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# CardioRisk Laboratories

At the Heart of Good Health

Date **Friday, July 12, 2024**

Office **Paramount Care Physicians**

Sonographer **Michele Walters, RVT**

Appt Slots hh:mm **0:15**

Enter Start Time Here

**8:30**

Full Name	Representative of Paramount Care Physicians <b>Maryann Poole</b>	7/12/2024 Date Signed	<i>Michele Walters, RVT</i> CardioRisk Laboratories Vascular Sonographer, Certified in CIMT
# of Patients	15	Total number of exams performed	14
			100% of AAA patients NPO

#	Scheduled Appointment	Patient ID (LAST, FIRST __MM-DD-YYM/FJM)	Ordered Exam (s)	Provider	PRIOR	CIMT	DOPPLER	AAA	ANPO	FIMT	ABI	Notes
2	8:30 a	BARFIELD, WILLIAM __02-10-61M	AAA	Scott Bell, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	THE PROXIMAL SEGMENT OF THE AO WAS NOT VISUALIZED DUE TO OVERLYING BOWEL GAS
7	8:45 a	BENSON, CYNTHIA __04-30-51F	AAA	Elizabeth Anderson Halabuk, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11	9:00 a	BLAIR, ROSANNA __08-17-43F	ABI	Scott Bell, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
5	9:15 a	BUCHAN, SCOTT __06-15-63M	AAA	Elizabeth Anderson Halabuk, MD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	POSSIBLE PRIOR
13	9:30 a	DAVIS, ALGENE __10-13-47F	CIMT	Nishant Magar, MD	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	POSSIBLE PRIOR
15	9:45 a	FINLEY, LONNIE __08-04-66M	CIMT	Scott Bell, MD	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	POSSIBLE PRIOR
1	10:00 a	INGE, TERRY __05-30-63M	AAA	Elizabeth Anderson Halabuk, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	THE PROXIMAL SEGMENT OF THE AO WAS NOT VISUALIZED DUE TO OVERLYING BOWEL GAS
6	10:15 a	LIVINGSTON, JUDITH __05-03-42F	ABI	Nishant Magar, MD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	POSSIBLE PRIOR
8	10:30 a	LUKENS, RICHARD __09-26-45M	ABI	Scott Bell, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
18	10:45 a	MONIHAN, KATHLEEN __03-17-53F	ABI	Elizabeth Anderson Halabuk, MD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	POSSIBLE PRIOR
4	11:00 a	RECTOR, COLEMAN __10-06-63MX	CIMT	Scott Bell, MD	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NO SHOW
9	11:15 a	ROBERTS, FRANCES __09-25-42F	AAA	Nishant Magar, MD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	POSSIBLE PRIOR
16	11:30 a	ROBERTSON, GREGORY __11-20-61M	ABI	Nishant Magar, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	POSSIBLE PRIOR
3	11:45 a	WHEELER, JASON __06-09-68M	AAA	Scott Bell, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10	12:00 p	WILLIAMS, KRISTY __02-14-86F	ABI	Elizabeth Anderson Halabuk, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
12	12:15 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14	12:30 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17	12:45 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19	1:00 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20	1:15 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21	1:30 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22	1:45 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23	2:00 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24	2:15 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25	2:30 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26	2:45 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27	3:00 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28	3:15 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29	3:30 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30	3:45 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31	4:00 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32	4:15 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33	4:30 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
34	4:45 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
35	5:00 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
36	5:15 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
37	5:30 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Initial Here

Not Scanned CX / No Show

0 Comp Scans

Conditional Formatting (hover to see note)

[1] CLICK "FILE" TOWARD THE LEFT SIDE OF THE TOOL BAR.  
FROM THE DROPDOWN MENU, SELECT "SETTINGS"  
IN THE POP UP YOU WILL SEE "TIME ZONE"  
FROM THE DROPDOWN MENU, SELECT "GMT +00.00 GMT (NO DAYLIGHT SAVING)"

WHEN NECESSARY, CHANGE THE TIME DISPLAY BY SELECTING THE APPROPRIATE TIME ZONE  
FROM THIS CELL'S DROPDOWN MENU.

"DST" REPRESENTS DAYLIGHT SAVINGS TIME" , EST, CST, MST, PST ALL REPRESENT STANDARD  
TIME.