

Result Type: Progress Note Medical  
Result Date: 24 July 2025 8:31 AEST  
Result Status: Auth (Verified)  
Result Title: CTSx CWR: s/b Dr Brereton  
Performed By: Chu, Adriana (JMO) on 24 July 2025 8:33 AEST  
Verified By: Chu, Adriana (JMO) on 24 July 2025 8:33 AEST  
Encounter info: Royal North Shore, Inpatient, 24/07/2025 -

**CTSx CWR: s/b Dr Brereton**

Patient: **CLARK, MR Nelson Robert**      **MRN: 236-31-56**

Age: **78 years**   Sex: **Male**   DOB: **22/02/1947**

Associated Diagnoses: **None**

Author: **Chu, Adriana (JMO)**

**Progress Note**

S/b Dr Brereton

Discussed previous radiotherapy for Hodgkin's

Still determining suitability for CABG vs TAVI

Cardio consult today

A. Chu

Cardiothoracics RMO

#45593

Result Type: Progress Note Medical  
Result Date: 24 July 2025 7:44 AEST  
Result Status: Modified  
Result Title: CTSx WR  
Performed By: Chu, Adriana (JMO) on 24 July 2025 7:46 AEST  
Verified By: Chu, Adriana (JMO) on 24 July 2025 8:26 AEST

Encounter info: Royal North Shore, Inpatient, 24/07/2025 -

**Document Has Been Revised**

**CTSx WR**

Patient: **CLARK, MR Nelson Robert** MRN: 236-31-56

Age: **78 years** Sex: **Male** DOB: **22/02/1947**

Associated Diagnoses: **None**

Author: **Chu, Adriana (JMO)**

**Progress Note**

**CTSx WR - Szpytma/Giles/Chu/Campbell**

78M t/f from Gosford for ?CABG

B/G: COPD, mixed aortic/mitral valve incompetence, GORD, Dyslipidaemia, T2DM, HTN, AF, Smoking, TIAs, Bilateral carotid artery stenting (2012), Hodgkins lymphoma with radiation therapy complicated by diaphragmatic paralysis and lung fibrosis

**Progress**

No chest pain

Had a cough and thought he had a chest infection, then felt he couldn't breath --> went to Gosford Hospital

Cardiac stent and carotid artery stents 4 or 5 years ago

Discussed mx with CABG or TAVI

Discussed risks and need to determine suitability for procedures

**OE**

Obs BTF, afebrile

SOOB

**Plan:**

Carotid doppler US

CT TAVI

PFTs

OPG

TTE

Dental clinic review

Iron studies, HbA1c, Hep C/Hep B/HIV serology

A. Chu

Cardiothoracics RMO

#45593

**Issues:**

# APO

- on IV frusemide 40mg BD

- CTPA: No acute pulmonary embolism. Mitral and aortic valve calcification noted. Small bilateral pleural effusions and scattered ground glass changes in the lungs could be unified by cardiac failure with pulmonary oedema. Infection and inflammatory causes are included in the differential for the pulmonary findings.

- TTE 21/7: The LV is normal in size. Normal systolic function. Mildly increased LV wall thickness. Moderate valvular aortic stenosis. Mild aortic regurgitation. There is mild mitral stenosis. Trivial pericardial effusion.

# NSTEMI

- angiogram: Significant distal left main disease.

- for TF to RNSH

# ?New AF

- on DAPT, not anticoagulated

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24/07/2025 12:06:09 AEST

PC to Cardio Rosy

78M t/f from Gosford

presented with NSTEMI & APO & new rapid AF

Angiogram showed distal left main 60% stenosis and proximal right coronary 50% stenosis

B/G mixed aortic and mitral valve incompetence, bilateral carotid stents for carotid stenosis, T2DM, COPD, HTN, TIAs, pulmonary fibrosis and hodgkins lymphoma with previous radiotherapy

On heparin infusion currently

TTE 23/7 Gosford - moderate valvular aortic stenosis

For repeat TTE & CT TAVI

Per Cardio Rosy - await TTE, will kindly review

24/07/2025 15:21:21 AEST

Per Dr Allahwala Cardiologist should speak with structural cardio AT re ?TAVI