

CT Abdomen(08/04):1)Post surgical changes are seen in ileocolic anastomotic site with patent Lumen.

- 2) No evidence of collection around the anaestomotic site to suggest leak.
- 3) Mildly dilated small bowels with delayed contrast passage could be due to functional obstruction or partial obstruction at the anaestomotic site.
- 4) Evidence of cholecystomy.

Ultrasound abdomen & pelvis(10.04)- 1)Peritonitis with small bowel ileus is a possibility
2) Right basal segment lung consolidation and small pleural effusion

Ultra sound sacn of abdomen and pelvis(11/04): 1)Bibasal atelectasis with mild bilateral pleural effusions.

- 2) Mild ascites.
- 3) Left sub diaphragmatic/peri splenic fluid collection approximately 3cm in depth.No other intra abdominal collections.
- 4) Fluid filled prominent small bowel loops.Paralytic ileus?

Chest X ray:1) Right basal effusion +/- consolidation.

- 2) Small effusion possible in left side.

USS Abdomen(14/04): 1)Left sub diaphragmatic collection of fluid again noted

- 3) Small superficial collection of fluid at the laparoscopic surgical site in peri umbilical region-pos surgical changes?

CT scan(abdomen and pelvis)(14/04)-1)Multiple loculated large and small fluid collections. Largest in the left upper abdomen 615cc; no bowel contrast leakage is demonstrated in the current study.

- 2) No features of bowel obstruction;no ascites or lymphadenopathy.
- 3) Lung bases show atelectasis and bilateral small volume pleural effusions;more on left side

Specimen for culture &ABST(17/04)

Specimen-Fluid from diaphragmatic collection.- no growth after 48 hours of incubation.No organisms.Occasional puss cells+

Specimen culture & ABST(17/04)

Specimen- CVP tip- Yeiled coagulase negative *Staphylococcus* species

ABST- sensitive to - Teicoplanin and Vancomycin

Blood culture aerobic & ABST(18.04)-No growth after 48 hours of incubation.

Renal Profile	31/04	02/04	04/04	06/04	09/04	12/04	14/04	16/04	17/04	18/04
Na	145	143	139	142	137	139	136	135	135	131
K	4.6	4.5	4.1	3.6	4.5	3.3	4.4	4.8	5.0	5.2
Cl	106	104	101	102	103	100	97	95	100	97
Urea		20.5	17.3	37.9	18.7	29.0	17.2			
BUN		9.6	8.1	17.7	8.7	13.6	17.2			
S. Creatinine		1.3		0.8	1.0	0.7	0.8		0.8	

Blood group-AB+

Albumin- 2.8g/dL

PT-14.0(09/04), 14.3(15/04)

INR-1.12(09/04), 1.15 (15/04)

Ionized Calcium-4.4mg/dL(6.38am), 5.1mg/dL(22.01pm)

Mg	09/04	10/04	13/04
Mg/dL	1.7	2.0	1.7

Total Calcium- 7.8mg/dL

Blood culture aerobic & ABST(blood-cvp):no growth after 24hours of incubation(15/04)

Blood culture aerobic & ABST(blood-peripheral):no growth after 24hours of incubation

Blood culture aerobic & ABST: Yielded two types of Klebsiella species after 11 hours of incubation

ABST; *Klebsiella type 1:Sensitive to-Co-trimoxazole,Amikacin, Piperacillin-tazobactam, Ertapenem, Imipenem, Leofloxacin, Colistin, Cefoperazone-sulbactam

Intermediate- Ciprofloxacin

***Klebsiella type 2: Sensitive to-Amikacin,Leofloxacin, Colistin**

Urine for culture & ABST: Normal

Amylase-fluid (sub diaphragmatic collection)- 948U/L

CT scan(chest,abdomen & pelvis)(22/03):1) Right colonic(hepatic flexure) neoplasm with periserosal invasion and regional adenopathy.

2) No para aortic adenopathy or distant metastasis.

3) CT staging T3N2bM0

USS Abdomen(08/04): Dilated small bowel loops with stag nation and reduced peristalsis both iliac fossa region with small amountof free fluid in the pelvis.

Kings Hospital Colom

 Medical Officer

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 Medical Officer Name & Signature

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 Consultant Name/Seal

DISCHARGE TREATMENT SUMMARY

Patient Name: Mr C. D. Wikramatunge		Date of Admission: 03/31/2024
Age: 47 years	Gender: Male	Date of Discharge: 18/ 04 /2024
BHT : IP/KH/24/004466	Ward:03	Consultant: Prof K.I Deen

DIAGNOSIS: Hereditary non polyposis colorectal cancer+ gall stone cholecystitis

Clinical Summary:

Admitted as requested for Laparoscopic right hemicolectomy+Cholecystectomy.

Indication: Right colonic (hepatic flexure) neoplasm with perineal invasion+regional lymph node enlargement (T3N2bM0) + asymptomatic gall bladder calculi(2x 1.5cm)

Allergy Hx : nil

O/E

Afebrile

PR - 80/bpm

BP- 110/70 mmHg

Abdomen-Mild tenderness on deep palpation, Soft abdomen

Lungs- VB/clear

Investigations

FBC	31/0	02/0	05/0	06/04	09/0	10/0	13/0	14/0	15/0	17/0	18/0
	3	4	4		4	4	4	4	4	4	4
WBC	6.2	10.9	10.5	7.4	3.9	6.3	14.7		13.0	13.9	12.8
N%	59.5	88.8	86.9	73.3	74.0	83.8	84.5		79.8	85.4	83.1
L%	30.1	0.4	6.8	13.6	12.1	0.4	5.7		13.5	4.8	5.8
Hb	11.8	11.0	11.7	10.3	10.9	11.0	9.0		9.0	8.0	7.5
Platelets	249	228	315	324	257	219	348		390	497	533
CRP				83.1		314.6	166.7	220.5		237.1	163.

Liver Profile	09/04	14/04
Total protein	5.4	5.5
Albumin	2.5	2.3
Globulin	2.9	3.2
A/G ratio	0.9	0.7
T. Bilirubin	0.8	1.0
D. Bilirubin	0.4	0.3
I. Bilirubin	0.4	0.7
ALP	66	61
ALT	36	16
AST	30	24
GGT	178	107

	09/04
TSH	0.330
Free T3	2.14
Free T4	1.46

11th July 2024

Mr. C.D. Wickramatunge
Age 48Y/M
Colombo

Dear Sir,

QUOTATION FOR CONDUCTING GENETIC TESTING

As requested by Dr. Mahendra Perera Clinical Oncologist, we are pleased to offer you the following services for Diagnostic purpose through Core Diagnostic Pvt. Ltd, India.

Financial Offer

Test Cord	Test Name	Cost for the Toal Package (LKR)
P00616	coloCORE Targeted Panel-1	LKR.276,360/-

- **Terms & Conditions.**
- Diagnose results, reports will be given after 28 working days.
- Full payments should be transferred before the execution of the process.

Account Details.

Aegle Omics (Private) Limited
Bank - Commercial Bank
Branch- Narahenpita
Acc No- 1000756928
Swift Cord- CCEYLKLX

Thank you!



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Amila Herath
Manager Operations