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## **CARDIAC CATHETERISATION**

CLINIC

29 APRIL 1999

TAPE RECEIVED 4 MAY 1999

TYPED

4 MAY 1999

TGF/TMB/G098452

Mr S Ohri Consultant Cardiothoracic Surgeon Wessex Cardiothoracic Centre Southampton General Hospital Tremona Road Southampton SO16 6YD

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Dear Sunil

| <b>NORMA WINDSOR</b> | Code A |
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I would be grateful for your views on Norma Windsor. She is a 68 year old lady with chronic lymphatic leukaemia from which she has no symptoms and whose most recent blood count is entirely satisfactory at haemoglobin 13.6, white cell count 13.3 and platelets 280. She was referred to me because of increasing angina and we undertook angioplasty on the 7 April 1999. This shows evidence of an old anterior infarct with the remainder of left ventricular function looking very reasonable. In the left coronary arteriogram there is a normal left main stem with a proximal occlusion of the LAD, the circumflex artery is heavily diseased with a large obtuse marginal branch compromised and further disease distal to this. The right coronary artery is severely diseased throughout it's course and the PDA looks very, very diseased to me. There is cross filling of the LAD from this vessel but also on the left coronary artery one can see some distal filling of the PDA.

I discussed the results of the angiogram with Mrs Windsor and we arrived at the decision that she should undergo conservative treatment. However, the patient wished time to consider matters and she has now written to me asking to be considered for coronary artery by-pass grafting. I enclose the angiogram and I would be grateful for your views.

Best wishes

Yours sincerely

Code A

148 Forton Road Gosport

T G FARRELL

CONSULTANT CARDIOLOGIST