TRIVENI HEALTH CARE

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

Patient Name : Mr. PURSHOTTAM NEMA Admission No : IP2111008

Age/Gender : 59 Years/Male UMR No : UMR1555

Consultant 1 : Dr.VIKAS SAWLA Ward : 4TH FLOOR./401

Department 1 : ORTHOPAEDICS Date Of Admission : 15-Nov-2021 5:21 pm

Consultant 2 : Date of Discharge : 19-Nov-2021

Department 2 :

Address : SEONI

Seoni , MADHYA PRADESH

9**12\%**381619

Referred By : DR. VIKAS SAWLA

OA Knee (Left>Right)
Left TKR done.

CHIEF COMPLAINTS (REASON FOR ADMISSION) Patient is a diagnosed case of Osteoarthritis both knee. (More in left knee) On admission complaints, pain in left knee. Inability to carry out activities of daily living because of pain.

General examination- BP-150/80mmHg, HR- 94/min, R/R-18/min, SPo2-99% in room air

Systemic examination- CNS-Patient is conscious, alert, responds sponatneously

to verbal commands. CVS- S1 S2 +

R/S- Bilateral air entry clear.

P/A- soft, BS+

Local examination Left Knee-Tenderness on palpation at joint line.

Pain on passive motion, crepitus+

INVESTIGATIONS : 15\11\2021

HB % 11.1gm % Platelets count 2.76 Lacs/cumm.TLC 5800/cumm

DLC P-76%, -L-21%E-02%, -M-01%, B-00% 15/11/2021 SARS COV-2 ANTIGEN TEST-Negative

15/11/2021 Glycosylated Hb-6.5%

15/11/2021 LFT

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serum creatinine-1.6

18/11/2021

Blood Urea-38, Serum creatinine-1.5 Hb-11.5g%, TLC-13200, Plt-2.43lacs

Urine routine and microscopy- normal 2D-ECHO- LVEF-50-55% Concentric LVH

No RWMA

EXECUTE: Left Total Knee Replacement done on 16/11/2021

Surgeon- Dr. Vikas Sawla

Anaesthetist Incharge- Dr. R. Harne Anaesthesia- Spinal+Epidural.

i Medial parapatellar approach

Left TKR done using F3, T-2, 2x11 INSERT (Oxynium SN Implant)

COURSE IN HOSPITAL

Patient was admitted with complaints of pain in left knee. Was diagnosed of OA knee about 1 year back. Pain and symptoms aggravated for which patient was admitted and planned for surgery after a complete workup. Routine blood investigations were within normal limits except for Borderline serum creatinine levels and borderline GFR. Patient has a similar history of this about an year back where he wasn't diagnosed of any renal pathology. Patient was taken for Left Total knee Replacement under spinal plus epidural anaesthesia on 16/11/2021. Patient withstood the surgery well and was kept under observation in SICU for 4-5 hours and was then shifted to ward. Physiotherapy was done and patient was mobilized under supervision the next day. Was managed with I/v fluids, I/V antibiotics,I/V PPI, I/V analgesics and syptomatic and supportive treatment.Regular phsiotherapy was done post op and patient was able to climb the stairs on POD2. Patient responded well to the treatment given and is being discharged in stable condition.

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CONDITION ON DISCHARGE

Patient is comfortable. Vitals stable. Morning physiotherapy session done.

BP-130/80mmHg

HR-96/min R/R-18/min SPO2- 98% S/E- Normal

Surgical site- wound healthy. No soakage.

ADVISED

: DFO Gel L/A

-Physiotherapy as advised.

-Avoid: Forward bending, Heavy Weight Lifting,

Use Western Commode Toilet, , Do not Sit on the ground

TREATMENT ADVISED

Tab Linid 600mg
 Tab Ultanise
 Tab Pantocid DSR 40mg
 1BDx 7days (Twice a day after food)
 1BD x15days (Twice a day after food)
 1 OD x 15 days (once a day before

breakfast)

Tab Chymoral AP 1 BDx 15 days (Twice a day after food)

Tab Ecosprin 75mg

1OD x15days(once a day after food)

1 OD x15days (once a day after food)

1 OD x15days (once a day after food)

1 ODx15days (once a day after food)

DFO Gel L/A

FOLLOWUP AND REVIEW DATE

Follow Up Advice & Review Date:

Review after 15days on 3th Dec 2021 for suture removal to Dr. Vikas Sawla When to obtain urgent care: Pain, Fever Surgical Site/Wound Infection,

How to obtain urgent care in case of emergency 24x7

Whatsapp and calling: 7566003344

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

Medical Officer

Dr.VIKAS SAWLA
CONSULTANT ORTHOPADEDIC SURGEON

Created By SAKSHI Modified By SAKSHI

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