NHS DISCHARGE SUMMARY

PATIENT DEMOGRAPHICS

Patient Name: SMITH, John

NHS Number: 1234567890

Date of Birth: 15/03/1965

Gender: GenderEnum.MALE

Address: 123 High Street, London, SW1A 1AA

GP Name: Dr. Sarah Johnson

GP Practice: Riverside Medical Practice

CLINICAL INFORMATION

Admission Date:

Discharge Date: 31/08/2025

Ward/Department:

Consultant:

Presenting Complaint

65-year-old male presented with acute onset chest pain radiating to left arm, associated with shortness of breath and nausea

Primary Diagnosis

ST Elevation Myocardial Infarction (Inferior)

Secondary Diagnoses

Type 2 Diabetes Mellitus; Hypertension

Past Medical History

Hypertension (diagnosed 2018); Type 2 Diabetes Mellitus (diagnosed 2020); Ex-smoker (quit 2019, 30 pack-year history)

Medications on Admission

Amlodipine 5mg once daily; Metformin 500mg twice daily; Atorvastatin 20mg once daily at night

Known Allergies

Penicillin (rash)

Clinical Summary

Pain started 2 hours ago while at rest. No previous episodes of similar pain.

Examination Findings

Alert and orientated. Chest pain 8/10 severity. BP 165/95, HR 95 regular, RR 22, O2 sats 94% on air

Investigation Results

ECG: ST elevation in leads II, III, aVF consistent with inferior STEMI; Troponin I: 15.2 ng/mL (significantly elevated); FBC: Hb 13.2, WCC 8.5, Platelets 245

Treatment Given

Primary PCI performed - RCA stented with drug-eluting stent. Dual antiplatelet therapy commenced.

Discharge Medications

Aspirin 75mg once daily; Clopidogrel 75mg once daily; Atorvastatin 80mg once daily at night; Ramipril 2.5mg once daily; Metoprolol 25mg twice daily

Follow-up Instructions

Cardiology clinic in 6 weeks. GP follow-up in 1 week for medication review. Cardiac rehabilitation referral.

Discharge Destination

Home

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