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SPECIALIST REFERRAL

Date: 15 December 2024

To: Cardiology Department
TEST-PRACTICE-E2E Sydney Heart Specialists

RE: TEST Patient - Referral HF
DOB: 20 March 1960
MRN: TEST-REF-HF-001
Medicare: TEST-9876543210
Address: TEST Address - 789 Bourke Street, Melbourne VIC 3000
Phone: +61 400 000 100

REASON FOR REFERRAL:

Progressive dyspnoea on exertion with ankle swelling for cardiology assessment

URGENCY: Routine

CLINICAL HISTORY:

I am referring the above patient for cardiology review. They have been experiencing progressive shortness of breath on exertion over the past 3-4 months, now limiting them to walking approximately 100 metres on the flat. They have also noticed bilateral ankle swelling, particularly towards the end of the day.

PAST MEDICAL HISTORY:

- Hypertension (diagnosed 2015) - currently on Perindopril 5mg daily
- Type 2 Diabetes Mellitus (diagnosed 2018) - on Metformin 1g BD
- Hyperlipidaemia - on Atorvastatin 20mg nocte
- Obesity (BMI 32)

SOCIAL HISTORY:

- Ex-smoker (ceased 2010, 20 pack-year history)
- Minimal alcohol intake
- Retired, lives with spouse

FAMILY HISTORY:

- Father: MI at age 65
- Mother: Hypertension

CURRENT MEDICATIONS:

1. Perindopril 5mg daily
2. Metformin 1g BD
3. Atorvastatin 20mg nocte
4. Aspirin 100mg daily

ALLERGIES: Nil known

EXAMINATION:

- BP: 145/90 mmHg
- HR: 84 bpm, regular
- Weight: 92 kg
- JVP: Appeared elevated
- Heart sounds: Dual, no murmurs heard
- Chest: Scattered bibasal crackles
- Peripheral oedema: Bilateral pitting oedema to mid-calf

INVESTIGATIONS:

- ECG (attached): Sinus rhythm, left axis deviation, possible LVH
- Chest X-ray (attached): Cardiomegaly with upper lobe venous diversion
- Bloods:
 - Hb: 135 g/L
 - Creatinine: 110 umol/L (eGFR 62)
 - HbA1c: 7.2%
 - BNP: 580 pg/mL

CLINICAL IMPRESSION:

Suspected new heart failure, likely HFrEF given clinical presentation. Would appreciate cardiology assessment including echocardiography and management recommendations.

Please do not hesitate to contact me if you require any further information.

Kind regards,

Dr. TEST Referring GP Melbourne
MBBS, FRACGP
Provider Number: TEST-1234567
TEST Melbourne Medical Centre

This is a TEST referral document for E2E testing purposes only.
All patient data is fictional and uses TEST- prefix identifiers.
