

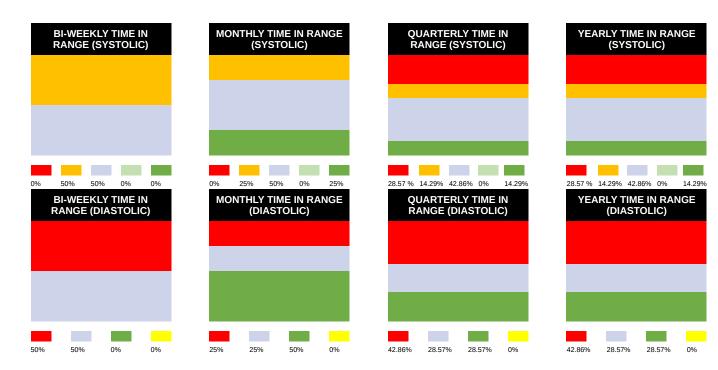


#### 40 Mitchell Ave, Binghamton, NY 13903 Phone:(607) 723-1676

Patient Name: Emily Petko Height:

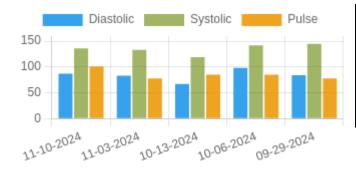
MRN #: 8194 Weight:

Birth Year: Hypertension: S1



### **Blood Pressure Averages**

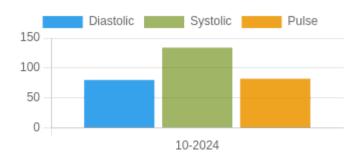
#### Blood Pressure Averages: Weekly



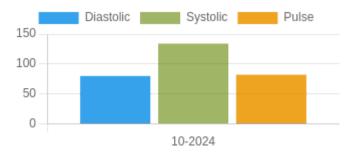
Week	Systolic(n)	Diastolic(n)	Pulse(n)
11-10-2024	136 (1)	87 (1)	101 (1)
11-03-2024	133 (1)	83 (1)	78 (1)
10-13-2024	119 (2)	67 (2)	85 (2)
10-06-2024	142 (1)	98 (1)	85 (1)
09-29-2024	145 (2)	84 (2)	78 (2)

## **Blood Pressure Averages: Monthly**

Month-Year	Systolic(n)	Diastolic(n)	Pulse(n)
10-2024	134 (5)	80 (5)	82 (5)

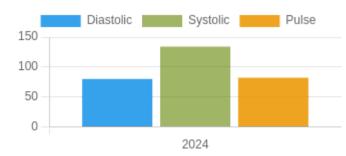


# **Blood Pressure Averages: Quarterly**



Quarter-Year	Systolic(n)	Diastolic(n)	Pulse(n)
10-2024	134 (5)	80 (5)	82 (5)

# **Blood Pressure Averages: Yearly**



Year	Systolic(n)	Diastolic(n)	Pulse(n)
2024	134 (5)	80 (5)	82 (5)

# **Blood Sugar Averages**

Week	Before breakfast	2 hours after breakfast	Before lunch	2 hours after lunch	Before dinner	2 hours after dinner	Bedtime
10-24-2024						205(1)	

Month-Year	Before breakfast	2 hours after breakfast	Before lunch	2 hours after lunch	Before dinner	2 hours after dinner	Bedtime
10-2024	179(6)				159(1)	215(3)	186(1)

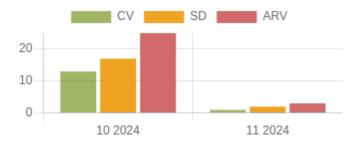
Year	Before breakfast	2 hours after breakfast	Before lunch	2 hours after lunch	Before dinner	2 hours after dinner	Bedtime
01-01-2024	179(6)				159(1)	215(3)	186(1)

# <u>Chat</u>

Sender	Receiver	Messege	Date&Time
null Sue Ward	Emily Petko	Medicare open enrollment has begun and will continue through December 7th.Please be aware that we do NOT participate with all Medicare Advantage plans!! If you choose a plan that we do not participate in ,we will not be able to continue seeing you as our patient. As always ,we require you to present your insurance card & copay at every visit,so remember to bring the new card if you change. Theses are the Medicare Advantage plans we participapte with: AARP Medicare Aetna Medicare	

		BCBS/Excellus Medicare CDPHP Medicare Cigna/MVP Medicare Humana Medicare Medicare/Medicare Railroad United Healthcare Medicare United Health care Dual Complete If you have any questions, please contact our office at 607-723-1676. We have sent a similar message through the patient portal as well. No response back through the checkmyvitals app is needed. Hope to see you all next year DCA providers and staff	
Emily Petko	R.A. Ramanujan , M.D.	Note for Amy - Mom set me up with a Dexcom G7 last night and I used the code. Let me know if you're not seeing the data come through. I will pick up the ones that were ordered hopefully today once the pharmacy says they are ready. Thank you!	25-10-2024
R.A. Ramanujan , M.D.	Emily Petko		18-10-2024
Emily Petko	R.A. Ramanujan , M.D.	I have made an appointment with Amy for 10/24 at 2 pm.	18-10-2024
Emily Petko	R.A. Ramanujan , M.D.	mom gave me an update just now that you mentioned getting me set up with a CGM.	18-10-2024
Emily Petko	R.A. Ramanujan , M.D.	morning! I will call to make an appointment with Amy today. I did not see that first message. thank you!	18-10-2024
R.A. Ramanujan , M.D.	Emily Petko	Hello Emily, What is the best time to make connection ??	18-10-2024
R.A. Ramanujan , M.D.	Emily Petko	Hi Emily, We can make a stronger case if we can collect blood sugar from continuous glucose monitor. Mom is well informed about this. Best	04-10-2024
null Lexi Matthias, LPN	Emily Petko	HI EMILY, DR RAM WOULD LIKE YOU TO SCHEDULE AN APPT TO SEE AMY TO DISCUSS CONTINUOUS BLOOD GLUCOSE MONITORS (FREESTYLE LIBRE OR DEXCOM). PLEASE CSLL THE OFFICE TO SCHEDULE. THANKS. LEXI	04-10-2024

# **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

Estimate Systolic Actual Systolic Estimate Diastolic Actual Diastolic Actual Diastolic Actual Diastolic Actual Diastolic 120 100 80 10-01-2024

**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.

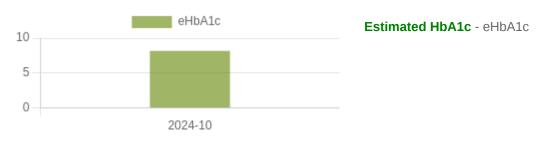
**PSR:** Pulse stiffening ratio (PSR) is the ratio between systolic and diastolic stiffness. It can be expressed as

PSR = [systolic stiffness]/[diastolic stiffness].

### **PSR**

	PSR	
1.2		
1.1 📍		
1.0		
10-01-2024		

HbA1c Trends



# **Others Trends**



90	Systolic Average	Pulse Average
85 -		
80	•	
75 -		
9-2	2024	

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  $- \ 0 - 100 \ \text{mmHg}$ 

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
<b>DV</b> -Diastolic variability	<b>PV</b> -Pulse variability
<b>ARV</b> -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]
<b>PSR Pulse stiffening ratio.</b> (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.

### СО

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 andother information they may potentially generate in the future to understand medication effects and patient management.

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