



ORTHOPEDIC & SPINE INSTITUTE

at St. Mary's Medical Center

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Cartilage Repair
Joint Preservation
Joint Replacement

Fran Guardo

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Physical & Occupational
Therapy

Name: MYSZKA, NIKODEM

DOB: 30-11-2011

DOS: 11/22/2018

Physician: David S. Feldman, MD

NEW PATIENT CONSULTATION

History of Present Illness:

Nikodem is a 7-year-old boy with VACTERL syndrome. The VACTERL has affected in him by the esophageal atresia number 1. He had aortic stenosis and underwent surgery, first attempted by, non-invasive, minimally invasive and then he underwent aortic stenosis surgery. He has also had small intestine volvulus treated. He had some kidney dysfunction from medication, but his main problem right now is a severe kyphoscoliosis with hemivertebrae on the right side of T10 and L1, which has been untreated.

Physical Examination:

On examination, he is a boy who appears to have some breathing issues. He certainly has some upper airway sounds when he breathes and he is completely intact intellectually. He is able to speak. He is able to walk, but he walks with severe kyphoscoliosis on the right side. He has veins on his chest, which the mother and father say they have been there since birth. He has multiple scars along his thoracotomy scars along his chest. He has a severe greater than 90-degree kyphosis and greater than 90-degree scoliosis. Distally, he appears to be neurologically intact and I on review of his MRI, which it essentially shows a normal spinal cord with the clonus at L1; therefore, no evidence of tethering or syringomyelia.



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Impression:

This is a 7-year-old body with a severe kyphoscoliosis, which I think will affect his heart and lung as he gets older and really is a risk for his life if we do not treat this. In my opinion, the treatment at this point would be growing rod system; however, I would actually prefer to do a Shilla Technique, I would take out the vertebrae on the right side, hemivertebrae from the back of T10 and L1 and then attempt to put growing rod system to somewhat correct him, if this failed, I would do a fusion. At the age of approximately 10 or 11, he will undergo the final fusion. I think we are compelled to do something for this child as he is at high risk for developing cardiopulmonary dysfunction as he gets older and I think just to observe this is actually malpractice. He will need a workup by pulmonologist, cardiologist in terms of getting him ready for surgery. I would do this with Dr. Asghar in West Palm Beach, Florida. They have to spend at least six weeks in West Palm Beach, Florida to have this done so he recovers before he goes home to Poland, but I think that short of doing the total surgery, we are risking this young boy's life.

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