



# CardioRisk Laboratories

At the Heart of Good Health

Date **Friday, August 23, 2024**

Office **Paramount Care Physicians**

Sonographer **Michele Walters, RVT**

Appt Slots

hh: mm **0:15**

Enter Start Time Here

**8:15**

Representative of  
Paramount Care Physicians  
Full Name  
**Maryann Poole**

8/23/2024  
Date Signed

*Michele Walters, RVT*

CardioRisk Laboratories Vascular Sonographer, Certified in CIMT

Initial Here

Total number of exams performed **21**

**100%** of AAA patients NPO

# of Patients 22		22		Totals		15	4	0	5	5	0	12	1	0 Comp Scans	
#	Scheduled Appointment	Patient ID (LAST, FIRST __MM-DD-YYM/F/M)	Ordered Exam (s)	Provider	PRIOR	CIMT	DOPPLER	AAA	?NPO	FIMT	ABI	Notes	Additional Formatting (hover to see note)		
6	8:15 a	BELKO, JUDY __05-20-55F	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"/>				
13	8:30 a	CHRIST, AMY __09-07-56F	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"/>				
2	8:45 a	DONOVAN, MICHAEL __08-28-58M	AAA	Nishant Magar, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Y	<input type="checkbox"/>	<input type="checkbox"/>				
10	9:00 a	DOUFFAS, SUSAN __03-23-52F	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"/>				
18	9:15 a	FORSYTH, STEVEN __10-03-79M	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"/>				
3	9:30 a	KUNKLER, KIRSTEN __06-14-61F	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		
14	9:45 a	MCDONALD, JOHN __09-04-38M	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"/>				
15	10:00 a	MCDONALD, RITA __07-02-39F	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"/>				
26	10:15 a	MILLER, LYMAN __01-21-56M	ABI	Scott Bell, MD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>				
7	10:30 a	MININGER, LORRAINE __01-18-41F	AAA	Scott Bell, MD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Y	<input type="checkbox"/>	<input type="checkbox"/>				
1	10:45 a	MOKODEAN, JOHN __12-10-56M	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		
23	11:00 a	MONTGOMERY, PATRICIA __02-24-52F	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"/>				
25	11:15 a	MURRAY, JOHANNA __06-24-46F	ABI	Scott Bell, MD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>				
27	11:30 a	PATTON, DAVID __10-17-64M	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"/>				
19	11:45 a	PATTON, FARRIS __02-20-37Mx	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		
17	12:00 p	PORTER, LESLIE __03-04-62F	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"/>				
11	12:15 p	RECHTER, MARGARET __05-05-61F	AAA	Elizabeth Anderson Halabuk, MD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Y	<input type="checkbox"/>	<input type="checkbox"/>		POSSIBLE PRIOR		
24	12:30 p	SAVACOO, JR, EDWIN __08-04-47M	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"/>				
4	12:45 p	SCHNEIDER, CLAUDIA __02-22-57F	AAA	Scott Bell, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Y	<input type="checkbox"/>	<input type="checkbox"/>				
5	1:00 p	SNYDER, DAVID __02-08-44M	AAA	Nishant Magar, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Y	<input type="checkbox"/>	<input type="checkbox"/>		THE PROXIMAL SEGMENT OF THE AO WAS NOT VISUALIZED DUE TO OVERLYING BOWEL GAS		
8	1:15 p	STRUNK, CHARLES __06-30-53M	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"/>				
12	1:30 p	WALKER, SAMUEL __08-23-49M	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"/>				
9	1:45 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
16	2:00 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
20	2:15 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
21	2:30 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
22	2:45 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
28	3:00 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
29	3:15 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
30	3:30 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
31	3:45 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
32	4:00 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
33	4:15 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
34	4:30 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
35	4:45 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
36	5:00 p				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
37	5:15 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.