

DISCHARGE SUMMARY

Group: 6

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Reviewed By :
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DISCHARGE

- NABH defines **discharge** as a process by which a patient is shifted out from the hospital with all concerned medical summaries ensuring stability.
- Achieving safe and timely discharge from hospital can be a complex process.



DISCHARGE PROCESS

The treating doctor decides discharge of the patient after reassessment

Inform the relatives and patient attenders

Resident doctor prepares discharge summary

Nursing staff does pharmacy and billing clearance

Patients attenders clears the bill and hands over the bill to the nursing staff

Nursing staff checks the bill and hands over the discharge summary

The care plan and advice is explained to the patient and attender

DISCHARGE SUMMARY

- Hospital discharge summaries serve as the primary documents communicating a patient's care plan to the post-hospital care team.
- The Joint Commission has established standards for summary
 - Patient details with UHID, DOA and DOD
 - Reason for hospitalization.
 - Significant findings.
 - Procedures and treatment provided.
 - Patient's discharge condition.
 - Follow up advice and medications
 - Attending physician's signature.

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DISCHARGE SUMMARY

Name: Aavani Suresh Age: 07Yrs/F Hosp No. 959662
DOA: 18.07.11 DOD: 27.07.11 IP No. 349263

DIAGNOSIS: MEDULLOBLASTOMA

HISTORY: History of vomiting 1 month. No h/o headache, double vision, seizures, significant visual disturbances. No h/o significant past illness. H/o tendency to fall while keeping eyes closed. H/o hydrocephalic attacks.

O/E: PR: 90/mt BP: 100/70mmHg
Higher mental functions: WNL
Cranial nerves: WNL
Reflexes: Pendular knee jerk B/L
Motor no deficit.
Sensory: No deficit. Romberg's positive.
Gait ataxia (+)
Tenderness walking not possible.

INVESTIGATION

16.07.11: **MRI Brain:** Intra ventricular mass lesion in IV ventricle with imaging features. Ependymoma. Differential diagnosis includes medulloblastoma.

18.07.11: **CBC:** Hb: 12.9gm%, T.WBC: 10200/cumm, D.C.N: 51%, L: 46%, E: 03%, TRBC: 4.4/cumm, PCV: 37%, MCV: 83fl, MCH: 29pg, MCHC: 35%, P: 2.8l/cumm, Blood Group & Rh: 'O' Positive
HBs Ag: Negative, **HIV:** Negative

21.07.11: **Hb:** 12.4gm%, **PCV:** 35%

26.07.11: **HPE:** Medulloblastoma, excised posterior fossa SOL.

DISCUSSION: 7yr old girl child admitted with a large midline posterior fossa SOL and hydrocephalus underwent total excision of the same under GA. She had an uneventful post operative period. She has no neurological deficit except for ataxia. Wound is clean. Sutures removed. No CSF leak. Patient requires adjuvant craniospinal XRT.

- Normal Diet
- Referred to department of RT for adjuvant treatment.
- Review on 11.08.11 in Neurosurgery OPD at 11am.
(OP Days: Tues/Thurs/Saturday)

DR. S.SIVAKUMAR



(MJ)

CHECKLIST FOR DISCHARGE SUMMARY

Discharge Summary Checklist

Unit/Area: _____

Reviewer: _____ Date of Review: _____

Patient Discharged: _____ Date of Discharge: _____

Elements in Discharge Summary	Y/N	N/A	Comments
Does it include primary and secondary diagnoses?			
Does it include all relevant medical history and physical findings?			
Does it specify dates of surgery or other invasive procedures and hospitalizations, if appropriate?			
Does it list procedure(s) performed?			
Does it include results of procedure(s) and abnormal laboratory test results?			
Does it provide recommendations of any subspecialty consultants?			
Does it describe the patient's condition or functional status at discharge?			
Does it detail information given to the patient and family upon discharge?			

Does it include medication information?			
Process and Format	Y/N	N/A	Comments
Is the summary written, not verbal?			
Was the summary started upon admission?			
Has the patient been given a copy of the discharge summary in his or her primary or preferred language and at the appropriate literacy level?			
Is the formal, written summary complete at the time of discharge?			
Has any information in the discharge summary been delivered to the next primary care provider by phone, fax, or e-mail preceding delivery of the formal, written discharge summary?			

THANK YOU