# Beach End Medical Clinic

36 Main Street Mornington, Vic 3931

Tel: (03) 5975 1066 Fax: (03) 5975 7455

Dr Joseph Thoppil MBBS FRACGP 435833BB

25/08/2025

Dr Chris Neill Cardiologist

Dear DR Neill,

RE:

Helen McCrimmon DOB 16/5/1952 Unit 1/17 Tanti Ave MORNINGTON VIC 3931 Tel: MOBILE 0402 158 684 mccrimmh@hotmail.com

Medicare Number 3094 36827 1 / 2

Thank you for seeing Helen, for opinion on her cardiac issues/symptoms with previous diagnosis of Takotsubo.

Past History:

Date	Condition
	Bilateral THR
	Melanoma
	Pneumonia
2023	Osteopenia
2024	Takotsubo heart arrythmia
2024	Tinnitus
2025	Hypercholesterolaemia
2025	R posterior thigh SCC excised

## Allergies:

**ENDONE** 

**Current Medications:** 

Drug Name	Strength	Dosage	Reason	Last script
DIGOXIN Tablet (Digoxin)	62.5mcg	1 tab daily		06/03/2025
FLECAINIDE ACETATE Tablet (Flecainide acetate)	50mg	1 tab daily		06/03/2025
SERETIDE MDI Inhaler (Fluticasone propionate/Salmeterol (as xinafoate))	50mcg-25mc g/actuation	2 b.d.		08/04/2025

Yours sincerely,

Dr Joseph Thoppil.



Consultant, Interventional, Structural & EP/Pacing Cardiologists

Dr Gregory Szto • Dr Vivek Gupta • Dr Mariusz Wolbinski

Dr Anthony Pisaniello • Dr Hari Sugumar

P: (03) 9789 0088 F: (03) 9789 8866

6 May 2025

Dr Yong Yu Beach End Medical Clinic 36 Main St MORNINGTON VIC 3931

RE:

Helen MCCRIMMON DOB: 16/05/1952

Pulmonary sarcoidosis Ex heavy smoker

Address: 1/17 Tanti Avenue Mornington VIC 3931

Phone: Mobile: 0402158684

#### Past Medical History:

	otory.	
04/04/2025	Echo - LVEF 58%, normal LA/RA, mild MR	
03/04/2025	Holter - SR, 73 (47-142), 3156 VEs (4%), 11 SVEs	
02/12/2024	Exercise Str Echo - No inducible ischaemia	
23/10/2024	Holter - SR, 71 (47-123), 8% VEs (7047). 40 SVEs. No pauses.	
11/06/2024	Holter - SR, 76 (51-130), 3447 VEs (3%), 57 SVEs + 2 (3-6 beat) atrial runs up to 103 bpm	
25/03/2024	Holter - SR 67 (46-124), 4278 (5%) VE's, 33 SVE's	
26/03/2024	Echo - LVEF 61%. Improved LV function. Normal LA/RA. Mild MR.	
24/01/2024	Holter - SR, 68 (45-105), 403 VEs, 20 SVEs	
21/12/2023	24hr Holter monitor - SR 44-92 bpm. 12000 VEs.	
11/12/2023	Cardiac MRI - LVEF 48%. RVEF 47%. ?Due to ectopy. No scar/infiltration.	
08/12/2023	Echo - LVEF 64%. Distal anteroseptal/inferoseptal hypokinesis. Mild LA+. Mild MR.	
07/12/2023	Frequent dizzy spells	
07/12/2023	Takotsubo Cardiomyopathy - LVEF 41%. Normal coronary arteries on angio at FH.	
//2013	Right THR	
//2011	Left THR	
//1990	Sarcoidosis	
	Melanoma, right shoulder and elbow	
	Asthma	

Medications:

Flecainide 50 mg daily, Digoxin 62.5 mcg daily, Vitamin B12, Calcium, Vitamin D, Seretide Inhaler bd

Dear Yong,

I saw Helen McCrimmon today at Peninsula Heart Centre for review. Her echocardiogram showed that her LV function remains normal and that she has stable and mild mitral regurgitation. Her 24-hour Holter monitor test showed sinus rhythm with a 4 % burden of ventricular ectopic beats, which is quite acceptable for her. She is minimally affected by these. She is also minimally affected by her tinnitus which did not seem to improve with the reduction in Flecainide dose from 50 mg bd down to 50 mg daily.

Overall, Helen is rather stable and I will see her again in 12 months' time with an up to date echocardiogram and 24-hour Holter monitor test beforehand.

With kindest regards,
Dictated but not sighted to avoid delay
Dr Anthony Pisaniello
MBBS PhD FRACP FACC FCSANZ FSCAI
Interventional Cardiologist
Provider No: 581797MY
AP/mg

Name: McCrimmon, Helen Frances

Address: 1/17 Tanti Ave Mornington. 3931

D.O.B.: 16/05/1952 Sex at Birth: F

Medicare No: 30943682712

IHI No:

Lab. Reference: 1567101166

Date Requested: //

Addressee: Practice Principal Beach End Medical Clinic

36 Main Street Mornington 3931 Vic **Referred by:** 2220 Peninsula Health

**Collected:** 03/06/2025 15:32 **Specimen:** 

Test Name: Discharge Summary

Clinical information:

**Discharge Summary** 

Lab. Reference: 1567101166

Requested: / /
Complete: Final
Collected: 03/06/2025

2220

## **Final Discharge Summary**

Discharge Summary

Clinical Synopsis

Admission Information

McCrimmon, Helen Frances MS

URN: 20237574 DOB: 16/05/1952 Sex: F

Home address: 1/17 Tanti Ave, Mornington 3931, Australia (inc External Territories)

Home Phone: 0402158684 Mobile Phone: 0402158684 Unit: Cardiology PH Treating Clinician: Layland, Jamie Dr

Admitted: 02/06/2025 13:05

Frankston Hospital Hastings Road, Frankston Victoria 3199; Phone: 03 9784 7777; Fax:

General Practitioner

Name: Beach End Medical Clinic 36 Main Street Mornington 3931 Vic, Practice Principal

Address: Beach End Medical Clinic 36 Main Street Mornington 3931 Vic, 36 MAIN STREET, 36 Rear Main Street,

MORNINGTON, VIC 3931

Phone: 0359751066 Fax: 0359757455

Delivery Method Electronic Transfer

Discharge Details

Expected Discharge Date: 03/06/25 Final Discharge Destination: Home

**Hospital Course** 

Thank you for your ongoing care of Helen McCrimmon, a 73-year-old woman who was admitted to the Cardiology Unit at Frankston hospital between 02/06/2025 and 03/06/2025 for recurrent episodes of lightheadedness associated with hypertension (SBP up to 200mmHg) on a background of Takotsubo's in 2023. She was found to have a mild troponin rise of 25 peaked. Given recent angiogram (2023) with no significant coronary angiogram disease and atypical symptoms it was decided an angiogram was not imminently indicated. She had an unremarkable echocardiogram and was discharged clinically stable with the following plan.

Please do not hesitate to contact Frankston Hospital via switchboard for any further questions or concerns.

Kind regards, Cardiology team

Frankston Hospital

Discharge Plan

- Secondary HTN screen path slip will be given for plasma metanephrines, TFT, PTH, cortisol
- Outpatient renal tract USS (ordered)
- Outpatient Holter referred to Peninsula Blood Pressure and Holter Monitoring (Pt reporting associated palpitations/fast HR just prior to HTN've eps)
  - Follow up with private cardiologist Dr Pisanello
- Patient counselled on atorvastatin indication given LDL of 5.1, and telmisartan given hypertension however her preference at this time is to not commence new medications until private cardiologist review

- Patient advised to represent to GP or ED if worsening of symptoms or if any concerns Inpatient Issues
- #? NSTEMI
- troponin 3 > 25
- bg of Takotsubo's '23
- normal angio 2023 (minimal CAD)
- TTE: NAD

HOPC:

Reports repeated episodes of light-headedness today

- associated with mild jaw tightness, nil other radiation
- denies vertigo sx

Reports has had black spots in vision over the last 2 days - resolved

This morning had black spoints in vision, resolved --> went to the gym

Had episode of light-headedness hours after the gym

- associated with mild jaw tightness, nil other radiation
- nil chest pain/SOB
- nil PND/orthopnea
- nil leg swelling
- nil obvious aggravating factors

At home took BP, SBP > 200

Discussed with Cardiologist Dr Anthony Pisanello who advised presentation to hospital

- last reviewed ~ 1 week ago, nil issues

Denies falls/syncopal episodes

Denies UL/LL weankness or changes to sensation

Denies prev hx of HTN (normally within normal limits at home)

Was given 300mg aspirin by AV

Past Med Hx:

Takotsubo cardiomyopathy w/ PVCs

Asthma

?Sarcoidosis

Medication Hx:

Digoxin 62.5mcg once daily

Flecainide 50mg BD

Fluticasone/salmerterol 1 puff daily

Allergies:

Endone

Social Hx:

Lives at home with daughter

Independent with ADLs

Ex-smoker

Nil ETOH use

Results Review

Lab Results

Test Name Test Result Date/Time

Hb 125 g/L 03/06/2025 07:34 AEST

WCC 6.1 03/06/2025 07:34 AEST

Plt 298 03/06/2025 07:34 AEST

MCV 86 fL 03/06/2025 07:34 AEST

Neutrophils # 3.3 03/06/2025 07:34 AEST

Sodium Level 138 mmol/L 03/06/2025 07:34 AEST

Potassium Level 4.1 mmol/L 03/06/2025 07:34 AEST Chloride Level 104 mmol/L 03/06/2025 07:34 AEST

Bicarbonate Level 25 mmol/L 03/06/2025 07:34 AEST

Urea Level 3.9 mmol/L 03/06/2025 07:34 AEST

Creatinine Level 61 micromol/L 03/06/2025 07:34 AEST

Estimated GFR 86 mL/min/1.73m2 03/06/2025 07:34 AEST

Calcium Level 2.31 mmol/L 03/06/2025 07:34 AEST

Calcium Corr 2.30 mmol/L 03/06/2025 07:34 AEST

Magnesium Level 0.76 mmol/L 03/06/2025 07:34 AEST

Phosphate Level 1.36 mmol/L 03/06/2025 07:34 AEST

Albumin Level 40 g/L 03/06/2025 07:34 AEST

### Pathology Reports

rhythm.

Document Type: Lipid Profile Document Date: 03 Jun, 2025 07:34 AEST **Document Status:** Modified Document Title/Subject: LIP Performed By/Author: MPH -UNKNOWN, PERSONNEL on 03 Jun, 2025 13:59 AEST Visit info: 2828708, FH, Inpatient, 02/06/2025 - 03/06/2025 Contributor system: PH LAB \* Final Report \* LIP Lab ID: 25-37984704-LIP-0 SERUM/PLASMA LIPID STUDIES - Fasting Total Chol: 7.4 mmol/L 1.9 mmol/L Triglyceride: HDL - C: 1.4 mmol/L LDL - C: 5.1 mmol/L 6.0 mmol/L NON HDL - C: Chol/HDL Ratio: 5.3 Therapeutic targets vary depending on the patient's cardiovascular risk profile. T.Chol Trig HDL-C LDL-C Non HDL-C Primary Prevention: <4.0 <2.0 >=1.0 <2.0 <2.5 Secondary Prevention: <2.0 >=1.0 <1.8 < 2.5 [1] Document Type: Troponin I High Sensitivity Document Date: 03 Jun, 2025 01:24 AEST **Document Status:** Auth (Verified) Document Title/Subject: STP Performed By/Author: MPH -UNKNOWN, PERSONNEL on 03 Jun, 2025 02:48 AEST Visit info: 2828708, FH, Inpatient, 02/06/2025 - 03/06/2025 Contributor system: PH LAB \* Final Report \* STP Lab ID: 25-37981145-STP-0 SERUM / PLASMA HIGH SENSITIVE TROPONIN Trop I (Beckman): 27 ng/L (< 11) Time since the last Troponin collection: 7.8 hours CHANGE in Troponin since last specimen: 1 ng/L Z-score: 0.24 \* Normal hs-Troponin is 0-10 ng/L (Female) and 0-20 ng/L (Male) \* In suspected Acute Coronary Syndrome consider repeat after 2-3 hrs \* Increased Troponin may occur with non-ischaemic injury such as rapid AF, pulmonary embolism, heart failure or sepsis \* Do NOT compare Troponin measured by different methods because the standardisation and units may differ \* Z-score > +/- 2.0 indicates > 95% prob of a significant change [2] Radiology Reports Patient: MCCRIMMON Helen DOB: 16/05/1952 3931 MORNINGTON, 1/17 Tan?? Ave Exam date: 03/06/2025 Indication Episode lightheadedness, SBP 200, mild troponin rise 23, bg takotsubo CM 2023, normal angio 2023, ? RWMAs/EF Physical Exam Data Height 164 cm. Weight 60 kg. BMI 22.31 kg/m?. BSA 1.65 m?. Heart rate 55 bpm. Sinus

Left Ventricle Normal cavity size.

Normal wall thickness.

Global systolic function:

Normal systolic function. Normal ejection fraction (biplane EF = 59%, GLS = -18%).

Regional systolic function:

Wall motion: No obvious RWMAs.

Diastolic function:

Normal diastolic filling pattern.

Right Ventricle Normal cavity size. Normal systolic function.

Insufficient TR

Normal IVC size and collapse.

Left Atrium Normal cavity size.

Right Atrium Normal cavity size.

Mitral Valve Structurally normal mitral valve. trivial MR.

Aortic Valve Trileaflet and structurally normal aortic valve. No aortic regurgitation.

Tricuspid Valve Structurally normal tricuspid valve. Trace tricuspid regurgita??on.

Pulmonic Valve Structurally normal pulmonic valve. Trivial PR.

Recommendation Provided

Current Medications on Discharge

THESE ARE THE MEDICATIONS PRESCRIBED AT DISCHARGE.

NOT ALL OF THESE MEDICATIONS MAY HAVE BEEN DISPENSED.

atorvastatin 40 mg oral tablet, 1 tab(s), Oral, daily

telmisartan 40 mg oral tablet, 1 tab(s), Oral, daily in the morning

Additional Recipients

No additional recipients

**Outpatient Appointments** 

There are no scheduled appointments.

Information Provided

MyHealth Record

If you are 18 years or older and have a My Health Record your test results will be available to view a week after they have been completed. It's important to note the language used can be hard to understand and interpreted in many ways. It's best for you to discuss these results at your planned follow up appointment with your GP or Specialist. If you have a planned Outpatients appointment but require more timely advice please contact your GP.

A copy of this discharge summary has also been uploaded to the MyHealth Record Portal

Author

Name: Geng, Ruxi

Provider Number: 6395101X Position: Medical Officer PH

Principal Diagnosis

High troponin I level

Additional Diagnoses

Past Medical History

Ongoing

No qualifying data

Historical

No qualifying data

Procedural History

No surgery performed during this visit

**Active Allergies** 

**Endone (Hallucinations)** 

oxycodone (Hallucinations)

Alerts

No qualifying data

[1] LIP; Contributor\_system, PH\_LAB 03/06/2025 07:34 AEST

[2] STP; Contributor\_system, PH\_LAB 03/06/2025 01:24 AEST