refused.
- she states her roommate can give her medications
- case mx and social services consulted on this

Mary refuses to follow in home health nurses orders given to me.

Prophylaxis

Heparin for DVT prophylaxis and Pepcid for ulcer prophylaxis

CODE STATUS

DO NOT RESUSCITATE

Daily plan discussed with- Patient/family, Nurse

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<Electronically signed by Min M - HOSP Hlaing, MD>

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