

TRIVENI HEALTH CARE

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

DEPARTMENT OF GENERAL SURGERY DISCHARGE SUMMARY

Patient Name	: Mr. RAM NARAYAN BARMAN	Admission No	: IP2212028
Age/Gender	: 46 Years/Male	Weight	: 78
		UMR No	: UMR7004
Admission Dt	: 13-Dec-2022	Discharge Dt	: 24-Dec-2022
Consultant	: Dr. JITENDRA JAMDAR	Referred By	: Walk-in
Department	: ORTHOPAEDICS	Ward	: 4 TRIPLE SHARING/406/3
Patient Address	: JABALPUR Jabalpur , MADHYA PRADESH 9644677080		

DIAGNOSIS

Dislocation Hip with # Shaft Femur Upper 1/3rd Lt. with Chest Injury # 2nd & 3rd Rib Rt. Side with Abdominal Contusion with Bilateral Haemothorax.

CHIEF COMPLAINTS

Trauma on 13/12/2022 at 01.00 PM due to RSA.

Pain & Swelling- Lt. thigh & hip.

Pain Rt. side of chest & mild abdominal pain.

Abrasion Rt. knee.

CLINICAL EXAMINATION

Local: Oedema, Tenderness & Deformity- Lt. thigh & hip. Tenderness Rt. side of chest & abdomen.

HR-88/M, BP- 140/100 MMHG, RR- 32/M, SPO2- 99% , Temp.-Normal.

R/S:-B/L Vesicular

CVS:- Heart sound normal

CNS:- Concious, oriented, no focal deficit

P/A:- Abdominal tenderness.

INVESTIGATION

HB- 12.5, TLC- 16800, ESR- 08, Platelets- 2.26, Creatinine- 1.0, B.Urea- 19, Sodium- 137, Potassium- 4.4, Total Bilirubin- 0.97, SGPT- 138, SGOT- 131, Total Protein- 4.1, PT Test- 13.9, INR- 1.0, HIV- Negative, HBsAg- Negative, B.Group-"A" +VE,

13/12/2022 CECT Chest- Patchy supleural atelectasis in right upper and bilateral lower lobe lung. Small calcified nodule in left upper lobe lung. Fracture shaft of right sided 1st 2nd 3rd 4th ribs.

13/12/2022 CECT Abdomen- No remarkable abnormality detected in abdomen. Fracture of right transverse process of L1, L2, L3 and left transverse process of L4 vertebra. Full thickness displaced fractures of left proximal femoral shaft with dislocated left hip joint.

Patient Name : Mr. RAM NARAYAN BARMAN

Admission No : IP2212028

COURSE IN HOSPITAL

Mr. Ram Narayan Barman, 46y/M, Presented with pain and swelling Lt. thigh & hip since trauma on 13/12/2022 due to RSA with pain in chest & abdomen. Examination by orthopedic surgeon revealed Dislocation hip with # Shaft Femur Upper 1/3rd Lt. with chest injury with abdominal contusion. Blood investigation anaemia. Blood Transfusion given. **Bilateral ICD done on 15/12/2022.** After a protocol based pre anesthetic checkup, patient was planned for surgery. **On 20/12/2022- ORIF interlock nailing femur Lt. with open reduction dislocation hip** was done. Post op period was uneventful. Patient is being discharged in a stable condition.

Procedure: - Bilateral ICD done & BE Cast Lt. given on 15/12/2022.

- Open reduction interlock nailing femur Lt. with open reduction dislocation hip done under SA on 20/12/2022.

Implant: 10/36 Interlock nail femur (SS)

- Bilateral ICD Removed on 21/12/2022.

CONSULTANT NAME AND SIGN DATE

Dr. Jintendra Jamdar

SPECIAL INSTRUCTION

Bed Rest. -Elevation & Toes Exercises.
Keep the limb in abduction. -Static quadriceps exercises.
Back care with terogood powder.

TREATMENT ON DISCHARGE

Tab Oratil 250mg 1 BD x 7 days (Twice a day for 7 days)
Cap Lines 500mg 1 TDS x 7 days (Thrice a day for 7 days)
Tab Moxif 400mg 1 OD x 14 days (Once a day for 14 days)
Cap Cyfolac Forte 1 BD x 7 days (Twice a day for 7 days)
Tab Dompan SR 1 OD x 14 days (Once a day for 14 days)
Tab Calastan 1 HS x 30 days (Once a day at night for 30 days)
Tab Celin 1 BD x 30 days (Twice a day for 30 days)
Cap Convidex Forte 1 BD x 30 days (Twice a day for 30 days)
Tab Aciz SP 1 BD x 3 days (Twice a day for 3 days)
Tab Zinase XT 1 TDS x 3 days (Thrice a day for 3 days)
Tab Ketotram S/L SOS (For Sever Pain)
Tab Mucoryl AB 1 BD x 14 days (Twice a day for 14 days)

DATE OF FOLLOW UP

Review on 07/01/2023 at 9.00 AM in Ortho OPD for Removal of Sutures.

Transcribed By : ADITI

Resident Doctor

Dr. JI TENDRA JAMDAR
CONSULTANT ORTHOPAEDIC SURGEON