

HEALTH SUMMARY SHEET

Date printed: 30/5/2025.

Dr. Ali Zahedi
MD FRACGP DipSkinCancer(SCCA)
Kendall Street Medical Centre
73 Kendall Street
WEST PYMBLE NSW 2073
Provider No: 233402DB
Tel: 02 9499 2000

Patient Details:

Patient Name: Mr Angelo Pavlidis
Address: 17 Parkwood Grove
WEST PYMBLE NSW 2073
Phone - Home:
Phone - Work:
Phone - Mobile: 0415100153
D.O.B.: 23/1/1951, Age: 74yrs 4mths
Ethnicity: None Recorded.
Record Number: CONSENT
Medicare Number: 2024 38504 1 / 1

Current medications:

| Drug Name | Strength | Dosage | Route | Reason | Last script |
|--|--------------------------------|-----------------------|--------|--------|-------------|
| CARTIA EC Tablet (Aspirin) | 100mg | 1 daily | Oral | | 10/10/2023 |
| CENTRUM ADVANCE 50+ Tablet | | 1 daily | Oral | | 26/08/2024 |
| DUODART MR Capsule | 500mcg/400m | 1 daily | Oral | | 08/01/2025 |
| EZETIMIBE/ATORVASTATIN Table | 10mg/40mg | 1 daily | Oral | | 26/08/2024 |
| FUROSEMIDE Tablet (Furosemide) | 40mg | 1 mane | Oral | | 04/06/2024 |
| IRBESARTAN Tablet (Irbesartan) | 300mg | 1 mane | Oral | | 26/08/2024 |
| ISOSORBIDE MONONITRATE MR | 60mg | 1 b.d. | Oral | | 08/01/2025 |
| METOPROLOL SANDOZ Tablet | 50mg | 1bd | Oral | | 26/08/2024 |
| RYZODEG FLEXTOUCH Injection (Insulin degludec/Insulin aspart) | 70 units - 30 units/mL (100 | 18 u mane a.c. | Subcut | | 26/08/2024 |
| SERETIDE ACCUHALER 250/50 | 250mcg-50mc | 1 dose bd | Inhale | | 10/10/2023 |
| SOMAC EC Tablet (Pantoprazole | 40mg | 1 tab mane a.c. | Oral | | 26/05/2025 |
| THIAMINE HYDROCHLORIDE | 100mg | 3 mane | Oral | | 26/02/2024 |
| TRULICITY Injection (Dulaglutide) | 1.5mg/0.5mL | inject once a week as | Subcut | | 04/06/2024 |
| ZANIDIP Tablet (Lercanidipine | 10mg | 1 nocte | Oral | | 12/05/2025 |

Current active problems:

| Date | Condition -- Comment |
|------|--|
| 2018 | CABG (Coronary Artery Bypass Graft) |
| 2018 | Diabetes Type II requiring insulin |
| 2018 | Gallstones |
| 2018 | Hypercholesterolaemia |
| 2018 | Hypertension |
| 2018 | Kidney failure - chronic |
| 2018 | Lower Limb Arterial Ultrasound stent is 75% blocked |
| 2018 | Peripheral Vascular Disease |
| 2018 | Sleep Apnoea |
| 2020 | My Health Record, shared health summary uploaded |
| 2022 | BPH (Benign Prostatic Hyperplasia) |
| 2022 | COVID-19 (coronavirus) infection |
| 2022 | Duodenal ulcer |
| 2022 | Gastrointestinal Haemorrhage |
| 2022 | Pneumonitis |
| 2022 | UTI (Urinary Tract Infection) |
| 2024 | Cataract removal & IOL implant (Right) |
| 2025 | Peritoneal Dialysis |



Health

Northern Sydney Local Health District

Dr Amanda Siriwardana
Renal Physician
Royal North Shore Hospital

24 March 2025

Dr Ali Zahedi
73 Kendall street
WEST PYMBLE NSW 2073

Dear Dr Zahedi,

Re: MR Angelo PAVLIDIS, RNSH Unit No: NS1238588
74 years (23 Jan 1951), 17 Parkwood Gr, WEST PYMBLE NSW 2073

I reviewed Angelo in the company of his wife on 24 March 2025 in the RNSH Kidney Clinic, in regards to proteinuric stage 5 CKD secondary to diabetic nephropathy +/- ischaemic nephrosclerosis (with a plan for PD). Background includes ischaemic heart disease (CABG 2006), obesity, PVD (2 right leg stents), OSA, BPH, and a prolonged admission at RNSH in 2022 with severe Covid-19 pneumonitis requiring intubation and a temporary period on haemodialysis. Angelo is generally clinically well, though has some reflux/chest symptoms that I am concerned require further work-up as well as renal function has further declined. PD catheter was inserted on 20 December 2024 without issue and his wife is managing the regular dressings.

Current issues:

1. Stage 5 CKD: Angelo's eGFR in December 2024 dropped down to 7 mL/min and recent results from 10 days ago are similarly low with eGFR 7 mL/min, creatinine 595 $\mu\text{mol/L}$ and urea 21.3 mmol/L. He reports no strong uraemic symptoms, nil shortness of breath, mild leg oedema and no urinary symptoms. Urine output has been largely unchanged. However, he is having issues with reflux/chest discomfort that occurs at rest and particularly in the mornings after medications. While it is unclear if this is GI or cardiac in nature, he is obviously high risk from a cardiac perspective given his history of prior CABG in 2006 and no recent angiograms. I have discussed with him and his wife today that **I feel it is best he start on peritoneal dialysis over April, then we can comfortably pursue further cardiac work-up by way of an angiogram and investigations for the aortic stenosis with Dr Yeoh. I will contact the PD unit accordingly.**
2. Chest/reflux symptoms: As mentioned, Angelo reports a several week history of central chest pressure/discomfort which he attributes to his pill burden, though it **requires further cardiac and GI work-up.** In the short-term, I have suggested he **increase Pantoprazole to 40mg BD.** But I have **cc'd Dr Yeoh in this letter who Angelo will be seeing in April/May in order to facilitate further cardiac work-up.** We can also **consider referral to a Gastroenterologist for a gastroscopy depending on his symptoms and progress.**
3. BP control: Much improved with home readings in the 130-140/80-90 mmHg range and similar in clinic today.
4. Diabetic control: HbA1c 7.7%, well linked in with RNSH Diabetic Clinic (next appointment in June 2025).

Examination: BP 130/82 mmHg. Chest clear. HSD + ESM. PD catheter exit site clean. Mild oedema to mid-shins bilaterally.

Recent laboratory results: (13 Mar 2025, Laverty)

Electrolytes: Sodium 138 mmol/L, potassium 5.0 mmol/L, urea 21.3 mmol/L, creatinine 595 micromol/L (eGFR = 7 ml/min/1.73 m²).
Bone markers: Corrected calcium 2.14 mmol/L, phosphate 1.86 mmol/L. Parathyroid hormone 43.3 pmol/L.
Full blood count: Haemoglobin 111 g/L, White cell count 7.1, platelets 209.
Iron studies: Ferritin 166, iron saturation 22%.
Diabetic control: HbA1c 7.7%.
Urine studies: Albumin/creatinine ratio = 470.2 mg/mmol.

Assessment and Plan: Needs to commence PD, and requires further Cardiac/GI work-up. PD unit contacted.

Current medications: Irbesartan 300mg daily, Frusemide 40mg mane, Metoprolol 50mg BD, Lercanidipine 10mg BD, ISMN 60mg BD, Aspirin 100mg daily, Ozempic once weekly, Ryzodeg insulin (16-18 units mane/18-22 units nocte), Rosuvastatin/Ezetimibe 40/10mg daily, Pantoprazole 40mg BD (increased today), Duodart 500/400mcg mane, Betavit 1 tablet mane, Magnesium 1 tablet nocte, Cholecalciferol 2 tablets daily.

Follow-up: 5-6 weeks (with my Locum as I will be on a period of maternity leave).

Yours sincerely,



Dr Amanda Siriwardana

CC: Dr Thomas Yeoh, BURWOOD 2134; Mr Joseph Morada, ST LEONARDS 2065; EMR