

Name: Mr. Ankit Kumar

Age/Sex: 22y / M

Office ID: RP5113

Date: 27-10-2023 08:11 pm

Mobile: 9523692400

**Symptoms:** Urticaria (persisting. Now also complains of burning sensation while passing urine and foul smelling urine)**Findings:** Investigations (H pylori ig G - 2.0 raised, CRP positive), P/A (soft, non-distended and non-tender), Upper GI Endoscopy (hiatus hernia - hills grade 1, chronic active gastritis and erosive duodenitis with small mucosal ulcers - RUT positive)**Vitals:** Pulse: 87 /min, SPO2: 98 %, BP: 116/78 mmHg**Diagnosis:** Chronic idiopathic urticaria, chronic active gastritis (RUT positive), Hypertriglyceridaemia, Vitamin D3 Deficiency, UTI - Urinary Tract Infection (Suspected)

Rx	Name	Frequency	Duration	Notes
1	Tablet Esogress (40 mg) ESOMEPRAZOLE(40 MG)	1 tablet - Twice a day	1 Month	Before Food 1-01
2	Tablet Lesuride (25 mg) LEVOSULPIRIDE(25 MG)	1 tablet - Twice a day	1 Month	Before Food 1-01
3	Syrup Duphalac LACTULOSE 3.335 GM /5ML	15 ml - Once a day	5 Days	Bedtime
4	Tablet Bilasure (20mg) BILASTINE (20MG)	1 tablet - Twice a day	1 Month	Before Food, 1 hour before food
5	Tablet Montair (10 mg) MONTELUKAST(10 MG)	1 tablet - Once a day	1 Month	6 PM

**Advised Investigations:**

1. Urine Culture & Sensitivity → E. coli
2. Uric Acid → (N)
3. Triglycerides → 227

**Instructions:**

- 1. Avoid oily / fried food
- 2. Avoid hot water / coffee / tea. If inevitable, take luke warm temperature
- 3. Avoid full meal. Instead take multiple small meals
- 4. Do not lie flat immediately after eating food. Wait for 1.5 to 2 hours before sleeping

Dr. Rajesh Pendlimari

MS, FSGE

Karnataka Medical Council-73328

Find your prescription online on docon.co.in

→ Tab Duonem 200mg 1-0-1 x 5 days  
(famoperem)

→ Tab. Rosuvast 5mg 0-0-1 x 1 month

Repeat Urine Culture after 1 week.



Dr Sandip Mandal

MBBS(Cal), MD(MED), MRCP, MCEM (UK)

Sr Consultant - General Medicine

Ex Consultant Emergency Med - DVH London

EX physician SSKM HOSPITAL

Reg No-52595 WBMC

2242244



Mr. Ankit Kumar

Age - 21 yr

Adv :-

Blood - MPOA  
= creatinine

① Fositorl - 3 gm Sachet = 3 Sachet  
48 hrs interval to take  
same Sachet

② cap vizylac - 0.1 X  
7 day

③ Fos croc - 600 mg

Take plenty of water  
USA KUB T PVR - 139 CL  
.. can't report  
.. in culture from him to be  
for admission

4/11/23

For APPOINTMENT-SUJOY-9831478850

Apollo Multispecialty Hospitals Limited

(Formerly Apollo Gleneagles Hospital Limited), 58, Canal Circular Road, Kolkata, West Bengal - 700 054, India.

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Patient Name	Mr. ANKIT KUMAR	Collected	28/Oct/2023 09:53AM
Age/Gender	22 Y 0 M 30 D /M	Received	28/Oct/2023 07:09PM
UHID/MR No	DEXP.0000000737	Reported	30/Oct/2023 04:40PM
Visit ID	DEXPOPV1173	Status	Final Report
Ref Doctor	DR RAJESH PENDLIMARI	Client Name	DDC EXPERT CLINICS
IPI/OP NO		Patient location	WHITE FIELD, Bangalore

### DEPARTMENT OF MICROBIOLOGY

**TEST NAME :** CULTURE AND SENSITIVITY - URINE (AUTOMATED)

**SPECIMEN TYPE :** URINE

### CULTURE

**Organism :** ESCHERICHIA COLI

**Colony Count :** 1,00,000 CFU/ml

### ANTIBIOTIC SUSCEPTIBILITY


**Organism :** ESCHERICHIA COLI

ANTIBIOTIC NAME	INTERPRETATION	MIC (µgm/mL)
	<u>SENSITIVE</u>	<=2
AMIKACIN	SENSITIVE	4
AMOXICILLIN-CLAVULANATE	SENSITIVE	<=4
CEFOXITIN	SENSITIVE	<=0.5
ERTAPENEM	SENSITIVE	<=1
GENTAMICIN	SENSITIVE	<=16
NITROFURANTOIN	SENSITIVE	<=4
PIPERACILLIN-TAZOBACTAM	<u>SENSITIVE</u>	<=16
FOSFOMYCIN	RESISTANT	>=32
AMPICILLIN	RESISTANT	>=4
CEFIXIME	RESISTANT	16
CEFTAZIDIME	RESISTANT	>=64
CEFTRIAZONE	RESISTANT	>=4
CIPROFLOXACIN	RESISTANT	>=320
COTRIMOXAZOLE	RESISTANT	>=32
NALIDIXIC ACID	RESISTANT	>=16
NORFLOXACIN	RESISTANT	>=64
CEFALOTIN	RESISTANT	>=8
OFLOXACIN	RESISTANT	>=128
TICARCILLIN		

\*\*\* End Of Report \*\*\*



## DEPARTMENT OF RADIOLOGY - ULTRASOUND

**Patient Details :** Mr. ANKIT KUMAR | Male | 21Yr 1Mth 10Days  
**UHID :** AMHIL0002242244 **Patient Location:** OP  
**Patient Identifier:** AMHLOPP6206191   
**DRN :** 223062175 **Completed on :** 04-NOV-2023 17:00  
**Ref Doctor :** Dr. SANDIP MANDAL

### ULTRASOUND KUB

#### Findings

**KIDNEYS:** Both are normal in size, position, contour and echogenicity. The corticomedullary differentiation is maintained. No hydronephrosis, calculus or mass is seen. (Tiny calculi / concretions may not be well seen amidst renal sinus fat in sonology).


The right and left kidneys measure 10.7 cm and 10.1 cm respectively.

**URINARY BLADDER:** It is normal in capacity and contour. The wall is not thickened. No intraluminal calculus or mass is seen. Pre void urine volume is 906 cc. Post void residual urine volume is 139 cc (large).

#### Impression

- \* Large post void residual urine volume is (139 cc).
- \* Normal appearance of both kidneys.

--- END OF THE REPORT ---

  
 Dr. TANDRA SARKAR  
 MBBS, DMRE, DNB (RADIOLOGICAL DIAGNOSIS),  
 MNAMS  
 CONSULTANT RADIOLOGIST  
 Reg. No. 49319 (WBMC)

**THE RESULTS RELATE ONLY TO THE ITEMS TESTED. PARTIAL REPRODUCTION OF THIS REPORT IS NOT PERMITTED**

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