

# Fictitious University Hospital

Department of Internal Medicine  
Prof. Malala Miller



## Re: Medical History and Clinical Course of Patient Elisabeth Zhu

Dear Dr. General Practitioner,

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

**Patient Information:** Elisabeth Zhu, dob 07/07/1970

Age: 48

Gender: Female

Medical Record Number: 1342576

**Medical History:** Elisabeth Zhu has a notable medical history, including:

- History of autoimmune disorder (Systemic Lupus Erythematosus)
- Long-term corticosteroid therapy
- Recent minor surgery (cholecystectomy)

### Presenting Symptoms:

Elisabeth Zhu, a 48-year-old female with a known history of Systemic Lupus Erythematosus (SLE) and long-term corticosteroid therapy, presented with progressive dyspnea over the past week. She described experiencing chest tightness, particularly noticeable during exertion. Additionally, she reported significant fatigue and malaise, impacting her daily activities. On physical examination, there was mild swelling observed in her left leg, raising concerns for a potential thromboembolic event.

**Initial Assessment and Diagnosis:** Diagnostic tests included:

- Elevated D-dimer levels
- Venous Doppler ultrasound confirming DVT in the left leg
- CTPA showing pulmonary embolism in the right upper lobe

### Clinical Course:

Upon admission to the general medical ward, Elisabeth Zhu was initiated on low molecular weight heparin (LMWH) therapy for anticoagulation and placed under close monitoring for vital signs and oxygen saturation. Subsequently, her management included a transition from LMWH to oral anticoagulants, specifically dabigatran. Concurrently, her corticosteroid therapy was adjusted in consultation with her rheumatologist to manage her Systemic Lupus Erythematosus (SLE) effectively. During her hospitalization, Elisabeth experienced a flare-up of her lupus symptoms, which was managed with appropriate immunosuppressive therapy.

Follow-up care involved regular monitoring of her coagulation status and ongoing management of her lupus. Additionally, she received education on recognizing symptoms of

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thromboembolic events to ensure prompt identification and treatment of any future occurrences.

**Current Status:** Elisabeth Zhu is stable, continues anticoagulation therapy, and is under regular follow-up with both rheumatology and hematology specialists.

**Recommendations:**

- Continued anticoagulation with routine monitoring
- Ongoing coordination between rheumatology and hematology for integrated care
- Education on recognizing and preventing thromboembolic events

Sincerely,

A handwritten signature in black ink that reads "F. Finch". The signature is written in a cursive, slightly stylized font.

Dr. Fictitious Finch