



# Sir Ganga Ram CITY hospital

(A Unit of Conner Institute of Health Care & Research Center Pvt. Ltd.)



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## DISCHARGE SUMMARY

Name of Patient	: Mrs. Saroj Rani	Age/Sex: 62 Yrs/F
Room No.	: 108-A	Reg. No.- 92016
I/P No.	: 19/07449	
Service unit	: Nephrology unit	
Date of Adm.	: 06/07/2019	Date of Dis.: 13/07/2019

### Diagnosis:

- Chronic kidney disease-V
- Hypertension
- Right IJ (dialysis catheter in situ (Inserted on 08/07/2019))
- Right AVF created on 09/07/2019

**History:** 62yrs old female patient is a known case of hypertension for 12yrs, chronic kidney disease (HD done thrice –last hemodialysis done on 24/06/2019) via femoral. Patient developed drowsiness, generalized weakness on 03/07/2019. On evaluation found to have sodium 125; treated symptomatically. MRI brain also done which showed focal hypointense signal area with blooming out in GRE seen in left side of parietal lobe s/o microbleed. Patient was given IV iron. According to attendants patient developed slurring of speech – recovered as of now. Now patient is admitted here for further evaluation and management.

**On examination:** Conscious, oriented, afebrile, BP-160/80mmHg, PR-64/min, RBS-105mg/dl; No pallor, icterus, cyanosis, Lymphadenopathy, pedal oedema, JVP not raised.

**Chest-B/L VBS CVS-S1S2** normal **P/A**-soft, nontender, BS+

**CNS** - No focal neurological deficit.

**Course in hospital:** Patient was admitted with the above mentioned complaints & physical findings. All routine blood investigations were given. On evaluation found to have Hb of 11.0, TLC 7.1, platelet 183, creatinine 9.53, sodium 134, potassium 3.74. Patient was dialysed via femoral. IV antibiotics were given empirically with supportive management. USG abdomen was done which showed chronic kidney disease, mild to moderate right pleural effusion. NCCT chest was done which showed Moderate right pleural effusion is seen with basal lung atelectatic changes. Minimal left pleural effusion seen. 2D Echo was done which showed mild global LV hypokinesia, mild LV systolic dysfunction (LVEF-50%), concentric LVH, dilated LV, grade-II LV diastolic dysfunction, moderate to severe MR, mild AR, no AS, mild to moderate TR, mild PAh, PASP-40mmHg, no I/C clot, vegetation / pericardial effusion. Right IJ HD catheter was inserted. Right radio-cephalic AV fistula was created for future dialysis.

Patient developed breathing difficulty during dialysis, chest x-ray was done which showed mild bilateral pleural effusion. NCCT thorax was done which showed Moderate right and mild left pleural effusion seen with underlying collapse consolidation on right side. Now patient is being discharged with following advice.

Condition at the time of Discharge - Satisfactory

FOLLOW UP ADVICE ON DISCHARGE:

MEDICATION INSTRUCTIONS

High protein diet

Tab. Ceftum 250 mg twice daily for 5 days 1 - X - 1 X 5 days.

Tab. Pantop 40mg twice daily 1 - X - 1 (अप्रातः/प्रातः)

Tab. Febutaz 40mg once daily 1 - X - X

Tab. Thyrox 50mcg once daily 1 - X - X (अप्रातः/प्रातः)

Tab. Ecosprin-AV 75/10mg once daily X - X - 1

Tab. Ivanode 5mg once daily 1 - X - X

Tab. Isolazine 1/2 tab twice daily 1/2 - X - 1/2

Syp. Cremaffin 30ml HS night

Peglac Powder 1/2 sachet in 300ml of water at night

Inj. Transfer 4000 IU S/C twice weekly (next on 16/07/2019)

MHD twice a week

IN CASE OF ANY EMERGENCY CONTACT TO:-

- Sir Ganga Ram City Hospital (011-42255555)

IF ANY QUERY FOR LAB REPORTS PLEASE CONTACT ON 011-42255515/16.

**NEXT APPOINTMENT:** Review with Dr. D. S. Rana In Pvt. OPD SGRH after 5 days with prior appointment (011-25750000).

**Investigations in follow up:** CBC, RFT, Urine R/M (032, CIC) SGRH.

Dr. Sumit  
Doctor on Duty

OD- Once Daily  
AD- Alternate Days

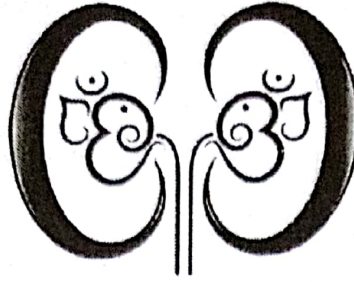
Dr. Chetna  
Senior resident

BD- Twice Daily  
SOS- If Emergency

Dr. D. S. Rana  
Consultant Incharge

TDS- Thrice Daily  
HS-night

Reg. No. : .....



# PALNA BHATNAGAR HOSPITAL HAEMODIALYSIS UNIT RECORD

Name : SAROJ RANI  
Doctor :  
Age / Sex : 65 . F  
Address : DEOBAND  
Phone No. : 9219741723  
9758636736



Near Ganesh Murti, Ganehspur  
ROORKEE - 247 667  
MOB.: 8958464421

Dialysis Flow Sheet

HD No. ....135.....

Date : 13.11.2020

Access : AVF  Femoral  Jugular  Others .....

Dialysate : STD  K  Ca  Dialysis : Bicarb  Citrate

Bicarb :- STD  Modified  No Variation : Profile  STD

Heparin : Systemic  Rigid  Hep free  Ideal Body Weight

HD Time : 4 hour

Pre HD	Post HD
Weight : 52.00	Weight : 50.00
Weight Gain : 2.00	Weight Loss : 2.00
Temperature : 98.6°F	Temperature : 98.6°F
Blood Pressure : 170/90 mmHg	Blood Pressure : <del>210/190</del> 210/90
Pulse : 80/min	Landing _____ Standing 200/90
Time on : 7:00 AM	Pulse : 80/min
Started by : Gourav	Time off : 11:00 AM
Assisted by : Hans Kumar	Stopped by : Gourav
	Assisted by : Hans Kumar

Dialyser .....FG..... Surface Area .....1.3m<sup>2</sup>..... Reuse No. ....5-use.....

Heparin Dose : Bolus Dose : 3000 unit Maintenance Dose : 500 unit Pump : On  Off

HD-Time 4 hrs Target of 2500 of Achived 2000 volum of infusion 100ml

Time	0	½	1	1½	2	2½	3	3½	4
B.P.	170/90	160/80	160/80	160/90	160/90	180/90	180/90	180/90	180/90
P.	80	76	76	80	84	87	84	80	80

Physician Orders HD : 4 hour

UF : 2500 ml

Heparin : 5000 unit

Complications \* N/O

Doctor J.M. Bhamagar.

Signature