

Medical Report

Patient Information:

Name: John Smith

Age: 42 years old

Gender: Male

Address: 123 Main St, Anytown, USA

Date of admission: April 18, 2023

Chief Complaint:

The patient presents to the emergency room with complaints of chest pain, shortness of breath, and dizziness.

History of Present Illness:

John Smith is a 42-year-old male who arrived at the emergency room complaining of chest pain, shortness of breath, and dizziness that began about an hour before his arrival. He reports that the pain is a constant pressure-like sensation in the center of his chest, radiating to his left arm. The patient also states that he has had shortness of breath and dizziness, but denies any nausea or vomiting.

Past Medical History:

John Smith has a past medical history of hypertension, hyperlipidemia, and smoking. He reports no known allergies.

Physical Examination:

The patient is alert and oriented, with stable vital signs. On physical examination, the patient's lungs are clear to auscultation, heart sounds are regular with no murmurs, gallops, or rubs. The abdomen is soft and non-tender, and there is no peripheral edema.

Diagnostic Studies:

An electrocardiogram (ECG) was obtained, which showed ST-segment elevations in the anterior leads, consistent with an acute myocardial infarction (AMI). Troponin levels were elevated at 5 ng/mL (normal range < 0.1 ng/mL), further supporting the diagnosis of an AMI. Chest x-ray was normal.

Assessment and Plan:

The patient was diagnosed with an acute myocardial infarction and was started on aspirin, nitroglycerin, and heparin. He was then taken to the cardiac catheterization laboratory for further evaluation and intervention. The patient was found to have significant coronary artery disease and underwent successful percutaneous coronary intervention (PCI) with stent placement. The patient was transferred to the cardiac care unit for post-procedural management.

Conclusion:

John Smith presented to the emergency room with symptoms of chest pain, shortness of breath, and dizziness, and was diagnosed with an acute myocardial infarction. He underwent successful PCI with stent placement and was transferred to the cardiac care unit for post-procedural management.