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992985626
OMH
3547149
765022
9/23/2000 12:00:00 AM
Discharge Summary
Signed
DIS
Report Status :
Signed
DISCHARGE SUMMARY NAME :
GLORENC , NILD
UNIT NUMBER :
169-29-59
ADMISSION DATE :
09/23/2000
DISCHARGE DATE :
09/25/2000
PRINCIPAL DIAGNOSIS :
Squamous-cell carcinoma .
PRINCIPAL PROCEDURE :
Right inguinal lymph node biopsy .
HISTORY OF PRESENT ILLNESS :
This is an 88 year-old woman with multiple basal-cell carcinomas as well as mult
iple squamous-cell carcinomas on the face and lower extremities .
She had these excised overthe past several years .
She was admitted for right groin node resection .
Frozen section revealed metastatic squamous-cell carcinoma .
She states that the groin mass had been there for approximately four months .
She noted an increase in size in pain .
She also complained of low back pain for 3-4 months , which was dull and constan
She denied waking from the back pain .
She noted a 14 lb .
Weight loss over 5 months without dieting or decreasing fluid intake .
She notes small lesions on her left lower extremity which she was planning to fo
llow up with her dermatologist .
She denied any family history of skin cancer .
She denied any radiation exposure .
She had no fevers , chills , nausea , or vomiting .
PAST MEDICAL HISTORY :
Hypertension , asthma , thyroid disorder , degenerative joint disease .
PAST SURGICAL HISTORY :
total abdominal hysterectomy in 1994, with questionable bilateral salpingo-ooph
orectomy , cholecystectomy .
ALLERGIES :
Penicillin which causes a rash .
MEDICATION ON ADMISSION :
Tylenol PRN .
Toprol .
Zestril .
Lasix , Aspirin .
Atrovent .
PHYSICAL EXAMINATION :
Afebrile , Vital Signs stable .
Cardiac :
regular rate and rhythm .
Lungs:
clear to auscultation and percussion .
Bilaterally .
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Abdomen :
benign .
Extremities :
\ensuremath{^{\star\star}} I will continue this dictation at a later point .
CHPO POINT , M.D.
Electronically Signed
LOTWI O ELKS , M.D.
11/02/2000 18:25
TR :
tpy
DD :
09/26/2000
TD :
10/01/2000 3:36
Pcc :
CHPO POINT , M.D.
[ report_end ]
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