



Joint Replacement and Reconstruction Discharge Summary

Patient Name: Smt. KARKERA GEETA KISHORE
Date Of Birth: 21/11/1955
Visit Code: IP0003
DOA: 24/06/2024

MRD#: 872812

Sex: Female

DOD: 28/06/2024

Room/Bed No.: SS9C-3919

Consultant: Dr. WAKANKAR HEMANT (Regn No.: 57705)

Reference: DR SUKRUT PURANDARE, Dr DESHMUKH HRISHIKESH

Diagnosis: Osteoarthritis of right knee.

Clinical course and Event:

C/O: Pain in right knee, difficulty in walking, climbing stairs.

K/C/O: HYPERTENSION, DIABETES

O/E: Vitals - Normal, RS - Clear, CVS - NAD, P/A - Soft.

L/E: No Effusion, No PFT, MJLT ++, ROM R - 0° - 130°, Hips - Normal, No DNVC.

ASA Grade:

2

Pre op Hb: 12.9

Pre op PCV: 39.3

Pre op Sr Creat: 0.76

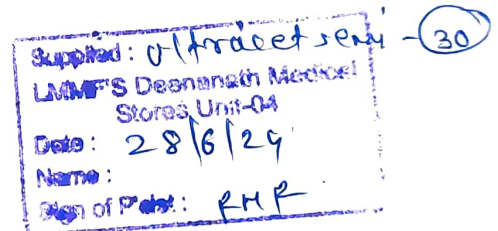
Pre op HbA1C: 7.8

Pre op EF: 60

Post op Hb: 11.7

Post op PCV: 33

Post op Sr Creat: 0.8



Advice on Discharge:

1. T. PACIMOL 650 mg 1-1-1 x 7 days and then 1-1-1 x 7 days then SOS
2. T. PAND 1-0-0 x 7 days
3. T. ULTRACET SEMI 1-0-1 x 7 days and then 0-0-1 x 7 days then SOS
4. T. RESNER PLUS 0-0-1 x 1 month
5. T. XARELTO 10 mg 0-0-1 x 14 days
6. T. TRICIUM ACTIVE 1-0-0 x 2 months.
7. T. ECOSPRIN 75 0-0-1 x 3 months (To be started only after course of T. XARELTO is over)

Check Following medicines to be continued as per Physician's advice
BP regularly at home every 3rd day and restart antihypertensive medications ----- IF BP is persistently above 140/90 mmHg after consulting your physician.

T. TELMA 20 MG 1-0-0 with BP check

5MG 0-2 -1
0.3 Before Lunch and Before Dinner
IP 20MG 0-0-1

Fasting and PP after 4 weeks and Follow up in DMH medicine OPD Saturday with prior appointment.

Following advice from Urologist -
Follow up in urology opd next Thursday for voiding trial
Tab Maxvoid 8 0-0-1
Tab Urotone 25 1-0-1
Tab Niftas 100 0-0-1 till urine catheter is present

	KNEE ROM ON DISCHARGE	
RT	0	90

Staple Removal on: 10/07/2024

Physiotherapy for 1 month after discharge:

Next follow up at Deenanath Mangeshkar Hospital, Pune 3 MONTHS

With: Dr. Hemant Wakankar

OPD Time: Mon and Wed 3 pm to 5 pm

By prior Appointment only. For appointment call 020-40151100 between 9 AM - 6 PM.

For emergency contact : Dept. ON Call no: 9850285871.

In case of emergency please come to DMH ER 1 (Emergency Room). It is open 24 hours a day.
Phone no.: 020-4015-1027 / 1065.

OPERATIVE NOTE

Pre-operative Antibiotics:

Inj. SUPACEF 1.5gm IV
INJ TARGOCID 400MG IV

Operative Procedure: Right Total Knee Replacement

Date of Surgery: 25/6/24 Type of Anaesthesia: SA+LA Anaesthetist: Dr. Manjiri Ranade

Tourniquet inflated at 250 mm Hg for R -47 min.
Midline incision. Arthrotomy through medial para patellar approach.
Patella: No degeneration. Patellar osteophytes excised.
ACL- Attenuated. PCL- Normal. Menisci- Degenerated.
Routine medial and posteromedial release done.
Distal femoral cut taken using intramedullary jig at 6°. Tibial cut with posterior 3° slope using extramedullary jig. Femoral sizing done using anterior referencing and femoral cutting block fixed in 5° of external rotation.
Flexion / Extension gaps balanced and mediolateral stability checked. Posterior release done.
Anterior and posterior chamfer cuts and box cuts completed. Trial prosthesis inserted. Joint stability and patellofemoral tracking satisfactory. Lateral retinacular release not done. Femoral canal plugged with bone.