

CARDIOLOGY CONSULTATION REPORT

Canvas Medical Center | HL7 FHIR US Core Compliant

Patient: **Kiki Appgoal (Female, 69y)** Consult Date: **2026-01-23** MRN: **815799078**
DOB: **1955-11-24** Urgency: **Routine** Consult #: **CON-2026-0471**

Referring Provider: Dr. Jane Smith, MD (Primary Care) | NPI: 1234567890
Consulting Provider: Dr. Robert Chen, MD, FACC (Cardiology) | NPI: 0987654321

REASON FOR CONSULTATION

Evaluation of hypertension management and preoperative cardiac risk assessment for upcoming elective cholecystectomy. Patient referred due to suboptimal blood pressure control on current regimen.

RELEVANT DIAGNOSES

Diagnosis	ICD-10	SNOMED CT
Essential hypertension, uncontrolled	I10	59621000
Type 2 diabetes mellitus	E11.9	44054006
Hyperlipidemia	E78.5	55822004
Cholelithiasis (surgical indication)	K80.20	235919008

HISTORY & PHYSICAL EXAMINATION

HPI: 69 y/o F with HTN x 15 years, currently on lisinopril 10mg daily. Recent BPs 150-160/90-95 at home despite adherence. Denies chest pain, dyspnea, palpitations, syncope, or edema. Scheduled for laparoscopic cholecystectomy in 3 weeks.
PMH: DM2 (A1c 5.6%), hyperlipidemia, former smoker (quit 15y ago, 20 pack-years)
Exam: BP 156/92, HR 74 regular, BMI 28. JVP normal. Cardiac: RRR, no murmurs/gallops. Lungs clear. No peripheral edema.

DIAGNOSTIC WORKUP

Test	CPT	LOINC	Result
ECG, 12-lead	93000	11524-6	NSR, LVH by voltage criteria
BMP (Creatinine)	80048	2160-0	1.1 mg/dL (normal)
Lipid panel (LDL)	80061	13457-7	118 mg/dL

ASSESSMENT & RECOMMENDATIONS

- Uncontrolled essential hypertension:** Suboptimal control on lisinopril 10mg. Recommend increasing to 20mg daily. If BP remains >140/90 in 2 weeks, add amlodipine 5mg daily. Target BP <130/80 given diabetes.
- Preoperative cardiac risk:** RCRI score = 1 (diabetes only). Low cardiac risk (<1% MACE). ECG shows LVH consistent with longstanding HTN but no ischemic changes. **Cleared for elective cholecystectomy** from cardiac standpoint. No further testing indicated.
- Hyperlipidemia:** LDL 118 on atorvastatin 20mg. Consider uptitration to 40mg for goal LDL <100 given DM.

Standards: HL7 FHIR US Core (ServiceRequest, DiagnosticReport, Observation), C-CDA Consultation Note. CPT 99244 (Office consultation, moderate complexity). ICD-10-CM, SNOMED CT, LOINC coded.

FHIR: Patient/3074158b3ac242c3a94fa527ffe3e0a4 | ServiceRequest/SR-CON-20260123 | Encounter/ENC-20260123

Electronically signed: Robert Chen, MD, FACC | Board Certified Cardiologist | 2026-01-23 20:15 EST