



**CardioRisk Laboratories**  
At the Heart of Good Health

Date **Friday, August 2, 2024**

Office **Paramount Care Physicians**

Sonographer **Michele Walters, RVT**

Appt Slots **0:15** Enter Start Time Here **8:30**

Representative of Paramount Care Physicians		8/2/2024 Date Signed		<i>Michele Walters, RVT</i> CardioRisk Laboratories Vascular Sonographer, Certified in CIMT										
Full Name <b>Emma Maxwell</b>		Total number of exams performed <b>18</b>		100% of AAA patients NPO										
# of Patients	23	Totals	13	9	0	5	5	0	4	5	Not Scanned CX / No Show		0	Comp Scans
#	Scheduled Appointment	Patient ID (LAST, FIRST __MM-DD-YYM/F)M	Ordered Exam (s)	Provider	P R I O R	C I M T	D O P P L E R	A A A	? N P O	F I M T	A B I	Notes	Conditional Formatting (hover to see note)	
12	8:30 a	BOBEREK,FRANK__02-23-39M	CIMT	Scott Bell, 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
13	8:45 a	COMER,KAREN__04-26-67F	CIMT	Elizabeth Anderson Halabuk, MD	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
7	9:00 a	DODSON,JEFF__02-2367M	CIMT	Scott Bell, MD	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
18	9:15 a	GLEASON,ELLEN__04-08-52F	CIMT	Elizabeth Anderson Halabuk, MD	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22	9:30 a	HAVRILAK,SANDRA__11-23-61FX	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
23	9:45 a	HOLLAR,GEORGE__05-21-34MX	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"/>			NO SHOW
25	10:00 a	HOWARD,ANDREW__12-09-83M	CIMT	Elizabeth Anderson Halabuk, MD	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8	10:15 a	HOWARD,LINDA__12-27-59F	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"/>			
2	10:30 a	KENNEY,ANN__06-10-64FX	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"/>			NO SHOW
16	10:45 a	KRIEGER,SUSAN__06-13-62FX	CIMT	Nishant Magar, 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
5	11:00 a	KURIHARA,AYAKO__04-28-37F	AAA	Nishant Magar, MD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
26	11:15 a	MCCOY,ELLEN__02-02-55F	CIMT	Elizabeth Anderson Halabuk, MD	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11	11:30 a	SCHNEIDER,LESLIE__03-18-42F	CIMT	Scott Bell, MD	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6	11:45 a	SEELY, JR, DANIEL__05-26-50M	AAA	Nishant Magar, MD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10	12:00 p	SOLOMON, JUDITH__05-07-43F	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"/>			
9	12:15 p	SOLOMON, RODGER__10-07-43M	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"/>			
24	12:30 p	TUOHY, MARY__09-11-53F	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
15	12:45 p	VARANELLI, CHRISTINE__06-18-70FX	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"/>			CX
17	1:00 p	WEBSTER, KEITH__04-03-67M	CIMT	Elizabeth Anderson Halabuk, MD	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4	1:15 p	WEINER, EDWARD__08-07-56M	AAA	Nishant Magar, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
14	1:30 p	WHITE, RICHARD__12-09-47M	CIMT	Elizabeth Anderson Halabuk, MD	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
1	1:45 p	ZAGER, EDWARD__12-28-48M	AAA	Nishant Magar, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3	2:00 p	ZIELINSKI, LOTTIE__02-14-39F	AAA	Elizabeth Anderson Halabuk, MD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			POSSIBLE PRIOR
19	2:15 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
20	2:30 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
21	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"/>			

[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.