



PUSHPANJALI HOSPITAL

(A Unit of Pushpanjali Medicare Pvt. Ltd.)

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

Phone No +91-1274-263300, 260021

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



Niranj

HISTO PATHOLOGY REQUISITION SLIP

Date *17-09-15*

Name *Mr Bal Ram Jatewal* Slo *Chatu Ram*

Age *66y* Sex *M* Address *70894 Bahar / 98988*

HID-*157770* IPD-*24-05877* Admission No *Uttam nagar Rewari*

Ref - *TPA*



Specimen Site

Gall Bladder

Relevant Clinical History

Operative Note

Relevant Special Investigation

CYTOLOGY REQUISITION SLIP

Cytology Papsmear

Clinical Finding and History.....LM

Normal / Post Menoposal / Suspicious Lesion / Other

Site of Sample

Cervix / Post fornix, Lat Vag wall / endo Cervix

Ref. Dr.....

TEST REQUISITION FORM



Unique Identifier

Test Name/Test Code

(Please refer to the Directory of Services)

1. _____
2. HPE Small



Patient Details

Name: Balaram Jatriwal Last Name: 157770

Age: 66/M Gender: Male Female

Address: _____ Contact No. _____

Mail ID: _____

Ordered By: _____ Contact No. _____

Maternal Screening -Date of Birth:-

Weight: _____ kg Height: _____ ft _____ Inches, LMP: _____ Last Ultrasound Report

Instructions to Laboratory

Billing Information

Name: Pushpanjali Rawar

ID: _____

Amount: _____

Amount Received: _____ Receipt No. _____

Amount Balance /Due: _____

Payment via: Cash Cheque Credit ePlatform



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/FL/CIT | <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 |

Other Sample Type/Source

Sample / Vial Type
Container

Received Specimen Information (For MolQ use only)

Temperature Ambient Refrigerated Frozen

Time: _____

ID: _____ No. of Vials/container: _____

1. _____
2. _____

Signature of Accessioning Officer(s)

Total No. of Vials/Container

Specimen Collection Info

Date: 12/19/24

Fasting: Yes No

Collection by: _____

Urine Volume: _____

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 necessary for 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 specimen for research purposes. I agree to the access of my medical records and specimen for diagnostic and research purposes. The 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/query please contact MolQ Laboratory for resolution. In case of any dispute the jurisdiction will be Head Office, Gurugram. MRP of the test requested.

NAME : BALRAM JOTRIWAL

E & SEX : 66M

F BY DR: C.H.REWARI

ULTRASOUND REPORT

7 September 2024

Liver : enlarge in size measure 16cm with diffuse fatty infiltration .I/H biliary canliculi and vascular system normal, no space occupying lesion seen in liver, portal vein normal in caliber .

GB : -mild distended , thickened wall with mild pericholecystic inflammation ,completely filled with thick echogenic biliary sludge , few shadowing small echogenic foci within sludge fundus region

CBD :- not dilated at porta, distal course not well seen ,no calculus seen in scanned part on USG

Pancreas : - obscured , visualized part grossly normal on USG , pancreatic duct not visible with probe tenderness in epigastrium

Spleen :- normal.

Rt. kidney – measure 100X57mm,normal in size and echotexture,pelvicalyceal system normal, no evidence of hydronephrosis or calculus seen.

Lt. kidney – measure 98X44mm,normal in size and echotexture , pelvicalyceal system normal, no evidence of hydronephrosis or calculus seen.

UB :- partially filled

Prostate – normal.

Seminal vesicle normal in size and echotexture

Gut loops –air filled hindering USG beam

No fluid in abdomen & pelvis at present .

Imp:-

Hepatomegaly with diffuse fatty infiltration [grade I /II]

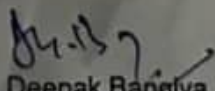
GB mild distended, thickened wall with mild pericholecystic inflammation ,completely filled with thick echogenic biliary sludge , few shadowing small echogenic foci within sludge fundus region described above – follow up scan or MRCP correlation for cholelithiasis

Probe tenderness in epigastrium –serum amylase / lipase correlation for pancreatitis

Gaseous abdomen

Adv. LFT, serum amylase / lipase and please correlate clinically

Dr. Raman Bhutani
M.D [Radio -Diagnosis]


Dr. Deepak Banglya
MD [Radio-Diagnosis]
HMC NO.6820

ALL FINDINGS SHOULD BE CORRELATED WITH CLINICAL & LAB. FINDINGS.
(NOT VALID FOR MEDICO-LEGAL USE)



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Name : Mr. BALKAM JOIRZWA UHID No. : 157770 IPD No. : 24-05877

Sex : Male Bed No. : 56y/14 D.O.A. : 9/9/24 D.O.S. : 11/9/24

OPERATION THEATRE NOTES

Surgeon In-charge : Dr. NEERAJ Anesthetist : Dr. MOHIT ARORA

Assistant Surgeon : Mr. SHRIKANT AM. SANJAY OT Technician : Mrs. SUKHVINDER

Staff : Mr. SHRIKANT AM. SANJAY Type of Anaesthesia : General Anaesthesia

Pre-Operative Diagnosis : GANGRENOUS CHOLECYSTITIS

Post-Operative Diagnosis : LAP CHOLECYSTECTOMY

Procedure Name : LAP CHOLECYSTECTOMY

Operation Started at : Operation Finished at : Duration :

Sponge Count : Whome :

Operative Notes :

- OT findings -
1. Dense omental and mesocolic adhesions noted over GB and liver
 2. GB overdistended, with gangrenous changes over the fundus and body region
 3. Multiple stones and sludge noted in GB lumen
 4. Calot's triangle frozen
 5. Cystic duct stump sutured with 1/0

Organ Explained :

Specimen Sent for histopathology (if any) :

Immediate post-operative condition : 6. 24 Fr drain placed in Morrison's pouch

Surgeon's Signature : [Signature]

Date & Time : (am / pm)