

Radiology Report

Name : Goh Geok Kwan

Age/Sex : 63 Year / Female

NRIC / ID No : S1188249H

Exam Date : 28-Apr-2020

Case ID : 00249

Ref. Doctor :

US Carotids with Doppler

Clinical: Pulsatile tinnitus. History of CAD.

Technique: Colour Doppler ultrasound of bilateral carotid arteries in the neck was performed with a high frequency linear transducer.

Findings:

The intimal media thickness (CIMT) in the distal common carotid arteries:

Right: 0.7 mm; Left: 0.7 mm.

There are atherosclerotic plaques at the carotid bulb/ proximal ICA on both sides. with spectral broadening on color doppler but without an increase in peak flow velocities. Findings indicate mild (<50%) stenoses.

The peak systolic velocities are as follows:

Right CCA proximal - 24.2 cm/s; Left CCA proximal - 23.6 cm/s

Right CCA distal - 27.3 cm/s; Left CCA distal - 28.7 cm/s

Right ICA proximal - 27.9 cm/s; Left ICA proximal - 24.9 cm/s

Right ICA distal - 42.3 cm/s; Left ICA distal - 24.9 cm/s

The ICA/CCA PSV ratios:

Right: 1.4 Left: 1.9

The proximal external carotid arteries are normal in flow velocities with no significant stenosis. Normal antegrade flow and flow velocities in the right and left vertebral arteries.

Impression:

Atherosclerotic plaques in bilateral carotid bulb/ proximal ICA with <50% stenosis. There is spectral broadening but with peak systolic vessels velocities within limits.

Reported By : Dr Howe Tse Chiang

Reported Date/Time : 28-Apr-2020 13:19

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RESTORE HEART
CENTRE

Transthoracic Echocardiography Report (Limited study)

Patient Demographics		Test Details	
Patient Name:	Goh Geok Kwan	Test Date:	30/5/2020
Patient ID:	S1188249H	Referring Physician:	Dr Peter Ting
Date of Birth:	27/12/1956	Reporting Physician:	Dr Derek Yong
Gender:	Female	Indication for test:	Assess LVEF, post coros
		Rhythm:	Sinus

2-Dimensional Findings

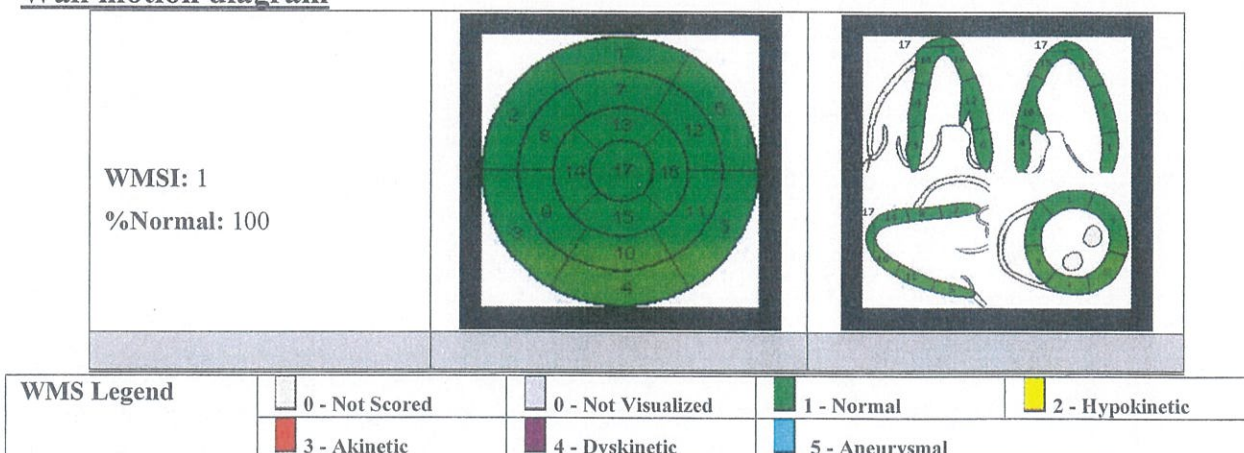
Left ventricle

Normal left ventricle (LV) systolic function. Visual ejection fraction (EF) 55%.
(See wall motion diagram)

Pericardium

No pericardial effusion.

Wall motion diagram



Interpretation Summary and Conclusion

1. Normal LV size with normal LV systolic function (LVEF 55%).
2. No pericardial effusion seen.



Dr Derek Yong MBBS (Adelaide, Australia); FRACP (Cardiology, Australia); FAMS (Cardiology, Singapore); F.A.C.C (Cardiology, USA)
Consultant General and Interventional Cardiologist
Restore Heart Centre

Date: 30/5/2020

6/26/2020

StarMed Specialist Centre Pte Ltd

12 Farrer Park Station Road #05-01
Singapore, 217565



Goh Geok Kwan

ID: 00249 NRIC / Passport / FIN: S1188249H

26 Jun 2020, 03:41PM

TO: Dr Tan Wee Lun
Nobel Psychological Wellness Clinic
NOVENA MEDICAL CENTER
#09-35, 10, Sinaran Drive, Singapore 307506
Phone: 6397 2993
Fax: 6397 7028
Website: <http://www.singaporepsychiatrists.com/>

Referral for Mdm Goh Geok Kwan S1188249H

Dear Wee Lun,

Please help see Mdm Goh for anxiety issues, she has chronic insomnia and possible depression. She also has issues with chronic pain, and seems to have developed addiction/dependence to codeine. She has been taking codeine and procodin daily for chronic cough for months now.

Past medical history of 1) Hyperlipidemia 2) Lower spinal and left foot Op in 2013/2014 3) IHD with PCI and subsequently CABG in 2016 4) Chronic angina with chronic distal LAD stent occlusion and occlusion of graft to distal LAD, managed medically. Recent PCI to pLAD stenosis because of recurrent angina. 5) Obstructive sleep apnea (severe), still trying CPAP but can't seem to tolerate, 6) Insomnia and anxiety.

Cardiac wise stable currently, but she has a tendency to get angina due to residual ischemia.

Latest medications: Aspirin 100mg OM, Plavix 75mg OM, Pariet 20mg OM, Crestor 20mg ON, Vasteral MR 35mg BD, Alprazolam 0.5mg tds PRN, Arcoxia 60mg OM PRN. She is also on regular codeine phosphate, procodin, and sometimes takes stillnox or Xanax.

Appreciate your assistance for this challenging case.

Best regards

Dr Peter Ting
MBBS, MRCP (UK), MPH (Harvard),
FACC (USA), FAsCC (Asean), FAMS
STARMED SPECIALIST CENTRE
12 Farrer Park Station Road #05-01 Singapore 217565
Tel: 6322 6333 Fax: 6322 6339
PCR: 09001H

Dr Perer Jing
Cand. Report

13.5.2020

THE ORTHOPAEDIC CENTRE (GLENEAGLES)
6 Napier Road, Gleneagles Medical Centre, #07-15, S(258499)

NAME: GOH GEOK KWAN
NRIC: S1188249H
PCNO: 07130
DOB: 27/12/1956 / 63y SEX: F
NATIONALITY: SINGAPORE CITIZEN

Dear Perer,

Mrn GSK is our normal patient. He has had 2 lumbar spinal surgery. Since his last surgery in 2017, he has been experiencing left LS retractor pain. This is likely due to the left LS screws impinging on the left LS nerve root. He has exhausted conservative management and is considering minimally invasive removal of his left LS screws / rod. Please assess his cardiac fitness for surgery.

Thank you.

Dr Yue Wai Mun
Orthopaedic Surgery
MCR 06258H


The Orthopaedic Centre (Gleneagles)
6 Napier Road #07-15
Gleneagles Medical Centre
Singapore 258499
Tel: 6475 3408 Fax: 6475 3410

enquiry@toc.com.sg | www.toc.com.sg

Consultation Hours: Mon-Fri 9am-5pm | Sat 9am-1pm

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| <input type="checkbox"/> Mount Elizabeth Novena Specialist Centre, 38 Irrawaddy Road, #09-42, S(329563) T: 65 6339 5063 F: 65 6339 5036 | |
| <input type="checkbox"/> 3 Mount Elizabeth Medical Centre, #08-02, Singapore 228513 T: 65 6235 3689 F: 65 6235 3651 | |
| <input type="checkbox"/> Blk 1 Farrer Park Station #14-05 Connexion, Singapore 217562 T: 65 6443 5263 F: 65 6443 5284 | |
| <input type="checkbox"/> 6 Napier Road #07-15 Gleneagles Medical Centre, Singapore 258499 T: 65 6475 3408 F: 65 6475 3410 | |