

Unique ID: 074/02/17

**Orchids**  
 BREAST HEALTH

Date: 01/02/17

ORCHID BREAST HEALTH CENTRE, PRASHANTI CANCER CARE MISSION, PUNE

## BREAST CANCER CLINIC

(W) Breast Fibroadenoma

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

1. Full Name: Sameuddhi Sandeep Naughane Age: 14 yrs

2. Permanent address: Flat no. 10, Kahi Pearl Dhanori Pune - 15

City: Pune State: MH Pin Code: 411015

3. Mailing address:

City: State: Pin Code:

4. Local address:

City: State: Pin Code:

5. Phone: Mobile (self) 9822004179 Landline:

Alternate number: 9765371065

6. Email ID: san5060sai.print@gmail.com

7. Nationality: ☒ Indian☐ Others

8. Date of birth: 11/09/2002

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. SUSHMA YEWALE

14. Referred to/for: Dr. Koppiker

## B. Height and Weight Information:

15. Height: cms

16. Weight: 31 kgs

17. BMI:

18. Which diagram best describes your body size at the following ages:



1



2



3



4



5



6



7



8



9

	1	2	3	4	5	6	7	8	9
Age 5	<input checked="" type="checkbox"/>								
Age 10	<input checked="" type="checkbox"/>								
Age 20									
Age 30									
Age 40									
Current		<input checked="" type="checkbox"/>							