



UHID No. : 10031015 VISIT No. : 23/5146
PATIENT NAME : Mrs. KAMRUN NESA AGE/GENDER : 72 Yrs/Female
BED CATEGORY : SHARED CABIN ADMISSION ON : 02/08/2023 01:20 PM
BED NO : 1012 DISCHARGE ON : 05/08/2023 5:41PM
DR INCHARGE : Dr Ali Nafisa
ADDRESS : ELEPHANT ROAD H - 129, , DHAKA, DHAKA, BANGLADESH

DISCHARGE WITH ADVICE

Final Diagnosis : Post Operative status following WLE of the Rt breast lump with frozen for clear margin with SNB (Rt axilla)
(ER ,PR :Positive ,Her 2 : Neg)

Co-Morbidities with duration : HTN, DM , Cold Allergy

Chief Complaints: (Reasons for Admission) : A lump at right breast for 1.5 months , pain at right breast for same duration
,Known case of DM,HTN,Cold Allergy ,admitted for operative management

Significant Findings :

Physical:Ill-Looking

Allergy: Cold Allergy

Investigation: All investigation reports are supplied to patient party with patient's progress file

Blood Group: A (+ve)

Course in Hospital : WLE followed by conservative management at IPD

Major Medications Used : Inj.Ceftriaxone (1gm)

Surgery performed :

Date & Time:03/08/2023 at 4:20 pm

Diagnosis:Rt IDC (G-II) with Axilla (-ve) with ER ,PR :Positive , Her 2 : Neg

Name of Operation: WLE of the Rt breast lump with frozen for clear margin with SNB (Rt axilla) Under (GA +LA)

Name of Incision: Linear incision bellow axillary fold (Rt)

** (10+10) =20 ml of bupi diluted and was injected locally prior to incision

Procedure:With all aseptic precaution ,after painting & draping (2ml+2ml) methyl blue+flourosent dye was injected in Rt breast deep to the breast tissue & massaged gently for about 10-15 min.WLE of Rt breast lump was done through a linear incision & send for frozen section biopsy after orientation with 1.0 silk as short for superior ,Long -Lateral ,Deep-Double,while waiting for frozen result SNB from Rt axilla done through the same incision and sent for histopathology .Frozen report came as (+ve) for malignancy & margin were clear.4-5 titanium clip were placed in situ on the tumor bed for further aid for radiotherapy.Through wash with N/S given & hemostasis was done properly.Parenchymal clouser done with 2.0 & 3.0 vicryl C/B and subcuticular closure done with 4.0 vicryl C/B.Skin glue applied & dressing applied.

Surgeon: Dr.Ali Nafisa

Assistant Surgeon: Dr.Khadiza ,Dr.Maliat

Anesthetist:Dr.Kazi Nur Asfia

Assistant Anesthetist:Dr.Bristy

Technician:Mustafiz

Scrub Nurse:Bipasha

Condition on Discharge : Improved

Advice on Discharge :

Medication:

DRUGS	DOSE	DURATION
Tab.Cefotil 500mg	1+0+1	10 days
Tab.Rolac 10mg	1+1+1, after meal	5 days and if pain



Cap.Esonix 20mg	1+0+1, 30 min before meal	1 month
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Take anti-DM and anti-HTN drug as before

Strictly monitor blood sugar

Diet Advice: Diabetic

Patient Education on :

- 1.Safe Medication: Yes
- 2.Pain Management: Yes
- 3.Food/Drug Interactions: Yes
- 4.Safe use of Medical Equipment: Yes
- 5.Physical Activity Guideline: Yes
- 6.Pressure Ulcers: Yes
- 7.Infection Control: Yes
- 8.Safety tips for senior citizen: Yes
- 9.Stop Smoking Counseling: Yes
- 10.Wound Management: Yes

Dressing Advice :

The signs to watch for reporting to Emergency :

- 1.Discharge from operated side.
- 2.Redness/Swelling on Operative side
- 3.Any complaints/Symptoms regarding operation

Investigation require before next visit : Histopathology

Details of Follow-Up : On 07.08.2023

Dr Asma Siddiqua Dr Ashik Uz Zaman
Riyad

AS
5.8.23

AS

AS
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