## **Prof. Ali Jawa**

MD(USA), MPH (USA), FACE (USA) FRCP (Lon), MIVM (Europe), MPMI (USA), DABIM-Endocrinology (USA), DABIM (USA), DABPNS (USA), AOM-ARCS (Aus) Diplomate American Board of Endocrinology, Diabetes and Metabolism
Diplomate American Board of Internal Medicine
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Fellow American College of Endocrinology
Former Professor of Endocrinology,
SZABMU / PIMS, Islamabad, Pakistan
Consultant Endocrinologist & Diabetologist

## **Tehseen Tahira Jawa**

65 Years Female

Visit Date: 23-Feb-2021

Appointment Type: Online

Vitals: SBP/DBP 140/80 mmHg Pulse 78

Patient presented to the ED with absolute constipation of 2 days and acute abdmonial pain of one day, on Monday evening 8 PM (February 22, 2021). She was given Ketorolac and Nepbuphine injections in tandem, as well as IV fluids. Her pain subsided from 9/10 to 2/10. She needed overnight parenteral analgesic as well as in the later morning. She has not passed any stool till now. On exam, there is a doughy mass in LLQ.

**USG of the abdomen:** There is mild free fluid in the left side of the abdomen. Gut loops are dilated more on the right side, suggesting intestinal obstruction. There is a mass 10 >< 5 cm in the mid abdomennjust above the umbilicus most likely arising from the instestine with wall thickness easure 1.0 cm and polypoidal growth in it measures 4.8 >< 2.2 cm. Pancreas, kidneys, urinary bladder and liver are normal.

**KUB X-ray** shows multiple air fluid levels, consistent with intestinal obstruction.

## **LABS**

Na 134 K 4.2 HCOS 21 BUN 22 Cr: 0.6 SGPT 97 SGOT 95 (<60) Alk Phos 98 ALB 4.8 LDH 231 (<214), Lipase 3423 (<60)

PT 11.2 PTT 24.8 INR 1 CEA 2.9 (<5) AFP 2.7 (<8.8) HGB 12.3

## CT CHEST, CT ABDOMEN AND PELVIS WITH CONTRAST

Pending



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