

Patient Demography Details :**Discharge Summary Neurology**

Name : Shashwat Singh	Patient ID : MDDN.482558	IP No.	: 166677
DOB : 02 JAN, 2006	Age/Gender : 19 Years/MALE	Primary Consultant 1	: Nitin Garg
DOA : 22 AUG, 2025 20:45	Ward : DDN-4THFLR-MSPB	Primary Consultant 2	: Shamsher Dwivedee
Bed No. : DN-DL-3424	Sponsor Name : GIPSA (24)-Genins India Insurance TPA Ltd (DDN)		
Address : DIT UNIVERSITY DEHRADUN, UTTARAKHAND, 0		Mobile No.	: 7985245912

Patient Name : Shashwat Singh

SSN No. : J80482558

Date and time of discharge: 30 AUG, 2025 10:00**Diagnosis:**

PRIMARY CONSULTANT 1: DR.NITIN GARG
PRIMARY CONSULTANT 2: DR.SHAMSHER DWIVEDEE

DAYS IN NSICU (05 DAYS), NSICU HEAD DR.MUDIT GARG/DR.REKHA GUPTA

DIAGNOSIS

GUILLAIN-BARRE SYNDROME

Presenting Complaints :

A-19-YRS OLD MALE PRESENTED IN ER WITH C/O WEAKNESS IN BOTH LEGS SINCE TODAY MORNING AROUND 8AM (ACUTE ONSET) ASSOCIATED WITH NUMBNESS IN BOTH ARMS DURING STAY IN ER PATIENT ADMITTED UNDER NEUROLOGY CARE IN NSICU FOR FURTHER EVALUATION AND MANAGEMENT.

NO H/O FEVER, LOC, TRAUMA, ABNORMAL JERKY MOVEMENTS, LOOSE STOOLS, PAIN ABDOMEN.

Past Medical History:

NO SIGNIFICANT PAST MEDICAL/SURGICAL HISTORY

Medication During Hospital Stay:

Post discharge consultation is complimentary within 7 days of discharge for surgical patients & within 5 days of discharge for Medical Management patients. For 24x7 home sample collection and medicine delivery, call Max@Home at 8744 888 888.

For any appointment related queries, kindly contact MAX Board Numbers 0135-3500800 & 0135-7193000
Ambulance & Emergency related queries 0135-7193333

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SNo.	Medication Name	Dosage	Route	Schedule
1	ENOXAPARIN 60mg INJ	60MG ENOXAPARIN 60mg INJ	SUBCUTANEOUS	QHS(DAILY 10:00PM)
2	PARACETAMOL UD 10MG/1...	1 GM	INTRAVENOUS	PRN
3	ESOMEPRAZOLE UD 40MG ...	1 TABLET ESOMEPRAZOLE...	ORAL	QAM(06HRS)
4	NEUROBION FORTE TAB	1 TABLET NEUROBION FO...	ORAL	QDAILY(10HRS)
5	CREMAFFIN PLUS 225ML S...	10 ML	ORAL	QHS(DAILY 10:00PM)

Course in Hospital:

PATIENT WITH ABOVE MENTIONED COMPLAINTS WAS ADVISED ADMISSION IN MAX HOSPITAL UNDER NEUROLOGY CARE FOR FURTHER MANAGEMENT. ON 22-AUG-2025 MRI BRAIN SCREENING WAS DONE SHOWED NORMAL MR SCAN OF BRAIN.

**MRI WHOLE SPINE DEGENERATIVE WAS DONE FINDINGS SUGGEST NO SIGNIFICANT SPONDYLOTIC CHANGES ARE SEEN IN THE CERVICO DORSOLUMBAR SPINE. INTERVERTEBRAL DISC SPACES SHOW NORMAL HEIGHT AND SIGNAL INTENSITY. FACET JOINTS ARE GROSSLY WITHIN NORMAL LIMITS. THE C7-D1 DISC SHOWS SMALL POSTERIOR CENTRAL DISC PROTRUSION MILDLY INDENTING THE THECAL SAC WITHOUT FORAMINAL ENCROACHMENT OR NERVE ROOT IMPINGEMENT. MILD POSTERIOR DISC BULGES ARE SEEN AT LOWER LUMBAR LEVELS MINIMALLY INDENTING THE ANTERIOR THECAL SAC WITHOUT ANY FORAMINAL COMPROMISE OR TRaversing/EXITING NERVE ROOT IMPINGEMENT. SPINAL CORD AND CONUS ARE NORMAL IN MORPHOLOGY AND SIGNAL INTENSITY.

IN VIEW OF PATIENT'S CLINICAL CONDITION DIAGNOSIS OF GB SYNDROME WAS MADE AND PATIENT WAS STARTED ON IVIG THERAPY FOR 5 DAYS IN DIVIDED DOSE, DOSE WAS CALCULATED BASED ON WEIGHT(@ 2GM/KG BODY WEIGHT)PATIENT WEIGHT-65KG TOTAL IVIG-130 GM.

***NERVE CONDUCTION STUDY** WAS DONE FINDINGS SUGGEST POLYRADICULONEUROPATHY.

DAYWISE IVIG

DAY-1 30 GM IVIG OVER A PERIOD OF 12 HR AS SLOW INFUSION VIA INFUSION PUMP ON 22-AUG-2025

DAY-2 30 GM IVIG OVER A PERIOD OF 12 HR AS SLOW INFUSION VIA INFUSION PUMP ON 23-AUG-2025

DAY-3 30 GM IVIG OVER A PERIOD OF 12 HR AS SLOW INFUSION VIA INFUSION PUMP ON 24-AUG-2025

DAY-4 20 GM IVIG OVER A PERIOD OF 12 HR AS SLOW INFUSION VIA INFUSION PUMP ON 25-AUG-2025

DAY-5 20 GM IVIG OVER A PERIOD OF 12 HR AS SLOW INFUSION VIA INFUSION PUMP ON 26-AUG-2025

27/8/25 I/V/O PATIENT BEING HEAMO-DYNAMICALLY AND NEUROLOGICALLY STABLE PATIENT WAS SHIFTED TO WARDS.

PATIENT WAS SUBJECT TO REGULAR PHYSIOTHERAPY AS REQUIRED

NOW THE PATIENT IS BEING DISCHARGED TODAY IN NEUROLOGICALLY AND HEMODYNAMICALLY IMPROVING AND STABLE CONDITION

Condition on Discharge:

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Patient Name : Shashwat Singh

SSN No. : 180482558

PATIENT'S VITALS STABLE AT TIME OF DISCHARGE
E4V5M6
MAINTAINING SATURATION ON ROOM AIR

TO STAY IN HOSPITAL VICINITY FOR 1 WEEK

Lab Results:

ALL LABS INVESTIGATIONS DONE IN HOSPITAL WERE HANDED OVER TO PATIENTS ATTENDENTS

Advice on discharge:

TAB NEUROBION FORTE 1 TAB ONCE DAILY
CAP UPRISE D3 60 K 1 CAP WEEKLY X 4 DOSES

NOTE : ***ABOVE MENTIONED MEDICATIONS TO BE CONTINUED TILL NEXT FOLLOW UP ,TO REVIEW AT FOLLOW UP WITH PRIOR APPOINTMENT **

Advice:

Patient Name : Shashwat Singh
SSN No. : 180482558
REGULAR PHYSIOTHERAPY
PLEASE MONITOR PATIENT FOR ANY EVIDENCE OF FEVER, VOMITING, SLEEP DISTURBANCES,ABNORMAL BEHAVIOUR, BLEEDING, BLACK-STOOL,ALLERGY AT ANY SITES .KINDLY REPORT TO EMERGENCY IN CASE OF EMERGENCE OF ABOVE MENTIONED COMPLAINTS.
PLEASE REPORT TO EMERGENCY IF THERE ARE ANY SYMPTOMS OF HEADACHE, GIDDINESS,LOSS OF CONSCIOUSNESS, NEUROLOGICAL-DEFICIT,LOSS OF POWER OF UPPER AND LOWER EXTREMITIES, CONVULSIONS, ABNORMAL BEHAVIOUR.
TO FOLLOW DIABETIC DIET(TAKE DIET CHART FROM DIETECIAN)
NO ALCOHOL,NO TOBACCO

Follow Up Advice:

FOLLOW UP WITH DR. NITIN GARG IN MIND OPD WITH FRESH CBC, RFT, LFT, REPORTS AFTER 7 DAYS ON(MON,WED,FRI).
KINDLY TAKE APPOINTMENT BEFORE COMMING IN OPD. KINDLY CALL ON THESE PHONE NO : 0135-7193000 AND 7895900712

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SSN No. : 180482558 Patient Name : Shashwat Singh

/es/ Nitin Garg
Senior Consultant
Signed: 30 AUG, 2025 10:51

Entered Date : 27 AUG, 2025 11:58

Prepared By: Nitin Garg

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