



**DISCHARGE SUMMARY**

Name	Ms. NANCY DHUNNA	Regn No.	1920-0362
Guardian	D/O MR ASHOK KUMAR DHUNNA	Age/Sex	35 Yrs /F
Consultant	Dr. RAJESH GUPTA UNIT	Admitted on	28/Apr/2019 3:36 PM
Mobile No.	9718898040	Discharge on	08/May/2019 1:49 PM

**DIAGNOSIS**

- LEFT PYELONEPHRITIS WITH SMALL ABSCESSSES WITH UROSEPSIS WITH ACUTE ON CKD WITH HYPERKALEMIA WITH ANEMIA (IDA)
- K/C HTN, CKD, HYPOTHYROIDISM

**RESUME OF HISTORY**

36yrs old patient , no addiction, hypertensive, non diabetic was admitted with c/o high grade fever with chills, burning micturition

**ON EXAMIINATION**

On admission- patient's physical examination showed- conscious, oriented, Temp-99°F, Pulse-82/min, BP-150/90mmHg, SPO2-97% at room air, chest -B/L clear, CVS-S1S2 Normal, P/A-soft. BS+ & CNS-WNL.

**COURSE IN THE HOSPITAL**

Patient was treated conservatively with Inj Meromac, Tab loxof, Tab Concor, Tab Amlong, Tab Udiliv, Inj Cal GLuconate, Inj Pantop, K-Bind Sachet, Tab Nodosis-DS, Tab Thyronorm, Tab Pantop, Tab Lizomac and supportive measures.

Opinion of Nephrologist (Dr. Deepak Kalra) and Eye Specialist (Dr. Meetu Narang Vohra) were taken.

Now patient is symptomatically better, hemodynamically stable & is being discharged with proper advice.

Echo :- Dilated LA, EF-55%, LVDD-Gr-II, Mild MR

**MEDICATION**

- INJ MEROMAC 500 MG I.V. IN 100 ML NS TWICE DAILY X 3 DAYS
- INJ XYLOMONAS 1 MILLION UNITS I.V. IN 100 ML NS TWICE DAILY X 3 DAYS
- INJ DARGEN 25 MG S/C ONCE WEEKLY ( TUESDAY )
- TAB CONCOR-AM 2.5 MG ONCE DAILY - 10 AM
- TAB EUTHYROX 125 MCG ONCE DAILY EMPTY STOMACH
- TAB NODOSIS-DS THRICE DAILY (1-1-1) (9AM - 2PM - 9 PM)
- CAP PANTOCID -DSR ONCE DAILY BEFORE BREAKFAST
- BLOOD PRESSURE MONITORING TWICE DAILY IN SITTING & RESTING STATE

*Nancy Dhunna*