

ED discharge summary

Synthetic Clinical Document - For Educational Use Only

Patient ID	P005	Document ID	P005-D04
Date	2026-08-28	Type	ED discharge summary
Author	Hospital Ed	Recipient	-

EMERGENCY DEPARTMENT DISCHARGE SUMMARY

Logan Hospital - Emergency Department

Date: 28/08/2026

Patient: Grace O'Connor

Age: 76 years | Sex: Female

Usual GP: Dr Olivia Grant, Logan Central Medical Centre

Living situation: Lives alone with weekly community nurse support

PRESENTATION

Presented to the Emergency Department on 28/08/2026 with fluid overload, referred following urgent GP assessment.

HISTORY

Background of heart failure with reduced ejection fraction, chronic kidney disease stage 3 and hypertension.

Allergy: spironolactone (previous hyperkalaemia).

Earlier on 28/08/2026 a routine community nursing home visit identified weight 3.1 kg above recorded baseline, new bilateral ankle oedema and increased exertional breathlessness, with a conclusion of possible fluid overload requiring same-day GP assessment.

At urgent GP consultation the same day, findings were bibasal crackles, oxygen saturation 93% on room air, and no chest pain. The GP concluded that hospital assessment was required because of frailty and chronic kidney disease.

INVESTIGATIONS

Chest X-ray (final): mild pulmonary congestion.

Renal function (final): near baseline.

Troponin: not elevated.

ASSESSMENT

Mild heart failure decompensation without acute coronary syndrome, in the context of fluid overload. Breathing improved and she was able to mobilise safely following diuretic treatment.

MEDICATION CHANGES

Furosemide increased from 40 mg each morning to 80 mg each morning on 28/08/2026 for heart failure fluid overload. This is intended as a short temporary increase, duration 5 days, with close community and GP monitoring.

MEDICATIONS ON DISCHARGE

- Bisoprolol 2.5 mg once daily - unchanged
- Furosemide 80 mg each morning - increased from 40 mg each morning (temporary, 5 days)
- Sacubitril/valsartan 24/26 mg twice daily - unchanged

DISPOSITION

Discharged home from the Emergency Department on 28/08/2026.

ADVICE TO PATIENT

- Record daily morning weight.
- Return for breathlessness at rest, chest pain, or reduced urine output.

FOLLOW-UP

Outstanding:

- Daily weight and symptom monitoring - Community Nursing Service - due 03/09/2026.
- Repeat renal function and potassium - GP, Logan Central Medical Centre - due 03/09/2026.
- Heart failure clinic review - Metro South Heart Failure Clinic - due 24/09/2026.

Completed 28/08/2026: same-day GP assessment; same-day ED assessment.