### St. Michael's

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## MyChart™ Report

Patient Name: GOESSERINGER SONJA

Patient DOB: 1954-May-20

# Transcription Report OfficeProgressSu

**Observation Date:** 

October 09, 2018

Status:

F

Reported Date:

October 15, 2018

**Summary Data:** 

CAR

Cardiac Office Progress Summary

Goesseringer, Sonja Gabriele

MRN: 117-3167 D.O.B. May-20-1954

BETH LYNN ABRAMSON, MD MSc F.R.C.P.(C) FACC Division of Cardiology, Dept. of Medicine, St. Michael's Hospital, Toronto 30 Bond St. Rm. 6--039 Queen Wing, M5B 1W8 Tel: (416) 864-5424, 864-5968 (patients) Fax: (416) 864-5974 email: abramsonb@smh.ca

Dr. Kathleen Doukas SMH FI 4-410 Sherbourne Street Toronto, ON M4X 1K2

Dear Dr. Doukas:

Sonja Goesseringer was seen at your request Oct. 9/18 for chest discomfort. She is a pleasant 64-year-old who I have seen in the past for fibromuscular dysplasia and mild plaque in her carotids. Past health is significant for treated HT. She has no history of DM and is a lifelong nonsmoker. Her mother had FMD as well.

In the last year Sonja describes CP that had some atypical features. She has tightness in her chest that can last seconds to minutes. It can radiate to her left arm and she will have diaphoresis. It is atypical in that it can occur with activity and at rest, but is not reproducibly exertional. She also has a sharp stabbing pain lasting several seconds that sounds noncardiac. In addition, she had pain under her inframammary area that she was worried might be a valve issue.

\*\*\* FOR REFERENCE ONLY \*\*\*

Share your health information only with people you trust. If you have questions about your test results, contact the doctor or nurse practitioner who ordered the tests for you.

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Although she has not been able to tolerate statins and did not take Ezetrol, she has been on herbal medication Policosanol for lipid lowering. Medications in addition, HCTZ 12.5, Estradiol, Fentanyl patch, Effexor, Baclofen, Tecta.

O/E; 116 lb, HR 80 regular, BP 141/70. Exam normal. ECG normal. CHOL 4.27, LDL 2.39.

I have told Sonja that her discomfort does sound noncardiac, that said given some risk, I think we should pursue with a perfusion scan. She is not able to exercise. She was worried about the radiation dose of a Persantine MIBI but is getting information that is not accurate from a Harvard review that does not apply to the current doses given at SMH. I am arranging for a stress only protocol, which she has agreed to. The amount of radiation with these low dose protocols, are equivalent to background radiation for 6-12 months. I am sending a copy on to your office. I suspect it will be normal, but should it be abnormal in any way, I will contact her. She seemed pleased with this approach.

I have not arranged formal followup but I am happy to see her in the future should there be concerns. She was using Nitroglycerin which I asked her stop as her pain does not sound cardiac.

Yours sincerely,

Beth Abramson, MD, FRCPC Heart Health Unit, 7th Flr, Queen Wing T: 416-864-5968 F: 416-864-5974 Adm: 416-864-5424, 6-050 Queen

Electronically Signed by Beth Abramson, MD, FRCPC 15/10/2018 09:51 P

cc: Beth Abramson, MD, FRCPC 6 - Queen Wing, Rm 6-039 St. Michael's Hospital Toronto ON M5B1W8

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