

Tangerang Selatan, 1<sup>st</sup> September 2022

## To Whom It May Concern

From : dr. Ahmad Sulaiman Alwahdy, Sp.N, FINA  
Neurointerventionalist

Patient below,

Name : Danabarlen Goroiah  
Sex : Male  
Date of Birth : 11 March 1967  
Diagnosis : Post mechanical thrombectomy due to basilar occlusion

is a 55-year-old Mauritian with a history of uncontrolled hypertension, heavy drinking, and smoking, but no history of drug abuse. He used to live with his male friend and worked as a consultant. His family lives in Mauritius.

He was referred from SOS Clinic at Cipete-South Jakarta on August 07, 2022 evening with a chief complaint of unresponsive since morning, found wetting himself in the afternoon. The last time his friend saw him was on August 06, 2022 when they had lunch together, then he slept at night after drinking a bottle of alcohol as he usually did.

When arrived at the ER his GCS was 5. He was intubated upon arrival at the ER. MRI showed signs of hyperacute to acute infarct at Pons, Right Pedunculus cerebri – Right Thalamus, signs of occlusion distal part of Basilar Artery and R-PCA, and no sign of intraparenchymal hemorrhage. Lab results at the ER showed good liver and kidney function, no abnormality of electrolyte, and coagulation panel. He was non-reactive for Hep B, Hep C, and HIV. Lab from SOS clinic showed no sign of substance abuse (amphetamine, methamphetamine, benzodiazepine, cannabis, cocaine, morphine). He was transported to the cath lab to undergo emergency DSA and thrombectomy.

DSA was performed on August 08, 2022 at midnight. Report: There is no occlusion or stenosis in the anterior circulation from ICA to right and left MCA and ACA. Total mid-bacillary occlusion was obtained and mechanical thrombectomy was performed with thrombo-aspiration technique, the basilar artery was successfully recanalized. thrombus was still visible in P1 dextra, thromboaspiration was performed. After experimenting with suction up to P1-P2 junction dextra, recanalization was found to be improved.

He was admitted to ICU after DSA and hospitalized at the ICU until 26 August 2022. On August 15, 2022 tracheostomy was performed, on August 23, 2022 bronchoscopy was performed and

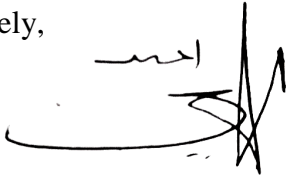
## RS Premier Bintaro

mucopurulent secret was found in the trachea. On August 26, 2022 he was moved to a private room and continued physiotherapy twice a day.

Presently, his consciousness is soporous (Locked in Syndrome). He is hemodynamically stable with a tracheostomy. He is also on nasogastric feeding.

Thank you for taking care of this patient.

Sincerely,



dr. Ahmad Sulaiman Alwahdy, Sp.N, FINA  
Medical Consultant - Neurointerventionalist