



## CARDIOLOGY OP NOTE

**Patient ID** : CH25016452  
**Patient Name** : Mr R SRINIVAS  
**Consultant** : DR. C V N MURTHY

**Encounter ID** : OPCH813254  
**Age / Gender** : 37Years/MALE  
**Date of Visit** : 11-06-2025  
**Visit Type** : FOLLOW UP

### CHIEF COMPLAINTS : FOLLOW UP CASE

**HISTORY OF PRESENT ILLNESS** : CAME WITH HOLTER REPORT

ABDOMINAL BLOATING , RIGHT HYPOCHONDRUM PAIN  
LOSS OF APPETITE  
MILD SOB ON EXERTION  
NO CHEST PAIN, NO GIDDINESS , NO PALPITATIONS

DAILY WALK-40 MINUTES

ON 10/6/25

HOLTER---- 24 HOURS MONITOR IS OF GOOD QUALITY , NO BRADY ARRHYTHMIA NOTED , FREQUENT VPCs (BURDEN OF 22.5%)  
FEW SHORT RUNS OF VT (NSVT) & COUPLETS /TRIPLETS RECORDED  
VERY FEW APCs (burden of 0.3%)

### VITALS

BP	: 126/88 mm Hg	WEIGHT	: 95.5 Kg/210.1 lbs	MELD	:
PR	: 69 /min	HEIGHT	: 173.8 cm	CTP	:
RR	: 18 /min	BMI	: 31.62 Kg/m2	GRBS	:
SPO2	: 97 %	TEMP	: 97.2 F	HBA1C	:
		BLOOD GROUP	:		

**PAIN SCORE** : 0:

**PAST MEDICAL Hx** : H/O

CAD-ACS EVOLVED INFERIOR WALL MI  
DILATED CARDIOMYOPATHY WITH SEVERE LV DYSFUNCTION, EF : 35%  
CAD SINGLE VESSEL DISEASE  
POST PTCA TO RCA WITH DES ON 23/04/25  
NSR , SEVERE LV DYSFUNCTION  
NON DIABETIC, NON HYPERTENSIVE  
CAG ON 23/04/25:  
LAD: TYPE III, ECTATIC CORONARIES  
PTCA ON 23/04/25:  
RCA- PROXIMAL TO MID WITH SYNERGY MEGATRON 4.0 X 32 MM DES  
GASTRITIS

**PAST SURGICAL Hx** : H/O

APPENDECTOMY



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**Rx**  
**MEDICATION ADVISED**

#	MEDICATION	DOCTOR'S INSTRUCTION
1	TAB LASILACTONE 20/50 MG	1.0 tab(s) ORAL Daily Once AT 7 AM AFTER BREAKFAST X 90 DAYS
2	TAB AX CER 90 MG	1.0 tab(s) ORAL Twice Daily AT 6 AM AND 6 PM BEFORE FOOD X 90 DAYS
3	TAB SACURISE 50 MG	1.0 tab(s) ORAL Twice Daily After Breakfast AND AFTER DINNER AT 8AM AND 8PM X90 DAYS
4	ECOSPRIN 75MG TAB S14	1.0 tab(s) ORAL Daily Once after lunch for 90 days
5	STORVAS EZ 20MG TAB	1.0 tab(s) ORAL Daily Once at 9 pm for 90 days
6	CARDIVAS 6.25MG TAB S10	1.0 tab(s) ORAL Two times a Day before breakfast and before dinner for 90 days
7	DAPEFY 5MG TAB	1.0 tab(s) ORAL Daily Once After Dinner at 9pm x90 days
8	NEXPRO 20MG TAB S15	1.0 tab(s) ORAL Two times a Day at 6 am and 6 pm x90 days
9	LASIX 40MG TAB S15	1.0 tab(s) ORAL Daily Once at 4 pm for 90 days

**CARE PLAN / ADVICE** : SALT RESTRICTED DIET  
 TO AVOID SUGARS AND SWEETS  
 WALKING FOR 40 MINUTES DAILY  
 AEROBIC ACTIVITY(YOGA /PRANAYAMA/AEROBIC SPORTS)  
 MAINTAIN BP CHART AT 8AM AND 8PM

**CONSULTANT NOTE** : 37 yrs NON DM NON HTN >> \*\* long duration  
 NO FH OF CAD FH OF HTN & DM ( MOTHER & MATERNAL UNCLE)  
 CAD IWM( ? DATE SYMPTOMATIC WITH DYSPNEA & ANGINA FROM THREE WEEKS  
 BEFORE ADMISSION 21/04/25)  
 SEVERE LV DYSFUNCTION  
 RESCUE ANGIOPLASTY TO RCA (23/04/25) DES SYNERGY MEGATRON 4.0X32

Abdominal bloating with loss of appetite  
 Pain right hypochondrium  
 DOE CLASS II

ECG: NSR OCCASIONAL VPC s q in II III AVF LVH  
 ECHO: SEVERE LV DYSFUNCTION EF 25% GLOBAL HYPOKINESIA TR 3/4 MR 2/4 PAP 45 mm/  
 Hg  
 CXR: CTR 60 % LUNGS CLEAR  
 HOLTER : FREQUENT VPCs 23% occasional NSVT / COUPLETS /TRIPLETS



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**RECOMMENDATION** : REVIEW WITH CARDIAC MRI

Explained about NEED FOR FURTHER MANAGEMENT AFTER MRI



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Dip Cardiology(NIMS), DNB (Cardiology) ,  
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Heart Center  
Chief Consultant - Interventional Cardiology

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