

Sumon Mistry (10 yrs, Male)

Date of Admission : 10-06-2012

Date of Surgery : 19-06-2012

Date of Discharge : 02-07-2012



Medical Profile :

Trauma to the back after an electric shock injury 1 month back leading to immediate severe back pain and inability to move lower limbs along with urinary incontinence. He was treated elsewhere conservatively without any relief. He is still not able to sit up due to severe back pain.

Clinical Finding :

Tender dorsal spine with gibbus with severe tenderness. Motor power of lower limbs grade 0/5, partially flaccid, partially spastic. Sensory level D8. Pressure sores over the trochanters and sacrum.

Investigations :

Xray/MRI/CT -- Fracture dislocation D6/7/8 region with gross kyphosis and oblique translation -- increasing deformity on sitting up. Cord transection present.

Management :

D4 D5 and D9 D10 pedicle screw-rod instrumentation (One Alpha /Gesco / Titanium) done. Excision of the callous around the facet joints posteriorly and anterior to the spinal cord done as much as possible for loosening of the spine. Kyphosis correction was done with cantilever techniques and periapical compression. Local bone used for posterior spinal fusion. Wound closed in layers over a drain. Procedure done u/GA at Park Clinic on 19.06.2012.

Post Operative Protocol :

Uneventful postoperative recovery. Mobilised on the 2nd day, -- subsequently discharged. At the time of discharge, the patient was sitting comfortably with significant relief of pain.

Advice :

1. Transfer to rehabilitation center.
2. Tab Niftran 100 mg once daily x 1 month.
3. Report after one month at clinic for follow up (please take prior appointment before 3 weeks).
4. Follow other medicines according to discharge certificate.

(Dr. SAUMYAJIT BASU)