



**Muotlaq Mohammed Alshamari**

**MRN 06968**

**ROOM 5055**

**DATE OF OPERATION: 26/2/2024**

**DATE OF DISCHARGE: 28/2/2024**

**DIAGNOSIS ON ADMISSION: Left Knee Osteoarthritis**

**REASON FOR ADMISSION/OPERATION: Left total knee arthroplasty**

**SUMMARIZED HISTORY:**

57-year-old, male, with background of Gout and back pain, presented complaining of chronic Left knee pain and instability, diagnosed as Left Knee Osteoarthritis, and planned for total knee arthroplasty. Patient underwent Left total knee arthroplasty under spinal anesthesia, operation was done successfully, and no complication or bleeding occurred. Postoperative x-rays were reviewed and showed acceptable alignment and positioning of the prosthesis. Patient then was admitted to the ward for observation and postoperative management.

**PATIENT CONDITION ON DISCHARGE:**

- Patient discharged on good condition without complaints.
- The patient has been medically stable and cleared by the physical therapy team and internal medicine team for discharge home.
- The patient fulfilled discharge criteria for total knee replacement:
  - Stable vital signs.
  - Lack of dizziness.
  - Ability to void.
  - Pain controlled with oral analgesics.
  - Medical Clearance by internist.
  - Safe transfer in and out of bed.
  - Ability to walk 200 feet independently with assisted device.
  - Flexion beyond 90 degrees and active extension without lag.
  - Medicine schedule explained to family along with postoperative packet.
  - Patient and family comfortable to be discharged home.
- Home health follow up arranged as scheduled.
- Home nursing will assess the patient later tonight and twice daily for the next 72 hours. Patient will have daily physical therapy visits for the next 12 days.
- Medications and home supplies were explained to patient and their family.
- They confirmed understanding the medication administration schedule and will call if any questions or concerns.



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Muotlaq Mohammed M Alshamari

08-12-1966

Male

5th Floor Inpatient Medical Ward

**MEDICATIONS ON DISCHARGE:**

**IV medications:**

- IV Ketorolac 15 mg BID for 2 days (total of 5 doses, tonight dose + 2 more days) *Last given 1000H*
- After giving the ketorolac dose, give bolus of 250ml normal saline.
- IV methylprednisolone 125 mg once daily for 2 days *Last given 0800H*

**Oral medications:**

- Oxycodone/Acetaminophen 5/325 mg every 4 hours according to pain scale 2 tablets for 21 days. *Last given 1400H*
- After ketorolac finishes start Celebrex 200 mg once daily for 3 weeks
- Pregabalin 75 mg capsule once daily at bedtime for 12 days. *Last given 2200H (27-02-24)*
- Apixaban 2.5 mg tablet every 12 hours for 30 days *Last given 0800H*
- Ibuprofen gel to be applied topically around the operated knee three times a day for 30 days. *1400H*
- Ondansetron 4 mg tablet PRN every 8 hours in case of nausea/vomiting for 5 days. *not given*
- Esomeprazole 40 mg tablet twice daily for 2 weeks then once daily for 2 weeks *Last given*
- Dulcolax 5 mg 2 tablets every 12 hours as needed (PRN) for 5 days. *Last given 0800H*
- Roxonin 100 mg patch over operated leg at the site of maximum pain (to be changed daily) for 30 days. *1600H*
- Scopolamine patch 1mg/72hours every 3 days (to be changed next on 1/3/2024). for 14 days.
- Vitamin D 50,000 capsule once weekly for 60 days. *Last given 27-02-24*
- Strepsils tablets every 4-6 hours *Last given*
- Fexofenadine 120mg tablet once a day for 5 days *to start*
- NACL tablet 1 gram twice daily for 5 days *to start*

**SPECIAL INSTRUCTIONS:**

- To be seen and evaluated in ER in any case of emergency.
- Activity as tolerated with no driving for 2 weeks.
- Weight bearing status: WBAT
- The dressing is to be kept dry and clean. The patient may shower by applying Saran wrap on the dressing. -The dressing is to be changed after the shower.
- Follow up with orthopedic and internal medicine in 5 days with CBC, kidney profile, FBS, GFR and post op knee x ray.
- Follow up with Dr. Sartawi or one of his associates in 2 weeks.
- The patient was instructed to call Dr. Sartawi immediately if there is any drainage, increased redness or severe pain or if they have any concerns.