

From: "ROOT" <root@sctimst.ac.in>
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Date: 07/04/2025 07:52 AM
Subject: Student CPC

Greetings from AIIMS, Rishikesh !!

The next student CPC is scheduled on **April 7, 2025** in **CPD Hall**, AIIMS Rishikesh from **8:00 AM to 9:00 AM** in CPD Hall, AIIMS Rishikesh,

You can also join online through the following ZOOM link:

Topic: Student CPC

Time: Apr 7, 2025 08:00 AM India

Join Zoom Meeting link

<https://us06web.zoom.us/j/84543562917?pwd=2YheGZg0nENblcEOmvvdRG35n1nyWa.1>

Meeting ID: 845 4356 2917

Passcode: 249201

Kind Regards

Regional Resource Centre (RRC)

Department of Telemedicine

All India Institute of Medical Sciences (AIIMS), Rishikesh

Uttarakhand – 249203

Name : miss. S	Age- 14 years	Gender-Female	CR No- 20240018096
DOA: 6/7/2024		DOS: 11/7/24	DOD: 20/7/2024
Clinician in-charge- Orthopedics Unit II – Dr. Mohit Dhingra		Clinical Discussant: Dr Vishal	
CPC DISCUSSION THEME		Cryosurgery in bone tumors	
<div>History-</div> <div><ul style="list-style-type: none">Progressive pain (insidious, progressive, localized, night cries +, throbbing in nature) * 5 monthsIll-defined swelling (right mid-arm, gradually progressive, associated with pain) * 4monthsNo constitutional symptoms, no malignant historyNo familial history , no previous medical history, normal birth history</div>			

STUDENT CPC – 7/4/2025 – DEPARTMENT OF ORTHOPEDICS, AIIMS RISHIKESH

Examination:

Built: Well built

Height– 150 cm

Weight – 46 kg

BMI- 20.4 kg/m²

Respiratory- B/L chest clear.

CVS - S1 S2 heard normally, no murmur present.

P/A- Soft, No palpable organomegaly, BS present.

CNS – intact higher mental function, GCS = E4V5M6 =15/15

Head to toe examination : no abnormalities noted

Gait: Bipedal unassisted gait with antalgic component

Local Examination:

▪ **Inspection:**

- Irregular ill-defined swelling 9x4 cm over right mid-arm, no skin changes, no features of neurovascular compromise.

▪ **Palpation:**

- 9x4 cm ill-defined swelling with variegated consistency (firm to hard) over right mid-arm 8 cm from the medial epicondyle of humerus, tenderness+, local warmth +, plane – bone, surface-lobulated, elbow ROM and shoulder ROM – passive – full ranges, painful on terminal extension, no DNVD.

Movements: - preoperatively

Shoulder	flexion	0- 160
	extension	0-30
	abduction	0-170
	External rotation	0-70
	Internal rotation	0-55
Elbow	flexion	0-130
	Supination – pronation	70 – 0 - 80

Measurements: no limb length discrepancies, tumor measurement as mentioned above.

Clinical diagnosis: Malignant right arm swelling under evaluation

Date	Preoperatively
Hematology	
Hemoglobin (mg/dL)	12.7
TLC (cells per cumm)	5.41×10^3
Platelets (lakhs/cumm)	2.61×10^5
PT INR	1.02
ESR	26
CRPH	Negative

Biochemistry	Preoperatively
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Blood Urea (mg/dL)	25 mg/dl
S. Creatinine (mg/dL)	0.92 mg/dl
S. Sodium (mmol/L)	141 mmol/l
S. Potassium (mmol/L)	4.8 mmol/l
Total/direct Bilirubin	0.22/0.11 mg/dl
LDH	297
S.G.P.T. (U/L)	10 u/l
S.G.O.T. (U/L)	25 u/l
ALP (U/L)	265 u/l
S. Total Protein (g/dL)	7.0 g/dl
S. Albumin (g/dL)	4.5 g/dl

BIOPSY – Core-needle biopsy

Markers	Negative
Antibodies	Non-Reactive
Antibodies	Non-reactive
Immunohistochemistry	WNL
Immunohistochemistry (IHC)	Solitary blastic lesion in the mid right humerus with ill-defined borders and permeative in nature with cortical breach and soft tissue extension is noted. Periosteal reaction in sunburst type is noted. No skip / satellite lesion is noted on the full length humerus xray.
Findings (11.7.24)	<p>Approach : extensile antero-lateral approach to the humerus</p> <p>Resection – Wide local excision</p> <p>Reconstruction of the bone defect – recycled humeral autograft after treatment with liquid nitrogen pedicle immersion technique.</p> <p>Tumor characteristic – 9 cm x 4 cm lobulated mid humeral mass with variegated consistent soft tissue mass.</p> <p>Fixation – long PHILOS plate (8 holed)</p> <p>Frozen section – negative proximal pedicular margin</p>
Postoperative hospital stay	<p>Patient postoperative stay was uneventful.</p> <p>Patient advised immobilization in arm pouch until suture removal followed elbow ROM exercises as tolerated.</p> <p>POD 2, 4, 8 days wound inspection performed – surgical wound clean.</p> <p>patient discharged on the 8TH post operative day.</p>
Follow-up	8 months follow-up , patient has completed adjuvant chemotherapy and is in disease remission on follow-up. Patient is performing Activities of daily living as tolerated (shoulder ROM- WNL, elbow ROM- flexion-35-110, supination/pronation- 70/80) and the recycled autograft has united at osteotomy site.