

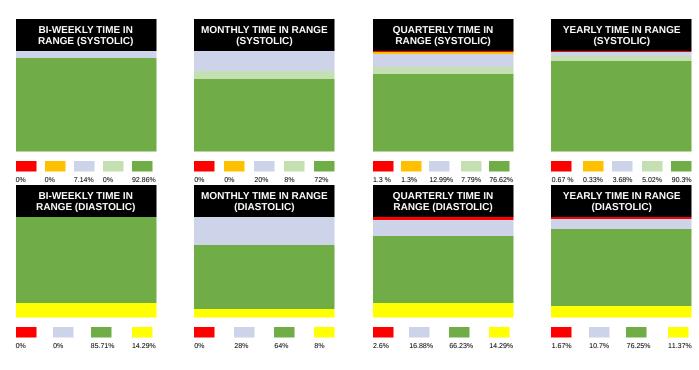


40 Mitchell Ave, Binghamton, NY 13903 Phone:(607) 723-1676

Patient Name: Carol Benjamin

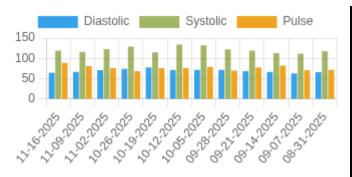
Height: 5.9

MRN #: 250 Weight: 0 Birth Year: Hypertension: S1



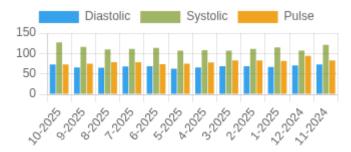
Blood Pressure Averages

Blood Pressure Averages: Weekly



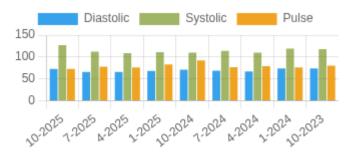
Week	Systolic(n)	Diastolic(n)	Pulse(n)
11-16-2025	119 (3)	65 (3)	89 (3)
11-09-2025	116 (7)	67 (7)	81 (7)
11-02-2025	123 (7)	71 (7)	76 (7)
10-26-2025	129 (7)	74 (7)	69 (7)
10-19-2025	115 (1)	78 (1)	76 (1)
10-12-2025	134 (1)	72 (1)	76 (1)
10-05-2025	132 (6)	72 (6)	79 (6)
09-28-2025	122 (7)	72 (7)	70 (7)
09-21-2025	119 (7)	69 (7)	78 (7)
09-14-2025	113 (7)	67 (7)	82 (7)
09-07-2025	112 (7)	63 (7)	71 (7)
08-31-2025	118 (7)	66 (7)	72 (7)

Blood Pressure Averages: Monthly



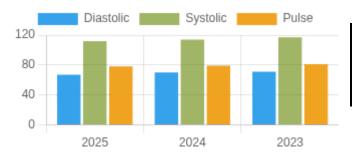
Month-Year	Systolic(n)	Diastolic(n)	Pulse(n)
10-2025	127 (18)	73 (18)	73 (18)
9-2025	116 (30)	66 (30)	75 (30)
8-2025	110 (31)	65 (31)	79 (31)
7-2025	111 (32)	68 (32)	79 (32)
6-2025	114 (31)	69 (31)	74 (31)
5-2025	107 (31)	63 (31)	75 (31)
4-2025	108 (26)	66 (26)	78 (26)
3-2025	107 (24)	69 (24)	83 (24)
2-2025	111 (19)	69 (19)	83 (19)
1-2025	115 (22)	67 (22)	82 (22)
12-2024	107 (13)	71 (13)	94 (13)
11-2024	121 (3)	73 (3)	83 (3)

Blood Pressure Averages: Quarterly



Quarter-Year	Systolic(n)	Diastolic(n)	Pulse(n)
10-2025	127 (18)	73 (18)	73 (18)
7-2025	112 (93)	66 (93)	78 (93)
4-2025	109 (88)	66 (88)	76 (88)
1-2025	111 (65)	68 (65)	83 (65)
10-2024	110 (16)	71 (16)	92 (16)
7-2024	114 (30)	69 (30)	77 (30)
4-2024	110 (45)	67 (45)	79 (45)
1-2024	119 (51)	74 (51)	76 (51)
10-2023	118 (19)	74 (19)	80 (19)

Blood Pressure Averages: Yearly



Year	ear Systolic(n) Diastolic(n)		Pulse(n)
2025	112 (264)	67 (264)	78 (264)
2024	114 (142)	70 (142)	79 (142)
2023	117 (91)	71 (91)	81 (91)

Blood Sugar Averages

Week	Before breakfast	2 hours after breakfast	Before lunch	2 hours after lunch	Before dinner	2 hours after dinner	Bedtime
11-22-2025	185(4)		178(2)		204(4)		202(3)
11-14-2025	146(8)		165(3)		175(6)		195(7)
11-06-2025	142(8)		164(6)		190(7)		197(7)

Month-Year	Before breakfast	2 hours after breakfast	Before lunch	2 hours after lunch	Before dinner	2 hours after dinner	Bedtime
11-2025	150(18)		161(9)		187(16)		195(16)

10-2025	151(18)		179(6)	172(11)	161(1)	164(13)
09-2025	137(30)		147(10)	147(21)		151(24)
08-2025	146(32)	205(1)	152(21)	149(30)		166(29)

Year	Before breakfast	2 hours after breakfast	Before lunch	2 hours after lunch	Before dinner	2 hours after dinner	Bedtime
01-01-2025	151(304)	179(4)	161(157)	186(11)	166(224)	201(2)	194(250)
01-01-2024	146(282)	81(2)	162(156)	217(8)	186(192)	190(5)	221(224)
01-01-2023	146(178)		134(134)		149(142)	189(1)	178(129)

Chat

Sender	Receiver	Messege	Date&Time
R.A. Ramanujan , M.D.	Carol Benjamin	Happy Thanksgiving!	26-11-2025
Carol Benjamin	R.A. Ramanujan , M.D.	Am in a lot of pain as night and today in my back and neck. Waiting for the nurse to come today so she can check me out. Called D.Jayaramanwaiting fr him to call back. Hoping to get some blood work done to see if it a reaction to the infusion. Paperwork from infusion office said a reaction could happen between 1 and 8 days after the one dose infusion.	20-11-2025
R.A. Ramanujan , M.D.	Carol Benjamin	🙏 for the update and best	20-11-2025
Carol Benjamin	R.A. Ramanujan , M.D.	Had iron infusion yesterday Nov. 18th. Today my blood sugar levels are high and have bone pain. my color is better. Took 15 units of Toujeo tonightcab before bed. I. haven't been eating much so I can't blame the rising blood sugar levels on that. Dr Marahaba felt I should be on the Mounjero 2.5. He said to stop the Metamucil and use MiraLAX on a daily basis and continue to take Amitiza twice a dayat breakfast time and dinner time. He will see me in 3 months or beforeif necessary. My upper back and shoulders are very sorethis morning it was hard to breathewith the pain! My O2 numbers are fine. Am assuming the pain in my shoulders and upper back was a reaction to the infusion! Who knowsKelly rubbed me down when she got home from work and put my tens unit on again. Will keep you updated concerned about my bs numbers!!!	19-11-2025
Carol Benjamin	R.A. Ramanujan , M.D.	Have to have an iron infusion on Monday. Am still having difficulty moving my bowels even though I am taking Metamucil 2tsp. daily w/ occasionalcab MiraLAX. Stool is soft but just doesn't seem to want to pass. If I don't goI gain a little weight. when I go it drops back down. I feel my numbers are high considering what I am eating. I'm afraid the Mounjero is causing my lack of bowel actionotherwise I seem to be doing ok on it. But, the bowel problem is bad enough to cause me concern. I'd really like to continue SLOWLY with it but am concerned about the continuing bowel issue! I also go to see my gastroenterologist on Mondayperhaps he can shed so light on the situation! Will let you know what Dr. Marahaba has to say after I see him on Monday. I go right from his office to the iron infusion at General Hospital. Thank you for keeping track of me!	14-11-2025
Carol Benjamin	R.A. Ramanujan , M.D.	I will need a prescription for Mounjero 2.5 to start the Mounjero. You can send it to CVS on Upper Front Street and Kelly will pick it up. In the meantime I will be taking the Toujeo 14 units at bedtime. I will let you know when I start the Mounjero. OK? Please let me know when you sent it in so we will be on the "lookout" for the Mounjero 2.5 prescription. Gratefully, cab*	01-11-2025
R.A. Ramanujan , M.D.	Carol Benjamin	GM, Great! Wii track and trend	01-11-2025
R.A. Ramanujan , M.D.	Carol Benjamin	Please start today 10 units long acting insulin and Mounjaro please.	31-10-2025
Carol Benjamin	R.A. Ramanujan , M.D.	No! Am only controlling bs by what I eat. NO medication AT ALLno insulin, no Ozempic, no Monjero, no Toujeonothing medication wise!!!! I am hoping you will come up with something that will be best for my bs, heart, and kidneys but start slowly . It appears my reaction to Monjero was the constipation. Otherwise nothing	31-10-2025

		else. I have IBS and I guess the constapation interfered with the fluid restriction and use of Bumex which the change the dose regularly, depending on my bloodwork. It's hard to regulate all my systemsI'm a real "puzzle"! Hard for all my specialists to coordinate and make it all work together. Now Lexi arranged for me to have my bloodwork drawn at my home, so if you need regular bloodwork, so you can keep better track, it will be easier for me. She is a great asset!!!	
R.A. Ramanujan , M.D.	Carol Benjamin	GM, RU back on your old combination for diabetes ??	31-10-2025
Carol Benjamin	R.A. Ramanujan , M.D.	Will you get back to me about my blood sugars and what I should do. Am worried about this. I am still only trying to control it by how much and what I eat. ↓ ❤️	27-10-2025
R.A. Ramanujan , M.D.	Carol Benjamin	Glad to know U R home.	27-10-2025
Carol Benjamin	R.A. Ramanujan , M.D.	I also think that you need to know that I haven't had any Monjero or anything to control my blood sugar since Friday October 10, 2025. I was not on a diabetic diet in the hospital, so I picked and chose as best I could to keep my numbers under control. I asked for my bs# to be checked and best I can say is the highest was around 230 and the lowest about 130. Not bad but would like to improvebut only as fast as my body will allow. That's why my well thought out suggestion what I just express. AgainI am grateful!!cab	26-10-2025
Carol Benjamin	R.A. Ramanujan , M.D.	drugs can be mixed and matchedhow often I can take them WITHOUT HARMING my KIDNEYS! I feel I am taking too much of any doctor's time and NO ONE doctor has the time to address this issue! This is what I would like to try! I would like to reduce the Monjero to a beginning dose, let me take something that I can adjust my blood sugar levels with, and gradually increase the Monjero so that I can control my bowels with something that keeps my whole body systems without causing problems for my kidney and metobolic system! I DO WANT to gradually increase the MonjeroI agree!! But, I think my body needs time to adjust. Otherwise, I wind up wasting everyone time bouncing back and forth to the ER and admissions to the hospital! I'm sorry there so many irrors in getting this message across but I ma not very techie! Thank you for your patience, and peserverance with me. I am very grateful! cabwith	26-10-2025
Carol Benjamin	R.A. Ramanujan , M.D.	Dr. Ram, I believe my reaction to the Monjero was that caused my IBD to flair and that's what caused the perfect storm that sent me to the hospital for 10 days. You ask if I will increasethe Monjerothe Hospitalist on discharge (at my request) suggested backing off the Monjero and slowly increasing it so I can better control my bowels. I am trying not to get diarrhea but keep my back from being hurt by excessive straining. My problem is I don't know what over the counter	26-10-2025
Carol Benjamin	R.A. Ramanujan , M.D.	Thank you Lexi for arranging bloodwork directly from Home Health Care for me!!!! Thank you Lexi for arranging bloodwork directly from Home Health Care for me!!!! I now have tele visitsnot sue how long that can lastI could tell you what my needs arenot sure who else I can callright now you and DR. Ram seem to be the ones concerned with me and my health whole body health care. If you can help with coordinating my total body health carethat would take my stress levels DOWN tremendously!!!	26-10-2025
R.A. Ramanujan , M.D.	Carol Benjamin	Next lab please have them include Magnesium with calcium. Sodium looks much better. Please consider going up on Mounjaro.	14-10-2025
null Lexi Matthias, LPN	Carol Benjamin	HI CAROL, I TRIED TO CALL YOU BACK BUT IT WENT TO VOICEMAIL. I SPOKE TO AMY AT THE LAB WHO STATED SHE'S NOT SURE WHY YOU WERE TOLD DR. RAM WAS "BLOCKED" SHE'S NOT FAMILIAR WITH THAT TERM. DO YOU REMEMBER THE NAME OF THE PERSON YOU SPIKE WITH? IN ANYCASE, SHE DIDN'T SEE ANY REASON WHY Dr. RAM WOULDN'T BE ABLE TO SEE THE RESULTS AND FAXED US A COPY. I ALSO FAXED AN ORDER FOR HOME DRAW TO DO LAB WORK. THEY SHOULD BE IN CONTACT THIS WEEK TO LET YOU KNOW WHAT DAY THEY WILL BE AT YOUR HOUSE. LET ME KNW HOW ELSE I CAN HELP. LEXI	13-10-2025
Carol Benjamin	R.A. Ramanujan , M.D.	I am sorry if I offended you in some way. It certainly was not my intention as I am MOST grateful for you being there and giving me advice when I felt that you were the one doctor who cares the most about his patients and their well being. I would NEVER want to hurt you IN ANY WAY! cab	08-10-2025
Carol Benjamin	R.A. Ramanujan , M.D.	You also, I assume you want me to continue taking the Mounjero as directed by you for my diabetes, continue to send daily information to you via the portal, and call for an appropriate time for an office visit that Kelly can get me to, regardless of anything	08-10-2025

Systolic Variability Trends

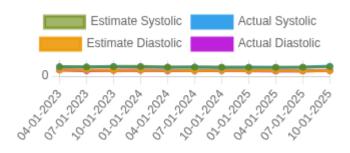


- 1. CV –The coefficient of variation (CV) is the ratio of the standard deviation to the mean. The higher the coefficient of variation, the greater the level of dispersion around the mean, Units = mmHg.
- 2. ARV Average real variability (ARV) is a method for measuring short-term, reading-to-reading, within-subject variability. It is defined as the average of the absolute differences between consecutive readings, Units = mmHg.
- 3. SD Standard deviation is a statistical measurement of variability. It measures how much variation there is from the average (mean), Units = mmHg.

Diastolic Variability Trends



Kalman Trends



- 1. Mean(Arithmetic Mean) Mean is the average of a set of numbers
- 2. SD Standard deviation is a statistical measurement of variability. It measures how much variation there is from the average (mean).
- 3. V- Variance determines the spread of numbers.. It measures how far each number in the set is from the mean (average) and from every other number in the set.

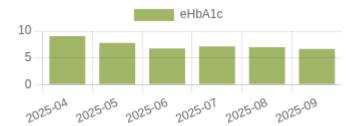
PSR



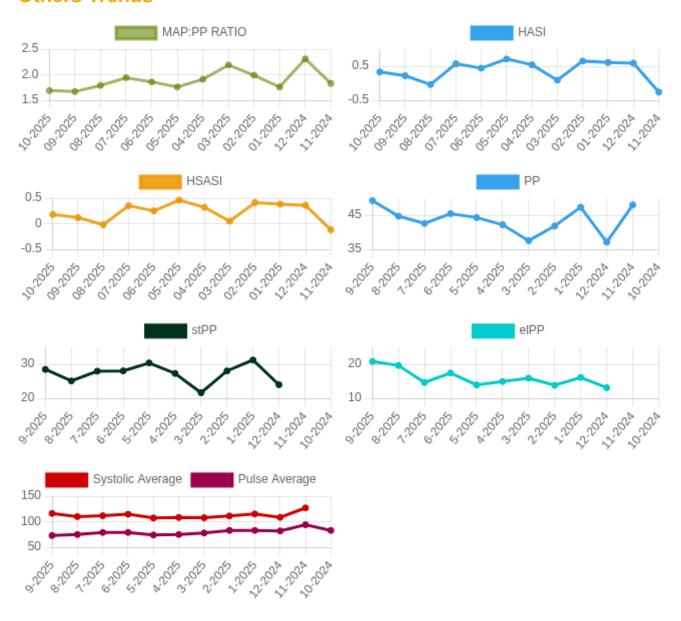
PSR: Pulse stiffening ratio (PSR) is the ratio between systolic and diastolic stiffness. It can be expressed as PSR = [systolic stiffness]/[diastolic stiffness].

HbA1c Trends

Estimated HbA1c - eHbA1c



Others Trends



- 1. MAP:PP Ratio- Mean Arterial Pressure: Pulse Pressure Ratio
- 2. HASI- Home arterial stiffening index
- 3. HSASI- Home Symmetric arterial stiffening index
- 4. PP- Pulse Pressure
- 5. WIF or widening factor number. WIF = K-1/In(K)-1, where K is the variability ratio (K = Systolic Std. Dev / Diastolic Std. Dev)
- 6. eIPP- Elastic component of pulse pressure. eIPP= (PP stPP)
- 7. stPP- Stiffening component of pulse pressure. stPP= PP/(1+ WIF)

eCO graph



eCO (Estimated Cardiac Output) Normal range to be added 5-10 liters/minute

Units of eCO (Estimated Cardiac Output) – liters/minute

eCBP graph



eCBP (Estimated Central Blood Pressure) normal range -0-100 mmHg

- 1. Cardiac output scale is in liters/minute. Normal range at rest is 5-6 liters/min and (with activity goes up to 30 -35 liters/min)
- 2. Central mean BP is Squared, Mean radial artery BP/diastolic BP in mmHg. Scale in mmHg and range is in mmHg and the scale Should be between 0-50 50-100, 150 and 200 mmHg. No established normal at the moment.

MAP graph



MAP -Mean arterial blood pressure. MAP = Diastolic blood pressure + 1/3(Systolic blood pressure - Diastolic blood pressure)

Reference & Abbreviations

Guide to abbreviations and blood pressure, pulse and other Metrics.

HBPM -Homme blood pressure measurement.	HBS -Home blood sugar
PP -Pulse pressure	AP -Average pulse
BPV -Blood pressure variability	SV -Systolic variability
DV -Diastolic variability	PV -Pulse variability
ARV -Average real variability	CV -Coefficient of variation %
SD -Standard deviation	MAP -Mean arterial blood pressure
MAP: PP Mean Arterial Pressure : Pulse Pressure	HASI -Home arterial stiffness index
HSASI -Home Symmetric arterial stiffness index	Estimated CO -Cardiac output [CO= (PPxHR)x.002]
PSR Pulse stiffening ratio. (PSR = SBP/DBP or slope of systolic BP/slope of diastolic BP)	

Estimated central blood pressure ECBP (ECBP = brachial MBP2/brachial DBP or ECBP = radial MBP2/radial DBP)

Normal Ranges.

Systolic BP 110 - 120 mm Hg

Diastolic BP 70 - 80 mmHg

Pulse 60 - 100/min

Pulse pressure (PP) 40 mmHg (Low PP less than 25% of the systolic BP and high PP greater than 100 mm Hg)

Normal stroke volume (SV) 60 -100 ml

Cardiac output (CO) SV x pulse rate/min

Estimate Cardiac output = Stroke volume / m

Blood pressure variability; Not defined in USA. But desirable ranges ESH guidelines; Systolic day time BP less than 15 mmHg and Diastolic less than 7.9 mmHg and Weighted SD less than 12.8 mmHg for systolic

Definitions.

MAP:PP ratio not defined.

Pulse stiffening ration; Not defined. Pulse pressure * inverse log (std. dev. systolic / std. dev. Diastolic) / (std. dev. systolic / std. dev. Diastolic) - 1 (Pulse pressure X In (K)/(K-1) where K is systolic Sd /diastolic SD.)

Home arterial stiffness index; Not defined

Home arterial symmetric arterial index: Not defined.

Central blood pressure: Not defined

References.

MAP;

Chemla D, Antony I, Zamani K, Nitenberg A. Mean aortic pressure is the geometric mean of systolic and diastolic aortic pressure in resting humans. J Appl Physiol (1985). 2005 Dec;99(6):2278-84. doi: 10.1152/japplphysiol.00713.2005. Epub 2005 Jul 28. PMID: 16051709. Tien LYH, Morgan WH, Cringle SJ, Yu DY. Optimal Calculation of Mean Pressure From Pulse Pressure. Am J Hypertens. 2023 May 21;36(6):297-305. doi: 10.1093/ajh/hpad026. PMID: 36945835; PMCID: PMC10200551.

PSR:

Gavish B, Izzo JL Jr. Arterial Stiffness: Going a Step Beyond. Am J Hypertens. 2016 Nov 1;29(11):1223-1233. doi: 10.1093/ajh/hpw061. PMID: 27405964.

DCBP:

Chemla D, Millasseau S, Hamzaoui O, Teboul JL, Monnet X, Michard F, Jozwiak M. New Method to Estimate Central Systolic Blood Pressure From Peripheral Pressure: A Proof of Concept and Validation Study. FrontCardiovasc Med. 2021 Dec 15;8:772613. doi: 10.3389/fcvm.2021.772613. PMID: 34977186; PMCID: PMC8714848.

CO

Koenig J, Hill LK, Williams DP, Thayer JF. Estimating cardiac output from blood pressure and heart rate: the liljestrand& zander formula. Biomed Sci Instrum. 2015;51:85-90. PMID: 25996703; PMCID: PMC5317099.

BP

Mean arterial blood pressure;

Guidelines recommend less than 125 mmHg Poon LC, Shennan A, Hyett JA, Kapur A, Hadar E, Divakar H, McAuliffe F, da Silva Costa F, von Dadelszen P, McIntyre HD, Kihara AB, Di Renzo GC, Romero R, D'Alton M, Berghella V, Nicolaides KH, Hod M. The International Federation of Gynecology and Obstetrics (FIGO) initiative on pre-eclampsia: a pragmatic guide for first-trimester screening and prevention. Int J

GynaecolObstet 2019;

145(Suppl 1):1–33.Not defined in general (desirable MAP, 90 mm Hg)Melgarejo JD, Yang WY, Thijs L, Li Y, Asayama K, Hansen TW, Wei FF, Kikuya M, Ohkubo T, Dolan E, Stolarz-Skrzypek K, Huang QF, Tikhonoff V, Malyutina S, Casiglia E, Lind L, Sandoya E, Filipovský J, Gilis-Malinowska N, Narkiewicz K, Kawecka-Jaszcz K, Boggia J, Wang JG, Imai Y, Vanassche T, Verhamme P, Janssens S, O'Brien E, Maestre GE, Staessen JA, Zhang ZY; International

Database on Ambulatory Blood Pressure in Relation to Cardiovascular Outcome Investigators*. Association of Fatal and Nonfatal Cardiovascular Outcomes With 24-Hour Mean Arterial Pressure. Hypertension. 2021 Jan;77(1):39-48

We hope these complementary multiparametric data along with standard set used in daily practice helps to understand home blood pressure trend and other information they may potentially generate in the future to understand medication effects and patient management.

Terms & Conditions Accepted: YES

Attention:

This electronic pdf file contain information intended for the exclusive use of the individual or entity.