FORTIS HOSPITAL

MEDICAL REPORT

SECTION 1: PATIENT'S PARTICULARS

Full name of patient: Ms Sowmya Chowdhary

Age of patient: 45 years old

Gender:Female

SECTION 2: DOCTOR'S PARTICULARS

Full name of doctor: Dr Vikram Desai

Hospital / Clinic name and address: Fortis Hospital ,Bangalore Karntaka

Doctor's qualifications and experience in this area of work:
Dr. Vikram Desai holds an MBBS, MD (Internal Medicine), and Diabetes with 20 years of experience in treating ischemic heart disease, arrhythmias, valvular disorders, and heart failure patients. He has performed over 500 angioplasties and specializes in preventive cardiology and cardiac rehabilitation.

Symptoms:

- Chest discomfort, especially after physical activity
- Episodes of breathlessness while climbing stairs
- Occasional fatigue and weakness
- No signs of acute distress

Findings from physical examination / mental state examination:

- Blood Pressure: 140/85 mmHg (Mildly elevated)
- Heart Rate: 78 bpm, regular rhythm
- Respiratory Rate: 18 breaths per minute
- · Heart Sounds: Normal S1, S2; no murmurs detected
- · Lung Sounds: Clear, no crackles or wheezing
- Peripheral Edema: Not present
- · Capillary Refill Time: Normal
- Oxygen Saturation (SpO2): 97%

Mental State Examination:

- Orientation: Alert and oriented to time, place, and person
- · Memory: No recent memory deficits reported
- Mood & Affect: Mild anxiety related to heart disease but no signs of depression
- Decision-making ability: Fully intact, understands risks and importance of lifestyle changes
- Cognitive Function: No impairments observed

Diagnosed Disease

- Coronary Artery Disease (CAD)
- · Confirmed through stress test and coronary angiography
- Caused by plaque buildup in coronary arteries, leading to reduced blood flow to the heart

Procedure After Diagnosis

- Angioplasty was performed to restore proper blood flow
- Medication prescribed:Statins for cholesterol management
- · Beta-blockers for heart rate control
- Aspirin & Antiplatelets to prevent clot formation
- · Advised regular follow-ups, dietary modifications, and exercise programs

Outcome

- Condition stabilized after successful angioplasty and medication management.
- Chest pain episodes have reduced significantly, and the patient reports improved stamina.
- Blood pressure and cholesterol levels are under control with prescribed medication.
- No further signs of heart failure or ischemic episodes detected.
- Patient adheres to lifestyle modifications, including a heart-healthy diet and regular exercise.
- Follow-up scheduled in 3 months to assess cardiovascular health and adjust treatment if needed.

SECTION 5: DECLARATION

| I have read and understood the provisions in sections 3, 4 and 5 of the Mental Capacity Act. I believe in the correctness of the opinion set out herein. | |
|---|--|
| | that in giving this report my duty is to the Court and I confirm that lied with this duty. |
| Signature: | _[Doctor to sign] |
| Name: | Dr Raja Rao |
| Date: | 20 July 2015 |

Explanatory notes:

- 1. "Personal welfare" refers to matters such as deciding where to live and consenting to medical and dental treatment.
- 2. "Property and affairs", as the name implies, refers to matters concerning the patient's financial affairs and property.
 - When giving your opinion on the patient's mental capacity, please note that where it is not patently
- 3. obvious from the clinical history and examination that the patient has or lacks capacity, you will need to explain the basis for your opinion.

Section 3 of the Mental Capacity Act

- (1) The following principles apply for the purposes of this Act.
- (2) A person must be assumed to have capacity unless it is established that he lacks capacity.
- (3) A person is not to be treated as unable to make a decision unless all practicable steps to help him to do so have been taken without success.
- (4) A person is not to be treated as unable to make a decision merely because he makes an unwise decision.
 - An act done, or a decision made, under this Act for or on behalf of a person who lacks capacity must
- (5) be done, or made, in his best interests.

 Before the act is done, or the decision is made, regard must be had to whether the purpose for which
- (6) it is needed can be as effectively achieved in a way that is less restrictive of the person's rights and freedom of action.

Section 4 of the Mental Capacity Act

(1) For the purposes of this Act, a person lacks capacity in relation to a matter if at the material time he is unable to make a decision for himself in relation to the matter because of an impairment of, or a

disturbance in the functioning of, the mind or brain.

- (2) It does not matter whether the impairment or disturbance is permanent or temporary.
- A lack of capacity cannot be established merely by reference to
 - (a) a person's age or appearance; or
 - (b) a condition of his, or an aspect of his behaviour, which might lead others to make unjustified assumptions about his capacity.
- (4) In proceedings under this Act (other than proceedings for offences under this Act), any question whether a person lacks capacity within the meaning of this Act must be decided on the balance of probabilities.
- (5) Subject to section 21, no power which a person ("D") may exercise under this Act
 - (a) in relation to a person who lacks capacity; or
 - (b) where D reasonably thinks that a person lacks capacity,

is exercisable in relation to a person below 21 years of age.

Section 5 of the Mental Capacity Act

- (1) For the purposes of section 4, a person is unable to make a decision for himself if he is unable—
 - (a) to understand the information relevant to the decision;
 - (b) to retain that information:
 - (c) to use or weigh that information as part of the process of making the decision; or
 - (d) to communicate his decision (whether by talking, using sign language or any other means).
- (2) A person is not to be regarded as unable to understand the information relevant to a decision if he is able to understand an explanation of it given to him in a way that is appropriate to his circumstances (using simple language, visual aids or any other means).
- (3) The fact that a person is able to retain the information relevant to a decision for a short period only does not prevent him from being regarded as able to make the decision.
- (4) The information relevant to a decision includes information about the reasonably foreseeable consequences of
 - (a) deciding one way or another; or
 - (b) failing to make the decision.