

YOSHIMOTO, AYAE Admin Sex: Female DOB: 10/26/1994

Continuity of Care Document

Summarization of Episode Note | 01/4/2025 to 01/4/2025

Source: Georgetown University Hospital

Created: 11/26/2025

Demographics

Contact Information:

2520 MASSACHUSETTS AVE NW, WASHINGTON, DC 20008, USA

Tel: (415)605-9076 (Primary Home)

Email: AYEYSMT@GMAIL.COM

Previous Address(es):

--

Marital Status: Single

Religion: None

Race: --

Previous Name(s): --

Date of Death: //

Ethnic Group: Not Hispanic or Latino

Language: dn

ID: 50804262

Care Team

No Data to Display

Relationships

No Data to Display

Document Details

Source Contact Info

3800 Reservoir Road202-444-2000202-444-3597202-444-6473, Washington, DC 20007- , USA

Tel: (202)444-2000

Author Contact Info

11/26/2025 5:59 AM

Georgetown University Hospital

Recipient Contact Info

--

Healthcare Professionals

No Data to Display

IDs & Code Type Data

Document Type ID: 2.16.840.1.113883.1.3 : POCD\_HD000040

Document Template ID: 2.16.840.1.113883.10.20.22.1.1 : --, 2.16.840.1.113883.10.20.22.1.1 : 2015-08-01, 2.16.840.1.113883.10.20.22.1.2 : 2015-08-01

Document ID: 2.16.840.1.113883.3.1662.5.999362 : 697415252

Document Type Code: 2.16.840.1.113883.6.1, 34133-9

Document Language Code: en-US

Document Set ID: --

Document Version Number: --

Primary Encounter

Encounter Information

Registration Date: 01/4/2025

Discharge Date: 01/4/2025

Visit ID: --

Location Information

Georgetown University Hospital

(Work): 3800 Reservoir Road, Washington, DC 20007- , USA

Providers

Type	Name	Address	Phone
Admitting	Galler, Marjorie F	(Work): 3800 Reservoir Rd. NW, Washington, DC 20007- , USA	Tel: (202)243-3555 (Work)
Attending	Galler, Marjorie F	(Work): 3800 Reservoir Rd. NW, Washington, DC 20007- , USA	Tel: (202)243-3555 (Work)
Referring	SELF-REFERRED, SELF	--	--

## Encounter

**GUH FIN 7732199117 Date(s): 1/4/25 - 1/4/25**

Georgetown University Hospital 3800 Reservoir Road Washington, DC 20007- USA (202) 444-2000

### Encounter Diagnosis

Acute chest wall pain (Discharge Diagnosis) - 1/4/25

Other chest pain (Final) - 1/4/25

Other fatigue (Final) - 1/4/25

Discharge Disposition: Disch to home or self care-Routine

Attending Physician: Galler, MD, Marjorie F

Admitting Physician: Galler, MD, Marjorie F

Referring Physician: SELF-REFERRED, SELF

**Encounter Type: Emergency**

## Reason for Visit

PA/CHEST PAIN

## Allergies, Adverse Reactions, Alerts

No Known Medication Allergies

*Author: Hernandez, Jocelyn Samantha, MedStar GUH Neurology at Beverly Rd*

*Last Modified: 07/7/2025 2:20 PM*

Substance	Criticality	Severity	Reaction	Reaction Severity	Status
Pollen <i>Author: Eith, Jeremy M, MedStar Medical Group Primary Care at Lafayette Centre</i> <i>Last Modified: 08/27/2025 1:56 PM</i>			eye irritation sneezing throat irritation		Active

## Treatment Plan

### Future Scheduled Tests

Radiology:

US Breast Complete Bilateral 8/19/25

*Author: Eith, Jeremy M, MedStar Health*

*Last Modified: 08/19/2025 8:04 PM*

US Transvaginal 8/19/25

*Author: Eith, Jeremy M, MedStar Health*

*Last Modified: 08/19/2025 8:04 PM*

## Immunizations

No data available for this section

## Medications

<b>drospirenone-ethinyl estradiol (Yaz 3 mg-0.02 mg oral tablet)</b> Status: Ordered Start Date: 11/8/24 1 Tablet(s) By Mouth every day. start first tablet today. Refills: 4. Ordering provider: Buek, MD, John David <i>Author: Buek, John David, MedStar WHC OB/GYN at Lafayette Centre</i> <i>Last Modified: 11/8/2024 2:18 PM</i>	<b>CVS/pharmacy #5674</b> 3700 Newark St NW Washington, DC 200163036
<b>ethinyl estradiol-norethindrone (Junel Fe 1 mg-20 mcg oral tablet)</b> Status: Ordered Start Date: 10/9/25 1 Tablet(s) By Mouth every day. Refills: 3. Ordering provider: Quiett, MD, Valencia M. <i>Author: Quiett, Valencia M., MedStar WHC OB/GYN at Lafayette Centre</i> <i>Last Modified: 10/9/2025 7:19 PM</i>	<b>CVS/pharmacy #1347</b> 6 Dupont Cir NW Washington, DC 200361108
<b>naproxen (naproxen sodium 550 mg oral tablet)</b> Status: Ordered Start Date: 8/27/25 1 Tablet(s) By Mouth 2 times a day as needed migraine. can take with caffeinated beverage. Refills: 1. Ordering provider: Schreiber, PA-C, Lisa Marlene <i>Author: Schreiber, Lisa Marlene, MedStar NRN Physiatry at Lafayette Centre</i> <i>Last Modified: 08/27/2025 2:27 PM</i>	<b>CVS/pharmacy #1347</b> 6 Dupont Cir NW Washington, DC 200361108
<b>drospirenone-ethinyl estradiol (Yaz 3 mg-0.02 mg oral tablet)</b> Status: Completed Start Date: 8/22/24 Stop Date: 11/8/24 1 Tablet(s) By Mouth every day. Refills: 4. Ordering provider: Buek, MD, John David <i>Author: Buek, John David, MedStar WHC OB/GYN at Lafayette Centre</i> <i>Last Modified: 11/8/2024 2:18 PM</i>	<b>CVS/pharmacy #5674</b> 3700 Newark St NW Washington, DC 200163036
<b>mupirocin topical (mupirocin 2% topical ointment)</b> Status: Completed Start Date: 6/7/24 Stop Date: 6/17/24 1 Application Topical 2 times a day for 10 Day(s). Refills: 0. Ordering provider: Russo, MD, Mark E. <i>Author: MedStar Medical Group Ear Nose and Throat at Lafayette MACC</i> <i>Last Modified: 06/17/2024 3:46 PM</i>	<b>CVS/pharmacy #5674</b> 3700 Newark St NW Washington, DC 200163036
<b>naproxen (naproxen sodium 550 mg oral tablet)</b> Status: Discontinued Start Date: 7/7/25 Stop Date: 8/27/25 1 Tablet(s) By Mouth 2 times a day as needed migraine. can take with caffeinated beverage. Refills: 1. Ordering provider: Schreiber, PA-C, Lisa Marlene <i>Author: Schreiber, Lisa Marlene, MedStar GUH Neurology at Beverly Rd</i> <i>Last Modified: 08/27/2025 2:27 PM</i>	<b>CVS/pharmacy #1347</b> 6 Dupont Cir NW Washington, DC 200361108

<b>acetaminophen (Tylenol)</b> Status: Voided Start Date: 6/7/24 Stop Date: 7/7/25 By Mouth. Author: Hernandez, Jocelyn Samantha, MedStar Medical Group Ear Nose and Throat at Lafayette MACC Last Modified: 07/7/2025 1:22 PM	
--	--

Problem List

Condition	Confirmation	Course	Effective Dates	Status	Health Status	Informant
Migraine with aura Author: Tinsley, Amanda Grace, MedStar GUH Neurology at Beverly Rd Last Modified: 07/7/2025 1:56 PM	Confirmed			Active Author: Tinsley, Amanda Grace, MedStar GUH Neurology at Beverly Rd Last Modified: 07/7/2025 1:56 PM		
Prolonged aura migraine Author: Tinsley, Amanda Grace, MedStar GUH Neurology at Beverly Rd Last Modified: 07/7/2025 2:03 PM	Confirmed			Active Author: Tinsley, Amanda Grace, MedStar GUH Neurology at Beverly Rd Last Modified: 07/7/2025 2:03 PM		
Numbness Author: Tinsley, Amanda Grace, MedStar GUH Neurology at Beverly Rd Last Modified: 07/7/2025 2:02 PM	Confirmed			Active Author: Tinsley, Amanda Grace, MedStar GUH Neurology at Beverly Rd Last Modified: 07/7/2025 2:02 PM		

Procedures

No data available for this section

Results

Laboratory List

Name	Date
Lyme Disease Antibody IgG/IgM with Reflex	1/4/25
Thyroid Stimulating Hormone Cascade (TSH Function Cascade)	1/4/25
VTE D-Dimer (D-Dimer for VTE Exclusion)	1/4/25
Basic Metabolic Panel (BMP)	1/4/25
Beta hCG Qualitative	1/4/25
Complete Blood Count w/ Differential (CBC with Differential)	1/4/25
N-terminal Pro-Brain Natriuretic Peptide (NT-proBNP)	1/4/25
Troponin-I High Sensitivity	1/4/25
.GFR Universal	1/4/25

1/4/25:

Test	Result	Reference Range	Specimen Source	Laboratory
Diastolic BP, Automated <i>Author: Schoeb, Brittany Libre, Georgetown University Hospital</i> <i>Last Modified: 01/5/2025 2:49 AM</i>	74 mmHg	(Normal is 60-89 mmHg)		
Peripheral Pulse Rate <i>Author: Schoeb, Brittany Libre, Georgetown University Hospital</i> <i>Last Modified: 01/5/2025 2:49 AM</i>	78 bpm	(Normal is 60-100 bpm)		
Respiratory Rate <i>Author: Schoeb, Brittany Libre, Georgetown University Hospital</i> <i>Last Modified: 01/5/2025 2:49 AM</i>	16 BR/min	(Normal is 12-20 BR/min)		
Systolic BP, Automated <i>Author: Schoeb, Brittany Libre, Georgetown University Hospital</i> <i>Last Modified: 01/5/2025 2:49 AM</i>	109 mmHg	(Normal is 90-139 mmHg)		
Lyme Disease Ab IgG Screen <i>Author: Nasser, Chahrazade A, Union Memorial Hospital</i> <i>Last Modified: 01/6/2025 2:37 PM</i>	Negative		Blood	UMH Lab
Lyme Disease Ab IgM Screen <i>Author: Nasser, Chahrazade A, Union Memorial Hospital</i> <i>Last Modified: 01/6/2025 2:37 PM</i>	Negative		Blood	UMH Lab
Lyme Disease Ab Screen <i>Author: Nasser, Chahrazade A, Union Memorial Hospital</i> <i>Last Modified: 01/6/2025 2:37 PM</i>	FINAL-Negative		Blood	UMH Lab
TSH <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/5/2025 2:58 AM</i>	1.316 uIntl_Unit/mL	(Normal is 0.550-4.780 uIntl_Unit/mL)	Blood	GUH Lab
D-Dimer VTE <i>Author: Dinku, Surafel fentaw, Georgetown University Hospital</i> <i>Last Modified: 01/5/2025 12:05 AM</i>	<0.27 mcg/mL FEU 1	(Normal is <=0.50 mcg/mL FEU)	Blood	GUH Lab
AGAP <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:20 PM</i>	9 mmol/L	(Normal is 5-15 mmol/L)	Blood	GUH Lab
Basophil % <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:08 PM</i>	0.4 %	(Normal is 0.0-2.0 %)	Blood	GUH Lab
Basophil Abs <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:08 PM</i>	0.0 k/uL	(Normal is 0.0-0.2 k/uL)	Blood	GUH Lab

Beta hCG QI <i>Author: Asfaw, Mekuria A, Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:18 PM</i>	Negative 2		Blood	
BUN <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:20 PM</i>	6 mg/dL	(Normal is 9-23 mg/dL)	Blood	GUH Lab
Calcium Lvl <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:20 PM</i>	9.4 mg/dL	(Normal is 8.7-10.4 mg/dL)	Blood	GUH Lab
Chloride <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:20 PM</i>	106 mmol/L	(Normal is 98-107 mmol/L)	Blood	GUH Lab
CO2 <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:20 PM</i>	25 mmol/L	(Normal is 20-31 mmol/L)	Blood	GUH Lab
Creatinine <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:20 PM</i>	0.50 mg/dL	(Normal is 0.50-0.80 mg/dL)	Blood	GUH Lab
Eos % <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:08 PM</i>	1.3 %	(Normal is 0.0-6.0 %)	Blood	GUH Lab
Eosinophil Abs <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:08 PM</i>	0.1 k/uL	(Normal is 0.0-0.7 k/uL)	Blood	GUH Lab
est. CrCl <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:20 PM</i>	116.88 mL/min 3			
GFR Universal <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:20 PM</i>	129 mL/min/1.73 m2 4	(Normal is >=60 mL/min/1.73 m2)	Blood	
Glucose Lvl Random <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:20 PM</i>	98 mg/dL 5	(Normal is 65-140 mg/dL)	Blood	GUH Lab
Hct <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:08 PM</i>	35.1 %	(Normal is 34.5-44.0 %)	Blood	GUH Lab
Hgb <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:08 PM</i>	11.8 gm/dL	(Normal is 11.0-14.5 gm/dL)	Blood	GUH Lab
Imm Gran % <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:08 PM</i>	0.1 %	(Normal is 0.1-0.3 %)	Blood	GUH Lab
Imm Gran Absolute <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:08 PM</i>	0.01 k/uL	(Normal is 0.01-0.03 k/uL)	Blood	GUH Lab

Lymph % <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:08 PM</i>	32.6 %	(Normal is 15.0-45.0 %)	Blood	GUH Lab
Lymph Absolute <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:08 PM</i>	2.6 k/uL	(Normal is 0.6-4.9 k/uL)	Blood	GUH Lab
MCH <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:08 PM</i>	30.4 pg	(Normal is 27.0-31.0 pg)	Blood	GUH Lab
MCHC <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:08 PM</i>	33.6 gm/dL	(Normal is 31.0-36.0 gm/dL)	Blood	GUH Lab
MCV <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:08 PM</i>	90.5 FL	(Normal is 81.0-100.0 FL)	Blood	GUH Lab
Mono % <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:08 PM</i>	3.6 %	(Normal is 3.0-12.0 %)	Blood	GUH Lab
Monocyte Abs <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:08 PM</i>	0.3 k/uL	(Normal is 0.1-1.3 k/uL)	Blood	GUH Lab
MPV <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:08 PM</i>	9.4 FL	(Normal is 7.5-10.4 FL)	Blood	GUH Lab
Neutro % <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:08 PM</i>	62.0 %	(Normal is 43.0-75.0 %)	Blood	GUH Lab
Neutro Absolute <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:08 PM</i>	4.9 k/uL	(Normal is 1.7-8.1 k/uL)	Blood	GUH Lab
NRBC Abs <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:08 PM</i>	0.0 k/uL	(Normal is 0.0-0.1 k/uL)	Blood	GUH Lab
NRBC auto <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:08 PM</i>	0 /100 wbcs	(Normal is 0-2 /100 wbcs)	Blood	GUH Lab
NT-proBNP <i>Author: Asfaw, Mekuria A, Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:21 PM</i>	<35 pg/mL 6		Blood	GUH Lab
Platelet <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:08 PM</i>	447 k/uL	(Normal is 145-400 k/uL)	Blood	GUH Lab
Potassium Lvl <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:20 PM</i>	4.2 mmol/L	(Normal is 3.4-4.5 mmol/L)	Blood	GUH Lab



RBC <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:08 PM</i>	3.88 million/uL	(Normal is 3.60-5.00 million/uL)	Blood	GUH Lab
RDW <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:08 PM</i>	11.3 %	(Normal is 11.5-15.5 %)	Blood	GUH Lab
Sodium Lvl <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:20 PM</i>	140 mmol/L	(Normal is 136-145 mmol/L)	Blood	GUH Lab
Troponin I HS <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:18 PM</i>	<3 ng/L 7	(Normal is 0-34 ng/L)	Blood	GUH Lab
WBC <i>Author: Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:08 PM</i>	7.95 k/uL	(Normal is 4.00-10.80 k/uL)	Blood	GUH Lab
Peripheral Pulse Rate <i>Author: Green, Morgan Lee, Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 8:07 PM</i>	82 bpm	(Normal is 60-100 bpm)		
Respiratory Rate <i>Author: Green, Morgan Lee, Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 8:07 PM</i>	16 BR/min	(Normal is 12-20 BR/min)		
Temperature Oral <i>Author: Green, Morgan Lee, Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 8:07 PM</i>	37.2 DegC	(Normal is 36-37.8 DegC)		
Diastolic BP, Automated <i>Author: Green, Morgan Lee, Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 8:07 PM</i>	68 mmHg	(Normal is 60-89 mmHg)		
MAP, Automated <i>Author: Green, Morgan Lee, Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 8:07 PM</i>	79 mmHg			
Systolic BP, Automated <i>Author: Green, Morgan Lee, Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 8:07 PM</i>	101 mmHg	(Normal is 90-139 mmHg)		
Body Mass Index Dosing <i>Author: Green, Morgan Lee, Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 8:11 PM</i>	17.15 kg/m2	(Normal is 40 kg/m2)		
BSA Dosing <i>Author: Green, Morgan Lee, Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 8:11 PM</i>	1.45 m2			

Dosing Height Method <i>Author: Green, Morgan Lee, Georgetown University</i> <i>Hospital</i> <i>Last Modified: 01/4/2025 8:11 PM</i>	Estimated			
Dosing Weight Method <i>Author: Green, Morgan Lee, Georgetown University</i> <i>Hospital</i> <i>Last Modified: 01/4/2025 8:11 PM</i>	Estimated			
Height/Length Dosing <i>Author: Green, Morgan Lee, Georgetown University</i> <i>Hospital</i> <i>Last Modified: 01/4/2025 8:11 PM</i>	162 cm			
Weight Dosing <i>Author: Green, Morgan Lee, Georgetown University</i> <i>Hospital</i> <i>Last Modified: 01/4/2025 8:11 PM</i>	45 kg			

<sup>1</sup> Interpretive Data: Below the D-Dimer age-based cutoff, VTE is unlikely in low to moderate risk patients as determined by clinical risk assessment, stratification, and scoring system.

Use of an age-adjusted D-Dimer cut off value is a post-analytic modification of this FDA approved test and is considered off label use of the test result. MedStar has confirmed the validity of age-adjusted cut off for this assay based on literature (Summary of Age-adjusted D-Dimer articles as published in the American Academy of Emergency Medicine Common Sense Newsletter, Jan/Feb 2016) and a clinical retrospective study.

Lipemia may cause an under-estimation of the D-Dimer level. Therefore, results from lipemic specimens should be interpreted with caution. The presence of rheumatoid factor at a level > 50 IU/ml may lead to an over-estimation of the D-Dimer level.

<sup>2</sup> Interpretive Data: This test provides a presumptive diagnosis for pregnancy. A confirmed pregnancy diagnosis should be made by a physician after all clinical and laboratory findings have been evaluated.

<sup>3</sup> Result Comment: Resulted by Rule: PHA\_eCrCl\_CALCULATION\_CPOE

The documented "Actual Body Weight Calc" Was used for the calculation.

Actual Weight < Ideal Body Weight

The estimated creatinine clearance is calculated based on the following Cockcroft-Gault formulas:

Male:  $((140 - \text{Age}) / \text{SerumCreat}) * (\text{Weight} / 72)$

Female:  $((140 - \text{Age}) / \text{SerumCreat}) * (\text{Weight} / 72) * 0.85$

As with any estimated result, discretion should be applied before clinical decisions are made.

<sup>4</sup> Interpretive Data: Below 60 mL/min/1.73m<sup>2</sup>- the prevalence of complications of CKD increases. GFR declines with age.

Calculation in use for the GFR result is the CKD-EPI (2021) equation from the National Kidney Foundation

<sup>5</sup> Interpretive Data: Random Glucose Level cannot be used for diagnosis of diabetes. Glucose target in the hospitalized patient is 80-110 before meals and no more than 180 at other times.

<sup>6</sup> Interpretive Data: Guidelines recommend using natriuretic peptides in both Emergency Department (ED) and outpatient settings for

diagnosis or exclusion of heart failure.

Emergency Department (ED) Population:

Age Group	NT-proBNP result (pg/mL)	Interpretation
All Ages*	<300	Negative (Heart Failure Unlikely)
<50 years*	>=300 – <=450	Result Indeterminate
50-75 years	>=300 – <=900	(Consider other reasons for NT-proBNP elevation)
>75 years	>=300 – <=1800	
<50 years*	>450	Positive (Heart Failure Likely)
50-75 years	>900	
>75 years	>1800	

Outpatient Population:

Age Group	NT-proBNP result (pg/mL)	Interpretation
All Ages*	<125	Negative (Heart Failure Unlikely)
All Ages* >=125 Consider Heart Failure as well as other Causes of NT-proBNP elevation		

Chronic kidney disease increases NT-proBNP concentrations, as NT-proBNP is excreted by the kidneys. NT-proBNP values increase with age, tend to be higher in women and lower in obese patients.

Other conditions such as chronic heart failure, acute coronary syndrome, atrial fibrillation, pulmonary embolism, valvular heart disease, myocarditis, pulmonary hypertension, renal deficiency, stroke, and sepsis can elevate NT-proBNP levels in the absence of acute heart failure. In addition, flash pulmonary edema, pericarditis, and cardiac tamponade are associated with reduced NT-proBNP levels.

\* Separate pediatric reference ranges are not defined for this assay by the manufacturer. As per literature, normal NT-proBNP levels can exceed 10,000 pg/mL in the first three days of life, are near 1,000 pg/mL in the first month of life and then gradually normalize into adult ranges.

<sup>7</sup> Interpretive Data: Unlikely ACS if baseline hsTropI:

<=3 ng/L;  
4-34 ng/L (female) or 4-53 ng/L (male) AND >=6 hours symptoms;  
4-34 ng/L (female) or 4-53 ng/L (male) AND 0-6 hours symptoms PLUS  
repeat hsTropI showing <=34 ng/L (female) or <=53 ng/L (male) and delta <7 ng/L every 2-3 hours until 6 hours from symptom onset

Evaluate for ACS if baseline hsTropI:

>34 ng/L (female) or >53 ng/L (male);  
4-34 ng/L (female) or 4-53 ng/L (male) AND 0-6 hours symptoms PLUS  
repeat hsTropI showing >34 ng/L (female) or >53 ng/L (male) or delta >=7 ng/L every 2-3 hours until 6 hours from symptom onset

Laboratory Information

**UMH Lab**

CLIA Number: 21D0693562  
MedStar Union Memorial Hospital  
201 East University Parkway  
(410)554-2165  
Baltimore, MD 21218- USA

**GUH Lab**

CLIA Number: 09D0207566

MedStar Georgetown University Hospital  
3800 Reservoir Road, NW  
(202)444-2592  
Washington, DC 20007- USA

**GUH Lab**

CLIA Number: 09D0207566

MedStar Georgetown University Hospital  
3800 Reservoir Road, NW  
(202)444-2592  
Washington, DC 20007- USA

**GUH Lab**

MedStar Georgetown University Hospital  
3800 Reservoir Road, NW  
(202)444-2592  
Washington, DC 20007- USA

CLIA Number: 09D0207566

**Radiology Reports**

Exam Date Time	Procedure	Performing Provider	Status
1/4/25 3:48 PM	XR Chest PA and LAT 2 View	CONTRIBUTOR_SYSTEM, POWERSCRIBE;	Auth (Verified)

Notes:

(XR Chest PA and LAT 2 View) Reason For Exam: Chest Pain  
REPORT

CLINICAL HISTORY:

Chest pain. CP

STUDY: PA and lateral view(s) of the chest

COMPARISON: Prior chest radiograph(s) date September 7, 2024.

FINDINGS:

Cardiac size and pulmonary vascularity are normal. Mediastinal contours are normal. The lungs are well expanded and clear. No pleural effusion or pneumothorax.

Soft tissues are intact. Bony structures are intact. Upper abdomen appears normal.

IMPRESSION:

Normal chest radiographs.

Reading Location: MGRHU2RRMDT248

\*\*\*\*\* Final \*\*\*\*\*

Dictated by: Cormier, MD, Mary Grace

Dictated at: 01/04/2025 3:57 pm

This Imaging Study Was Reviewed and Its Interpretation Verified by: Cormier, MD, Mary Grace

Electronically Signed: 01/04/2025 3:57 pm

*Author: Galler, Marjorie F, Georgetown University Hospital*

*Last Modified: 01/5/2025 12:42 AM*

### Vital Signs

---

1/4/25

Temperature Oral <i>Author: Green, Morgan Lee, Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 8:07 PM</i>	37.2 DegC	(Normal is 36-37.8 DegC)
Peripheral Pulse Rate <i>Author: Schoeb, Brittany Libre, Georgetown University Hospital</i> <i>Last Modified: 01/5/2025 2:49 AM</i>	78 bpm	(Normal is 60-100 bpm)
Peripheral Pulse Rate <i>Author: Green, Morgan Lee, Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 8:07 PM</i>	82 bpm	(Normal is 60-100 bpm)
Respiratory Rate <i>Author: Schoeb, Brittany Libre, Georgetown University Hospital</i> <i>Last Modified: 01/5/2025 2:49 AM</i>	16 BR/min	(Normal is 12-20 BR/min)
Respiratory Rate <i>Author: Green, Morgan Lee, Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 8:07 PM</i>	16 BR/min	(Normal is 12-20 BR/min)
Blood Pressure	109/74 mmHg <i>Author: Schoeb, Brittany Libre, Georgetown University Hospital</i> <i>Last Modified: 01/5/2025 2:49 AM</i> <i>Author: Schoeb, Brittany Libre, Georgetown University Hospital</i> <i>Last Modified: 01/5/2025 2:49 AM</i>	(Normal is 90-139/60-89 mmHg)

Blood Pressure	101/68 mmHg <i>Author: Green, Morgan Lee, Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 8:07 PM</i> <i>Author: Green, Morgan Lee, Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 8:07 PM</i>	(Normal is 90-139/60-89 mmHg)
MAP, Automated <i>Author: Green, Morgan Lee, Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 8:07 PM</i>	79 mmHg	
Height/Length Dosing <i>Author: Green, Morgan Lee, Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 8:11 PM</i>	162 cm	
Body Mass Index Dosing <i>Author: Green, Morgan Lee, Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 8:11 PM</i>	17.15 kg/m2	(Normal is 40 kg/m2)
Weight Dosing <i>Author: Green, Morgan Lee, Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 8:11 PM</i>	45 kg	

Social History

Social History Type	Response
Tobacco/Nicotine	Use: Past. <i>Author: Brown, Marquita Chauntice</i> <i>Last Modified: 05/27/2024 12:36 PM</i>
Birth Sex <i>Author: MedStar Health</i> <i>Last Modified: 11/5/2025 3:53 PM</i>	Female
Sex Representation <i>Author: MedStar Health</i> <i>Last Modified: 11/5/2025 3:53 PM</i>	Female (finding)
Pregnancy Status <i>Author: Schoeb, Brittany Libre, Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 10:46 PM</i>	Possible unconfirmed
Pregnancy Status <i>Author: Green, Morgan Lee, Georgetown University Hospital</i> <i>Last Modified: 01/4/2025 8:11 PM</i>	Possible unconfirmed

Goals

No data available for this section

Hospital Discharge Instructions

Section Author: Galler, Marjorie F, Georgetown University Hospital, 01/5/2025 2:32 AM

## **Patient Education**

01/04/2025 21:32:31

### **ED Chest Pain Patient Family Education**

You were seen in the emergency department with chest pain. Your labs showed no sign of a clot or heart inflammation. Your EKG was normal, and your chest x-ray was also normal. I am able to recreate your chest pain by pressing on your ribs, which suggest that your pain is musculoskeletal in nature. Please use heat packs, take ibuprofen, and warm showers to help with the discomfort.

You also describe some longer-term symptoms such as weight loss, decreased appetite, and fatigue. I have sent Lyme testing at your request, and recommend that you follow-up with your primary care doctor.

Please return to the emergency department if you have difficulty breathing, cannot stay hydrated by mouth, any new or and/or concerning symptoms.

### **MedStar Chest Pain Discharge Patient and Family Education**

#### **Information About Your Diagnosis**

##### **Chest Pain**

What you should know about this problem:

There are many things which cause chest pain and make people come to the Emergency Room. Some of these things need to be taken care of right away in the hospital, but others can be taken care of outside of the hospital. Pain in your chest may be coming from problems with your heart, lungs, stomach, muscles, ribs, gallbladder or bones. While there are many ways doctors can find the cause of your chest pain, sometimes more testing is needed to make sure it is not something more serious or life-threatening. This is why you may need more tests after you leave the Emergency Room. Make sure you follow the directions given to you by your Emergency Room doctor.

Go back to the Emergency Room right away if you feel:

- Chest pain that feels like crushing, squeezing, tightening or pressure.
- Pain that radiates or moves to your jaw, left arm, or between your shoulder blades.
- Chest pain with nausea, dizziness, sweating, a fast heartbeat or trouble breathing.
- Symptoms that change in nature or get worse.

01/04/2025 21:14:36

### **MedStar-Lyme Disease Testing Patient Memo**

#### **MEMORANDUM**

TO: Patients having testing for Lyme Disease

FROM: MedStar Health

RE: Senate Bill 926/House Bill 399- Lyme Disease- Laboratory Test- Required Notice  
(Effective October 1, 2016)

As required by the above referenced legislation, you are receiving this notice regarding the test for Lyme Disease that has been ordered by your physician:

"Your health care provider has ordered a laboratory test for the presence of Lyme disease for you. Current laboratory testing for Lyme disease can be problematic and standard laboratory tests often result in false negative and false positive results and, if done too early, you may not have produced enough antibodies to be considered positive because your immune response requires time to develop antibodies. If you are tested for Lyme disease and the results are negative, this does not necessarily mean you do not have Lyme disease. If you continue to experience unexplained symptoms, you should contact your health care provider and inquire about the appropriateness of retesting or initial or additional treatment."

Please consult your health care provider for questions about your symptoms, test, or results.

MedStar Custom 11/2016

#### Follow Up Care

01/04/2025 14:52:50

**With:** MGUH General Internal Medicine

**Address:**

2233 Wisconsin Ave, NW

3rd Floor, Suite 300

Washington, DC 20007-

(202)741-1250 Business (1)

**When:** 1 week

**Comments:** If you need a new primary care doctor, you could contact our internal medicine clinic

#### Reason for Referral

---

No data available for this section

#### Health Concerns

---

No data available for this section

#### Implantable Device List

---

No data available for this section

#### Discharge instructions

---

Event Display: Discharge Instructions



*Author: Georgetown University Hospital*

*Last Modified: 01/8/2025 9:19 PM*

## Patient Care team information

---

### Care Team Personnel

Name: Garcia, Gladys

Position: Ambulatory: Clinic Staff Co-sign Preg

Member Role: Diabetic Educator (Lifetime)

*Author: Garcia, Gladys, MedStar Health*

*Last Modified: 11/5/2025 4:01 PM*

### Care Team Related Persons

Name: LEE, JONG HYUN

*Author: MedStar Health*

*Last Modified: 05/2/2025 10:48 AM*

Name: LEE, JONG HYUN HYUN

*Author: MedStar Health*

*Last Modified: 05/2/2025 10:48 AM*

Name: LEE, JONG HYUN HYUN HYUN

*Author: MedStar Health*

*Last Modified: 05/2/2025 10:48 AM*

Name: LEE, JONG HYUN HYUN HYUN HYUN

*Author: MedStar Health*

*Last Modified: 05/2/2025 10:48 AM*

## Family History

---

No data available for this section

## Insurance Providers

---

Guarantor name: NA

Health Plan Information #: 1

Payer: AETNA OPEN

Payer Identifier: NA

Member Number: 904150909

Group Number: NA

Subscriber Identifier: 904150909

Relationship to Subscriber: self

Coverage Type: HMO

Coverage Verification Date: NA

Telecom: NA

Address: NA

