

['Admission Date: 5/22/2004']

['Discharge Date: 8/17/2004']

HISTORY OF PRESENT ILLNESS: This 81-year-old female with diabetes mellitus **DISEASE** , hypertension **DISEASE** , and atrial fibrillation **DISEASE** presents with nausea **DISEASE** , vomiting **DISEASE** , left lower quadrant pain **DISEASE** for one day and chronic nonbloody diarrhea **DISEASE** on 7/27/04. The patient has had diarrhea **DISEASE** for years , but this episode was more severe and it was accompanied by nausea **DISEASE** and vomiting **DISEASE** . Upon evaluation , she was found to have heme negative stool. An abdominal CT showed a focal segment of colitis **DISEASE** at the splenic flexure with significant atheromatous disease **DISEASE** of the SMA **DISEASE** . Findings were worrisome for mesenteric ischemia **DISEASE** . As part of her preoperative evaluation , she underwent a stress MIBI which showed anterolateral , apical , and inferoposterior ischemia **DISEASE** consistent with three-vessel disease **DISEASE** or left main disease. She does report intermittent chest pressure and shortness of breath **DISEASE** at rest and with mild exertion over the past few years , increasing in the last three months. She also reports two-pillow orthopnea **DISEASE** and PMD **DISEASE** . Given these findings , the patient underwent cardiac catheterization on 9/18/04 as well as evaluation for celiac , SMA **DISEASE** and IMA **CHEMICAL** . Catheterization showed 40% left main lesion. Otherwise , patent coronary artery.

PAST MEDICAL HISTORY: Includes diabetes **DISEASE** with a hemoglobin A1c of 5.7 in 1/17 , hypertension **DISEASE** , question of COPD **DISEASE** , depression **DISEASE** , coronary artery disease **DISEASE** with an echo showing an EF of 45% on baseline inferior hypokinesis **DISEASE** .