

Discharge Summary

Dept. of Respiratory Medicine, Critical Care & Sleep Medicine

General Information

UHID	APD1.0010819613	Patient Identifier	DELIP189364
Ward/Bed No	2nd Floor Tower-II , 2nd Floor T2 Ward, Bed no:3219		
Name	Mrs. MOHINI DEVI		
Age	75Yr 0Mth 9Days	Sex	Female
Address	8/153 E-5 LAWYERS COLONY BYE PASS ROAD, Agra, Uttar Pradesh		
Primary Consultant	Dr. RAJESH CHAWLA Respiratory Medicine, Critical Care & Sleep Medicine		
Admission Date	27-Dec-2017		
Discharge Date	10-Jan-2018		
Allergies	No known allergy		

Diagnosis

Bilateral pneumonia (Resolved)
COPD
Systemic hypertension
Septic shock (recovered)

Present Illness

History of Present Illness

Mrs. MOHINI DEVI, 75 years old female patient is a known case of COPD and systemic hypertension, admitted in outside hospital with complaint of generalized swelling and decreased appetite for 3-5 days. She was managed with IV antibiotics and other supportive treatment. Serial ABG showed Co2 retention and was intubated in view of altered sensorium and started on ventilator support. She was diagnosed as COPD, Type 2

respiratory failure, AKI, Dyselectrolytemia. Shifted to IAH for further evaluation and management.

Clinical Examination

On Examination Drowsy but arousable
 SPO2 - 95%, FIO2 - 0.5 (ACMV mode)
 Afebrile
 Pulse Rate: 134/minute
 Blood Pressure: 110/62 mmHg On noradrenaline
 Respiratory Rate: 16/minute
 No clubbing / cyanosis / pedal edema / icterus / pallor / lymphadenopathy
 Chest: Bilateral crepitus +
 CVS: S1, S2 Normal / No murmur / rub / gallop
 P/A: Soft, No tenderness, No distension
 CNS: No focal neurological deficit

ABG : 7.02/109/208/28.8

LOCAL EXAMINATION Investigations (Outside) on 27.12.2017 showed Hb- 14.9, TLC - 18700, PLT - 2.18 lakh,
 Sodium - 125, Potassium - 5.5,

Course In The Hospital & Discussion

Patient was admitted in ICU under Dr. Rajesh Chawla (Sr. Consultant, Respiratory Medicine, Critical care and Sleep Medicine). ABG showed respiratory acidosis. Chest X-ray showed bilateral Lower zone haziness, right effusion, cardiomegaly. Patient was managed with ventilator support, IV antibiotics (Inj. Meropenem, Targocid), IV steroids, Diuretics, nebulization and other supportive measures. Routine blood investigations showed urea - 107, Creatinine - 1.9, Sodium - 128, Potassium - 5.3, Hb- 15.4, TLC- 25820, PLT - 1,85,000, Urine routine showed 10 - 15 pus cells. Urine culture showed no growth. Reference was given to Dr. D.K. Agarwal (Sr. Consultant, Nephrology) in view of deranged KFT and his advice followed, serial ABG showed gradual improvement. Patient was gradually weaned off and extubated on 02.01.2018 and inotropic support was tapered off. Her dyselectrolytemia were gradually corrected. She was started on BiPAP support and her symptoms improved gradually. Serial Chest X-ray showed gradual improvement and shifted to ward on 08.01.2018. Patient is symptomatically better, hemodynamically stable, maintaining saturation 97-98% with 1-2 L O2 /min and on intermittent BiPAP and is being discharged with following advice

ADVICE ON DISCHARGE

Diet As advised
Physical Activity As advised
Discharge Intermittent BiPAP 12/6 with 1-2 liter oxygen to keep SPO2 > 92%.

Medication

Cap Pantocid 40 mg per orally twice daily \odot \odot Before Breakfast

Duolin Nebulisation 2.5 ml thrice daily \odot \odot \odot

↳ Foracort nebulisation 1 mg twice daily

Syp Aptivate 2 tsf pre meals twice daily

Tab Wysolone 10 mg per orally once daily for 3 days (After breakfast) \odot

Tab Dytor 10mg, once a day \odot

↳ Followed by 5 mg per orally once daily for 3 days and stop

Follow Up

Review in physician office with Dr. RAJESH CHAWLA with prior appointment after 2 weeks.

Please confirm your appointment on +911126925858 / 26925801 / 29871270/1271

Review in Nephro O.P.D with CBC, KFT, Urine R/M after 7 days with prior appointment.

AVAIL OF APOLLO HOME SAMPLE COLLECTION SERVICE (DELHI & NCR COVERED)

MONDAYS TO SUNDAYS : 7 AM – 5 PM

PLEASE CALL 011-29871090 & BOOK YOUR APPOINTMENT

Please note that Home Collection is complimentary

Pending Reports

Kindly bring a copy of your bill to collect the pending reports from gate no-4 (from respective labs & Gate No:7 for Radiology Reports) on week days, Monday to Saturday (8am-8pm) and Sunday (8am-2pm)

IF you have any of the following symptoms, please contact your doctor or our CMO on

+911126925888 / 26825555 / 29872001/2003

1. Fever Of 101°F
2. Onset of new pain or worsening of previous pain.
3. Vomiting.
4. Breathing difficulty.
5. Altered level of consciousness.
6. Discharge from the operative wound.
7. Worsening of any symptoms.
8. Other significant concerns.

Please visit our website: www.apollohospdelhi.com

Dr. RAJESH CHAWLA

Respiratory Medicine, Critical Care & Sleep Medicine

Primary Consultant

Dr. Abhishek
Registrar/Resident

Please understand your discharge prescription from your doctor before using the medicines.

You can contact Emergency Room Physician, Indraprastha Apollo Hospitals MEDICAL CORPORATION LIMITED at 26925858 or 1066.

Typed by 150164



Indraprastha Apollo Hospitals
Sarita Vihar, Delhi - Mathura Road, New Delhi - 110 076 (INDIA)

Tel. :91-11- 26925858, 26925801, Fax : 91-11-26823629, Emergency Telephone No. : 1066
Website : www.apollohospdelhi.com