

UP



# 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

Consultant. Dr. NEERAJ

Date 26/7/24

Name Mrs. REKHA w/o AKSHAY  
Age 24 yrs Sex Female Address VPO Mas Chara Thajjan  
UID-154205, IPD-24-04195 Mobile Admission No: 9728080096  
Cat - A/B

Specimen Site  
~~Small intestine~~ HCU POSITIVE

### Brief Relevant Clinical History

① Mesenteric lymph nodes.



### Brief Operative Note

② Appendix.



### Any Relevant Special Investigation

## CYTOLOGY REQUISITION SLIP

### Cytology Papsmear

Clinical Finding and History.....LMP

Normal / Post Menoposal / Suspicious Lesion / Other

### Site of Sample

Cervix / Post fomix, Lat Vag wall / endo Cervix

Ref. Dr.....

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Ref No	PDC/USG/OPC/UHID154705	Date	26-07-2024
Patient's Name	Mrs. Rekha	Age & Sex	23 Y/F
Referred By	Emergency Consultant	Test Done	USG-

## ULTRASOUND REPORT OF WHOLE ABDOMEN

Liver is normal in size and echo-texture. 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. No e/o any obvious calculus or mass lesion is seen.

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.

Uterus is anteverted and normal in size. Myometrium shows normal echo-pattern. No focal space occupying lesion is seen. Endometrial echo is normal. Endometrial thickness is 6 mm.

Both ovaries are visualised and are normal. No adnexal mass is seen.

No free fluid is seen in pouch of Douglas.

No e/o ascites seen.

No USG e/o appendicitis is seen.

Multiple enlarged mesenteric lymphnodes are seen in paraumbilical and RIF regions, largest of size 12.4x7.9mm. No definite evidence of internal necrosis or calcification or matted lymphnodes seen.

**IMPRESSION:** Mesenteric lymphadenitis.

Adv: Follow up scan after a course of antibiotic and clinical correlation.

Dr. Ritesh Garg  
MBBS MD (Radiodiagnosis)  
Consultant Radiologist



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Patient Name : Mrs. REKHA UHD No. 154705 IPD No. 24-04/25  
Age / Sex 24y / F Bed No. ... DOA 26/7/24 DOB 26/7/24

## OPERATION THEATRE NOTES

Surgeon In-charge : DR. NEERAJ Anesthetist : DR. SACHIN AKORA  
Assistant Surgeon : ... OT Technician : Mr. YAGENDER  
OT Staff : Mr. SHRIKANT Type of Anaesthesia : G/A  
Pre-Operative Diagnosis : ACUTE APPENDICITIS  
Post - Operative Diagnosis : ...  
Procedure Name : LAP APPENDICECTOMY  
Operation Started at : ... Operation Finished at : ... Duration : ...  
Sponge Count : ... Whome : ...

### Operative Notes :

OT Findings - 1. Long and inflamed appendix  
retrocecal in position  
2. Multiple mesenteric lymph nodes  
3. Base of the appendix ligated  
with catgut endoloop

Organ Explored : ...  
Specimen Sent for histopathology (if any) : Appendix  
Immediate post-operative condition : ...

Surgeon's Signature : [Signature]  
Date & Time : ... (am / pm)



