

### Maternity & Children Hospital

# مستشفى الولادة والأطفال ببريدة

Mazen Abdalhkim Khalid Almshikh Name

**NEPHROLOGY** Clinic at the

3 Yr Male Gender / Age

**IBTESAM ALSAUDON** Doctor

into I have

265080 Patient ID

210338087 Invoice No

1189305046 Passport/Nat. ID

: 16-Sep-2018 Birth Date

05005009 Procedure ID

190 18 41,

: MEDICAL REPORT Procedure Name

06/10/2021 12:50:00 Modified Date **NEPHROLOGY** Referral Clinic

: 05-October-2021 Invoice Date Performing Doctor : IBTESAM ALSAUDON

# MEDICAL RECORD DEPARTMENT

#### Diagnosis:

3 years old boy with:

-Bilateral vesico-ureteric reflux, grade V on the right side and grade III on the left side.

-Right small kidney as sequelae

Mazen is a 3 years old boy, was referred from pediatrician to nephrology clinic on date 14/9/2021 with suspicion of small kidney History: His condition was diagnosed antenatally, with history of oligohydramnios. He kept under neonatologist follow up, unfortunately no

medical report ,or serial ultrasound . On date 28/7 /2021, his condition readdress again during his admission in PMW, with history fever, managed as case of ? UTI, abdominal ultrasound done for him show small kidney, for that, he referred to nephrology clinic

He is asymptomatic , pass urine , no fever , no evidence of UTI

NO Family history of urologic disorder

HOSPITAL COURSE: He kept under regular follow up in nephrology clinic, workup completed as shown, was started on antibiotic prophylaxis after result of MCUG (5/10/2021)

plan to:

- refer him to pediatric urologist,

- to do nuclear medicine study ( assess split renal function , look for evidence of renal scar )

-monitor his renal profile ,bp , progression clinically ( for UTI ), Radiologically by serial us

last seen on date 5/10/2021, was doing fine, without active issue

Physical examination : He look well ,active , euvolemic

wt 13.7 kg, HT 100 cm Vital signs: BP 99/64

CVS: s1+S2

Chest : equal bilateral breath sound,

Abdomen: soft and lax

Investigation CBC: WBC 4.55, Hb 12.6, PLT 273

U/E : Creatinine 31 ,BN 4.5 , other electrolytes :acceptable

blood gas: PH 7.44, PCO2: 28, HCO3: 19

Urine C/s : no growth Radiological images :

On 29/7/2021 - Initial U/S ABDOMEN:

Liver measures= 95mm.(normal size for age=85mm.), homogenous echopattern, no focal lesion or intra-hepatic biliary dilatation detected, no periportal fibrosis, smooth outer surface

-Right kidney small in size measures= 49 mm.x 26 mm.x 30 mm.(normal kidney)



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longitudinal measurement for age=67mm.).

- •Left kidney minimally enlarged in size(compensatory hypertrophy) measures= 82 mm.x 37 mm.x 37 mm.
- Both kidneys are normal in site, normal echogenicity, no stone or focal lesion detected,

the right renal pelvis measures=5mm., the left kidney seen with minimal renal sinus fullness and left renal pelvis measures=5mm.

•The urinary bladder seen normal, no stone or focal lesion detected.

US abdomen done on 30 / 9 /2021 showed:

 Liver measures= 94mm.(normal size for age=86mm.), homogenous echopattern, no focal lesion or intra-hepatic biliary dilatation detected, no periportal fibrosis, smooth

outer surface. • C.B.D. = 2mm. PV= 6mm. • Gall bladder normal in size, normal wall thickness, no stone or focal lesion detected.

- Spleen normal in size measures= 58 mm., homogenous echopattern, no focal lesion detected.
   Pancreas and para-aortic region seen normal, no evidence of enlarged para-aortic
- detected. Pancreas and para-aortic region seen normal, no evidence of enlarged para-aortic lymph nodes detected.
- •Right kidney small in size measures= 45 mm.x 20 mm.x 20 mm.(normal kidney longitudinal measurement for age=67mm.).
- Left kidney slightly enlarged in size (compensatory hypertrophy)measures= 79 mm.x
  35 mm.x
  35 mm.
- Both kidneys are normal in site, normal echogenicity, no stone or focal lesion detected, no hydronephrosis.
- The urinary bladder seen normal, no stone or focal lesion detected.
- No evidence of abdominal or pelvic free fluid collection detected

On date : 30-9-2021 M.C.U.G STUDY :

Findings:•Filling and opacification of the urinary bladder with diluted non-ionic contrast medium through urethral catheter shows smooth outlining, no pathological filling defect or diverticulum formation.

- Bilateral vesico-ureteric reflux, grade V on the right side and grade III on the left side.
- Normal opacification of the urethra seen during micturation phase, no filling defect or

Stenosis

Medication: Bactrim 2mg/kg OD -as prophylaxis Abx

This medical report was issued , upon his parent request .

Recommendations /

العمل	مقر		

**IBTESAM ALSAUDON** 

Place of Work /

Occupation /

Dr. Alamin Mohammed Sabbahi

Mousa Al Hazazi

Medical Director

**HOD - Medical Report** 

Verified By