

Discharge Summary

Dept. of GASTROENTEROLOGY

LEAVE AGAINST MEDICAL ADVICE

General Information

UHID	APD1.0010498573	Patient Identifier	DELIP387022
Ward/Bed No	2nd FLOOR TOWER - I , 2nd Flr T-I General Ward, Bed no:2208		
Name	Mr. IRSHAD AHMAD		
Age	55Yr 7Mth 0Days	Sex	Male
Address	MOHALLA MUGLUSHAH, AJMAL KHAN ROAD, NO EMAIL, Najibabad, Uttar Pradesh		
Primary Consultant	DR. NARINDER MOHAN TIKOO GASTROENTEROLOGY		
Admission Date	27-Jul-2022		
Discharge Date	01-Aug-2022		
Allergies	Not Known		
Diagnosis	<p>Acute pancreatitis (Biliary)</p> <p>CT severity 4/10</p> <p>Cholelithiasis</p> <p>Hypertension</p> <p>Type II diabetes mellitus</p>		

Present Illness

History of Present Illness

Mr. IRSHAD AHMAD 55 year old male patient is a known case of type 2 diabetes mellitus, hypertension presented with complaints of abdominal pain predominantly in epigastric and right hypogastric radiating towards back

since 1 day. He also had vomiting twice. No history of fever, abdominal distention, cough. He was admitted in Indraprastha Apollo Hospital for further evaluation and management.

Clinical Examination

On Examination Conscious, oriented
Afebrile
Pulse Rate: 96/minute
Blood Pressure: 150/90 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: mild distention + tenderness + in epigastric and right hypochondrium / bowel sound sluggish
Central nervous system: No focal neurological deficit

Course In The Hospital & Discussion

Patient was admitted and investigation done revealed Hb 15.6, WBC 10500, platelet count 1.82, Total / direct Bilirubin 6.1 / 4, SGOT / SGPT 454/380, ALP / GGTP 151/1084, Albumin 4.2.

Amylase 1115, lipase 2840, KFT WNL, INR 1.1, urine protein 3+, WBC 10-12/ HPF, Glucose 1+, conservative management started with IV fluids, IV antibiotics and other supportive measures. USG whole abdomen done suggestive of hepatomegaly with Grade II fatty liver, cholelithiasis, mild Prostatomegaly, mild bulky pancreas with streak of peripancreatic fluid collection. MRCP done revealed cholelithiasis without evidence of any choledocholithiasis. There are features of pancreatitis without evidence of any areas of necrosis. Patient improved symptomatically a bit on conservative management. Reference was given to Dr. A. Siddiqui and his advice incorporated in the line of management. Placement of NJFT planned and suggested but initially patient refused to undergo the procedure but later on with proper valid consent NJFT placement done endoscopically and NJ feed started. CT abdomen done suggestive of acute interstitial pancreatitis with peri pancreatic fat stranding. CT severity index of 4/10. Diffuse fatty infiltration in liver. Bilateral renal calculi. Patient improved symptomatically but needed further hospital management. Patient wants to be discharged and go home against medical advice understanding well the nature outcome and prognosis of the disease, taking all the responsibility. Hence being discharged against medical advice.

Ongoing treatment:

IV fluid NS/RL at 80 ml/hour IV infusion. $\approx 10/10$

Inj. Pantocid 40 mg intravenously twice daily

Inj. Emeset 4 mg intravenously twice daily

Inj. Meropenem 1 gm intravenously thrice daily $- 10$

Inj. Tragocid 400 mg intravenously once daily $- 5$



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For Online appointment : www.askapollo.com

Inj. Perfalgan 1 gm intravenously thrice daily
Inj. Tramadol 50 mg intravenously twice daily
Tab. Ursocol SR 450 mg 1tab per orally twice daily

15
10
10

ADVICE ON DISCHARGE

Pending Reports Kindly bring a copy of your bill to collect the pending reports from gate no-4 (from respective labs and Gate No:7 for Radiology Reports) on week days, Monday to Saturday (8am-8pm) and Sunday (8am-2pm). You can also download the reports from Apollo 24|7 app. To login, kindly use your registered mobile number.

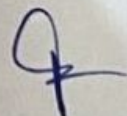
IF you have any of following symptoms, Please contact your doctor or our Emergency Physician on +911126925888 /26825555 /29872001/ 2003.

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.

"Antibiotics are Scheduled drugs under law. Never self-medicate or use antibiotics without doctor's prescription."

Thank you for choosing Apollo Hospital for your healthcare needs.

DR. NARINDER MOHAN TIKOO
GASTROENTEROLOGY
Primary Consultant


Registrar/Resident