



RG Urology & Laparoscopy Hospital®
Stone ——Simplifying Surgeries







BARIATRIC SURGERY-INTERNATIONAL PATIENT

An International, 32 year old female presented to RG EOK with complaints of morbid obesity with a BMI of 60.2kg/m2 leading to obstructive sleep apnea.

Our team of doctors comprising Dr. Rajat Goel and Dr. Sandeep Yadu planned for Laparoscopic Sleeve Gastrectomy under GA.

Intraoperative findings revealed a bulky liver, large stomach fundus, moderate adhesions. Gastrolysis was done 4cm from pylorus to angle of his. Resected stomach removed from the umbilical port.

Postoperatively abdomen girth charting was done 4 hourly, input output was monitored 2 hourly. The patient responded well to the surgery and was discharged within 48 hours in a stable condition.











ANOTHER INTERNATIONAL PATIENT UNDERGOES BARIATRIC SURGERY

A 37 year old international male patient presented to RG EOK with complaints of lethargy, shortness of breath performing regular activities and obstructive sleep apnea. He also had a bilateral knee ligament injury (ACL Tear) due to being morbidly obese (BMI- 39.7 kg/m2)

Our surgical team comprising Dr. Rajat Goel and Dr. Sandeep Yadu planned for laparoscopic sleeve gastrectomy under G.A.

Intraoperatively a large stomach fundus with bulky liver and moderate adhesions were found. Gastrolysis was done 4 cm from the pylorus to angle of his and resected stomach was removed from the umbilical port.

The patient responded well to the treatment and was discharged in a stable condition within 36 hours.











ANDROLOGY SURGERY

A 28 year old NRI patient presented to RG Ludhiana with complaints of inability of perform sexual activity – despite normal penile colour doppler and no evidence of vasculogenic impotence. Patient was diagnosed with Erectile Dysfunction.

After undergoing various medical management, he opted for penile prosthesis.

Our team of doctors comprising Dr. Punit Bansal and Dr. Sandeep Singh planned for Shah penile implant with hinge under G.A.

The patient responded well to the treatment and catheter was removed on second post operative day and was discharged in a stable and satisfactory condition.











EXCISION OF PANCREATIC PSEUDOCYST AND OPEN CHOLECYSTECTOMY



A 49 year old male patient presented to RG hospital Kolkata with complaints of epigastric pain and dyspepsia.

On further investigation, a diagnosis of pancreatic pseudocyst and cholecystitis was made.

Our doctors Dr. Pallab Saha and Dr. Rajarshi Bhattacharya planned for drainage and excision of pancreatic pseudocyst with open cholecystectomy under general anesthesia.

Intraoperatively cholelithiasis and a pseudocyst of pancreas at the junction of neck and body of pancreas my and drainage of pseudocyst is done at junction of nec

open cholecystectomy and drainage of pseudocyst is done at junction of neck and body of pancreas, peritoneal drain and intracystic drain was inserted.

Patient has responded well to the treatment and was discharged in a stable condition.









INTERNATIONAL PATIENT UNDERWENT SPINCHTEROTOMY + HEMORRHOID ABLATION WITH DIODE LASER

A 33 year old international male patient presented to RG Rajouri Garden with complaints of per rectal bleeding and pain.

On further investigation, a diagnosis of Anal fissure with grade III internal hemorrhoids was made.

Our team of doctors comprising of Dr. Ashok Bhatia and Dr. Rajesh Talwar planned for Spincterotomy + hemorrhoid ablation with a diode laser under G.A.

Intraoperatively Fissure in Ano Seen at 6 o' clock with an external hemorrhoid. On proctoscopy internal hemorrhoid at 3 and 11 o' clock psotion.

Lateral spincterotomy done at 5 o 'clock postion with laser. Hemorrhoid ablation done with diode laser.

The patient responded well to the treatment and was discharge in a stable and satisfied condition within 24 hours.











INTERNATIONAL PATIENT WITH CARDIAC COMORBIDITIES UNDERWENT CPE+ TURBT

A 67 year old international male patient presented to RG EOK with complaints of blood in his urine on and off for 6 months and associated with increased frequency of urination.

Patient had past medical history of Dilated Cardiomypathy with Atrial Fibrillation. ECHO findings- LVEF- 25%.

On further investigation USG KUB revealed a bladder mass obliterating left ureteric orifice along with left hydroureteronephrosis.

Our team of Doctors- Dr. Manish Singla and Dr. Sandeep Yadu planned for Cystoscopy + TURBT under G.A.

Introperative findings revealed in the bladder a solid sheath like growth involving the posterior lateral wall, left ureteric orifice, with left bladder neck and whole trigone around 7-8 cm.CPE was done, Complete growth was resected, Deep biopsy taken, 20 Fr three way foley's catheter was placed, N.S irrigation started and outflow was clear.

Patient was discharged in a stable and satisfactory condition within 48 hours.









OPEN CYSTOLITHOTOMY FOR A LARGE URINARY BLADDER CALCULUS 8 X 8 CM WEIGHING 350 GRAMS



A 43 year old male presented to RG Gagan Vihar with complaints of supra pubic pain for 1 week.

On further investigation, USG KUB revealed a large vesical calculus with changes of chronic cystitis and bilateral hydrouerteronephrosis.

Our team of doctors comprising Dr. Ajay Aggarwal , Dr. Manoj Jain and Dr. Nitin Sharma planned for Open Cystolithotomy under G.A.

Intra operative findings revealed a large vesical calculus – 8x8 cms and weighing 350gm, along with a hypertrophied urinary bladder.

Patient withstood the procedure well and was discharged in a stable condition within 48 hours.











9.5 LITRE SEROSSANGUINOUS FLUID DRAINED FROM A 30 CM SEROUS CYST ADENOMA



A 47 year old female presented to RG Stone Hospital, East of Kailash with complaints of pain in the abdomen off and on for 6 months. She was having increasing abdominal distention and pain abdomen for 1 week. The patient also had history of hypertension for which she is under regular medication.

On further investigations USG Abdomen revealed a large abdomino pelvic complex cystic mass serous ovarian cyst adenoma.

Our team of doctors, comprising Dr. Jaya Aggarwal , Dr. Ashok Mittal and Dr. Sandeep Yadu planned for Exploratory laparotomy + Adhesiolysis +Bilateral Salpingo oophorectomy under Spinal Anesthesia.

Intra operatively a large- 30cms gangrenous looking cystic mass was seen occupying the whole abdomen arising from the right ovary, along with

three twists in the infundibulopelvic ligament of the right side. Incision was given on the cyst wall and 9.5 litrs of serosanguinous fluid was drained.

Detwisting was done. Right tube along with large cyst was separated. Left salpingo oophorectomy also done.

Final Diagnosis – Twisted Serous cyst adenoma of Ovary with Hypertension.

Total duration of surgery – 1 hour.

The patient responded well to the treatment and was discharged in a stable condition within 48 hours.











COLOVESICAL FISTULA REPAIR

A 65 years old male presented to RG EOK with complaints of Pneumaturia for the past 4 months along with dysuria. The patient was evaluated and found to have Colovesical Fistula.

Our doctors team including Dr. Manish Singla, Dr. Ashok Mittal, Dr. Abhinav K and Dr. Abhinav V, Dr. Sandeep Yadu planned for CPE+ Left Ureteric Catherterization + Sigmoid Diverticulectomy + Colovesical fistula repair + Adhesiolysis under G.A. Intraoperatively cystoscopy findings revealed a narrow anterior urethra admitting 20F scope, follicular cystitis was present. Small fecal particles present along with air.

Left ureter was catheterized. Fistulous opening seen in the posterior lateral wall. Diagnostic lap revealed extensive adhesions between omentum and abdomen wall and to colon and urinary bladder in pelvis. Adhesions were lysed.

The bladder dome on the left side was densely adherent to the sigmoid loop of colon. Fistula was dissected all around and divided. Sigmoid diverticulectomy was done. Biopsy taken from the edge of the fistula and sent for HPE. The patient responded to the surgery well and was discharged in a stable condition.

Biopsy - Chronic inflammation with fibrosis











RARE REVISION BARIATRIC SURGERY

A 39 year old male presented to Senior Bariatric Surgeon Dr Rajat Goel at RG - East of kailash with complaints of morbid obesity – BMI 52.9kg/m2 and associated complaints of sleep apnea and fatty liver.

He had undergone Sleeve Gastrectomy Surgery in the year 2013 at RG EOK by Dr Rajat. The patient lost ~75kgs and was on his way to leading a healthy life. Lack of disciplined lifestyle + unhealthy eating and alcohol consumption led to the patient weighing 175 kgs by 2021.

After clinical, psychological and nutritional counseling, the patient was recommended a revision bariatric surgery by way of Laparoscopic Mini Gastric Bypass.

Our surgical team including Dr. Rajat Goel, Dr. Ashok Mittal, Dr. Sandeep Yadu planned for a Revision surgery from Laparoscopic Sleeve Gastrectomy to Minigastric Bypass Surgery under G.A.

Intraoperatively findings were a large bulky liver, and dense adhesions of previous surgery. Laparoscopic mini gastric bypass was done. Patient responded well to the surgery and was discharged in a stable and satisfactory condition within 48 hours.

We extend hearty congratulations and appreciation to the entire team of Dr. Rajat Goel, Dr. Ashok Mittal, Dr Sandeep Yadu, Ms. Anju Bakshi, Dietician Payal, Sister Molly, Brother Sarvesh, Brother Manoj, Mr. Ram and all of the OT team for their hard work and dedication in making this surgery a success.





HEALTH CAMP



@ HINDUSTHAN STEELWORKS CONSTRUCTION















DIETETICS DAY

















RG Hospitals[™] Short Stay • Smart Surgeries

RG Urology & Laparoscopy Hospital®

-Simplifying Surgeries

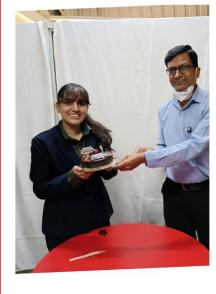
DIETETICS DAY















DIETETICS DAY













LIVE SESSION













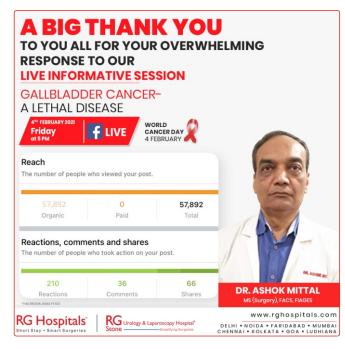


LIVE SESSION











LIVE SURGERY

















OUR CENTERS

NOIDA-ORC

D-82A, Maharaja Agrsen Marg, D-Block, Sector-26, Noida UTTAR PRADESH-201301 Helpline: 9810026456

LUDHIANA

510-L, Model Town LUDHIANA-141002 Helpline: 995360222

KOLKATA

KOLKATA ORBIT HEIGHTS, OPP. JODHPUR PARK, 33 GARIAHAT ROAD (SOUTH) KOLKATA-700031 Ph.: 033-40271000

CHENNAI

391- 392, ANNA SALAI, SAIDAPET, OPP. BUS STAND CHENNAI-600015 Ph.: 044-43993600

KHAR, MUMBAI

Ahimsa Marg, 14-A Road Khar (West), Mumabi-400052 Ph.: 022-61463500

EAST OF KAILASH

F-12, East of Kailash, New Delhi-110065 Ph.: 011-71056000

RAJOURI GARDEN

B-1, Vishal Enclave, Opp. Police Station, Rajouri Garden, New Delhi-110027 Ph.: 011-71058000

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A-6, Nehru Ground, Neelam Bata Road, N.I.T Faridabad-121001 Ph.: 0129-4184000

MODEL TOWN-ORC

B-12, Derawal Nagar, Model Town II, New Delhi 110009 Ph.: 011 42430300

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GAGAN VIHAR

18, Gagan Vihar Main, Delhi-110092 Ph.: 011-71011000

PITAMPURA

194-195, Deepali Chowk, Pitampura, New Delhi-110034 Ph.: 011-71057000

JANAKPURI-ORC

92A, Major P.Srikumar Marg, Block C2B, Janakpuri Ph.: 011 49865868

GOA

CVC Centre, Plot No. 217-218, PDA Colony Panjim-Mapusa Highway, Bardez, Alto Porvorim, Bardez, Goa-403521 Helpline: 0832-6640664









OUR SPECIALITIES

UROLOGY

- Urinary / Kidney Stone
- Enlarged Prostate (BPH)
- Ureteric Stricture
- Urethral Stricture
- Erectile Dysfunction
- Male Infertility

GYNAECOLOGY

- Uterine Fibroids
- Uterus Prolapse
- Ovarian Cysts
- Endometriosis
- Ectopic Pregnancy
- Female Infertility
- Sterilization
- Cosmetic Gynaecology

FEMALE UROLOGY

- Female Urinary Incontinence
- Vesico Vaginal Fistula
- Overactive Bladder
- Post Delivery Urinary Problems
- Interstitial Cystitis
- Voiding Difficulty
- Urinary Tract Infections
- Painful Bladder Syndrome
- Neurogenic Bladder
- Female Sexual Dysfunction

UROLOGICAL MALIGNANCIES

- Kidney Cancer
- Prostate Cancer
- Urinary Bladder Cancer

BARIATRIC SURGERY

- Obesity/Metabolic Syndrome
- Uncontrolled Diabetes

MINIMALLY INVASIVE SURGERY

- Gall Bladder Stone
- Hernia Repair
- Appendicitis
- Piles



