SURGERY CASE PRESENTATION

Mentor: Dr. Kishan Rao, Founder of White Army

Presenter: Ms. Nandini

- Name: Mrs. XYZ
- Age : 51yrs
- Gender: female
- Occupation: housewife
- Address: kengeri
- Lower socioeconomic status
- DOA: 29th may 2022
- DOE: 2 June 2022

Chief Complaints

- Swelling over neck for the past 4 years

HOPI

- Patient was apparently normal four years ago when she noticed a swelling over the front of the neck, which was insidious in onset and has gradually progressed to present size.
- Complaint of discomfort while swallowing
- No h/o pain over swelling,
- No h/o unintentional weight loss, tremors, palpitations, diarrhea, excessive sweating, anxiety,insomnia
- No h/o weight gain, lethargy, hair loss, cold intolerance, constipation,
- No h/o difficulty while breathing, hoarseness of voice,
- No h/o sudden increase in size of swelling, bone pain, any other swellings in the body

Past history

- Not a k/c/o dm/tb/htn/asthma/epilepsy.
- No h/o of previous surgery
- No h/o of drug intake
- No h/o irradiation

Personal history

- Normal appetite
- Mixed diet; no excessive consumption of goitrogens
- Adequate sleep
- Regular bowel and bladder movements
- No addictive habits

Menstrual history

- Menarche: 13 years
- Regular cycles every 28 +/- 2 days of 3/4 day flow. Needed 3/4 cloth changes for the first 4 days
- Menopause: 50 years of age

Family history

- No similar complaints in the family/ neighbouhood

- ALLERGY HISTORY:
- No known allergies

Summary

- Here is a 51 year old housewife, presenting with a midline neck swelling that has been present for the past 4 years, gradually increasing in size with no features of hypo/hyperthyroidism. No compressive features noted.

GPE

- Due consent was taken.
- Patient examined in a well lit room
- Patient was conscious, cooperative and well oriented to time, place and person
- Patient is moderately built and nourished

- Wt: 57kg; ht: 5.2feet; BMI: 23

- Vitals: afebrile
- bp: 130/80mmhg
- pr: 86 bpm
- spo2: 98%
- Pallor, cyanosis, clubbing, icterus, lymphadenopathy, edema absent
- Head to toe examination: normal findings

Local examination: Neck

- Done at eye level of patient
- Inspection: swelling of 5x4 cm situated in the right of the midline of neck moving with deglutition, not moving with protrusion of tongue.
- Nodular surface, skin appears normal.
- Trachea is central
- No other visible swellings in neck
- No ocular signs observed.
- No tremors.

- PALPATION:
- Inspectory findings confirmed
- No local rise in temperature, non tender
- Swelling involving the right lobe and isthmus of thyroid gland, margins are well defined and non-tender with a multinodular surface.
- 3 nodules palpated, firm in consistency
- Lower limit palpable
- Rest of thyroid non palpable
- Central trachea
- Carotid pulses felt
- No other swellings in neck

- Percussion: resonant note
- Auscultation: no bruit heard

Impression

- 51 year old lady with a long standing, slow growing swelling suggestive multinodular goiter, involving the right lobe of the thyroid, clinically euthyroid and without any compressive symptoms

Diagnosis

- Non-toxic multinodular involving right lobe and isthmus.