


RADIOLOGY

Patient Details : Mr. SAHAB SINGH | Male | 76Yr 5Mth 26Days
UHID : APD1.0011272695 **Patient Location:** 2nd Flr T-I General
Patient Identifier: DELIP338352  Ward/2233
DRN : 221607589 **Completed on :** 27-JUN-2021 11:39
Ref Doctor : Dr. ASHISH SABHARWAL

ULTRASOUND - WHOLE ABDOMEN

Report ::

The Liver is normal in size and outline. It shows a uniform echopattern. No obvious focal pathology is seen. The intra hepatic biliary passages are not dilated.

The Gall Bladder is normal in size, has normal wall thickness with no evidence of calculi. The CBD appears normal.

The Pancreas is echogenic - suggestive of fatty replacement.

Spleen is normal in size and echogenicity. There is no evidence of collaterals.

Both Kidneys are normal in position, outline and echogenicity. No evidence of calculi or calyceal dilatation is seen on both sides.

Right kidney measures 8.7 cm.

Left kidney measures 9.0 cm.

There is no evidence of ascitis or lymphadenopathy. Both Costophrenic angles show no evidence of pleural effusion.

The Urinary Bladder is partially distended and shows irregular focal thickening involving posterior and postero-lateral wall measuring upto 6 mm.

The Prostate is enlarged in size. Its volume being 49.0 cc.

The Seminal Vesicles are normal.

Mr. SAHAB SINGH

APD1.0011272695

DELIP338352

ULTRASOUND - WHOLE ABDOMEN

IMPRESSION:

PROSTATOMEGALY.

FOCAL IRREGULAR THICKENING OF POSTERIOR AND RIGHT
POSTERO-LATERAL WALL OF URINARY BLADDER WALL - SUGGEST
CYSTOSCOPY CORRELATION.

Findings should be clinically corelated

--- END OF THE REPORT ---



Dr. Absar Ahmed

REGISTRAR

Dr. Ashish Sabharwal

MBBS, MS, DNB (Urology)
Sr. Consultant - Urologist and Prostate Specialist
Fellowship in Endourology and Robotic Surgery
Jackson Health System, Miami, USA
DMC No.25218



19/7/2021
1 AM

Mr. Sahab Singh
76y/M/11272695

" Patient seen in EMERGENCY "

- Unable to pass urine since 3 days.
- Pain Abdomen since 6pm on 18/7/2021.

K/C/O Bladder tumor = Enlarged prostate.

S/P TURP + TURBT on 1/7/2021.

Patient was discharged from hospital on 4/7/2021.

Patient was OK for 15 days.

Now unable to pass urine last 3 days.

O/E Bladder Distended.

Foley catheterisation attempted, unable to pass catheter.

Adv - urgent Admission.

- Plan cystoscopy + urethral Dilatation and catheterisation under vision under GA. ASAP.

19/7/2021



For Appointments:

Dr. Ashish Sabharwal Cell : 0091-9999059016

Indraprastha Apollo Hospitals: Sarita Vihar, Delhi-Mathura Road, New Delhi-110076 (India)

Tel.: 91-11-26925858, 26925801, E-mail: urodoc2011@gmail.com

Website: www.blueribbonprostateclinic.com

Discharge Summary

Dept. of UROLOGY

General Information

UHID	APD1.0011272695	Patient Identifier	DELIP340738
Ward/Bed No	2nd FLOOR TOWER - I , II Floor GW-II, Bed no:5251		
Name	Mr. SAHAB SINGH		
Age	76Yr 6Mth 18Days	Sex	Male
Address	H NO B 6 MAWANA ROAD GANGANAGAR, Meerut, Uttar Pradesh		
Primary Consultant	Dr. ASHISH SABHARWAL MD UROLOGY		
Admission Date	19-Jul-2021		
Discharge Date	20-Jul-2021		
Allergies	Not known allergy		
Diagnosis		

Follow up case of prostatomegaly (BPH) and carcinoma bladder (post TURP plus TURBT on 1st July 2021) with acute urinary retention
Anemia (megaloblastic) with (IVC filter in situ)

Present Illness

History of Present Illness

Mr. SAHAB SINGH 76-year-old male presented to Indraprastha Apollo Hospital as follow up case of BPH with carcinoma urinary bladder, post TURP and TURBT on 01.07.2021 with complaint of inability to pass urine since 1 day. Catheterization tried elsewhere but failed. Admitted to Emergency for further management.

Clinical Examination

On Examination Conscious, oriented
 Afebrile
 Pulse Rate: 80/minute
 Blood Pressure: 120/80 mmHg
 Respiratory Rate: 20/minute
 No clubbing / cyanosis / pedal edema / icterus / pallor / lymphadenopathy
 Chest: Bilateral clear
 Cardiovascular system: S1, S2 Normal / No murmur / rub / gallop
 Per Abdomen: Soft, No tenderness, No distension
 Central nervous system : No focal neurological deficit

Course In The Hospital & Discussion

Patient admitted under Dr. Ashish Sabharwal (Sr. Consultant Urology). After admission catheterization with flexible cystoscopy attempted but failed. Planned for cystoscopy and catheterization in operation theater under general anesthesia. After pre anesthetic checkup and written informed consent was taken up for procedure.

Procedure: Cystoscopy + urethral dilatation with catheterization done under general anesthesia on 19.07.2021.

Findings :

Meatus normal urethra, false passage in bulbar urethra
 Bladder neck wide open guide wire placed. Urethral dilatation done.
 20 F Silicon catheter placed over guide wire.

Post operative period was uneventful. Patient is now being discharged under satisfactory condition with following advice and Foley's catheter in situ.

ADVICE ON DISCHARGE

Diet	As advised
Physical Activity	As tolerated
Discharge Medication	TAB Levofloxacin 500 mg per orally once daily <i>x 7 days</i> TAB Pantop 40 mg per orally once daily <i>x 7 days</i> TAB Ultracet 1 TAB per orally as and when required for pain TAB Acitrom 1 and 2 mg per orally 1 TAB alternative day <i>x</i> TAB Folvite 1 TAB per orally once daily Injection Neksium 2 MU intramuscularly in morning <i>} to continue 7 days</i>
Follow Up	Review in physician office with Dr. Ashish Sabharwal with prior appointment. Please confirm your appointment on +911126925858 / 26925801 / 29871050/1051.
Pending Reports	Kindly bring a copy of your bill to collect the pending reports from gate no-4(from respective



11272695

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28/7/2021

Mr. Sahab Singh
76 y/m

S/p OIU for urethral stricture on
19/7/2021.
Foley draining well

Adv.

- Tb. LEVOFLOX 500mg once Daily x 3 day
- Tb. PAN 40mg once Daily x 3 day
- Foley removal on 31/7/2021 (Saturday)
9am
AS

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31/7/2024

Mr. SAHAB SINGH

764/M

1/0 Bladder tumor.

S/P OIU on 20/7/2024

Adv

- ① TB. LEVOFLOX 500mg once daily x 3 days
- ② CIC explained using No. 14ch foley catheter
- ③ Review after 2 weeks
- ④ xylocaine 2% jelly — ①

A
SABHARWAL

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