MEDICAL REPORT PATIENT REQUEST

Diagnostic Procedures: (Indicate significant findings)

Laboratory	Radiology	
0000455560	CARDIACTROPONINIQUANTITATIVE 0000140040	ECHODOPPLERCARDIOGRAPHY/ADULT
Others(i.e., ECG ECG: No ischemi	r, Echo) ic changes even the ecg 48 hours before	

Medication Used:							
Name	Dose	Route	Frequency	Duration	Dur Unit		
CO-APROVEL 300/12.5	300/12.5						
GLUCOPHAGE	500						
+ CLOPIDOGREL	75MG						
ATORVA	20						
BISOPROLOL	2.5MG						
ASPIRIN	81MG						

Implants / Consumables:				
Date	Service	Service Description		
Apr 24, 2024	/	/		

Special Care/Instructions:						
Diet:	Diabetic diet, low salt low fat	Activity of Daily Living: Not applicable				

Reccomendations:Advised by cardiologist if any kind of chest pain and adhere to medications, consult the doctor. This report is made upon patient request.

Care Timeline:

Treating Physician Name: DR. MOHAMMAD ALA

Cardiology Cardiology Consultent

Date: Apr 24, 2024

Time

11:29:38 AM

Signature / Stamp:

Department:

CCS0

Medical Report Stamp

sharaf Ali

AD-029.2





Patient Identification	492253
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MEDICAL REPORT PATIENT REQUEST

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Patient Name: SAADH MOHAMMED KAREEM				Case Number: 0010391033				
MRN: 000049	2253	Payment Sta	atus:	⊠ Self-Pay	□мон	I 🔲 Ins	urance	•
Nationality: Syrian		Date of Birth:	1940-1	1-12	Gender:		Male	⊠ Female
Altergies: Unknown No Yes, specify:								
Visit: OPD 🔀 ER	Admitted to:	□ICU [□гтсп	□ PICU	□NICU	SCBU	Admission Date:
Date: Apr 18, 2024	Room No: N/A			Length of stay:		Discharged Date:		
Preliminary Diagnosis:	Acute Chest Pain,	Diabetes, Hyp	pertensio	on			-	· -
Final Diagnosis:	Suspected Acute C infarction (NSTEM		lrome, N	Non-ST-elevation	n myocard	ial	ICD COL	DE: I214
	Surgery/Procedures Performed: ACHI CODE: /							
Service Date	Service	Description	on					
Apr 24, 2024	/	/						
Previous consultation/ hospitalizations prior to this visit No Yes, When: Where:								
Reason:								
Present Illness Chief Con	plaint(s):							
Substernal chest pain + heaviness radiating to back for about 2 hours before 2 days								
Medication Prior to Admission/ visit: Coaprovel 300/12.5, Glucophage 500 Twice Daily								
Previous Medical History: Hypertension, Diabetes-II more than 15 years under treatment, bedridden for the last 3 years								
Previous Surgical History: Not applicable								
Pressure ulcer: No Low Medium High Very High (Upon admission): No Yes, 1 2 3 Area:								
Physical Examination Details: Blood Pressure: 130/75, Heart Rate: 80 bpm, patient is not dyspneic, chest clear, cardiovascular system regular heart sounds, no murmur no added heart sounds lower limb pitting edema. Troponin-T was done at the same day of consultation which showed mild elevation 19 pg/ml normal till 14 then patient was considered as acute coronary syndromes (ACS), Non-ST-elevation myocardial infarction (NSTEMI) and started medication with dudi antiplatelet therapy (ASA + clopidogrel) and bisoprolol 2.5mg, pt is until now stable no other episodes of chest pain, echo doppler will be done as soon as possible for further assessment and the son was instructed to inform as by any clinical progression.								
Consultations/Referrals Details: Yes 🔀 No '								