

CONFIDENTIAL PATIENT MASTER RECORD

PATIENT ID: 210 | MRN: MRN-210-2025

I. REGISTRATION FACE SHEET

PATIENT IDENTITY	
Name:	Cosmo Kramer
DOB:	1965-07-22
Gender:	male
Race:	Caucasian
Height:	6 ft 3 in
Weight:	180 lbs
Telecom:	212-555-1234
Address:	129 West 81st Street, Apt 5B, New York, NY 10024
Marital Status:	Single
Multiple Birth:	No (Order: 1)
COMMUNICATION	
Language:	English
Preferred:	Yes
EMERGENCY CONTACT	
Relationship:	Emergency Contact
Name:	Jerry Seinfeld
Telecom:	212-555-5678
Address:	129 West 81st Street, Apt 5A, New York, NY 10024
Gender:	male
Organization:	N/A
Period Start:	1990-01-01
Period End:	ongoing
PRIMARY PROVIDER	
General Practitioner:	Dr. Eldon Tyrell, MD
Managing Organization:	Mount Sinai Hospital
INSURANCE / PAYER	
Payer ID:	J1113
Payer Name:	Aetna
Plan Name:	Silver PPO

Plan Type:	PPO
Group ID:	GRP-KRAMERICA-001
Group Name:	Kramerica Industries
Member ID:	MBR-KRA-987654321
Policy Number:	POL-98765
Effective Date:	2023-01-01
Termination Date:	ongoing
Copay:	\$40
Deductible:	\$2000
SUBSCRIBER	
Subscriber ID:	MEM-987654321
Subscriber Name:	Cosmo Kramer
Relationship:	Self
Subscriber DOB:	1965-07-22
Subscriber Address:	129 West 81st Street, Apt 5B, New York, NY 10024

II. MEDICAL BIOGRAPHY & HISTORY

Cosmo Kramer is a 58-year-old male known for his eccentric personality, numerous get-rich-quick schemes, and his history of hypertension and anxiety. He lives alone in a New York City apartment and has an erratic lifestyle with inconsistent diet and exercise habits. He has a close relationship with his neighbor, Jerry Seinfeld, who is listed as his emergency contact.

Clinically, Mr. Kramer presents a challenge due to his atypical and often theatrical description of symptoms. He recently presented to his primary care physician, Dr. Tyrell, with complaints of intermittent, non-exertional chest pain. His anxiety about his health often amplifies his perception of his symptoms. The initial workup included basic labs, which were largely unremarkable aside from mild hyperlipidemia. A referral was made to cardiology for further evaluation.

The consulting cardiologist, Dr. Reed, found the chest pain to be atypical for cardiac ischemia but recommended a functional stress test given the patient's risk factors. However, Mr. Kramer refused the standard exercise treadmill test, citing a peculiar and unsubstantiated claim of 'full-body dry heaves' that would prevent him from performing the test. Despite being ambulatory, he insisted on a 'chemical' test. To accommodate the patient, and against standard procedure, the cardiologist has requested a Myocardial Perfusion Imaging (SPECT) scan, noting in the chart that this is a deviation from the usual diagnostic pathway. This lack of a preliminary, less-invasive test like an ECG-based stress test forms the basis for the expected prior authorization denial.

III. CLINICAL REPORTS & IMAGING

■ PCP VISIT NOTE

Report Text:

Patient: Kramer, Cosmo

MRN: MRN-210

DOB: 1965-07-22

Date of Service: 2024-05-01

CHIEF COMPLAINT:

"I keep getting this pain in my chest, doc. It's a real nuisance."

HISTORY OF PRESENT ILLNESS:

Mr. Cosmo Kramer is a 58-year-old male with a history of hypertension who presents today for evaluation of intermittent chest pain. He reports the pain started about a week ago. He describes the sensation as a "dull, weird feeling" located diffusely in the central chest, without clear radiation. The episodes are brief, lasting only a few minutes, and occur sporadically throughout the day. He cannot identify any specific triggers. He denies any clear relationship to physical exertion, eating, or stress. He has tried "stretching it out" which sometimes seems to help. He denies associated shortness of breath, diaphoresis, nausea, vomiting, or palpitations.

The patient is a poor historian and provides a somewhat vague and theatrical account of his symptoms. He expresses significant anxiety about the possibility of a serious cardiac issue, fueled by a television show he recently watched.

PAST MEDICAL HISTORY:

- Essential Hypertension, diagnosed ~2020.
- Generalized Anxiety Disorder.

PAST SURGICAL HISTORY:

- None reported.

MEDICATIONS:

- Lisinopril 10mg daily
- He also reports taking a "smorgasbord" of vitamins and supplements he buys online.

ALLERGIES:

- No known drug allergies.

SOCIAL HISTORY:

Mr. Kramer lives alone in an apartment in New York City. He is unemployed, pursuing various "business ventures." He denies smoking or illicit drug use. He drinks alcohol socially and occasionally. His diet is erratic and consists largely of takeout and food from his neighbor's refrigerator. Exercise is inconsistent.

REVIEW OF SYSTEMS:

- CONSTITUTIONAL: Denies fever, chills, weight loss. Reports some fatigue.
- CARDIOVASCULAR: As per HPI. Denies orthopnea, PND, or lower extremity edema.
- RESPIRATORY: Denies cough or dyspnea.
- GASTROINTESTINAL: Denies nausea, vomiting, heartburn, or ...

■ **CARDIOLOGY CONSULT NOTE**

Report Text:

Patient: Kramer, Cosmo

MRN: MRN-210

DOB: 1965-07-22

Date of Service: 2024-05-08

REASON FOR CONSULTATION:

Evaluation of atypical chest pain.

HISTORY OF PRESENT ILLNESS:

I had the pleasure of evaluating Mr. Kramer, a 58-year-old male referred by Dr. Tyrell for ongoing, intermittent chest pain. The patient largely reiterates the history provided in the referral note. He describes a vague, pressure-like sensation that is substernal, non-radiating, and occurs unpredictably. He adamantly denies any correlation with physical activity, stating, "It happens when I'm just lounging, Jerry! Lounging!" The pain is not relieved by rest and not exacerbated by palpation. He denies dyspnea on exertion, orthopnea, or PND.

His primary care physician performed baseline labs which were unremarkable. The patient's primary concern is a fear of heart disease. His risk factors include hypertension and hyperlipidemia (per recent labs).

REVIEW OF SYSTEMS:

As per the referring provider's note, with the addition that the patient denies any recent history of viral illness. He reports being very "flexible" and denies any musculoskeletal limitations that would prevent exercise.

PHYSICAL EXAMINATION:

- VITAL SIGNS: BP 138/84 mmHg, HR 80 bpm.
- GENERAL: Well-appearing, energetic male in no acute distress.
- HEART: RRR, no murmurs, gallops, or rubs. Point of maximal impulse is non-displaced. Carotid upstrokes are brisk and without bruits.
- LUNGS: Clear to auscultation.
- EXTREMITIES: Warm, well-perfused. No edema. Pulses 2+ and symmetric.

ASSESSMENT AND PLAN:

Mr. Kramer is a 58-year-old male with risk factors for CAD (hypertension, hyperlipidemia) presenting with atypical chest pain. While his symptoms are not classic for angina, a functional study is warranted to assess for inducible ischemia, given the potential for atypical presentations.

1. **Risk/Benefit Discussion:** I discussed the diagnostic options with the patient. The standard-of-care approach would be a treadmill exercise stre...

■ **LAB REPORT BMP LIPID**

Report Text:

Patient: Kramer, Cosmo

MRN: MRN-210

DOB: 1965-07-22

Collection Date: 2024-05-02 08:30 EST

Report Date: 2024-05-02 09:50 EST

BASIC METABOLIC PANEL ---

SODIUM

Result: 140 mmol/L
Reference Range: 136-145 mmol/L

POTASSIUM

Result: 4.1 mmol/L
Reference Range: 3.5-5.1 mmol/L

CHLORIDE

Result: 101 mmol/L
Reference Range: 98-107 mmol/L

CARBON DIOXIDE

Result: 24 mmol/L
Reference Range: 23-29 mmol/L

BUN

Result: 15 mg/dL
Reference Range: 6-24 mg/dL

CREATININE

Result: 0.9 mg/dL
Reference Range: 0.7-1.3 mg/dL

GLUCOSE

Result: 92 mg/dL
Reference Range: 74-106 mg/dL

LIPID PANEL ---

TOTAL CHOLESTEROL

Result: 215 mg/dL (High)
Reference Range: <200 mg/dL

TRIGLYCERIDES

Result: 160 mg/dL (Borderline High)
Reference Range: <150 mg/dL

HDL CHOLESTEROL

Result: 45 mg/dL
Reference Range: >40 mg/dL

LDL CHOLESTEROL (CALCULATED)

Result: 138 mg/dL (High)
Reference Range: <100 mg/dL

END OF REPORT ---

■ COLONOSCOPY REPORT 2022

Report Text:

Patient: Kramer, Cosmo

MRN: MRN-210

DOB: 1965-07-22

Date of Procedure: 2022-08-10

PROCEDURE: Diagnostic Colonoscopy (45378)

INDICATION: Average risk screening for colon cancer (Z12.11).

INSTRUMENT: Olympus CF-HQ190L Colonoscope.

PRE-PROCEDURE DIAGNOSIS: Screening for malignant neoplasm of colon.

POST-PROCEDURE DIAGNOSIS: Normal colonoscopy.

MEDICATIONS: Fentanyl 50 mcg IV, Midazolam 2 mg IV.

PROCEDURE DESCRIPTION:

After informed consent was obtained, the patient was placed in the left lateral decubitus position. Continuous monitoring of heart rate, blood pressure, and oxygen saturation was performed. The digital rectal exam was unremarkable. The colonoscope was inserted into the rectum and advanced without difficulty through the entire colon, cecum, and into the terminal ileum. The cecum was identified by visualization of the appendiceal orifice and ileocecal valve. Withdrawal was performed slowly with careful mucosal inspection.

FINDINGS:

- Terminal Ileum: Normal mucosa.
- Cecum and Ascending Colon: Normal mucosa. No polyps, masses, or inflammation.
- Transverse Colon: Normal mucosa. No polyps, masses, or inflammation.
- Descending Colon: Normal mucosa. No polyps, masses, or inflammation.
- Sigmoid Colon: A few scattered diverticula without signs of inflammation.
- Rectum: Normal mucosa. Internal hemorrhoids noted.

PREPARATION QUALITY: Excellent. Boston Bowel Preparation Scale Score: 9 (3+3+3).

COMPLICATIONS: None.

IMPRESSION:

1. Normal colonoscopy to the terminal ileum.
2. Diverticulosis of the sigmoid colon, uncomplicated.
3. Internal hemorrhoids.

RECOMMENDATIONS:

- Resume normal diet.
- Repeat screening colonoscopy in 10 years, or sooner if clinically indicated.

John Dorian, MD

Sacred Heart Hospital Gastroenterology

■ PATIENT DEMOGRAPHICS SUMMARY

Report Text:

Patient Demographics and Insurance Information

Date of Record: 2024-05-01

PATIENT INFORMATION ---

NAME: Cosmo Kramer

MRN: MRN-210

DATE OF BIRTH: 1965-07-22

AGE: 58

GENDER: Male

ADDRESS: 129 West 81st Street, Apt 5B, New York, NY 10024

TELEPHONE: 212-555-1234

MARITAL STATUS: Single

PRIMARY LANGUAGE: English

EMERGENCY CONTACT ---

NAME: Jerry Seinfeld

RELATIONSHIP: Emergency Contact

TELEPHONE: 212-555-5678

CARE TEAM ---

GENERAL PRACTITIONER: Dr. Eldon Tyrell, MD

MANAGING ORGANIZATION: Mount Sinai Hospital

INSURANCE INFORMATION ---

PAYER: Aetna

PLAN: Silver PPO

MEMBER ID: MBR-KRA-987654321

GROUP #: GRP-KRAMERICA-001

POLICY HOLDER: Cosmo Kramer (Self)

EFFECTIVE DATE: 2023-01-01
