Surrey Heart Clinic
Guildford Road, Woking GU22 7QE · Tel: 01483 555 0128

PATIENT **Derek Pemberton** | DOB **27/01/1968** | INTERVIEW COMPLETED **7 September 2026** | EXPORTED **8 September 2026**

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Patient-reported data only — your clinical interpretation follows in the appointment.

AT A GLANCE

Generated 07:48 BST

Complaint	**Chest tightness on exertion**	Duration	**About 6 weeks**
Frequency	**“Three or four times a week”**	SAQ-7	**58/100**
Driving status	**Drives a car; no HGV or PCV licence reported**	Smoking	**“About ten a day”; “trying to stop”**
Safety status	**Safety flags reported** — see Safety flags below		

KEY POINTS

- Chest tightness “like a band” on “walking uphill or hurrying” for about 6 weeks, easing “in a couple of minutes” on stopping.
- It “sometimes goes into my left arm”; “three or four times a week”.
- One episode at rest “on the sofa” lasting “about twenty minutes”, “last week”.
- Smoking “about ten a day”, high blood pressure on tablets, and being told “my cholesterol was high”.

SAFETY FLAGS

REPORTED PRESENT

One episode of chest tightness “sitting on the sofa” lasting “about twenty minutes”, “last week”. Went “a bit dizzy” once while climbing stairs; did not black out.

REPORTED ABSENT

Collapse or blackout; breathlessness at rest or when lying flat; a close relative who died suddenly under the age of 50.

QUESTIONNAIRE SCORES

Seattle Angina Questionnaire, short form (SAQ-7)	58/100	Instrument summary score; lower indicates more limitation
Rose angina questionnaire	Positive	Instrument classification of reported exertional chest discomfort

PROBLEM SUMMARY

About six weeks of chest tightness described as “like a band across my chest”, brought on by “walking uphill or hurrying” and easing “in a couple of minutes” on stopping. It is reported “three or four times a week” and “sometimes goes into my left arm”. One episode at rest “on the sofa” lasting “about twenty minutes”, “last week”, which “went off on its own”, and one occasion of going “a bit dizzy” on the stairs.

SYMPTOM CHARACTER AND TRIGGERS

- **Character:** “like a band across my chest”; “not sharp”; “sometimes goes into my left arm”.
- **Triggers:** “walking uphill or hurrying”, “cold mornings”, “after a big meal”.
- **Relief:** stopping and resting, “a couple of minutes”.

CARDIOVASCULAR RISK FACTORS (PATIENT-REPORTED)

- **Smoking:** “about ten a day”, “trying to stop”.
- **Blood pressure:** told it is high; takes ramipril.
- **Cholesterol:** told it was high “a couple of years ago”; prescribed a statin, “I don’t always take it”.

MEDICATIONS AND LIFESTYLE

- **Medications:** ramipril daily; atorvastatin “not always”; no aspirin; no spray under the tongue reported.
- **Alcohol:** “a few pints at the weekend”.
- **Occupation:** delivery driver, “van, not lorries”; drives “most of the day”.

RELEVANT COMORBIDITIES

- High blood pressure and high cholesterol as above.
- “I snore, my wife says”.
- **Reported absent:** kidney problems, asthma, previous blood clots.

OUTSTANDING CLINICAL QUESTIONS

- The result of the reported ECG at the GP is not known to the patient.
- The patient drives for work “most of the day”; the exact licence type held was not established beyond “van, not lorries”.