

12/10/22

Mr. Sachin Bansare
28/m

Rx,

after meals { Tab. Augmentin 625mg
1 - o - 1 x 5 days

Tab. Enzoflam
1 - o - 1 x 5 days

before meals { Tab. Pan-D 40mg
1 - o - o x 5 days

Adv: Hexigel gum paint
massage

1 - o - 1 x 1 week

Dr. Nitin

QF/NUR/12
DISCHARGE SUMMARY

IP. Number: 728819	Admission Date: 18/04/2011	Discharge Date: 07/05/2011
Bed No.: 3042	Admission Time: 10:28 a.m.	Discharge Time: P
Name of Patient: BIPLAB ROY		
Age: 36 years	Sex: Male	
Guardian's Name: BENOY KUMAR ROY		
Address: JHARGRAM (WEST MIDNAPOOR)		
Telephone #: 9830484636		
Consultant's Name: Dr. GAUTAM MUKHOPADHYAY (Consultant Onco Surgeon)		

Patient was also seen on referral by: Dr. TAPAN KUMAR DASS (Consultant Physician) and Dr. M. B. DAS (Consultant Cardiothoracic Surgeon)

Final Diagnosis: SQUAMOUS CELL CARCINOMA OESOPHAGUS (MIDDLE 1/3)

Clinical Summary: This 36-year-old gentleman was admitted with history of gradually increasing dysphagia (solids > liquids) since November 2010. Upper GI Endoscopy revealed ulceroproliferative growth in oesophagus at 32cm from the incisor teeth. Endoscopic Biopsy showed Squamous Cell Carcinoma. CECT Thorax done showed locally advanced disease. The patient was given 3 cycles of neoadjuvant Chemotherapy with Injection Paclitaxel and Carboplatin. Follow up PET-CT scan showed metabolically active mass in infracarinal region suggestive of residual disease with no evidence of metastatic or active disease anywhere else. Relevant investigations were done prior to surgery.

Operative Note: Total radical oesophagectomy (McKeown's) with oesophagogastrostomy and feeding jejunostomy done under General Anesthesia and Thoracic Epidural Anesthesia on 21/04/11.

Operative Findings:

- Right Thoracotomy through 5th ICS showed oesophageal growth extending from pulmonary vein to the carina and infiltrating into the aorta at one region of 2cmx2cm when little bit of tumour tissue was left behind during resection
- No obvious metastatic lymph nodes were seen.
- No evidence of metastatic disease was seen

The whole procedure took 7-8 hours to complete.

Postoperative recovery was gradual but uneventful. Contrast swallow study done on 12th Postoperative day didn't show any anastomotic leak in the neck. At present, patient is afebrile, haemodynamically stable, taking liquids orally and is being discharged with the following advice -

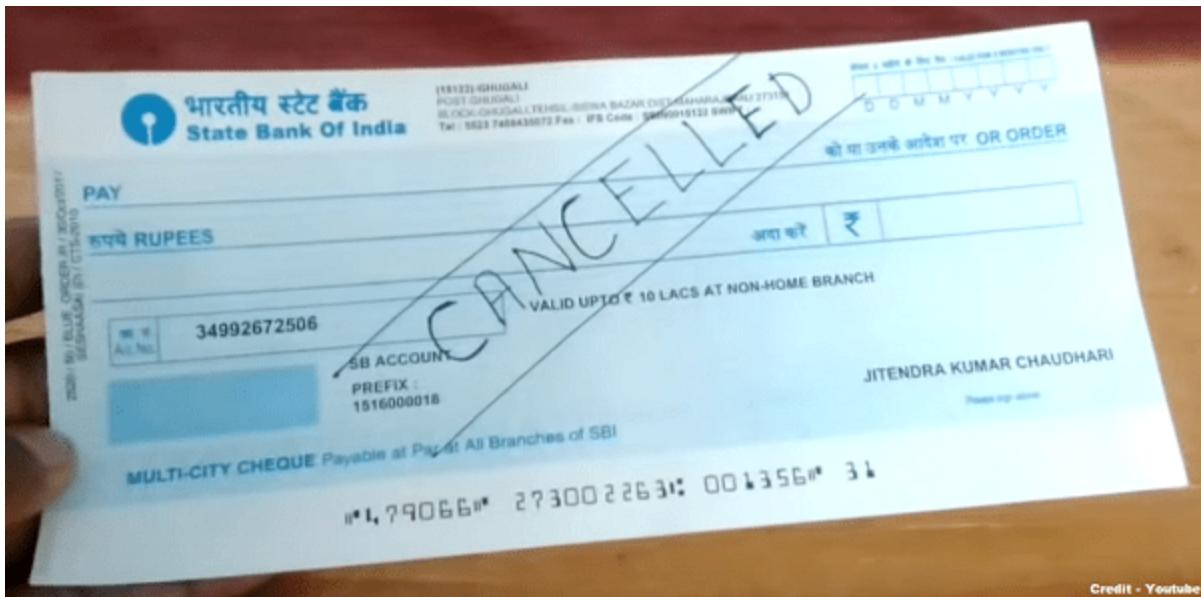
Condition of Patient at discharge:

- The patient is discharged with: **Feeding Jejunostomy tube in situ.**

Advice on discharge:

- REST:** Restful life at home for 7 days.
- DIET:** Diet of liquid consistency orally of about 2 litres / day (2000Kcal/day) and Feeding Jejunostomy Tube feeds about 1 litre / day (water / clear liquids). Diet should be followed as per diet chart.
- TOTAL ADVISED FLUID INTAKE:** Liberal.
- Syrup DIGENE 10ml orally thrice daily to continue till further advice.
- Syrup IBUGESIC 10ml orally as and when necessary (in case of pain)
- RESOURCE** 4 scoops with 200ml of water 4-5 times orally to continue till further advice.

Name of Patient: BIPLAB ROY
Bed No.: 3042
Consultant's Name: Dr. GAUTAM MUKHOPADHYAY (Consultant Onco Surgeon)





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C.Person	Gaurav Sharma																					
Address	456 Pharmacy Lane,, Pune,, Maharashtra, India, Maharashtra - 400080																					
Phone	09345678811																					
GSTIN	27ABCDE1234F1Z2																					
Place of Supply	Maharashtra (27)																					
Sr. No.	Name of Product / Service	Batch No	MFG Date	Expiry Date	HSN / SAC	Qty	MRP	Rate	Disc. (%)	Taxable Value												
									(%)													
1	Paracetamol 500 mg	A1	Dec 2024	Dec 2026	30045031	10 TBS	50.00	40.00	10.00	360.00												
2	Cough Syrup (200ml)	30045031	Jul 2023	Dec 2025	30045031	20 BTL	90.00	80.00	10.00	1,440.00												
3	Antibiotic Cream (30g)	C23456	Jan 2022	Dec 2024	30042019	10 PKG	55.00	45.00	10.00	405.00												
		IGST (12.00 %)							2,205.00													
									264.60													
						Total	40		245.00	₹ 2,469.60												
Total in words																						
TWO THOUSAND FOUR HUNDRED AND SIXTY-NINE RUPEES AND SIXTY PAISA ONLY																						
HSN / SAC					Taxable Value	IGST		Total														
30042019, 30045031					2,205.00	%	Amount	264.60														
					Total	12.00		264.60														
Total Tax in words: TWO HUNDRED AND SIXTY-FOUR RUPEES AND SIXTY PAISA ONLY																						
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MH/WI/181D/1-1/WBF/M/03-12



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Summary of Accounts held under Cust ID: 536619964 as on March 31, 2020

ACCOUNT DETAILS - INR

ACCOUNT TYPE	A/c BALANCE(I)	FIXED DEPOSITS (LINKED) BAL.(II)	TOTAL BALANCE(I+II)	NOMINATION
Savings A/c 020201563824	2,74,724.85	0.00	2,74,724.85	Registered
TOTAL	2,74,724.85	0.00	2,74,724.85	

Statement of Transactions in Savings Account Number: 020201563824 in INR for the period April 01, 2019 - March 31, 2020

DATE	MODE*	PARTICULARS	DEPOSITS	WITHDRAWALS	BALANCE
01-04-2019		B/F			65,731.31
02-04-2019	DEBIT CARD	VPS/ACT /201904021337/909208028740/HYDERABAD		4,377.00	61,354.31
03-04-2019		IPS REF DT 31 03 2019 032260 HPCL 0 75 CASHLESS IN	19.95		61,374.26
03-04-2019		VISA REF SRI SAI BABA FILLING S	15.00		61,389.26
03-04-2019	MOBILE BANKING	MMT/IMPS/909318812658/SHINE HAIR/AXIS BANK LTD	29,600.00		90,989.26
03-04-2019		UPI/909319915190/UPI/hussainmushtaq7/State Bank Of I/		1,600.00	89,389.26
03-04-2019		UPI/909319394564/UPI/patiramesh9@oks/State Bank Of I/		5,000.00	84,389.26
04-04-2019		UPI/909413003784/OK/satibabu.970095/Andhra Bank	5,000.00		89,389.26
04-04-2019		UPI/909418788274/Car servicing/naren9682@okhdf/State Bank Of I	4,900.00		94,289.26
04-04-2019		UPI/909419832856/OI/kalurianil@okhd/HDFC BANK LTD		4,000.00	90,289.26
05-04-2019		UPI/909511640301/UPI/sureshlaya5@oka/Axis Bank Ltd.	1,200.00		91,489.26
09-04-2019		UPI/909909280215/UPI/kiransummary@okax/Axis Bank Ltd./		3,650.00	87,839.26
09-04-2019		UPI/909915446877/UPI/santhoshlone@ok/Corporation Ban/		130.00	87,709.26
10-04-2019		UPI/910013164216/UPI/hussainmushtaq7/State Bank Of I/		600.00	87,109.26
10-04-2019		UPI/910013116748/UPI/goog-payment@ok/Axis Bank Ltd.	15.00		87,124.26
10-04-2019		UPI/910014428195/Parts/hfakhtar@oksbi/CHATISG ARH R/G/		8,300.00	78,824.26
10-04-2019		UPI/910015254944/UPI/pannirraju@okax/Bank of India	850.00		79,674.26
11-04-2019		UPI/910110934510/UPI/gloriousvenkat@/HDFC BANK LTD		700.00	78,974.26
12-04-2019	DEBIT CARD	VPS/RAINBOW HOS/201904121732/910212077446/HYDERABAD		800.00	78,174.26
12-04-2019		UPI/910220285883/UPI/gsprakash@oksbi/State Bank Of I/	3,800.00		81,974.26
12-04-2019		UPI/910220835195/Parts/hfakhtar@oksbi/State Bank Of I/		450.00	81,524.26

Dr I H Hiranandani Hospital
New Registration.

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Hospital

Out-Patient:

Receipt 64965

No.: OP /

Name: _____

Name _____

Doctor : D. Vimal Panigrahi Dept. :

Sex : M / F Age

MR No. 2

Date : 15/04/2020

Total Amount in words Rupees :
For Dr L H Hiranandani Hospital

TOTAL

~~6400~~

Billing in-charge _____
Subject to Realisation of Cheque

- Administrator

Hillside Avenue, Hiranandani Gardens, Powai, Mumbai - 400 076. India. Tel. : 2576 3300 / 3333 • OPD Appointment : 2576 3500
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SIRI LAB

Cell: 8520922188

9966597410

VCSR Complex, Room No. 8,

Guntha Bazar,

Beside Tirumala Hospital,

Near Seven Road, KADAPA -1.

E-mail : soma.sirilab@2021

Patient Name	: Mr. MANOJ	Reg No	: R-00130
Age / Sex	: 35 Yrs / Male		
Bill No	: 144		
Referred By	: DR.KUMAR MBBS DCH		
Report Status	: Final Report	Sample Regd Date	: 09-Apr-2022 / 1:22:16 pm
		Sample Drawn Date	: 09-Apr-2022 / 1:22:16 pm
		Sample Auth Date	: 09-Apr-2022 / 1:45:58 pm

TEST DESCRIPTION	RESULTS	UNITS	BIOLOGICAL REF. RANGES
BIOCHEMISTRY			

FBS

Fasting Blood Glucose 95 mg/dL 70 - 110

The blood sugar concentration or blood glucose level is the amount of glucose (sugar) present in the blood of a human or animal. The body naturally tightly regulates blood glucose levels as a part of metabolic homeostasis. The first is that the pancreas which is an important endocrine organ in our bodies does not secrete enough insulin. Insulin is the hormone that helps glucose go from the bloodstream into the cells of our body to be used for energy. A complicated condition called insulin-resistance is the second main cause of diabetes. Insulin-resistance, which occurs primarily in type 2 diabetes, is when the cells of our body are resistant to the glucose-lowering effects of insulin. If an individual has either not enough insulin and/or insulin-resistance, then high blood sugar levels or diabetes will be present. Method: GOD/POD.

PLBS

Post Lunch Blood Glucose 125 mg/dL 110 - 160

A postprandial glucose (PPG) test is a blood glucose test that determines the amount of glucose, in the plasma after a meal. The diagnosis is typically restricted to postprandial hyperglycemia due to lack of strong evidence of co-relation with a diagnosis of diabetes.

LIPID PROFILE

		Sample Type	:	Serum
Total Cholesterol (CHO)	H 210			Desirable : < 200
HDL Cholesterol (HDL)	H 45	mg/dL		Low: < 40
Total Triglycerides (TGL)	L 125	mg/dL		Desirable Level : 150
VLDL Cholesterol	25	mg/dL		<=30
LDL Cholesterol	H 140	mg/dL		<100:Optimal
Non - HDL Cholesterol	H 165	mg/dL		<130
Chol / HDL Ratio	H 4.66			Low Risk : 3.3-4.4
HDL/LDL Cholesterol Ratio	0.32			
LDL/HDL Ratio	3.11			

Lipid profile or lipid panel, is a panel of blood tests that serves as an initial broad medical screening tool for abnormalities in lipids, such as cholesterol and triglycerides. The results of this test can identify certain genetic diseases and can determine approximate risks for cardiovascular disease, certain forms of pancreatitis, and other diseases. Lipid panels are commonly ordered as part of a physical exam, along with other panels such as the complete blood count (CBC) and basic metabolic panel (BMP). As above given normal ranges Therapeutic target levels of lipids as per NCEP - ATP III recommendations.

*When Triglyceride level is > 400 mg/dL, Friedewald Equation is not applicable for calculation of LDL & VLDL. Hence the calculated values are not provided for such samples.
Method:Spectrophotometry & Calculation.

LAB TECHNICIAN

Analyzed & Reported by



Tirupati Patel

Dr. Sarath Chandra

MBBS. MS Ortho

Approved by

Please Note

NOT FOR MEDICO-LEGAL PURPOSE, EACH REPORT NEEDS TO BE CORRELATED CLINICALLY FOR A FINAL DIAGNOSIS. IN CASE OF ANY DISCREPANCY IN REPORT DUE TO TYPING ERROR KINDLY GET IT RECTIFIED IMMEDIATELY.

1. All blood & Urine Examinations
2. Special Master Health Check-up
3. Biopsy & Hormones collection centre
4. Covid Profile available

HOME SAMPLE COLLECTION ARE AVAILABLE