

# Discharge Summary

Medical Report

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16 Jun 2016

Date	16 Jun 2016
Facility	Continental Hospitals, Hyderabad (A Gleneagles Facility)
Doctor	Dr. Ravi Suman Reddy, Attending Physician (Neurosurgery)

## Admission Details

- Admission Date: 29/05/2016
- Speciality: Neurosurgery, InPatient
- Reason for Admission: Traumatic head injury (DAI)
- Diagnosis at Discharge: RTA with spastic quadraplegia – on physiotherapy

## History of Presentation

Head injury 8 months prior; diffuse axonal injury on PEG, came for neurorehabilitation. Past medical/surgical history: DVT.

## Physical Examination

- Generalised weakness present.
- No cyanosis, pallor, icterus, lymphadenopathy, or pedal edema.
- Respiratory system: Clear.
- Cardiovascular: S1 S2+, no murmurs, no rise in JVP.
- Per abdomen: Soft, non-tender, no organomegaly.
- CNS: Grade 0/5 power in both lower limbs.

## Hospital Course & Treatment

- 51-year-old lady presented with Diffuse Axonal Injury following trauma, admitted for rehabilitation.
- MRI Brain: Mild cerebral atrophy with old microhemorrhages and ischemic lesions – sequelae of old trauma. No fresh lesions.
- Urine cultures showed enterococci – treated with antibiotics.
- Dermatologist opinion regarding hair fall – treated accordingly.
- ENT opinion regarding hearing loss – treated accordingly.
- Ophthalmologist opinion for follow-up of refractive error.
- Managed with antibiotics, anti-epileptics and other regular medications.

- Physiotherapy done daily. Muscle power improved with this.
- Patient obeying commands now. Stable at time of discharge.

## Condition at Discharge

Patient improved remarkably to verbalizing and obeying commands, power improved to grade 3/5 and decrease in spasticity.

## Discharge Medications

- XT. Neurorex Plus – 1 tablet twice a day
- Syp. Keppra – 5ml morning, 10ml evening
- Syp. Polybion – 5ml twice a day
- T. Liofen (Baclofen) 10mg – twice a day
- T. Loxol 25mg – twice a day
- Syp. Depakine – 6ml morning, 12ml evening (for 6 more days)
- T. Razo 20mg – twice a day