



महाराजा अग्रसेन अस्पताल Maharaja Agrasen Hospital

West Punjabi Bagh, New Delhi-110026

EPIF-174



Name	: Mr. AMIT KUMAR	Age/Sex	: 24 Years / Male
IP No	: 1801447 UHID No: 1001391699	Bed No	: 554A
D.O.A	: 10/01/2018	D.O.D	: 23/01/2018
Doctor	: Dr.H.S Bhatyal, Dr.Dinesh Mittal, Dr.Sandeep Rastogi	Unit	: RENAL TRANSPLANTATION

DISCHARGE SUMMARY

DIAGNOSIS:

HTN, CKD on MHD with right Renal allografting was done on 13/01/2018.

HISTORY:

23-years-old male, known case of CKD on MHD was admitted on 10.01.2018 for renal transplantation with Live Donor (father- Daya Ram). Renal allografting was done on 13.01.2018.

PAST HISTORY:

The patient is a known case of HTN, CKD on MHD, CGN.

ON EXAMINATION:

Conscious and oriented. The patient is moderately built & nourished. Pallor present.

Vitals: Blood Pressure 160/80mmHg. Heart Rate 90/min.

Chest: Bilateral clear,

CVS: S1 & S2 normal.

P/A: Soft & bowel sounds present.

INVESTIGATIONS:

All investigations are attached.

HOSPITAL COURSE:

A 23-year-old male was admitted on 10.1.2018. Patient underwent hemodialysis on 10/01/2018 following which he had developed accelerated hypertension with hyponatremia and was shifted to ICU for 2 days. He underwent renal transplant on 13.1.2018 in Maharaja Agrasen Hospital. The patient was put on immunosuppressants (Takfa, Cellcept and Solumedrol) and antibiotics. The patient was managed postoperatively on IV fluids, antibiotics (Inj. meropenem, Inj. Fragmin, Inj. Solumedrol, Inj. Pantop, and Inj. Calcium Gluconate. Urine output was well maintained during the course of stay. DTPA scan was done which showed mildly reduced cortical function. The patient has been afebrile during the hospital course. B. Urea and S. Creatinine started downward trend after transplant. Presently, the patient is stable on therapy and will need regular followup. Serum creatinine stabilized at 1.4 mg%.

TYPE OF OPERATION:

Board Helpline No. : 011-40777744, 40777555, 40777666, 40777777 E-mail : info@mahdelhi.org Website : www.mahdelhi.org
A unit of Maharaja Agrasen Hospital Charitable Trust

This information is not intended to be a substitute for professional medical advice, diagnosis or treatment.

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Operation was done under general anesthesia.
right renal allografting

Renal graft

Side right
Nephrectomy type open.
Graft artery single.
Graft vein single.
Ureter adequate length.

Anastomosis

TREATMENT GIVE

Inj. Meropenem- 500 gm iv 12th hourly.
Tab. Arkamine 2tab 6th hourly.
Inj. Pantop 40 once a day.
Tab. Mycept 500 2 tab 12th hourly.
Tab takfa 3 mg 12th hourly.
Tab. Orofer XT twice a day.
Tab Omnacortil 40 once a day.
Inj. Mgso4 twice a day.
Tab Septran SS once a day.
Syp. Looz 2tsp at bedtime (10 p.m.).
Inj. Fragmin 2500 units S/C once a day
Inj. Calcium Gluconate iv twice a day

CONDITION AT THE TIME OF DISCHARGE:

SATISFACTORY.

Creatinine 1.4, urea= 37.

ADVICE ON DISCHARGE:

Nutrition: Normal diet.

1. Tab. Cefum 500 mg 12th hourly (after food) for 7 days. ^{10AM - 10PM.}
2. Tab. Mycofit-S (Myfortic) 360 mg 2tabs 12th hourly (10 a.m., 10 p.m.). ¹⁰
3. Tab. Tafka (Pangraft) (2 mg + 1 mg) 12th hourly (9 a.m., 9 p.m.). ²⁰
4. Tab. Omnacortil 40 once a day (11 a.m.) for 5 days.
5. Tab. Orofer-XT once a day (2 p.m.).
6. Syp. Gelusil 2tsp twice a day (11 a.m., 11 p.m.).
7. Tab. Gemcal once a day (2 p.m.).
8. Tab. Septran SS once a day (1tab 2 p.m.).
9. Syp. Looz 4tsf at bedtime (11 p.m.).
10. Tab. Pantocid 40 mg once a day (before breakfast - 7 a.m.).



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11. Tab. Minipress XL 5 mg 2 tabs 12th hourly (10 a.m., 10 p.m.).
12. Tab. Autas 10 mg 1tab 12th hourly (7 a.m., 7 p.m.).
13. Tab. Arkamine 0.1 mg 2tabs 6th hourly (6 a.m., 12 noon, 6 p.m., 12 p.m.).
14. Tab. Prolomet XL 50 mg once a day (11 a.m.).
15. Tab. Aycelovir 400 mg 12th hourly (11 a.m., 6 p.m.).
16. Tab. Dilzem once a day (11 a.m.).
17. Candid drop 30 drops / 3 hourly.
18. Listerine mouthwash
19. After every meals - gargles.
20. Daily dressing of transplant wound / as and when required - Dr. Megha for dressing.
21. Consult with Dr. sandeepRasthogi in OPD.
22. Consult with Dr. H. S. Bhatyal as advised.

Review with Hb / TLC / KFT / TAC level after 5 days.

In case of emergency (fever, pain abdomen, onset of any new symptoms), please contact 011-40777666/777, Ext. No. 70277028 (Casualty) & Paediatric Emergency No. 8800698196 or call hospital ambulance at mobile no. 9910489495.

* Facility for Lab Sample Collection from "Home" is now available between 7:00 a.m. to 3:00 p.m. You are requested to contact on Mobile No. 8800698207 and Landline No.: 40777533 to avail this facility.

Note: In case of the credit panel (ECHS / CGHS/ Govt. of NCT Delhi) patient, please bring new permission letter for the OPD review.

DR. H. S. BHATYAL / DR. DINESH MITTAL / DR. SANDEEP RASTOGI
DEPT. OF RENAL TRANSPLANTATION UNIT
CONSULTANT

R.M.O./ S.R. SENIOR

[Handwritten signature]
[Handwritten signature]

I have received the Discharge Summary and Discharge Advice explained in detail.

Patient's/Attendant's Signature

Name: _____

Date: _____

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Maharaja Agrasen Hospital

Punjabi Bagh, New Delhi-110026 Ph: 011-40777660, 40777777
Website: www.mahdelhi.org



Advance Receipt

Receipt No 542913 I.P. No 1801447

Date 10/01/2018
Time 10:18AM

Received With Thanks From **AMIT KUMAR**

The Sum of Rupees **Two Lakhs (s) Only**

For chq cleared as on 18/12/17 by inst 867109 cts zone no 1

Advance/Refund	200000.00	TDS	0.00
Service Tax	0.00	Disallowed	0.00
Total Rs.	200000.00		

Pay Mode : CHEQUE/D.D
ChequeDt: 867109

Bank Name: yes bank
Cheque Dt: 18-Dec-2017
Unit Name:

for : **MAHARAJA AGRASEN HOSPITAL**

Print Date 10/01/18

10:19AM
PLEASE PRODUCE THIS RECEIPT IN CASE OF REFUND. See Overleaf
A Unit of Maharaja Agrasen Hospital Charitable Trust (Regd.)