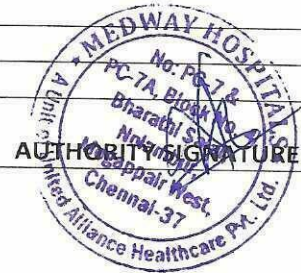


FINAL BILL	
PATIENT NAME : Mr. SREE VASTAVA. R.K	IP NO : IPM2024000700
AGE / SEX : 28 years /Male	D.O.A: 14/08/2024 AT 05:00 PM
PRIMARY CONSULTANT: MOHAMMED SIDDIQUE (E.N.T SPECIALIST, HEAD AND NECK SURGEON)	D.O.D: 15/05/2024 AT 07:30 PM
CLAIM NO: BLR-0824-PA-0005283	
TPA / CORPORATE : VIDAL HEALTH INSURANCE TPA	ROOM TYPE: SINGLE ROOM
AS PER PPN PACKAGE PPN E 07 - FESS WITH SEPTOPLASTY & TURBINECTOMY OR POLYPECTOMY OR CONCHOPLASTY- BILATERAL 61,200.00	
TOTAL	61,200.00
APPROVAL AMOUNT	
CO PAY	
DISCOUNT	
PATIENT PAID (NME)	
(RUPEES SIXTY ONE THOUSAND AND TWO HUNDRED ONLY)	



DISCHARGE SUMMARY

IP No.	: IPM2024000700	D.O.A	: 14/08/2024
UHID	: MHM202406350	D.O.S	: 15/08/2024
Name	: MR. SREE VASTAVA R. K	D.O.D	: 15/08/2024
Age / Gender	: 28 years /MALE		

Primary consultant : DR. MOHAMMED SIDDIQUE (E. N. T Specialist, Head and neck surgeon)

DIAGNOSIS:

- BILATERAL CHRONIC SINUSITIS WITH DEVIATED NASAL SEPTUM

PROCEDURE :

- BILATERAL FUNCTIONAL ENDOSCOPIC SINUS SURGERY WITH SEPTOPLASTY / POLYPECTOMY AND TURBINOPLASTY

PRESENT COMPLAINTS:

A case of 28 years old male, presented to emergency departments with complaints of white discharge from left ear on and off for past few months - aggravated since last 1 month. HRCT temporal bones done showed bilateral chronic otomastoiditis with fluid filled middle ear cavities, mastoid antrum and mastoid air cells, mucosal thickening in bilateral ethmoid sinuses. Now patient got admitted for elective procedure

DRUG ALLERGY:

- No known drug allergies.

ON EXAMINATION:

Patient conscious, oriented, afebrile.

Temp : 98.2°F	PR : 99/ min
SPO2 : 98% on room air.	BP : 140/80 mmHg
Weight : 78 kg	

SYSTEMIC EXAMINATION :

CVS : S1S2 [+]
RS : B/L air Entry (+)
P/A : Soft
CNS : No FND

INVESTIGATIONS

	14/08/24
Haemoglobin	14.0
Total count	6220
Platelet	2.80

Bleeding Time : "2 minutes 40 seconds"
Clotting Time : "5 minutes 10 seconds"
HRCT – Temporal bones : Bilateral chronic otomastoiditis with fluid filled middle ear cavities, mastoid antrum and mastoid air cells, No bony erosions or ossicular destruction. Tagmen tympani, tagmen mastoideum, bony facial canal, outer mastoid cortex and sigmoid plate are intact, marked mucosal thickening in bilateral ethmoid sinuses, moderate mucosal thickening in rest of the paranasal sinuses.

COURSE IN THE HOSPITAL :

A case of 28 years old male admitted in ward for surgical management with above mentioned complaints. ENT surgeon opinion obtained and all necessary Pre operative investigations were done. After obtaining informed written consent and anaesthetic fitness, patient underwent **BILATERAL FUNCTIONAL ENDOSCOPIC SINUS SURGERY WITH SEPTOPLASTY / POLYPECTOMY AND TURBINOPLASTY** under general anaesthesia on 15/08/2024 under general anaesthesia. Post procedure , patient shifted to ward for further observation. After procedure patient encouraged clear oral liquids. ENT surgeon review sought and dressing done, no soakage. Patient hemodynamically stable and improved symptomatically, tolerating oral well, nasal pack removed; hence patient is being discharged with following medications and regular follow up in OPD.

OPERATION NOTES:

Anaesthetist : Dr. Syed Ahamed

Surgeon : Dr. Mohammed siddique

Procedure : **BILATERAL FUNCTIONAL ENDOSCOPIC SINUS SURGERY WITH SEPTOPLASTY / POLYPECTOMY AND TURBINOPLASTY**

- Under strict aseptic precautions, Under supine with 15 ° head end elevation , head turned slightly to right , under general anaesthesia, using O' hopkin rod endoscope DNE done and flowing findings noted

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○ DNS to left , bilateral polyp, Right ITH (+)

- infiltration given both sides nasal septum.
- Left sided polypectomy done. Polyp removed from both port ethmoid and spheroid
- Left nasal cartilaginous - uncinectomy done using back bitter , polyp removed from left maxillars antrum.
- Right sided polypectomy done, polyp removed from right nasal cavity anterior or posterior ethumoidectomy and right sphenoid sinus.
- Right uncinectomy, polyp removed from Right maxillary antrum.
- A killian's incision made in left side of septum. Mucoperichondrial and mucoperiosteal flaps elevated using elevated.
- Same steps repeated on right side. Using Ballenger surgical knife. Cartilage part of septum removed, leaving the dorsal and cardinal strut. Spurectomy done. Flaps repositioned and sutured with 3-0 chromic catgut.
- Right inferior turbinoplasty done. Merocel nasal pack kept n bilateral nasal cavity. Anterior nasal dressing done. patient shifted to ward with stable vitals.

ADVICE MEDICATIONS:

Name of the drugs	Strength	Dosages	Frequency			Route of Admin	Relationship with meals	Duration
			M	A	N			
TAB. CLAVUM	625 mg	1 tablet	1	0	1	Per oral	After food	3 days
TAB. ZERODOL P	100/325/ mg	1 tablet	1	0	1	Per oral	After food	3 days

REVIEW :

➤ Review with Dr. Mohammed Siddique (ENT) in OPD after 3 days.

Duty medical officer


 Consultant signature
Dr. MOHAMEED SIDDIQE
 (E. N. T Specialist, Head and neck surgeon)
 Reg No : 58539



Typed by : Kayal

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