**DISCHARGE NOTE (№603)**

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| **Surname:** | LANGE |
| **Name:** | Markus |
| **D.O.B.:** | 24.09.1981 |
| **Age:** | 39 |

**Hospitalization:** 2021-06-10

**Discharge:** 2021-06-10

**DIAGNOSIS:** Neoplasm of the dorsal side of the PIPJ of 2nd finger of the left hand. Multiple lipomas.

**Complaints:** for the presence of a volumetric formation on the dorsal side of the 2nd PIPJ of the left hand, protruding above the skin; for the presence of multiple subcutaneous formations of the upper extremities, the largest of which of the left forearm causes discomfort in contact with surfaces, clothing.

**OPERATION 2021-06-10:** Removal of the neoplasm the dorsal side of the PIPJ of 2nd finger of the left hand, reconstruction of the skin defect with the local flap. (Dr. M. Sautin).

**ANAMNESIS:**

**Illness history:** According to the patient, he discovered pain and the presence of a rounded mass in the area of ​​the 2nd finger of the left hand. Applied to EMC, consulted by a hand surgeon by reference from a dermatologist.

Also has the anamnesis of lipomas of the left forearm - 10 years. One lipoma was removed in a third-party clinic. Over the past few years, he has noted the proliferation of a large lipoma in the area of ​​the border of the middle and distal third of the left forearm along the palmar-elbow surface, which causes discomfort in clothes when in contact with surfaces. Due to need to clarify the nature of the neoplasm, surgical treatment for the neoplasm of 2 fingers of the left hand was recommended - removal of the neoplasm with histological examination; MRI of the left forearm for planning lipoma removal. The patient agrees with the proposed tactics, given hospitalization for planned surgery.

**Medical history:** Chronic diseases - denies. Allergies - cat fur, dust, to medications - denies. Constant medication administration - denies. Surgical interventions and earlier invasive procedures - removal of a lipoma of the left forearm. Denies infectious diseases, tuberculosis.

**PHYSICAL EXAMINATION**: Condition is satisfactory. Clear consciousness, oriented. Skin is intact, normal color. Breathing is carried out in all parts of the lungs. Breathing 16/min, HR 68, AP 125/75. The abdomen is soft, painless on palpation. There were no abnormalities of the internal organs and systems functions.

**Local status:** Left upper limb without immobilization. The skin is of normal color, temperature, without damage. Movement in the joints of the hand, wrist, in the elbow joint - full in comparison with the contralateral side.

On the dorsum of the proximal interphalangeal joint of the 2nd finger of the left hand, a round formation of a densely elastic consistency is present in the projection of the joint, not fixed to the tendon or to the underlying tissues, the skin over the neoplasm is changed - compaction, hyperemia, exfoliation. Offsets with the skin. There are no signs of acute neurocirculatory disorders in the hand at the time of admission.

When examining the forearm, volumetric rounded formations of a densely elastic consistency are determined in the region of the middle third of the forearm along the palmar-elbow edge, not associated with the underlying tissues, the skin over the neoplasms is not changed. The neoplasms are painless on palpation. Shift relative to the skin. Postoperative scar in the projection of the middle third of the forearm - after removal of one of the similar formations (lipoma). Lipomas of the right arm and forearm as well. No signs of neurocirculatory disorders in the limb.

**OPERATION 2021-06-10:** Removal of the neoplasm the dorsal side of the PIPJ of 2nd finger of the left hand, reconstruction of the skin defect with the local flap. (Dr. M. Sautin).

The material was sent for histological examination.

**ON DISCHARGE:** Patient status is satisfactory. No inflammation signs, light swelling on operated upper extremity, no neurovascular dysfunctions on the left upper extremity.

The patient is discharged under local orthopaedist’s or our clinic doctors’ follow up.

**RECOMMENDATIONS:**

1. **Elevated position** of the left hand;
2. **Ice packs** on the left hand for 15-20 min 3-4 times per day;
3. **Immobilization** of the left hand in a splintduring **2 weeks** after the wire removal;
4. **Movements** in the joints of the left upper limb in the amount available in the orthosis from the first day after the operation;
5. **Dry soft bandage** on the second finger of the left hand for 2 weeks after the operation;
6. **Dressing change**s for postoperative wound once every 3-5 days on an outpatient basis using alcohol-free antiseptics (betadine, chlorhexidine, miramistin or analogs);
7. First dressing change and replacement of the splint – **June 11, 2021** by appointment;
8. **Removal of stitches** in 14 days after surgery;
9. In case of pain - **Nurofen 400 mg**  1 pill after after meal, up to 3 pills a day;
10. In case of pain - **Efferalgan 500 mg**  1 pill after after meal, up to 6 pills a day;
11. In case of pain - **Nimesil 100 mg** 1 sachet up to 2 times a day strictly after meals;
12. **Controloc 20 mg** 1 pill a day for the period of painkillers administration;
13. **Rehabilitation therapy** for the finger(consultation of a rehabilitation doctor at ECSTO).

**Orthopedic surgeon, MD** Dr. B. GAZIMIEVA

**Orthopedic surgeon, MD, PhD** Dr. M. SAUTIN

**Chief doctor, medical director, MD, PhD** Prof. A. KOROLEV