

COPY

8 November 2023 (dictated)

10 November 2023 (typed)

Dr Padma Kaluarachchi Conrad Road Family Practice 45 Conrad Road KELLYVILLE RIDGE NSW 2155

Dear Dr Kaluarachchi,

RE: Elizabeth TIERNEY MRN: 275 98 78

DOB: 17 September 1963

Patient address: 217 Macquarie Street, SOUTH WINDSOR NSW 2756

Immunological issue: Immune deficiency on intravenous immunoglobulin

replacment

Issues:

- 1. Insulin requiring diabetes
- 2. Hypercholesterolaemia
- 3. Barrett's oesophagus
- 4. Bilateral carpal tunnel syndrome
- 5. Seborrhoeic keratoses
- 6. Pneumonia 2 week admission to Hawkesbury Hospital
- 7. Depression
- 8. GORD
- 9. COPD/Asthma current smoker
- 10. Tonsillectomy/adenoids removed
- 11. Iron deficiency with low ferritin now seeing Dr Panicker (may be related to heavy periods)
- 12. Severe obstructive sleep apnoea suggested to be on CPAP
- 13. Fracture left thumb

Medications:

Iron tablets, Atacand, Rosuzet (Ezetemibe and rosuvastatin), Jardiamet, Toujeo, Trulicity, Nexium, Novorapid, Symbicort (200/6) 3 puffs twice/day, Spiriva 2 puffs mane, Ventolin PRN, Resprim DS one tablet daily, Efexor, Fish Oil, Natural E, Mega B, Fenofibrate, 5 x Covid-19 vaccine, Influenza vaccine up to date

Progress:

Elizabeth was stopped off her IVIg last visit, although she continues to have infections (mostly dental) requiring antibiotics. She feels there might be a slight increase since stopping the IVIg. There have been no serious infections requiring hospitalisation.

Examination:

BP 147/83 PR 76 bpm, Weight 87.5 kg. The lungs were clear and there were no signs of

sinusitis.

Plan:

We will repeat her IgG/A/M levels today and that will be helpful in deciding how to proceed. She is open to subcutaneous immunoglobulin replacement but I will probably get her to come back in 3 months' time (without any replacement unless her IgG was very low and we might have to reconsider this strategy).

Additional: The IgG level was 7.1 g/L (normal), IgA 0.96 g/L (normal) and IgM 0.36 g/l (low). Her FBC was normal. The renal function was normal the LFTs were normal apart from an ALT of 47 U/L.

Sanjay Swaminathan

Son All

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cc: Medical Records

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2756

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