

**SHREE ARUNACHALA MULTI SPECIALITY HOSPITAL**

32,PTV Colony , Opposite Sangam Silks,Krishnagiri-635001

Phone:89039 21111, 9789889796, 9994699059

Email: arunachalahospital2021@gmail.com

DISCHARGE SUMMARY

Name	: Mr. V.R.Soundararajan	ID	: 202501_073
Age/Gender	: 68 years /M	IP No	: 798
Mobile	: 9043459472	Room	: PVT - 5 (PRIVATE ROOM)
Type	: Cash		
Address	: Krishnagiri		

D.O.Admission: 10/01/2025 16:31**D.O.Discharge:** 12/01/2025 10:58**D.O.Surgery:** 10/01/2025 20:58**PROVISIONAL DIAGNOSIS**

BENIGN PROSTATIC HYPERPLASIA

CONSULTANTS

Dr. ARUNVIJAY MCS Urologist

PROCEDURE DONE

TURP

COMPLAINTS

H/C/O OF DECREASED STREAM AND DIFFICULTY IN MICTURITION

EXAMINATION**GENERAL EXAMINATION**

conscious

Oriented

Afebrile

Not palor

VITALS

Temperature (F): 98 Pulse Rate(per min): 88 Respiratory Rate(/min): 24 Blood Pressure (mm Hg): 120/70 Spo2 (% at RA): 99

SYSTEMIC EXAMINATION

CVS: S1S2 + NO MURMURS RS: BAE+ NO ADDED SOUNDS ABD: SOFT BS+ CNS: NFND

TREATMENT GIVEN**IV FLUIDS**

INJ PIPTAZ 4.5 GM IV BD

INJ PAN 40 MG IV BD

INJ EMESET 2CC IV BD

MEDICATIONS

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S.No	Type	Name	Dosage	Frequency	Route	Duration	Instruction
1		NITROBACT 100 MG TAB		1-0-0-1		× 5 days	
2		PAN - D TAB		1-0-0-1		× 5 days	After Food
3		ZERODAL-P TAB		1-0-0-1		× 5 days	After Food
4		CREMAFFIN SYRUP		0-0-0-30ML		× 5 days	After Food

ADVICE

CONTINUE THE GIVEN MEDICATION

Status

NORMAL AND ACTIVE

FOLLOW UP

REVIEW AFTER 4 DAYS

RECEPTION 1

Prepared By


Medical Officer**SHREE ARUNACHALA HOSPITAL**
32, PTV Colony, Thiruvalluvar Nagar
Bangalore Road, KRISHNAGIRI-1