



DISCHARGE SUMMARY

NAME OF THE PATIENT: Mr. SONAIMUTHU
AGE / SEX: 71 Yrs / Male
ADDRESS: Manamadurai
DATE OF ADMISSION : 21/01/2019
DATE OF DISCHARGE: 25/01/2019
CONSULTANT: DR. Anand MBBS, MD.
DIAGNOSIS: LOWER OESOPHAGEAL HIA TUS HERNIA

CLINICAL SUMMARY

Patient came to the hospital with complaints of inability to swallow food and vomiting of undigested food particles for past 3 months.

BP. 80/50 mm/hg
P.R 56mints
SPO2 97%

COURSE IN HOSPITAL :

CT scan of chest and abdomen done revealed, dialation of oesophagus with thin regular wall and air fluid level within, subcarinal oesophageal narrowing present small hiatus hernia. Patient was treated conservatively with antibiotics, antiemetics and ppi. Patient improved symptomatically with ability to swallow solid foods with no episodes of vomiting. Patient was advised endoscopy and dilatation of oesophagus with biopsy at a later stage.

COMPLETE BLOOD CELL COUNT:

HAEMATOLOGY		
Haemoglobin 10.5 gm/dl	SCOT- 29 full	Urobilinogen- Normal
Total wbc count- 8900 Cells/cum	SGPT- 27 Iu/l	Bilirubin- Negative
Neu trophils- 69%	TOTAL PROTEIN- 7.6	DIABETIC PROFILE
Lymphocyte- 26%	Serum Albumin- 4.1	FBS- 95
Eosinophils- 5%	Globulin- 2.6	LIPID PROFILE
		Cholestrol- 179
RBC count- 3.9 million / cumm	Alk phosphatase- 79	Hdl cholesterol- 32
Pcv - 42%	URINE ANALYSIS	
	Specific gravity 1.010	Ldl cholesterol- 128
MCV- 74 cumm	Ph- 5	Vldl cholesterol- 33
MCH - 28pg	Leukocytes- negative	T.c/hdl ratio- 5
MCHC - 32gm / dl	Nitrite- negative	
Platelet count- 2,00,000 lakhs / cumm	Protein- negative	
<u>LIVER FUNCTION TEST</u>		
Total bilirubin 0.2mg/dl	Glucose- Normal	
Direct bilirubin- 0.1mg/dl	Keytones- Negative	

ADVICE: FOLLOW UP AFTER 5 DAYS