



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

Melraj Kumar

HISTO PATHOLOGY REQUISITION SLIP

Date *13-8-21*

Name *Mrs Renukati* L^o *Jaganmal Singh*
 Age *61.4* Sex *F* Address *Pushpanjali*
 ID *152034* Admission No. *8168345558*
04801 Site *8383424834*
 Specimen



Brief Relevant Clinical History

ⓐ Coal Bladders

Brief Operative Note

Any Relevant Special Investigation

CYTOLOGY REQUISITION SLIP

Cytology Papsmear

Clinical Finding and History.....

Normal / Post Menoposal / Suspicious Lesion / Other

Site of Sample

Cervix / Post fornix, Lat Vag wall / endo Cervix

Ref. Dr.....



TEST REQUISITION FORM




Unique Identifier

Unique Identifier: _____

Test Name/Test Code

(Please refer to the Directory of Services)

1
2 **HPE Small**
3
4 
5
6
7
8
9

Patient Details

Ram Rati Last Name **152039**
GIF Gender Male Female
Contact No: _____
By _____ Contact No: _____
Screening - Date of Birth: [][] [][] [][][][]
kg Height: _____ ft _____ Inches, LMP _____ Last Ultrasound Report

Instructions to Laboratory/Center

Referring Information

Pushpanjali Rewar
Received: _____ Receipt No.: _____
Balance /Due: _____
via: Cash Cheque Credit ePlatform

Send Specimen Information


Container **Container**

Specimen Type Received (For MolQ use only)

<input type="checkbox"/> Serum	<input type="checkbox"/> Bone Marrow	<input type="checkbox"/> CSF
<input type="checkbox"/> Plasma EDTA/FLU/IT	<input type="checkbox"/> FN Aspirate	<input type="checkbox"/> Fluid
<input type="checkbox"/> SST	<input type="checkbox"/> Tissue Formalin	<input type="checkbox"/> BAL
<input type="checkbox"/> W Blood EDTA	<input type="checkbox"/> Paraffin Block	<input type="checkbox"/> Sputum
<input type="checkbox"/> W Blood Fluoride	<input type="checkbox"/> Smear	<input type="checkbox"/> Urine
<input type="checkbox"/> W Blood Heparin	<input type="checkbox"/> Slide (H&E)	<input type="checkbox"/> Stool
<input type="checkbox"/> W. Blood Sodium Citrate	<input type="checkbox"/> Pus	<input type="checkbox"/> Swab
<input type="checkbox"/> Semen	<input type="checkbox"/> Blood Culture Bottle	<input type="checkbox"/> Others

Sample Type/Source

Total No. of Vials/Containers

Specimen Collection Information

Temperature Ambient Refrigerated Frozen
Time: _____
No. of Vials/container: _____

Date: **13/8/24**
Fasting: Yes No
Collection by: _____
Urine Volume: _____

1	2
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Signature of Accessioning Officer(s)

I hereby authorize MolQ Laboratory to use and share with affiliates, my personal information including but not limited to my health/insurance information and 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 information in the future, I agree to the access of my medical records and specimen for diagnostic and research purpose. Sample used for research will be coded to maintain confidentiality and will be discarded as per the rules and regulation specified as applicable by law. In the event of any test/service related complaint/issue please contact MolQ Laboratory for resolution. In case of any dispute the jurisdiction will be Head Office, Gurgaon. P of the test requested.



Patient Name : Mrs. RAMRATI DEVI
Age Sex : 65 Y/Female
Patient ID : 012406060064
Barcode : 10114614
Ref. By :
SRF No. :

Registration No : 103767
Registered : 06/Jun/2024 04:48PM
Collection : 06/Jun/2024 04:48PM
Received :
Reported : 06/Jun/2024 05:06PM
Panel : Walk in Manesar

WHOLE ABDOMEN FEMALE

LIVER is enlarged in size (14.8 cm) and shows increased parenchymal echogenicity. No evidence of any focal lesion or IHBR dilation. Portal vein and CBD are normal in caliber at porta.

GALL BLADDER is well distended, and multiple 5-8 mm sized calculi are noted in the gall bladder lumen. Wall thickness is normal. No pericholecystic fluid is seen.

SPLEEN is normal in size (10.5 cm) and echotexture. No focal lesion is seen.

PANCREAS: Visualized pancreas is normal in size and echotexture. Peripancreatic fat planes are clear. MPD is not dilated.

Right Kidney: is normal in size and position and outline. Corticomedullary differentiation is maintained. There is no evidence of any focal lesion / calculus/ backpressure changes.
Right kidney measures 10.7 x 4.7 cm

Left Kidney: is normal in size and position and outline. Corticomedullary differentiation is maintained. There is no evidence of any focal lesion / calculus/ backpressure changes.
Left kidney measures 10.5 x 4.7 cm

Urinary Bladder is partially distended. (patient is unable to fill urinary bladder).

Uterus and ovaries are not clearly visualized.

No evidence of any adnexal lesion.
Cul de Sac is clear.

Excessive bowel gas shadows are noted in visualized bowel loops.

Impression:

- Cholelithiasis.
- Hepatomegaly with grade I fatty liver.
- Excessive bowel gas shadows in visualized bowel loops.

Advice: Clinical and LFT correlation.


Dr. Namit Singh
MD, MSB, Consultant Radiologist
HMC Regd No-011042





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Name : Ms. Renuka UHID No. : 152039 IPD No. : 04801
Sex : 6148 Bed No. : 00 D.O.A. : 12-8-24 D.O.S. : 13-8-24

OPERATION THEATRE NOTES

Surgeon In-charge : Anesthetist :
Assistant Surgeon : OT Technician :
Staff : Type of Anaesthesia :
Pre-Operative Diagnosis : Gangrenous cholecystitis with Mirizzi syndrome
Post-Operative Diagnosis :
Procedure Name : Lap cholecystectomy (subtotal) done
Operation Started at : Operation Finished at : Duration :
Sponge Count : Whome :

Operative Notes :

- OT Findings -
1. Dense omental and duodenal adhesions noted over GB and liver
 2. ~~GB~~ Gangrenous cholecystitis / Gall Bladder
 3. GB lumen filled with multiple stones and pus
 4. A large stone impacted at neck of GB and compressing (BI)
 5. Cystic duct stump sutured with PDS 2-0

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

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