

Unique Identifier

**Test Name/Test Code**

(Please refer to the Directory of Services for correct name and specimen type)

**Patient Details**

First Name: Hira Singh Last Name: 152629

Age: 75/M Gender: Male  Female

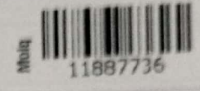
Address: \_\_\_\_\_ Contact No. \_\_\_\_\_

E-mail ID: \_\_\_\_\_

Referred by: \_\_\_\_\_ Contact No. \_\_\_\_\_

For Maternal Screening-Date of Birth:

Weight: \_\_\_\_\_ kg. Height: \_\_\_\_\_ ft \_\_\_\_\_ inches, LMP \_\_\_\_\_ Last Ultrasound Report \_\_\_\_\_

1. \_\_\_\_\_  
2. HPE Small  
3. \_\_\_\_\_  
4.  11887736  
5. \_\_\_\_\_  
6. \_\_\_\_\_  
7. \_\_\_\_\_  
8. \_\_\_\_\_  
9. \_\_\_\_\_

**Billing Information**

Client Name: Pushpanjali Rawari

Client ID: \_\_\_\_\_

Total Amount: \_\_\_\_\_

Amount Received: \_\_\_\_\_ Receipt No.: \_\_\_\_\_

Amount Balance/ Due: \_\_\_\_\_

Payment via:  Cash  Cheque  Credit  ePlatform

**Instructions to Laboratory/Clinical Information**

\_\_\_\_\_

**Specimen Type Received (For MolQ use only)**

- Serum
- Plasma: EDTA/FL/CIT
- SST
- W. Blood EDTA
- W. Blood Fluoride
- W. Blood Heparin
- W. Blood Sodium Citrate
- Semen
- Bone Marrow
- FN Aspirate
- Tissue Formalin
- Paraffin Block
- Smear
- Slide (H & E)
- Pus
- Blood Culture Bottle
- CSF
- Fluid
- BAL
- Sputum
- Urine
- Stool
- Swab
- Others

Other Sample Type/ Source: \_\_\_\_\_

**Specimen Information**

Temperature:  Ambient  Refrigerated  Frozen

Sample / Vial Type	Vials ID Barcode
<u>Contor</u>	

**Received Specimen Information (For MolQ use only)**

Temperature:  Ambient  Refrigerated  Frozen

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Patient ID: \_\_\_\_\_ No. of vials/container: \_\_\_\_\_

1	2
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Signature of Accessioning Officer(s)

Total No. of Vials/Container: \_\_\_\_\_

**Specimen Collection Information**

Date: 2/7/24 Time: 11:00

Fasting: Yes  No  Fasting Period: \_\_\_\_\_ Hrs.

Collection by: Surender Kumar Rawari

Urine Volume: \_\_\_\_\_ ml Hrs \_\_\_\_\_

**Patient Consent:** I hereby authorize MolQ Laboratory to use and share with affiliates, my personal information including but not limited to my condition, disease information etc. as may be necessary to perform the test or services etc. Medical records/information, to the extent applicable by laws and regulations, will be kept confidential and will not be made publicly available. Further, I authorize the use of the leftover specimens for immediate research and in future research of any kind and at any time in the future. I agree to the access of my medical records and specimens for diagnostic and research purpose.

**Disclaimer:** The samples used for research will be coded to maintain confidentiality and will be discarded as per the rules and regulations specified as applicable by law. In the event of any publication by MolQ Laboratory, patient's identity will remain confidential. For any test/service related complaint/query please contact MolQ Laboratory for resolution. In case of any dispute the jurisdiction will be Hoshiarpur, Gurgaon, Haryana. The financial liability or compensation of any sort is not more than MRP of the test requested.

रोगी सूचना: मैं मोलक्यू प्रयोगशाला को अधिकृत करता हूँ कि मेरी पूर्ण व्यक्तिगत जानकारी अपनी किसी भी सेवा के साथ साझा कर सकती है। मेरी किसी भी सेवा या प्रयोग या प्रयोग के उपयोग के लिए उपयोग है, जो मैं इस प्रकार की जानकारी को अपने स्वयं के लिए रखूँगा और संशोधन के लिए उपयोग में लाऊँगा। मेरी सेवा के उपयोग के लिए उपयोग में लाया जा सकता है। मैं अपनी (के) मेरी सेवा के लिए उपयोग में लाऊँगा।

Patient/Client/Doctor's Signature Date: \_\_\_\_\_



# PUSHPANJALI HOSPITAL

(A Unit of Pushpanjali Medicare Pvt. Ltd.)

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E-mail : pushpanjalihospitalrewari@gmail.com, CIN: U85110DL1987PTC207727



*D 12 am*

## HISTO PATHOLOGY REQUISITION SLIP

Date 1-7-24

Name Mr. Hira Singh 'S/o. Ram Chander

Age 75 Sex M Address Buchali

UHIID 152629 Admission No. 8053906563  
03307

Specimen..... Site.....



Brief Relevant Clinical History

Brief Operative Note

TURP chips

Any Relevant Special Investigation

## CYTOLOGY REQUISITION SLIP

Cytology Papsmear

Clinical Finding and History.....LMP / Any other

Normal / Post Menoposal / Suspicious Lession / Other

Site of Sample  
Cervix / Post fomix, Lat Vag wall / endo Cervix

Ref. Dr. Yogesh



# DR. DEEPAK ULTRASOUND & DIAGNOSTIC CENTRE

Maharana Pratap Chowk, Opposite Brass Market, Bawal Road, Rewari - 123401 (Haryana)  
(Reception) : 8094946444, 7454541770, (P.R.O.) 996781423, Email : drdeepakdiagnostics@gmail.com

Date 10/06/2024  
Name Mr. HIRA SINGH  
Ref. By Dr. NEELKAMAL YADAV  
Age 75 Yrs. Sex M

## USG WHOLE ABDOMEN

**LIVER** is normal in size and echo-texture. No obvious focal lesion seen.  
Portal vein is normal.

**GALL BLADDER** is well distended. No e/o any obvious calculus or mass lesion seen. Wall thickness is normal.  
No e/o IHBRD noted.  
CBD is not dilated.

**PANCREAS** is normal in size & echotexture with no e/o focal lesion. MPD is not dilated. Peripancreatic fat planes are normal.

**SPLEEN** is normal in size and echotexture. No focal lesion seen.

**RIGHT KIDNEY** is normal in size, shape & echotexture. Cortico-medullary differentiation is well maintained. No e/o calculus or hydronephrosis is seen.

**LEFT KIDNEY** is normal in size, shape & echotexture. Cortico-medullary differentiation is well maintained. No e/o calculus or hydronephrosis is seen.

**URINARY BLADDER** is almost empty. No e/o any calculus or mass lesion is seen. Wall thickness is normal.

**PROSTATE** is grossly enlarged in size and measures 57x57x52mm, volume 88ml. Median lobe hypertrophy is noted indenting the bladder base. The prostatic capsule is intact.

No e/o ascites or free fluid seen.

No e/o obvious abdominal lymphadenopathy is seen.

No USG e/o appendicitis is seen.

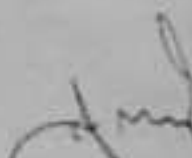
The large bowel show gaseous and faecal matter distension -- Due to constipation.

## IMPRESSION :

- Gross prostatomegaly with median lobe hypertrophy.
- The large bowel show gaseous and faecal matter distension -- Due to constipation.

Adv: clinical correlation.

DR. (Mrs.) TARUNA N. YADAV  
MBBS, DMRD  
CONSULTANT RADIOLOGIST

  
DR. BEEPAK YADAV  
MBBS, MD



# PUSHPANJALI HOSPITAL



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 Phone No: +91 522 261320, 261321  
 Email: pushpanjalimedica@gmail.com, Dr. 08511001186@PTCL25737

Patient Name: Mr. Hema Singh URO ID: 152124 IPD NO: 23157  
 Age / Sex: 75 Y M DOB: 1-7-24 DOB: 1-7-24

## OPERATION THEATRE NOTES

Surgeon in-charge: Dr. Kamal Anesthetist: Dr. Mahit  
 Assistant Surgeon: Dr. Yogish OT Technician:  
 OT Staff: Type of Anaesthesia: SP  
 Pre-Operative Diagnosis: BPE  
 Post-Operative Diagnosis:  
 Procedure Name: Cystoscopy + ODU + TURP  
 Operation Started at: Operation Finished at: Duration:  
 Sponge Count: None

Operative Notes: findings - Use Hema Singh to 28 Fr sheath  
Grade II obstructive Prostatomegaly  
High bladder Neck

Procedure: After PSD of Path, LAAP, Cystoscopy done, above mentioned findings are noted. ODU done at 12 o'clock position. Resection of Prostate done using monopolar resect TURP chips retrieved using Ellik's evacuator. Complete Hemostasis ensured. 20Fr 3-way foley's catheterization done & NS Irrigation started.

Organ Explored:  
 Specimen Sent for histopathology (if any): TURP chips  
 Immediate post-operative condition: Good

Surgeon's Signature: [Signature]  
 Date & Time: 1/7/24 (am / pm)