

DR. LARRY WATKINS

1516C 1³/₄" EXPANSION
1526E 3¹/₄" EXPANSION
1536G 5¹/₄" EXPANSION

FOSTER, Vincent W., Jr.

PROGRESS NOTES

8/2/93 I talked for about 10-15 minutes, maybe longer, with Captain Charles Hume, Washington, D.C. Park Police, who is charge of the investigation into Mr. Foster's suicide. Phone number is 202-690-5054. I basically discussed what's in the chart. LSW/as

*rec'd 5/16/94
from Dr. Larry Westbrook
by SA H. Alvin Sug*

VINCE FOSTER

7-19-93

Re Desyrel 50mg #30

Sig: i to iii @ HS.

c 5 refills

ESW/leg

Pharmacy # (202) 337-4100

7/21/93 Pt committed suicide on 7/20/93

7/21/93 I talked to Vince on 7/19/93, at which time he complained of anorexia and insomnia. He had no GI symptoms. We discussed the possibility of taking Axid or Zantac to help with any ulcer symptoms as he was under a lot of stress. He was concerned about the criticism they were getting and the long hours he was working at the White House. He did feel that he had some mild depression. I started him on Desyrel, 50 mg. He was to start with one at bedtime and move up to three. He was to call me in about ten days to let me know how he was doing. I received word at about 10:20 p.m. on 7/20/93 that he had committed suicide.

LSW/as

LARRY S. WATKINS, M.D.
INTERNAL MEDICINE
DOCTORS BUILDING 500 S. UNIVERSITY SUITE 402
LITTLE ROCK, ARKANSAS 72205
TELEPHONE 661-9740

FOIA(b)(6)

FOSTER, Vincent W. Jr.

12-31-92

PP: 47 year old white male from Little Rock

CC: Several problems

HPI: Patient has been having recurrent tendonitis of his right elbow probably related to weight lifting. Feldene does help him when he needs it.

He has been having cervical spine discomfort and seems like tension makes that worse. He has fair amount of popping in his neck also.

He has been having some insomnia over the past month, or two.

He has fairly strong family history of hypothyroidism with both sisters of being hypothyroid.

SH: Grew up in Hope and went to Davidson College, one year of college at Vanderbilt and then two at Fayetteville. He has been practicing at the Rose Law Firm for 20 years. He has been in Little Rock for 21 years. He has been married for 24 years. His wife, Lisa, is 47 years old [redacted] Otherwise, in good health. They have three children. Vincent is 20 and junior at TCU, Laura is a sophomore at Vanderbilt. Bruce is 17 and junior at Catholic High School. Three of them live together and get along fine. He works 45 to 50 hours per week primarily doing litigation work. He walks on stair master 20 minutes daily, jogs some on weekends. They do some traveling.

PROGRESS NOTES

Examination is unremarkable. We are doing routine tests. I am going to give him some Restoril and some Feldene. I will see him back in one week.

MEDICATIONS:

Feldene 20 mg. daily prn
Restoril 30 mg. hs prn

LSW/ph

12-31-92 Fluogen 0.5cc Im L. D. W. R.

FOSTER, VINCENT W., JR.
 UNDERLINE Indicates Negative or Normal Findings. A CIRCLE Indicates Positive or Abnormal Findings.

PAST HISTORY: Dec. 31, 1992 Referred: N/A

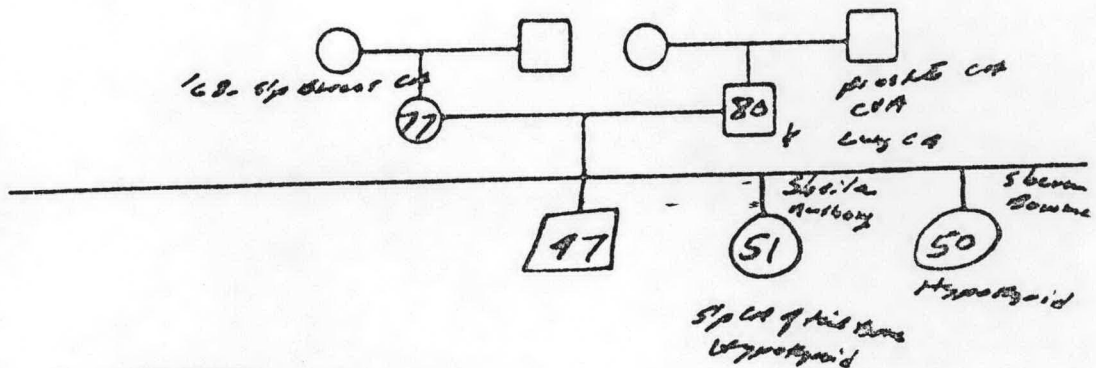
(a) Illnesses: Rheumatic fever, renal disease, heart disease, liver disease, jaundice, pneumonia, tuberculosis, diabetes mellitus, hypertension, cancer, thyroid disease, peptic ulcer disease, strokes.

(b) Operations: '52. TSA
 154. Append
 177. Plastic Face (MVA)
 179. SP Lipoma

(c) Drug Hypersensitivities, Asthma, Allergic Rhinitis

FAMILY HISTORY:

- Diabetes
- Hypertension or Stroke
- Cancer
- Tuberculosis
- Heart Disease



SYSTEMS REVIEW:

- (a) Constitutional: Appetite, change in weight, fever, energy
Not in diet
- (b) Skin, Hair and Nails: Itching, rash, alopecia
- (c) Head: Headache, dizziness

(Past History Continued)

(d) Ear: Pain, hearing difficulty, discharge, tinnitus
see

(e) Eyes: Vision, glasses diplopia, blurred, contacts

(f) Throat: Hoarseness, sore throats

(g) Teeth: Dentures, caries, recent dental work

(h) Breasts: Lumps, discharge, masses

Last mammogram _____

(i) Cardiorespiratory:

Smoker nonsmoker, exsmoker 11/1 '87 (date stopped)

Smoked 1 pk. / wk. (packs per day) 21 years

Last chest x-ray 1/5 (date)

Chest pain, cough, sputum, dyspnea, wheeze, hemotysis, orthopnea, PND, edema, claudication

(j) Gastrointestinal: Dyspepsia, heartburn, nausea, vomiting, eructation, flatulence, dysphagia, abdominal pain, hematemesis, bowel movement _____ per day/week, change in bowel habits, melena, hematochezia, diarrhea, constipation.
see

(k) Urinary Tract: Dysuria, hematuria, stone, nocturia^{x1}, frequency, hesitancy, dribbling, size of stream, stress incontinence, syphilllis, gonorrhea
see *see*

(i) Genital System:

Male: Discharge, sore, erection ability, libido

Female: LMP _____, menstrual trouble, date PAP smear _____

Menarche _____, menopause _____, G _____ P _____ A _____ SB _____

Hot flashes, spotting, dryness of vagina

MP's Freq. _____ duration _____
Flow _____ clotted blood (yes / no)

Birth Control _____

Hormones _____

Bone Density Scan (yes / no)

Calcium _____

Latest: _____

(m) Skeletal: Pain, stiffness, joint swelling, range of motion

None

(n) Neuropsychiatric: Convulsions, syncope, nervousness, memory loss, irritability, depression,
difficulty sleeping

None

(o) Drugs currently used: *5*

Alcohol: *1-2 glasses 0.120/d*

PHYSICAL EXAMINATION

(a) General Description:

(b) Vital Signs: Pulse _____ Reg. (yes/No) _____ Resp. _____

Temp. 98.4
Height 63 3/4"
Weight 194

BLOOD PRESSURE:	Right Arm	Left Arm
Lying	<u>124/82</u>	<u>68</u>
Standing	<u>130/90</u>	<u>76</u>

(c) Skin: Cyanosis, ecchymosis, rash, hair, nails

(d) Lymph Nodes: Cervical, supraclavicular, axillary, inguinal

(e) Head: Trauma, defects

(f) Eyes: Pupils (reaction to light, reaction to accommodation) EOM, Lens, discs, vessels, arteriolar narrowing, arcus cornea, hemorrhages, exudates

(g) Ears: TM's, canals, hearing

(h) Nose: Mucosa, septum, polyps

(i) Mouth and Pharynx: Mucosa, lips, throat, tonsils, palate

(j) Teeth and Gums: Caries, missing teeth, pyorrhea, false teeth, edentulous

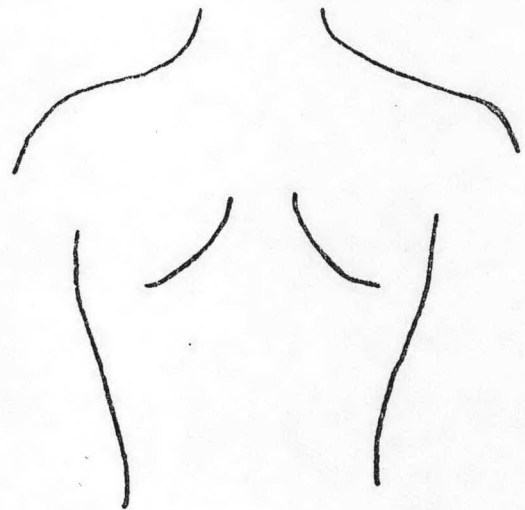
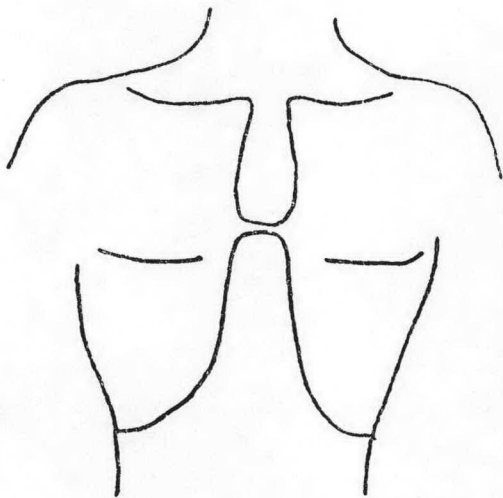
(Physical Examination Continued)

(k) Neck: Mobility, scars, masses, thyroid

(l) Breasts: Male: Gynecomastia

Female: Masses, nipples, galactorrhea, discharge

(m) Chest: Use of accessory muscles (yes/no), vocal fremitus, percussion, breath sounds, rales (fine, medium or coarse), wheezes (high-pitched or low-pitched), rubs



(n) Cardiovascular:

Apical Impulse (Lying) Where: _____ cms from MSL in _____ ICS

Auscultation:

S₁

S₂

Splitting of S₂

Gallop (S₃ or S₄)

Murmur(s)

Click *intermittent*

Other: Thrill(s)

Rub(s)

Heave - RV, LV

Neck Vein Distension

Peripheral Pulses: _____ (O = Absent, 1+ = diminished, 2+ = Average, 3+ = Bounding, B = Bruit)

	Carotid	Radial	Femoral	D. Pedis	Post. Tibial
R	2+	2+	2+	2+	2+
L					

(o) Abdomen:

Contour:

Scars:

Masses:

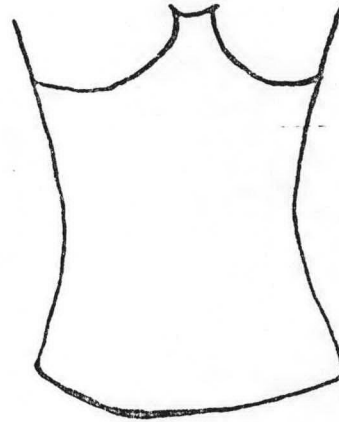
Tenderness:

Percussion size of liver: MCL _____ cms

MSL _____ cms

Spleen:

Hernia:



(p) Genitalia:

Male: Scrotum, testes, cord, epididymis, penis, discharge

Female: Labia, introitus, urethra, perineum, vagina, atrophic vaginitis, cervix, uterus, tubes, ovaries, adnexal masses, discharge, cystocele, rectocele, PAP SMEAR (done/not done)

(q) Rectal and Prostate: Hemorrhoids, masses, tenderness, prostate size, prostate tenderness, prostate mass, stool color, guaiac

(r) Extremities: Clubbing, edema, joints, varicose veins, Heberden's nodes

(s) Mental Status: Orientation, consciousness, appearance and dress, intelligence

(t) Neurologic: Reflexes: O = Absent 1+ = Slight 2+ = Average
3+ = Brisk 4+ = Sustained Clonus

	Plantar	Hoff	BR	Biceps	Triceps	Abd.	Crem.	Knee	Ankle
R	flexor		2+	2+	2+			2+	2+
L									

The remainder of the Neurologic Exam done ONLY IF there are Neurologic Symptoms or Abnormal Reflexes.

A. Higher Mental Function: (See Mental Status Exam)

B. Cranial Nerves: II-XII intact

C. Motor Function:

General: Muscle tone, muscle power, fasciculations, muscle wasting, involuntary movements, asterixis

Cerebellum: Rapid alternating movements, nose-finger, heel-knee, rebound, Romberg

Gait: Normal/Abnormal

D. Sensory Function: Pin, touch, toe position, vibratory


PROCTOSIGMOIDOSCOPY

Hemorrhoids (lg., med., sm., int / ext.)

Anoscopy _____

Sigmoidoscopy upto 17 cm

IMPRESSION:


LARRY S. WATKINS, M.D.

FOSTER, Vincent W., Jr.

PROGRESS NOTES

9/18/90 BP 130/82. His examination and laboratory studies are basically normal. He had a treadmill stress test by Dr. Drew Kumpuris, I don't have the report back, but evidently it was normal. I feel that his discomfort is probably related to his hiatal hernia. I will see him back in approximately two years for another complete exam as needed.

MEDICATIONS:

None

LSW/dc

9-18-90 Stool Guaiac Neg x 3

9-23-91 TC. \bar{c} 40 "killer cold". He started Septad DS 2 days ago & took last pill today & req. more. R4 for Septad DS \bar{i} bid x 8 more days (for 10)

11-27-91 Flu vac. \bar{a} some DM @ Deltoid L₂

12/30/91 to call; arrange for ECHO at OH over Kumpuris office
R/S MVP

12-11-92 TC - Pt unavailable to talk because his on an important teleconference call. Info rec'd from his secretary. Pt has hoarse/weak cough producing yellow sputum, congestion. Refill approved on Septad DS #20 \bar{i} PO BID, Entel LA #20 \bar{i} PO BID prn \bar{c} \bar{i} refill, Robitussin AC 4oz \bar{i} \bar{ii} tsp PO q 4-6^o prn cough \bar{c} \bar{i} refill. Dfr

FOSTER, Vincent W. Jr. 8/21/90
PP: 45 Year old white male from Little Rock.
CC: Left chest pain.

HPI: Patient has noticed occasional tightness in his left chest, usually associated with emotion and stress. Not really related to exertion. He smoked about a pack per week for 21 years, stopped smoking in 1987. No history of cough, sputum production, shortness of breath, wheezing, hemoptysis, orthopnea, PND, pedal edema nor claudication. He jogs with no chest discomfort.

He has known hiatal hernia. No dyspepsia, heartburn, nausea, vomiting, excessive eructation, flatulence or dysphagia. He has a bowel movement twice a day with no change in his bowel habits. No melena, hematochezia, diarrhea or constipation.

He has been taking some *Minoxidil*, or using it on his scalp, ointment irregularly.

SH: He grew up in Hope. He went to college at Davidson, North Carolina for four years, Nashville, Tennessee for one year of law school. He went to Fayetteville for two years of law school. He has been in Little Rock for 19 years. He has been married for 22 years. His wife, Lisa, is 45 years old and in good health. [redacted] They have three children. Vincent is 18 and will be a freshman at TCU. Laura is 17 will be a senior at St. Marys. Brugh is 14 and will be a freshman at Catholic High. Basically the four of them live together now and get along fine. He works 45 to 50 hours a week. He is an attorney doing primary litigation work with the Rose Firm. He tries to jog 1 1/2 to 2 miles, two to three times per week, more so when the weather is not as hot. They travel some. He enjoys reading.

LSW/dc

PROGRESS NOTES

8/21/90 His examination is unremarkable. We are doing our routine tests plus a treadmill stress test by Dr. Kumpuris. I will see him back in one week.

MEDICATIONS: None

LSW/dc

FOSTER, VINCENT W., JR.

UNDERLINE Indicates Negative or Normal Findings. A CIRCLE Indicates Positive or Abnormal Findings.

PAST HISTORY: 8-21-90 Referred: MIA

(a) Illnesses: Rheumatic fever, renal disease, heart disease, liver disease, pneumonia, jaundice, tuberculosis, diabetes mellitus, hypertension, cancer, thyroid disease, peptic ulcer disease, strokes.

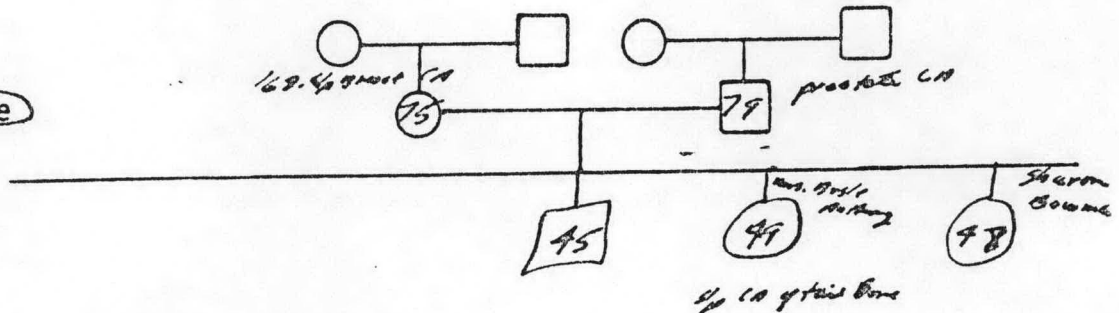
(b) Hospitalizations:

(c) Operations: 152-75A
154 Append
177 Plastic Face (MVA)
179 54 Lipomas

(d) Drug Hypersensitivities, Asthma, Allergic Rhinitis

FAMILY HISTORY:

Diabetes
Hypertension or Stroke
Cancer
Tuberculosis
Heart Disease



SYSTEMS REVIEW:

(a) Constitutional: Appetite, change in weight, fever, energy
eye seen

(b) Skin, Hair and Nails: Itching, rash, alopecia

(c) Head: Headache, dizziness

(Past History Continued)

(d) Ear: Pain, hearing difficulty, discharge, tinnitus

(e) Eyes: Vision, glasses, diplopia, blurred, contacts

(f) Throat: Hoarseness, sore throats

(g) Teeth: Dentures, caries, recent dental work

(h) Breasts: Lumps, discharge, masses

Last mammogram _____

(i) Cardiorespiratory:

Smoker, nonsmoker, exsmoker _____ (date stopped)

Smoked _____ (packs per day) _____ years

Last chest x-ray _____ date

Chest pain, cough, sputum, dyspnea, wheeze, hemotysis, orthopnea, PND, edema, claudication

(j) Gastrointestinal: Dyspepsia, heartburn, flatulence, eructation, nausea, vomiting, dysphagia, abdominal pain, hematemesis, bowel movement _____ per day/week, change in bowel habits, melena, hematochezia, diarrhea, constipation.

(k) Urinary Tract: Dysuria, hematuria, stone, ^{x1}nocturia, frequency, hesitancy, dribbling, size of stream, stress incontinence, syphillis, gonorrhoea

(1)

Genital System:

Male: Discharge, sore, erection ability, libido

Female: LMP _____, menstrual trouble, date PAP smear _____

Menarche _____, menopause _____, G _____ P _____ A _____ SB _____

Hot flashes, spotting, dryness of vagina

MP's freq. _____ duration _____
flow _____ clotted blood (yes/no)

Birth Control _____

Hormones _____

Calcium _____

(m) Skeletal: Pain, stiffness, joint swelling, range of motion

low back pain

(n) Neuropsychiatric: Convulsions, syncope, nervousness, memory loss, irritability, depression, difficulty sleeping

(o) Drugs currently used: 5

Alcohol: 2 drinks or wine/d.

COMMENTS:

PHYSICAL EXAMINATION

(a) General Description:

(b) Vital Signs: Pulse 76 Reg. (Yes/No) Resp. 16
BLOOD PRESSURE: Right Arm Left Arm

Temp. 98.
Height 6'4"
Weight 207 1/2

Lying 140/90
Standing 140/90p.80

(c) Skin: Cyanosis, ecchymosis, rash, hair, nails

(d) Lymph Nodes: Cervical, supraclavicular, axillary, inguinal

(e) Head: Trauma, defects

(f) Eyes: Pupils (reaction to light, reaction to accommodation) EOM, Lens, discs, vessels, arteriolar narrowing, arcus cornea, hemorrhages, exudates

(g) Ears: TM's, canals, hearing

(h) Nose: Mucosa, septum, polyps

(i) Mouth and Pharynx: Mucosa, lips, throat, tonsils, palate

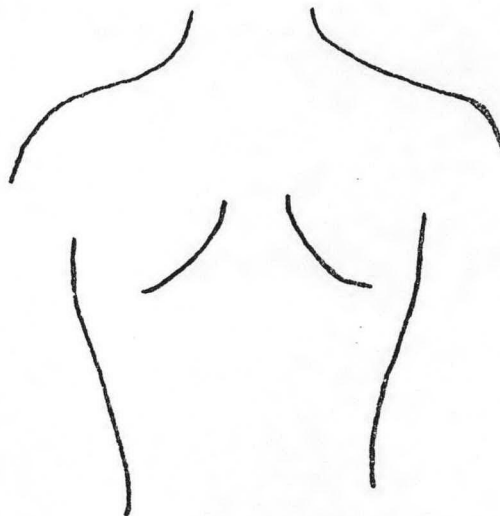
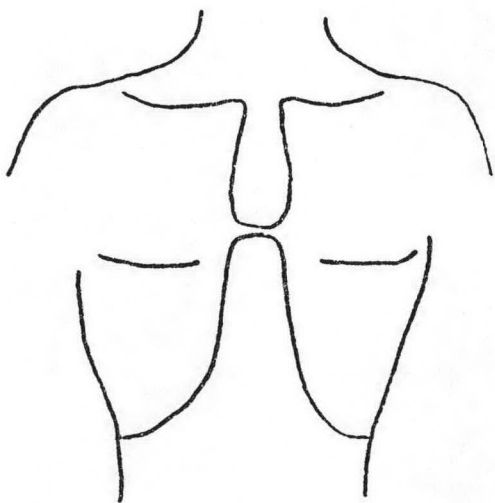
(j) Teeth and Gums: Caries, missing teeth, pyorrhea, false teeth, edentulous

(k) Neck: Mobility, scars, masses, thyroid

(l) Breasts: Male: Gynecomastia

Female: Masses, nipples, galactorrhea, discharge

(m) Chest: Use of accessory muscles, (yes/no), vocal fremitus, percussion, breath sounds, rales (fine, medium or coarse), wheezes (high pitched or low-pitched), rubs



(n) Cardiovascular:

Apical Impulse (Lying) Where: _____ cms from MSL in _____ ICS

Auscultation:

S₁

S₂

Splitting of S₂

Gallop (S₃ or S₄)

Murmur(s)

Click *intermittent click*

Other: Thrill(s)

Rub(s)

Heave — RV, LV

Neck Vein Distension

Peripheral Pulses: _____ (0 = Absent, 1+ = diminished, 2+ = Average, 3+ Bounding, B = Bruit)

	Carotid	Radial	Femoral	D. Pedis	Post. Tibial
R	2+	2+	2+	2+	2+
L					

(c) Abdomen:

Contour:

Scars:

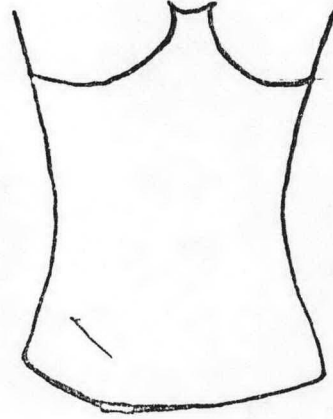
Masses:

Tenderness:

Percussion size of liver: MCL _____ cms
MSL _____ cms

Spleen:

Hernia:



(d) Genitalia:

Male: Scrotum, testes, cord, epididymis, penis, discharge

Female: Labia, introitus, urethra, perineum, vagina, atrophic vaginitis, cervix, uterus, tubes, ovaries, adnexal masses, discharge, cystocele, rectocele, PAP SMEAR (done/not done)

(e) Rectal and Prostate: Hemorrhoids, masses, tenderness, prostate size, prostate tenderness, prostate mass, stool color, guaiac

(f) Extremities: Clubbing, edema, joints, varicose veins, Heberden's nodes

(g) Mental Status: Orientation, consciousness, appearance and dress, intelligence

(h) Neurologic: Reflexes: 0 = Absent 1+ = Slight 2+ = Average
3+ = Brisk 4+ = Sustained Clonus

	Plantar	Hoff	BR	Biceps	Triceps	Abd.	Crem.	Knee	Ankle
R	flexor		2+	2+	2+			2+	2+
L									

The remainder of the Neurologic Exam done ONLY IF there are Neurologic Symptoms or Abnormal Reflexes

A Higher Mental Function (See Mental Status Exam)

B Cranial Nerves

II - XII Intact

C Motor Function

General: Muscle tone, muscle power, fasciculations, muscle wasting, involuntary movements, asterixis

Cerebellum: Rapid alternating movements, nose-finger, heel-knee, rebound, Romberg

Gait: Normal / Abnormal

D Sensory Function: Pin, touch, toe position, vibratory


PROCTOSIGMOIDOSCOPY

Hemorrhoids (lg., med., sm., int. / ext.)

Anoscopy _____

Sigmoidoscopy up to 15 cm.

IMPRESSION:


LARRY S. WATKINS, M.D.

PHYSICIAN'S REFERENCE LAB, LTD
LITTLE ROCK, ARKANSAS

DATE 01/01/93 TIME 0332

** CLINICAL LABORATORY **
** PATIENT CHART REPORT **
LAB ID - LSW 14786 FASTING

PATIENT 01285617 195618 FOSTER, VINCENT, MR 47Y MALE OTHER
LOCATION PRL-SPEC ADMITTED 12/31/92 1125
PHYSICIAN 0145 WATKINS, LARRY S. M.D. DISCHARGED

NORMALS UNITS 12/31/92 01/01/93

** CHEMISTRY PROFILES *

TOTL PROTN	6.1-8.0	G/DL	7.2
ALBUMIN	3.5-4.8	G/DL	4.8
CALCIUM	8.7-10.7	MG/DL	10.3
PHOSPHRUS	2.6-4.9	MG/DL	2.8
URIC ACID	2.5-9.2	MG/DL	4.7
CREATININE	.5-1.2	MG/DL	1.2
D. BILIRUBIN	0-.4	MG/DL	0.2
T. BILIRUBIN	.3-1.2	MG/DL	0.8
BUN	6-22	MG/DL	15
GLUCOSE	70-110	MG/DL	103

** ELECTROLYTES **

SODIUM	135-153	MEQ/L	141
POTASSIUM	3.5-5.3	MEQ/L	4.3
CHLORIDE	98-106	MEQ/L	100
CO-2	23-33	MEQ/L	34**H

** ENZYMES **

ALK PHOS	37-107	IU/L	46
CPK	61-224	IU/L	51**L
LDH	94-172	IU/L	123
SGOT	12-45	IU/L	26
SGPT	7-40	IU/L	20

** SPECIAL CHEMISTRY **

CHOLESTEROL	100-240	MG/DL	220
TRIGLYCER	0-250	MG/DL	128
HDL CHOL	29-83	MG/DL	

48 > 21.9%
AVE-RISK

**L INDICATES BELOW NORMAL RANGE **T INDICATES WITHIN-THERAPEUTIC RANGE
**H INDICATES ABOVE NORMAL RANGE **X INDICATES ABOVE THERAPEUTIC RANGE
TESTS WITH * PERFORMED AT PRL, OTHERS PERFORMED AT SVIMC

** FOSTER, VINCENT, MR SECTION 2 PART 1-01

PHYSICIAN'S REFERENCE LAB, LTD
LITTLE ROCK, ARKANSAS

DATE 12/31/92 TIME 0246

** CLINICAL LABORATORY **
* * P A T I E N T C H A R T R E P O R T * *
LAB ID - LSW 14785 FASTING

PATIENT 01295617 195818 FOSTER, VINCENT, MR 47Y MALE OTHER
LOCATION PRL-SPEC ADMITTED 12/31/92 1125
PHYSICIAN 0145 WATKINS, LARRY S. M.D. DISCHARGED

NORMALS UNITS 12/31/92

** HEMATOLOGY **
HEMOGLOBIN 12.5-16.3 GMS 16.5**H
HEMATOCRIT 36-55 % 48.6
RBC COUNT 4.5-10.0 K/CM3 4.4**L
% SE'S 54.6
% LYMPHS 33.3
% MONS 9.7
% EOS 1.6
% BASO 0.8
RBC COUNT 3.90-5.90 M/CM3 5.42
MCV 80-100 FL 87.6
MCH 23-35 PG 30.4
MCHC 29-37 g 33.9
RDW 0-16 12.0
PLATELET C 150-400 K/CM3 195

**L INDICATES BELOW NORMAL RANGE
**H INDICATES ABOVE NORMAL RANGE
TESTS WITH * PERFORMED AT PRL, OTHERS PERFORMED AT SVINC

** FOSTER, VINCENT, MR SECTION 1 PART 1-01

PHYSICIAN'S REFERENCE LAB, LTD
LITTLE ROCK, ARKANSAS

DATE 01/04/93 TIME 0244

** CLINICAL LABORATORY **
** P A T I E N T C H A R T R E P O R T **
LAB ID - LSW 14786 FASTING

PATIENT 01295617 195618 FOSTER, VINCENT, MR 47Y MALE OTHER
LOCATION PRL-SPEC ADMITTED 12/31/92 1125
PHYSICIAN 0145 WATKINS, LARRY S. M.D. DISCHARGED

NORMALS UNITS 01/02/93 01/04/93

** THYROID STUDIES **
T4 4.4-12.5 USP 8.0 (12/31/92)
SH .6-4.6 UIU/PL 3.4
** NUCLEAR MEDICINE **
SA-TYBRI 0-4.0 NG/PL 0.89 (12/31/92)

*L INDICATES BELOW NORMAL RANGE **T INDICATES WITHIN THERAPEUTIC RANGE
*H INDICATES ABOVE NORMAL RANGE **X INDICATES ABOVE THERAPEUTIC RANGE
TESTS WITH * PERFORMED AT PRL, OTHERS PERFORMED AT SVIMC

* PROFESSIONAL NUC MED SERVICES RENDERED BY RADIOLOGY ASSOC. PA FOSTER, VINCENT, MR SECTION 6 PART 1-01
W.T. HARRIS, M.D.

**** CLINICAL LABORATORY ****
**** PATIENT CHART REPORT ****

PATIENT 00925041 179002 FOSTER, VINCENT W 14788 45Y MALE OTHER
LOCATION PRL-SPEC ADMITTED 08/21/90 1509
PHYSICIAN 0145 WATKINS, LARRY STERLING M.D. DISCHARGED

NORMALS UNITS 08/21/90 08/22/90

**** CHEMISTRY PROFILES ***

T. PROTEIN	6.1-8.0	G/DL	7.2
ALBUMIN	3.5-4.8	G/DL	4.1
CALCIUM	8.7-10.7	MG/DL	9.2
PHOSPHORUS	2.6-4.9	MG/DL	2.8
URIC ACID	2.5-9.2	MG/DL	4.5
CREATININE	.5-1.2	MG/DL	1.1
D. BILIRUBIN	0-.4	MG/DL	0.2
T. BILIRUBIN	.3-1.2	MG/DL	0.5
BUN	6-22	MG/DL	11
GLUCOSE	70-108	MG/DL	92

3 1/2 app

**** ELECTROLYTES ****

SODIUM	135-153	MEQ/L	140
POTASSIUM	3.5-5.3	MEQ/L	4.3
CHLORIDE	98-106	MEQ/L	100
CO-2	23-33	MEQ/L	27

**** ENZYMES ****

ALK PHOS	37-107	IU/L	44
CPK	61-224	IU/L	59*#L
LDH	94-172	IU/L	129
SGOT	12-45	IU/L	30
SGPT	7-40	IU/L	32

**** SPECIAL CHEMISTRY ****

CHOLESTEROL	100-240	MG/DL	218
TRIGLYCER	0-250	MG/DL	135
HDL CHOL	29-83	MG/DL	51.4

(08/21/90)
51.4

Chol/H = 23.5%

Reg.

**L INDICATES BELOW NORMAL RANGE **T INDICATES WITHIN THERAPEUTIC RANGE
H INDICATES ABOVE NORMAL RANGE *X INDICATES ABOVE THERAPEUTIC RANGE
TESTS WITH * PERFORMED AT PRL, OTHERS PERFORMED AT SVIMC

** FOSTER, VINCENT W SECTION 2 PART 1-01

** CLINICAL LABORATORY **
** PATIENT CHART REPORT **

PATIENT 00925041 17902 FOSTER, VINCENT W 1478Y 45Y MALE OTHER
LOCATION PRL-SPEC ADMITTED 08/21/90 1509
PHYSICIAN C145 WATKINS, LARRY STERLING M.D. DISCHARGED

NORMALS UNITS 08/21/90

** HEMATOLOGY **			
HEMOGLOBIN	12.5-16.3	GM%	16.7**H
HEMATOCRIT	36-55	%	47.4
WBC	4.5-13.0	K/CMM	5.3
LYMPHS		%	31.5
MONOS		%	2.8
SEGS		%	64.7
RBC	3.90-5.90	M/CMM	5.28
MCV	80-100	FL	89.8
MCH	23-35	PG	31.6
MCHC	29-37	%	35.2
RDW	0-16	%	11.6
PLATELETS	150-400	K/CMM	236

3 1/2 pp

**L INDICATES BELOW NORMAL RANGE
**H INDICATES ABOVE NORMAL RANGE
TESTS WITH * PERFORMED AT PRL, OTHERS PERFORMED AT SVMC

** FOSTER, VINCENT W SECTION 1 PART 1-01

PATIENT'S NAME Foster, Vincent W.
 CHART # 14738

DATE 3/31/92

ROUTINE URINALYSIS			VOIDED
			CATH.
			MI.D.S
COLOR	<u>light yellow</u>	MICRO CENT/NPF	
SP. GRAV.	<u>1.010</u>	WBC	
PH	<u>7.0</u>	RBC	
ALBUMIN	<u>-</u>	CASTS	
SUGAR	<u>-</u>	CRYSTALS	<u>1-3</u>
ACETONE	<u>-</u>	EPITH. CELLS	
OCCULT BLOOD	<u>-</u>	AMORPHOUS	
		BACTERIA	
		MUCUS	

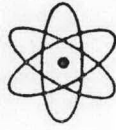
PATIENT'S NAME Foster, Vince
 CHART # _____

DATE 12-31-92

ROUTINE URINALYSIS			VOIDED
			CATH.
			MI.D.S
COLOR	<u>AMBER</u>	MICRO CENT/NPF	
SP. GRAV.	<u>1.015</u>	WBC	
PH	<u>6.5</u>	RBC	
ALBUMIN	<u>-</u>	CASTS	
SUGAR	<u>-</u>	CRYSTALS	<u>occ</u>
ACETONE	<u>-</u>	EPITH. CELLS	<u>occ</u>
OCCULT BLOOD	<u>-</u>	AMORPHOUS	
		BACTERIA	
		MUCUS	

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• Dr. Larry S. Watkins

December 31, 1992
DATE

X-RAY NO.
239968

X-RAY REPORT

PATIENT'S NAME FOSTER, Vincent

DOCTORS BUILDING IMAGING CENTER

CERVICAL SPINE: Routine views show the cervical vertebrae to be in good alignment and intact. Some mild spurring and lipping changes are noted in the lower cervical area anteriorly. The intervertebral foramen are adequate. No cervical ribs are demonstrated. Some mild degenerative changes are seen in the apophyseal joints in the lower cervical area.

IMPRESSION: Some mild degenerative changes in the lower cervical spine as described.

James W. Campbell, M.D.

rb

LARRY S. WATKINS, M.D.

INTERNAL MEDICINE

Name Foster, Vincent W.

No. 14786

Date 12.31.92

Normal chest x-ray. Normal sized heart. No significant change from previous chest x-ray.
LSW/as

LARRY S. WATKINS, M.D.

INTERNAL MEDICINE

Name Foster, Vincent W.

No 14786 Date 8-21-90

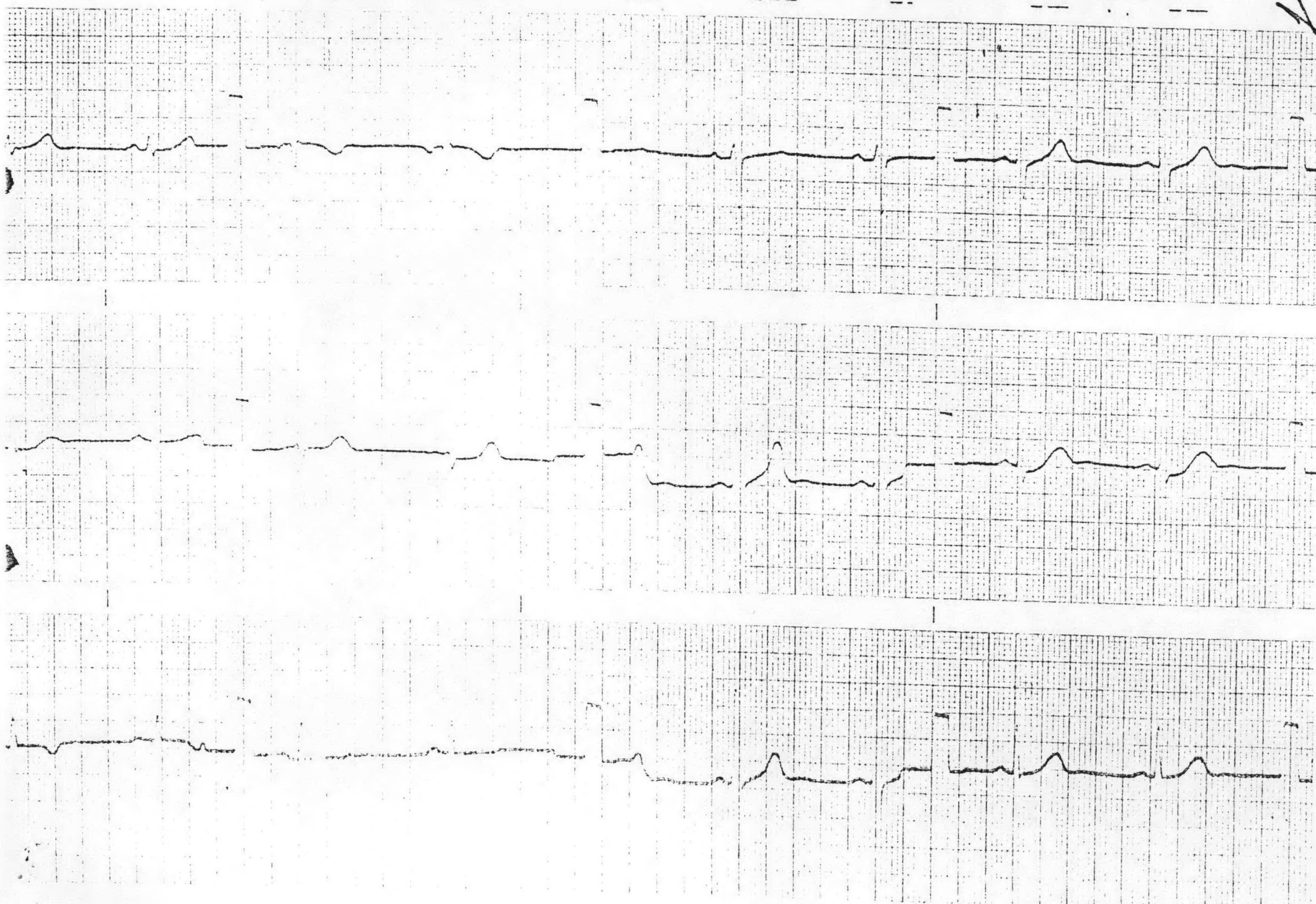
Normal chest x-ray. Normal sized heart. PA
film shot quiet light. No significant change
from previous chest x-ray. LSW/dc

ER	COMPUTER SIGNAL
(X)	(SOLID)
(Y)	CALL ACCEPTED
(Z)	(BROKEN)
	CALL REJECTED

NAME FOSTER, VINCENT W.
 ID. 14786
 DATE 12-31-92
 TECHNICIAN _____
 PHYSICIAN C.S. WATKINS M.D.

ADDITIONAL INFORMATION

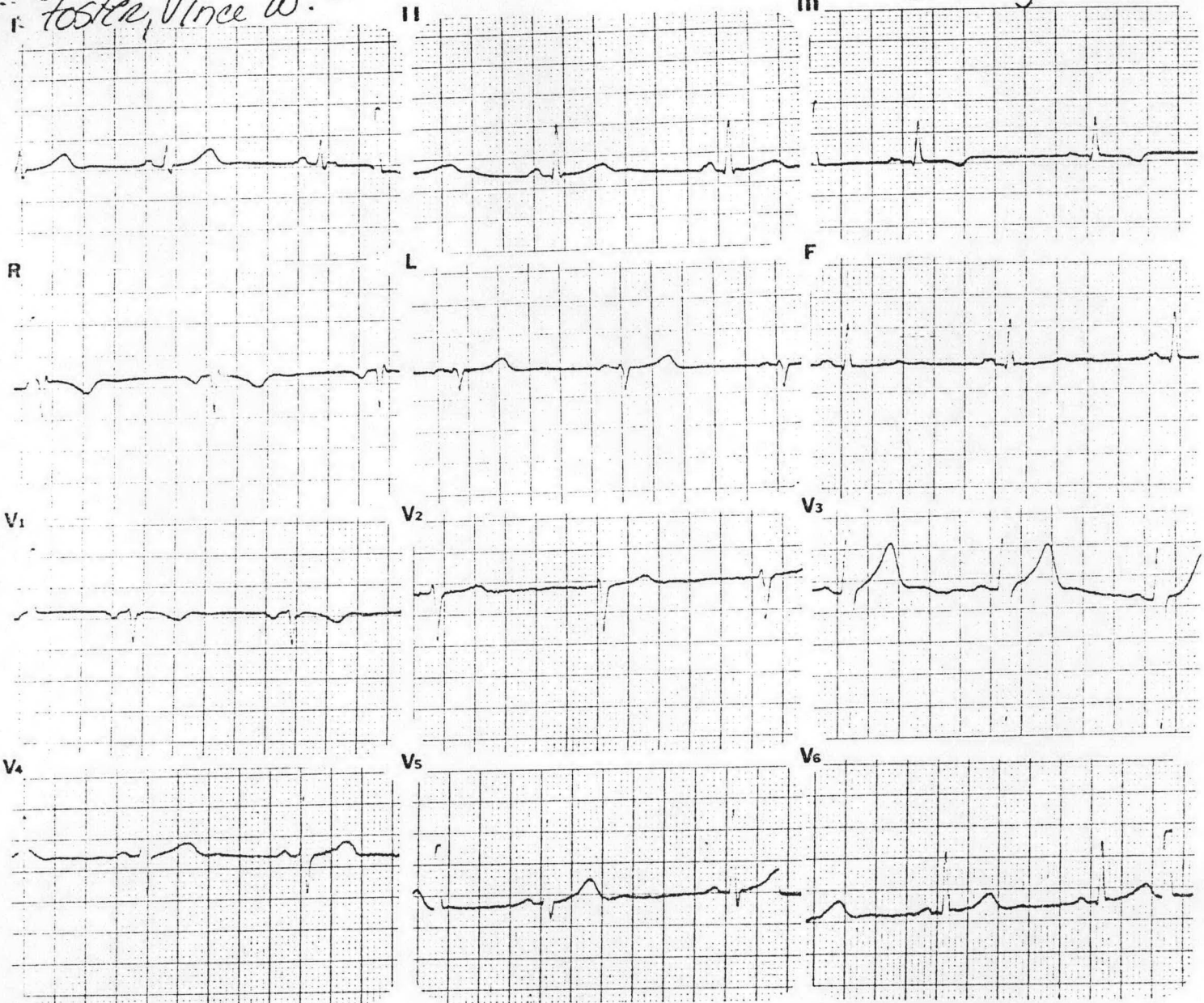
Normal EKG. Normal sinus rhythm. He has minimal non-specific ST-T wave changes. Mild repolarization variant. Borderline IVCD. No significant change from previous EKG.
 LSW/as



Foster, Vince W.

Dr. Larry Watkins

CATALOG NO. 2412



8-21-90

V4 1/2 voltage

Normal EKG. Normal sinus rhythm. Mild repolarization. Borderline IVCD. Minimum nonspecific ST and T wave changes. No significant change from previous EKG.

LSW/dc