Result Type: Correspondence - Global Transcription
Result Date: 07 April 2025 14:58 AEST
Result Status: Auth (Verified)
Result Title: GTSLETTER
Performed By: FSI, Result on 09 April 2025 11:34 AEST
Verified By: FSI, Result on 15 April 2025 11:31 AEST
Encounter info: Wyong, Recurring NAP, 07/04/2025 - 07/04/2025
Contributor system: GTS

Dear Dr Ray

Re: Colin BROMLEY DOB: 23/10/1936

Site 26 115 Pacific Hwy, Kangy Grove Estate, KANGY ANGY NSW 2258

Thank you for your ongoing care of Mr Colin Bromley. It was a pleasure to review him in Respiratory Clinic as referred in by you due to concerns of exertional SOB and CT chest showing bilateral pleural effusions as well as increased mediastinal lymphadenopathy.

Diagnosis:

1. Emphysema.
2. Asthma.
3. Hypertension.
4. IHD - CABG in 2018, MVR and tricuspid annuloplasty.
5. AF.
6. Anaemia.

On review, Colin feels he gets shortness of breath occasionally, mainly towards morning and on exertion. He does not complain of orthopnoea or paroxysmal nocturnal dyspnoea. He feels otherwise his breathing is at baseline. He does not have any recent wheezing, cough, increased sputum production or fevers. He is only using Ventolin as prn. He has no new recent admissions with exacerbation of emphysema/asthma.

On examination, he was afebrile with nil increased work of breathing. His SpO_2 96% on room air and respiratory rate was 16 bpm. His blood pressure today was 140/70 mmHg, HR was 84 bpm.

Chest examination revealed bilateral basal fine creps. Also noted was bilateral pedal pitting oedema with left side more than right side.

Investigations:

CT chest - 12/2024

Increase in size of known mediastinal lymphadenopathy, new bilateral pleural effusions with no obvious cause. No acute pulmonary pathology identified.

Impression - seen with Dr Hunter:

1. Bilateral pleural effusion likely secondary to heart failure.
2. Mediastinal lymphadenopathy likely secondary to pleural effusion.

Plan:

1. Optimise heart failure medications.
2. Use Ventolin prn.
3. Nil further respiratory follow-up needed.
4. Re-refer as appropriate.

Yours sincerely

Electronically Approved by:

Dr Lahiru Hettiarachchige