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04/06/2005 12:00:00 AM
abdominal fluid collection
DIS
Admission Date :
04/06/2005
Report Status :
Discharge Date :
04/12/2005
***** FINAL DISCHARGE ORDERS *****
LILEY , PEANTSALL 885-17-29-8 M12
Room :
5Y-704
Service :
GGI
DISCHARGE PATIENT ON :
04/12/05 AT 01:00 PM
CONTINGENT UPON
HO evaluation
WILL D / C ORDER BE USED AS THE D / C SUMMARY :
YES
Attending :
LILEY , BER , M.D.
DISPOSITION :
Home w/ services
DISCHARGE MEDICATIONS :
MOTRIN (IBUPROFEN) 600 MG PO Q6H PRN Pain , Headache , Temperature greater than :
100
Food / Drug Interaction Instruction
Take with food FLAGYL (METRONIDAZOLE) 500 MG PO Q8H X 10 Days Starting Today (04/12)
Instructions :
Take for 10 days or until drains come out ; whichever is of longer duration .
Food / Drug Interaction Instruction
Take with food OXYCODONE 10 MG PO Q4H PRN Pain LEVOFLOXACIN 500 MG PO QD X 10 Days Starting Today (04/12)
Instructions :
Take for 10 days or until drains come out ; whichever is of longer duration .
Food / Drug Interaction Instruction
Administer iron products a minimum of 2 hours before or after a levofloxacin or ciprofloxacin dose dose If on tube feeds , please cycle (hold 1 hr before to 2 hr after)
Take 2 hours before or 2 hours after dairy products .
MAALOX-TABLETS QUICK DISSOLVE / CHEWABLE 2 TAB PO Q6H PROTONIX (PANTOPRAZOLE) 40 MG PO QD
DIET :
House / Low Residue < FDI >
ACTIVITY :
Walking as tolerated
FOLLOW UP APPOINTMENT (S) :
Dr. Liley , call ASAP to schedule 1-2 weeks , Your primary care physician 1-2 weeks , Interventional Radiology , call 329-125-0028 to schedule an appointment when drain outputs are less than 10cc / day . ,
ALLERGY :
NKA
ADMIT DIAGNOSIS :
abdominal fluid collection

PRINCIPAL DISCHARGE DIAGNOSIS ;

Responsible After Study for Causing Admission) abdominal fluid collection

OTHER DIAGNOSIS ;

Conditions , Infections , Complications , affecting Treatment / Stay liver heman
gioma , bph , gout , meningioma , gerd , episodic vertigo , s / p r colectomy ,
subtotal colectomy

OPERATIONS AND PROCEDURES :

NONE

OTHER TREATMENTS / PROCEDURES (NOT IN O.R.)

IR drainage X2

BRIEF RESUME OF HOSPITAL COURSE :

HPI This is a 60 yo gentleman who previously had an ileocolic resection for a ri
ght colon cancer , and was found to have recurrent disease on colonoscopy .

He was also found to have a malignant lesion in his descending colon .

He had a subtotal colectomy on 03/22/05 which was uncomplicated .

Postop he has had numerous visits to the ED for co fevers , sweats , and SOB .

CTS chest was negative for PE , however it did reveal pulmonary nodules in his R
ML which need fu imaging in 3 months .

He also had bl atelectasis on cxr .

CT of the abdomen showed a collection in the RLQ which appears to be amenable to
IR drainage .

He also has had urine and blood cultures sent from the ED on 04/05 and was empir
ically started on avalox last pm .

PMH GERD , HTN , Gout , Meningioma , liver hemangioma , episodic vertigo , colon
cancer .

MEDS

Protonix 40 qd , Colchicine 6 mg bid , Meclizine 25 mg qid prn , glucosamine and
oxycodone prn , tessalon prn .

ALL NKDA SH No smoking PE

GEN - NAD

HEENT -- perrla , eomi , mmm , tongue midline , op clear , no masses

NECK -- no jvd / lad/ ; trachea midline CARD - RRR , S1/S2 , no m / r/g

PULM - CTAB no w / r / r ABD -nt / nd ; incision c / d / I ; discrete 3x3 cm sli
ghtly firm protuberant mass to the R of umbilicus ; no rebound , no guarding .

BACK - no flank tenderness

RECTAL -- deferred

EXT - WWP ; no edema

On 04/06/05 Mr. Liley was admitted to Dr. Liley 's service .

At that time he was made NPO with IVF , placed on Ampicillin / Levofloxacin / Fl
agyl and underwent IR placement of a drainage catheter for his abdominopelvic fl
uid collection .

Overnight he spiked a fever to 103 and his WBC climbed from 11 to 13 .

As a result , IR reviewed the patient 's post-procedure imaging and felt th
at the catheter was not adequately draining the patient 's fluid collection
.

On 04/07 they took the patient back to the IR suite and placed a second catheter
.

The location of the second catheter was confirmed that evening by a follow-up sc
an which revealed good placement .

The following day the patient defervesced .

Neurologic :

The patient 's pain from his catheters was controlled with Oxycodone and Mo
trin .

CV :

No active issues .

R :

The patient received chest PT and was encouraged to ambulate frequently .

GI :

After catheter placement , the patient was started on sips .

He tolerated this well .

He was advanced to clears which he tolerated and was restarted on a low residue diet .

His bowel function resumed and in fact he had loose stool .

He had 3 specimens sent for C. difficile which were negative .

GU :

The patient 's electrolytes and fluids were monitored closely during his admission .

Heme :

The patient 's WBC trended down to 10.7 at discharge from a peak of 13 on 04/07 .

His hematocrit remained stable .

He received DVT prophylaxis with SC Heparin .

ID :

Blood cultures 04/05 revealed Bacteroides fragilis ; 04/06 Fluid collection drainage from IR revealed

- 1) 4+ alpha hemolytic Strep ,
- 2) 2+ E. coli sensitive to Ampicillin and Levofloxacin ,
- 3) 3+ Enterococci sensitive to Ampicillin and Levofloxacin ,
- 4) Bacteroides fragilis and Clostridium perfringens .

Blood cultures from 04/07 showed NGTD .

Cdiff from 04/08 , 04/09 , 04/10 were negative .

Mr. Liley was discharged in stable condition , ambulating and voiding independently , and with adequate pain control .

LDAMC services were set-up for care of his IR drains .

He was given explicit instructions to follow-up in clinic with Dr. Liley in 1-2 weeks .

ADDENDUM :

An abscessogram was performed on 04/12/05 and revealed no fistula .

ADDITIONAL COMMENTS :

- Seek medical attention for fevers (temp > 101.5) , worsening pain , drainage or excessive bleeding from incision , chest pain , shortness of breath , or any other symptoms of concern .
- Follow up with your surgeon in 1-2 weeks for wound check .
- Please do not drive or consume alcohol while taking pain medications .
- Resume home medications .

DISCHARGE CONDITION :

Stable

TO DO / PLAN :

No dictated summary

ENTERED BY :

ALIKES , NATO T. , M.D. (FG980)

04/12/05 11:30 AM

***** END OF DISCHARGE ORDERS *****

[report_end]