Prof. Ali Jawa

MD (USA), MPH (USA), FACE (USA), FRCP (Lon), MIVM (Europe), Diplomate ABIM-Endocrinology (USA), Diplomate ABIM (USA), Diplomate-ABPNS (USA).

Phone: 0321-8425005

Patient Name: Rafique Ahmed

Age / Sex: 58 Years Male

Visit Date: 10-Nov-2020

Vitals 1: Weight 75.00 Kgs **Height** 170.00 CMs **BMI** 27.51 **SBP/DBP** 179/102 mmHg **Pulse** 130

Patient feels the left sided lobe is shrinking on its own.

On exam: left sided enlarged lobe, Right lobe barely palpable, non-tender, mobile, no cervical lymphadenopathy

HYPERTHYROIDISM (Hyperfunctioning left thyroid Lobe on Thyroid scan) TSH <0.01 FT4 2.81. Clinically and biochemically hyperthyroid.

USG Thyroid: Large left thyroid cystic lesion with mobile internal echos, likely suggestive of hemorrhagic thyroid cyst (TI-RAD2) No cervical lymphadenopathy

NEOMERKAZOLE 5 MG

3+0+0

BLOKIUM 100 MG

1+0+0

1

LABORATORY TESTS	
Tsh And Free T4	
Cbc	
Liver Function Test	
FOLLOW UP INSTRUCTIONS	
Follow up visit after 2 weeks (25-Nov-2020)	

Prof. Ali Jawa

SOFVASC 5 MG

EXEN-D-PLUS

CHEER UP 10 MG

Print Date & Time: 11th Nov 2020 15:02:59

1+0+0

1+0+0

1+0+0