

- 12:30
 - Winslow, 1585
 - LCV: 1/04/2024 w me
 - 61M anti-MDA5 on MMF, bl unprovoked PEs on apixaban
 - a/p: stopbang 6, sleep ref (5/28). off O2 since 12/2021
 - rtc: 6m
 - ☐ TTE, PFT, tbw pcpr re: glucometer
 - ☐ RTC 3-4m
- 13:00
 - Wiggins, 7707
 - LCV: 4/20/23, alex davies
 - 62M w pulm sarc on pred 4 mg w stable sx, GOLD 3A GOLD, ex-TUD 14py
 - ☐ vit d 1,25
 - ☐ DEXA
 - ☐ PFT?
 - ☐ CT chest
 - ☐ EKG
- 14:00
 - Bottom, 5110
 - LCV: new cs? ref from lung mass for abnrm ct c
 - 62M w DM2, HTN, BPH, primary hyperpara, AUD sp ETOH detox 11/24/23, fth R pontine infarct cb L weakness and dysarthria.
 - ct: GGOs process with bibasilar fibrosis, bronchiectasis. There are prominent mediastinal LNs.
 - ☐ HPI
 - ☐ PFT
 - ☐ ANA, RF, CCP, SSA, SSB, CBC w diff,
- 14:30
 - Michael, 9613
 - LCV: 10/26/23
 - 36F w complex neuro hx, pw doe. suspected gerd, micro asp.
 - a/p: gerd per pcpr; pots wu w tilt testing, if wnl would get mip and mep
- 15:00
 - Barnes, 2998
 - LCV: 11/14/23, new cs by me
 - 63M w CAD, L rib fx, pw prog worse doe
 - a/p: PFTs, ct chest (ro hernia worse)
 - pft: TLC 67% (FVC 81%), dlco 68%
 - ct c: sig apical blebs / emphysema. bronchiect R>L. no rml or llin nodules. mild med lad. small hiatal.
- 16:00
 - Washington, 1724
 - LCV: 10/05/23 w me
 - 70M GOLD 2B COPD, TUD, non-trauma ptx. doing well on dulera +/- spiriva. alb use wo titration to sx
 - a/p: triple tx; tob ces
 - ☐ assess inh use
 - ☐ tob ces?

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