

Linn Armour

Discharge Summary - 3rd July 2024

Discharge Referral ED - eMeds

3-July-2024

MR Linn ARMOUR DoB 4-April-1967 (57 years) SEX Male Individual Healthcare Identifier (IHI) 8003 6011 9519 5180

Start of document

Goulburn Base Hospital

Author Details

Krishna Dutta (Medical Practitioners nfd)

Phone

(02) 4827 3111

Discharge To

Other (includes discharge to usual residence, own accommodation/welfare institution (includes prisons, hostels and group homes providing primarily welfare services))

Event

The purpose of this electronic document is to assist in the transfer of care. This document is a summary of an episode of patient care. It is not a complete clinical record and may not reflect current patient status if changes occurred following completion of this summary.

This Discharge Summary updates a previous Discharge Summary Document Id: 5588454778

Refer to each section for detailed information on the Patient encounter.

Problems/Diagnoses This Visit (Event > Problems/Diagnoses This Visit)

Diagnoses for Current Visit and Previous.

Diagnosis	Type	Clinical Service	Confirmation
TIA - Transient ischaemic attack	Discharge	Non-Specified	Confirmed

Clinical Synopsis (Event > Clinical Synopsis)

Presenting Complaint

Eye - abnormal vision

Patient Demographics

Facility: Goulburn Base Hospital

Admission Date: 03/07/2024 To be discharged: 03/07/2024

Medical Service: Consulting Clinician:

Attending Medical Officer: Bvirakare, David (CMO)

AMO Provider No.: 262924AW Indigenous Status: Neither Aboriginal nor Torres Strait

Local Medical Officer: Burn-Petersen, Hannah

LMO Provider No.: 4449444L

LMO Address: Old Linton Medical Centre

LMO Phone: 0262263697 LMO Fax: 0262263667

Interpreter Required: NO Language spoken at home: Unknown

Letter of Introduction

Dear Dr Hannah Burn-Petersen,

Thank you for reviewing Linn Armour a 57 year old male to be discharged on 03/07/2024 from the Emergency Department at Goulburn Base Hospital.

Linn Armour presented to this facility with Eye - abnormal vision.

Summary of Care

Summary of Care

Visit Information

57M Transferred from YDH

Background

- Multiorgan Sarcoidosis, involving: Kidneys, Lungs, Lymph Nodes

- Possible Cardiac involvement - currently has loop recorder

Review

R) Monocular blurred / opaque vision to R) Visual Field upon waking at 11am

- Nil complete loss of visual field, nil floaters or bright lights

- Slowly resolved over a period of an hour, has had no further vision loss

Nil sudden onset headache, facial droop, slurred speech or focal weakness to limbs

- Nil ataxia, gait abnormality, lightheadedness or dizziness

- Presented & reviewed at Yass Hospital, transferred to Goulburn Hospital for further investigation

Examination findings from Yass Hospital Referenced below

OE:

looks well

BP 150/70 on arrival, 130/80 later in ED

other obs within normal limits

vision 6/9 both L and R eyes unaided

no visual field deficits on confrontation test

PEARL

normal eye movements, no diplopia

nil other neurological deficits

Ix

Bloods: Unremarkable - attached

CT Arch Cow: Nil evidence of CVA

Discussed with Yass Hospital

- Happy for patient to be discharged home on Aspirin

- Patient to followup with GP for further TIA workup - MRI Brain / USS Doppler

- Patient to followup with Ophthalmology & Neurology

Discharge Plan

1. Please see your GP at the earliest

- GP to refer for MRI Brain & USS Carotids

- GP to organise Ophthalmology & Neurology reviews

2. Commence Aspirin 100mg once daily

3. Any further concerns please seek medical review

Diagnostic Investigations (Event > Diagnostic Investigations)

Diagnostic Investigation (Event > Diagnostic Investigation)

General Results

03/07/2024 22:38	Chemistry Methods	See Note
	Sodium	134 mmol/L LOW
	Potassium	4.4 mmol/L
	Chloride	103 mmol/L
	Bicarbonate	24 mmol/L
Creatinine	121 umol/L HI	
	Anion Gap	11 mmol/L LOW
	Urea	8.2 mmol/L
eGFR	57 mL/min/1.73m ² LOW	
03/07/2024 16:36	Chemistry Methods	See Note

Sodium	133 mmol/L	LOW
Potassium	5.4 mmol/L	HI
Chloride	99 mmol/L	
Bicarbonate	26 mmol/L	
Creatinine	122 umol/L	HI
Anion Gap	13 mmol/L	
Urea	8.2 mmol/L	
eGFR	56 mL/min/1.73m ²	LOW
Bilirubin Total	8 umol/L	
Protein	69 g/L	
Albumin	38 g/L	
Total Globulin	31 g/L	
ALT	13 u/l	
AST	11 u/l	
GGT	29 u/l	
ALP	80 u/l	
Calcium Level	2.47 mmol/L	
Corrected Ca	2.51 mmol/L	
Mg	0.80 mmol/L	
PO4	0.88 mmol/L	
Haemoglobin	136 g/L	
WCC	7.1 x10 ⁹ /L	
Platelets	205 x10 ⁹ /L	
RCC	4.2 x10 ¹² /L	LOW
Hct	0.40 L/L	

MCV	94 fL
MCH	32 pg
MCHC	339 g/L
RDW	14.5 %
Abs Neutrophils	6.8 x10 ⁹ /L
Abs Lymphocytes	0.1 x10 ⁹ /L LOW
Abs Monocytes	0.1 x10 ⁹ /L LOW
Abs Eosinophils	0.0 x10 ⁹ /L
Abs Basophils	0.0 x10 ⁹ /L
Lipid Methods	See Note
Fasting Status	Not Specified
Cholesterol	5.4 mmol/L
LDL Cholesterol	3.1 mmol/L HI
HDL Cholesterol	1.9 mmol/L
Cholesterol/HDL Ratio	2.8 NA
Non HDL Cholesterol	3.5 mmol/L
Triglycerides	0.9 mmol/L
Lipid Comment	Lipid Comment

Diagnostic Investigation (Event > Diagnostic Investigation)

Other Results (Freetext)

* Final Report *
CT Angiogram - Arch COW
ORIGINAL REPORT
CT BRAIN AND CT ANGIOGRAM CIRCLE OF WILLIS
CLINICAL HISTORY
Amaurosis fugax of the right eye.

TECHNIQUE

Precontrast brain followed by CT angiogram of the neck vessels and circle of Willis

FINDINGS

Non-contrast brain:

No acute intracranial haemorrhage or collection.

No acute territorial infarct.

No hydrocephalus.

No midline shift.

Orbital structures are unremarkable.

Mucosal thickening of the paranasal sinuses. Mastoid air cells are aerated.

Angiogram brain:

There is a normal 3 vessel left-sided aortic arch.

The common, internal and external carotid arteries are unremarkable.

Mild mixed atheroma in the cavernous segment of internal carotid arteries without significant luminal narrowing. Branches of the internal carotid arteries otherwise appear normal.

Slight dominance of the left vertebral artery.

The basilar artery and branches appear normal.

There are multiple nodules in the visualised lung apices, consistent with history of sarcoidosis. There are also mildly enlarged superior mediastinal lymph nodes.

CONCLUSION

1. No acute intracranial haemorrhage.

2. Circle of Willis angiogram is unremarkable without significant luminal stenosis, aneurysm or dissection.

Original Report Reported by: Dr Ayomikun Asonibare

Medications

Details of therapeutic goods which are/were prescribed for the patient or the patient has/had been taking

Current Medications On Discharge (Medications > Current Medications On Discharge)

None Supplied

Ceased Medications (Medications > Ceased Medications)

None Supplied

Health Profile

Details of patient's health profile

Adverse Reactions (Health Profile > Adverse Reactions)

Substance Type	Substance	Reaction Class	Reaction Status
Drug	No Known Allergies	Allergy	Active

Plan

Performed By

Performed By:

Dr Krishna Dutta (Registrar); Medical Officer

Record of Recommendations and Information Provided (Plan > Record of Recommendations and Information Provided)

None Supplied

Administrative Observations

Age	Specialty
57 years	Not stated

Administrative details

Encounter Details**ENCOUNTER_DETAILS_TABLE**

Admission Date	3-July-2024 18:01+1000
Discharge Date	3-July-2024 23:22+1000
Discharge To	Other (includes discharge to usual residence, own accommodation/welfare institution (includes prisons, hostels and group homes providing primarily welfare services))
Specialties	Not stated

Facility**FACILITY_DETAILS_TABLE**

Name	Goulburn Base Hospital
Work Place	130 Goldsmith Street, Goulburn, NSW, 2580, Australia
Phone	(02) 4827 3111 (Workplace)
FAX	(02) 4827 3248 (Workplace)
Department	Goulburn Base Hospital

Responsible Health Professional At Time Of Discharge**RESPONSIBLE_HEALTH_PROFESIONAL_AT_TIME_OF_DISCHARGE_TABLE**

Name	David Bvirakare
Work Place	130 Goldsmith Street, Goulburn, NSW, 2580, Australia
Organisation	Goulburn Base Hospital

Patient details**Value**

Name	MR Linn Christopher ARMOUR
Sex	Male
Date of Birth	4-April-1967 (57 years)
Individual Healthcare Identifier (IHI)	8003 6011 9519 5180
Local Identifiers	2196587 (GS AUID)
Phone 1	64957109 (Primary Home)
Phone 2	02 62262005 (Primary Home)

Author Details

Name	Krishna Dutta (Medical Practitioners nfd)
Organisation	Goulburn Base Hospital
Department	Goulburn Base Hospital
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Primary Recipients

Name	Contact	Address	Organisation
Hannah Benedicta (Linton) Burn-Petersen	Phone: 0262263697 (Workplace) 0262263667 (Workplace)	Work Place: 153 Comur Street, Yass, NSW, 2582, Australia	Old Linton Medical Centre

