



**Sanjay Gandhi Post Graduate Institute of Medical Sciences**  
**Raebareli Road, Lucknow - 226 014 ,India**

**Discharge Summary**

<b>RNO:</b> 2014472802	<b>Name:</b> Ram Kesh 50/ Y/M	<b>Department:</b> Cardiology
<b>Unit:</b> UNIT-D0003-02	<b>Ward/Bed:</b> Cardiology Wing-A01(MICU) / PVT / 5	
<b>Admission No:</b> ADM-201908205	<b>Admitted on:</b> 22-02-2019 23:13	<b>Discharged on:</b> Mar 5, 2019 12:47 PM
<b>Patient Type:</b> Priority	<b>Consultant:</b> Aditya Kapoor	<b>Discharge Type:</b>
<b>Correspond. Address:</b> T-5, Infront Of S P Office	<b>Distt.</b>	<b>State</b> Uttar Pradesh <b>Pin No.</b> <b>Phone No</b> +91-

**Diagnosis – DM, HTN, ACUTE LEFT LOWER LIMB ISCHAEMIA (21/2/19), NSR, NORMAL LV FUNCTION.**

**History & examination**

This patient diabetic, hypertensive, nonsmoker, with no family h/o CAD presented with complaint of left lower limb pain for past 2 days, consulted elsewhere, diagnosed as ACUTE LEFT LOWER LIMB ISCHAEMIA and was referred for further management. H/o syncope or palpitation. No h/o dyspnoea or past h/o such episode.

O/E BP= 130/90 mmHg, Pulse = 78 Bp/m, regular, JVP- Normal, CVS- S1,S2 normal, No S3/S4, no murmurs. R/S- NVBS present. No crepts. Left lower limb pulses absent rest other limb pulses present. Patient was admitted for management.

ECG- NSR, WNL

ECHO- NORMAL LV SIZE AND CONTRACTILITY

**Operation Details**

Thrombus aspiration f/b Catheter directed thrombolysis was done on 23/02/19 by interventional radiologist.

**Hospital Course-** Urgent interventional radiology consultation was sought and catheter directed thrombolysis with alteplase was done on 23/02/19. Post procedure, check angio showed small residual thrombus with preserved flow. Plastic surgery consultation was taken in view of cellulitis, and advise followed. The patient is symptomatically better and is now being discharged in stable condition

**Status at discharge – Stable**

**Future plan- MFU**

**Adv-**

TAB ECOSPRIN 150 MG 1 OD  $\rightarrow$  रात में

TAB DEPLATT 75 MG 1 OD  $\rightarrow$

TAB ATORVAS 40 MG 1 OD  $\rightarrow$  रात में

TAB STARCAD BETA 50 MG 1 OD  $\rightarrow$

CAP AUGMENTIN 625 MG 1 TDS FOR 5 DAYS  $\leftarrow$

*Tab Chymoral forte 750 TDS  $\rightarrow$*

CONTINUE ANTIDIABETICS AS ADVISED

TO FOLLOW UP IN ENDOMEDICINE OPD OF MANAGEMENT OF DM

TO FOLLOW UP IN CARDIOLOGY OPD ON TUESDAY AFTER 15 DAYS WITH HB, CREAT, NA, K, LIPID PROFILE, FBS, PPBS, HbA1C

**REPORT**

**INVESTIGATION RESULTS:**

2019-02-23 00:13:30.256 CT Angio

2019-02-23 21:30:51.055 Angioplasty

**BED HAS NOT BEEN VACATED FROM SYSTEM**

ULTRASONOGRAPHY

Name ..... Ramjesh Ji ..... Age/Sex ..... CR. No. ....

Referring Physician /Unit /OPD/Ward / Bed.....

ULTRASOUND Hepatobiliary/Whole Abdomen/KUB/Pelvis/FNAC/Retroperitoneum/ .....

Ultrasound No. .... Date 19/3/19 Clinical Diagnosis.....

**REPORT :**

left lower limb

- Distal ATA, PTA , peroneal arteries showing (w) triphase flow
- DPA upto the mid foot also showing (w) triphase flow

Adv: physiotherapy to be continued.

follow up after 5mon

Dr Raghu Sen

(Radiologist)

SANJAY GANDHI POSTGRADUATE INSTITUTE OF MEDICAL SCIENCES, LUCKNOW

Department of Radiodiagnosis

REPORTING FORM

Patient's Name..... Ramkesh / ..... Age/Sex..... CR. No.....

Referring Physician/Unit/OPD/Ward.....

Investigation.....

Radiology No..... Date 14/5/19

→ left CFA, SFA, ATA, PTA & DPA shows normal triphasic flow on colour Doppler.

*Dayi  
Radiology*

Date.....

(Radiologist)

ULTRASONOGRAPHY

Name Shri. Ram Kish Ji Age/Sex.....CR. No.....

Referring Physician /Unit /OPD/Ward / Bed.....

ULTRASOUND Hepatobiliary/Whole Abdomen/KUB/Pelvis/FNAC/Retroperitoneum/.....

Ultrasound No. .... Date 06/08/19 Clinical Diagnosis.....

**REPORT :** Left lower limb Arterial Doppler.

Left Superficial femoral, popliteal, Ant. tibial and post. tibial arteries are showing echofree lumen with wall to wall colour filling and triphasic waveform.

Dorsalis pedis artery is also showing normal colour flow and waveforms.

Imp- Normal study  
Pran

ULTRASONOGRAPHY

Name ..... Ram Kesh ..... Age/Sex ..... 65 yoy/m ..... CR. No. .... 2014476802

Referring Physician /Unit /OPD/Ward / Bed.....

ULTRASOUND Hepatobiliary/Whole Abdomen/KUB/Pelvis/FNAC/Retroperitonium/ .....

Ultrasound No. .... Date 19/12/2019 ..... Clinical Diagnosis.....

REPORT :

Doppler BIL Arterial System

→ BIL CFA, SFA, Popliteal Av. Shows  
① triphasic colour flow and ② velocity.

→ BIL ATA, Post<sup>r</sup> H'bial and Ponsals  
pedis Ar. was checked at ankle  
Shows ① triphasic colour flow  
and ② velocity.

Imp :- ① Arterial Doppler Study.

W. B.  
(Radiologist)  
Dr. Raghunandan

SANJAY GANDHI POSTGRADUATE INSTITUTE OF MEDICAL SCIENCES, LUCKNOW

Department of Radiodiagnosis and Imaging

ULTRASONOGRAPHY

Name Han. Ram Keshri Ji Age/Sex 52/M CR. No. 2014472802

Referring Physician / Unit / OPD / Ward / Bed.....

ULTRASOUND Hepatobiliary/Whole Abdomen/KUB/Pelvis/FNAC/Retroperitonium/ Doppler B/L U

Ultrasound No. .... Date 28/9/24 Clinical Diagnosis past h/o @LL aort. thrombs. Post angioplasty stents

**REPORT :** dr. Raghunandan Prasad

B/L CFA, SPA, pop. A, AAA & PTA show good triphasic flow. Mild atherosclerotic wall thickening & calcification without any significant stenosis.

Adv

- Continue same medication
- Repeat doppler & follow up after 1 year

[Signature]  
Sr. Radiologist  
(Radiologist)

Sanjay Gandhi Postgraduate Institute of Medical Sciences, Lucknow  
Department of Cardiology

CONSENT FOR INVASIVE CARDIAC/VASCULAR PROCEDURE

1. I unreservedly, and in my full senses, give my informed consent for Cardiac Catheterization based diagnostic and/or interventional procedure and under any kind of anaesthesia, all risks of the same having been explained to me by the doctor on duty
2. I do understand and have been explained by the doctor on duty the definite possibility of occurrence of any of the following during or after the procedure including
  - i. TIA/ Stroke(paralysis)
  - ii. Acute closure or perforation of the artery/ stent leading to Heart attack.
  - iii. Need for emergency open heart surgery
  - iv. Need for blood transfusion
  - v. Local puncture site complications including bleeding/hematoma/Ischemia to the extent of leading to total limb loss.
  - vi. Contrast agent related complications including allergy and/or contrast induced nephropathy leading to dialysis and or death.
  - vii. Chance of recurrence of similar problem both in short term and in long term future
  - viii. Death for any explained or unexplained reason.

Name of Patient Ramkesh Signature \_\_\_\_\_ Date 23/02/19  
Name Legally Accepted Representative(LAR)/Guardian Nayana Signature Nayana  
Relationship Daughter Contact No. 9616233445  
Signature of Doctor on duty \_\_\_\_\_ Name of Doctor \_\_\_\_\_  
Date 23/2/19 Time \_\_\_\_\_

3. Having studied the angiographic details of my case the doctor on duty/ treating doctor has discussed the possibility and risks and benefits of both angioplasty and/or CABG/surgery for my case and having understood the same I have opted for angioplasty and give my consent for the same to be performed on myself/my patient.

Name of Patient Ramkesh Signature \_\_\_\_\_ Date \_\_\_\_\_  
Name Legally Accepted Representative(LAR)/Guardian \_\_\_\_\_ Signature Nayana  
Relationship Daughter Contact No. 9616233445  
Signature of Doctor on duty \_\_\_\_\_ Name of Doctor \_\_\_\_\_  
Date 23/2/19 Time \_\_\_\_\_