

Lloyds Kali Ammal Memorial Hospital लॉयर्ड्स काली अम्माल मेमोरियल हॉस्पिटल

Lloyds Infinite Foundation



Pin Code: - 442704 Phone No : - 9405123224

Patient Reg. No: **Patient Name:** Gender/Age:

HD009819 Miss NILIMA ALONE

F/25 Y, 1 M, 6 D

OPD No.:

Mobile No.: OPD Reg. Date:

Doctor Name:

9420103804 07-03-2024

OP0027550

Dr. Dr G.LALITHA

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

Previous History: pr MH-irregular

Chief Complaint: C/O nausea & vomiting since 3 days c/o irregular periods, 3/30-40 days lmp-25/01/2024

Examination: L/E-THROAT CONGESTION+

P/A-SOFT

Address:

Diagnosis: 25 years female with irregular periods

Test Name:

Sr. No.	Test Name
1	UPT NEGATIVE
2	TSH-1.7
3	CBC-HB-13.2

Prescription:

Sr No	Medicine	Type	Dose	Duration (Days)	Frequency	Advice
1	regestrone		5mg	3	TID	
2	T.ZOFER 4MG			2	OD	
3	PANTOP 40MG			10	OD	
4	Azithromycine 500 TAB			3	OD	
5	THROAT GARGLING				DAILY TWICE	

Diet: AVOID TEA/COFFEE/ MASALA

Dr.Dr G.LALITHA