

Consumer: Mrs [REDACTED]

(DEC'D) Provider: [REDACTED]

Assessment
Extension

Encryption Key:

Date 13/07/2004 03:45 PM Composed Karen Harbus/HRC
Composed: By:
Caller:★ HRC to Dr Mary Buchanan, indep. adviser

Body Text:

Given in Confidence: (03) 9554 1000. I telephoned the independent adviser in order to see if she had had time to consider the information sent to her. She said she had and in her opinion, the woman "*was not treated reasonably well*". The adviser stated that the woman fell within a high risk group due to such factors as her age, history of heart disease, raised troponin reading and the ECG and enzymes meant she did have a "*recent event*". The adviser explained that the American College of Cardiology, National Heart Foundation and other recognised organisations had a list of criteria whereby it can be established whether or not a patient is a "*high risk patient*". She commented that the woman should have been given heparin, a blood thinning agent and she should have had an urgent angiogram. She explained that the referral to the nuclear medicine unit for the stress test was not particularly relevant as it would only have confirmed what they should have already known i.e. that the woman was a high risk patient. I asked Dr Buchanan if the woman's outcome would have been different if she had been treated appropriately and she possibly. She stated that she was not sure about the facilities this particular hospital had for such emergency procedures as an angiogram but reiterated that nevertheless the treatment the woman received was unreasonable.

Thanked the adviser very much for her assistance. It was agreed that I would fax her a copy of this File Note so that it could be checked to ensure it accurately reflected our discussion.
Fax no: 9554 8453.



Health Rights Commission

Our Ref: 040036 S52/kh
Your Ref:

17 June 2004

Private & Confidential

Dr Mary Buchanan
Deputy Director of Emergency Department
Dandenong Hospital
David Street
DANDENONG VIC 3175

► P R E P A R E D
SENDER TO KEEP
SQ6501297

Dear Dr Buchanan

I refer to my telephone conversation with you today. As discussed, I am seeking your assistance with a complaint about another health service provider.

A person who gives such information to the Commission in good faith is protected by Section 137 of the *Health Rights Commission Act 1991*. A copy of Section 137 is enclosed for your information.

You should be aware, however, that as our files are accessible under the *Freedom of Information Act 1992*, any comments you make might be accessible under the Act, subject to possible exemptions such as the confidentiality of information provided. You may wish to advise us when any comment you make is "Given in Confidence" for the purpose of that legislation. If a decision is made to recommend that another body, for example a registration board, take action on the subject of our inquiries, the Commission may decide to include the information you provide. Similarly, should the Commission investigate the matter itself, your information may be included in the final investigation report.

A man complained that his 69 year old wife was taken by ambulance to a public hospital on 1 December 2003, as she awoke with chest pain at 0330. He said that various tests were conducted and his wife was discharged from the hospital on 2 December 2003. The man stated that his wife was due to undergo a stress test at a different hospital at 1020 on 2 December 2003. He said he heard a doctor tell a nurse to ensure that his wife attended this appointment but the telephone call to the nuclear medicine service did not occur until it was too late to keep the 1020 appointment, and it was moved to 8 December 2003. Unfortunately, the woman passed away in the early hours of 3 December 2003. Her Death Certificate states that she died of 1.(a) Cardiac arrest; (b) myocardial infarction; and (c) ischaemic heart disease. The man believes that if the hospital had diagnosed and treated her appropriately (e.g. beta blocker medication) his wife would not have died. He also believes that if the stress test had occurred as arranged on 2 December 2003, his wife's condition would have been correctly diagnosed and she would have been given appropriate treatment (as above) and would not have died. The man stated that a doctor informed him on 2 December 2003, that if the stress test showed a blockage in the heart she would be flown to a primary hospital for emergency surgery.

The hospital responded to the Commission and stated that given her past medical history, "*prolonged chest pain, ECG changes and raised troponin values*", the woman should have been diagnosed with acute coronary syndrome and should have remained in hospital for ongoing observation.

In relation to the provider's response, the man said he wanted the independent adviser to be informed that he disagreed with a number of points, namely:

- At paragraph 3 where the provider states "*Investigations including serial ECGs confirmed the previous myocardial infarction with some lateral 'T' wave changes,, the chest x-ray was normal and*

blood tests showed a raised troponin value", the man stated that when his wife was discharged they were told that all the tests were clear so he was unsure what is meant by this statement;

- At paragraph 4, the first sentence states that the woman was admitted to a general ward and reviewed by a specialist medical team later that morning. The man said that to his knowledge his wife was not reviewed by a specialist medical team;
- At paragraph 4, where the provider said, "*The nursing staff member rang [the nuclear medicine service] to confirm the appointment however it had been reallocated with no further appointments available for one week*", the man wanted it noted that this does not refer to the important incident when, at 0830, the specialist requested that a nurse ensure the stress test went ahead, but refers to a later time when the man discovered that the call had not been made (approx. 1045). The man said that when he asked the nurse why she did not make the call, she stated that it was not her job but the doctor's job.
- At paragraph 6 where the provider states, "*An interview was conducted with the nurse caring for [the woman] who explained she had contacted [the nuclear medicine service] in an attempt to confirm the booking, after receiving confirmation from [the specialist] that [the woman] could attend. However her phone call was made after the required confirmation time and the booking had been reallocated with no emergency appointments available*". The man also stated that he had contacted the nuclear medicine service to ask if they are able to see patients if a hospital makes an "*emergency*" referral and he was informed that they do. The Commission also verified this with the service.

Please find enclosed de-identified copies of:

- the man's complaint; and
- the hospital's response; and
- the medical records.

Would you please comment on whether or not you believe the woman's outcome would have been different had she been either:

- (a) correctly diagnosed by the hospital and kept in for observation; or
- (b) referred for her stress test on 2 December 2003.

I would like to point out that the Commission is not expecting you to provide a written report, but to offer verbal feedback on the health issues concerned. It is not normal practice for the Commission to pay for the type of information I am requesting. I will contact you shortly to discuss the situation further. If you are unavailable to take my call, I will make a more convenient arrangement with your secretary. Should you wish to contact me in the interim, please telephone me on 3234 0258.

Your assistance with this complaint would be appreciated and may help the Commission satisfactorily resolve the complaint for both the complainant and the health service provider.

Yours sincerely

Karen Harbus
Intake Officer

Enc.

SECTION 137 **OF THE HEALTH RIGHTS COMMISSION ACT 1991**

Giving of information protected

137.(1) This section applies to a person who, honestly and on reasonable grounds, gives information or a record (the “**information**”) to the commissioner, an authorised person or a commission officer –

- (a) for the purpose of a health service complaint; or
- (b) in the course of an investigation or inquiry.

(2) A person is not subject to any liability for giving the information and no action, claim or demand may be taken or made of or against the person for giving the information.

(3) For example, in proceedings for defamation in relation to a publication it is a lawful excuse that the publication was made in giving the information.

(4) For example, a person –

- (a) on whom a provision of an Act imposes a duty to maintain confidentiality with respect to a matter; or
- (b) who is subject to an obligation by way of oath, rule of law or practice to maintain confidentiality with respect to a matter;

is taken not to have –

- (c) committed an offence against the Act; or
- (d) breached the oath, rule of law or practice or a law relevant to the oath, rule of law or practice; or
- (e) rendered the person liable to disciplinary action;

merely because the person has given the information.

On late the 1st or early the 02-02-03 my wife [redacted] was taken by ambulance to [redacted] Hospital with suspected heart attack after several checks with ECG's and negative my wife was admitted to hospital and she had been given morphine / pain killing tablets and oxygen [redacted] from Tasma who was now feeling no pain as suggested. [redacted] She go and pick up over non. And said take from to ward, she had been booked in for a stress testamini at 10-20 AM on the 2-12-03 by her doctor Dr [redacted] she asked me to let them know that she was in hospital this was at the [redacted] Hospital I did this and told them that I did now known if the [redacted] Hospital was going to run her down or not they told me that they would have to [reallocate] know early as the time would have to be reallocated. The heart specialist was suppose to see her at 8 AM he did not arrive till approx 9-30 AM I told him about the x-ray at the [redacted] hospital he turned to the nurse and said I want this x-ray done ^{and} straight away he then left. I gave the nurse all the particulars including the appointment form which included the telephone number for the [redacted] hospital and told her she had to phone them straight away. She instead of without saying a word at 10 AM the ward doctor came up with the nurse and said we will send you up for that x-ray now are you feeling any pain of course she wasn't she had been given medication to stop the pain he then started to work out how he was going to get her to the [redacted] hospital I said do you want me to run her down he said yes, the nurse then interrupted

you are taking a risk she should go by ambulance
he agreed and said I will phone the [REDACTED]
and let them know she is on the way down
and headed off followed him as I thought there
was something they were not telling us he told
me that we think she has a fracture in the back
and this x-ray will show us where it is and we
will be able to give her something for it and send her
to Brisbane to be operated ^{on} straight away to clear
it. I went back and told my wife at 10.30 the doctor
came back and said the appointment had been rescheduled
and he ~~had~~ had booked ^{12.45 PM} for Monday 3-12-03.

On hearing this I went straight down to the [REDACTED] Hospital
I was told that the [REDACTED] Hospital had not phoned
so they reallocated the x-ray ^{at 9.30 AM} when I back to the
[REDACTED] Hospital and complained to the ward doctor
he said it was too late and there was nothing they could
do about it. (I have since found out that the hospital
could have requested an emergency x-ray) I then
asked the doctor what happens now he said she can
go home and that the [REDACTED] will send the results back
to them I went back to my wife she had been told she was
going home, the nurse was attending another patient I
asked the reason she did not phone the [REDACTED] she
said in a huff its not my job the doctor should have
phoned, as she was walking off I said you should
have given all the information to the doctor then the
hospital refused to give me the nurses name.

My wife passed away between 4.30 AM and 6 AM on the 3-12-03.
It is my opinion the the nurse should never be allowed
to continue in the trade again and put other lives
at risk

[REDACTED]
22/4/1934

2/12/03

Dear Doctor

69 year old lady with prior history of silent MI presented with chest pain relieved by Nitroglycerin. Her Troponin was 0.6 with a flat CK curve. ECG shows old MI.

Past medical history

Prior MI (silent)

hypothyroidism

Meds

Aspirin 100mg OD

Lasix 40mg OD

Lipitor 20mg OD

Thyroxine 100mcg OD

Assessment

Unstable Angina/ Non ST Elevation MI

Plan

1. Booked for a stress sestamibi 8/12/03
2. Started on aspirin and lipid lowering agent.
3. Will hold off beta blockers until stress test performed to allow for an adequate study
4. Started on lasix. Will need to assess long term need based on EF and follow up exam.

Thank you

[REDACTED]
Med PHO
4152 1222

NURSE

0172

In relation to P's response to HRC dated 01/06/04, para 4 states that the medical team made a diagnosis of "unstable angina", which doctor made the diagnosis and on what information did he/she base the diagnosis? i.e. given that P have also stated that "... *the ECG changes in Mrs Connally's initial ECG's (as compared to previous ECGs in 2002), an elevated troponin on arrival which increased in value 8.5 hours later, but with no rise in creatinine kinase. The raised troponin value is evidence of minor heart muscle damage. The combination of Mrs Connally's past history, prolonged chest pain, ECG changes and raised troponin values indicates the diagnosis should have been acute coronary syndrome. Accordingly this lady should have remained in hospital for ongoing observation.*"

Furthermore, para 4 also states, "*The blood was collected and marked urgent with the result checked by Dr Khan and arrangements begun to transfer Mrs Connally for her stress test*". Given the above information supplied by P that the woman was misdiagnosed and should have been kept in for observation, why did Dr Khan make arrangements to transfer her for stress test. It should be noted that one independent adviser stated that the stress test was contraindicated and the other adviser stated that it was not relevant.



MEMORANDUM

To: Karen
Health Rights Commission

Copies to:

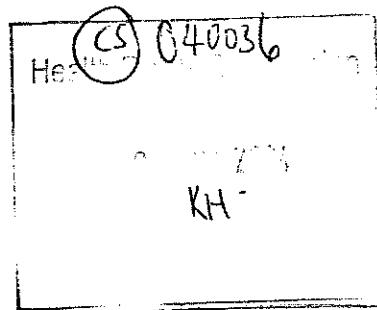
From: Amelia Smalberger
Acting AO Exec Services **Contact No:** 4150 2025
Subject: Medical Records **Fax No:** 4150 2029

File Ref:

Please find Medical Records as discussed by phone on 7 June 2004.

Regards

Amelia Smalberger
Acting AO Executive Services
07/06/04



SURNAME CONNELL Y
GIVEN NAMES DOREEN

UNIT RECORD NUMBER

4
92
50

last attendance

1993

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13

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COPY

CONFIDENTIAL
Medical Records may
not be removed from

IDENTIFICATION SHEET

MEDICARE NUMBER 4083 08746 2		U.R. No.	05	92	41
SURNAME Connally					
GIVEN NAMES Doreen					
DATE OF BIRTH 22-4-36		SEX	Male <input type="checkbox"/>	Female <input checked="" type="checkbox"/>	
ADDRESS					
PHONE No.		WORK			
OCCUPATION Housewife					
ETHNIC ORIGIN Caucasian <input type="checkbox"/> Aboriginal <input type="checkbox"/> T.S.I. <input type="checkbox"/> Other <input type="checkbox"/>					
MARITAL STATUS Single <input type="checkbox"/> Married <input checked="" type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/>					
RELIGION CATHOLIC					
NEXT OF KIN					
SURNAME Connally		GIVEN NAMES George Alexander			
RELATIONSHIP Husband		PHONE No. 561496 WORK			
ADDRESS Lot 6 Moorlands Rd M5299					
HEALTH INSURANCE FUND					
PENSION No.		REPAT No.			
BLOOD GROUP		LMO			
IMMUNIZATIONS		ADDRESS			
YEAR	TYPE	TELEPHONE:			
		LMO			
		ADDRESS			
		TELEPHONE:			
		LMO			
		ADDRESS			
		TELEPHONE:			
ALLERGIES AND DRUG REACTIONS: Nil Known					
0168					

BUNDABERG HOSPITAL EMERGENCY RECORD

Surname CONNELLY	Given Name DOREEN	Date of Birth 22 Apr 34	Sex F
Patient No: 059241	Emerg. No: 03025489	Arrival Date and Time 01 Dec 03 04:48	

Triage Cat	Area	Complaint
2	R1	CHEST PAIN

Allergies:- **NIC**

Triage Notes Developed central chest pain 5/10 @ 0330hrs - radiating up to jaw and through to her back - Called ambulance - who stated pain was 5/10 DIA \rightarrow gave client 1/4 Aspirin ↓ pain to 0/10. Completely pain free 0/10 to DEM.

TRIAGE RN Printed Name/Stamp 2bry Signature 2bry

NURSING NOTES

118

12-01-03 6:20pm

CLARITY: -----
COLOR: LT. YELLOW
GLU NEGATIVE
BIL NEGATIVE
KET NEGATIVE
SG 1.010
BLD NEGATIVE
PH 5.5
PRO NEGATIVE
URO 0.2 E.U./dL
NIT NEGATIVE
LEU* TRACE

WARD TEST LIQUID.

WEIGHT:-

MEDICATION ORDERS

Bundaberg

..Hospital

-- ID ----- SEX -- UR NO --
CONNELLY F 05924
DOREEN [REDACTED] 22-04-19[REDACTED]
BUNDABERG 4670
Ph (H) [REDACTED]
Ph (B)
CATHOLIC HOME DUTI[REDACTED]

CONTINUATION SHEET

Bundaberg

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**Bundaberg Hospital
CONNELLY
DOREEN**

SEX
F

UR NO
059241

22-04-1934

M

SPECIFIC OBSERVATIONS

Ph (H)

Ph(B)

Catholic, nec



HOME DUTIES

100% KODAK COLOR

- FINGERS/TOES - Colour, temp., movement, swelling, pain, numbness, Remarks
 - URINE - Vol, colour, reaction, SG, Albumen, Blood, sugar, bile, Remarks

OBSERVATIONS RECORDED: DRAFTED INDEXED SERIALIZED FILED

FINGERS/TOES

OTHER

INDICATE OBSERVATIONS IN SEPARATE COLUMNS

BUNDABERG HOSPITAL EMERGENCY RECORD

MEDICATION ORDERS

BUNDABERG HOSPITAL EMERGENCY RECORD

Surname CONNELLY	Given Name DOREEN	Date of Birth 22 Apr 34	Sex F
Patient No: 059241	Emerg. No: 97003590	Arrival Date and Time 22 Sep 97 11:48	

Triage Cat	Area	Complaint
4	WR	FB R EYE

Allergies:- NIC

Immunisation Status:-

Triage Notes In the park yesterday 25 degree
been some elevation

TRIAGE RN Printed Name/Stamp N. Enyer Signature

WARD TEST LIDING.
1920-1921

WEIGHT

MEDICATION ORDERS

Bundaberg

Hospital

059241

CONNELLY

DOREEN

F

22/04/1984

BUNDABERG

4670

GEORGE CONNOLLY, HUSBAND

CONTINUATION SHEET

DATE AND TIME	HISTORY, EXAMINATION AND TREATMENT
18/6/93. 16-30hrs	Nausea Vomiting <i>gastroenteritis</i> . 59 y old ♀ pres = Hx chest pain. Began in a.m. better now. Scop "lethargy". <u>(BP) 110/70</u> <u>(P) 78</u> <u>(T) 36°</u> <u>(R) 22.</u> "Not mot sailing well" (!). No anorex in earthy/exercise. Feels need to sit down all the time but denies dizziness. No fever. /cough / VRTI. 1x episode of vomiting - water. Central chest pain - vague in nature. Radiates to back. Not to arms / neck. PMHx: hypothyroidism - took self off tablets! Past F/G: <i>kwashiorkor</i> : ex infarcts int + ant. ? how old. → NO ST changes.
	For: CE. FRE TFT. Admit <i>Perry</i>
15/3/94. 09-00hrs	Patient woke this morning with back pain <i>gastroenteritis</i> . 59 yo ♀ Gradual onset low back pain yesterday worse this morning. No radiation of pain Able to walk today. No trauma One similar episode 10 years ago after lifting injury. 0153

Bundaberg HOSPITAL

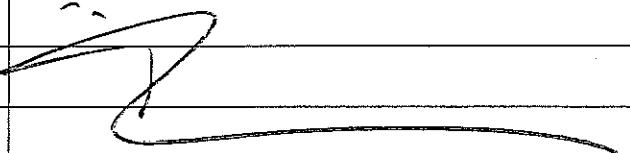
059241
CONNELLY
DOREEN

F
22/04/1934

OUTPATIENT NOTES

BUNDABERG
GEORGE CONNOLLY, HUSBAND

4670

DATE	PROGRESS NOTES
10 SEP 1933	MEDICAL BP 130/90 wgt 75.05 kg.
	(1) DMT approx 1/4 mg. r. This recovery
	(2) Thyroid low also - A left E & sym 7/5 28/2 N. A 7/4 a day.
	A thyroid 1/4 mg Iodine 60mg Agrum 1/4 Cough pains 1 or 2 + /day. Limited breath capabil. 15. M. Now N/I for 8 can walk 1/2 M. side foods & drink but 6/2 H.D. - excess weight
	(3) Mouth patch. (4) Eyes 2 clams long protrud. No back problems as WR. Head and
	AB - bp - M ✓
	ear - ear drops worked.
	CT
	
	0150

BIBBLE HOSPITAL	Surname CONNOLLY U.R. No 059211
PHYSIOTHERAPY RECORD	Given Names DOREEN
	Sex F D.O.B. 22.4.34
	(Affix Patient Identification Label Here)

ADDRESS	BIBBLE		
TELEPHONE: Home	Work		
OCCUPATION DR WHITTINGHAM	DATE REFERRED 15.3.94		
M.O. HOME DUTIES	WARD	DUTS.	
DR. APPOINTMENT NO	PRIOR ATTENDANCES		
COMPENSATION BENEFITS NO	HEALTH INSURANCE Y	N	
CONDITION FOR WHICH REFERRED	SPECIFIC DIAGNOSIS HCC (Y)		
REQUEST			

CARDIAC PACEMAKER: YES NO

OTHER PRECAUTIONS:

DATE	ASSESSMENT AND TREATMENT
15.3.94	59 yr old lady with insidious onset of LBP 14/3/94
	G-H = angina
	Meds: anginine
	WT stable.
	XR: OA LI-2
	<u>Naprosyn ceased</u>
	OIE:
	large abdomen
	RDM Lx-Sx sp.
	F JV LF <input checked="" type="checkbox"/> JV
	E JV <input checked="" type="checkbox"/> JV
	C JV S JV
	OPI & LI → S III JV
	Given mobility + strengthening ex. program
	DIC
	T-walks

QUEENSLAND HEALTH PATHOLOGY AND SCIENTIFIC SERVICES

QHPS-Bundaberg Hospital
P.O.Box 34
Bundaberg, QLD, QLD 4670
07-41502550
07-41512539
Fax

Patient Location	Emergency Department (BNH)	UR No	BN059241	IS	4
Consultant	Keil, Naldo E (BNH)	Name	CONNELLY		
Req. Officer	Dr Lipson Sisiolo Bundaberg Hosp Bourbong St Bundaberg Qld 4670	Given Name	Doreen	Sex	F
		DOB	22-Apr-1934	Age	69 years
		Patient Address	[REDACTED]		
			Bundaberg		4670

Time Collected 03:45 05:00
 Date Collected 19 Sep 01 Dec
 Time Registered 04:26 05:21
 Date Registered 19 Sep 01 Dec
 Year 2002 2003
 Lab No 107679131 149221954

			Units	Ref Range
Haemoglobin	141	130	g/L	(115 - 160)
White Cell Count	9.4	8.6	$\times 10^9/L$	(4.0 - 11.0)
Platelets	297	283	$\times 10^9/L$	(140 - 400)
Haematocrit	0.42	0.39		(0.33 - 0.47)
Red Cell Count	4.77	4.39	$\times 10^{12}/L$	(3.80 - 5.20)
MCV	89	88	fL	(80 - 100)
Neutrophils	7.32	5.65	$\times 10^9/L$	(2.00 - 8.00)
Lymphocytes	1.50	1.82	$\times 10^9/L$	(1.00 - 4.00)
Monocytes	0.41	0.77	$\times 10^9/L$	(0.10 - 1.00)
Eosinophils	0.14	0.27	$\times 10^9/L$	(< 0.60)
Basophils	0.02	0.09	$\times 10^9/L$	(< 0.20)

WD 10

ROUTINE

HAEMATOLOGY

Dr N Buxton
Director of Pathology
Tel. 07-49207301

Dr H Krause
Staff Pathologist
Tel. 07-49207303

Please discard any previous
HAEMATOLOGY ROUTINE
report of the same page number
printed before : 05:22 01 Dec 2003

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MR
22

QUEENSLAND HEALTH PATHOLOGY AND SCIENTIFIC SERVICES

QHPS, Bundaberg Hospital
P.O.Box 34, Bundaberg, QLD, QLD 4670
07-41502530
07-41512559
ph
fax

Patient Location	Emergency Department (BNH)	UR No	BN059241	IS	4
Consultant	Keil, Naldo E (BNH)	Name	CONNELLY		
Req. Officer	Dr Lipson Sisiolo Bundaberg Hosp Bourbong St Bundaberg Qld 4670	Given Name	Doreen	Sex	F
		DOB	22-Apr-1934	Age	69 years
		Patient Address	[REDACTED]		
			Bundaberg		4670

Time Collected	03:45	05:00	Units	Ref Range
Date Collected	19 Sep	01 Dec		
Time Registered	04:26	05:21		
Date Registered	19 Sep	01 Dec		
Year	2002	2003		
Lab No	107679131	149221954		
INR	0.9	1.0		
Prothrombin Time	11	12	s	(8 - 14)
APTT	23	25	s	(25 - 38)
Fibrinogen	5.4	5.2	g/L	(1.5 - 4.0)
D-Dimer	< 1		titre	(< 1)
Platelets	297	283	$\times 10^9/L$	(140 - 400)

Therapeutic Ranges

Heparin therapy

APTT 60 - 90

Warfarin therapy

	Recommended INR range for clinical state
Atrial fibrillation (prophylaxis)	2.0 - 3.0 (Strict control necessary)
Prosthetic heart valves (prophylaxis)	2.5 - 3.5
Venous and arterial thrombosis (treatment)	2.0 - 3.0

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Dr N Buxton
Director of Pathology
Tel. 07-49207301

Dr H Krause
Staff Pathologist
Tel. 07-49207303

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HAEMATOLOGY GENERAL COAGULATION
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printed before : 06:09 01 Dec. 2003.

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1
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MR
22

QUEENSLAND HEALTH PATHOLOGY AND SCIENTIFIC SERVICES

QHPS: Bundaberg Hospital
P.O.Box 34
Bundaberg, QLD, QLD 4670
ph. 07-41502530
fax 07-41512539

Patient Location	10 - Medical (BNH)	UR No	BN059241	IS	4
Consultant	Strahan, T. Martin(BNH)	Name	CONNELLY		
Req. Officer	Dr T. Martin Strahan Bundaberg Hospital Bourbong St Bundaberg QLD 4670	Given Name	Doreen	Sex	F
		DOB	22-Apr-1934	Age	69 years
		Patient Address	[REDACTED]	Bundaberg	4670

Time Collected	03:45	05:00	08:45	12:30	07:40		
Date Collected	19 Sep	01 Dec	01 Dec	01 Dec	02 Dec		
Time Registered	04:26	05:21	09:08	14:05	08:56		
Date Registered	19 Sep	01 Dec	01 Dec	01 Dec	02 Dec		
Year	2002	2003	2003	2003	2003		
Lab No	107679131	149221954	149221255	149221062	149286065	Units	Ref Range
Sodium	133	139				mmol/L	(135 - 145)
Potassium	4.5	4.2				mmol/L	(3.2 - 4.5)
Chloride	106	107				mmol/L	(100 - 110)
Bicarbonate	21	25				mmol/L	(22 - 33)
Anion Gap	6	7				mmol/L	(4 - 13)
Osmolality (Calculated)	269	277				mmol/kg	(270 - 290)
Glucose	6.8	6.1				mmol/L	(3.0 - 7.8)
						(Fasting)	3.0 - 6.0)
Urea	5.5	3.6				mmol/L	(3.0 - 8.0)
Creatinine	0.09	0.09				mmol/L	(0.05 - 0.10)
Urea/Creat	64	39					(40 - 100)
Urate	0.29					mmol/L	(0.15 - 0.45)
Protein (Total)	74	65				g/L	(62 - 83)
Albumin	41	36				g/L	(33 - 47)
Globulin	33	29				g/L	(25 - 45)
Bilirubin (Total)	< 4	12				umol/L	(< 20)
Alkaline Phosphatase	109	90				U/L	(30 - 120)
Gamma-GT	18	19				U/L	(< 50)
Alanine Transaminase	20	28				U/L	(< 40)
Aspartate Transaminase	21	23				U/L	(< 35)
Lactate Dehydrogenase	289					U/L	(110 - 250)
Creatine Kinase	210	121	122	128	123	U/L	(< 160)
cTroponin T	ND	0.52		0.69		ug/L	(< 0.03)
Calcium	2.31					mmol/L	(2.15 - 2.60)
Calcium (Alb. Corr.)	2.29					mmol/L	(2.15 - 2.60)
Phosphate	0.57					mmol/L	(0.70 - 1.40)

Note: ND = Not detected.

Comments

05:00 01-Dec-03 Results phoned to ward
Lab No 149221954

CHEMICAL PATHOLOGY

Dr N Buxton Director of Pathology Tel. 07-49207301	Dr H Krause Staff Pathologist Tel. 07-49207303	Please discard any previous CHEMICAL PATHOLOGY GENERAL report of the same page number printed before : 12:04 02 Dec 2003	Page 1
Copy sent to:			

MR
23

0144

QUEENSLAND HEALTH PATHOLOGY AND SCIENTIFIC SERVICES

QHPS-Bundaberg Hospital
P.O.Box 34
Bundaberg, QLD, QLD 4670
ph 07-41502530
fax 07-41512539

Patient Location	10 - Medical (BNH)	UR No	BN059241	IS	4
Consultant	Keil, Naldo E (BNH)	Name	CONNELLY		
Req. Officer	Dr Lipson Sisiolo Bundaberg Hosp Bourbong St Bundaberg Qld 4670	Given Name	Doreen	Sex	F
		DOB	22-Apr-1934	Age	69 years
		Patient Address	[REDACTED]		
			Bundaberg		4670

Time Collected 05:00
 Date Collected 01 Dec
 Time Registered 05:21
 Date Registered 01 Dec
 Year 2003
 Lab No 149221954

Free T4 20
 TSH 1.4

	Units	Ref Range
Free T4	pmol/L	(9 - 23)
TSH	mU/L	(0.3 - 5.0)

Comments

05:00 01-Dec-03 Consistent with euthyroid state.
 Lab No 149221954

CHEMICAL PATHOLOGY

Dr N Buxton Director of Pathology Tel. 07-49207301	Dr H Krause Staff Pathologist Tel. 07-49207303	Please discard any previous CHEMICAL PATHOLOGY THYROID FUNCTION report of the same page number printed before : 12:04 02 Dec 2003	Page 1 0143 MBR 23
<i>[Handwritten Signature]</i>			

QUEENSLAND HEALTH PATHOLOGY AND SCIENTIFIC SERVICES

Unit 5-B Bundaberg Hospital
P.O. Box 34
Bundaberg QLD, QLD 4670
07-41502530
07-41512539
fax

Patient Location	Emergency Department (BNH)	UR No	BN059241
Consultant	Nydam, Kees (BNH)	Name	CONNELLY
Req. Officer	Dr Zaw Min Bundaberg Hospital Bourbong St Bundaberg QLD 4670	Given Name	Doreen
		DOB	22-Apr-1934
		Patient Address	Bundaberg 4670

Time Collected	03:45		
Date Collected	19 Sep		
Time Registered	04:26		
Date Registered	19 Sep		
Year	2002		
Lab No	107679131	Units	Ref Range
Specimen type	Blood		
C-Reactive Protein	6.2	mg/L	(< 5.0)

P
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C
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Y

Dr N Buxton Director of Pathology Tel. 07-49207301	Dr H Krause Staff Pathologist Tel. 07-49207303	Please discard any previous CHEMICAL PATHOLOGY PROTEINS report of the same page number printed before : 05:15 19 Sep 2002	Page 1 0142 MR 23
<i>Copy sent to:</i>			

HOSPITAL

059241

CONNELLY

DOREEN

F

22/04/1934

BACTERIOLOGY

BUNDABERG

GEORGE CONNOLLY, HUSBAND

4670

(Affix Patient Identification Label Here)

11.

10.

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1151

MICROBIOLOGY

10

SPECIMEN:

Cerebrospinal Fluid

CLINICAL NOTES:

 Submucous

Sputum

Blood Culture/s

Faeces

Swab/Fluid from
site

Other (specify)

Medical Officer:

[Signature]

Collection Date: 21/04/34 Time: a.m./p.m.

059241

CONNELLY

DOREEN

F

22/04/1934

BUNDABERG

GEORGE CONNOLLY, HUSBAND

4670

ICU

DATE REQUESTED:

MICROSCOPIC EXAMINATION:

Leucocytes : *Scant*Erythrocytes : *+*Epithelial cells : *-*Trichomonas vaginalis : *-*Yeast : *-*Other (specify) : *-*

	GRAM STAIN				PENICILLIN	ERYTHROMYCIN	METHICILLIN	CHLORAMPHENICOL	TETRACYCLINE	AMPICILLIN	SULPHAPURIMIDE	TRIMETHOPRIM	GENTAMICIN	CARBENICILLIN	TICARCILLIN	NIL	
	POSITIVE	Bacilli	Cocci	NEGATIVE													
Leucocytes																	
Erythrocytes																	
Epithelial cells																	
Trichomonas vaginalis																	
Yeast																	
Other (specify)																	

O/C/P

CULTURE:

NO SIGNIFICANT GROWTH

+ SKIN FLORA

COMMENT:

Q.H. 71A

Reported by:

S - Sensitive

R - Resistant

Date: 22/04/1934

BUNDABERG BASE HOSPITAL
Department of Medical Imaging - Patient Report

Patient Name: CONNELLY DOREEN
UR Number: 059241 DOB: 22 APR 34
Series Number: 1 Sex: F
Attend.Date: 01 DEC 03
Current Date: 08 DEC 2003

Examinations: Chest
Referred: DR I SISIOLO
Location: ED

CLINICAL HISTORY:

CHEST PAIN

CHEST:

The heart and mediastinal contours are normal. The pulmonary vasculature is normal. The lungs and pleural spaces are clear with no evidence of segmental consolidation or collapse.

DS:3208

DR ROBERT JONES

DICTATED-BUT NOT READ



Bundaberg HOSPITAL

X-RAY, ULTRASOUND, C. T. SCAN.

059241
CONNELLY
DOREEN

F
22/04/1994

BUNDAERG
GEORGE CONNOLLY, HUSBAND

4670

(Print Patient Identification Label Here)

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1.

**BUNDABERG HEALTH SERVICE
DEPT MEDICAL IMAGING**

P.O. BOX 34
BUNDABERG 4670
Ph (071) 521 222
Fax (071) 531 779

CONNELLY Doreen (F) DOB. 22/4/34

LUMBAR SPINE 15/3/94

There is a decrease in the normal lumbar lordosis with the scoliosis convex to the right centered at L3. The vertebral body heights have been maintained however there is narrowing of the intervertebral disc at most levels although most marked at L1/2, L 4/5 and L5/S1. Osteophytic lipping of the vertebral end plates is present at most levels. Degenerative changes are present in the lumbar posterior facet joints.

UR: 059241 DR J MITCHELL

:mp

17/3/94

0137

Bundaberg HOSPITAL

X-RAY, ULTRASOUND, C. T. SCAN.

059241
CONNELLY
DOREEN

F
22/04/1934

BUNDABERG
GEORGE CONNOLLY, HUSBAND

4670

(AFFIX Patient Identification Label Here)

11.

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2.

1.

(AFFIX FIRST REPORT HERE)

**BUNDABERG HEALTH SERVICE
DEPT MEDICAL IMAGING**

P.O. BOX 34
BUNDABERG 4670
Ph (071) 521 222
Fax (071) 531 779

CONNELLY Doreen (F) DOB. 22.4.1934

CHEST X-RAY 19.6.93

The heart size is normal. No focal collapse or consolidation has been demonstrated.

UR.

:kk

DR. J. MITCHELL

22.6.93

Jane

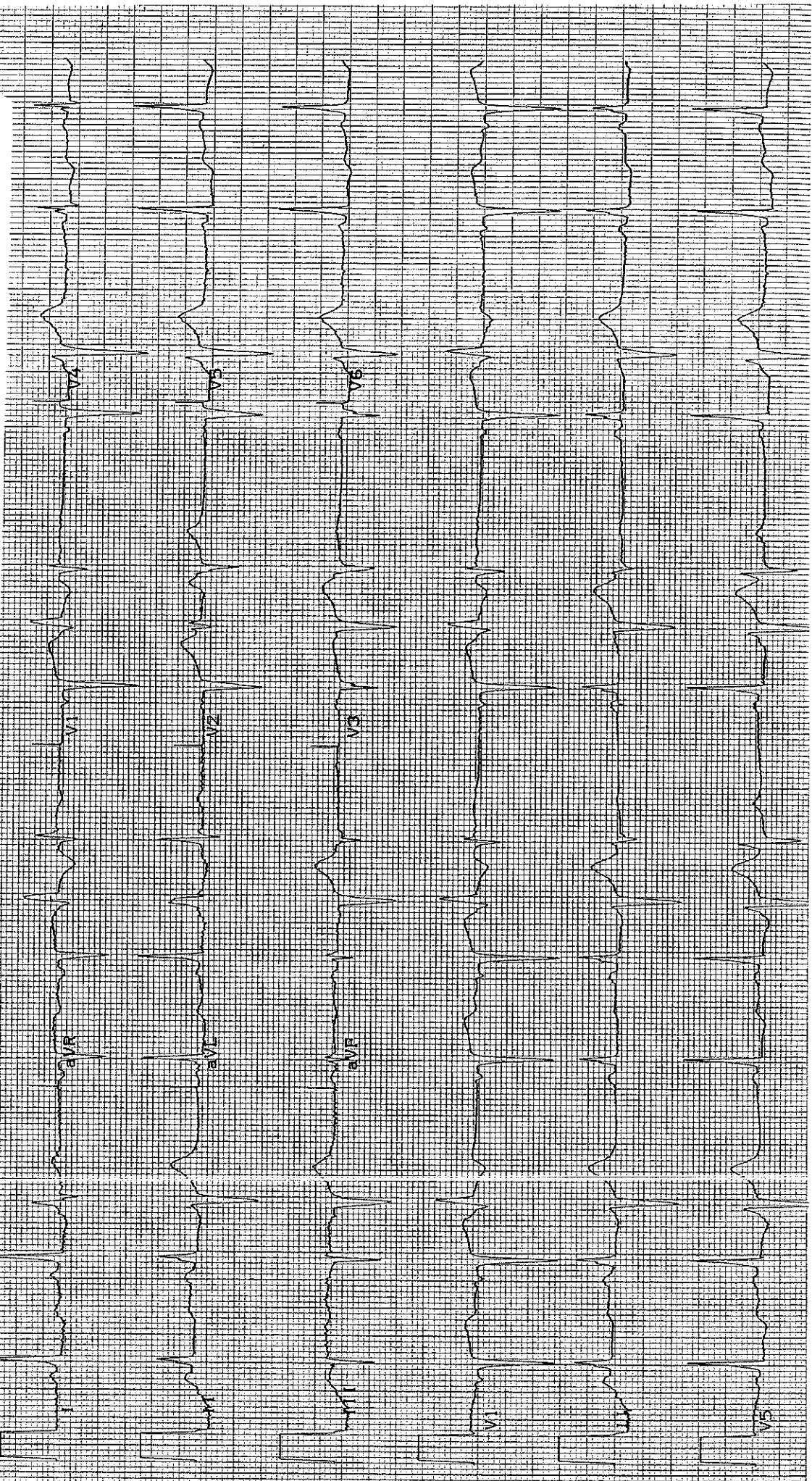
MED: 25 m/s
 IODIN: 100 mg
 AGE: 40 yrs
 SEX: F
 LOC: 907B
 PEN: 9206
 Y206
 Race: Room:
 Conn
 CANT NOT RULE OUT SEPTAL INFARCTION
 LEFT VENTRICULAR HYPERTROPHY WITH REPOLARIZATION ABNORMALITY
 NORMAL SINUS RHYTHM WITH PRE-EXCITATION
 ABNORMAL ECG

BUNDABERG HOSPITAL
 CONNELLY
 DOREEN
 [REDACTED] 22-04-1934
 BUNDABERG 4670
 Ph (H) M
 Ph (B)

Preferred by:
 Card: Tech:
 [REDACTED]

BUNNELL
 DOREEN
 [REDACTED]
 CATHOLIC, nec

HOME DUTIES



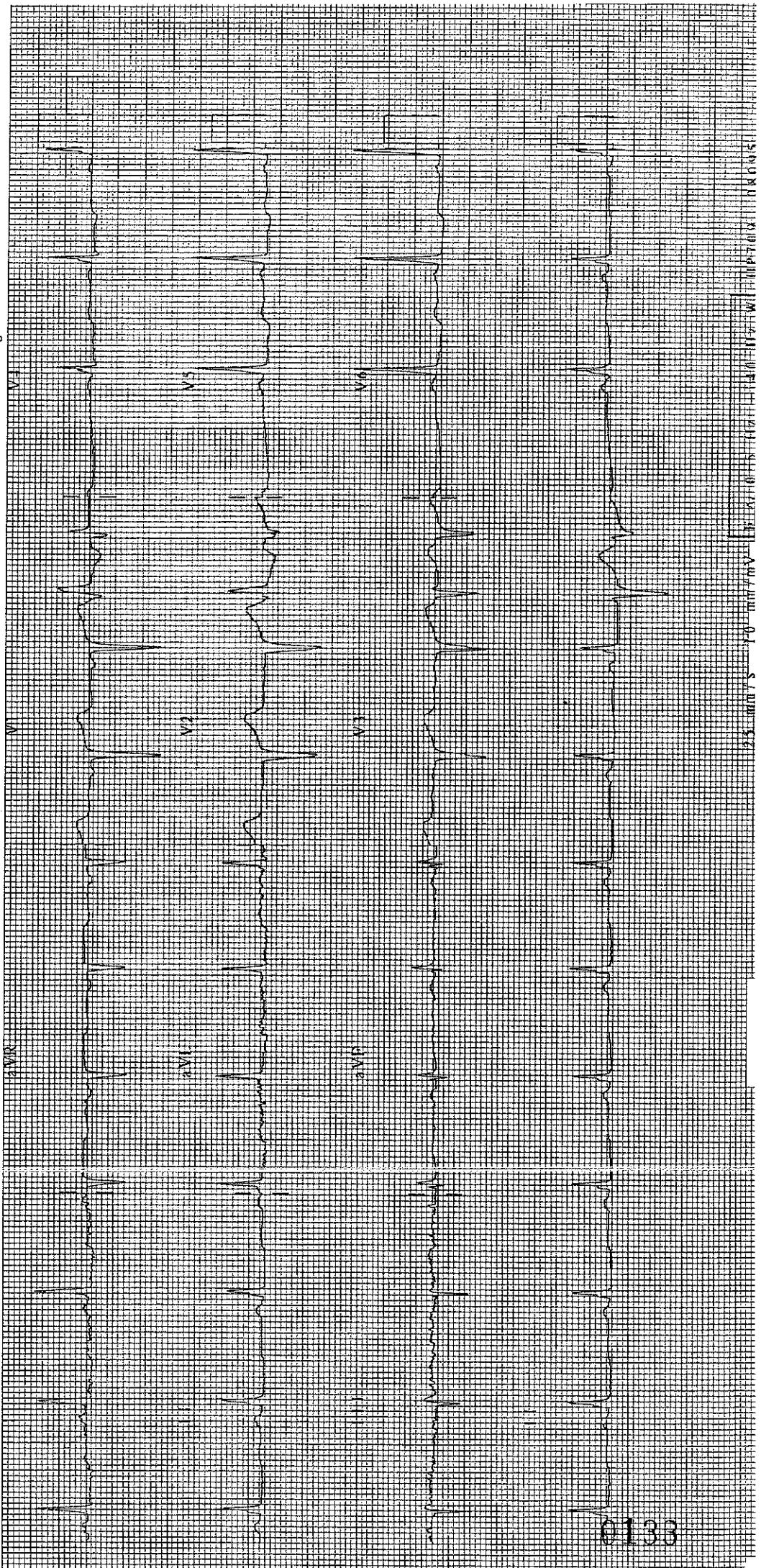
(3)

Connelly
 Rate 76 . AGE NOT ENTERED, ASSUMED TO BE 50 YEARS FOR PURPOSE OF ECG INTERPRETATION
 PR 1.49 . SINUS RHYTHM, RATE 76..... normal P axis, rate
 ORSD 93 . MULTIPLE PREMATURE COMPLEXES, VENT. & SUPRAVEN . short R-R, wide/narrow ORSD
 QT 3.70 . LEFT ATRIAL ABNORMALITY..... P>60ms, <-.15mV VI
 QTc 4.16 . ANTERIOR INFARCT AGE INDETERMINATE..... Q>30ms V2 V3.

--AN--
 P 5.2
 QRS 2.7
 T 1.49

Unconfirmed diagnosis.

- ABNORMAL ECG -



Rate 81 . AGE NOT ENTERED, ASSUMED TO BE 50 YEARS FOR PURPOSE OF ECG INTERPRETATION
 PR 1.39 . SINUS RHYTHM, RATE 81
 QRS 0.1 . MULTIPLE PREMATURE COMPLEXES, VENT & SUPRAVENT
 QT 3.70 . ANTERIOR INFARCT, OLD
 QTc 4.29 . ABNORMAL T, CONSIDER ISCHEMIA, LATERAL LEADS

---Axis---

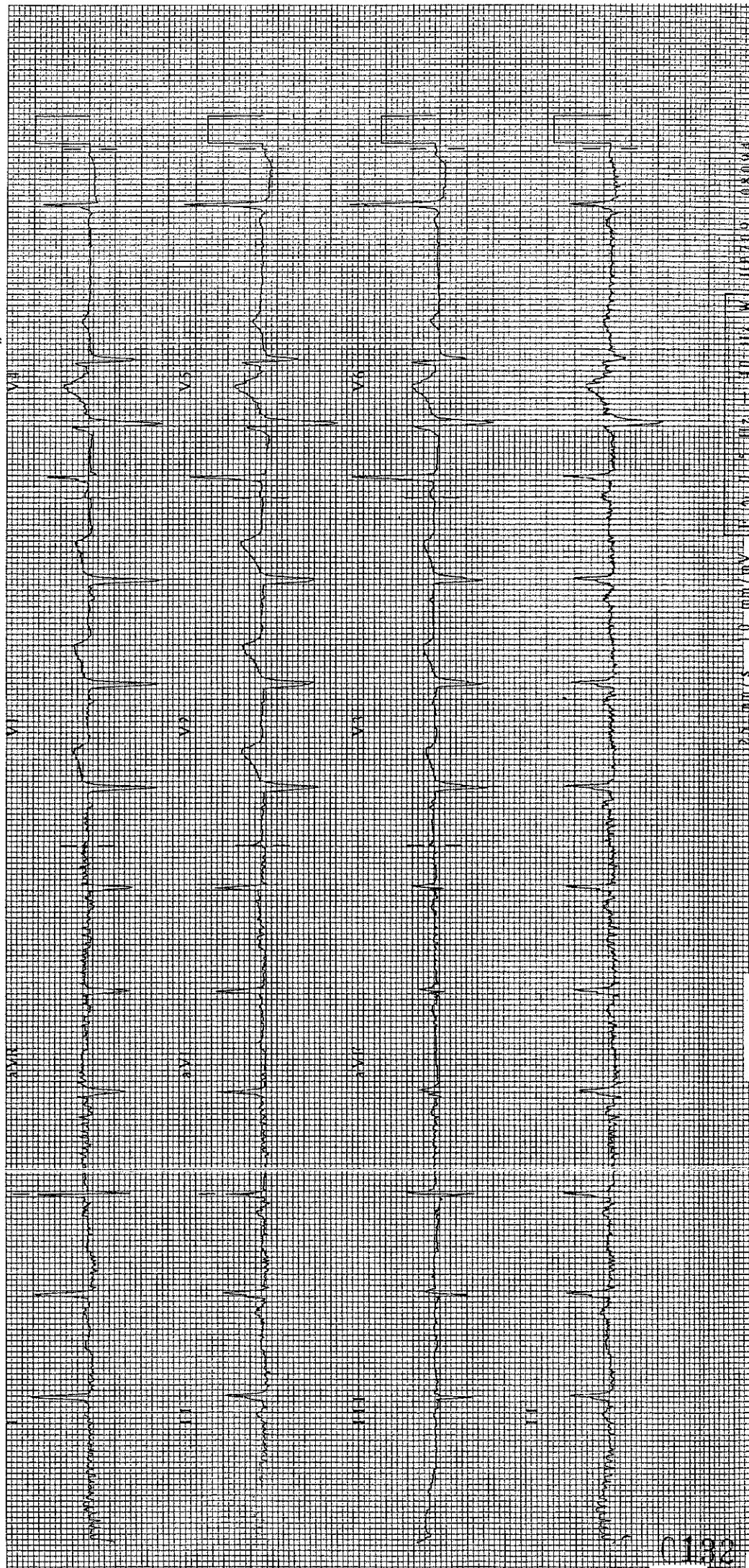
P 9.5

QRS 1.4

T 1.75

- ABNORMAL ECG -

Unconfirmed diagnosis.



CONNELLY
 DOREEN
 059247
 Collector
 Muir Signs
 22-04-1994

21
 22

01-Dec-2003 04:50:48
69 Years

BBH DEPARTMENT OF EMERGENCY MEDICINE

JANELLY
Female

Rate 82 · NORMAL SINUS RHYTHM, RATE 82 ······ normal P axis, PR, rate & rhythm
PR 154 · BORDERLINE LEFT ATRIAL ABNORMALITY ······ P>30mS, <-, 10mV V1
QRS 79 · ANTERIOR INFARCT, AGE INDETERMINATE ······ T neg, Q>30mS, V2-V4
QT 3.81
QTc 4.45

--Axis--

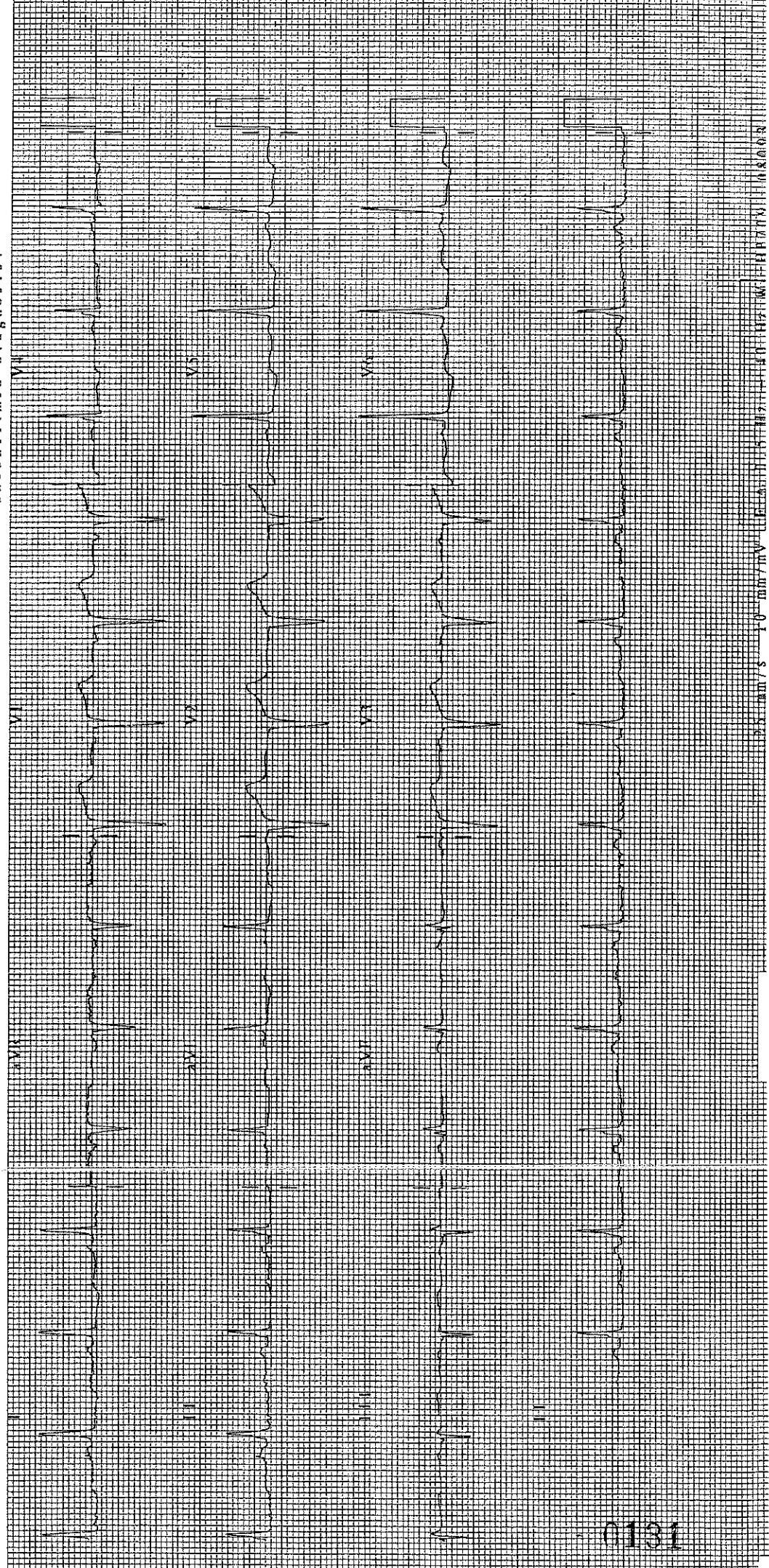
P 5.9

QRS 2.1

T 14.4

Unconfirmed diagnosis.

- ABNORMAL ECG -



2131

Name :

ID : 01-DEC-2003 12:11 BUNDABERG HOSPITAL

25mm/s
500mV
40Hz
Pen 007B
V206

Normal AV
Age 71
Sex Female
Loc Room

VENT RATE 82 BPM
PR INTERVAL 140 ms
QRS DURATION 76 ms
QT QTC 392/457 ms
P-R-T-axes 45-156

NORMAL SINUS RHYTHM WITH FREQUENT PREMATURE FECTICIC COMPLEXES
ANTEROSEPTAL INFARCT, AGE UNDETERMINED
ST & T WAVE ABNORMALITY, CONSIDER ST & T WAVE ABNORMALITY, CONSIDER
ABNORMAL ECG

CONNELLY DOREEN

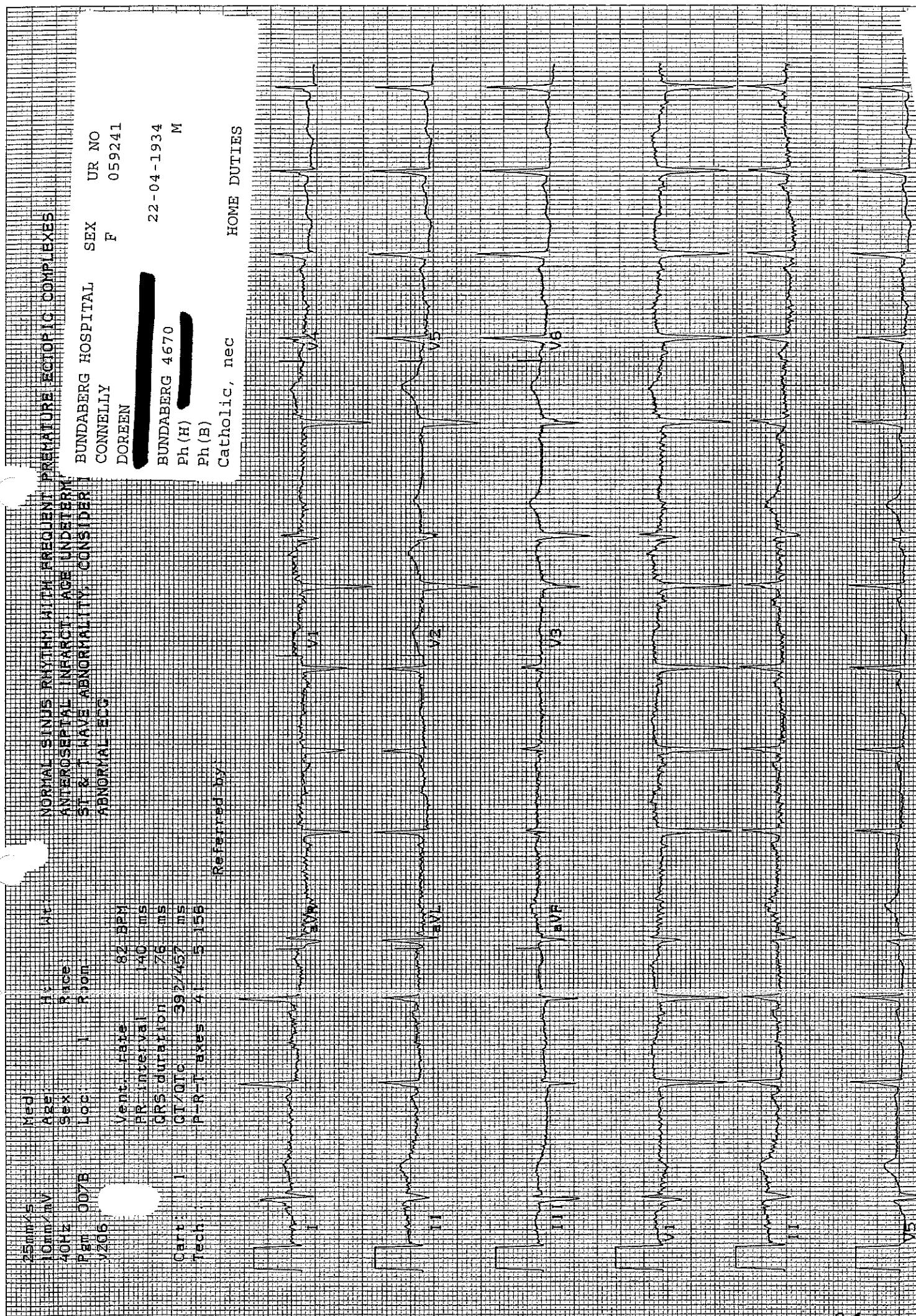
BUNDABERG 4670
Ph (H) [REDACTED]
Ph (B) [REDACTED]

22-04-1934

M

Catholic, nec
HOME DUTIES

Referred by:



Rate 65 . Normal sinus rhythm, rate 65
 PR 158 . Leftward axis.....
 QRSD 90 . High QRS voltage.....
 QT 430 . Probable Inferior infarct.....
 QTc 447 . Abn. R wave progression ('AVM').....
 -Axis--
 P 33
 QRS -16
 T 42

Doreen Connelly

*post 300mg anginine
 6/10 (R) sided auxilla/back
 pain*

- NORMAL ECG -



19-Sep-2002 03:26:02

Doreen
Connelly

BBH DEPT EMERGENCY MEDICINE

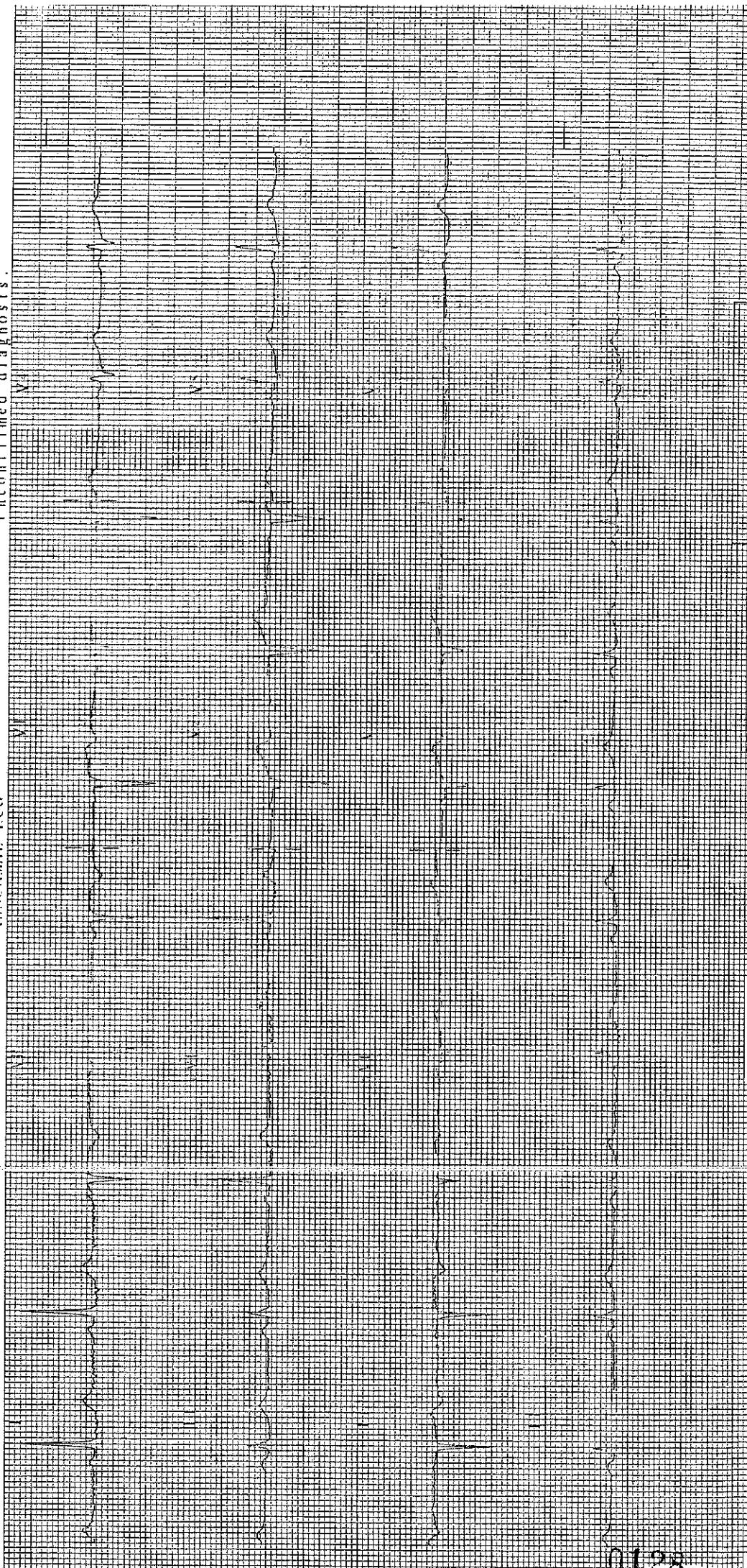
UR: 059241
22/4/2002
Signature

Rate 62 . Normal sinus rhythm, rate 62
PR 1.66 . High QRS voltage
QRS 77 . Consider Inferior infarct
QT 4.26 . Old Anterior infarct
QTc 4.33

---Axis---
P 4.8
QRS -1.4
T 2.7

-- NORMAL ECG --

-- UNCONFIRMED DIAGNOSIS --



CONNELLY, DOREEN

03-JUL-95 13:55 DR T MARTIN STRAHAN

25mm/s
Unif. v.
100Hz
Pen 300mV
125Lm V78
Med: 15cm
Sex: F Race:
Loc: Room:
BP: 20/85
Pulse: 71 BPM
PR Interval: 0.16s
QRS Duration: 0.08s
QT/QTc: 0.00/0.33s
P-R-T axes: +5° B3

CONNELLY
DOREEN
059241
Collector
Must Sign:

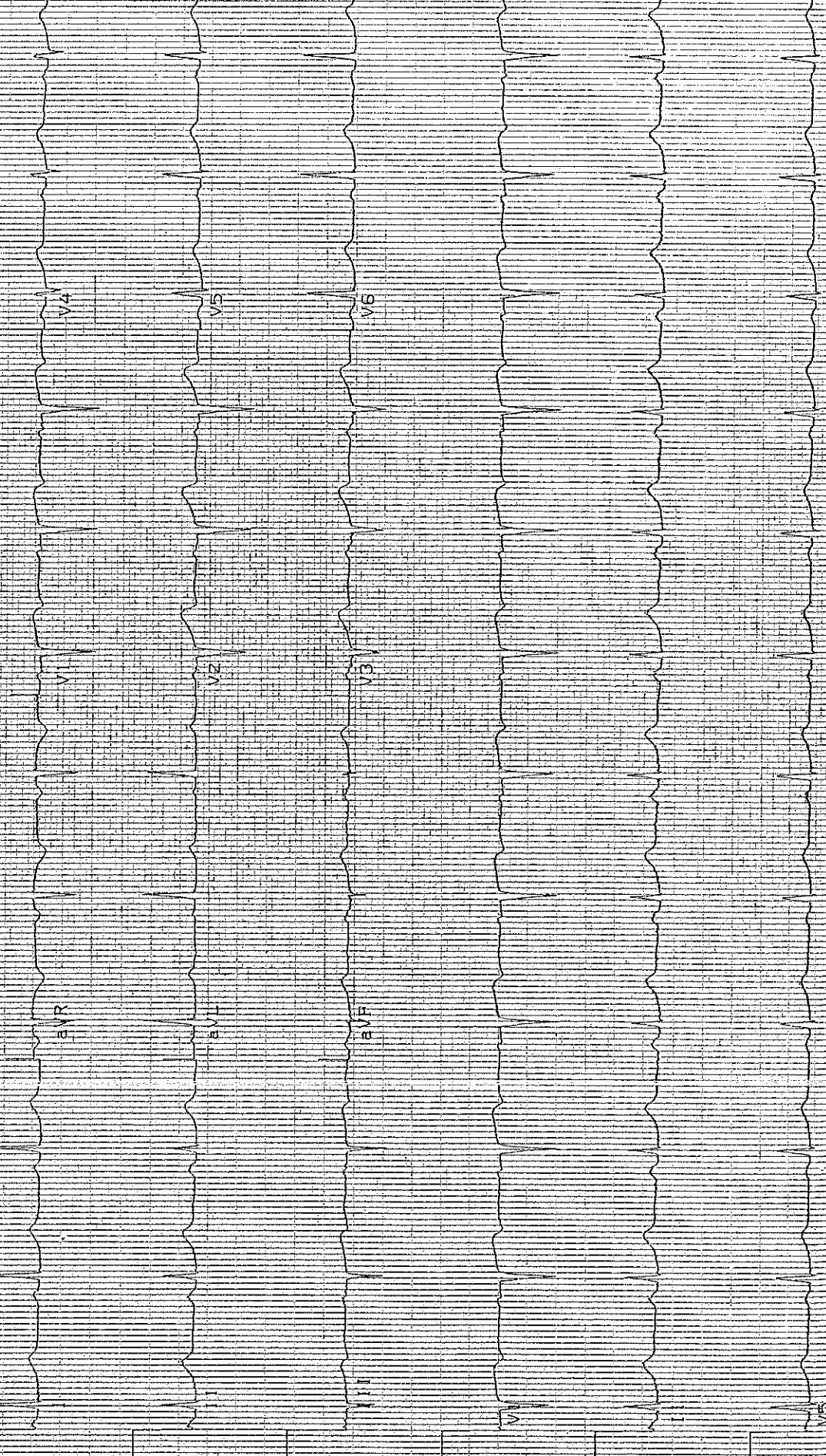
22-04-1934

Referred by: BUNDABERG BASE HOSPITAL

W.M. CONNELLY

Revised by:

W.M. CONNELLY



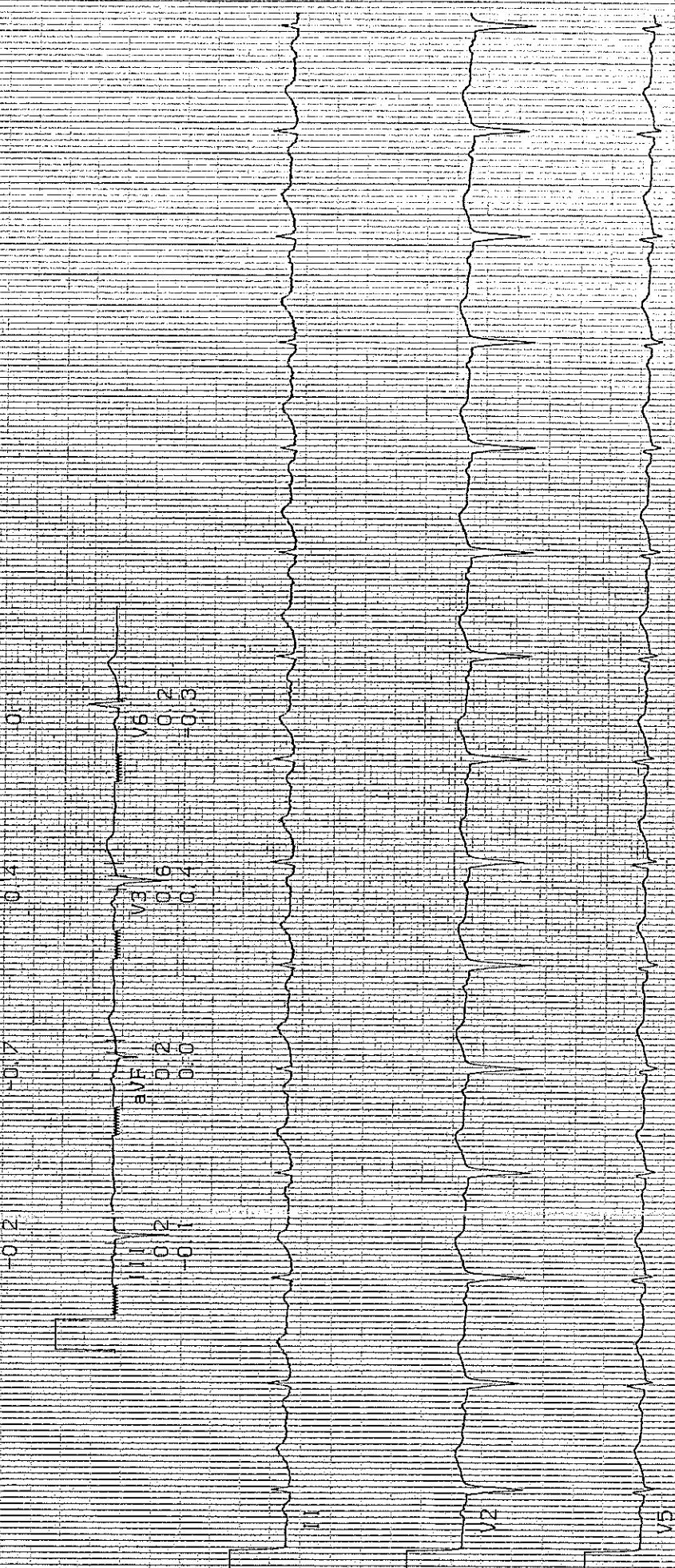
0124

20Hz
10mV/mCONNELLY, DOREEN
ID: 0543
Speed: 0.0km/h
Grade: 0.0%
HR: 859 BPM
BP: 120/85BRUISING
STANDINGCONNELLY
DOREEN
0592411
Collector
Mast Slips

22-04-1934

Measured At
805 Post
(10m/mV)

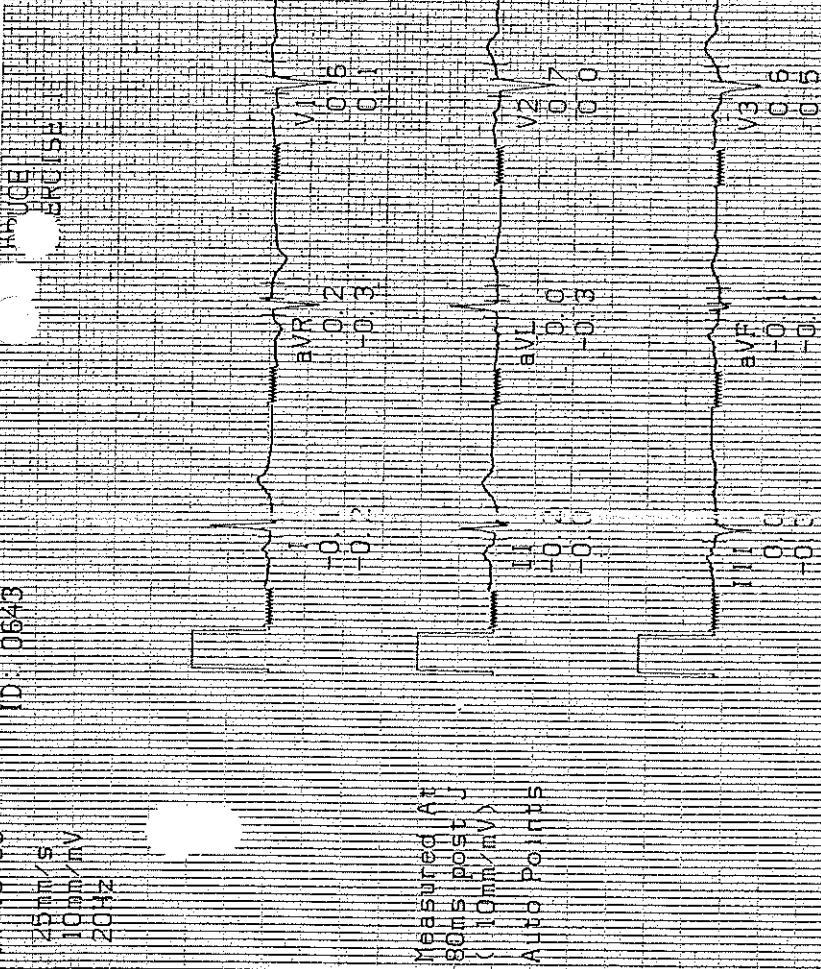
Auto Points

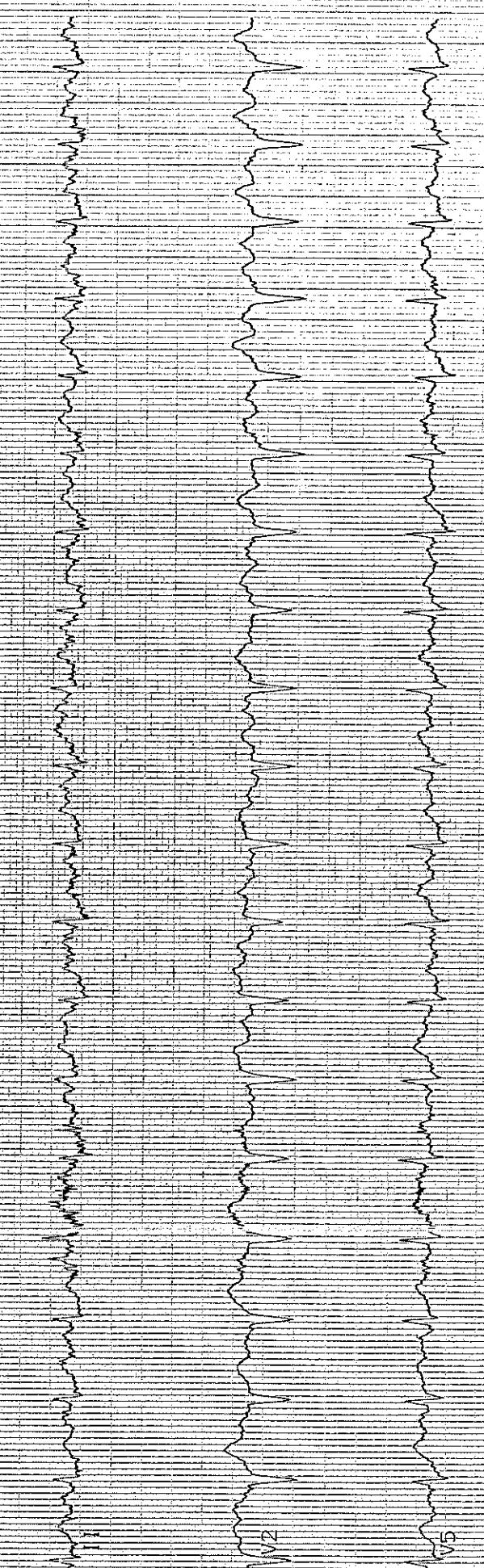
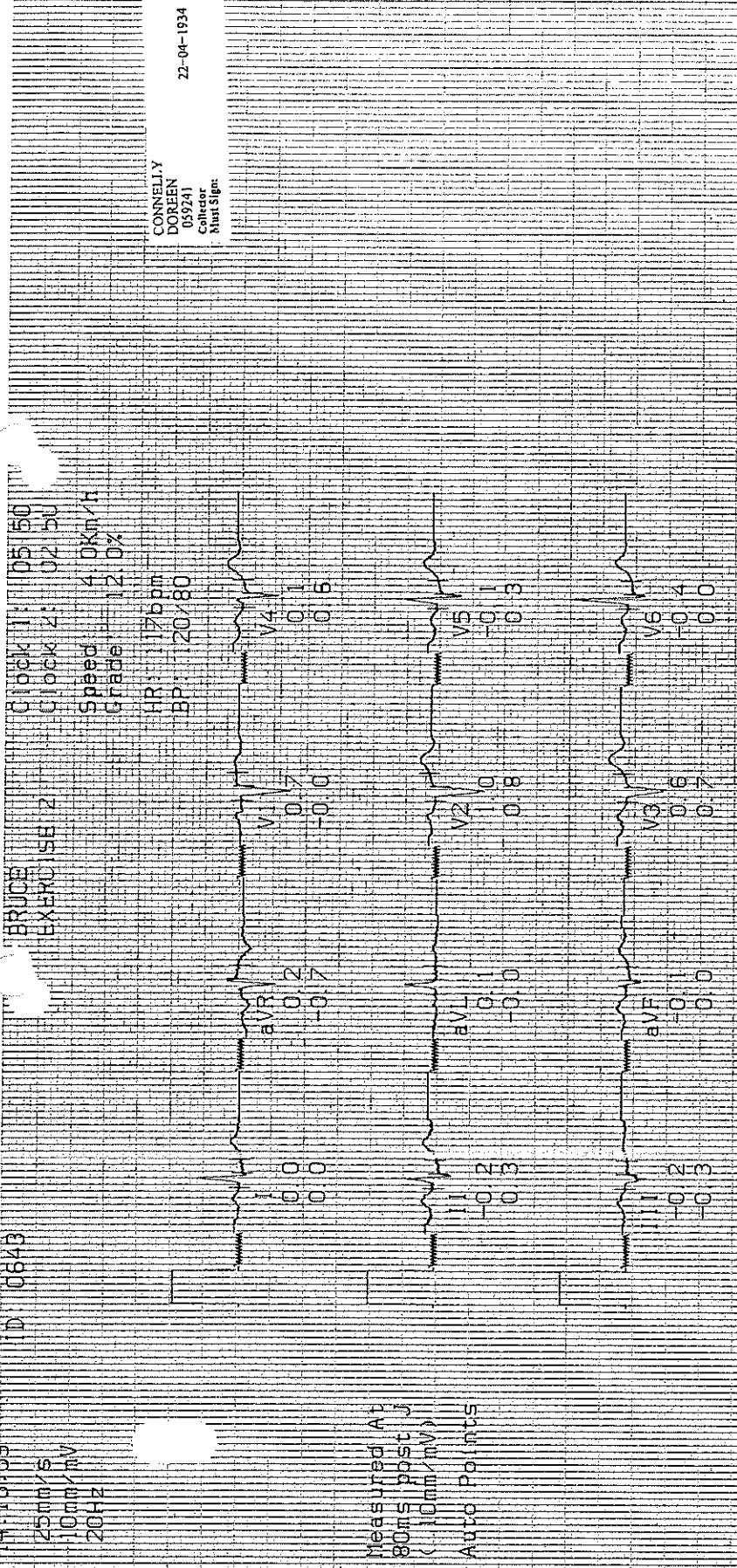


2517/S
1030/NV
2032

ID: 0643

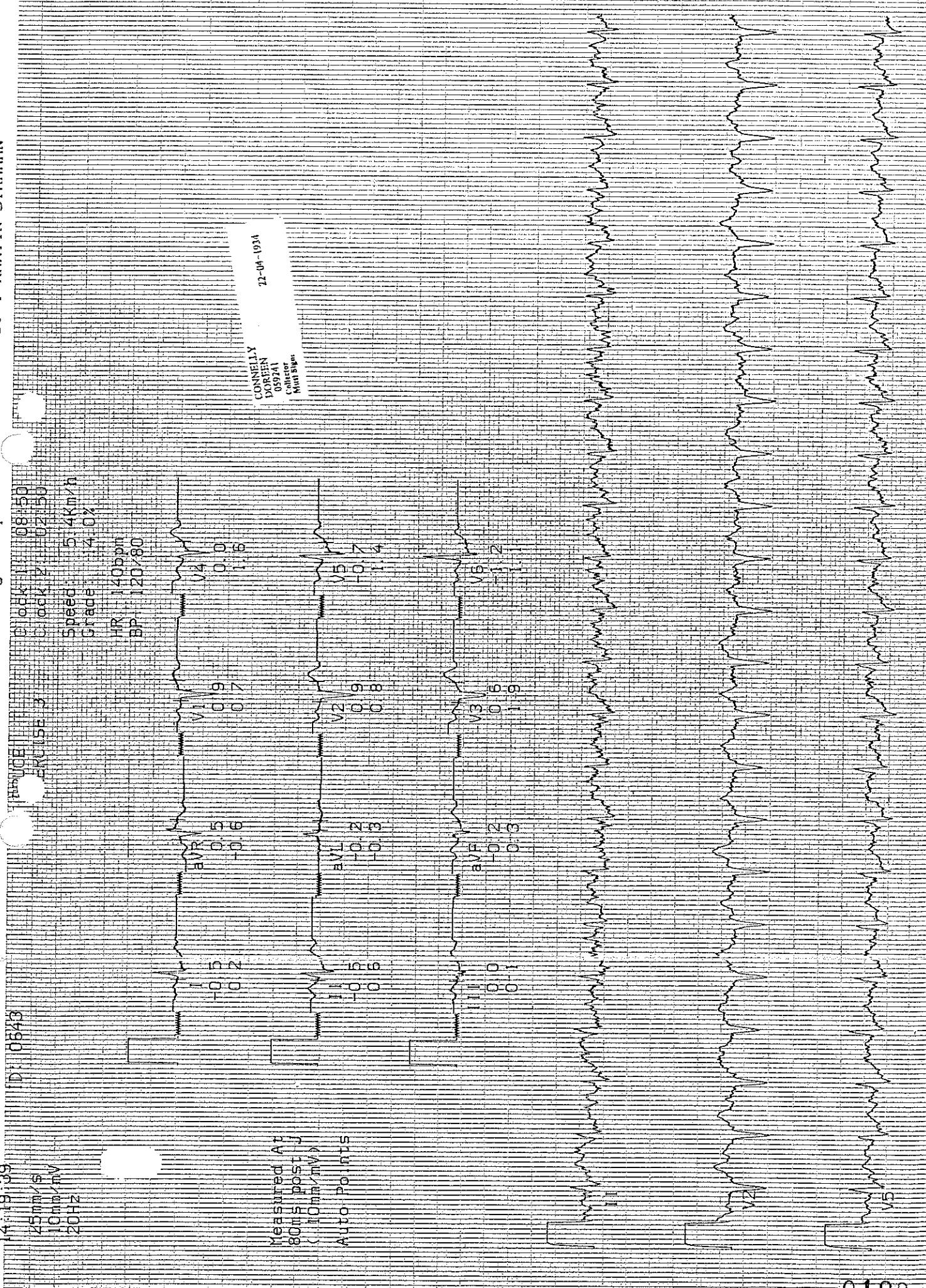
HR: 100 BPM
 BP: 113/85
 Speed: 27 km/h
 Grade: 3.0%
 CONNELLY
 DOREEN
 039241
 Collector
 Run Sign: 22-04-1934





CONNELL, DOREEN

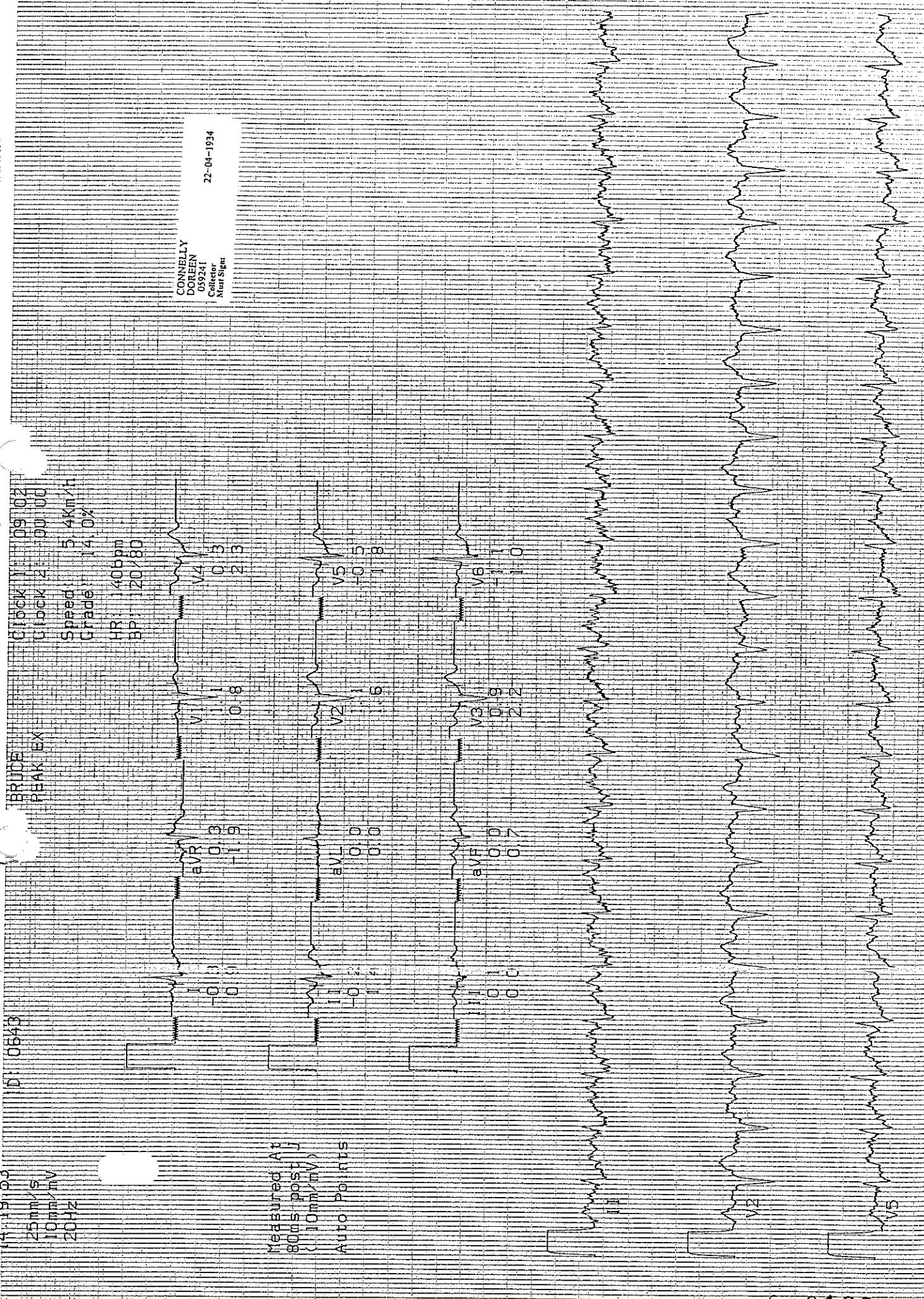
Dr T MARTIN STRAHAN Averages Report



Averages Report

CONNELLY, DOREEN

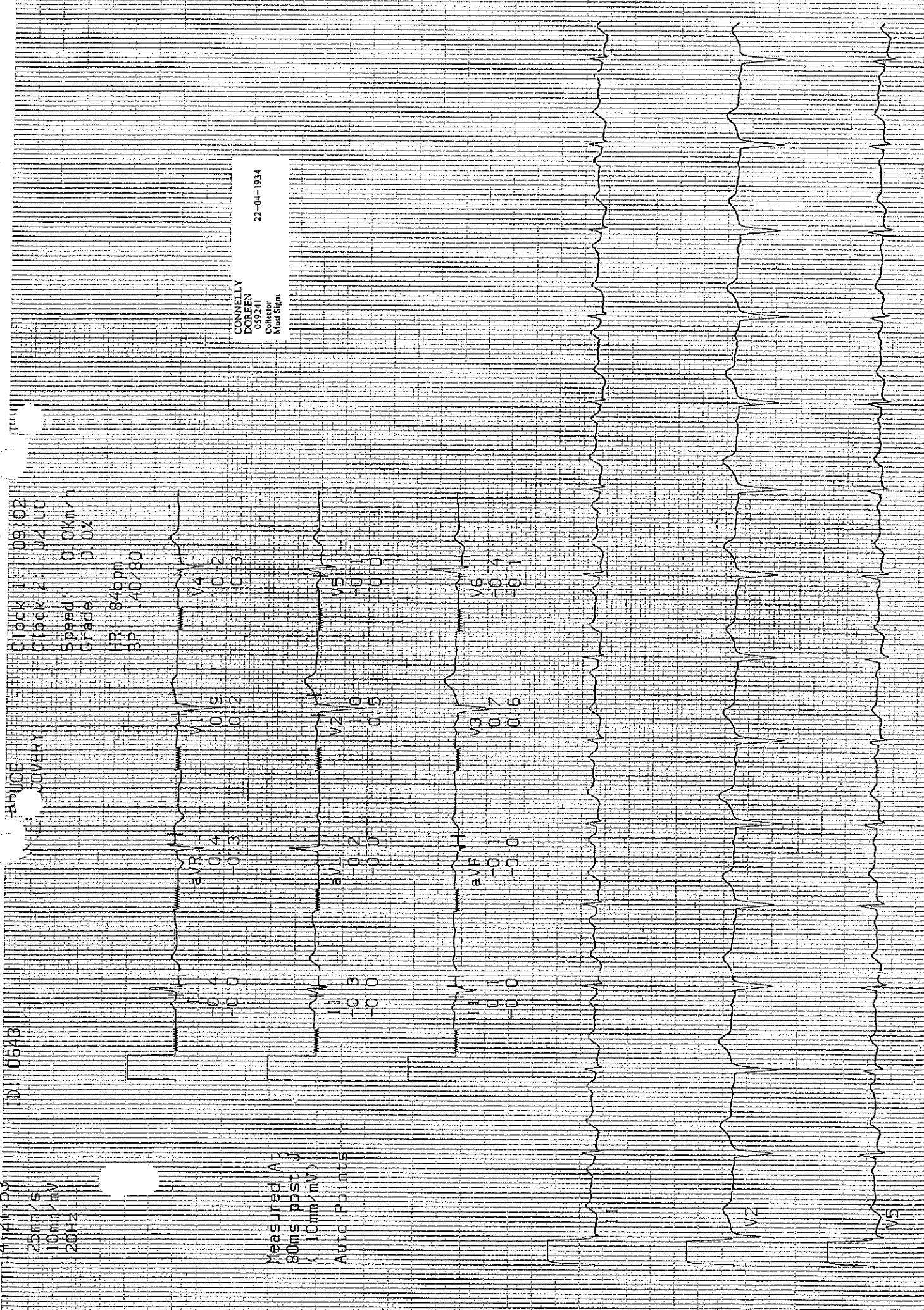
Dr T MARTIN STRAHAN



03-JUL-95 CONNELLY, DOREEN

Averages Report

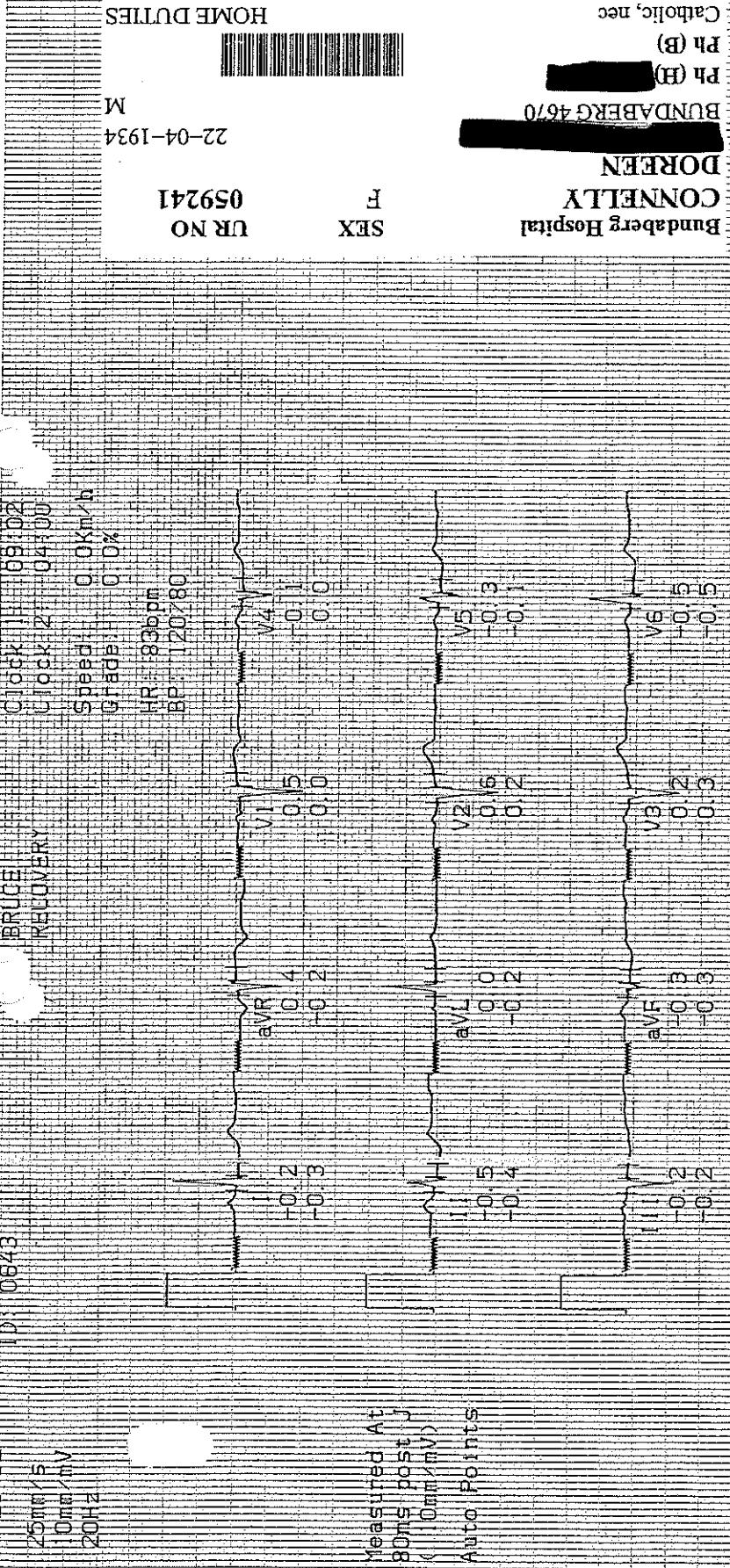
Dr T MARTIN STRAHAN



U3-JUL-95

Averages Report

Dr T MARTIN STRAHAN



HOME DUTIES



M

22-04-1934

Catholic, nec

Ph (B)

Ph (H)

BUNDABERG 4670

DORREEN

CONNELLY

SEX

UR NO

059241

Bundaberg Hospital

Dr T MARTIN STRAHAN

Averages Report

CONNELLY, DOREEN

03-JUL-95

Bundaberg Hospital
CONNELLY
DOREEN

[REDACTED]
BUNDABERG 4670

Ph (H)
Ph (B)
Catholic, nec

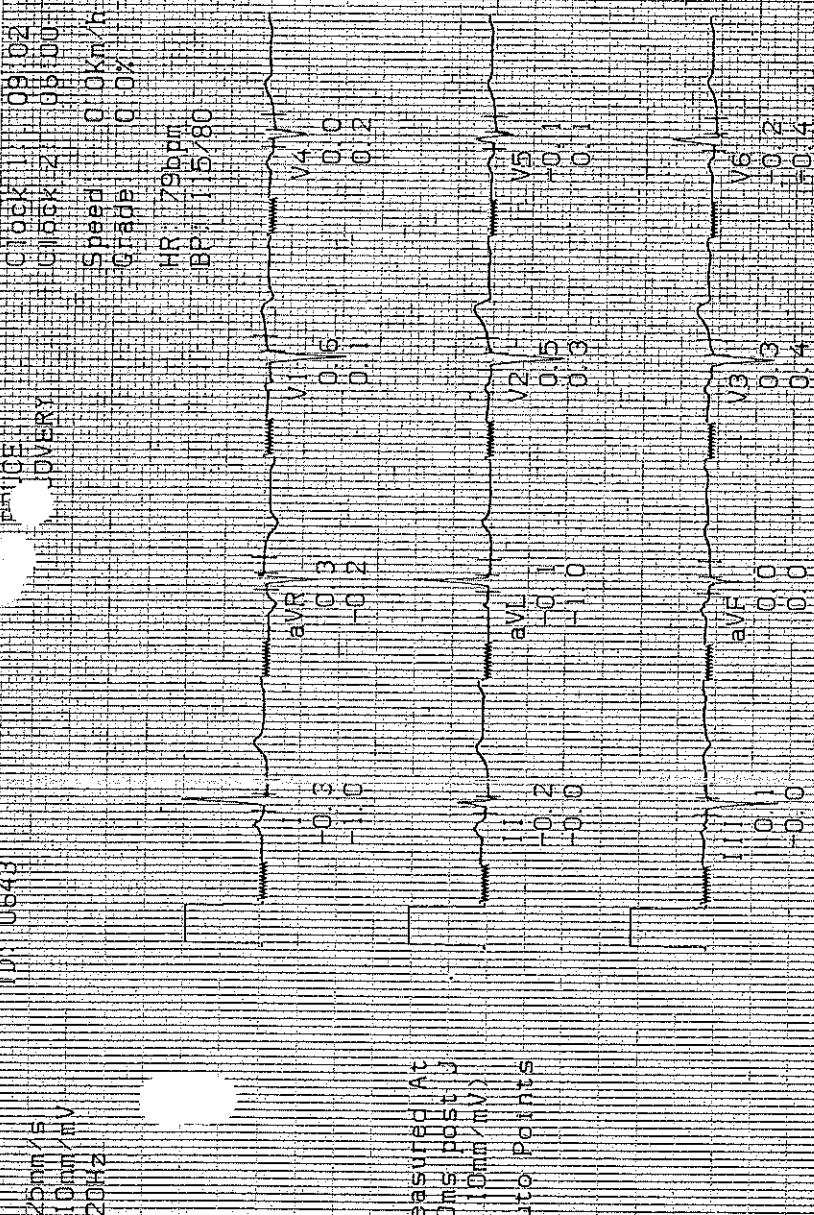
SEX
F

UR NO
059241

22-04-1934

M

HOME DUTIES



Measurements
in mm/mV
Auto Points

0119

CONNELLY, DORLEN

03-JUL-95
14:27:53
10m /mV
2012M
22-04-1934
UR NO 059241

SEX F

TRICE
RECOVERY
Speed 0.62
Grade 0.20
HR 80 BPM
BP 108/85

ID 0643

Meas Red At
80ms Post J
(10m/mV)

Auto Points

BUNDABERG 4670
CONNELLY DOREEN
Bundaberg Hospital

Ph (H)

(B)

Catholic, nec

Bundaberg Hospital
CONNELLY
DOREEN

SEX
F

UR NO
059241

22-~~4~~-1934

M

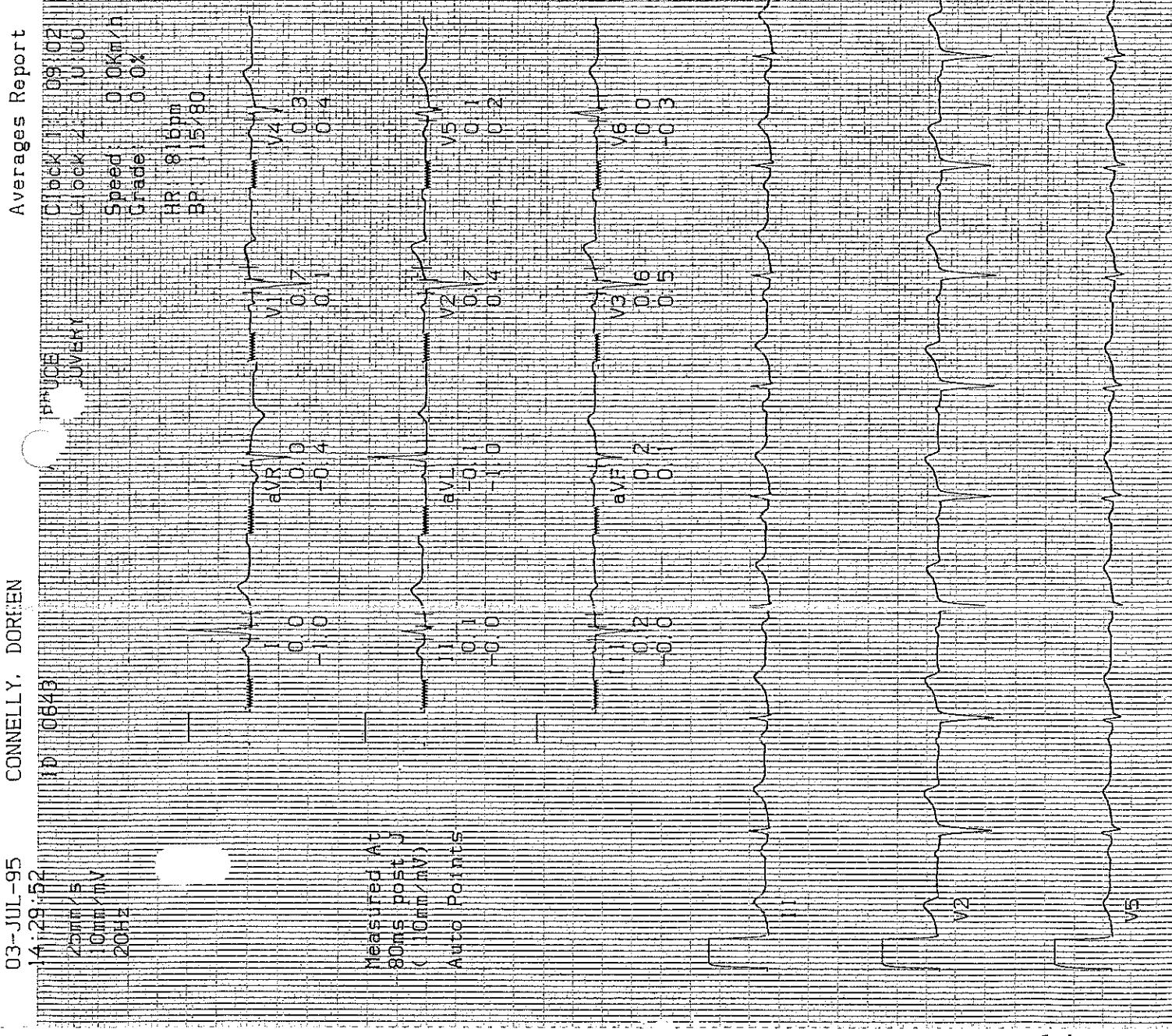
BINDABERG 4670

$\text{Ph}(\text{H})$

\equiv Ph (B)

Catholic, nec

HOME DUTIES



Connelly, Doreen

PRE-TEST

DOB:	06/13/54	SEX:	F
Height:	5'3"	Weight:	107 lbs
BPM:	85	HR:	64 bpm
BP:	120/85		

STANDING

DOB:	06/13/54	SEX:	F
Height:	5'3"	Weight:	107 lbs
BPM:	85	HR:	90 bpm
BP:	120/85		

EXERCISE 1

DOB:	06/13/54	SEX:	F
Height:	5'3"	Weight:	107 lbs
BPM:	85	HR:	105 bpm
BP:	130/85		

EXERCISE 2

DOB:	06/13/54	SEX:	F
Height:	5'3"	Weight:	107 lbs
BPM:	85	HR:	117 bpm
BP:	120/80		

PROCEDURE

BRUCE

Sample Cardiac Cycles

Measure A: 80.5 BPM
Measure B: 100 BPM
Auto Points: 5

HOME DUTIES

22-04-1934

SUNDABERG 460/U

Doreen Connally

atholic, nec

(B)

(H)

(E)

Bundaberg Hospital
CONNELLY
DOREEN

[REDACTED]
BUNDABERG 4670

Ph (H)

Ph (B)

Catholic, nec

SEX
F

UR NO
059241

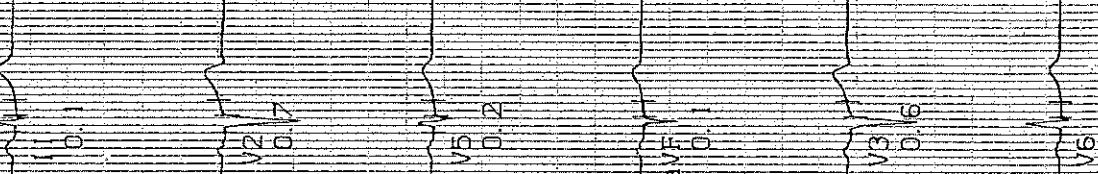
22-04-1934

M

HOME DUTIES

CONNELLY, RECOVERY

DOREEN
0543
03-JUL-95
13:55:54
BP: 15/80



0115

Graded Exercise Summary Report

050124\

Name: CONNE DOREEN Date: 03-JUL-95
 Age: 31 yrs Ref: 137565
 HT: 152cm Tested by: BUNDABERG BASE HOSPITAL
 WT: 72kg Medications: ASPIRIN
 Sex: Female Test Indication: CHEST PAIN, PH OF 2 MIS
 Race: Cauc Test Type: BRUCE
 Technic: stan Technic: stan

Phase	Stage	Time in Phase	Duration of Stage	Speed (km/hr)	Grade (%)	NETS (2)	H.R. (bpm)	B.P. (mmHg)	R.P. (min)	V.E. (ml/min)	Comments
PRE-TEST		00:00	01:00	0.0	0.0	0.0	64	120/85	7	0	
STANDING		13:54	13:54	0.0	0.0	0.0	90	120/85	08	0	0.2
EXERCISE	1	03:00	05:00	2.7	0.0	4	101	121/85	3	0	0.3
	2	06:00	06:00	4.0	0.0	7	121	120/80	145	0	0.1
	3	09:00	03:00	5.2	4.0	9	140	120/80	158	0	0.1
PEAK EX		00:00	00:00	5.4	14.0	9	140	120/80	158	0	0.1
RECOVERY		0:03	10:03	0.0	0.0	0	81	151/80	33	0	0.0

Results:

Procedure: BRUCE
 Procedure Time: 09:00
 Max Heart Rate Attained: 142 bpm
 Max BP: 140/80 mmHg
 Max Work load Attained: 9 METS
 Reason for termination:
 FAICUE

Impressions: RESTING ECG REVEALS OLD ANTEROSEPTAL AND INFERIOR MYOCARDIAL INFARCTS
 ATTENUATED SYSTEMIC BLOOD PRESSURE RESPONSE TO EXERCISE
 NO CHEST PAIN
 0.5mm DOWNSLOPING ST SEGMENT DEPRESSION IN LEAD V6 DURING RECOVERY
 NO CONSISTENT WITH A 1/2 PROBABILITY OF SIGNIFICANT CARDIOPATHY
 SATISFACTORY LEVEL OF PHYSICAL FITNESS

HOME DUTIES

22-04-1934 M

059241 A

SEX - UR NO --

CONNELLY DOREEN

0114

CATHOLIC
 Ph (B)
 Ph (H) [REDACTED]

BUNDABERG 4670

ID- [REDACTED]

13-JUN-95 08:30 WARD 10, BUNDABERG HOSPITAL.
IB: CONNELL, DOREEN

25 mm/s
0cm/mV
100Hz
Pm 005B
↓206
S.

Med Aspirin
22-APR-95 7 kg
Sex F Race Cauc
Loc Room

Vent. Rate 77 BPM
PR Interval 152 ms
QRS duration 68 ms
QTc 372 ms
PR-T axes +0 -0 44

Referred by:

NORMAL SINUS RHYTHM
INFERIOR INFARCT, AGE UNDETERMINED
ANTEROSEPTAL INFARCT, AGE UNDETERMINED
ABNORMAL ECG

Reviewed by:

BUNDABERG 4670
PH (H) [REDACTED]
PH (B)

CATHOLIC

HOME DUTIES

22-04-1934
M

[REDACTED]

C113

12-JUN-95 11:57 A+E, BUNDABERG BASE HOSPITAL

Name: [REDACTED] Date: [REDACTED]

Lead: V2, V3, V4
Age: 34
Sex: M
Loc: 005A
Pm: 206
PR: 0.05A
P-R Intervals: 0.17-0.15-0.13
QRS: 0.08s
QT/QTc: 0.42/0.427s
P-R-T axes: -27°-5°-43°

Referred by:

Unconfirmed

ECG Report
Normal Sinus Rhythm
Septal Infarct, Age Undetermined
Abnormal ECG

--ID-- CONNELLY F 059241
--SEX-- DOREEN

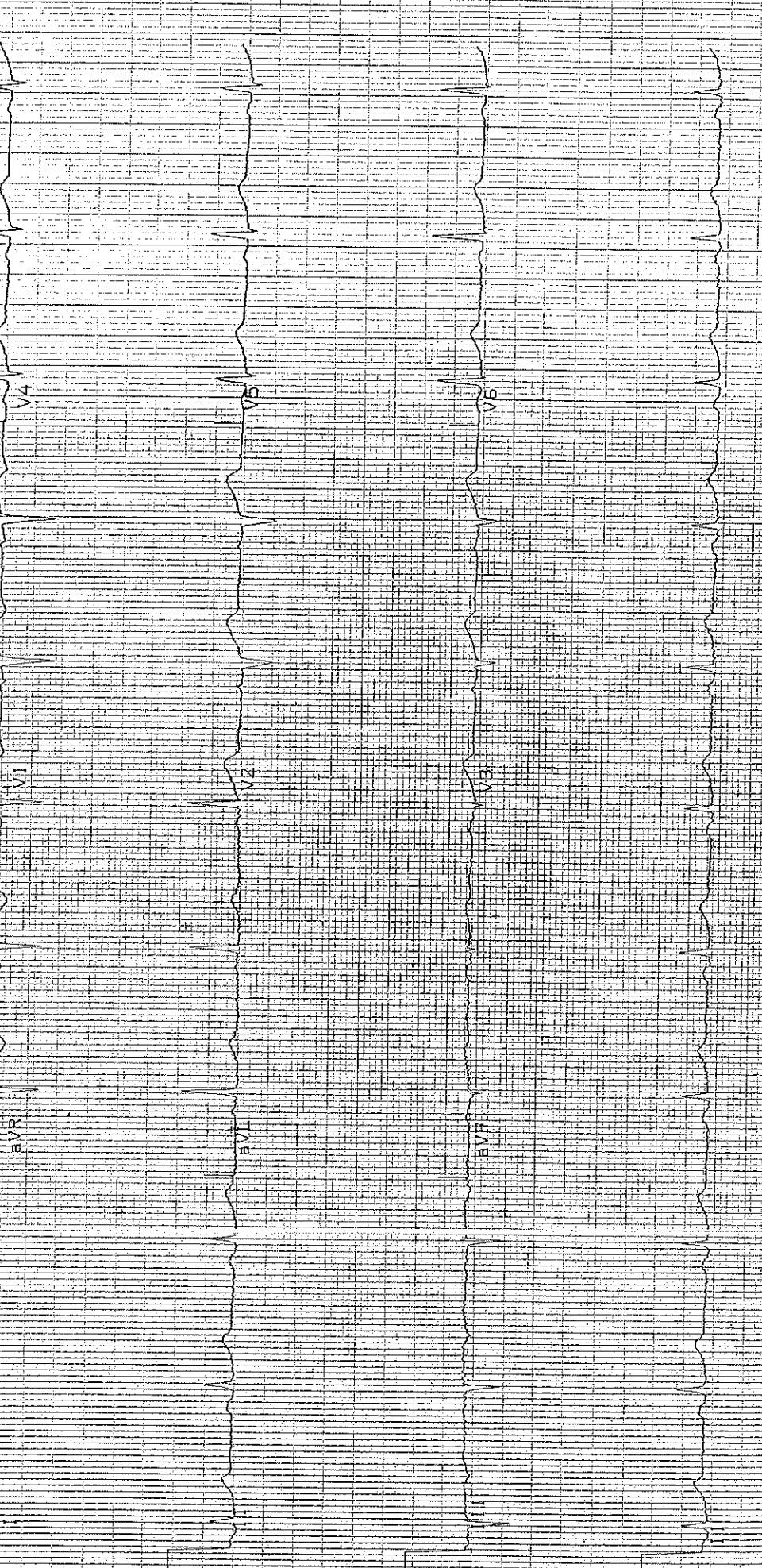
BUNDABERG 4670

Ph (H)
Ph (B)

CATHOLIC

22-04-1934 M

HOME DUTIES



Bundaberg

HOSPITAL

ELECTROCARDIOGRAPH
REQUEST AND REPORT

Surname CONNEHY U.R. No.

Given Names Deen.

Sex D.O.B. 22-4-34

Ward Clinic

CLINICAL NOTES: B.P.

DRUGS

- Digoxin
B. Blocker
Diuretic
Other
-

REPORT

Signature

Date

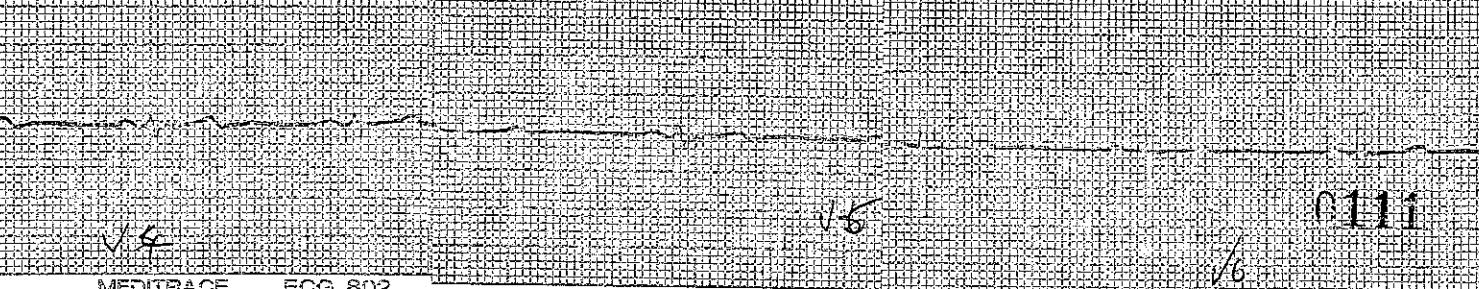
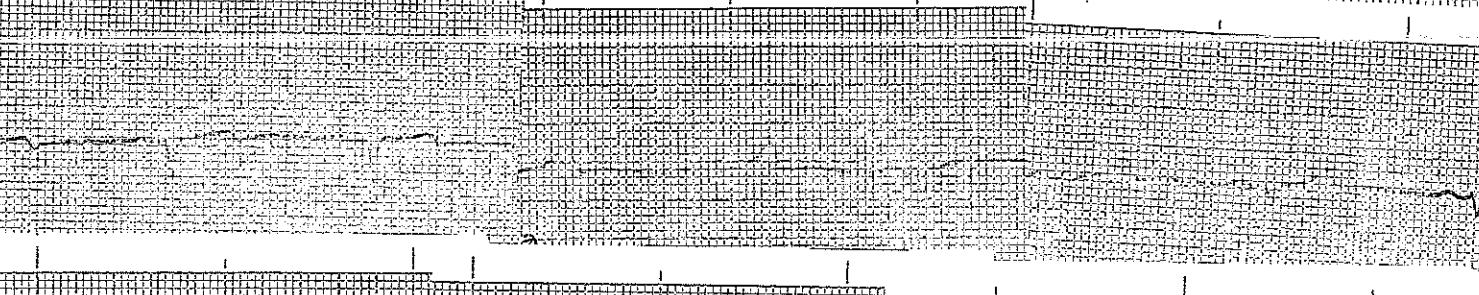
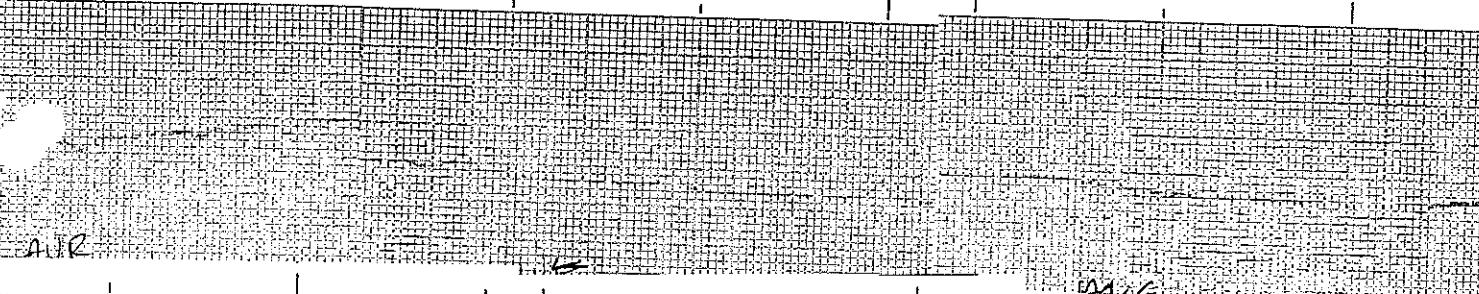
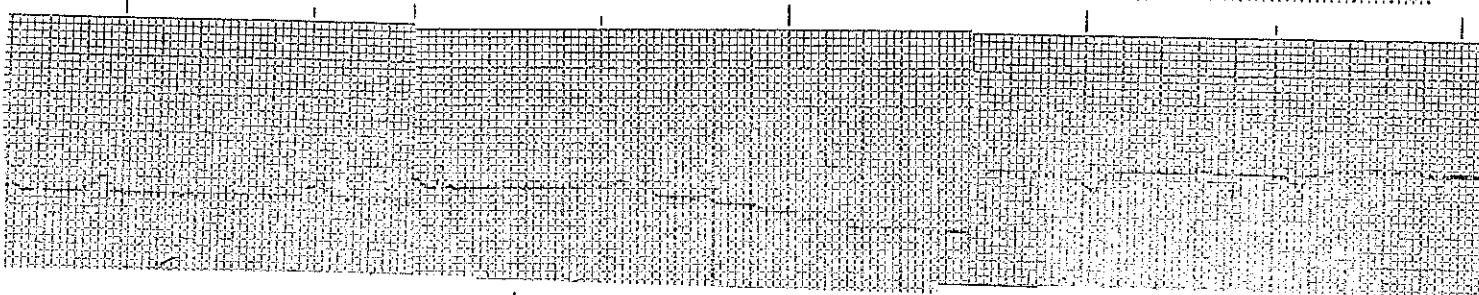
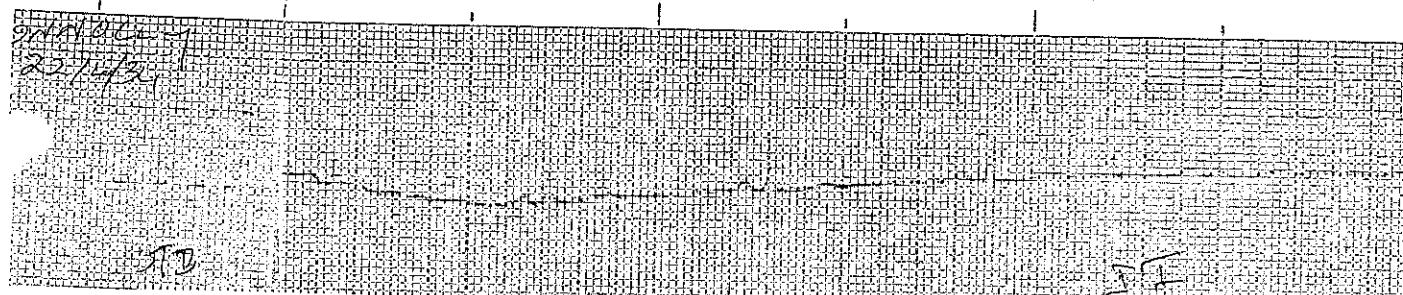
Specialist Signature

Date 10/9/93

CALIBRATION

DATE

TIME



111

OS9241
CONNELLY
DOREEN

BUNDABERG
GEORGE CONNELLY, HUSBAND
[REDACTED]

F
22/04/1934

BUNDABERG BASE HOSPITAL

1	2	3	4	5	6	7	8	9	10
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BUNDABERG BASE HOSPITAL

059241 F 22/04/1934
CONNELLY DOREEN
[REDACTED] BUNDABERG 4670
GEORGE CONNELLY, HUSBAND
[REDACTED]

26/3
Post

F.
22/04/1934
DUREEN
GEORGE CONNOLLY, HUSBAND

4670

CONNOLLY
DOREEN
BONDABERG

BUNDABERG BASE HOSPITAL

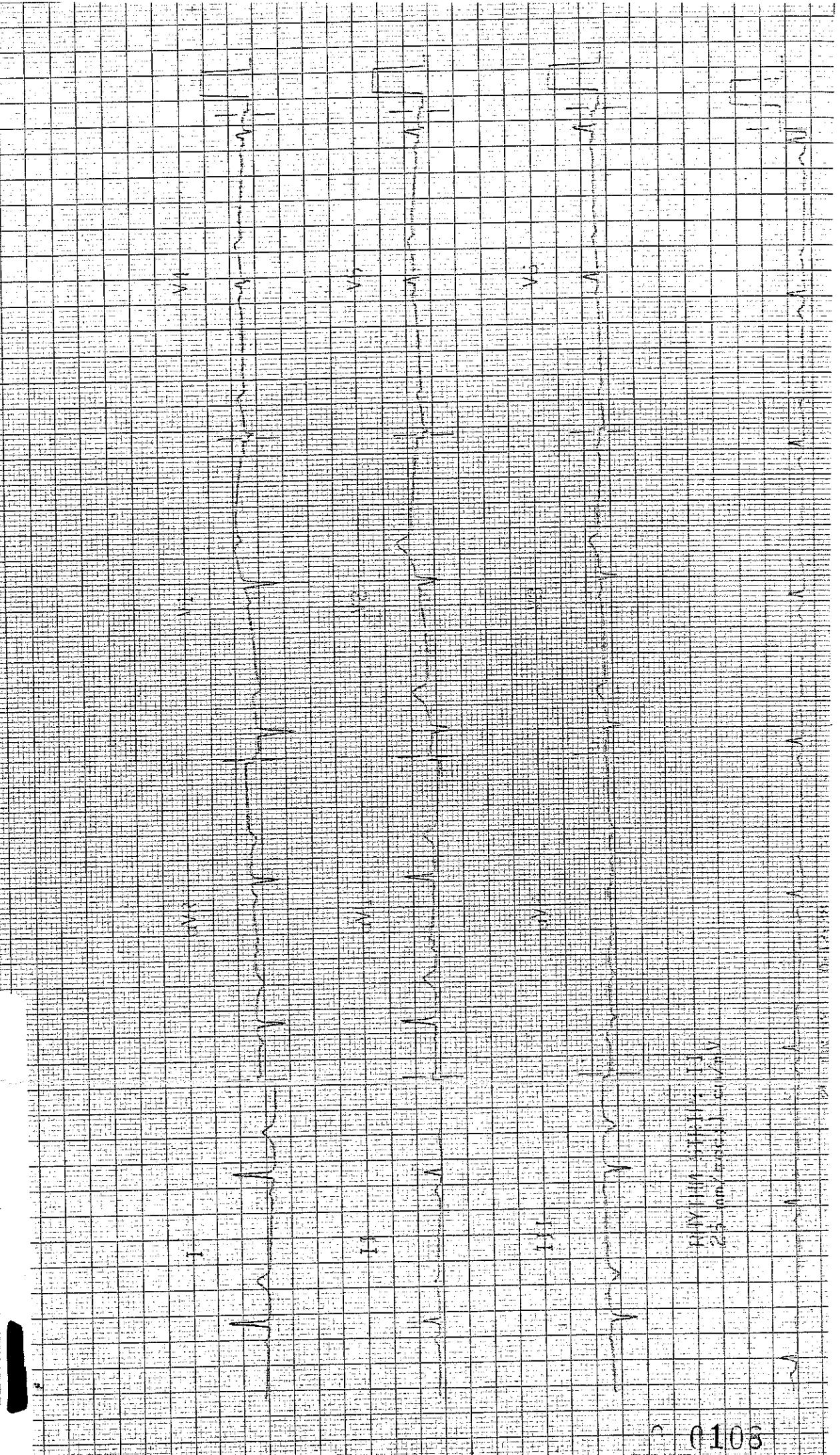
052241
CONNOLLY
DOREEN

GEORGE CONNOLLY

HUSBAND

BONDABERG

HUSBAND



0103

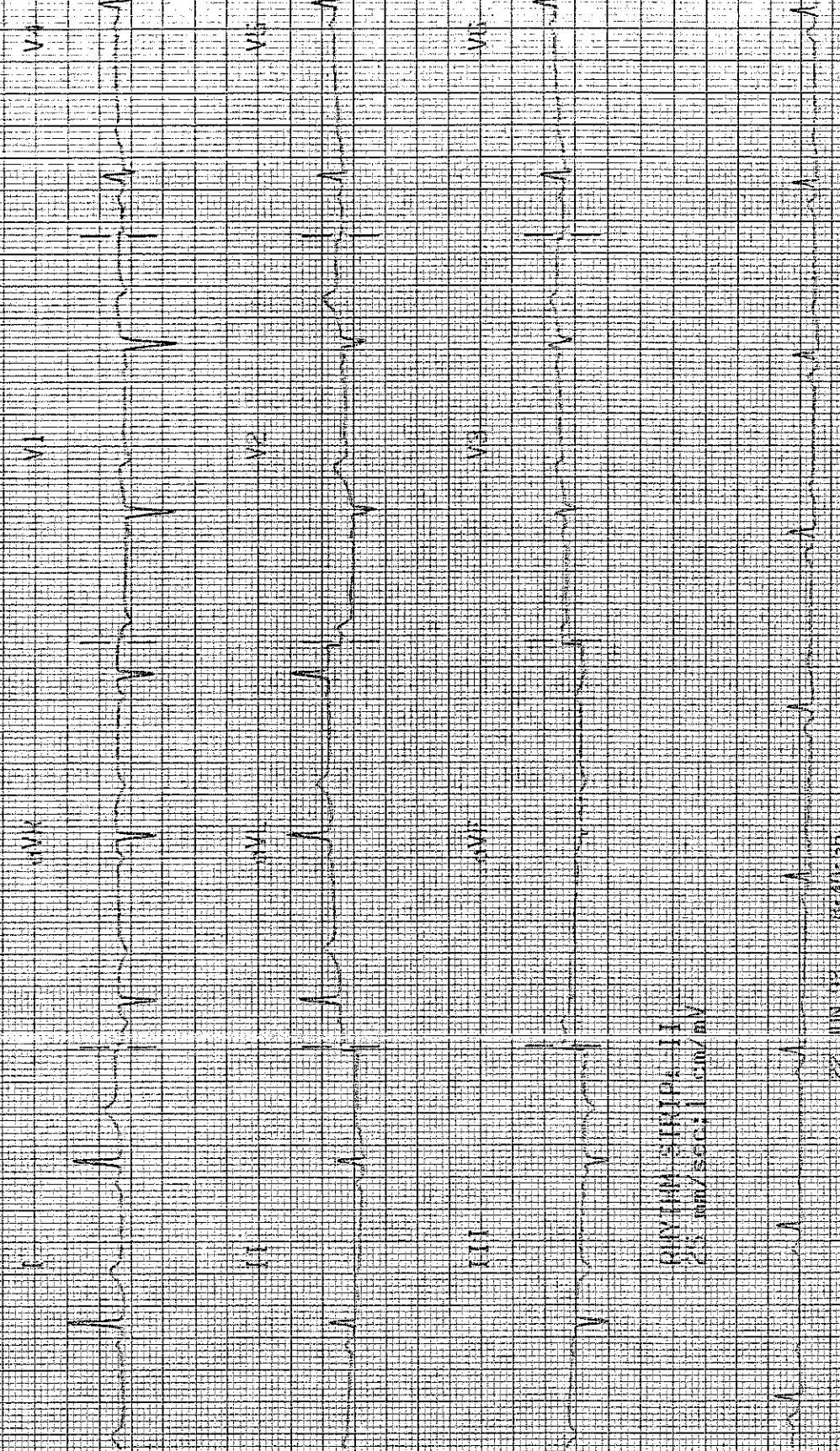
BUNDABERG BASE HOSPITAL

Pain Free

059241
CONNELLY
DOREEN
BUNDABERG
GEORGE CONNELLY, HUSBAND

F
22/04/1934

4670

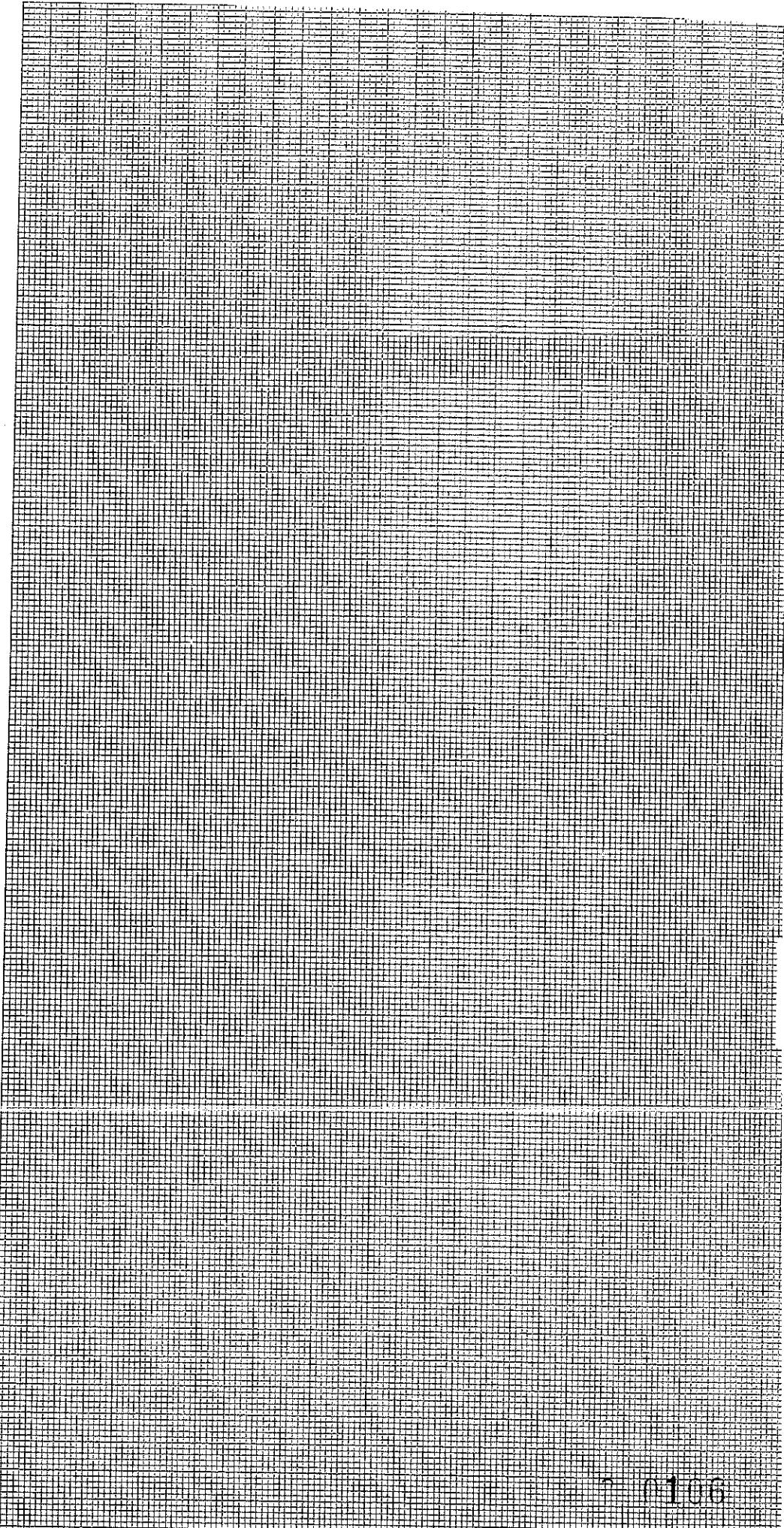


Pulse: 80 BPM
Blood pressure: 120/80 mmHg

0107

BUNDABERG BASE HOSI

D. Connell
Bundaberg
20/6/93



21/06/1993 07:23:53

BUNDABERG BASE HOSPITAL
Dept :
Room :

Brian Connell
Panther.

BUNDABERG BASE HOSPITAL

19/06/1993 07:44:27

BUNDABERG BASE HOSP
Dept :
Room :

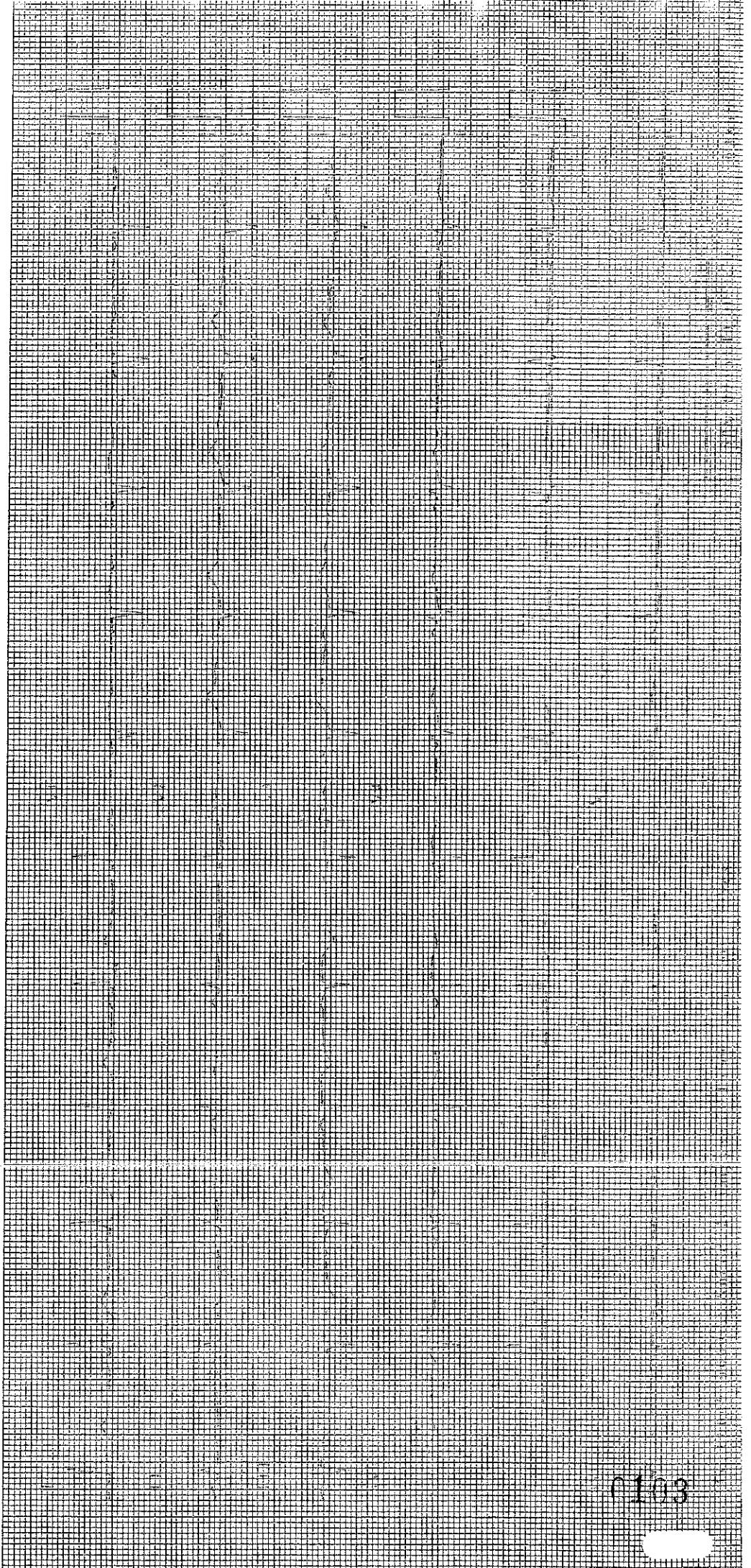
19/6/93
Kleen Tracey
Penfins

19/06/1993 07:45:00

RINDABERG BASE HOSP
Dept :
Room :

19/6/93

Doreen Connally
Patient - V



103

Doreen Connelly,

Pain 6/10 in severity
between shoulder blades.

Doreen Connally 610 pain between shoulders
Posterior.

BEDDINGFIELD BASP HOSP
Dept.
Roma

ID: 18-JUN-93 16:31 A+E, BUNDABERG BASE HOSPITAL.

John H. V.
40+2
P-206 005A
V206

Med: At: Age: Sex: Race: Loc: Room:

SIMULS BRADYCARDIA
LOW VOLTAGE QRS
SEPTAL INFARCT: AGE UNDETERMINED
INFARCT: AGE UNDETERMINED
INFARCT: AGE UNDETERMINED

Vent: Rate: 58 BPM
PR Interval: 156 ms
QRS duration: 72 ms
QT/QTc: 415/439 ms
P-R-T axes: 43-10-36

Preferred by:
Luis Conchitado

