

KASULU TOWN COUNCIL



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Kasulu Town Hospital
KASULU

PATIENT REFERRAL FORM

Ref No:-
To Consultant/Specialist NEUROSURGEON / PHYSICIAN
Hospital BUGANDO MEDICAL CENTRE
Referral Approval MOYC

Name of Patient MADINA HAMISI Reg. No. IPD/OPD 01-83-24
Sex F Age 42 Tribe HA Religious Muslim

Date of Admission/Consultation 4/2/2022 Discharge

History Known hypertensive on Lexotan Presented with numbness of the legs and jerking movement recurrent for 1/2 years, Occasional dizziness.

Findings Conscious Alert. Pupils equal reactive to light Power is in all limbs Jerking movement of the legs like rigor on and off.

Investigation Serum cholesterol High, FBS normal
BS -ur RBC Normal

Treatment Sodium Valproate 500mg bid, Phenytoin 200mg bid, Diuretic PRN, Lexotan, Nut B.

Provisional Diagnosis Focal, seizure 2° ??

Reason for referral For CT scan, EEG and possible management

Thank you for prompt attention

Referring Dr. Mossam Signature [Signature]

Date 4/2/2022