

9/9/20

do polyarthralgia
morning stiffness @
no w/o oral diclo / plate sensitivity

on ATT for 15/7/20

- 2 Dr. Kamide
autopsy

CRP/ESR/RF
ANA ↓

?Pneumococci
?Dry cough
lupus
?reaction
retinitis

Adv

Cont ATT - defaulted for 1 month
Refer to derma opp for ?
Leucocytoclastic
vasculitis

MRI knee - joint effusion

Calcocalcium 600
500

↓
KIA B27

ANA (4+)

T. Naproxen 500 mg 1 tab qd. X 7
T. Pan 40 1 tab qd.

ENA / Antinuclear

Calcium sachet - tolerance make

SIP

May 8/20

Pain relief by
Naproxen

Admission

ENA profile for Anti histone
but Naproxen

So

9/9/20

clo polyarthralgia
morning stiffness @
no w/o oral diclo / plate sensitivity

on ATT for 15/1/20

2 Inflammation
arthritis

CRP/ESR ↑
ANA ↓

? Infections
? Dry cough
lupus
? Reaction
arthritis

Adv
Cont ATT - defaulted for 1 month
Refer to Derm OPD for ? -
Leucocytoclastic
vasculitis

MRI knee - joint effusion

Calcocalcainin 500
T. Naproxen 500 mg / tabs qd. X 7
Pain 40 tabs qd.

↓
HUA B27

ANA (4+)

ENA / Antinuclear

Calcocalcainin - tolerance make
Address
mm.

SIP

X-ray ES X (2)

Pain relief by
Naproxen

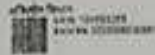
ENA profile for Antinuclear
but Naproxen

So



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बाहरी रोगी विभाग / Out Patient Department

अपघात से बचाव के लिए / SAFETY PRECAUTIONS TO BE OBSERVED IN HOSPITAL VISITORS



www.aims.ac.in

OPR-4

रोगी का नाम / Name
रोगी का विभाग / Dept.

0419

रोगी का OPD आगमन का समय / Time of OPD Arrival

रोगी का नाम / Name
रोगी का विभाग / Dept.
रोगी का पता / Address
रोगी का फोन नंबर / Phone No.



रोग/निदान / Disease/Diagnosis

Abdominal + Mechanical T.B

रोग/दिनांक / Date

उपचार / Treatment

E Polyarthralgia & polyarthritides

On - ATT - 1500/4/12 } 9 swelling / pain of knee

o/s :- o/c knee

K1

Tubercle

swelling

from o/s

No DRUG

Adv :- 1) Vitac acid

2) ? Paracetamol dose for moderate pain.

3) Kani & MKH flu

4) Medication given.



CLEAN AND GREEN AIIMS / स्वच्छ और हरी आर्य समाज, स्वास्थ्य से बंधन है
अंगदान जीवन का सच्चा उपहार / ORGAN DONATION - A GIFT OF LIFE
O.R.B.O., AIIMS, 26588360, 26593444, www.orbo.org Helpline - 1360 (24 hrs service)

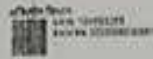




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 बाहरी रोगी विभाग / Out Patient Department



रोगी का नाम / Name
 रोग / Dept.



रोगी का नाम / Name

OPR-4

रोगी का नाम / Name
 रोग / Dept.
 रोगी का नाम / Name
 रोग / Dept.

रोगी का नाम / Name



रोग / Diagnosis

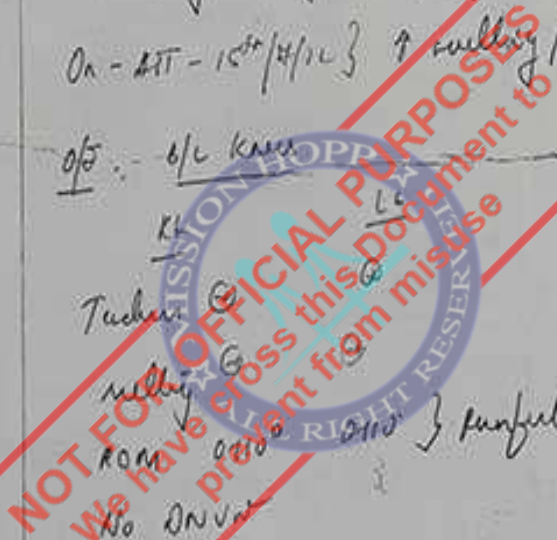
Abdominal + Mechanical T.B

दिनांक / Date

उपचार / Treatment

~~E Polyarthralgia E polyarthrit
 On - RTT - 15th/4/16 } ↑ swelling / pain of knee
 of - b/c knee
 KL
 Tachycardia
 swelling
 room 0010
 No DVT~~

Adv :
 1) Vnic acid
 2) Paracetamol for modern use.
 3) Kani E MK in flu
 4) Mechan open

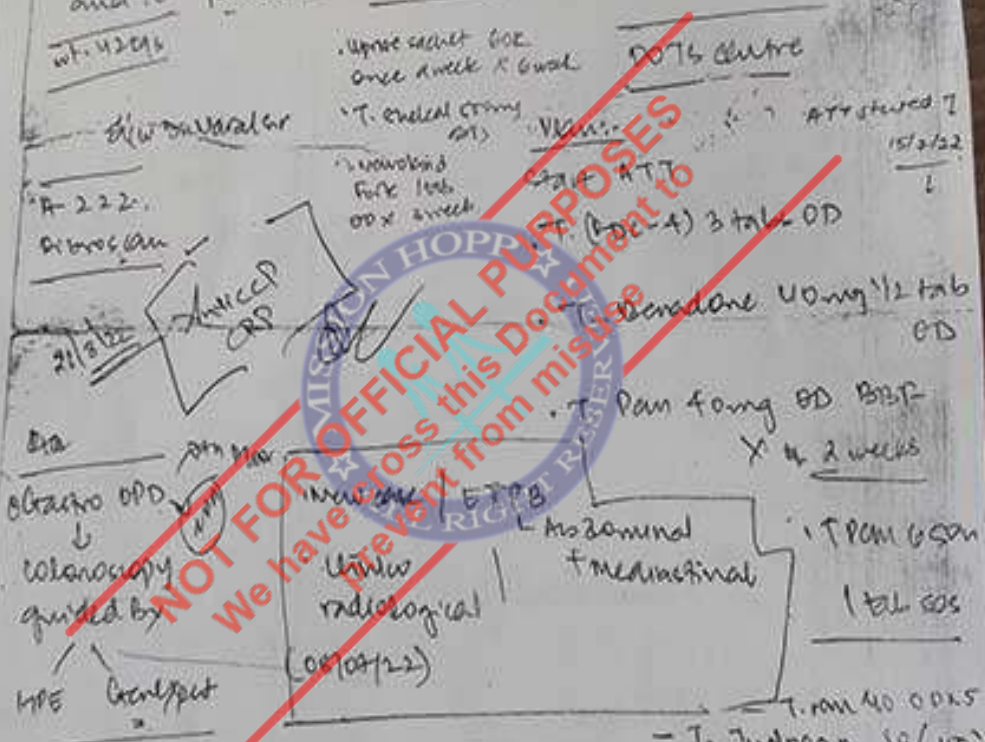


CLEAN AND GREEN AIIMS / स्वच्छ और हरी AIIMS, स्वस्थ से स्वस्थ बनो
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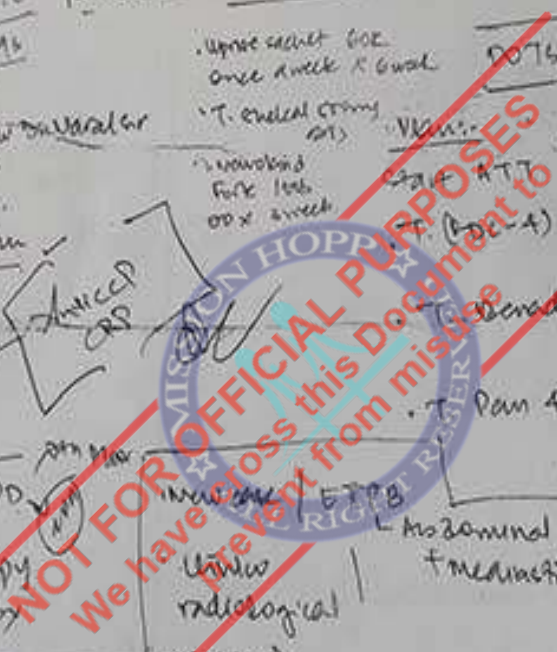
ECG's chest and abdomen (08/09/22)
 - Few conglomerate Lx necrotic-subcapsular region
 10x11mm.
 - Multiple subcap Lx. largest - 14x9mm. (necrotic)
 mesenteric
 mild circumferential thickening in terminal ileum
 and IC junction - S.G. case length.

wt. 42kg



MISSION HOPPSAN (31/9/22)
 Loc. - 4-222, 2nd Floor
 1st Floor RAK, OPD Block
 report 3am. Empty Stomach x LFT/KFT
 I.S.M. %T KPA
 JAF. 14% 2% DBIM
 OF 24% %S1?
 Dr. Naval K. Kram
 Prof-In-charge

1 week
 2 week
 4 week
 8 week
 LC1008222157 1046932
 ARACHANA



15/11/22
 Arundhan
 1/10



ओ मां ओ सं अस्पताल / A.I.I.M.S. HOSPITAL
 बहिरंग रोगी विभाग / Out Patient Department



OPR-6

Unit: A-208
 Patient Name: [Blank]
 Date: 15/11/22

Barcode 1: LC1387221804 184603265

Barcode 2: LC1387221828 184603265

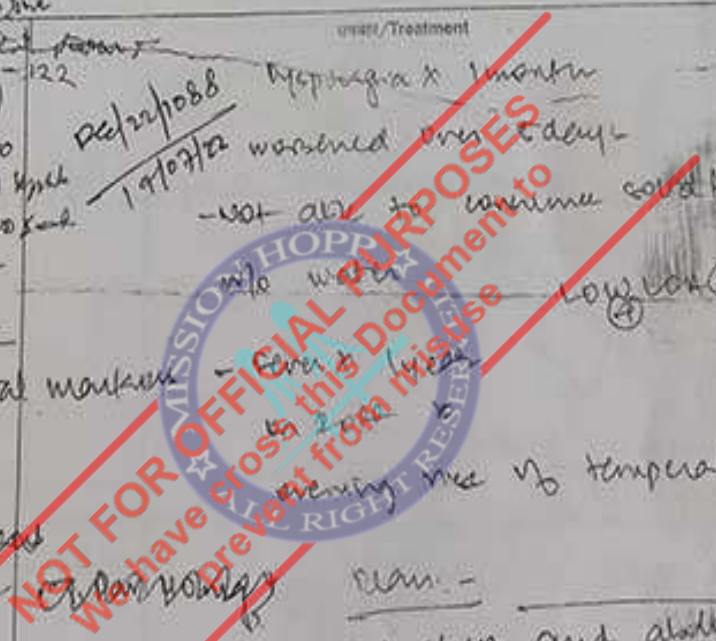
Diagnosis: Acute chole

Investigations: Hb 15.1
WBC 11.0
ESR 122
ALT 120
AST 110
ALP 250
Gamma-GT 150
CRP 10

Treatment: Hepatitis A 1 month
was given over 7 days
- not able to consume solid food
low LFT

Plan: Rest
check chest and abdomen
ultra + biopsy -> jaundice
2 tubes

Signature: [Signature]



RPB-278822421 184603265

Barcode 1: LC2788221501 184603265

Barcode 2: LC2788221501 184603265

AND GREEN AIMS / एच आर ग्री जीवन, अर्पण से काया कल्प
 न का बहुमूल्य उपहार / ORGAN DONATION - A GIFT OF LIFE
 26583360, 26593444, www.croo.org Helpline - 1060 (24 hrs service)



Adv

- Conservative management
breast lump & pain

- Volini gel t.i.d

- T. Dico 20mg 1 tab b.i.d

- Breast support

Bandy +
Syrp

- cont. T. Adrin 1 tab b.d

- T. α D₃ 0.25 mcg b.d

- T. Shelcal 1 tab b.d

- T. MG-12 1 tab c

- T. Multivitamin 16 b.d

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Inche

←
Sx
L. ex
AUS
Date

Infections disease
for ? starting AT
(1/4 raised ESR, Most
high fever)

Adv

- Conservative management breast lump & pain
- Volini gel t.i.d
- T. Diclo 20mg 1 tab b
- Breast support

Bandy +
Syrp

- Cont. T. Andrin 1 tab bd
- T. α D₃ 0.25 μ g b
- T. Shelcal 1 tab b
- Tab Mg-12 1 tab c
- Tab Multivitamin 1 b
- bd

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Incha
Syrp

Infections disease
for ? starting AT
(1/4 raised ESR, Mod
night fever)

19/04/2020
 ub/TTC/Plt
 6450/4.02
 0.2mg
 1hr
 1hr
 1hr



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 बहिरंग रोगी विभाग / Out Patient Department

अस्मिता के अंग पर धूम्रपान न करें / SMOKING IS PROHIBITED IN HOSPITAL PREMISES



OPR-6

Unit _____
 Dept./Dept. _____

MR/O.P.D. Regn. No. _____
 Home/Address _____

AIIMS
 All India Institute of Medical Sciences
 Connaught Place, New Delhi - 110029

Barcode and other identification numbers.

Spec./Diagnosis b/l breast nodularity & pain

Date/Date	History/Treatment
	<p>h/o low grade fever x every night x 1 month</p>
	<p> NOT FOR OFFICIAL PURPOSES We have closed this Document to prevent from misuse </p> <p> Mantoux - 20 mm ESR - 55 TLC - 6450 23/09/2019 EoM: 6 Hb - 4.02 l 25/04/2019 - 7.1 B12 - 8.5 RFT - @ STD/MS - 9.6/4.9 </p> <p> vsx, b/l breast - multiple fibroadenoma (BIRADS 2) </p>



CLEAN AND GREEN AIIMS / एक का नहीं करना, एकपता से क्या करण
 अंगदान-जीवन का बहुमूल्य उपहार / ORGAN DONATION - A GIFT OF LIFE
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19/04/2021
 ub/TTC/Plt
 6450/4.92
 0.2mg/L
 mm/hr
 ml/L

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 बहिरंग रोगी विभाग / Out Patient Department
 अस्पताल के अंदर धूम्रपान करना है / SMOKING IS PROHIBITED IN HOSPITAL PREMISES

OPR-6

Unit: _____
 Regn. No.: _____
 Address: _____

Barcode and patient ID information.

Prer./Diagnosis: b/l breast nodularity & pain

Date	Treatment
	no low grade fever x every night x 1 month

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WBC - 20 mm
 ESR - 55
 TLC - 6450
 33% polymorphs
 Plt - 4.02 l.
 25OH VIT D - 7.1
 B12 - 8.5
 RFT - @
 STD 7/16 - 9.6/4.9

vs, b/l breast - multiple fibroadenoma (BIRADS 2)



CLEAN AND GREEN AIIMS / एक का नहीं बनना, रक्कत से रास बन
 अंगदान जीवन का बहुमूल्य उपहार / ORGAN DONATION - A GIFT OF LIFE
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9/E: GC-fair
Pallor ⊕
PR - 88 bpm; CW/HR-NAD
P/A - soft
N = 9/T/R
E/E - NAD

19/04/2022
Hb/T/C | P/V
6.36 / 6.450 |
CRP = 0.2 mg/L
ESR = 55 mm/hr
U7 D = 7 mg/dL
A/G/L = 1.5 pmol

30/5/2022
Montoux Test = 20

1. Tab. Traxepan MF 500mg x TDS. during cycles.
2. BT/CT / TSH / Prothetin / PT / INR.
3. USG Abdomen and pelvis.
4. Review & reports
5. Tab. Azithro 1 tab OD x 1 month
6. Tab. Skeletal Tab 60 x 1 month

Jadhav
SA

PPS-158622284 104603265

P7-158622083 104603265

LH1686221463 104603265

LB158622101 104603265

08104940

Handwritten note: - with Caephero

102



अ० भा० आ० सं० अस्पताल / A.I.I.M.S. HOSPITAL बहिरंग रोगी विभाग / Out Patient Department

स्मॉकिंग से बचें / SMOKING IS PROHIBITED IN HOSPITAL PREMISES



रोगी/Unit
रोग/Dept.

वर्ग/N

आरोग्य प्रमाणिका
आरोग्य संकेतिका
आरोग्य संकेतिका

आरोग्य संकेतिका
आरोग्य संकेतिका
आरोग्य संकेतिका

आरोग्य संकेतिका
आरोग्य संकेतिका
आरोग्य संकेतिका

OPR-6

व्य./O.P.D. Regn. No.

व्य./Address

रोग/ Diagnosis

दिनांक/Date

10/6/2022
AOC = 1:30
AOC = 1:40

Heavy menstrual bleeding since menarche
itching PV ⊕, bearing micturite ⊕
No clots seen in PV
No clots seen in PV
No clots seen in PV

MIH:
Since Menarche → Regular cycles 3-4 days
4-5 pads/day fully soaked
Mild dysmenorrhea ⊕ | clots ⊕
(Pt. also reported cyclic in April)

OH: Unmarried

PH: k/c/o R/L Breast radiologically fibroadenoma.
Pt. took T. Norex 3 years stopped on Sept. 2021

FH: Maternal Molar = ? TB



CLEAN AND GREEN AIIMS / एका का धर्म संकल्प, संकल्प से बरत जग
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ECG chest and abdomen (08/09/22)

- Few conglomerate Lx nodules - subcarinal region
16x11mm

- Multiple subcarinal Lx largest - 14x9mm (necrotic)
mesenteric

mild circumferential thickening in terminal ileum
and IC junction - 5-6 cm length

wt. 42kg

Flowchart

upset stomach 6oz
once a week x 6 wks

T. endocort (10)

DOTS centre

working
for 10th
00x 6 wks

start ATT

Att started 7
15/2/22

A-222

Afibrosian



Di

Obstructive OPD
Colonoscopy
guided by
HPE

Colonoscopy
guided by
HPE

T. (Dc-4) 3 tabs OD

T. Donezone 100mg 1/2 tab
OD

T. Pan fong 80 BBP
x 2 weeks

linkw
radiological
(08/09/22)

T. Pan 650m
1 tab 805

T. Indocap SR (100)
60x5 days

PROF. DR. K. V. KRAM

4-222, 2nd Floor

Law RAK, OPD Block

report 3am. Empty Stomach

ISM 4.7 ± 1.1 KPA

2AF 14.2 ± 2.9 DBIM

OR 2M %SR %

Dr. Naval K. Kram

Prof. in-charge

1 week

2 week

4 week

8 week



15/11/20
 number
 no



अ० भा० आ० सं० अस्पताल / A.I.M.S. HOSPITAL
 बहिरंग रोगी विभाग / Out Patient Department



Reg No: 1249308
 Date of Birth: 20/01/1988
 Date of Admission: 15/11/2020
 A-208
 Name: [unclear]
 Address: [unclear]
 Phone: [unclear]

OPR-6

Book No. / O.P.C. LM1387221804 184693265
 LC1387221828 184693265
 BRACHING

Diagnosis

Iron chine
 Hb - 10.5
 Hct - 32
 WBC - 12200
 Platelets - 122000
 ESR - 15 mm/hr
 CRP - 12.2 mg/L
 Ferritin - 1000 ng/ml
 TIBC - 4500 µg/dl
 Transferrin saturation - 23%

Invest/Treatment

1 month
 19/10/2020 washed with soap
 - not able to consume solid food
 w/o water

Iron chine
 Iron

CBC
 LFT
 KFT
 Urinalysis
 Iron panel
 CRP
 TIBC
 Ferritin

Low iron
 Iron deficiency
 Iron deficiency anemia
 Iron deficiency anemia
 Iron deficiency anemia

Exam -
 chest clear and abdominal
 ultra + biopsy -> ? chronic
 ? tuberc

R/w reports

[Signature]

RPB-278822421 184693265

LC2788221581 184693265



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ALL INDIA INSTITUTE OF MEDICAL SCIENCES (AIIMS)
New Delhi

LABORATORY OBSERVATION REPORT

UHID: 104693265
Name: Miss. ARADHANA
Sex: Female
Department: Orthopedics
Unit In-charge: Dr. H.L. Nag
Sample Received Time:

Reg Date: 16/08/2019 03:57 PM
Ward Name:
Age: 20 years 1 month 21 days
Unit Name: Unit-II
Sample Collection Date: 12/09/2022 12:27 PM
Report Time: 12/09/2022 03:38 PM

Sample Details :HM-120922221-E (Blood) / HEMATOLOGY (OED)

Test Name	Result	Reference Range	Verification Comment
ESR	35 mm/hr	0 - 28 mm/hr (Modified Westergren's Method)	

Lab Technologist

Laboratory In-charge

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ALL INDIA INSTITUTE OF MEDICAL SCIENCES (AIIMS)
New Delhi ,

LABORATORY OBSERVATION REPORT

UHID: 104693265
Name: Miss. ARADHANA
Sex: Female
Department: Orthopedics
Unit In-charge: Dr. H L Nag
Sample Received Time: 13/09/2022 04:14 PM

Reg Date: 16/08/2019 00:57 PM
Ward Name :
Age: 20 years 1 month 21 days
Unit Name: Unit-II
Sample Collection Date: 12/09/2022 12:44 PM
Report Time: 15/09/2022 12:32 PM

Sample Details :CIL-120922134 (Blood) / clinical immunology

Test Name	Result	Reference Range	Special Remarks
ANA (Method: IIF) (Template : ANA (Method :: Indirect Immunofluorescent)) Result Of Investigation			
Titer	1:100		
Pattern	Homogeneous		
Intensity	4+		
Remark			
Verification Comment:			

Lab Technologist

Laboratory In-charge

H.O.D



HOUSE OF DIAGNOSTICS

Patient Name : ARADHANA
Age / Sex : 20 Y / F
Referred By : AIIMS HOSPITAL
Patient ID : UYSF.0000065638
Centre : YUSUF SARAI

Lab No. : YSP220713K235
Registration On : 06-07-2022
Collection Date :
Received Date :
Approved Date : 06/30/2022 06:11:19

CECT CHEST & WHOLE ABDOMEN

SECTIONS OF APPROPRIATE THICKNESS WERE DONE AT ADEQUATE INTERVALS IN STATE OF ART DETECTOR CT SCANNER SO AS TO COVER THE ENTIRE REGION FROM FROM BASE OF NECK TO THE PUBIC SYMPHYSIS AFTER THE ADMINISTRATION OF ORAL AND IV CONTRAST (NON IONIC). FEW PLAIN CUTS WERE ALSO OBTAINED THROUGH THE REGION OF INTEREST.

Clinical History: Dysphagia, fever on / off and abdomen pain.

CHEST:

There are seen few conglomerate necrotic lymph nodes in subcarinal region indenting the mild bronchovascular bundle, measuring ~ 16 x 11 mm.

Both lungs are normal in architecture and attenuation.

Trachea, major bronchial divisions and mediastinal great vessels appear unremarkable.

No evidence of any pleural effusion/ thickening seen.

Cardiac size is normal with apparently normal configuration. No obvious pericardial collection seen.

Chest wall structures appear unremarkable.

ABDOMEN:

Liver appears normal in size and attenuation with normal contrast enhancement. No focal mass lesion seen. Intra-hepatic biliary radicals are normal. Portal vein is normal.

Gall Bladder is well distended. No evidence of hyperdense calculi or focal wall thickening is seen. No obvious pericholecystic collection. (USG is modality of choice for evaluation of gallstones).

CBD is normal in course and calibre.

Spleen is normal in size and attenuation.

Pancreas is normal in size and attenuation.

Both Kidneys are normal in size and architecture. No focal parenchymal lesion seen. No definite evidence of calculus or hydronephrotic changes seen. Perinephric fat and fasciae appear clear.

Bilateral Supra Renal Glands appear unremarkable.

Multiple subcentimetric discrete non calcified mesenteric lymph nodes are seen. Largest lymph node is seen in right iliac fossa - measuring ~ 14 x 9 mm showing foci of hypo-enhancement indicating necrosis.

No free fluid is seen in the peritoneal cavity.

There is mild circumferential mural thickening in terminal ileum and IC junction for an approximate length of 5.6 cm. Approximate mural thickness is 3 to 5 mm.



9 089 089 039 houseofdiagnostics.com info@houseofdiagnostics.com

House Of Diagnostics Healthcare Pvt. Ltd., 50/3-6, Yusuf Sarai Market, Near Green Park Metro Stn.

H.O.D



HOUSE OF DIAGNOSTICS
Patient Name : ARADHANA
Age / Sex : 20 Y / F
Referred By : AIMS HOSPITAL
Patient ID : UYSF.0000068658
Centre : YUSUF SARA

Lab No. :
Registration On : 08-07-2022
Collection Date :
Received Date :
Approved Date : 08/07/2022 09:18:14

Rest of the visualized bowel loops are normal.
Urinary Bladder appears normal in distention and contour. No focal wall thickening/intraluminal pathology seen.
Uterus is normal in size, shape and attenuation. No collection seen in the endometrial canal. No myometrial mass is seen.
Both ovaries appear mildly bulky in size and show polycystic morphology.
No adnexal mass is seen on either side.
Thoracic esophagus appears grossly normal. Mild mural thickening is seen in pyloric antrum of stomach.

OPINION: CONTRAST CT SCAN CHEST AND ABDOMEN REVEALS:

- Few conglomerate necrotic lymph nodes in subcarinal region, measuring - 16 x 11 mm indenting the mild thoracic esophagus. Thoracic esophagus appears grossly normal.
- Multiple subcentimetric discrete non calcified mesenteric lymph nodes are seen. Largest lymph node is seen in right iliac fossa - measuring - 14 x 9 mm showing foci of hyper-enhancement indicating necrosis.
- Mild circumferential mural thickening in terminal ileum and IC junction for an approximate length of 5.6 cm. Approximate mural thickness is 3 to 5 mm. Colonoscopy is advised.
- Both ovaries appear mildly bulky in size and show polycystic morphology.
- Mild mural thickening is seen in pyloric antrum of stomach - ?Gastritis.


D/d - Infective (? Tubercular).

ADVISE: CLINICAL CORRELATION.

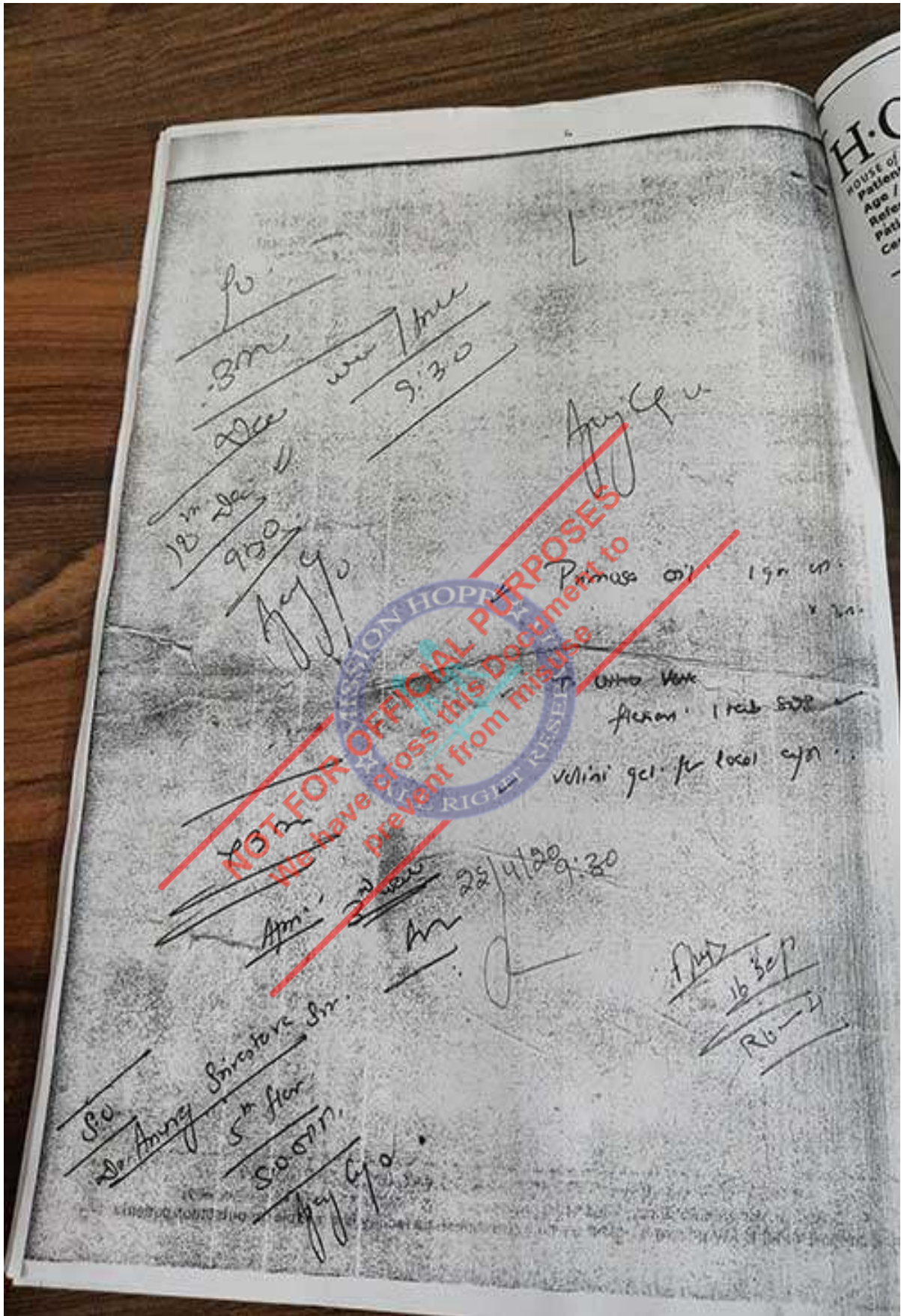
Investigations have their limitations. Solitary investigations never confirm the final diagnosis of disease. It only helps in diagnosing the disease in correlation to the clinical symptoms. Not meant for medico legal purposes.

*** End Of Report ***

In case of any discrepancy due to typing error, kindly get it rectified immediately. This is professional opinion, not a diagnosis.


Dr. Rajat Sachdeva
Consultant Radiologist
M.B.B.S., M.D. (Radio-Diagnosis)
DMC Reg. No.: 54223





fo
3m
w/w
9:30

18 Dec
9:00
Agy G

Agy G u

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prevent from misuse

Primase oil 1 gm
v. 2.1.
Otho Vok
Akon 1 tab 500
Vulini gel. for local eye

Ami
25/4/20
9:30

S.O.
Dr. Amey Sivastava Sr.
5th floor
S.O. 077
Agy G

16 Sep
R6-2

H.C
HOUSE of
Patent
Age /
Refer
Pati
Ca



डॉ. बी. आर. अम्बेडकर संस्थान रोटरी कैंसर अस्पताल
Dr. B.R. Ambedkar Institute Rotary Cancer Hospital
 अ.भा.आ.पी. अस्पताल / A.I.I.M.C. HOSPITAL

अस्पताल को: HICD No. 23023 DR. B.R.A. ICH, GANDHI, NEW DELHI
 Clinic: Breast Cancer Clinic (BCC)
 Dept: SURGICAL ONCOLOGY
 General
 Name: ARADHANA
 MRN: MURDRI
 DR. S.K. JHA
 Phone No. 701207928
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Reg. No. 1/882073
 Chair No. 1411/2019
 UFD-104692365
 No. BCC/14581
 BR/Date of Birth

Sex/Date
 Age/Dept
 Name
 Diagnosis

Sex/Date: T 6 AUG 2018
 Age/Dept: BBD

B/L USC

USC

NOT FOR OFFICIAL PURPOSES
 We have class this document to prevent from misuse

W/F
 Mangi

9:30

guyyaji o gnu!

अंगदान-जीवन का बहुमूल्य उपहार / ORGAN DONATION - A GIFT OF LIFE
 O.R.B.O., AIIMS, 26588360, 26593444, www.orbo.org Helpline - 1060 (24 hrs service)
 र से आने वाले रोगियों के लिए धरमशाला की सुविधा उपलब्ध है / Dharamshala facility is available for outstation patients

11/10/21
11:00 (40)
Dr. S. Singh

CDWCE Prof. Dr. S. Chandra

S. G. H. V.

Adm

- Stop all medication
- Apply postop support
- R/A - 3 months

18/4/22

Flu/clo. BL breast nodularity.

No h/o pain

H/o ⊕ breast nodules (now resolved).

Had received TNM specimenly.

O/E



H/o irregular menstrual cycles ⊕

clo fatigue

Adv - use R/L Breasts

- Obtain reference i/h/o irregular cycles.

- Flu E reports.

- CBC (Hb), Vit D, Vit B₁₂ levels.

Dr. VANOK RAJGOPAL
Dept. of ...
New Delhi



11/10/21
11:00 (40)
P.S. Singh

CDWCL Prof. Dr. S. Chandra

S. Gatt v

Adi

- Stop all medication
- Apply postop support
- R/A - 3 months

18/4/22

Flu/clo, R/L breast nodularity
 No h/o pain
 H/o ⊕ breast nodules (was resolved).
 Had received TN. Novon previously.

O/E



clo fatigue

Adv - use R/L Breasts

- OB/GYN reference i/h/o irregular cycles.
- Flu E negats.
- CBC (Hb), Vit D, Vit B12 levels.



DR. VANSHI RAIGOPAL
 Dept. of ...
 All India Institute of Medical Sciences
 New Delhi



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 आ० भा० आ० सं० अस्पताल / A.I.I.M.S. HOSPITAL
 बहिरंग रोगी विभाग / Out Patient Department
 SMOKING IS PROHIBITED IN HOSPITAL PREMISES

Slr R.no.5 DPR-6
 104693265

Mr. Name	Sex	Age
Aradhna	F	19



Refx/Date: P95.7
 P95.8

Refx/Date: No Covid Symptom
 Refx/Treatment: pt 40 - B/L Breast lump x 1-2 years

pt - had complain of was diagnosed as ~~AD~~ ~~USD~~ - pull on-off (non-lymphatic)

pt was started on Tamoxifen x 1 month stopped

Benign lesion fibroadenoma
 regular pain disappeared - occasional
 relief on B/L Breast

NGE - fibroadenoma + fibroadenoma tissue
 Pt made quite well
 T. Tamoxifen x 10mg QD

Review after 1 month - 3/5/2021
 - (radiology review 3/5/2021 for ? ASD/USD)



CLEAN AND GREEN AHMS / एका का रूई दान, स्वच्छता मे रक्षा कर
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 बहिरंग रोगी विभाग / Out Patient Department
 SMOKING IS PROHIBITED IN HOSPITAL PREMISES

OPR-6
 R.No. 5
 104693265

रोगी/Name	दिनांक/DOB/YS FIS/WID of	लिंग/ Sex	उम्र/ Age
Aradhna		F	19



रोगी/Date: 19/5/21
 रोग/Diagnosis: P95.7

रोगी/Date: No Covid Symptom
 रोग/Date: 40 - B/L Breast lump x 1-2 years

रोगी/Date: pt - had complaint of was diagnosed with ASD
 रोग/Date: pt was started on Tamoxifen x 1 month

रोगी/Date: Benign Duodenal fibroadenoma
 रोग/Date: stopped

रोगी/Date: NFE fibroadenoma + fibroadenoma tissue
 रोग/Date: Asymptomatic reappeared on occasional follow up on B/L Breast

रोगी/Date: Asymptomatic
 रोग/Date: Adjuvant - T. Tamoxifen x 10mg OD

रोगी/Date: Review after 1 month - 3/5/21
 रोग/Date: (adulatory review 3/5/21)

रोगी/Date: (for ? ASD/VSD)



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