THE EVALUATION OF CREATININE CLEARANCE IN SPINAL CORD INJURY PATIENTS

Guide: Dr. P.K. Jain, MD, MNAMS

Investigator: Dr. Mahipal Singh

Case No.

OPD/MRD No. Dated:
Patient's name Ward/Bed:
Age / Sex:
D.O.B.:
Address:
Occupation:
Socio-economic status:
Physical Activity: Active/Sedentary
Marital status:
Referred by:
Chief complaints:
1.
2.
3.

HISTORY OF PRESENT ILLNESS

A. Injury
   Mode Site Duration
   Other injuries (including head injury):

B. Paralysis
   i. Para/quadriplegia:
   ii. Duration of paralysis:

C. Urination
   Haematuria:
   Automatic Bladder:
   Autonomous bladder:

D.

PAST HISTORY
   Hypertension Diabetes mellitus
   Tuberculosis Renal colic
   Recurrent UTI Swelling over body/feet
FAMILY HISTORY
Tuberculosis :
Hypertension :
Other chronic diseases :

PERSONAL HISTORY
Veg./Non-veg. :
Any intoxication :

HISTORY OF DRUG INTAKE
Prior to injury :
During treatment of injury :

PHYSICAL EXAMINATION:
General Condition
Pulse rate
Temperature
Resp. rate
B.P.
Height
Weight
Pallor

SYSTEMIC EXAMINATION

RESPIRATORY SYSTEM

CARDIOVASCULAR SYSTEM

ABDOMEN
Tender/nontender :
Liver :
Spleen :
Ascites :

CENTRAL NERVOUS SYSTEM
Appearance and behaviour :
Consciousness :
Orientation in time :
Place & person :
Hallucination :
Delusions :
Memory :
Speech :
Cranial Nerves :
Motor System

A. Bulk:

<table>
<thead>
<tr>
<th>Lower extremity</th>
<th>Left</th>
<th>Right</th>
</tr>
</thead>
<tbody>
<tr>
<td>Circumference of calf muscle (10&quot; above from medial malleoli)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Circumference of thigh (10&quot; below from ant. iliac spine)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Upper extremity</th>
<th>Left</th>
<th>Right</th>
</tr>
</thead>
<tbody>
<tr>
<td>3&quot; below from medial epicondyl of humerus</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5&quot; above from medial epicondyl of humerus</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

B. Tone:

<table>
<thead>
<tr>
<th>Lower extremity</th>
<th>Left</th>
<th>Right</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ankle joint</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knee joint</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Upper extremity</td>
<td>Left</td>
<td>Right</td>
</tr>
<tr>
<td>Elbow joint</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

C. Power:

<table>
<thead>
<tr>
<th>Upper extremity</th>
<th>Left</th>
<th>Right</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lower extremity</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

D. Co-ordination:

E. Involuntary movements:

Sensory System:

<table>
<thead>
<tr>
<th>Upper extremity</th>
<th>Left</th>
<th>Right</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lower extremity</td>
<td>Left</td>
<td>Right</td>
</tr>
</tbody>
</table>

1. Touch
2. Pain
3. Temp.
4. Position
5. Cortical sensation
Reflexes
A. Superficial: Left Right
   1. Planter
   2. Abdominal
   3. Cremestric reflex
   4. Bulbocavernous reflex
   5. Anal reflex

B. Deep: Left Right
   Ankle
   Knee
   Biceps
   Triceps

INVESTIGATIONS
X-ray Vertebral columns:
   A.P.
   Lateral
Blood Urea:
Serum Creatinine:
24 hours urine creatinine:

TREATMENT
Conservative
Surgical

-----000-----