

# Cardiff and Vale University Health Board



## Department of Cardiology

University Hospital of Wales  
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### CARDIOLOGY CONSULTATION SUMMARY

Consultation Type:	New Patient Assessment	Clinic:	General Cardiology
Consultant:	Dr. Helen R. Morgan	Date of Consultation:	22nd August 2025
Referral Source:	GP Referral	Priority:	Routine

### Patient Demographics

Name:	Mrs Margaret A. Phillips
DOB:	15/06/1958 (67 years)
NHS Number:	234 567 8901
Address:	56 Llanishen Road Cardiff CF14 5LU
GP:	Dr. James Wilson Llanishen Medical Practice
Hospital Number:	UHW123456789

Dear Dr. Wilson,

Thank you for referring Mrs Phillips to our cardiology service. I saw her in clinic on 22nd August 2025 regarding her symptoms of chest discomfort and breathlessness on exertion.

Clinical Summary

**Primary Complaint:** 6-month history of central chest tightness and breathlessness on moderate exertion (climbing two flights of stairs), associated with occasional palpitations. Symptoms resolve with rest within 2-3 minutes.

**Provisional Diagnosis:** Stable angina pectoris, likely secondary to coronary artery disease

**Risk Stratification:** Intermediate cardiovascular risk

History of Presenting Complaint

Mrs Phillips reports a 6-month history of central chest tightness, described as a "heavy pressure sensation" that occurs predictably with moderate physical exertion such as walking uphill or climbing stairs. The discomfort is associated with mild breathlessness and occasionally palpitations. Symptoms typically resolve within 2-3 minutes of rest. She denies chest pain at rest, nocturnal symptoms, or orthopnoea. No associated nausea, sweating, or radiation to arms or jaw.

Past Medical History

- Hypertension (diagnosed 2018, well controlled)
- Type 2 diabetes mellitus (diagnosed 2020, HbA1c 7.1%)
- Hypercholesterolaemia (total cholesterol 5.2 mmol/L)
- Previous smoker (20 pack-years, quit 2019)
- Family history of ischaemic heart disease (father, MI age 62)

Physical Examination

Parameter	Finding	Normal Range
Blood Pressure	142/84 mmHg	<140/90 mmHg

Parameter	Finding	Normal Range
Heart Rate	76 bpm regular	60-100 bpm
BMI	28.3 kg/m²	18.5-24.9 kg/m²
Heart Sounds	Normal S1, S2. No murmurs	-
Chest	Clear to auscultation	-
Peripheral Pulses	Present and equal	-
Peripheral Oedema	Nil	-

Investigations Performed

**ECG (22/08/2025):** Normal sinus rhythm. No evidence of ischaemia or previous infarction. QRS 98ms, QTc 425ms.

**Echocardiogram (22/08/2025):** Normal left ventricular systolic function (LVEF 58%). Normal chamber sizes. No significant valvular disease. E/e' ratio 8.5 (normal diastolic function).

Recent Blood Results (18/08/2025):

- HbA1c: 7.1% (54 mmol/mol)
- Total cholesterol: 5.2 mmol/L
- LDL cholesterol: 3.4 mmol/L
- HDL cholesterol: 1.1 mmol/L
- Triglycerides: 1.8 mmol/L
- eGFR: 78 ml/min/1.73m²
- Troponin I: <0.01 µg/L (normal)

Current Medications

Amlodipine 5mg once daily

For hypertension - continue current dose

Metformin 500mg twice daily

For type 2 diabetes - continue current dose

**Simvastatin 40mg once daily at night**

For hypercholesterolaemia - continue current dose

## Management Plan

### Immediate Actions:

1. **Exercise Stress Test:** Arranged for 15th September 2025 to assess for inducible ischaemia
2. **Antiplatelet Therapy:** Commenced aspirin 75mg once daily
3. **Antianginal Therapy:** Prescribed sublingual GTN spray for symptom relief
4. **Lifestyle Advice:** Dietary consultation arranged for cardiovascular risk reduction

### Pending Investigations:

- Exercise stress test (if negative, consider CT coronary angiogram)
- Repeat lipid profile in 6 weeks following lifestyle modifications

### Risk Factor Modification:

- Target LDL cholesterol <1.8 mmol/L (consider statin intensification if needed)
- Weight reduction target: BMI <25 kg/m<sup>2</sup>
- Blood pressure target: <130/80 mmHg
- Diabetes management: HbA1c target <7%

## Follow-up Arrangements

### Exercise Stress Test

**Date:** 15th September 2025

**Time:** 10:00 AM

**Location:** Cardiac Investigation Unit

**Fasting:** Not required

### Cardiology Follow-up

**Date:** 10th October 2025

**Time:** 2:30 PM

**Location:** Cardiology Outpatients

**Purpose:** Review test results

## Important Patient Advice

- **Symptom Management:** Use GTN spray for chest discomfort (1-2 sprays under tongue, may repeat after 5 minutes if needed)
- **Emergency Action:** Seek immediate medical attention if chest pain persists >10 minutes despite GTN, or if symptoms worsen
- **Activity:** Continue normal activities but avoid strenuous exertion until stress test completed
- **Medication Compliance:** Continue all current medications as prescribed

**Clinical Responsibility:** This letter summarises the consultation findings and recommendations. Please contact our department if you require any clarification or have concerns about the patient's management.

### Contact Information

**Cardiology Secretary**

029 2074 7747  
Mon-Fri 9:00-17:00

**Cardiac Investigation Unit**

029 2074 3025  
Mon-Fri 8:00-18:00

**Emergency Contact**

Cardiology Registrar  
via Hospital Switchboard

**Dr. Helen R. Morgan**

Consultant Cardiologist  
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Cardiff and Vale University Health Board  
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Dictated: 23/08/2025  
Typed: 24/08/2025  
Authorised: 28/08/2025

cc: Mrs Margaret Phillips, Patient Administration System, Cardiology Database

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