BMC061



## NKINGA REFERRAL HOSPITAL P. O. BOX 1. NKINGA,

TABORA -TANZANIA (É.A)
Nkinga-hospital@hotmail.com

REFERRAL FORM
BMC Date 11/02/2022
Name STELLA WILSON MACHIBULLA Age 2940 Sex F
Reg. No. 61-88-33 Department OBS & GYne Cease Dean Conservan
Patient History Po Lo 11 days post conergency mysterectomy
And at Lay 11 post surgery presented and and
and ended to smope (Lorde of Conscious for Sminds),
Then of Jain Conscioures.
Clinical Finding(S): P. J. Jawer Lub Swellig e 90 Circumferen Borcan
Congressed to the Left of 31cm, mild tender, not warm, no
Investigation(S): Doppler wis- showed, Thrombi 2 1 by Iscm on
Index femoral vein
Provisional Diagnosis: DVT Te Pulmonay Embolic (PE)
Treatment Given: heparin 260004 dart, then 17004 bd 5/7
Reason For Referral: For CF-angipgraph & cheef ad
Julle management
De Feligia
Doctor's Name by Feliaza Signature Signature Date-11/02/2022. Official Stamp Official Stamp
Date-11 02 20 77 Official Stamp
Doctor's Name & Fehaza Signature Signature Date-11/02/2072. Official Stamp Official Stamp William TABORA.
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