

11:42:37 AM

UHID : 20190722661

OPID : 2016330422

Bill No

: 201907220929

Name : Mr. NARENDRA NATH LAL

Age/Sex : 70 YEARS/M

Visit NO

: 1

Dept/Doctor : ORTHOPAEDICS/Dr. Kamaraju C (KAMC/24736)

Ref.Doctor : SELF

OP Consultation Fee : Rs.450

Recieved By Cash : Rs.450/-

2nd Visit Validity Upto 5/8/2019

Cashier/Receptionist

anusha.c

OUT PATIENT

VITALS:

PR:

RR:

BP:

TEMP:

NUTRITIONAL SCREENING: Obese / Normal / Mal Nourished

Height:

Weight:

BMI:

DIETICIAN CONSULTATION: Required / Not Required

DRUG ALLERGIES: YES/NO

OA GOrth knee

A

DM +
HTN +

X-ray GOrth knee Ar stands
Lal

A

Needs TKR Right

ll

A

- Grad exercise
- Static cycs

T. DOLLO 650 (5)
- 1-502

ll

1. The first part of the document discusses the importance of maintaining accurate records of all transactions and activities. It emphasizes that proper record-keeping is essential for transparency and accountability, particularly in financial matters. The text outlines various methods for organizing and storing data, including digital databases and physical filing systems.

2. The second section focuses on the role of technology in modern record management. It highlights how software solutions can streamline processes, reduce errors, and improve accessibility. Examples of specific tools and platforms are provided, along with a discussion on the challenges of integrating new technologies into existing workflows.

3. The third part of the document addresses the legal and regulatory requirements governing record-keeping. It details the various standards and compliance frameworks that organizations must adhere to, such as GDPR for data protection and SOX for financial reporting. The text also discusses the consequences of non-compliance and offers guidance on how to stay up-to-date with changing regulations.

4. The final section explores the future of record management. It discusses emerging trends such as cloud storage, artificial intelligence, and blockchain technology, and how these innovations may impact the way records are managed in the coming years. The document concludes with a call to action, encouraging organizations to embrace change and invest in the necessary resources to ensure long-term success.

Department of Radiodiagnosis

KHL/ISO : 15189 : 2007
Patient Name : **NATH NARENDRA**
UHID : **20190722661**
Received On : 22/07/2019 01:27

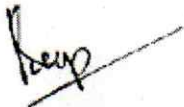
Age : **70Y** Gender : **M**
Physician : **Dr.**
Reported On: **22/07/2019 03:22**

X-Ray Report

X-RAY BOTH KNEES - AP AND LATERAL

- * Bone density is normal
- * Alignment of the tibio femoral and patello femoral joints is normal.
- * Degenerative changes are seen in the form of narrowing of medial tibiofemoral joint space, marginal tibial and femoral condylar osteophytes.
- * Loose bodies are noted.
- * Bilateral tibial spine spiking and patellar polar osteophytes noted.
- * No e/o lytic sclerotic lesions in the subarticular bone.
- * Soft tissue planes are normal.

IMPRESSION : * OSTEOARTHRITIS OF BOTH KNEE JOINTS.



DR BALAJI VARA PRASAD, MD
CONSULTANT RADIOLOGIST

Reported By: Mallula.Dr.Balaji Varaprasad

OP CARD Receipt

Date: 6-Aug-2019 10:53:57 AM

UHID : 20190722661

OPID : 2016357486

BillNo : 201908060565

Name : Mr. NARENDRA NATH
LAL

Age/Sex : 70 YEARS/M

Visit NO : 1

Dept/Doctor : ORTHOPAEDICS/Dr. Kamaraju C (KAMC/24736)

Ref.Doctor : SELF

OP Consultation Fee : Rs.450

Recieved By Cash : Rs.450/-

2nd Visit Validity Upto 20/8/2019

Cashier/Receptionist

rbhagya

VITALS:

PR:

RR:

BP:

TEMP:

NUTRITIONAL SCREENING: Obese / Normal / Mal Nourished

Height:

Weight:

BMI:

DIETICIAN CONSULTATION: Required / Not Required

DRUG ALLERGIES: YES/NO

OA Coats Lacer

A

TKR Right

Candidacy Consultat for Prost & Surg
L-Hand

A
Surgey on 13/8/19
Admit on 12/8/19

L-Hand

Dr KAMARAJ C
ORTHO & PATHO
Prof
Res

PRESCRIPTION SLIP

Generic Name (In Capital Letters)	Strength	Dosage	Instructions	Duration	Total Quantity
--------------------------------------	----------	--------	--------------	----------	----------------

DEPARTMENT OF ANAESTHESIOLOGY
AND CRITICAL CARE MEDICINE
KAMINENI HOSPITALS, L.B. NAGAR, HYD-88.

Adv
(Pac)

618119

2PM

- PAC done
- Advice : CT, BT.
- To be reviewed,

Rayhaudry
8/25 618119
2PM

DEPARTMENT OF ANAESTHESIOLOGY
AND CRITICAL CARE MEDICINE
KAMINENI HOSPITALS, L.B. NAGAR, HYD-88.

618119

3:30PM

- PAC reviewed,
- Provisionally can be taken up by,
- Follow PAC order

Rayhaudry
8/25 618119
3:30PM

Pharmacist's Sign:

Doctor's Signature

Date:

Name of Pharmacy:

(Stamp)

KHL, L.B. Nagar.

Wish you a Speedy Recovery

OP CARD Receipt

Date: 6-Aug-2019 11:19:43 AM

UHID : 20190722661 OPID : 2016357557 BillNo : 201908060686
Name : Mr. NARENDRA NATH LAL Age/Sex : 70 YEARS/M Visit NO : 1
Dept/Doctor : CARDIOLOGY/Dr.A Ravi Kanth
Ref.Doctor : SELF
OP Consultation Fee : Rs.600
Recieved By Cash : Rs.600/-
2nd Visit Validity Upto 20/8/2019

Dr. A. RAVI KANTH
Reg. No. 55749 MD DM
Consultant Cardiologist
Kamineni Hospitals Pvt. Ltd
L.B. Nagar, Hyderabad - 68

Cashier/Receptionist

s.swathi

VITALS:

PR: 70/min RR: 18/min BP: 100/70 mmHg TEMP: 36.5

NUTRITIONAL SCREENING: Obese / Normal / Mal Nourished

Height: Weight: BMI:

DIETICIAN CONSULTATION: Required / Not Required

DRUG ALLERGIES: YES/NO

DM (+)
HTN (+)

2D Echo
No Pericardial effusion
No LVH

Plan for Sx TIRP

No h/o chest pain / SOB

No h/o syncope

Q.E:

Cholesterol
CVS 1/2

creatinine

HbA1c 7.1

Hb 12.3 (Aug 2019)

Plt 160 (Apr 2019)

LbL 6.7

patient can be taken
for surgery with
mild to moderate risk.

PRESCRIPTION SLIP

Generic Name
(In Capital Letters)

Strength

Dosage

Instructions

Duration

Total Quantity

1

~~Drop T. Losas H~~
1 T. Losas (250) OD from T.B.P. monitoring.

2

or Anti-diabetic Drugs.

3

4

5

6

7

8

9

10

Pharmacist's Sign:

Date:

Name of Pharmacy:

KHL, L.B. Nagar.

Doctor's Signature

(Stamp)

Wish you a Speedy Recovery



Patient Name : **MR NARENDRA NATH LAL**
Age / Sex : 70YEARS / M
UHID No. : 20190722661
Bill No. : 201908061441
Department : ORT

Patient Type / Ward : OP /
Referral : Dr. Kamaraju C
Organisation : DIRECT
Sample Collected On : Aug 06, 2019, 02:29
p.m.
Reported On : Aug 06, 2019, 03:07
p.m.

CLINICAL PATHOLOGY REPORT

Test	Value	Unit	Reference Range	Method
BLEEDING&CLOTTINGTIME [2]				
SPECIMEN : BLOOD				
BLEEDING TIME	2 min 30 sec		3 mins - 10 mins	DUKE'S
CLOTTING TIME	6 min 00 sec		6 mins - 12 mins	LEE-WHIT

****END OF REPORT****

Dr. A. K. Deshpande
MD (Pathology)
Professor & Head

DEPARTMENT OF CARDIOLOGY

Name Of The Patient : Mr.Narendra Nath Lal
Date : 06-08-2019,
Reffered By : Cardiology
Reg.No. : 20190722661
Age/Sex : 70/M
Dr. Sagar , MD., DNB.
Dr.Ravikanth,MD,DM..,

COLOUR DOPPLER 2D ECHO

CLINICAL DIAGNOSIS :

Mitral Valve : Normal
Tricuspid Valve : Normal
Pulmonary Valve : Normal
Aortic Valve : Sclerotic , Trileaflets
Right Atrium : Normal
Right Ventricle : Normal
ft Atrium : 3.2 Cms
Left Ventricle : Concentric LVH , NO RWMA

ESD : 2.9 Cms EDD : 4.4 Cms DPW : 1.4 Cms EF : 64 % FS : 32 %

I.A.S. : Intact
I.V.S. : 1.5 Cms
Aorta : 3.0 Cms
Pulmonary Artery : Normal
Pericardium : Normal
IVC/SVC/CS : Normal
Pulmonary Veins : Normal
Intra-Cardiac Masses : Nil
Others : Nil

DOPPLER STUDY :

* Mitral Flow : A>E
Aortic Flow : 1.5 m/sec
Pulmonary Flow : 1.6 m/sec
* Tricuspid Flow : Normal

COLOUR FLOW MAPPING : NO PR, TRIVIAL AR/MR/TR

CONCLUSION :

- SCLEROTIC AORTIC VALVE, TRIVIAL AR
- CONCNETRIC LVH
- NO RWMA
- NORMAL LV/RV FUNCTION
- DIASTOLIC DYSFUNCTION
- TRIVIAL MR/TR, NO PAH
- NO LV CLOT/PE


CONSULTANT CARDIOLOGIST

OP
70 years
NARENDRA NATH LAL
Male

06-Aug-19 11:07:00 AM
KAMINENI HOSPITALS (L.B.NAGAR)

Rate 97 . Sinus rhythm.....normal P axis, V-rate 50- 99

PR 121
QRSD 85
QT 333
QTc 423

OP

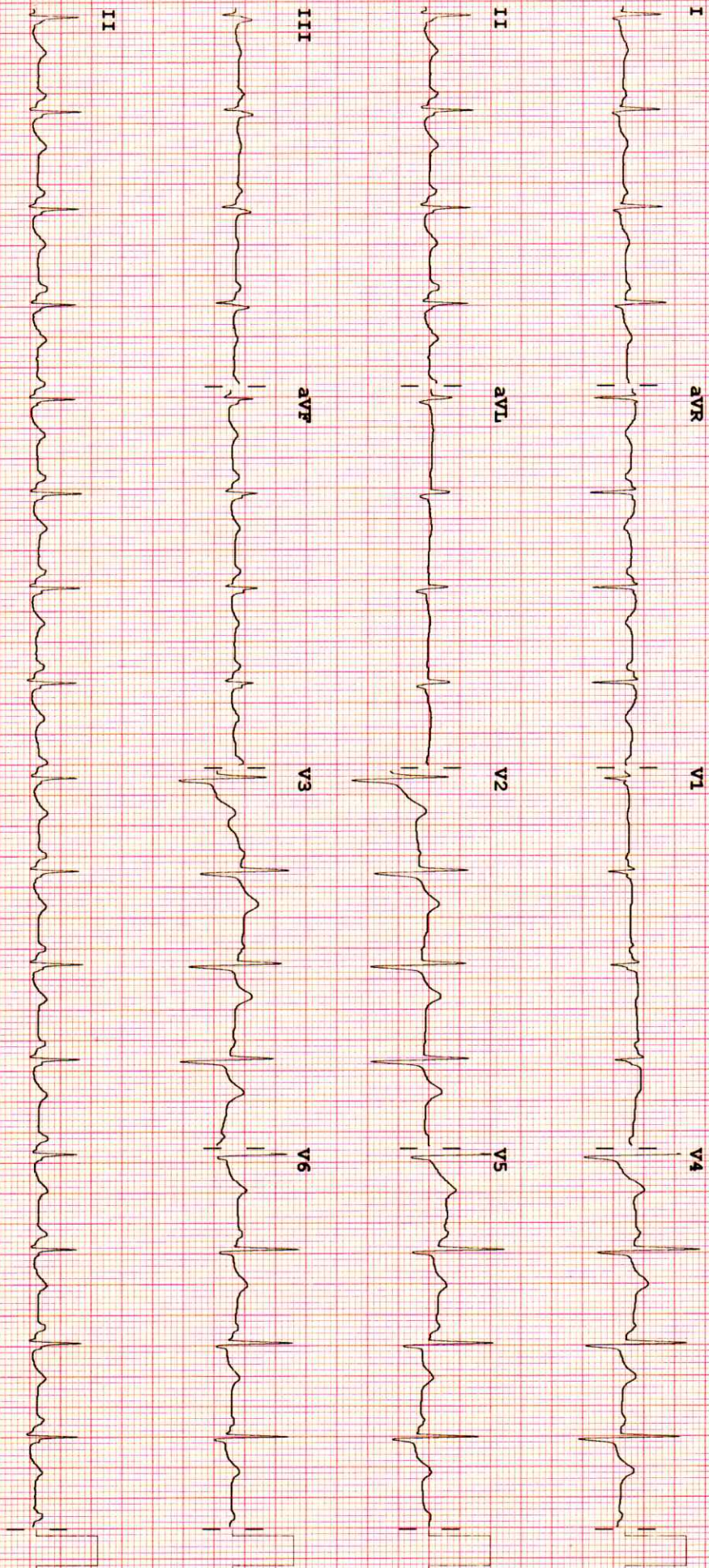
--AXIS--

P 66
QRS 47
T 48

- NORMAL ECG -

12 Lead; Standard Placement

Unconfirmed Diagnosis



Device: Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV F 50~ 0.15-100 Hz PH100B CL P?

Name : Narendra Nath Age : _____
Dietary Recomm : Diabetic diet

ADVISED DIET REGIME

Early Morning 6:00	: Tea <u>1</u> Cup (Without Sugar) (or) Coffee Cup <u>1</u> Cup (Without Sugar) (or) Plain Milk <u>1</u> Cup (Without Sugar) (or)
Breakfast 8:00	: Idli <u>3</u> Nos. (Avoid Coconut and Groundnut Chutney) (or) Dosa <u>2</u> Nos. (Prepared without Oil) (or) Upma/Vermicelli <u>1</u> Cup (or) Phulkas <u>3</u> Nos. with vegetables <u>1</u> Cup (or) Bread <u>2</u> Slices (without Jam, Butter Cheese) (or) Poorridge <u>1</u> Cup (or) Oats Cornflakes <u>4</u> TBSP in <u>150</u> ml milk
Mid Morning 11:00	: Tea <u>1</u> Cup (Without Sugar) (or) Coffee <u>1</u> Cup (Without Sugar) (or) Plain Milk <u>1</u> Cup (Without Sugar) (or) Lime Water <u>1</u> Cup (or) Vegetable Soup <u>1</u> Cup (or) Tender Coconut Water <u>1</u> Cup (or) Butter Milk <u>1</u> Cup (Diluted) (or) <i>Digestive</i> - Marie Biscuits <u>2</u> Nos. (or) Veg. Salad <u>1</u> Cup (or) Fruit <u>1</u> No. (or)
Lunch / Dinner 1:00/8:00pm.	: Rice <u>1 1/2</u> Cups (or) Phulkas <u>2</u> Nos Rice <u>1 1/2</u> Cup + Phulkas <u>2</u> Nos with Sambar / Dhal <u>1</u> Cup, Vegetable <u>1</u> Cup Curd <u>1</u> Cup, Veg. Salad <u>1</u> Ad Lib.

O. upma / w. upma / J. Roti

Tea Time : Tea 1 Cup (Without Sugar) (or)
 4:00 Coffee 1 Cup (Without Sugar) (or)
 Plain Milk 1 Cup (Without Sugar)
 with Sprouts 1 Cup
 Digestive Marie Biscuits 2 Nos. (or)
 Sandwich 1 Nos. (or)
 Any non fried snack
 Bed Time : Plain Milk 1 Cup without sugar (or)
 9:00 Butter Milk 1 Cup

Foods Diabetics should

Avoid	Use in moderate Amounts	Use Freely
Sugar, Jaggery	Cereals	Vegetables
Sweets	Pluses	Green Leafy Vegetables
Honey		
Jams, Marmalades	Fats / Oils	Thin buttermilk
Cakes & Pastries	Roots & Tubers	Clear Vegetable Soup
Butter, Ghee & Dalda	Milk Products	Lime Water
Sweetened Juices & Soft drinks	Meat Products	Spices
Fried food shuffs	Eggs	High fiber foods
Brain, Liver, Kidney	Nuts & Oil seeds	
Banana, Sapota		
Seethaphal, Grapes		
Pineapple, Jack fruit & Mango		

Fruits to be Eaten : (Only when Blood Sugar levels are under control)

Apple		
Orange		
Sweet Lime	One average sized Fruit	
Guava		
Pear		
Pomegranate	100 gm	Papaya 100 gm
Water Melon	200 gm Jamun	10-15 Nos
Kharbuja	200 gm Ber	10-15 Nos

Department of Radiodiagnosis

KHL/ISO : 15189 : 2007
Patient Name : **NATH NARENDRA**
UHID : **20190722661**
Received On : 15/08/2019 05:39

Age : **70Y** Gender : **M**
Physician : **Dr.**
Reported On:

X-Ray Report

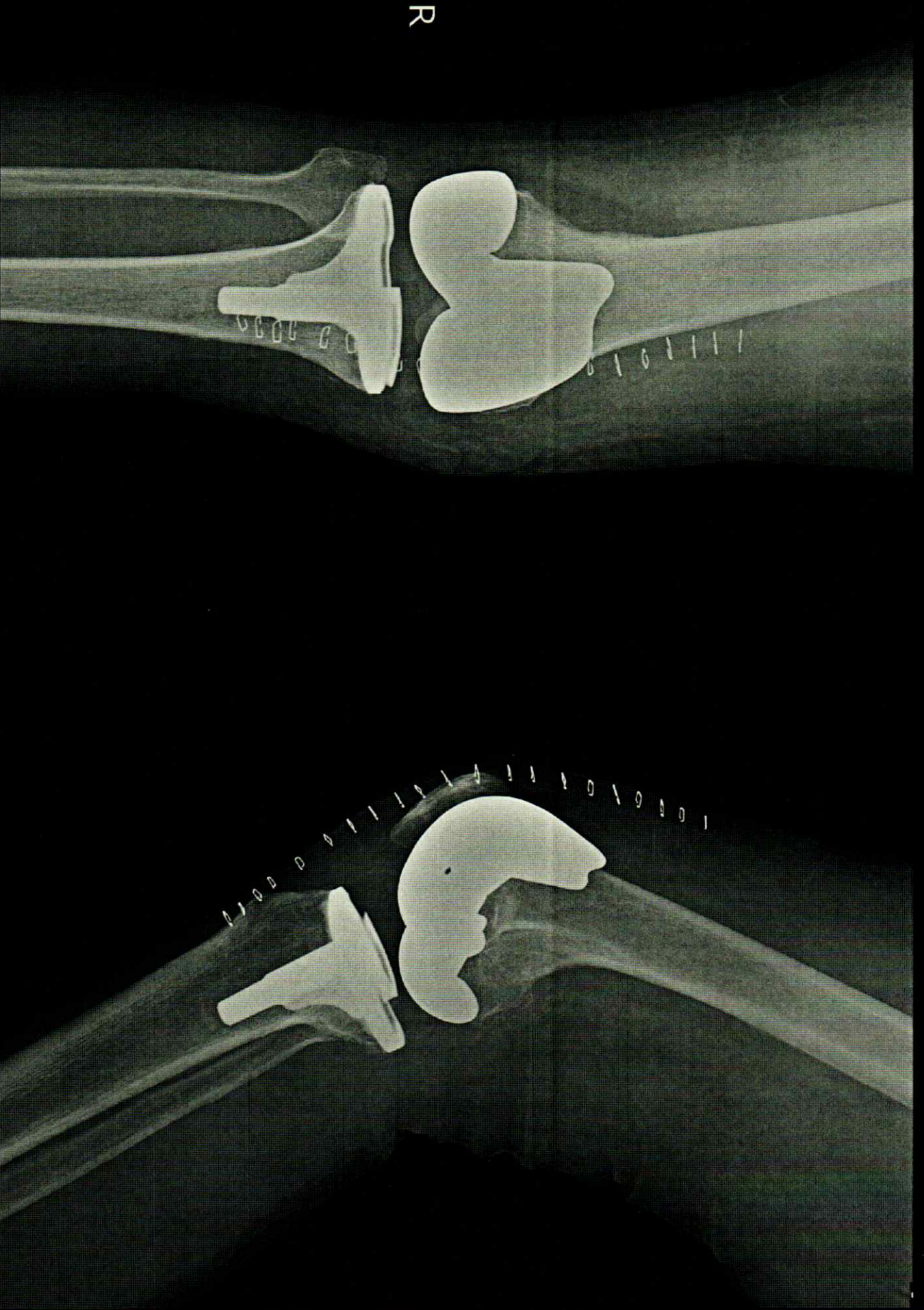
X- RAY RIGHT KNEE AP AND LATERAL IP-26412

- * Metallic knee joint replacement prosthesis is noted
- * Surgical staples are noted.
- * Bone density and alignment are normal.
- * No erosions / lytic lesions seen.
- * For orthopedic perusal



DR SRINADH BOPPANA, MD
CONSULTANT RADIOLOGIST

Reported By: Srinadh.Dr.Boppa



NARENDRA NATH LAL 70Y/M IP-26412 SICU 201907222661 RT Knee
Kamineni Hospital Pvt Ltd, Hyderabad (Room No.02)



DISCHARGE BILL

Patient Details			
UHID	20190722661	IPatientID	201930902
BedNo	222B	Doctor/Dept	Dr. Kamaraju C DNB (ORTHO) / ORTHOPAEDICS
Name	Mr. NARENDRA NATH LAL	Age - Sex	70 YEARS - M
Paytype	CREDIT	Organization Name	MEDIASSIST INDIA PVT LTD
Admit Date	12-Aug-2019 11:17:46 AM	Case Type	GEN
Discharge Date	17-Aug-2019 7:04:44 PM	Ref. Hospital	
Ref. Doctor Name	DR.S.DIVYA JYOTHI	Disg.User	P.DAMAYANTHI
Adm.User	SONY	Bill Date	17-Aug-2019
Bill No	201704307781		

Package Details:

TOTAL KNEE REPLACEMENT-UNILATERAL(12-08-2019 To 17-08-2019)	PNORTHSP01	PN ORTHO 01	107,800.00
Implants			59,880.11

Total Payable Amount	167,680.11
Balance Amount To Be Paid	167,680.11
UserName : damayanthi	

Kumar Abhinav
KUMAR ABHINAV
Relation - Father
Phone - 9030094335

DEPARTMENT OF ORTHOPAEDICS

DISCHARGE SUMMARY

Patient Details					
UHID	20190722661	IPatientID	201930902	MLC	
Name	Mr. NARENDRA NATH LAL	Age	70 YEARS	Sex	M
Address1	NIZAMPET ROAD	Address2		City	Hyderabad
AdmitDate	12-Aug-2019 11:17:46 AM	DisgDate	17-Aug-2019		
SurgeryDate	13-August-2019				
Company Name	MEDIASSIST INDIA PVT LTD				
Admitting Through	OP	Hospital Stay Days	6 Days (ICU Stay:3 Days,Ward Stay:2 Days)		

PRIMARY CONSULTANT

Dr. C.Kamaraj

DIAGNOSIS

Osteoarthritis both knees Right > Left with no DNVD
Type II Diabetes mellitus
Hypertension

CASE HISTORY

A 70 year old male patient was admitted in Department of Orthopaedics with complaints of pain in both his knees since 4 years. Patient was apparently painfree 4 years back when he started developing pain in both knees which was insidious in onset and gradually progressive in nature with no history of trauma, fever, weight loss and cough. Pain aggravated while walking and climbing stairs and is relieved by taking rest and medication. Known case of Diabetes mellitus and Hypertension and is on regular medication. No history of tuberculosis, bronchial asthma or epilepsy. On Examination - Patient is conscious, coherent and Afebrile. Pulse rate: 86 beats per minute. Blood Pressure: 130/80 mmHg. Cardiovascular System: S1 and S2 present. Respiratory System: Bilateral vesicular breath sounds are present. Per Abdomen: Soft, bowel sounds are present. Local Examination of both knees: Quadriceps wasting present on both sides, swelling seen over both knees (Right > Left) in the suprapatellar region, tenderness present on the medial joint line of both knees. Crepitus present for both knees. Right knee 5 degrees - varus deformity noted and no varus deformity of the left knee noted. FFD of 20 degrees is noted in the right knee and 5 degrees FFD in the Left Knee. Knee ROM : Right - 20 to 90 degrees and further painful, Left knee - 0 to 90 degrees and further painful. Active ankle and toe movements in full noted. Distal pulses - palpable. No distal neurological deficits.

COURSE IN THE HOSPITAL

A 70 year old male patient was admitted in Department of Orthopaedics with diagnosis of Osteoarthritis of both knees (Right > Left) with No DNVD, Hypertension and Type II Diabetes mellitus. Patient was examined by an Orthopaedic surgeon and necessary radiological and hematological investigations were done. After all necessary investigations and clearance from anaesthesiology, diabetology and Cardiology departments, patient was taken up for surgery on 13/08/2019 - Right Total knee Replacement done under combined spinal and epidural anaesthesia. Aseptic dressing and drain removal was done on second post operative day. Suture line was healthy. Aseptic dressing was done on fourth post operative day. Patient was put on physio exercises like active ankle and toe movements, knee ROM exercises, Static Quadriceps exercises CPM and walker assisted walking were done. Post operative x-ray shows total knee replacement prosthesis in situ with good alignment.

CROSS CONSULTATIONS

Anesthesiology:

Pre anesthesia check-up was done and fitness for surgery was given.

Diabetology:

Consultation was taken in view of elevated sugar levels and was treated as advised.

Cardiology:

Consultation was taken and fitness for surgery was given with mild - moderate risk for surgery.

TREATMENT GIVEN

Right Total knee Replacement under combined spinal and epidural anesthesia on 13/08/2019.

Implants used:

Right
Smith and Nephew
Metal back
Femoral component- size 6
Tibial component size 4 , 15 mm insert

Operative Findings:
Severe osteoarthritis changes noted

Inj Reflin 1 gm IV twice daily was given.
Inj Cyklokapron 500 mg IV was given 3 hours and 6 hours post operatively.
Inj Tramadol 1 amp IV twice daily was given.
Inj Pan 40 mg IV once daily was given .
Inj Perfalgan 1g IV thrice daily was given.
Inj Clexane 40 mg Subcutaneous once daily was given.
Tab Losartan 25 mg P/O once daily was given.
Insulin was given as per Diabetology advice after monitoring GRBS every 6th hourly.

ADVISES AT DISCHARGE

1. Tab Taxim-O 200 mg 1 tab twice daily after food for 5 days
2. Tab Ultracet twice daily after food for 5 days and then SOS for pain.
3. Tab Pan 40 mg once daily before food for 5 days. **B.P**
4. Inj Human Mixtard 30/70 10 units before breakfast and 10 units before dinner to continue.
5. Tab Glycomet SR 500 mg twice daily after food to continue.
6. Tab Losartan 25 mg P/O once daily to continue
7. Tab Evion LC 1 tab P/O once daily after food for 10 days.

DIET:
Low salt and Diabetic diet.

Physiotherapy:
Active ankle and toe movements.
Static Quadriceps exercises.
Active knee range of movements.
Walker supported walking.

REVIEW:
To review at Orthopaedics OPD for dressing and further advice on medication and physiotherapy on 23/08/2019
To review at Orthopaedics OPD for suture removal on 04/09/2019.
To review at Orthopaedics OPD after 6 weeks from the date of surgery for further advice.
To review with FBS and PLBS reports at diabetology OPD on 23/08/2019.

Dressing care:
Do not wet the dressing
review immediately if soakage or loosening of dressing occurs

INVESTIGATIONS

Were done as enclosed with the discharge summary:

Resident:

Registrar:

Consultant:
Dr.C.Kamaraj

DR. KAMARAJ C
D.Ortho, DNB Ortho
Prof. & N.O.D.
Reg. No. 24796

WHEN TO OBTAIN URGENT CARE (Symptoms)

IN CASE OF FEVER OR ANY EMERGENCY VISIT EMERGENCY DEPARTMENT.

PREVENTIVE CARE

Compliance with medication.
Regular follow Up.
To avoid squatting or sitting on the floor.

In case of Emergency or to speak to your treating doctor or For Appointments, Please Contact:

040-39879999 For Treatment Enquiries

040-24022222 For Ambulance

Patient/Attendant Declaration :-

The medicines prescribed and the advice regarding preventive aspects of care ,when and how to obtain urgent care have been explained to me in my own language

All Investigation Reports handed to the Patient/Patient family.

patient/patient attendant

KAMNENI HOSPITALS

Token No:21
Room No:10

OP CARD Receipt Date: 23 Aug-2019 11:19:16 AM
UHID : 20190722661 OPID : 2015438139 Bill No : 201908230677
Name : Mr. NARENDRA NATH LAL Age/Sex : 70 YEARS/M Visit NO : DISGREVIEW
Dept/Doctor : ORTHOPAEDICS/Dr. Kamaraju C (KAMC/24736)
Ref.Doctor : SELF
Company : MEDIASSIST INDIA PVT LTD
Company Consultation Fee : Rs.0
Recieved By Cash : Rs.0/-
Cashier/Receptionist
anusha.c

VITALS:

PR: RR: BP: TEMP:

NUTRITIONAL SCREENING: Obese / Normal / Mal Nourished

Height: Weight: BMI:

DIETICIAN CONSULTATION: Required / Not Required

DRUG ALLERGIES: YES/NO

Postop care of (R) TKR. on 13/8/19.
No pain in the (R) knee. No other complaints.

During walk

(R) knee - Staples intact
No gapping
Discharge (R)
ASD - None

Adv
- to continue walker Support.
walker

- to continue knee ROM.
- Status Dressing can
- Ankle for movement

Adv
CBP
CSR
CRP

PRESCRIPTION SLIP

Generic Name
(In Capital Letters)

Strength

Dosage

Instructions

Duration

Total Quantity

1

Rp

2

T. Ulkacet

8 days

3

T

pen

x 5 days

4

T

Emen. L.L.

x 15 days

0-10

5

to him c diabetes

6

him c Blood Report

7

8

9

(Signature)

10

Pharmacist's Sign:

Doctor's Signature

Date:

Name of Pharmacy:

(Stamp)

KHL, L.B. Nagar.

Wish you a Speedy Recovery

OP CARD Receipt

Date: 6-Sep-2019

10:10:29 AM

UHID : 20190722661	OPID : 2016462124	BillNo : 201909060347
Name : Mr. NARENDRA NATH LAL	Age/Sex : 70 YEARS/M	Visit NO : 1
Dept/Doctor : ORTHOPAEDICS/Dr. Kamaraju C (KAMC/24736)		
Ref.Doctor : SELF		
OP Consultation Fee : Rs.450		
Recieved By DEBITCARD: Rs.450/-		
2nd Visit Validity Upto 20/9/2019		

Cashier/Receptionist
gnyani

VITALS:

PR: 72 bpm RR: 20 bpm BP: 130/90 mmHg TEMP:

NUTRITIONAL SCREENING: Obese / Normal / Mal Nourished

Height: 156 cms Weight: 69 kg BMI:

DIETICIAN CONSULTATION: Required / Not Required

DRUG ALLERGIES: YES/NO

SpO2 - 95%

P.O Right Total knee replacement

Dmt
HMT

Dis - 13/08/2019

for S/R

P/O of RT TKR done on 13/8/19

to

INSTA RECOV

- 1 / day x 1 month

Advice

Knee Rom

Static quadriceps
Exercises

Walker supported
walking.

active ankle/foot
movements

Suture Removal done
wound clean & dry
No gaping
No discharge
Staples removed
ASD done

PRESCRIPTION SLIP

	Generic Name (In Capital Letters)	Strength	Dosage	Instructions	Duration	Total Quantity
1	Tab <u>Ultracet</u>	150/5		if pain f		
2	Tab <u>glycomet SR</u>	500 mg		twice daily		
3	Tab. <u>Losartan</u>	25mg		once daily		
				Continue		
4	Tab <u>Evion-Lc</u>			once daily	x 10 days	
5	Inj Human mixtard			30/30		
6				10U - (Before Breakfast) - 10U B4 dinner		
7	<div style="display: flex; justify-content: space-between;"> <div> <u>Review after 6 months</u> </div> <div> <u>Dr. Sushruti</u> <u>EMLV</u> </div> </div>					
8						
9						
10						

Pharmacist's Sign:

Doctor's Signature

Date:

Name of Pharmacy:

(Stamp)

KHL, L.B. Nagar.

Wish you a Speedy Recovery