TRIVENI HEALTH CARE

1480, Wright Town, Near Wright Town Stadium Jabalpur 482002/ 7566003344

Patient Name : Miss. POOJA SANGHI Admission No : IP2203007

Age/Gender : 30 Years/Female UMR No : UMR3135

Consultant 1 : Dr.NITIN WADHWA Ward : 421/421/11

Department 1 : ORTHOPAEDICS Date Of Admission : 14-Mar-2022 1:26 pm

Consultant 2 : Summary Date : 17-Mar-2022

Department 2 :

Address : UID 794832281245 43 GARHA ROAD DAYA

NAGAR KAMLA NEHRU WARD JBP MP Ja**DS**pur , MADHYA PRADESH 9425153602,8871819118

Referred By : WALK-IN

i A case of ACL tear Lt. knee and known case of JME and migraine.

Post op. Arthroscopic ACL repair Left (under spinal anaesthesia.)

ICD code- S 83.512A

CHIEF COMPLAINTS (REASON FOR ADMISSION) Pain and swelling in Lt knee since 1 month. Aggarvated by trauma on left knee

three days back. History of trauma on the same limb thrice.

CLINICAL EXAMINATION : General examination-

BP-110/70mmHg, H/R-74/min, R/R-18/min, Spo2-98% on room air.

Systemic Examination-

CNS- Patient is conscious, alert, responds spontaneously to verbal commands.

CVS-S1 S2+

R/S- bilateral air entry equal P/A- soft, Bowel sounds+

Loacl examination- edema over Lt. knee. Restricted ROM.

:HB %- 11.6gm % Platelets count-2.07 Lacs/cumm.TLC-9400/cumm,

DLC P-84%, -L-08%E-03%, -M-02%, Sugar (R) -92mg/dl, S. Bilirubin (T)

-0.86mg/dl.

SGOT-24units/ml. S. Creatinine-0.8 mg/dl SGPT-19 umits/ml.,B.

Urea-21mg/dl

Prothombin Time-13.3second, Blood Group -B "+",S. Alkaline

Phosphatase-75IU/L

S. Proteins (T)-6.7gm/dl, HIV & Australia Antigen- Negative.

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S. Potassium 5.8mEq/L, Urine RM -0 to 2 pus cell.

PROCEDURE : 15/03/22- Arthroscopic ACL Repair Lt. knee under spinal anaesthesia.

COURSE IN HOSPITAL

Patient was admitted with above mentioned complaints. Had an ACL tear left knee,. Routine investigations was done which were within normal limits. After a protocol based PMC and PAC. patient was planned for sugery. Arthroscopic ACL repair was done on 15/2/2022.(under spinal anaesthesia) Was managed with I/v fluids, I/V antibiotics, I/V PPI, analgesics. and symptomatic and supportive treatment. Physiotherapy was done which she tolerated well. Post op period was uneventful. Patient is being discharged in stable condition.

CONDITION ON DISCHARGE

Better. Vitals stable. Systemic examination-normal

ADVISED

- :-Hot Fomentation-Dynapar gel.
- -Physiotherapy as advised. -

Avoid: Heavy Weight Lifting. and Use Western Commode Toilet, jerk, Do not

Sit on the ground

TREATMENT ADVISED

Tab Cefuroxime 250mgTab Joint plus1BD x5 days (Twice a day after food)1BD x5days (Twice a day after food)

Tab Pantaprozole 40mg 1 OD x 10 days (once a day before

breakfast)

Tab Gemcal 1 HS x30 days (once a day after food)

Tab.Ultracet 1 SOS (If severe pain)

Tab Tendocare 1BDx 15day(twice a day after meals.

Note- Continue regular medications for JME and maigrain.

FOLLOWUP AND REVIEW

<u>DATE</u>

Follow Up Advice & Review Date:

Review on 25th march 2022, in Orthopaedics OPD.

When to obtain urgent care: Pain in limb etc.

How to obtain urgent care in case of emergency , Whatsapp: 7566003344

(between 10.00AM to 06.00PM)

Patient Name : Miss. POOJA SANGHI Admission No : 1P2203007

Referred By : WALK-IN

In Case Of Any Quries Or Emergencies Please Contact. Phone No: 9676404488/04023783000

Medical Officer

Dr.NITIN WADHWA
CONSULTANT ORTHOPADEDIC SURGEON

Created By AKRITI

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