

DISCHARGE NOTIFICATION

NHS TRUST

Hospital: Turner Dale

Date: 15/07/2020 09:57

Discharge ID: 3887 81

OLDTOWN MEDICAL PRACTICE
15 CRUMPSALL ROAD
ANYTOWN AP2
4AG

GP Copy

FRANK MACKENZIE 03/03/1961 Unit No: M080609W CHI No: 0303549005
5 RAINBOW COURT, ANYTOWN, AP2 4DP, 01234 897654

Date of Admission: 01/07/2020 Consultant: DR MACLEOD Specialty: CARDIOLOGY
Date of Discharge: 15/07/2020 Ward: WARD MIDALE Ward Tel: 01234 762000 x 4746

Medication on discharge: (POS - Patient's Own Supply)

Drug	Dose	Frequency	Days	Route	GP Continue?
RAMIPRIL Tablets	5mg	twice a day	28	oral	Yes
SPIRONOLACTONE Tablets	25mg	each morning	28	oral	Yes
ISOSORBIDE MONONITRATE	10mg	Twice a day	28	oral	Yes
SIMVASTATIN Tablets	40mg	once a day	28	oral	Yes
FUROSEMIDE Tablets	80mg	each morning	28	oral	Yes
OMEPRAZOLE Capsules	20mg	each morning	28	oral	Yes
BISOPROLOL Tablets	10mg	each morning	28	oral	Yes
HYDROXYZINE Tablets	25mg	once a day	28	oral	Yes
GLYCERYL TRINITRATE Sublingual	1-2 puffs spray	as required	POS	sublingual	Yes
IVABRADINE tablets	5mg	Twice a day	28	Oral	Yes
PARACETAMOL Tablets	1 gram	four times a day as required. Maximum of 8 tablets in 24 hours	POS	oral	Yes

Clinical and Management Information

Reason For Admission / Transfer: Acute Heart Failure
Mode Of Admission: Urgent
Main Condition: Acute heart failure
Current Active Problems: IHD - previous MI (2005) Mild COPD
Operations / Procedures: Routine bloods. ECG. CXR. IV nitrates ECHO CRT-D insertion
Allergies: NKDA.

Dear Doctor,

Mr Mackenzie was admitted with a history of central chest pain for over 4 hours. He was pale and sweaty. He also describes a history of increasing breathlessness and lethargy for 2 weeks prior to admission. He was also experiencing PND and Orthopnoea.

He was treated for acute heart failure and required several nights stay in CCU receiving CPAP and IV nitrates. Medications were optimised and he began to improve slightly. Following the MDT meeting and discussions with Frank and his wife, the decision was taken to implant a CRT-D device to optimise his heart. This was carried out under local anaesthetic without complications.

Clinical Comments for GP / Notes:

Frank is now less breathless and stable enough to send home. He will be followed up by the heart failure team and has an appointment with the ICD nurse within the next 2 weeks.

Please contact us if you have any questions or require further assistance.

Many thanks.

Donald Duck.

FY1 Bleep 1020.

Patient Aware of Diagnosis: Yes
FDL to follow: Yes
Destination on Discharge: Home