



## **One-Page Clinical Summary – Home Triage Report**

DOB:	
Primar	ry Diagnosis: Hypermobile Ehlers-Danlos Syndrome (hEDS)
Secon	dary Diagnoses: (tick which apply)
0	Postural Orthostatic Tachycardia Syndrome (POTS) [ICD-10-AM G90.81]
0	Mast Cell Activation Syndrome (MCAS)
0	Dysautonomia
0	Neurodivergence
0	ME/CFS
0	Fibromylagia
0	PCOS
0	Endometriosis
0	Lipoedema
Provis	ional Diagnoses (pending confirmation/ reassessment):
Treating Specialists:	
AWAIT	TING APPTS With:



Patient:



### **Home Triage – Date/Time:**

### **Presenting Concerns:**

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#### Vital Observations (over 30 minutes):

- BP:
- Temp: °C (baseline avg °C) (hEDS patients can have a blunted temp response to infection/inflammation and so may be subjectively febrile).
- BSL: mmol/L (capillary)
- Urine Dipstick (WUT):
  - o SG:
  - o pH:
  - o Nitrites:
  - o Leucocytes:
  - o Ketones:
  - o Urobilinogen:
  - o Bilirubin:
  - o Glucose

#### **Emergency Self-Interventions Administered:**

- Recue Medications:
- Oral Fluids:
- Bicarbonate of soda: ½ tsp in water (alkalisation support)
- Continue to monitor BP, HR and Temp at least hourly

Contact Specialist: [contact email/number here]

**Patient Notes:** 



#### **About the Author**

# Tracy Finnegan, RN, B.AppSci (Integrated Resource Management), MAICD, LEAN Patient Expert

Tracy is an intensive care nurse and systems thinker with lived experience of hypermobile Ehlers-Danlos syndrome (hEDS), dysautonomia, and mast cell activation. She is the founder of **ConnectED Health**, an initiative combining clinical research, patient insight, and Al technology to improve diagnosis and care for complex, multisystemic conditions. Tracy works collaboratively with researchers and clinicians to bridge the gap between emerging science and real-world patient care.