

Good evening, Dr. Williams, I am calling you because I have a patient I need to refer to you in your specialty of general surgery. The patient is a 16-year-old female who recently moved to this area from out of state. She has an extensive medical history to include cystic fibrosis, intestinal rupture in-utero requiring emergency surgery post-birth, gentamycin-induced hearing loss requiring cochlear implants, diabetes and a developmental delay. She takes 18 medications daily for her multiple co-morbidities. Due to her intestinal issues, she did have a J-tube in place for an extended number of years, placed when she was approximately 5 years old with changes throughout that time due to growth necessity. Her mother states that the patient had not used the tube in nearly six months due to good oral intake, and therefore was told by their previous cystic fibrosis physician that she could pull the tube out and it would close on its own. This, however, has not been the case and the hole where the tube was continues to leak and they must keep a dressing on it which they have to change 2-3 times per day. On my assessment, the drainage was noted to be non-odorous, yellow-tinged drainage. The site has no signs of infection, and the patient and mother seem to do a good job of keeping it clean. I am referring her to you for further evaluation and possible surgical intervention to close this wound.

Thank you so much for your time.