

TRANSFER SUMMARY

Name of Patient	: MR. KIRAN BHAGWAN TAWARE	UHID	: MGM240017131
Age/ Gender	: 56 YEARS, 2 MONTHS / MALE	IP No.	: MGMIP2406720
Date of Admission	: 05-10-2024 10:40:34	Ward / Bed No.	: SURGICAL WARD UNIT / SW-518
Date of Discharge	: 13-11-2024 10:40:34	Consultants	: DR.PRASHANT ATHALE
Document No.	: MGMTS2400001562		
Diagnosis	Acute Appendicular perforation-post operative exploratory laparotomy with septic shock with demyelinating polyneuropathy and post operative tracheostomy and post operative bilateral VAC surgery.		

7-10-2024 00:00:00	Creatinine	3.5
08-10-2024 00:00:00	Creatinine	3.3
09-10-2024 00:00:00	Creatinine	2.7
10-10-2024 00:00:00	Creatinine	1.6
07-10-2024 00:00:00	Total Bilirubin	3.3
07-10-2024 00:00:00	Direct Bilirubin	3
11-10-2024 00:00:00	Na	156
12-10-2024 00:00:00	Na	151
12-10-2024 00:00:00	Creatinine	11.7
13-10-2024 00:00:00	Hb	7.6
14-10-2024 00:00:00	Hb	7.2
19-10-2024 00:00:00	Hb	6.7
20-10-2024 00:00:00	Hb	6.3
22-10-2024 00:00:00	Hb	6.6
24-10-2024 00:00:00	Serum Calcium	6.8
26-10-2024 00:00:00	Serum Calcium	6.9

OTHERS : EEG was done showed normal study.....Nerve conduction study was done showed sensorimotor demyelinating generalised polyneuropathy with axonopathic changes(severe).

BRIEF DESCRIPTION OF RADIOLOGICAL FINDINGS

CT: CECT abdomen (IV with Oral Contrast) and HRCT chest were done on 21/10/2024 showed mild peripherally enhancing fluid attenuation collection of maximum width 2.1 cm with air pockets within RIF,extending superiorly along right paracolic gutter-anterior pararenal space into perihepatic - subcapsular space.Inferiorly it is seen to extend along the right lateral pelvic wall,abutting adjacent lateral wall of the urinary bladder

MRI: MRI Brain plain was done showed leptomeningeal enhancement

USG: ,USG abdomen and pelvis was done on 18/10/2024 showed perihepatic,subhepatic,right paracolic gutter,right iliac region free fluid with dense internal echoes with internal septations present,approximate volume-120-150 ml.....USG local part was done showed track like pus in 8 o clock position,deeper extent cannot be commented upon(not visualised)

BRIEF DESCRIPTION OF SURGICAL INTERVENTION/DSA/CARDIAC CATHETERIZATION/OTHER PROCEDURES