



CONFIDENTIAL Fax

FROM:

WYNNE CRAWFORD MD
273 Winton M Blount Loop, Montgomery, AL 36117-3507
Phone: (334) 280-1500
Fax: (334) 280-1600

TO:

BARTON, LINDSEY T, CRNP
Fax: (334) 244-3396

This fax may contain sensitive and confidential personal health information that is being sent for the sole use of the intended recipient. Unintended recipients are directed to securely destroy any materials received. You are hereby notified that the unauthorized disclosure or other unlawful use of this fax or any personal health information is prohibited. To the extent patient information contained in this fax is subject to 42 CFR Part 2, this regulation prohibits unauthorized disclosure of these records.

If you received this fax in error, please visit www.athenahealth.com/NotMyFax to notify the sender and confirm that the information will be destroyed. If you do not have internet access, please call 1-888-482-8436 to notify the sender and confirm that the information will be destroyed. Thank you for your attention and cooperation.
[ID:5940536-H-11015]

7/12/23
Reviewed
B. Barton
CRNP

MCA • 273 Winton M Blount Loop, Montgomery AL 36117-3507

BUCKALEW, Jamison (id #190840, dob: 06/25/1975)**MONTGOMERY CARDIOVASCULAR ASSOCIATES PC**

273 Winton M Blount Loop

Montgomery, AL 36117-3507

Phone: (334) 280-1500 Fax: (334) 280-1600

Encounter Summary

Date Printed: 07/12/2023

This fax may contain sensitive and confidential personal health information that is being sent for the sole use of the intended recipient. Unintended recipients are directed to securely destroy any materials received. You are hereby notified that the unauthorized disclosure or other unlawful use of this fax or any personal health information is prohibited. To the extent patient information contained in this fax is subject to 42 CFR Part 2, this regulation prohibits unauthorized disclosure of these records.

If you received this fax in error, please visit www.athenahealth.com/NotMyFax to notify the sender and confirm that the information will be destroyed. If you do not have internet access, please call 1-888-482-8436 to notify the sender and confirm that the information will be destroyed. Thank you for your attention and cooperation. [ID:5940536-H-11015]

Patient Information	Buckalew, Jamison (48yo, M) #190840 DOB: 06/25/1975		
Patient Address	8901 Pennington Pl Montgomery, AL 36117	Home Phone	(334) 318-2421
		Work Phone	

Encounter Reason/Date	Cardiac Evaluation and Management Followup: Paroxysmal atrial fibrillation 07/11/2023 - 07:30AM - MCA East					
Problems	Reviewed Problems • Obstructive sleep apnea syndrome - Onset: 07/11/2023 • Paroxysmal atrial fibrillation - Onset: 01/21/2021 • Body mass index 30+ - obesity • Hyperlipidemia • Palpitations					
History of Present Illness	Mr. Jamison Buckalew is a 48 year old patient who returns for ongoing evaluation and management of paroxysmal atrial fibrillation. He has a history of hyperlipidemia. He had an Echocardiogram in February 2021 that showed an EF of 60-65% and mild MR. He has had 3 episodes each lasting 24 hours give her take. These were September, December, and March. He denies chest pain, shortness of breath, PND, orthopnea, pedal edema, and syncope. He says his usual blood pressure at home is 120/70. He has lost 10 lb.					
Review of Systems	Patient reports no fever, no recent weight gain, no recent weight loss, no weakness, and no fatigue. He reports no transient or complete visual loss/blindness. He reports no loss of hearing or tinnitus. He reports no nosebleeds and no sinus problems. He reports no bleeding gums. He reports no shortness of breath, no coughing up blood, and no snoring. He reports no abdominal pain, not vomiting blood, no dyspepsia/indigestion, no blood in stool or black/tarry stools, and no difficulty swallowing /dysphagia. He reports no hematuria/blood in urine and no erectile dysfunction. He reports no muscle aches or cramps, no muscle weakness, and no arthralgias/joint pain. He reports no right lower leg pain with walking (no claudication). He reports no left lower leg pain with walking (no claudication). He reports no rashes. He reports no loss of consciousness, no focal weakness, no frequent or severe headaches, and normal gait/no unsteadiness or walking difficulty. He reports no depression, no sleep disturbances, no anxiety, and no sleep disturbances: excessive sleepiness during the day (daytime somnolence). He reports no unusual sweating. He reports no bruising, no excessive bleeding, and no unusual bleeding tendency.					
Vitals	Ht:	6 ft 1 in 07/11/2023 07:38 am	Wt:	275.2 lbs 07/11/2023 07:39 am	BMI:	36.3 07/11/2023 07:39 am
	BP:	122/89 sitting 07/11/2023	HR:	57 07/11/2023 07:57 am		

	07:44 am																
Allergies	Reviewed Allergies NKDA																
Medications	Reviewed Medications <table border="1"> <tr> <td>Benadryl Allergy 25 mg tablet Take 2 tablet(s) every day by oral route at bedtime.</td><td>06/28/22 entered</td></tr> <tr> <td>Crestor 10 mg tablet Take 1 tablet(s) every day by oral route.</td><td>01/21/21 entered</td></tr> <tr> <td>Eliquis 5 mg tablet TAKE 1 TABLET BY MOUTH TWICE A DAY, start 07/11/2023</td><td>07/11/23 started</td></tr> <tr> <td>flecainide 100 mg tablet Take 1 tablet(s) every 12 hours by oral route as needed.</td><td>07/11/23 prescribed</td></tr> <tr> <td>metoprolol tartrate 25 mg tablet Take 1 tablet(s) twice a day by oral route as needed.</td><td>07/11/23 prescribed</td></tr> <tr> <td>naproxen 500 mg tablet Take 1 tablet(s) every day by oral route.</td><td>06/28/22 entered</td></tr> </table> 7/11/23 pt did not bring meds, reviewed verbally KJ 06.28.2022 Pt didn't bring meds, verbally reviewed and updated list. JG	Benadryl Allergy 25 mg tablet Take 2 tablet(s) every day by oral route at bedtime.	06/28/22 entered	Crestor 10 mg tablet Take 1 tablet(s) every day by oral route.	01/21/21 entered	Eliquis 5 mg tablet TAKE 1 TABLET BY MOUTH TWICE A DAY, start 07/11/2023	07/11/23 started	flecainide 100 mg tablet Take 1 tablet(s) every 12 hours by oral route as needed.	07/11/23 prescribed	metoprolol tartrate 25 mg tablet Take 1 tablet(s) twice a day by oral route as needed.	07/11/23 prescribed	naproxen 500 mg tablet Take 1 tablet(s) every day by oral route.	06/28/22 entered				
Benadryl Allergy 25 mg tablet Take 2 tablet(s) every day by oral route at bedtime.	06/28/22 entered																
Crestor 10 mg tablet Take 1 tablet(s) every day by oral route.	01/21/21 entered																
Eliquis 5 mg tablet TAKE 1 TABLET BY MOUTH TWICE A DAY, start 07/11/2023	07/11/23 started																
flecainide 100 mg tablet Take 1 tablet(s) every 12 hours by oral route as needed.	07/11/23 prescribed																
metoprolol tartrate 25 mg tablet Take 1 tablet(s) twice a day by oral route as needed.	07/11/23 prescribed																
naproxen 500 mg tablet Take 1 tablet(s) every day by oral route.	06/28/22 entered																
Family History	Reviewed Family History <table border="1"> <tr> <td>Mother</td><td>- Hyperlipidemia</td></tr> <tr> <td></td><td>- Family history of Cardiovascular disease</td></tr> <tr> <td></td><td>- Afib</td></tr> <tr> <td></td><td>- Hypertensive disorder</td></tr> <tr> <td>Father</td><td>- Hyperlipidemia</td></tr> <tr> <td></td><td>- Hypertensive disorder</td></tr> <tr> <td>Maternal Grandfather</td><td>- Myocardial infarction</td></tr> <tr> <td></td><td>- MI at age 28, died of an MI in his early 60s</td></tr> </table>	Mother	- Hyperlipidemia		- Family history of Cardiovascular disease		- Afib		- Hypertensive disorder	Father	- Hyperlipidemia		- Hypertensive disorder	Maternal Grandfather	- Myocardial infarction		- MI at age 28, died of an MI in his early 60s
Mother	- Hyperlipidemia																
	- Family history of Cardiovascular disease																
	- Afib																
	- Hypertensive disorder																
Father	- Hyperlipidemia																
	- Hypertensive disorder																
Maternal Grandfather	- Myocardial infarction																
	- MI at age 28, died of an MI in his early 60s																
Past Medical History	Reviewed Past Medical History Hyperlipidemia: Y																
Past Surgical History	Reviewed Surgical History * Echocardiogram - 02/01/2021 - EF: 60-65% Mild mitral regurg RVSP 20-30mmHg (R) knee surgery 04/2023																
Results/Interpretations	None recorded																
Physical Exam	Constitutional: General Appearance: well-developed, appears stated age, and obese. Level of Distress: comfortable. CSHA Clinical Frailty Assessment 2: Well appearing. Psychiatric: Mental Status: normal affect, concentration, mood, and attention span and alert, cooperative, and cognition intact. Orientation: oriented to time, place, and person. HEENT: Head: normocephalic and atraumatic. Ears: normal hearing. Nose: no lesions on external nose. Eyes: Lids and Conjunctivae: no discharge, pallor, xanthelasma, or arcus. Pupils: PERRLA and EOM intact. Neck: Neck: supple, trachea midline, no masses, and normal ROM. Carotid Arteries: no bruits or thrills and bilateral normal upstroke. Jugular Veins: normal jugular venous pressure. Lungs: Respiratory Effort: unlabored. Chest Exam: no thoracic deformity or chest wall tenderness and normal curvature. Auscultation: no wheezing,																

rales, or rhonchi and clear bilaterally.

Cardiovascular: Precordial Exam: no heaves or precordial thrills and non displaced focal PMI. Rate And Rhythm: regular rate and rhythm. Heart Sounds: no rub, gallop, or click and normal S1 and physiologically split S2. Systolic Murmur: not heard. Diastolic Murmur: not heard. Extremities: no cyanosis, edema, clubbing, or peripheral signs of emboli and normal temperature and capillary refill.

Peripheral Pulses: Pulses of Chest and Abdomen: no palpable aortic enlargement or audible aortic bruit. Posterior Tibialis Pulse normal. Dorsalis Pedis Pulse: normal.

Abdomen: Inspection and Palpation: non distended or tender and soft and no masses.

Musculoskeletal: Inspection: no joint tenderness or swelling, no erythema, and normal ROM.

Neurologic: Gait: normal gait. Motor: normal strength and tone. Neurological: speech fluent and cranial nerves II-XII grossly intact.

Skin: Inspection and Palpation: skin intact and warm and dry.

Assessment and Plan**1. Paroxysmal atrial fibrillation -**

Very sporadic episodes. I am going to start him on some flecainide to use as pill in pocket. He will continue also using Eliquis if he has a prolonged episode. We talked about ablation but he is just not ready to commit to back

I48.0: Paroxysmal atrial fibrillation

- ELECTROCARDIOGRAM
- flecainide 100 mg tablet - Take 1 tablet(s) every 12 hours by oral route as needed. Qty: (30) tablet Refills: 3 Pharmacy: CVS/PHARMACY #7063
- metoprolol tartrate 25 mg tablet - Take 1 tablet(s) twice a day by oral route as needed. Qty: (30) tablet Refills: 3 Pharmacy: CVS/PHARMACY #7063
- Eliquis 5 mg tablet - To be submitted on or around 07/12/2023 Take 1 tablet(s) twice a day by oral route. Qty: (60) tablet Refills: 3 Pharmacy: CVS/PHARMACY #7063

2. Body mass Index 30+ - obesity -

encouraged continued weight loss

Z68.32: Body mass index [BMI] 32.0-32.9, adult

- BODY MASS INDEX: CARE INSTRUCTIONS
- LEARNING ABOUT HEALTHY WEIGHT

3. Obstructive sleep apnea syndrome -

encouraged compliance with therapy

G47.33: Obstructive sleep apnea (adult) (pediatric)

Patient Instructions

Add flecainide 100 mg as needed for A Fib

Continue other meds

- Instructed patient on the benefits of weight loss for better health.

Consider ablation

Discussion Notes

- I have discussed with patient the importance of regular exercise and recommended starting or continuing a regular exercise program for good health.

Return to Office

- to see Wynne Crawford MD for Return MD at MCA East on or around 07/11/2024

Electronically Signed by: WYNNE CRAWFORD MD

