

Discharge Summary Neurosurgery

Patient Demography Details :

Name : Neeru Dhaka SSN No. : 081038033 Mobile No. : 9412586581
DOB : 01 JUL, 1965 Age/Gender : 57 Years/FEMALE Consultant : Amitabh Goel
DOA : 05 SEP, 2022 07:06 Ward : PPG-IPD NS 4TH FLOOR Att.Physician : Amitabh Goel
Address : DHAKA BUILDING TAXI STAND ROAD, ..., UTTAR PRADESH, 0

Surgeon Name : Dr. Amitabh Goel
Date and Time of Discharge: 10 SEP, 2022 13:18

Diagnosis:
BILATERAL FRONTO- TEMPORO- PARIETAL ACUTE ON CHRONIC SUB DURAL HEMATOMA
ICD CODING: (G89.11)

Presenting Complaints:

Patient presented with history of fall at home around 14/7/2022 and complained of weakness in both the lower limbs since then.

Patient had 2 episodes of vomiting on 4/8/2022.

NCCT Head done showed bilateral fronto- temporo- parietal chronic sub dural hematoma.

Past Medical History:

Known case of polio in right leg since birth.

Known case of hypertension (on antihypertensives and on ecosprin 75 mg OD- patient stopped taking aspirin for last 3 days)

On Examination:

Significant findings during physical examination

CNS: CONSCIOUS, ORIENTED

GCS: E4V5M6

PUPILS B/L EQUAL REACTIVE

B/L LOWER LIMB WEAKNESS

POWER: RIGHT LOWER LIMB: 1/5

LEFT LOWER LIMB- HIP 2/5

KNEE 3+/5

ANKLE 3+/5

General examination:

BP - 140/80mmHg

P/R - 66/min

RR- 26/min

Temp- 98.6FFD F

SPO2- 99% on room air

CVS - S1S2 Normal

RS: B/L, AE normal

P/A: Soft, BS

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Surgery:

BILATERAL MINICRANIOTOMY AND EVACUATION OF SDH DONE ON 5/9/2022

Incision :

RIGHT AND LEFT FTP U SHAPE INCISIONS

Findings :

LARGE ACUTE ON MULTILAYERED CHRONIC SDH

Procedure :

PATIENT IN LEFTLATERAL POSITION. PARTS PAINTED AND DRAPED. LA INFILTRATED. INCISION GIVEN AND DEEPENED. RIGHT P-T MINICRANITOMY. HITCH STITCHES TAKEN.DURA OPENED. MEMBRANE CAUTERISED AND CUT, SDH EVACUATED. THROUGH SALINE WASH GIVEN TILL RETURENED FLUID WAS CLEAR. EVD DRAIN KEPT IN SUBDURAL SPACE. DUROPLASTY DONE USING PERICRANIUM. BONE FLAP FIXED USING MINIPLATES AND SCREWS. ROMOVAC DRAIN KEPT AND FIXED. WOUND CLOSED IN LAYES. PATIENT POSITION CHANGED TO RIGHT LATERAL . PARTS PAINED AND DRAPED.SAME PROCEDURE DONE ON LEFT SIDE..

Course in Hospital:

Patient presented with above mentioned complaints. After PAC clearance patient was taken up for surgery. Post op patient was shifted to ICU for further management. In ICU patient complained of chest heaviness and managed accordingly. After stabilization patient was shifted to ward. On 6/9/2022 night in ward, patient complained of shortness of breath and tachypnea and was shifted to ICU. NCCT Head done showed rest of the brain parenchyma appears normal. The cerebellum and IVth ventricle are normal. Both lateral ventricles and the IIIrd ventricle are normal. No shift of midline structures is seen. The basal cisterns, sulci and fissures are normal. Bilateral subdural collections containing blood and air are seen with drainage catheter in situ. Overlying craniotomy changes are seen. The collection on the right side measures approx. 11 mm along the left side measures approx. 12 mm in size. Sutures are seen in overlying scalp. After stabilization patient was shifted to ward. Patient was seen by Neurologist in view of bilateral lower limbs weakness and unable to sit And advice incorporated. At present patient is present patient is neurologically stable and now is being discharged with following advice.

Condition on Discharge:

CONSCIOUS, ORIENTED
GCS- E4V5M6
MOVING ALL FOUR LIMBS
PATIENT IS ABLE TO SIT

Lab Results:

All investigation reports were handed over to the patient.

- 1) AMIKACIN 500MG UD VIAL INJ 500MG IV BID(10&22HRS)
- 2) BUDESONIDE 1MG/ML 2ML UD AMP INJ 1MG/ML INHL Q8H(6,14&22 HRS)
- 3) CEFUROXIME 1.5GM UD VIAL INJ 1.5GM/1VIAL IV Q8H(6,14&22 HRS)
- 4) CREMAFFIN 225ML MIX FRUIT SYP* SYRUP 30 ML PO

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- QHS(DAILY 10:00PM)
 5) DICLOFENAC UD 30GM TUBE GEL, TOP SMALL AMOUNT TOP BID(08&20HRS)
 6) DUOLIN LD 2.5ML RESPULE (1X5) INJ 2.5ML INHL Q8H(6,14&22 HRS)
 7) ETIZOLAM MD 0.25MG UD TAB 1 TABLET PO BID(08&20HRS)
 8) LEVETIRACETAM UD 500MG INJ 500MG IV BID(08&20HRS)
 9) NORMAL SALINE UD 0.9% 500ML PLASTIC BTL @40ML/HR IV CONTINUOUS
 10) ONDANSETRON 2MG/ML 2ML UD AMP INJ, SOLN 2MG/1ML IV Q8H(6,14&22 HRS)
 11) PANTOPRAZOLE INJ, PWDR 40MG IV QAM(06HRS)
 12) PARACETAMOL UD 1G/100ML INJ 1GM/100ML IV Q8H(6,14&22 HRS)
 13) PHENYTOIN UD 100MG TAB 1 TABLET PO TID(6,14&22HRS)
 14) TELMISARTAN UD 20MG TAB 20MG PO QHS(DAILY 10:00PM)

Neeru Dhaka
Patient Name :
SSN No : 081038033

Advice:

Medications on Discharge: *wef 10/9/22*

- TAB CEFTUM 500 MG TWICE DAILY X 7 DAYS ✓ 1 - 0 - 1
 TAB LEVIPIL 500 MG TWICE DAILY X TO CONTINUE ✓ 1 - 0 - 1
 TAB EPTOIN 100 MG THRIE DAILY X TO COTINUE ✓ 1 - 1 - 1
 TAB ETIZOLAM MD 0.25 MG TWICE DAILY X 10 DAYS ✓ 1 - 0 - 1
 TAB TELMISARTAN 20 MG AT BED-TIME X TO CONITNUE (AS PER BP) ✓ 0 - 0 - 1
 TAB PANTOCID 40 MG ONCE DAILY X 7 DAYS (BEFORE BREAKFAST) ✓ 1 - 0 - 0
 TAB PARACETAMOL 650 MG THRIE DAILY X 7 DAYS ✓ 1 - 1 - 1
 TAB HIFENAC 100 MG TWICE DAILY X 3 DAYS AND THEN SOS FOR PAIN (AFTER MEALS) ✓ 1 - 0 - 1
 SYP LOOZ 20 ML AT BED-TIME/ SOS FOR CONSTIPATION
 NEB WITH DUOLIN THRIE DAILY X 5 DAYS 1 - 1 - 1
 NEB WITH BUDECORT TWICE DAILY X 5 DAYS 1 - 0 - 1

Advice:

- CARE OF WOUND
- PHYSIOTHERAPY AS ADVISED
- NORMAL DIET
- REGULAR BLOOD PRESSURE MONITORING UNDER LOCAL PHYSICIAN SUPERVISION

Follow Up Advice:

REVIEW WITH DR. AMITABH GOEL, SENIOR DIRECTOR NEUROSURGERY, IN OPD ROOM NO. 1032 ON 13/9/2022 WITH PRIOR APPOINTMENT (8860333777).
 OPD TIMING: TUESDAY AND FRIDAY: 12 TO 4:00 PM

Review in Emergency for Loss of Power or Prolonged Numbness or weakness, pain at surgical site, oozing from surgical site, seizure, headache, vomiting, giddiness or any other new symptoms as explained.

"Report back to your doctor at the earliest in case of any problem/ medical emergency.

Avoid changing / stopping medicines without any medical guidance.

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Dr. Amitabh Goel
Senior Director Neurosurgery
Max Hospital DUTY MEDICAL OFFICER

I _____ have understood and have been given an opportunity to clarify my concerns in the language I/we understand & hereby acknowledge receipt of the discharge summary.

SSN No. : 081038033
Patient Name : Neeru Dhaka

Patient/Attendant _____ Nurse _____

/s/ Amitabh Goel
Senior Director
Signed: 10 SEP, 2022 16:21

Entered Date : 10 SEP, 2022 13:18

Prepared By: Amitabh Goel

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