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A cirrhotic patient, who has been having ascites for the last 3 months, and on regular medication presents with history of fever, sudden increase in distension of abdomen and pain abdomen of three days duration.

O/E: Febrile, tachypneic PR:100/min, BP:110/70mmHg

Chest: coarse crepitations (R) mammillary, scagular.

His ascitic fluid analysis is as follows :

Colour – turbid ,

Cell count : $500/\text{mm}^3$ - predominantly neutrophils

Gram stain – gram negative bacilli seen

AFB stain negative

Protein - $< 1\text{g}\%$

What is most probable diagnosis?

What are the investigations you would like to do?

Mention the important steps for managing him.

What is your diagnosis?

B) How will you manage the patient?