

## Discharge Summary

Patient Name	Mrs. MEENA SINHA	Reg. No.	OMC148159
Doctor Name	Dr. JAYANT KUMAR GHOSH	IP. No.	19/6268
Age\Gender	71 Y- 0 M- 7 D/F	Room/Bed No	407
Admission Date	20/10/2019 07:47 AM	Date/Time of Discharge	22/10/2019
S/O,D/O,W/O,H/O,C/O	R R P SINHA	Referred By	NA
Blood Group	"O" POSITIVE		
Address	KAMAL ENCLAVE FLAT NO-103 HESAG HATIA RANCHI RANCHI JHARKHAND INDIA , Tel.- 7675981602		

### Primary Consultant:

Dr. JAYANT KUMAR GHOSH, CONSULTANT GASTROENTEROLOGIST, D.M. (GASTROENTEROLOGY) FROM IMS, BHU, VARANSI. Available at OMC: On MON - SAT: 10:00 am to 02:00 pm.

### Cross Consultants:

Dr. EKAM KUMAR, M.B.B.S (HONS), M.D. MEDICINE (PAT) , EX SR. RES (CARDIOLOGIST)  
DR. RAM MANOHAR LOHIA HOSPITAL N. DELHI, CONSULTANT PHYSICIAN & CARDIOLOGIST  
Available at Orchid Medical Centre : On MON - SAT: 3:00 PM - 5:00 PM.

Dr. PRAGYA PANT, D.M. (Nephrology) from IMS, BHU, Varanasi (UP). Available at Orchid Medical Centre On MON - SAT: 10:00 PM - 06:00 PM.

Dr. KUNAL KUMAR SINGH, MBBS,MS,MCh - Urology (Dept. OF Urology + renal transplant) Dr. RML Hospital & PG IM ER, New Delhi ).

Dr. V.K.MAHESHWARI, MBBS, MS, FICS, CONSULTANT GENERAL & LAPAROSCOPIC SURGEON. Available at Orchid Medical Centre MON - SAT: 10:30 AM - 12:00 PM.

### Final/Provisional Diagnosis:

- ACUTE PYELONEPHRITIS ( MSSA )
- ACUTE ON CKD
- URINARY CONTINENCE UNDER EVALUATION
- T2DM

**Result:** Improved

**Nature of Treatment:** Conservative

### SUMMARY

#### Complaints on Admission:

Patient came with complain of backache with fever with continuous vomiting , having bladder incontinence since last 6 years . Patient treated conservatively . Patient was K/C/O T2DM / Hypothyroidism . Recurrent UTI on evaluation . Patient was found to have suffering from acute pyelonephritis , acute on chronic CKD .Patient condition improved and discharged with the advice.

**Note:** FOR BIOPSY REPORT CONTACT RECEPTION :+91 651-7-100-100  
DIET CONSULTATION BY DIETICIAN: 02:00 PM - 05:00 PM  
**EMERGENCY HELPLINE:** +91 651-7-100-100

**H/O Presenting Complaints:**

Patient came with above complain to Orchid Medical Centre for further evaluation and treatment.

**Past History:**

History of T2DM on OHA.

History of Hypothyroidism on medication.

History of Recurrent U.T.I.

**Family History:**

No significant family history

**O/E** Patient conscious, oriented, afebrile

Pulse: 135/min

Pallor : Nil

Blood pressure: 100/60 mm/Hg

Temp: Normal

Cynosis : Nil

Spo2: 96%

Respiration: 22 /min

Edema : Nil

**Treatment Given:**

1. Inj ESOMAC 40 mg IV twice daily.
2. Inj ONDEM 4 mg IV thrice daily.
3. Inj TICLAWIN 3.18 g IV thrice daily.
4. Inj METROGYL 100 mg IV thrice daily.
5. Inj H. ACTRAPID 8 hourly according to RBS.
6. Inj L- CIN 500 mg IV daily.
7. Tab ELTROXIN 1 tab daily.
8. IV Fluid RL /NS at 10ml/hr.
9. Nil by mouth.

**Investigations:**

**Date & Time :** 20/10/2019 10:43 AM

SEROLOGY SCREENING (HIV, HCV, HBsAg), SERUM (METHOD : IMMUNOCHROMATOGRAPHY CARD TEST)\* :  
BLOOD GROUPING (ABO & Rh), BLOOD (METHOD : SLIDE A :

**Date & Time :** 20/10/2019 10:44 AM

AMYLASE, SERUM\*

: 30 U/L

LIPASE, SERUM\*

: 60 U/L

BILIRUBIN - TOTAL

: 1.0 mg/dL

BILIRUBIN - DIRECT

: 0.2 mg/dL

BILIRUBIN - INDIRECT

: 0.8 mg/dL

SGPT

: 25 U/L

SGOT

: 29 U/L

ALKALINE PHOSPHATASE

: 71 U/L

TOTAL PROTEIN

: 6.4 g/dL

ALBUMIN

: 3.3 g/dL

GLOBULIN

: 3.1 g/dL

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A/G RATIO	: 1.1 g/dL
SERUM UREA	: 38 mg/dL
CREATININE	: 1.73 mg/dL
CREATININE	: mg/dL
SODIUM (Na <sup>+</sup> )	: 125 mmol/L
POTASSIUM (K <sup>+</sup> )	: 4.2 mmol/L
CHLORIDE (CL <sup>-</sup> )	: 89 mmol/L
CALCIUM	: 8.9 mg/dL
PHOSPHOROUS	: 2.2 mg/dL
URIC ACID-SERUM	: 9.5 mg/dL

**Date & Time : 20/10/2019 11:40 AM**

TOTAL RBC COUNT	: 4.35 Million/ cumm
PLATELET COUNT	: 150 10 <sup>3</sup> /μL
TOTAL LEUCOCYTE COUNT (TLC)	: 16760 /cumm
HAEMOGLOBIN	: 12.51 g%
HAEMATOCRIT (PCV)	: 37.0 %
MCV	: 85.0 fl
MCH	: 28.8 pg
MCHC	: 33.8 g/dL
RDW	: 14.7 %
ERYTHROCYTES SEDIMENTATION RATE (ESR)	: 60 mm/hr
NEUTROPHILS	: 88 %
LYMPHOCYTES	: 10 %
MONOCYTES	: 01 %
EOSINOPHILS	: 01 %
BASOPHILS	: 00 %
MYELOCYTES	: %
METAMYELOCYTES	: %
ATYPICAL / BLASTOID CELLS	: %
PROMYELOCYTES	: %
BLAST CELLS	: %

**Date & Time : 20/10/2019 12:53, PM**  
X-RAY ABDOMEN ERECT :

**Date & Time : 21/10/2019 11:43 AM**  
URINE- ROUTINE EXAMINATION (Method : Dipstick, Microscopy) :

<b>Date &amp; Time : 22/10/2019 08:21 AM</b>	: 44 mg/dL
UREA, SERUM	: 1.98 mg/dL
CREATININE, SERUM	: 4.0 mmol/L
POTASSIUM (K <sup>+</sup> ), SERUM	: 132 mmol/L
SODIUM (Na <sup>+</sup> ), SERUM	

<b>Date &amp; Time : 22/10/2019 08:44 AM</b>	: 10.50 g%
HAEMOGLOBIN (Hb.), BLOOD*	: 11920 /cumm
TOTAL LEUCOCYTE COUNT (TLC)	: 80 %
NEUTROPHILS	: 14 %
LYMPHOCYTES	: 02 %
MONOCYTES	: 04 %
EOSINOPHILS	: 00 %
BASOPHILS	: %
MYELOCYTES	: %
METAMYELOCYTES	: %
PROMYELOCYTES	: %

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**REPORTS ATTACHED****Course During Treatment :** Uneventful**Advice on Discharge****When and how to obtain urgent care**

In case of any medical emergency come to Orchid Medical Centre casualty .

**Medication:**

- |                       |   |
|-----------------------|---|
| 1. Tab LIZOLID 600 mg | 1 tab twice daily for 7 days.                       |
| 2. Tab L- CIN 500 mg  | 1 tab daily for 7 days.                             |
| 3. Tab ELTROXIN 50 mg | 1 tab daily before breakfast.                       |
| 4. Tab FURIC 40 mg    | 1 tab twice daily.                                  |
| 5. Tab GLYCOMET - GP2 | 1 tab twice daily 8:00 am and 8:00 pm before meals. |
| 6. Tab VOBOLIX 0.3 mg | 1 tab twice daily 8:00 am and 8:00 pm before meals. |
| 7. Tab AFOGLIP 20 mg  | 1 tab daily before meals.                           |

Follow up advice : Review after 7 days.

**Condition at Discharge:** Hemodynamically stable**DR. SIGNATURE:****NAME :****CONSULTANT SIGNATURE**

Dr. Jayant Kumar Ghosh

**IN CASE OF MEDICAL EMERGENCY PLEASE CONTACT:**

Dr. JAYANT KUMAR GHOSH, CONSULTANT GASTROENTEROLOGIST, D.M. (GASTROENTEROLOGY) FROM IMS, BHU, VARANSI. Available at OMC: On MON - SAT: 10:00 am to 02:00 pm.

Help Line (Emergency) No: 9386773813, 0651 -7 - 100 - 100

- ⑧ Cap Becosules 1 cap ODPC x 2 weeks
- ⑨ Zytee gel 2 drops BDPC x 2 weeks
- ⑩ Syb Sucratan-0 10 m TDS x 2 weeks
- CANDID ORAL PAINT TDS x 5 day.

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