

Unique ID: 070/1/17

Date: 27/1/17

ORCHID BREAST HEALTH CENTRE, PRASHANTI CANCER CARE MISSION, PUNE

## BREAST CANCER CLINIC

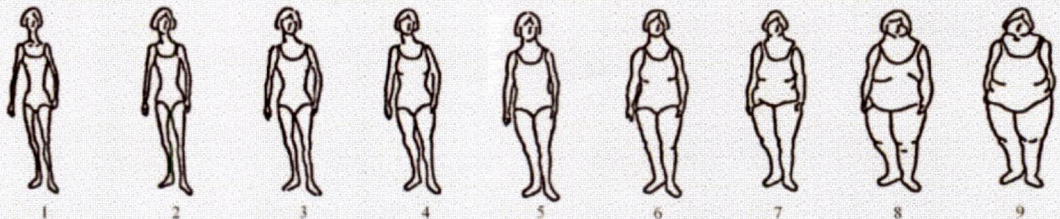
 (R) Breast Abscess  
 - Lymphomatous  
 mastitis

## A. Contact and General Information (Please fill in capitals only):

1. Full Name: Sandhya Chandrashekhare Age: 28 yrs  
First Middle Last
2. Permanent address: Sudarehan Heights airport road  
Lanjay Park, Pune.  
 City: Pune State: Maharashtra Pin Code: 411032.
3. Mailing address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Pin Code: \_\_\_\_\_
4. Local address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Pin Code: \_\_\_\_\_
5. Phone: Mobile (self) 9970820366/9503536958 Landline: \_\_\_\_\_  
 Alternate number: \_\_\_\_\_
6. Email ID: gurubly@gmail.com
7. Nationality: ☒ Indian ☐ Others \_\_\_\_\_
8. Date of birth: 02 / 11 / 1988  
DD MM YYYY
9. Gender: ☒ Female ☐ Male
10. Aadhar number: \_\_\_\_\_
11. Place of birth: India
12. Religion: ☒ Hindu ☐ Christian  
☐ Muslim ☐ Others \_\_\_\_\_
13. Referred by: Dr. Krishna Mohan
14. Referred to/for: \_\_\_\_\_

## B. Height and Weight Information:

15. Height: \_\_\_\_\_ cms 16. Weight: 62 kgs 17. BMI: \_\_\_\_\_
18. Which diagram best describes your body size at the following ages:



	1	2	3	4	5	6	7	8	9
Age 5									
Age 10									
Age 20									
Age 30									
Age 40									
Current									