



**MALLA REDDY
NARAYANA**

MULTISPECIALITY HOSPITAL

OP PATIENT ASSESEMENT RECORD

Dr. SWAPNA JILLA

MBBS, DNB RADIATION ONCOLOGY, ECMO

CONSULTANT

GD.NO: 58467

Radiation Oncology

Name : Mrs. PAKEER APIZA BEGUM
MR No : UMR22052001171
Address : H NO-2-55 KATRIYAL KATRIYAL
MANDALRAMAYAMPETMEDAK, TELANGANA
Ref. Type : General

Age : 56 Year(s) / Female
Ref. Doctor : WalkIn
Visit Type : NORMAL
Phone No : 8106619502
Date : 23-May-2022 10:02 am
Consult.No : OP22052300555

SE HISTORY :

Chief Complaint:

B.P.:

Pulse:

Wt:

Height:

R.R:

Temperature:

110/70

65 kgs. 151 cm

GENERAL EXAMINATION:

Allergies : Known/Unknown

Body Habitus : Cachectic/Thin/Average Built/Obese/Normal

Pertinent Family History : Negative/Unknown

Psychological Assmnt : Normal/Any Psychological Problem

EMIC EXAMINATION:

presented outside the c/o the dyspnoea 20 days back

evaluated & found massive pleural

effusion Rt side & ICD was placed

STIGATIONS :

Biopsy from Rt lung mass → s/o
adenocarcinoma

PET-CT :- AFDG avid STD in the
Rt hilar region 3.5 x 2.4 x 3 cm

By : MRN3536

Time : 9:58:59AM

Print By : MRN3536

< NEW > Validity : 1 Consultation(s) Before 29-MAY-22

052001171

OP22052300555



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Help Line

040-2215 2215

Moderately ↑ FDG concentration noted
in Multiple paratracheal lymph nodes

Intense FDG avid multiple lytic lesion
in D-spine & L1-L5, sacrum
b/L ilium, neck of b/L femur

O/E: GC fair
R/O

Tenderness over L-spine

DS: Ca lung = bone mets

Plan: pall. RT to L1-L5

B/L femoral head
+ Lij. zoledronic acid

pall. RT
S13.2.2

25/5/22

Admission under
Dr. Swapne

Admission
under Swapne
on day case basis
7/25/22

Apply for Zoledronic acid 4ARSR
S (12.31.1)



DEPAR

NAME : Mrs. Pakeer Ap

Age & Sex : 56/F

Name of the study : Whole body

Indication for PET-CT: Adeno carcin

WHOL

Protocol: Study performed in Eu
9.87mCi of F-18 FDG was injected
performed 1hr after injection of
1.2mg/dl

PET-CT Findings

BRAIN-

Ventricular system is normal
Both cerebral and cerebellar hem
No evidence of cerebral or cereb
Physiological symmetrical distrib

HEAD AND NECK:

Intense FDG concentration note

1.1cm(AP)x1.2cm(ML) with max

Non FDG avid hypodense nodul

Sinuses are normal

No evidence of cervical lymphad

Physiological distribution noted

THORAX:

-Intensely increased FDG conce

lesion in the right hilar region w

3.5cm(AP)x2.4cm(ML)x3cm(CC)

-Moderately increased FDG con

paratracheal lymphnodes large

-Note made of bilateral pleural

Note made of right ICD tube in

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