

Operative Report P

Procedure / 61

Mercy St. Charles Hospital
2600 Navarre Ave., Oregon, Ohio 43616

OPERATIVE REPORT

Patient: [REDACTED] Reg#: 000003530491 MRN 0
t:
Birth Date: [REDACTED] 42
Patient Status: OA Clinic Code: SCAMB
Room: SSU 090205 Adm: 07/06/2012
Sex: F Dis:
Attending: Sudhakar N Pangulur, M.D. Date of Surgery: [REDACTED]
Dct By: Sudhakar N Pangulur, M.D.
PCP Phys: Charles T Kahle, M.D.

Document#: 3134239 Job#: 003813806
Date/Time Typed: 07/06/2012 1:41 P By: crf
Date/Time Dct: 07/06/2012 10:47 A PC
Facility: S0

SURGEON:
Sudhakar N Pangulur, M.D.

NAME OF THE PROCEDURE:
Colonoscopy.

PREOPERATIVE DIAGNOSIS:

A 69-year-old female patient, has a history of cancerous colon polyp that was removed about 4-5 years ago in a different hospital. This procedure is performed for polyp surveillance.

POSTOPERATIVE DIAGNOSIS:

1. Small polyp in the low sigmoid colon.
2. No other polyps, malignancy, colitis, ileitis seen.
3. Preparation for this procedure is good.
4. Withdrawal time, 12 minutes.

ANESTHESIA:
Conscious sedation.

PROCEDURE:

After obtaining informed consent, this procedure was performed in the endoscopy room. The patient was kept in the left lateral position. Intravenous sedation given. Rectal examination performed, appeared nonspecific. Olympus colonoscope passed through the anus into the rectum, then into the sigmoid colon. The scope was gradually advanced toward the transverse colon, then into the right colon and reached the cecum. Ileocecal valve and terminal ileum were examined for couple of inches. Th colon was carefully examined while advancing the scope and while withdrawing the scope.

FINDINGS:

1. From the anus, all the way up to the cecum, and also 2-3 inches of ileum carefully examined.

2. During this exam there was
This was excised using cold biopsy



3. No other polyps, malignancy
good. No diverticulosis seen. Anorectal area nonspecific. At the end of
the procedure the scope was withdrawn from the patient. The patient
tolerated the procedure well.

IMPRESSION:

Except small polyp, no other lesions seen.

PLAN AND RECOMMENDATIONS:

The patient is advised to contact me regarding the histology results in 1
week. The patient will be followed by Dr. Kahle. If she has any problems
advised to contact me.

"In order to promptly notify physicians concerning their patients, this
unconfirmed document is being released. It is not considered final until
reviewed and signed."

cc: Charles T Kahle, M.D.
Sudhakar N Pangulur, M.D.