

# Patient Information:

**Name:** Sara

**Date of Birth:** 02/09/1996

**Patient ID:** 10024564

**Date of Report:** 04/20/2024

**Referring Physician:** Dr. Karim Salameh, MD

**Specialty:** Pulmonology

**Contact Information:** [Physician's Contact Information]

## Introduction:

This report summarizes Sara's pulmonary evaluation following her clinic visit on 04/19/2024. The purpose is to assess her respiratory symptoms and outline a treatment strategy.

## Medical History:

Sara has a history of childhood asthma, which has been mostly inactive in recent years. She has no known allergies. She is a non-smoker and lives in an urban area with moderate air pollution exposure.

## Presenting Complaints:

Sara reported episodes of shortness of breath during physical activity, accompanied by wheezing and occasional chest tightness, especially at night.

## Diagnostic Tests Conducted:

- Pulmonary function tests (spirometry)
- Oxygen saturation measurement