

# CHRISTIAN MEDICAL COLLEGE **VELLORE - 4** DEPARTMENT OF ORTHOPAEDICS UNIT II

# **DISCHARGE SUMMARY**

Consultants

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Dr. HARIHARAN T D

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Dr. RAHUL GEORGE

Dr. REUBEN CEDRIC NAPPOLY

Dr. VIJAY T. K. TITUS

Dr. V.J. CHANDY

Dr. V V RAMU

Age: 25

Professor & Head

Asst. Prof. (On Leave)

Assistant Professor

Professor (On Leave)

Senior Resident (AP)

Senior Resident (AP)

Professor (On Leave) Assoc. Prof. (On Leave)

**Assistant Professor** 

Email ortho2@cmcvellore.ac.in

Tel (0416) 2282081

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Name: GOKULR

Sex : Male

Ward: B1

Hospital Number: 897725P

Admitted On: Discharged On:

14-Dec-2022 17-Dec-2022

MRDNo: 825800J

Address: 89/100, PAZHAYA BAZAR STREET

KANNAMANGALAM

ARNI T.V.MALAI

TAMIL NADU

Pincode:

Diagnosis:

LEFT NECK OF FEMUR CLOSED MIDCERVICAL FRACTURE

#### History

Mr.Gokul 25 year old male present with pain in the left hip after he sustained an electricution.

Time of Incident: 7:30:00 PM Date of Incident: 13/12/2022

Place of Incident : KANNAMANGALAM -HOME

he was apparently till he sustined an electric shock while switching on the ups and sustained a closed injury to the left hip. Ever since he has complaints of pain in the left hip and is unable to bear weight on the left lower limb. He was taken to an outisde hospital where analgesics were given and then reffered to higher centre and hence came to CMC for further management.

No H/O ENT bleed, LOC or vomitting

He has no knwon co-morbidities

ADL; -

He was able to do all his daily activities before the incident

#### On Examination

Concious oriented

VITAL SIGNS

Respiratory Rate: 22 / min SpO2: 99 % Temperature: 98 F

BP: 130 / 80 mmHg Pulse Rate: 86 / min



Total GCS: 15 (E: 4, V: 5, M: 6) GRBS: 116

Chest compression test ; - negative

Pelvic comprssion test :- Positive on the left side

SPine :- no tenderness or step

LOcal examination

Left Lower limb Limb externally rotated with mild shortening

Left hip No scars, sinus or engorsed vein Tenderness over the anterior joint line and GT SLR Unable to do due to pain Hip ROM restricted due to pain

No distal Neurovascular deficits

Able to move all other limbs. No tenderness present.

Investigatio	ns			
15/12/2022	P.C.V.	34.8		
14/12/2022	ECG (ED)		%	
14/12/2022	RAPID BLOOD BORNE VIRUS SCREEN	REPORT UPLOADED		
	HIV	NEGATIVE		
	HbsAg	NEGATIVE		
14/10/0000	HCV	NEGATIVE		
14/12/2022	CBC PROFILE [SAMPLE IN LAB]			
	NE:79, LY:14, MO:5, EO:2, BA:0			
	MCV MCH	113.4	fL	80-100
	MCHC	38.1	pG	26-34
	RDW	33.6	00	31.4-36.3
	TOTAL WBC	14.2	96	11.5-14.5
4,000-12,000		12400	/CUMM	11.3 14.5
1,000 12,000	HB			
11-15	IID	13.8	g/dL	M 13-17; F
	PLATELET COUNT			
1,50,000-4,50,000		393000	/CUMM	
	RBC			
3.8-5.2		3.62	MM/cumm	M 4.4-5.9; F
	HCT (PCV)	41 0		
35-46		41.0	8	M 40-50; F
	RETICS			
13/12/2022	P.C.V.	40.0	8	0.5-2.5
		40.0	8	
	Bp:Aniso+, macrocytic bp, poikilo prt, macro ovalocytes prt, occ polychromasia prt, Mr. Sheriff/Dr. Meenakshi			
13/12/2022	CREATININE	0.84		A STATE OF THE STA
		0.04	mg%	0.5-1.4

#### **Operation Done**

LEFT NECK OF FEMUR PINNING DONE ON 14/12/2022 .

IMPLANTS USED :

Three 3.5 mm cannulated cortical screws(90, 100, 105mm) with 3 titanium washers .

## Discussion

Mr. Gokul R was admitted with above mentioned. After obtaining pre anaesthetic clearance he underwent left neck of femur pinning under general anaesthesia on 14/12/2022. He was received in the ward in satisfactory condition with stable vitals. His postoperative Xrays was satisfactory. He was started on ambulation with non weight bearing with crutches and knee ROM exercises. Dressing was done on post operative day 3 and wound was healthy. He remained afebrile and his stay in the ward was uneventful and is currently being discharged in a satisfactory condition.



possibility of AVN in the future explained to the patient and relatives

## Recommendations

Physiotherapy:

Non weight bearing am

Non weight bearing ambulation with crutches  $\operatorname{Knee}\ \operatorname{ROM}\ \operatorname{exercises}\ .$ 

#### Prescription:

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Tab. Cloxacillin 500 g every 6 hours for 10 days.

Tab. Ciprofloxacin 500 mg twice daily for 10 days.

Cap. Omez 20 mg twice daily for 10 days.

Tab. Aceclofenac 100 mg twice daily for 7 days.

Tab. Paracetamol 1 g whenever required.

Tab. Vitamin C 500 mg once daily for 1 month.

Tab. Shelcal 500 mg once daily for 1 month.

Tab. Neurobion forte 1 tab once daily for 1 month.

Tab. Chymoral Forte one tab thrice daily for 7 days

To review in Ortho 2 Trauma OPD on 27/12/2022 for wound review and suture removal

For advance appointment booking - any of the following methods can be used a) Patient using credit card may log on to www.clin.cmcvellore.ac.in and follow the link

b) Email appointments can be obtained by sending mail to webappointment@cmcvellore.ac.in

You may come to the Accident and Emergency department/ Orthopaedics Unit II OPD( Tue/Fri) if you have severe pain or fever or unpleasant discharge from the operated site.

For treatment queries, please contact Orthopaedics Unit II Office(Paul Brand Building, 1st Floor, 1105) at 0416-2282081 during working hours or email at ortho2@cmcvellore.ac.in

Written By: Dr. JANE S. SATHIAVADIVU

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Dr. JOZY TIMOTHY N (Assistant Professor)

DEPARTMENT OF ORTHOPAEDICS UNIT II

For OPD appointments please visit https://clin.cmcvellore.ac.in/webapt/telelanding.aspx

In case of any Emergency please report to the Casualty Medical officer in the Accident and Emergency Department, who will inform our duty



Printout Taken on: 17-Dec-2022 14:01 Accredited by the NABH