## **Outpatient Note (Follow up)**

Date: 04/11/2022

**Chief complaint:** 

FOLLOW UP

History of present illness: OCCASIONAL NECK PAIN New allergy: [X ] No [] Yes ....

**Physical examination:** 

- Vital signs: T: °C. Pulse: /min. R: /min. BP:100 /70 mmHg. Height: cm. Weight: kg.

## - Significant findings:

**IMPRESSION** 

- 1. Co-dominance.
- Mild coronary calcification. Total calcium score (AJ 130) = 55.3.
  An eccentric calcified plaque at ostial LAD causing moderate luminal obscuration, likely no significant stenosis.
  The remainder of CTCA shows no significant stenosis or obstructive coronary artery disease.
- 5. No coronary artery anomaly is depicted. 6. LVEF is 71 %

7. Included thoracic aorta shows no aneurysm or dissection.

Impression or diagnosis: ESSENTIAL HYPERTENSION

T2DM

DISLIPIDEMIA

Plan and management: CONTINUE REGULAR MEDICATION

ADVISED LOW DOSE ASPIRIN

I have discussed diagnosis and plan with patient/family; who agreed and voiced understanding.

## **Diagnosis:**

- 1. Hypertension
- 2. DM Type 2
- 3. Dyslipidemia