



PUSHPANJALI HOSPITAL



(A Unit of Pushpanjali Medicare Pvt. Ltd.)

Rajesh Pilot Chowk, Garhi Bolni Road, Rewari-123401 (Haryana), India

Phone No +91-1274-263300, 260021

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

HISTO PATHOLOGY REQUISITION SLIP

Date 01-7-26

Name Dr. Praveen Dr. Chandar Singh

Age 60y Sex M Address Mohamadpur

Admission No. 9728770380

Specimen UHD - 15244 / 03224 Gall Bladder Site



Brief Relevant Clinical History

Cholecystitis

Brief Operative Note

Any Relevant Special Investigation

CYTOLOGY REQUISITION SLIP

Cytology Papsmear

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

Normal / Post Menoposal / Suspicious Lesion / Other

Site of Sample

Pre / Post fixation

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Ref No.	PEC/USG/IPE/UHID152441	Date	25-06-2024
Patient's Name	Mr. Gajraj	Age & Sex	60Y/M
Referred By	Dr. Navdeep Yadav	Test Date	USG-

ULTRASOUND REPORT OF WHOLE ABDOMEN

Liver is normal in size and shows grade 1 fatty infiltration. No obvious focal lesion is seen in liver parenchyma. Intra hepatic biliary channels are not dilated. Portal vein is normal. The CBD is not dilated.

Gall bladder is partially distended. A floating calculus of size 14.5mm is noted in lumen of gall bladder. GB wall is diffusely thickened, measures about 6.1mm.

Pancreas is normal in size & echotexture with no e/o focal lesion.

Spleen is normal in size and echotexture. No focal lesion is seen.

Right Kidney is normal in size, shape & echotexture. Cortico-medullary differentiation is well maintained. No e/o calculus or hydronephrosis is seen on right side.

Left Kidney is normal in size, shape & echotexture. Cortico-medullary differentiation is well maintained. No e/o calculus or hydronephrosis is seen on left side.

Urinary bladder is well distended. The lumen is echofree with no e/o any calculus or mass lesion.

Prostate is normal in size and echo-texture with no e/o any focal lesion.

Mild free fluid is seen in peritoneal cavity.

No e/o obvious abdominal lymphadenopathy is seen.

No USG e/o appendicitis is seen.

IMPRESSION - Cholelithiasis with acute cholecystitis, mild ascites and grade 1 fatty liver.

Adv: clinical correlation.


Dr. Ritesh Garg
MBBS MD (Radiodiagnosis)
Consultant Radiologist

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Ref No	PDC/USG/OPE/UHD152441	Date	28-06-2024
Patient's Name	Mr. Gajraj	Age & Sex	60Y/M
Referred By	Dr. Navdeep Yadav	Test Done	USG-

ULTRASOUND REPORT OF WHOLE ABDOMEN

Liver is normal in size and shows grade I fatty infiltration. No obvious focal lesion is seen in liver parenchyma. Intra hepatic biliary channels are not dilated. Portal vein is normal. The CBD is not dilated.

Gall bladder is contracted (Review fasting after 3days fat free diet).

Pancreas is normal in size & echotexture with no e/o focal lesion.

Spleen is normal in size and echotexture. No focal lesion is seen.

Right Kidney is normal in size, shape & echotexture. Cortico-medullary differentiation is well maintained. No e/o calculus or hydronephrosis is seen on right side.

Left Kidney is normal in size, shape & echotexture. Cortico-medullary differentiation is well maintained. No e/o calculus or hydronephrosis is seen on left side.

Urinary bladder is well distended. The lumen is echofree with no e/o any calculus or mass lesion.

Prostate is normal in size and echo-texture with no e/o any focal lesion.

No e/o ascites or free fluid seen.

No e/o obvious abdominal lymphadenopathy is seen.

No USG e/o appendicitis is seen.

IMPRESSION : Grade I fatty liver.

Adv: clinical correlation.

Dr. Ritesh Garg
MBBS MD (Radiodiagnosis)
Consultant Radiologist



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Patient Name Mr. Gajraj UHID No. 152441 IPD No. 03224
Age / Sex 60 YH Bed No. DOA 2P - 6 DL, DOB 01-7-24

OPERATION THEATRE NOTES

Surgeon in-charge _____ Anesthetist _____
Assistant Surgeon _____ OT Technician _____
OT Staff _____ Type of Anaesthesia _____
Pre-Operative Diagnosis ACUTE CHOLELITIASIS
Post - Operative Diagnosis _____
Procedure Name LAP CHOLECYSTECTOMY
Operation Started at _____ Operation Finished at _____ Duration _____
Sponge Count _____ Whome _____

Operative Notes :

- OT Findings -
1. Liver surface appears nodular - ? Early cirrhotic changes
 2. GB contracted
 3. Calot's triangle anatomy (N)
 4. Cystic duct and artery clipped

Organ Explored GB
Specimen Sent for histopathology (if any) GB
Immediate post-operative condition _____

Surgeon's Signature _____
Date & Time _____ (am /