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E HO YIN					Reg Time: 10	-JUL-2010 16:00	
RIC: S231547	791						
.K 648, CLEM	ENTI AVE 4	ÉMERGENC'	Y DEPARTME	NT CASE REC	CORD		
13-723 S 6506	548	<u> </u>	MATON .		Cara Na .	1512148661	
			MRN: L		Case No. :		
	EDWEB Drug Allergy: NIL						
	ADR / Drg Allergy:		•				
	NIL Medical Aierts:						
	NIL.						
	Principal (4107) NON Q WADIAL INI (NSTEMI)		Primary Dispositio	n: Admitted			
	(,10 1 ± 111)	,	Admission Discipl	Ine: Cardiolog	Y		
	•		Admission Locatio				
(Social Admission:	N/A			
				,			
				A_{ℓ}			
	PLEASE TRACE AND REVIEW	VALL FINAL	Doctor in Charge ;	II II			
	XRAY AND LABORATORY	REPORTS					
			Dr.	Dr. Ronnie Lim		/ 14803B	
	TRIAGE		!t-L				
	History From : Patient	Language : E	:ngiisn				
	Triage History <u>Notes</u>			<u>Author</u>	Create	od On	
	c/o on and off pressing central chest	pain a/w neck stiffn	ness x3/7.	- Addior	Cleate	- I	
	Denies SOB/diaphoresis/giddiness						
	not at risk for fall						
	ast Medical History						
	None						
	CONSULTATION NOTES	Langu	tage : -				
	History From: Patient				 		
	68 y/o man			Ðr. C∙			
	NKDA			u.	<u> </u>		
	PMHx: 1. Hyperlipidemia						
	- on diet control, not on any meds						
	- I/u company doctor 2. 7 borderline high BP noted by com	pany doctor					
	non-smoker					`	
		<i>(</i>)				<u> </u>	1
	Print Date 10-07-2010 16:00	X	1 of 6		Ngee An	n Health group	ľ
	Doctor's Signature:Dr.	· · · · · · · · · · · · · · · · · · ·			L		ı

CLEMENTI HOSPITAL		Reg	Time: 10-JUL	-2010 02.07 AM
EMERGEN	CY DEPARTMENT C	ASE RECORE		
Name: LEE HO YIN	MRN:	Cas	e No. : 15	12148661
non-drinker Family hx: Falher had IHD, passed away from MI at 5	50 plus years old.			
c/o: 1. Central and left-sided chest pain : 1. Since noon 1. pressing in nature 1. not poking				
- no radiation of chest pain - occured at rest - lasted about 20 min				
pain score 6-7/10 now resolved while reaching EMD pain score 0/10.		-		
previously had central chest pain for last 2/12 when to be high but will resolve with deep breathing, but too nature, on and off				
no SOB/diaphoresis/giddiness no orthopnoea/PND no lower limb swelling no abdominal bloatedness/increased burping (has so and off)	ome baseline burping on			
Just took Paracetamol at 12 p.m., but no improve	ment earlier.			
o/e: alert, orianted, GCS 15 BP 153/94 HR 81 afebrile not diaphoretic	•			
H s1s2 L clear				
A soft, NT, BS positive JVP NAD				
Bilat LL no oederna. Issues: 1. Chest pain for investigation.				
Plan: 1. FBC, UECr, Trop J 2. CXR 3. ECG			_	
ECG: ? high-take off vs mild ST elevated in leavs V2-V	4.	Dr	10/07/2010	16220
CXR formal report: Both lung fields are clear. No focal effusion is detected. Cardiac size is not enlarged.	consolidation or pleural	Dr. ·	10/07/2010	1625
Labs noted:				
Print Date 10-07-2010 0 16:00	2 of 6		Ngee Ann H	ealth group

	CLEMENTI HOSPITAL
	EMERGENCY DEPARTMENT CASE RECORD
	Name : LEF HO YIN MRN :, Case No. : 151214866J
	TW 11.13 Hb 11.8 Platelets 397 NA 138 K 3.4 Urea 4.1 Creat 58 Trop I 0.119
	Issues: 1. NSTEMI
	D/w Dr Crostart aspirin 300mg (patient has no contraindication, no bleeding tendencies). To uptriage to P2 area.
	PAtient and husband informed of diagnosis and for admisson.
	D/w Dr '. To admit to Cardiolgoy with telemetry bed. To call Cardio reg for Dr telemetry bed.
(:	.ddendum: Dr. Chest pain slarted at 12 NOON
	Patient not given GT N in EMD as no che st pain in EMD upon arrival, during consult and until now.
	Called Cardio Reg Dr ′ . Exlained re patient's case and condition. To book CCU Bed.
	D/w Dr'. To admit to CCU as d/w Dr .
	issues;
	1. NSTEMI
	Plan:
	Admit to CCU as planned. Pt was transferred to P2 resus as confirmed by Dr. , Case handed to SN
	. Husband updated regarding admission. Booked bed under B2 class.
	Second ECG done; no acute ST changes. Dr. .
	ut dw me Dr.
	problem fo NSTEMI
	CVM reg Dr consulted -for CCU
	CVM reg Dr consulted -for CCU X-Ray Comments
· · · · · · · · ·	CVM reg Dr consulted -for CCU X-Ray Comments NIL Vital Signs Time PR BP RR Route Temp. SAO2 PAIN PEFR Remarks Stage
a sat	CVM reg Dr consulted -for CCU X-Ray Comments NiL VItal Signs Time PR BP RR Route Temp. SAO2 PAIN PEFR Remarks Stage [03:14:02]81 153/94 17 Tympanic or 36.5 99 0 Triage
e af	CVM reg Dr consulted -for CCU X-Ray Comments NIL Vital Signs Time PR BP RR Route Temp. SAO2 PAIN PEFR Remarks Stage
e af	CVM reg Dr consulted -for CCU X-Ray Comments NiL VItal Signs Time PR BP RR Route Temp. SAO2 PAIN PEFR Remarks Stage 03:14:0281 153/94 17 Tympanic or 36.6 99 0 Triage Aural
e at	CVM reg Dr consulted -for CCU X-Ray Comments NiL VItal Signs Time PR BP RR Route Temp. SAO2 PAIN PEFR Remarks Stage 03:14:0281 153/94 17 Tympanic or 36.6 99 0 Triage Aural
e af	CVM reg Dr
e af	CVM reg Dr consulted -for CCU X-Ray Comments NiL VItal Signs Time PR BP RR Route Temp. SAO2 PAIN PEFR Remarks Stage 03:14:0281 153/94 17 Tympanic or 36.6 99 0 Triage Aural
e af	CVM reg Dr consulted -for CCU X-Ray Comments NIL VItal Signs Time PR BP RR Route Temp. SA02 PAIN PEFR Remarks Stage 03:14:0281 153/94 17 Tympanic or 35.5 99 0 Triage Visual Aid VA Assessed With Left Eye Right Eye Time

CLEMENTI HOSPITAL		•			
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EN	IERGE	NCY DEPART	MENT CASE	RECORD	
Name: LEE HO YIN		MRN	:	Case No. :	151214866J
Electrocardiogram					1
CHEST - PA					
ull Blood Count					
enal Panel #1					
Froponin I			- 1		
(Topotiii) (
ab Results					
	10/07/2	010 04:45:10 AM	Lab Timesta	mp: 10/07/2010 04:	18:00 AM
Full Blood Count White Blood Cell	/81	11.13 ×10 9/1		(3,26 - 9,2	281
Red Blood Cells	(#)	4.85 ×10 12/1		(3.77 - 4.5	
Haemoglobin		11.8 g/dL		(11.7 - 14.	
MCA	(L)	77.2 fL		[80.1 - 96	
MCH	(L)	24.4 pg		[24,5 - 34	
MCHC		31.6 g/dL		[30,8 - 38, (33,5 - 43,	. 4]
Haemstocrit Platelets		37.4 % 397 ×10 9/L		(160 - 398)	
MPV	(L)	6.2 fL		[6.6 - 9.9]	
RDW	(B)	16.0 %		[10.5 - 15.	. 9]
Differential Counts				N/A	
Neutrophils &		55.1 %		N/A	171
Neutrophils Lymphocytes %		6.13 x10 9/L 32.4 %		[1.41 - 6.E N/A	13)
Lymphocytes		3.61 x10 9/L		(0.53 - 3.5	981
Monocytes %		5,6 %		N/A	
Monocytes		0.62 ×10 9/L	•	10.10 - 0.8	:0]
Eosinophils %		4.8 %		N/A	
Eosinophils Basophils %		0.54 x10 9/L 0.2 %		[0.00 - 0.7 N/A	2]
Basophils		0.02 ×10 9/L		[0.00 - 0.1	.1)
LUC %		1.9 %		N/A	
LUC		0.21 x10 9/L		[0.02 - 0.2	:9]
Renal Panel 1		170 14		1126 1601	
Sodium Potassium	(1.)	138 mmol/L 3.4 mmol/L		[135 - 150] [3.5 - 5.0]	
Urea	(11)	4.1 mmo1/L		(2.0 - 6.5)	
Creatinine		58 umol/L		[50 - 90]	
Troponin I					
Troponin I	(H)	0.119 ug/L		[0.000 - 0.	0391
 99th percentile normal reference population <0. 	.040 vg/I	i.			
Ray Report					
am ID/Linked Exam IDs: 4058480			Report Times	camp: 10/07/2010	
				L	
Chest:					
Both lung fields are clear. No f Cardiac size is not enlarged.	focal con	solidation or p	oleural effusion	n is detected.	
#P.3 ff					
dications					
Medication Name Route	Dose	Ordered	Administered	Checked By St	tatus Remarks
	,			1	
nt Date 10-07-2010 05		4 of 6			
stor's Signature:					
/				L	
Dr.					

CLEMENTI HOSPIT	AL		٠				
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	EMERGENCY E	DEPARTMEN	NT CASE RE	CORD			
Name: LEE	HO YIN	MRN:		Case N	o. 1512	14866J	
			Administer ed Time				
MMT [Magnesium Trisilicate]		Time c	ed Time		Completed	-	
Mixture			ĺ				
Aspirin Tablel	300 mg Jt		 }	-	Completed	-	
Primary Disposition:	Admitted						
	, willings		Cardio	logy			
General Condition : stable							
General Condition : stable Police Case : No	efer to CPSS system						
	efer to CPSS system.						
Police Case: No	efer to CPSS system.						
Police Case: No For any prescriptions, please re			ysonosio dysoewyło centiniko ca silk			***************************************	
Police Case: No	10/07/2010		yourus Onocombo vermining Act Hill I				
Police Case: No For any prescriptions, please re			Pi	roperty			
Police Case : No For any presoriptions, please re	10/07/2010		Pi No 🛚 Yes		n No:		
Police Case : No For any prescriptions, please re	10/07/2010			s Forn	n No: Signature2		
Police Case : No For any prescriptions, please re	10/07/2010		No ☐ Ye	s Forn			
Police Case: No For any prescriptions, please re	10/07/2010 Date & Time		No ☐ Yes	s Forn	Signature2		AN AN A
Police Case : No For any prescriptions, please re	10/07/2010 Date & Time	onship:	No ☐ Yes	s Forn	Signature2		
Police Case: No For any presoriptions, please re Discharge Date/ Time Referrals Pattent/Relative	Date & Time		No Yes	s Forn	Signature2		
Police Case: No For any presoriptions, please re Discharge Date/ Time Referrals Pattent/Relative	Date & Time Relation	onship:	No Yes	S Forn C(If Relative	Signature2		
Police Case: No For any prescriptions, please re Discharge Date/ Time Referrals Pattent/Relative Discharge Staff ED Ref No 02ED100710001 DOB/Age/Sex/Race/Nationality	Date & Time Pelation ADMII Type of Reg Norry 29-NOV-1965	onship:	No ☐ Yest Signature1 NRIC TA Mode	s Forn	Signature2	gaporean	
Police Case: No For any prescriptions, please re Discharge Date/ Time Referrals Pattent/Relative Discharge Staff ED Ref No 02ED100710001	Date & Time Date & Time Relation ADMII	onship:	No ☐ Yes Signature1 NRIC	E of Arrival	Signature2	gaporean	
Police Case: No For any prescriptions, please re Discharge Date/ Time Referrals Pattent/Relative Discharge Staff ED Ref No 02ED100710001 D08/Age/Sex/Race/Nationalit Registration Date/ Time Address	Date & Time Date & Time	onship: NISTRATIVE DA nal , Block 26	No Yest Signature1 NRIC TA Mode / Imale / Reca Weig	E of Arrival	Signature2	gaporean	
Police Case: No For any prescriptions, please re Discharge Date/ Time Referrals Pattent/Relative Discharge Staff ED Ref No 02ED100710001 D0B/Age/Sex/Race/Nationalit Registration Date/ Time	Date & Time Date & Time	nistrative da	No Yes Signature1 NRIC TA Mode / male / Reca Weig	s Forn	Signature2		
Police Case: No For any prescriptions, please re Discharge Date/ Time Referrals Pattent/Relative Discharge Staff ED Ref No 02ED100710001 DOB/Age/Sex/Race/Nationalit Registration Date/ Time Address Phone Number	Date & Time Date & Time	onship:	No Yes Signature1 NRIC TA Mode / male / Reca Weig	s Forn	Signature2		
Police Case: No For any prescriptions, please re Discharge Date/ Time Referrals Pattent/Relative Discharge Staff ED Ref No 02ED100710001 D0B/Age/Sex/Race/Nationalit Registration Date/ Time Address Phone Number Triage Mobility	ADMII Type of Reg Norr 29-NOV-1985/ 10-JUL-2010 #01 - 06	onship:	No Yes Signature1 NRIC TA Mode / Imale / Reca Weig OFFICE MCR Dr.	s Forn	Signature2		
Police Case: No For any prescriptions, please re Discharge Date/ Time Referrals Pattent/Relative Discharge Staff ED Ref No 02ED100710001 D0B/Age/Sex/Race/Nationalit Registration Date/ Time Address Phone Number Triage Mobility	ADMII Type of Reg Norr 29-NOV-1985/ 10-JUL-2010 #01 - 06	onship: NISTRATIVE DA nal Block 26 OME / Doctor / Consulta	No Yes Signature1 NRIC TA Mode / Imale / Reca Weig OFFICE MCR Dr.	s Forn	Signature2		

Name : Stage Triage Consultatio Observation	LEE HO YIN Start Time	SENCY DEF	PARTMEN	T CASE RE	1	
Stage Triage Consultatio Observation	Start Time		MRN:		0	
Triage Consultatio Observation	n				Case No.:	15121486
Consultatio Observation	1.		End Tim	e	-	
Principal Dia	1 -					
	gnosis (4107)	NON Q WAVE A	CUTE MYO	CARDIAL INFAR	RCTION (NSTEMI)	
Status						
	Non-Trauma					
	Accident Type Cause of Injury	: -			•	
		•				
Primary Disp	osition: Admitted					
Triage Call Hi	istory Call initiator		7 -	all Time	Cal	Status
	Call Indatol		10/07/2010		Successful	
Consultation	Call History					
	Call Initiator			all Time		Status
Dr.			10/07/2010	q	Successful	
Location Hist			T	- Command Times	Trans	ferred By
Triage-EMD	Location		Trans	sferred Time	i iiaiis	letted by
Room 2					Dr.	
P2 Resus Roo	orn		<u> </u>		<u> </u>	· · · · · · · · · · · · · · · · · · ·
	•					
Audit Notes						
Lab Accession	n number 0072258949 noted.			Dr.		
Lab Accession	n number 0072258949 noted.			Dr		1
	1					
Print Date 10-0	7,000,001	6 of 6				

Dr.