

POST-OPERATIVE ASSESSMENT REPORT General Hospital - Surgery Department

Patient Name: Ashmitha B
Patient ID: ASH-2026-001
Surgery Date: January 28, 2026
Follow-up Visit: February 6, 2026 (Day 9 Post-Op)
Attending Physician: Dr. Michael Chen, MD, FACS

VITAL SIGNS:

Temperature: 37.5°C
Blood Pressure: 122/78 mmHg
Heart Rate: 85 bpm
Respiratory Rate: 14 breaths/min
Oxygen Saturation: 97% (Room Air)
Weight: 68 kg
Pain Level: 3/10 (well-controlled on current regimen)

SURGICAL SITE EXAMINATION:

Incision: Clean, dry, and intact
Healing: Primary intention, no dehiscence
Drainage: None
Redness: Minimal, normal for healing phase
Swelling: Mild, decreasing since last visit
Warmth: Normal skin temperature
Staples/Sutures: Intact, removal scheduled for Day 14

PAIN ASSESSMENT:

Current Pain Score: 3/10
Pain Type: Mild incisional discomfort
Pain Management: Acetaminophen 500mg PRN
Pain Trend: Decreasing daily
Sleep Impact: Minimal disturbance

FUNCTIONAL STATUS:

Mobility: Ambulating independently
Activity Level: Medium (increased from Low)
Range of Motion: 75% of baseline (improving)
Self-Care: Independent with all ADLs
Appetite: Good, tolerating regular diet
Sleep Pattern: 6-7 hours nightly

CURRENT MEDICATIONS:

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- Acetaminophen 500mg PO Q6H PRN pain
 - Multivitamin daily

- Stool softener as needed

ASSESSMENT:

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- ✓ Excellent post-operative recovery progress
 - ✓ Surgical site healing appropriately - no infection signs
 - ✓ Pain well-controlled with minimal medication
 - ✓ Patient compliance with post-op instructions excellent
 - ✓ No complications: No fever, no wound infection, no bleeding
 - ✓ Vital signs stable and within normal limits
 - ✓ Activity level progressing as expected

PLAN:

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1. Continue current pain management regimen
 2. Gradual increase in activity - start light walking 15-20 min daily
 3. Wound care: Keep incision clean and dry, no bathing until Day 14
 4. Suture removal scheduled: February 11, 2026
 5. Return to clinic if: Fever $>38.5^{\circ}\text{C}$, increased pain, drainage, redness
 6. Next follow-up appointment: February 20, 2026
 7. Cleared for return to desk work on February 13, 2026
 8. No heavy lifting (>10 lbs) until 6 weeks post-op

PATIENT EDUCATION PROVIDED:

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- ✓ Warning signs of infection discussed
 - ✓ Activity restrictions reviewed
 - ✓ Pain management strategy explained
 - ✓ Wound care instructions reinforced
 - ✓ Follow-up schedule confirmed

Patient demonstrates understanding and verbalizes no concerns.

Recovery Prognosis: Excellent

Expected Full Recovery Timeline: 4-6 weeks

Provider: Dr. Michael Chen, MD, FACS

Nurse: Jennifer Williams, RN, BSN

Report Status: FINAL

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