['Admission Date: 2/25/1997']

['Discharge Date: 10/1/1997']

HISTORY OF PRESENT ILLNESS: The patient is a 72-year-old woman with a history of coronary artery disease DISEASE who was admitted on 8/10/97 CHEMICAL for bladder suspension surgery to Tion Hospital The plan at that time was for a laparoscopic procedure , but because of bladder puncture , it was converted to an open procedure. She had ST depressions DISEASE on EKG intraoperatively , and was admitted to the ICU there. She was treated for a myocardial infarction DISEASE and developed postmyocardial angina DISEASE with EKG changes which were unrelieved by sublingual nitroglycerin CHEMICAL . For this reason , she was started on IV TNG CHEMICAL and transferred to Mead Ry'sweeks DISEASE Hospital And Medical Center for cardiac catheterization. She underwent cardiac catheterization on 0/14/97 and this revealed three vessel disease DISEASE . She underwent coronary artery bypass grafting on 5/16/97 CHEMICAL with a LIMA to LAD , SVG to PDA , and SVG to OM1. Her postoperative course was complicated by paroxysmal atrial fibrillation DISEASE , with which she was symptomatic. She was started on procainamide CHEMICAL during the admission and was discharged home on 5/2/97 with a subtherapeutic CHEMICAL proc/nepa level (3.0-4.5). She arrived home at 4:30 p.m. and felt well until approximately 7:00 p.m. , when she developed acute onset of 8 out of 10 chest pain DISEASE across her entire chest radiating down the left arm and associated with light-headedness DISEASE and visual changes. She reported this was similar to a prior anginal DISEASE episode. She took three sublingual nitroglycerin CHEMICAL at home and had no relief. EMTs were called and found the patient pale , diaphoretic , with blood pressure 90/palp , and a heart rate of 150. She was treated with more nitroglycerin CHEMICAL and improved somewhat in terms of her pain DISEASE . She was taken to Aen Er/in Hospital where EKG showed rapid atrial fibrillation DISEASE with ST depressions DISEASE globally. She was given IV fluids and 750 mg of procainamide CHEMICAL , as well as 20 mg of IV Cardizem and nitroglycerin CHEMICAL . Her pain DISEASE resolved. Her systolic blood pressure came up to the 110 range and her atrial fibrillation DISEASE rate decreased to the 80s. Subsequently , she converted into normal sinus rhythm with a rate in the 60s and was transferred to the Hamren Ry County Medical Center for further treatment. Her pain DISEASE lasted for approximately one hour in total. On arrival to the Nal CHEMICAL Vervmi Theast Medical Center on the floor , she had 3 out of 10 chest pain DISEASE , without shortness of breath DISEASE , presyncope

DISEASE or palpitations DISEASE . This pain DISEASE radiates to the back and was reproducible with left-sided sternal pressure unlike her prior anginal DISEASE episodes.

PAST MEDICAL HISTORY: (1) Hypertension DISEASE ; (2) High cholesterol CHEMICAL ; (3) Coronary artery disease DISEASE status post CABG on 5/16/97 CHEMICAL with anatomy as described above; (4) Bladder suspension surgery in 1995 and 1997; (5) Paroxysmal atrial fibrillation DISEASE perioperatively.

ALLERGIES: No known drug allergies DISEASE .