# **Neurosurgery Consultation**

\* Final Report \*

Result Type:

**Neurosurgery Consultation** July 20 2024 09:13 PDT

Result Date: Result Status:

Auth (Verified)

Result Title:

Consult Note

Performed By: Verified By:

Salem, MD, Ayman M on July 22 2024 09:23 PDT Salem, MD, Ayman M on July 22 2024 09:23 PDT

Encounter info:

407011121291-10, Inpatient, 07/19/2024 -

# \* Final Report \*

FIN: 40701112129 MRN: 118-Patient @ Legal Sex: FEMALE DOB: 04/ Age:

### **Chief Complaint**

pt here for chest pain with sob  $\times$  5 days, states wants to cough but unable. hx htn. in no acute distress.

# **Reason for Consultation**

Hemorrhagic pituitary adenoma

#### **History of Present Illness**

71 yo female admitted to WMMC with chest pain and congestion, she was r/o for cardiac event. MRI brain showed hemorrhagic pituitary adenoma. She had bee c/o of H/A for the past few weeks and some mild visual problems.

#### **Review of Systems**

As per chart

### **Physical Exam**

Vitals and Measurements

T: 99.3 F HR: 122(Apical) HR: 91 RR: 20 BP: 142/90 SpO2: 96% O2

Delivery: Room air

**WT:** 60.7 kg

HEENT neck supple, Lungs clear, Heart S1S2, Abd soft NT ND, no edema LE AA, OX3, Conversant, BTH otherwise CR N 2-12 unremarkable. 5-/5 4E, no sensory changes, no cerebellar signs.

# Assessment/Plan

Endocrine and ophthalmology consults, hormonal profile. I had an extensive D/W the patient and her family re available options including surgery vs no surgery. She is a candidate for trans nasal pituitary adenoma resection. Overall risks 5% -8% as printed on my preop consent form all questions answered, no guarantees given.

- 1. Atrial fibrillation with RVR (Unspecified atrial fibrillation, I48.91)
- 2. Chest pain (Chest pain, 8E095FBB-BBCA-40DB-90A7-E99D6615CA20)
- 3. Shortness of breath (Shortness of breath, E993630C-CD40-4832-B218-2ECF07A2B4F6)

#### **Allergies**

No Known Medication Allergies

#### **Problem List**

**Active Problems** No qualifying data **Inactive Problems** No qualifying data

#### **Medications**

Inpatient

acetaminophen, 650 mg, 2 ea, ORAL, O4H, PRN

labetalol, 20 mg, 4 mL, IV PUSH, Q2H, PRN

Lasix, 40 mg, 4 mL, IV PUSH, DAILY metoprolol, 5 mg, 5 mL, IV PUSH, Q2H, PRN

metoprolol, 50 mg, 1 Tab, ORAL, BID Pepcid, 20 mg, 1 Tab, ORAL, BID pneumococcal 20-valent conjugate

vaccine, 0.5 mL, IM, As directed potassium chloride, 40 mEq, 2 Tab, ORAL, ONCE

Toradol, 15 mg, 1 mL, IV PUSH, Q6H,

Zofran, 4 mg, 2 mL, IV PUSH, Q4H, PRN

#### Home

losartan 50 mg oral tablet, 50 mg, 1 Tab, ORAL, BID

## **Social History**

Abuse/Intent to Harm

Are you thinking of harming or killing anyone else?: No

CSSRS Risk Level: No risk (0-24) CSSRS Suicide screening ED: Complete the suicide screening

RT: RT000

\*Alcohol Screen

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How often do you have a drink containing alcohol? Never (0). How many standard drinks containing alcohol do you have on a typical day? Never (0). How often do you have six or more drinks on one occasion? Never (0). Ready to change: N/A.

\*Home/Environment Screen

Living Situation: Home/Independent.

\*Think about the place you live. Do you have any problems with any of the following? Unable to obtain.

\*In the past 12 mo, has the electric/gas/oil/water co. threatened to shut off services in your home? Unable to obtain.

# \*Nutrition Screen

No (0) Decreased appetite:. None (0), N/A. (Pt was able to answer Questions 1 and 2) (0), Nutritional Risks: No nutritional risk triggers identified.

#### \*Substance Abuse Screen

Do you have concerns about substance abuse for yourself or in your household? No.

#### \*Tobacco Use Screen

Is there a smoker in the household?
No. Do you have concerns about tobacco use in household? No.
Over the past 30 days, what and how much have you smoked?
Never (less than 100 in lifetime).
Over the past 30 days, what has been your smokeless tobacco use?
Never. Are you ready to quit? N/A.

Signature Line

Electronically signed by: Salem, MD, Ayman M

Signed on: 22-Jul-2024 09:23 PDT

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