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12/7/1996 12:00:00 AM
Discharge Summary
Unsigned
DIS
Report Status :
Unsigned
DISCHARGE SUMMARY
NAME :
ELKSCHIRD , EBERTA R
UNIT NUMBER :
882-95-20
ADMISSION DATE :
12/07/96
DISCHARGE DATE :
12/14/96
HISTORY OF PRESENT ILLNESS :
76-year-old male with right hip pain X five years .
The pain is often severely and increasing at night especially when he is lying o
n the right side .
PAST MEDICAL HISTORY :
Tonsillectomy .
History of high blood pressure , enlarged heart .
MEDICATIONS ON ADMISSION :
Zantac .
Furosemide .
Aerobid .
ALLERGIES :
No known drug allergies
PHYSICAL EXAMINATION :
The head , eyes , ears , nose and throat unremarkable .
The lungs were clear .
Heart :
regular rate and rhythm .
The abdomen was soft and non-tender .
Left hip shows flexion and extension 40 .
Right hip flexion and extension 40 and 0 .
IMPRESSION :
Right hip pain degenerative joint disease for right total hip replacement .
HOSPITAL COURSE AND TREATMENT :
The patient was admitted to the hospital as a postoperative admit on December 7
for total hip replacement .
For further details of this procedure see operative note .
Postoperatively he did well initially in the first 12 hours .
However he had a report of emesis of coffee grounds on postoperative night #1 .
This with no electrocardiogram changes .
Due to this GI was consulted and felt that he would be a candidate for esophagog
astroduodenoscopy .
He was placed nothing by mouth and the esophagogastroduodenoscopy was done by th
e GI Service .
Findings showed a Mallory Weiss tear , nonspecific duodenitis .
He was placed on Zantac 150 mg. PO b.i.d. and H Pylori serology was sent .
Post EGD his diet was advanced slowly and he did exceptionally well .
At the time of discharge he was tolerating a full diet , out of bed with pain ,
tolerated on po. medications .
His wound was intact with no evidence of infection .
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Distal neurovascular status was intact .

There was no calf tenderness and lower extremity arterial non-invasive studies w ere negative .

He was generally well in all regards .

The physical examination was unremarkable and he had no recurrent symptoms of co ffee ground emesis .

He was doing exceptionally well at discharge with plans to follow up with Dr. Rh alttland .

Discharge instructions have been given .

ROYNEO WALLA , M.D.

DICTATING FOR :

LI RHALTTLAND , M.D.

TR :

hbq

TD:
12/12/96 9:00 A
cc:
LI RIJARRED RHALTTLAND M D ROYNE

LI RIJARRED RHALTTLAND , M.D. ROYNEO MAMAIRE WALLA , M.D. $\,$

[report_end]

DD: 12/12/96