

# Fictitious University Hospital

Department of Internal Medicine  
Prof. Malala Miller



## Re: Medical History and Clinical Course of Patient Andrew Smith

Dear Dr. General Practitioner,

I am writing to provide a comprehensive summary of the medical history, diagnoses, and clinical course of our patient, Andrew Smith, who was recently diagnosed and treated for a lung embolism.

**Patient Information:** Name: Andrew Smith, DOB 03/31/1989

Age: 35

Gender: Male

Medical Record Number: 0090075

**Medical History:** Andrew Smith has a notable medical history, including a recent long-haul flight of 14 hours, a smoking history of 10 pack-years, and mild hypertension.

**Presenting Symptoms:** Andrew Smith presented with sudden onset dyspnea, sharp chest pain exacerbated by deep breathing, coughing up small amounts of blood (hemoptysis), and mild right calf pain.

**Initial Assessment and Diagnosis:** Diagnostic tests revealed elevated D-dimer levels, an ultrasound confirming right calf DVT, and a CTPA showing a large embolus in the right main pulmonary artery.

**Clinical Course:** Andrew Smith was admitted to the general ward for anticoagulation and monitoring. He was initially managed with low molecular weight heparin (LMWH) injections and bed rest with leg elevation. After stabilization, he transitioned to oral anticoagulants (apixaban) and received smoking cessation counseling and nicotine replacement therapy. He experienced mild transient hypotension, which was managed with fluid therapy. Regular follow-up appointments were scheduled to monitor coagulation status and smoking cessation progress, and he was educated on risks associated with long flights and preventive measures.

**Current Status:** Andrew Smith is recovering well, has quit smoking, and continues anticoagulation therapy with regular monitoring.

**Recommendations:** Continued anticoagulation with routine monitoring, follow-ups with primary care physician, and preventive measures for long flights, including leg exercises and hydration.

Sincerely,

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F. Finch

Dr. Fictitious Finch