

Name : MR. JEAN CHRISTOPHE BARBE DOB : 28-06-1966 Age : 55 Y 9 M 12 D Gender : MALE  
 Nationality : SWISS (สวิตเซอร์แลนด์) HN : 19-16-006215 EN/AN : I19-22-000935 Bed : 208  
 Department : Ward 2 Visit Date : 08-04-2022 Physician : APIRAT CHEEPPENSUK, M.D.  
 Allergies : Bactrim ( 80:400 )Tablet (F)

### Discharge Summary To be complete by (Registered Nurse)

Discharge Date วันจำหน่าย : 10-04-2022 17:30

Discharged to จำหน่ายไป : ☒ Home ☐ Refer ☐ Other

### Status on Discharge สถานะเมื่อจำหน่าย

Condition : ☒ Stable ☐ Unstable ☐ Deceased เสียชีวิต

อุณหภูมิ T (°C) : 36.5 ° C

อัตราชีพจร PR (/min) : 88 /Min

อัตราการหายใจ RR/(Min) : 18 /Min

ความดันโลหิตค่าบน(mmHg) SBP : 106 mm Hg

ความดันโลหิตค่าล่าง (mmHg) DBP : 70 mm Hg

Transportation : ☐ Walk (เดินมา) ☒ Wheel Chair (รถนั่ง) ☐ Stretcher(รถนอน) ☐ Other (อื่นๆ)

Instruction document given to patient / guardian : เอกสารคำแนะนำที่ได้ให้แก่ผู้ป่วยและญาติ คือ

### ☒ 1. Medication (ยา)

☐ Refer to Multidisciplinary and Family Education Form (แบบบันทึกการให้คำแนะนำผู้ป่วยและครอบครัว)  
 given on (วันที่ให้) : 10-04-2022 By (โดย) :

☒ Verbal ☐ Written  
 (See in Home Medication Sheet)

### ☒ 2. Resuming Activity (กิจกรรม)

☒ Normal (ปกติ) ☐ Limited (มีข้อจำกัด)

☐ Refer to Multidisciplinary and Family Education Form (แบบบันทึกการให้คำแนะนำผู้ป่วยและครอบครัว)  
 given on (วันที่ให้) : 10-04-2022 by (โดย) : สุเพ็ญณี เพ็ชรทองชุม พว.

☒ Verbal ☐ Written

### ☒ 3. Diet (อาหาร)

☐ Refer to Multidisciplinary and Family Education Form (แบบบันทึกการให้คำแนะนำผู้ป่วยและครอบครัว)  
 given on (วันที่ให้) : 10-04-2022 by (โดย) : สุเพ็ญณี เพ็ชรทองชุม พว.

☒ Verbal ☐ Written

### ☒ 4. Manage Discomfort (ความสบาย) ☒ Pain (ความเจ็บปวด) ☐ Other

☐ Refer to Multidisciplinary and Family Education Form (แบบบันทึกการให้คำแนะนำผู้ป่วยและครอบครัว)  
 given on (วันที่ให้) : 10-04-2022 by (โดย) : สุเพ็ญณี เพ็ชรทองชุม พว.

☒ Verbal ☐ Written

### ☐ 5. Special care at home (การดูแลพิเศษ)

☐ Refer to Multidisciplinary and Family Education Form (แบบบันทึกการให้คำแนะนำผู้ป่วยและครอบครัว)  
 given on (วันที่ให้) : 10-04-2022 by (โดย) :

☐ Verbal ☐ Written

### ☐ 6. Other (อื่นๆ)

identify :

☐ Refer to Multidisciplinary and Family Education Form (แบบบันทึกการให้คำแนะนำผู้ป่วยและครอบครัว)  
 given on (วันที่ให้) : 10-04-2022 by (โดย) :

☐ Verbal ☐ Written

Remark : Please mark "N/A" under the item that is not applicable

Dangerous abbreviations : 1) U 2) IU 3) Q.D. 4) Q.O.D. 5) MS 6) MS04 7) MgS04 8) Never write "0" after a decimal point [X mg]  
 ห้ามใช้ตัวย่อดังต่อไปนี้ 9) always use "0" before a decimal point [0.X mg] 10) CC 11) OD

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### 7. Urgent sign & symptoms to contact ER อาการและอาการแสดงฉุกเฉินที่ต้องติดต่อแผนกฉุกเฉิน :

Detail : pain

Emergency call for ambulance เบอร์โทรศัพท์เรียกรถพยาบาลฉุกเฉิน : +66 (0) 7742 9500

### ☐ 8. Follow up (การติดตามการรักษา)

1. Doctor of Medicine : \_\_\_\_\_  
 at : \_\_\_\_\_  
 2. Doctor of Medicine : \_\_\_\_\_  
 at : \_\_\_\_\_

### Appointment

Appointment : \_\_\_\_\_

If the patient needs to undergo any test or procedure on the appointment date , please arrive at least 1 hour 30 min. before the appointed time.

ถ้ามีการตรวจพิเศษในวันนัด เช่น การเจาะเลือด หรือการวินิจฉัยใดๆ ก่อนพบแพทย์ กรุณามาก่อนเวลานัดอย่างน้อย 1 ชั่วโมง 30 นาที

### Interpreter's Statement (Except for patient communicated in Thai or English language)

I have given a / an : \_\_\_\_\_

language translation of the additional verbal and written information given to the patient / parent or guardian

Name of Interpreter : \_\_\_\_\_

Signature : \_\_\_\_\_

Patient / Guardian's name (ชื่อผู้ป่วย / ญาติ) : \_\_\_\_\_ 10-04-2022 17:30

( MR. JEAN CHRISTOPHE BARBE )

RN's Name (ชื่อพยาบาล) : สุเพ็ญณี เพ็ชรทองชุม พว. Date/Time : 10-04-2022 17:30

( สุเพ็ญณี เพ็ชรทองชุม พว. )

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**Department** : Ward 2      **Visit Date** : 08-04-2022      **Physician** : APIRAT CHEEPPENSUK, M.D.  
**Allergies** : Bactrim ( 80:400 )Tablet (F)

### Progress Note

Free Text	Recorded By
<p>Admission day 2</p> <p>After admission yesterday the patient had more hip pain and more weakness to gr3/5 of the ankle dorsiflexion which made him difficult to walk, today the leg pain and weakness is slightly improved to gr4/5 after Dexamethasone IV. injection, no difficulty passing urine</p> <p>Suggestion</p> <p>Micro-decompression and discectomy +/- TLIF right L4-L5 right side in Switzerland is strongly recommended as soon as possible</p>	<p>APIRAT CHEEPPENSUK, M.D. 16057</p>

### Progress Note

Date	Progress Note	Recorded By/Time

Remark : Please mark "N/A" under the item that is not applicable.

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### Progress Note

Date & Time	Free Text	Recorded By
09-04-2022 12:47	Admission day 2 After admission yesterday the patient had more hip pain and more weakness to gr3/5 of the ankle dorsiflexion which made him difficult to walk, today the leg pain and weakness is slightly improved to gr4/5 after Dexamethasone IV. injection, no difficulty passing urine Suggestion Micro-decompression and discectomy +/- TLIF right L4-L5 right side in Switzerland is strongly recommended as soon as possible	APIRAT CHEEPPENSUK, M.D. 16057

### Progress Note

Date	Progress Note	Recorded By/Time

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Name : MR. JEAN CHRISTOPHE BARBE      Nationality : SWISS      Room : Ward 2 /  
(สวิตเซอร์แลนด์)      208  
Physician : APIRAT CHEEPPENSUK, M.D., 16057      HN : 19-16-006215  
Visit Date : 08/04/2022      Department : Ward 2  
Birth Date : 28/06/1966      Age : 55 Y 9 M 10 D      Gender : MALE  
Allergies : Bactrim ( 80:400 )Tablet (F)  
Side Effects :

**IMAGING REPORT**

Executed Date      08 Apr 2022 15:08:08      Request Doctor      APIRAT CHEEPPENSUK, M.D.  
Reported Date      08 Apr 2022 20:59:05      Report Doctor      Tele MRI (BSH)  
Patient Order      MRI Spine 1 part

**RESULT**

HISTORY: A case of radiating back pain

**MRI OF THE LUMBOSACRAL SPINE.**

TECHNIQUE AND SEQUENCES: 1.5 Tesla

Sagittal T1WI, T2WI, T2WI with STIR, MYELO

Axial T1WI, T2WI, GRE T2\*WI, Coronal T1WI, T2WI

**FINDINGS:**

The study reveals mildly loss lordotic alignment of the lumbar spine. There is grade I retrolisthesis of L4/5.

The vertebral bodies of lumbar spine are of normal heights with heterogeneous fatty marrow SI. There is a 0.9-cm intraosseous lipoma at right-sided L3 vertebral body.

Diffuse lumbar spondylosis is noted, seen as marginal osteophytes, hypertrophic facet joints and scattered Modic type II degenerative endplate changes at L2/3-L5/S1 levels.

Degenerative changes in each lumbar level are listed as follows.

-L1/2, L2/3; Patent spinal canal and both neural foramina

-L3/4; Disc bulging with small central disc protrusion, marginal osteophytes and mild hypertrophic facet joints, causing mild spinal canal stenosis, mild stenosis of right neural foramen, moderate stenosis of left neural foramen stretching left L3 exiting nerve, and narrowed bilateral lateral recesses compressing both L4 traversing nerves. Ill-defined soft tissue lesion at left L3/4 neural foramen, probably post-operative change.

-L4/5; Disc bulging with disc extrusion at right subarticular zone, marginal osteophytes and hypertrophic facet joints, causing mild spinal canal stenosis, mild stenosis of right neural foramen, moderate stenosis of left neural foramen, and narrowed right lateral recess compressing right L5 traversing nerve. Evidence of partial resection of left ligamentum flavum, with focal distension of left-sided thecal sac.

-L5/S1; Mild disc bulging and hypertrophic facet joints, causing mild stenosis of both neural foramina

The midsagittal AP diameters of lumbar spinal canal at intervertebral disc levels are as followings; L1/2 = 15 mm, L2/3 = 15 mm, L3/4 = 12 mm, L4/5 = 11 mm and L5/S1 = 12 mm.

The visualized spinal cord and conus medullaris are of normal contour and SI.

Conus medullaris locates at L1 level. The intrathecal roots are normally distributed.

The visualized paraspinal and psoas muscles are unremarkable.

Bilateral sacroiliac joints and visualized sacrum are within normal limits.

Additional findings show several bilateral renal cortical cysts, size up to 2.4 cm at right kidney.



19-16-006215



119-22-000935



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019900003;19W2

Remark:

Dangerous abbreviations:

Scan by

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(สวิตเซอร์แลนด์)

208

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HN : 19-16-006215

Department : Ward 2

Birth Date : 28/06/1966

Age : 55 Y 9 M 10 D Gender : MALE

IMAGING REPORT

Allergies : Bactrim ( 80:400 )Tablet (F)

Side Effects :

IMPRESSION

- Diffuse lumbar spondylosis and degenerative discs with grade I retrolisthesis of L4/5.
- Bulging L3/4-L5/S1 discs, with central disc protrusion at L3/4 level and right subarticular disc extrusion at L4/5 level.
- Ill-defined soft tissue lesion at left L3/4 neural foramen, probably post-operative change and evidence of partial resection of left L4/5 ligamentum flavum.
- L3/4; Mild spinal canal stenosis, mild stenosis of right neural foramen, moderate stenosis of left neural foramen stretching left L3 exiting nerve, and narrowed bilateral lateral recesses compressing both L4 traversing nerves.
- L4/5; Mild spinal canal stenosis, mild stenosis of right neural foramen, moderate stenosis of left neural foramen, and narrowed right lateral recess compressing right L5 traversing nerve.
- L5/S1; Mild stenosis of both neural foramina

Tunchanok M.D.

Radiologist : Tele MRI (BSH) null



19-16-006215



119-22-000935



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019900003;19W2

Remark:

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