# **Cytecare** Hospital

**INPATIENT DISCHARGE SUMMARY**

**Patient Name :** Kritika Sharma **Date of Birth :** 02-01-1977

**MRN :** 01-01-00014317 **Inpatient No :** 01-01-IP-33716

**Age :** 36 Y 8 M 17 D **Admission Date :** 21-Jan-202106:35:11

**Gender :** Female **Discharge Date :** 09-Aug-2021

## CONSULTANT: Dr. **XXXXX** C.U, CONSULTANT ONCOPLASTIC BREAST ONCOLOGIST

**FINAL DIAGNOSIS:** Left Breast Giant Fibroadenoma

**CO-MORBIDITIES:** No Comorbidities

## HISTORY OF PRESENT ILLNESS:

She presented to us with left breast lump since 2 yrs for which she was on regular. The left Breast Lump has increased in size compared to previous size.

**OBSTETRIC HISTORY**: Nulliparous female

LMP: 8/1/2020,Irregular cycles

## CLINICAL EXAMINATION:

Temp: 96.6 BP: 110/70

Pulse: 80

## Local Examination:Left breast :

4x3cm firm mobile lump at 1:00, 2x2 cm firm mobile lump at 5-6:00

## Left Axilla: NAD

**Right Breast and Axilla:** NAD

**B/l SC Fossa : NAD**

**INVESTIGATIONS:** USG Breast may and Oct 2019 - features of Fibrioadenoma in Left Breast **FNAC:** Benign Proliferative disease- suggestive of Fibroadenoma with fibrocystic disease **USG breast :** 28/12/2020- b/l breast Fibroadenoma

**Blood counts and biochemistry - On Blood Group** - ‘A’ positive

**On HIV, HBsAg & HCV** -Non Reactive

**OPERATION / PROCEDURE:** Wide Excision of Left Breast Giant Fibroadenoma

**OT NOTES:**

Lesion Marked Pre-Anesthesia in OT using Ultrasound under anesthesia,patient positioned,parts painted and draped. Left Infra-Mammary crease Incision given,Incision deepened till Pectoral Fascia.

Dissection continued in Prerectoral Plane.

Lesion at 5-6: and 1-:00 Dissceted Lesion removed intact.

Wash given-Hemostasis confirmed. Cavities closed using 3-0 Vicrly.

Incision closed in layers after securing Breast Tissue to the Infra-Mammary Crease. Dressing secured. Procedure uneventful. 2 specimen sent for H.P.E

**COURSE IN THE HOSPITAL:** Patient admitted with the above history and necessary investigations were done. Pre-anesthetist opinion was taken and after complete optimization, she underwent Wide Excision of Left Breast Giant Fibroadenoma.Post operatively treated with antibiotics, analgesics, antacids, antiemetics. She is being discharged in a stable condition with the following advice.

## ADVICE ON DISCHARGE:

Syp. Septran 7.5ML-0-7.5ML x 5 days

Syp. Domstal 3.5ml 1-1-1 3 days

Tab. Emeset 4mg 1-1-1 3 days

Syp. Cremaffin Plus 0-0-5ml x 5 days

Tab.Paracetamol 650 mg 1-1-1 x 3 days

Tab.Pantprazole 40 mg 1-0-0 x 5 days Tab. Tolpa D 250mg 1-1-1 x 3 days

**FOLLOW UP :** Drain to be removed when output is < 20ml for 2 consecutive days.

To review on 21.03.2021 (Saturday) with Dr. Poovamma and in OPD with prior appointment.

To follow up on 24.04.2021 with CBC and clinical review in OPD.

To review on 26.03.2021 (Tuesday) for PICC line dressing.

To do PET CT Scan on 31.03.2021 (Monday) for interim assessment and review with report in OPD.

**NOTE: In case of emergency -** complaints of fever, vomiting, fatigue, and any new complaint (**Contact No: 080-22176767 - 24 / 7)**

***Dr. Poovamma C.U, MBBS, MS. Fellowship in Breast Surgery Consultant Breast Oncologist***