

Lloyds Kali Ammal Memorial Hospital लॉयर्ड्स काली अम्माल मेमोरियल हॉस्पिटल

Lloyds Infinite Foundation



Phone No :- 9405123224 Pin Code:- 442704

Patient Reg. No: HD0011406 OPD No.: OP0029288 **Patient Name:** Mrs. SANGITA R AATLAAMI Mobile No.: 9403167409 Gender/Age: F/33 Y, 22 D OPD Reg. Date: 17-03-2024 REKANAR - NC -**Doctor Name:** Dr. S.CHANDER Address:

BP	Temp	PR	Weight	Spo2	RBS/FBS
mm/Hg	°C	per min	kg	%	mg/dl

Chief Complaint: SWELLING OVER LEFT ANKLE JOINT FROM 1 MONTH NO H/O INJURY NON HTN / DIABETIC

Diagnosis: ? ABSCESS

Test Name:

Sr. No.	Test Name
1	CBC- WNL
2	SR URIC ACID - WNL

Prescription:

Sr No	Medicine	Type	Dose	Duration (Days)	Frequency	Advice
1	INCISION AND DRAINAGE					
2	TAB CLAVUM 625			5	1 - 0 - 1	
3	TAB RABEKIND 20			5	1 - 0 - 0	
4	TAB ZERODOL SP			5	1 - 0 - 1	

Suggestion :AVOID WATER CONTACT WITH WOUND ,,REVIEW SOS

Dr.S.CHANDER