

# ALCHEMIST HOSPITALS LIMITED

## Department of Cardiac Sciences

### DISCHARGE SUMMARY / OPERATION RECORD MODULE

**PREPARE NEW DISCHARGE  
SUMMARY**

**VIEW / EDIT DISCHARGE  
SUMMARY**

**EXIT**

Designed and developed by: Neptun Joseph | Ver 01.0 | 10.10.10



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[History/ Examination](#)
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Patient's Name:  Age: 60 years Sex: Male Admission Date: 12/16/2009 12:00 AM MRN:  IPN:

**HISTORY**

Past History

Allergies

Social History

ECG

2D Echo

Carotid Doppler

USG Abdomen

**ON EXAMINATION**

GC  Pulse  BP

Chest  RR

CVS  JVP  Carotid

FA  Others

CG

Clinical Pathology

Urine Examination

Patient Details History/ Examination Lab Data Hospital Course Operation Notes Graft Details Diagram Side Bar Documents

Patient's Name: [ ] Age: 60 years Sex: Male Admission Date: 22/10/2009 12:00 AM MRN: [ ] IPR: [ ]

ID: [ 2 ]

	DATE				
	22/10/2009	23/10/2009	24/10/2009	25/10/2009	26/10/2009
Hb(gm/dl)	1	13	65	97	129
TLC (cells/mm3)	2	34	66	99	130
TRBC (million/mm3)	3	35	67	99	131
Platelets (cells/mm3)	4	36	68	100	132
ESR (mm)	5	37	69	101	133
ABO/ RH	6	38	70	102	134
PT (sec)	7	39	71	103	135
PTK (sec)	8	40	72	104	136
BT (minutes)	9	41	73	105	137
CT (minutes)	10	42	74	106	138
FBG (mg/dl)	11	43	75	107	139
PBG (mg/dl)	12	44	76	108	140
BUN (mg/dl)	13	45	77	109	141
Creatinine (mg/dl)	14	46	78	110	142
Na (mmol/l)	15	47	79	111	143
K (mmol/l)	16	48	80	112	144
Ca (mg/dl)	17	49	81	113	145
Mg (mg/dl)	18	50	82	114	146
T Bilirubin (mg/dl)	19	51	83	115	147
D Bilirubin (mg/dl)	20	52	84	116	148
SGOT (U/L)	21	53	85	117	149
SGPT (U/L)	22	54	86	118	150
Alk Phosphatase (U/L)	23	55	87	119	151
T Protein (gm/dl)	24	56	88	120	152

Patient's Name:  Age: 60 years Sex: Male Admission Date: 22/10/2009 12:00 AM MRN:  ICD:

Hospital Course:

Discharge Medications / Instructions

- Tab. Augmentin :
- Tab. Rosuvastatin :
- Tab. Betaloc :
- Tab. Cardorone :
- Tab. Dymepirin :
- Tab. Amifru :
- Tab. Nikoran :
- Syp. Agrol :
- Tab. Doryl :
- Cap. Pseudo :
- Steam Inhalation:

Condition on Discharge:

Signed By:

Qualification:

Designation:

**General Advice**

Avoid differential pressure on incision for six weeks and avoid sleeping on sides)  
 Keep the wounds clean & dry, if necessary use Betadine solution/ spray locally.  
 No restriction for semi-solid/ solid food. Avoid excess fluid intake.

**Medical Advice**

- 1) Report back to your physician at the earliest
- 2) Avoid changing medicines without medical guidance
- 3) Keep a check on weight gain
- 4) Self-monitoring of blood glucose- preferably fasting and 2 hours post lunch.
- 5) Sugar- fasting & PP after 3 days and inform report.

**Important**

Please contact immediately Dr. V. Sarwal for any small problem/ doubts on mobile 98116 02002 regarding surgical issues and \*\*

Consult Dr. V. Sarwal before any change in Medications by local physician for minor problems.

We prefer that if patient had any type of complications he/she brought to the hospital for routine check up without delay.

**IN CASE OF EMERGENCY, PLEASE FEEL FREE TO CONTACT DR. VIRENDAR SARWAL AT 98116 02002.**

Patient Details | History/Examination | Lab Data | Hospital Course | **Operation Notes** | Graft Details | Diagram | Side Bar | Documents

Patient's Name:  to Age: 60 years Sex: Male Admission Date: 25/10/2009 12:00 AM MRN:  IPI:

Operation Date	<input type="text" value="25/10/2009"/>	Surgeon(s)	Dr. Vinodhar Sarwal Dr. Mohammed Nabeen	Perfusionist	<input type="text"/>
Operative Procedure	Aorto-coronary artery bypass grafting surgery x 3 (OPCAB)  Individual reversed saphenous veins grafted	Anesthetist	Dr. Ajay K. Sinha Dr. Amit K. Ahuja	Scrub Nurse	Anwita, Surinder

**Operative Findings**

Sternum : Osteoplastic  
 Adhesions: Pleural & pericardial adhesions ++  
 LV size: Dilated  
 LV Contractions: Hypokinetic LV apex & anterior wall  
 Ascending aorta: Atheromatous  
 Trigone: Diffuse disease  
 Distal run-off: Poor  
 Intraop. Measurements: LAD<sup>+</sup> 1.5 mm, OM<sup>+</sup> 2.5 mm, RCA<sup>+</sup> 2.5 mm

**OPERATIVE PROCEDURE OF CABG (BEATING HEART)**

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Hemodynamic monitoring instituted which included PA pressure monitoring with Swan Ganz catheter. Midline incision over lower 1/3 of sternum made. Full median sternotomy done. Pericardium opened. Targets defined. Great saphenous vein harvested from the leg.

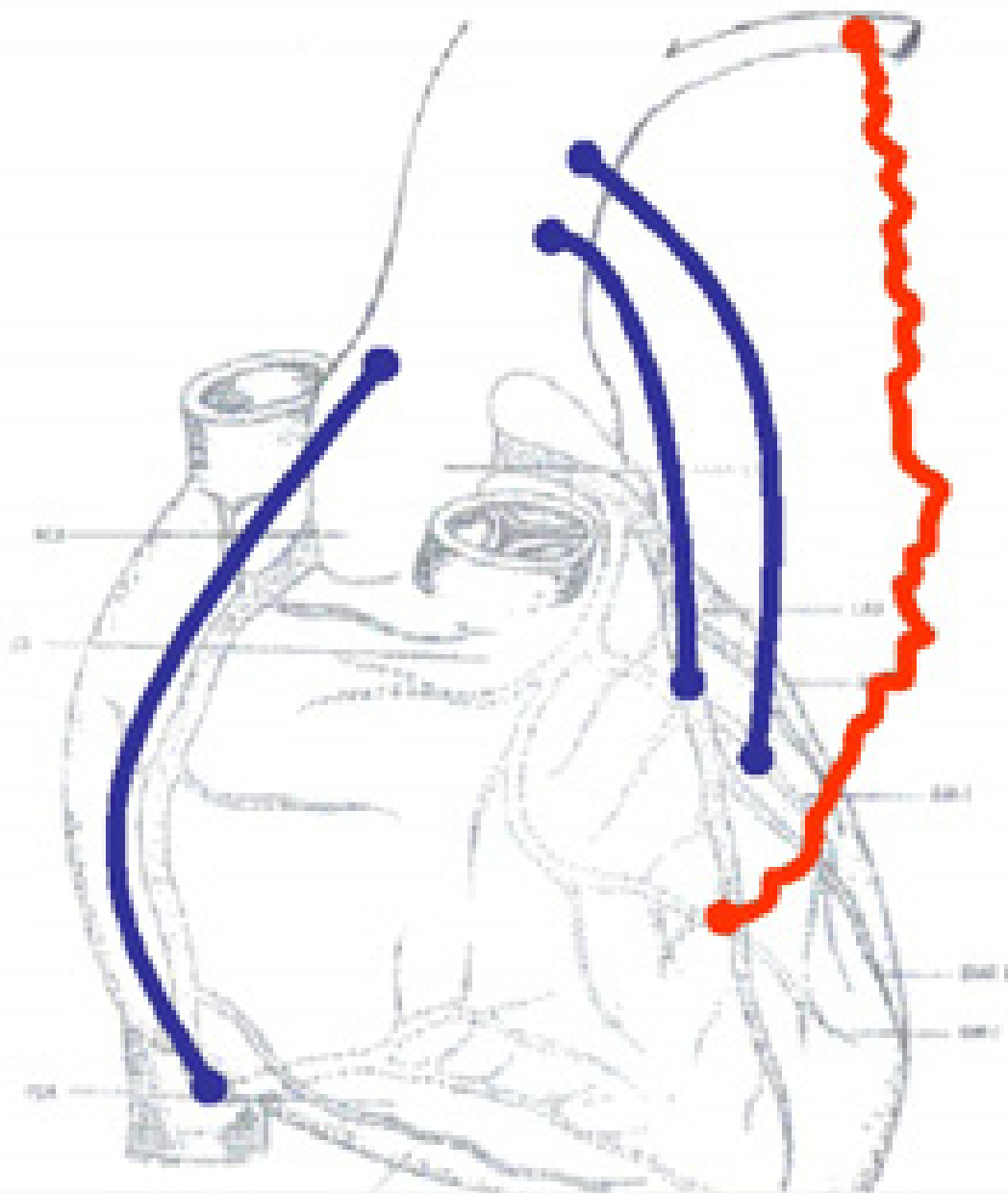
**Special Remarks**

Diffuse Atheromatous disease. Enterectomy performed on OM & RCA, poor LV function

Signed By:  Qualification:  Designation:



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- LIMA -> LAD
- RSVG -> Diagonal
- RSVG -> OM1
- RSVG -> OM2
- RSVG -> LactOM (APDA)
- RSVG -> LAD
- RSVG -> RCA
- RSVG -> RPLV
- RSVG -> RPDA





Dr. Vineeta Sarwal  
MS, MCh,  
FIACTS  
Head, Dept. of Cardiovascular Thoracic  
Surgery

Dr. Anurag Sharma  
MD, DM  
Chief Cardiologist,  
Dept. of Cardiology

Dr. Ajay K. Sinha  
MD, PDCC  
Head, Cardiac Anesthesia & I/C Cardiac  
Critical Care

Dr. Dheeraj Dhumir  
PGDA, MCh  
In Charge- Critical Care Dept. of  
Cardiovascular and Thoracic Surgery

Dr. M. Srinivas  
MD, Fellowship (Cardiac Anesthesia)  
Junior Consultant



