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11/23/2006 12:00:00 AM
Discharge Summary
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Report Status:
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DISCHARGE SUMMARY
NAME :
WELDAZEIS , ET N
UNIT NUMBER :
249-32-88
ADMISSION DATE :
11/23/2006
DISCHARGE DATE :
11/26/2006
PRINCIPLE DIAGNOSIS :
Right hip osteoarthritis .
PRINCIPLE PROCEDURE :
Right total hip replacement .
HISTORY OF PRESENT ILLNESS :
The patient is a 76-year-old-female that has been seen by Dr. Dec in Clinic and
has been evaluated for a right hip pain .
She has had a difficult time ambulating , secondary to pain and has pain with th
e stairs .
PAST MEDICAL HISTORY :
Is significant for hypertension , abdominal aortic aneurysm , osteoarthritis of
hips , hypothyroidism , and chronic obstructive pulmonary disease .
PAST SURGICAL HISTORY :
Is significant for exploratory laparotomy for ovarian cysts and appendectomy .
Bilateral inguinal hernias .
Right breast cyst removal .
Bilateral thumb surgery .
Colon resection for polyps .
MEDICATIONS ON ADMISSION :
Maxzide , Lisinopril , Cardia , Aspirin , Citracal , Fosamax , and Levoxyl .
ALLERGIES :
No known drug allergies .
PHYSICAL EXAMINATION :
She is afebrile and vital signs were stable .
She has some history of hearing loss .
Heart :
regular rate and rhythm .
Lungs were clear bilaterally .
Abdomen :
non-tender , nondistended with no hepatosplenomegaly .
She has pain with range of motion of her hips at the extremes .
She is able to flex her hip to approximately 100 degrees and she has only approx
imately 15 degrees of internal rotation and 15 degrees of external rotation .
Her right lower extremity is otherwise neurovascularly intact .
HOSPITAL COURSE :
The patient went to the operating room and underwent a right total hip replaceme
The patient tolerated the procedure well and postoperatively she was transferred
to the recovery room for observation , mobilization and pain control .
The patient was placed on perioperative antibiotics for 48 hours .
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She was placed on Fragmin on the day of surgery .

On day two her dressing was removed .

Her drain was removed on postoperative day number two .

Her incision appeared to be clean , dry and intact .

The patient was seen by physical therapy and was made weight bearing as tolerate ${\tt d}$ with posterior precautions .

Once the patient tolerated a regular diet , PO pain medications and had gotten o ut of bed with physical therapy the patient was discharged in stable condition to rehabilitation .

Once her Foley catheter was removed her urine was painful and she was found to h ave a positive urinary tract infection .

She was started on Levofloxacin x7 days for this .

FOLLOW UP :

The patient is to follow up with Dr. Dec in six weeks from the day of surgery . She is to call 290-906-1014 to make an appointment .

DISCHARGE INSTRUCTIONS :

In case of increasing pain , swelling , redness , purulent drainage , numbness or tingling or any other concerns or symptoms the patient should call Dr. Dec or her primary care physician or return to the emergency room .

The patient should continue taking Fragmin for at least 10 days and take aspirin twice daily for one month .

She should be weight bearing as tolerated with posterior hip precautions .

Dressing changes should be continued to Nursing and wound checks .

SHAWNCY OBEBOLMTEELENEATHE , M.D.

DICTATING FOR :

[report_end]

Electronically Signed ETTEME ACIOUSLECIEN DEC , M.D. 12/24/2006 10:00
______ ETTEME ACIOUSLECIEN DEC , M.D.

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cc:
ETTEME ACIOUSLECIEN DEC, M.D.