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7/30/2003 12:00:00 AM

AORTIC STENOSIS , CORONARY ARTERY DISEASE

Signed

DIS

Admission Date :

07/30/2003

Report Status :

Signed

Discharge Date :

08/06/2003

ATTENDING :

YERTREY TANELI SUMCHIRDKAYSMAYVEINDREPS MD

HISTORY OF PRESENT ILLNESS :

A 68-year-old male with a known aortic stenosis which has been followed by serial echo , presents with increasing shortness of breath , and displaced chest tightness on exertion .

In fact , this patient has noted lightheadedness on bending over , denies syncope , or loss of consciousness .

The patient has a long history of ethanol abuse and is currently drinking 4 shots and 2 beers per day daily .

PREOPERATIVE STATUS :

The patient has a class II angina and class II heart failure .

Recent signs and symptoms of congestive heart failure include pulmonary edema on chest x-ray .

CARDIOVASCULAR INTERVENTIONS :

None .

PAST MEDICAL HISTORY :

Hypertension , COPD with FEV1 less than 50% predicted , \_\_\_\_ 50 , asthma , postherpetic neuralgia on left periorbital region since 1998 , and lower gastrointestinal bleeding in the past , had colonoscopy on February 2003 .

PAST SURGICAL HISTORY :

None .

FAMILY HISTORY :

No family history of coronary artery disease .

SOCIAL HISTORY :

A 30-pack-year cigarette smoking history and 6 drinks per day .

The patient is not interested in ethanol abstinence , last detox was in 2001 .

ALLERGIES :

NKDA .

MEDICATIONS :

Enalapril 10 mg p.o. q.d. , digoxin 0.25 mg p.o. q.d. , furosemide 40 mg p.o. q.d. , Ventolin 2 puffs b.i.d. , and Neurontin 300 mg p.o. q.d.

PHYSICAL EXAMINATION :

Vital Signs :

Height 5 feet 11 inches , weight 105 kg , heart rate 56 and sinus rhythm , with first-degree AV block , and blood pressure right arm 108/60 and left arm 110/60 .

HEENT :

PERRLA .

Dentition without evidence of infection .

Carotid bruits present bilaterally .

Tonsils are 2+ bilaterally symmetrical .

Chest :

No incisions .

Cardiovascular :

Regular rate and rhythm , 4/6 ejection systolic murmur loudest at right second intercostal space .

Respiratory :

Breath sounds clear bilaterally .

Abdomen :

No incisions , soft , no masses .

Rectal :

Deferred .

Extremities :

Superficial varicosities in both anterior calves .

Neuro :

Alert and oriented , no focal deficits .

Lives alone , helpful neighbors , does not want rehabilitation .

LABORATORY :

On 07/30/2003 , sodium 136 , potassium 4 , chloride 101 , bicarbonate 27 , BUN 29 , creatinine 1.2 , glucose 113 , magnesium 1.9 , WBC 8.31 , hematocrit 40.1 , hemoglobin 13.4 , platelets 220,000 , PT 14.5 , INR 1.1 , and PTT 31.5 .

Urinalysis is normal .

Cardiac catheterization , 07/30/2003 , not reported in the chart .

Echo 07/19/2003 with 35% ejection fraction , aortic stenosis , mean gradient of 43 mmHg , peak gradient 63 , calculated valve area 0.9 cm<sup>2</sup> , moderate aortic insufficiency , moderate mitral insufficiency , moderate tricuspid insufficiency , and global hypokinesis .

ECG on 07/19/2003 , first-degree AV block at 70 with a PVC , left anterior hemiblock , and right bundle-branch block .

Chest x-ray 07/19/2003 consistent with CHF , cardiomegaly .

Date of visiting , 07/30/2003 , presence of minimally invasive area ( 29 Carpentier-Edwards pericardial . )

BYPASS :

143 minutes .

CROSS CLAMP :

102 minutes .

FINDINGS :

A 4.9-cm of descending aorta with \_\_\_\_.

COMPLICATIONS :

Aortotomy bleeding and third-degree AV block .

The patient was transferred to the intensive care unit and intubated without incidents and started ethanol drip .

Patient's postoperative course was complicated with some episodes of complete heart block with failure to capture on epicardial leads .

Patient felt lightheadedness and EP service was consulted for further followup .

EP service recommended permanent pacemaker which was implanted on 08/02/2003 .

Patient tolerated well and transferred to the stepdown floor on postoperative day #4 and decided to sent home with services on 08/06/2003 .

FOLLOWUP APPOINTMENTS :

Dr. Yertrey Sumchirdkaysmavveindreps , 954-412-9677 , in 5-6 weeks , cardiologist in 1-2 weeks , and Dr. Slynez Kotebawnsc in 1 week , and Dr. Vital , 621-149-7131 in 2 weeks .

DISCHARGE MEDICATIONS :

Albuterol inhaler 2 puffs q.i.d. , EC ASA 325 mg p.o. q.i.d. , atenolol 4.5 mg p.o. q.d. , captopril 6.25 mg p.o. t.i.d. , Colace 100 mg p.o. t.i.d. p.r.n. constipation , Lasix 20 mg p.o. b.i.d. x3 days .

Niferex 150 mg p.o. b.i.d. , Percocet 1-2 tablets p.o. q.6 hourly p.r.n. pain , Neurontin 300 mg p.o. q.d. , K-Dur 10 mEq x1 p.o. b.i.d. x3 days , and Serevent Diskus 1 puff b.i.d.

eScription document :

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Dictated By :

PRATLTELGWANEVAIA , MITNA

Attending :

FREIERM , FAA SHASAGE

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