

# जिला विकित्सालय, बलिया



डॉटा परिवार  
सुखी परिवार

रोगी का नाम ..... राधि के देवी .....

ग्राम ..... जिला .....

आयु ..... ४५ साली/पुरुष / ..... बच्चों की संख्या .....

दिनांक

लक्षण तथा उपचार २२-५०९

२२/१९/१८

३-P.F.

140 Red coloring

11/12/87 AD

~~100000~~

① ७६ ग्रैम

प्रतीक्षा

१७२ लि

② P.B.M

ग्रैम

③ R.F. एवं A.Z.N  
प्रतीक्षा

ग्रैम

\* यह पर्चा केवल एक दिन के लिए मान्य है।

\* विकित्सालय में रक्त कोष की सुविधा उपलब्ध है।

\* इड्स का कोई इलाज नहीं, बचाव के लिए कण्डोम का प्रयोग करें।

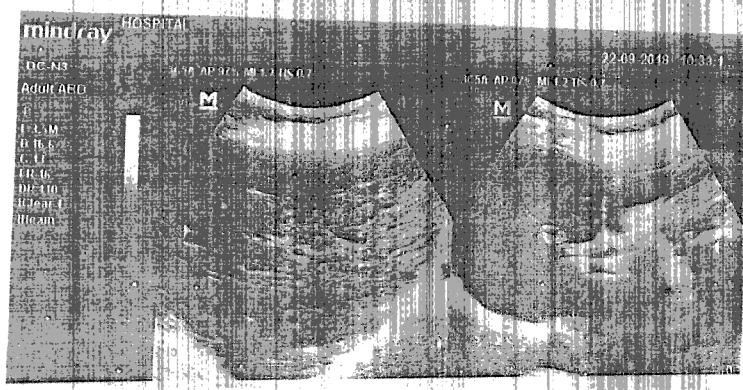
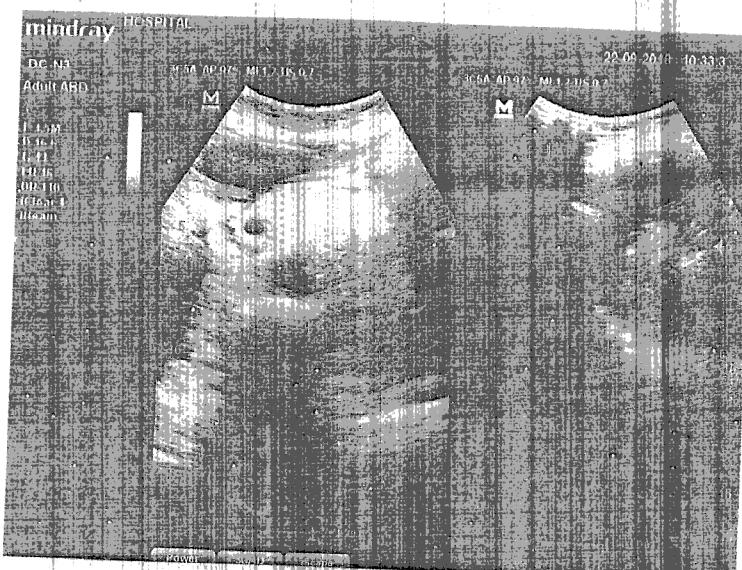
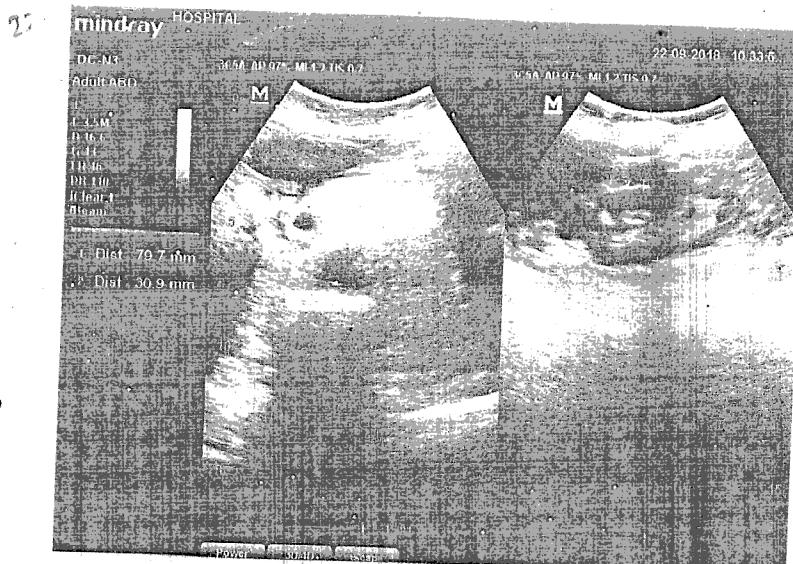
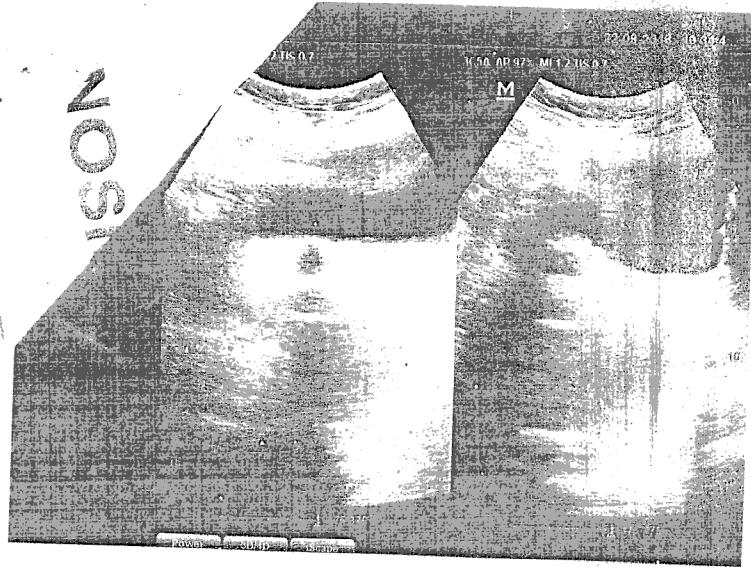
**DISTRICT HOSPITAL BALLIA (U.P.)**  
**Department of Radio Diagnosis**  
**ULTRASOUND REPORT (ABDOMEN)**

NAME Pratiksha Devi AGE 22 SEX Female  
DATE 22/9/18

Kindly correlate USG findings Clinically Not valid for Medico Legal purpose  
For e.g. Rec up history

- LIVER : Appears normal / enlarged in size with normal echotexture and echopattern. IHBR are not dilated. No focal parenchymal lesion seen.
- STOMACH : Well Distended with normal wall thickness. No calculus or mass lesion seen.
- DUODENUM : Appears normal in caliber. No evidence of calculus.
- SPLEEN : Appears normal / enlarged in size, echopattern and echotexture.
- PANCREAS : Appears normal in shape size and echopattern.
- RT KIDNEYS : Appears to be normal in size, shape, position & echopattern. CVD <sup>Relatively small size R kidney (79 x 30 mm)</sup> maintained. No evidence of Hydronephrosis or calculus.
- LT KIDNEYS : Appears to be normal in size, shape, position & echopattern. CMD <sup>Hyperechoic lesion L size 38 x 36 mm with central interval narrowing on duplex. Pcs mainly internal in nature on either side</sup> maintained. No evidence of Hydronephrosis or calculus.
- UTERUS : Is anteverted in position normal / enlarged in size Endometrium is non-nal. Myometrium is normal in echotexture.
- OVARIES : Are normal in size. No adnexal lesion seen.
- UB : Distended with urine. No calculus or debris seen. Wall thickness is normal.
- PROSTATE : Normal in size with normal shape & echopattern. Capsule intact.
- OTHERS : No Localized soft-tissue or fluid.
- IMPRESSION : No lymphadenopathy

RADIOLOGIST



T  
Male/Female

22-09-2010

For Legal purpose

showing normal echotexture and  
parenchymal lesion seen  
calculus or mass lesion seen  
calculus.  
item and echotexture.

VOL pattern.

(b) position & echopattern. CMD  
Rt kidney (7n x 32mm)  
rosis or calculus.

(d) position & echopattern. CMD  
size 36.736 mm with some  
phrosis or calculus. Pcs much  
larger in size Endometrium is nor  
normal by 8th sm  
ure.

sion seen.  
, or debris seen Wall thickness is nor  
pe & echopattern. Capsule intact  
tion or Aorta.

RADIC

SHRIMATI JYOTHIKA DEVI PANDE  
85 yrs



REPORT

Dr. Tapas Das

DR. TAPAS DAS

Age ~ 80 (ao)  
No carious Teeth  
i) Abnormalities → Cause - RCC (CT) / AIIMS - UROLOGY  
ii) No lesion in LS region?  
Dense calcification CT, xRay neck, MS.

X-ray L-S spine AP  
Lateral  
+ Toux Test

Spine - ~~no~~ AFB c/s.

Hepatic  
LIDS  
FBS/PPBS

S. Pandit

26.7.2016

① Rx

① NATRILIX SR - 1 O.D. 500 mg

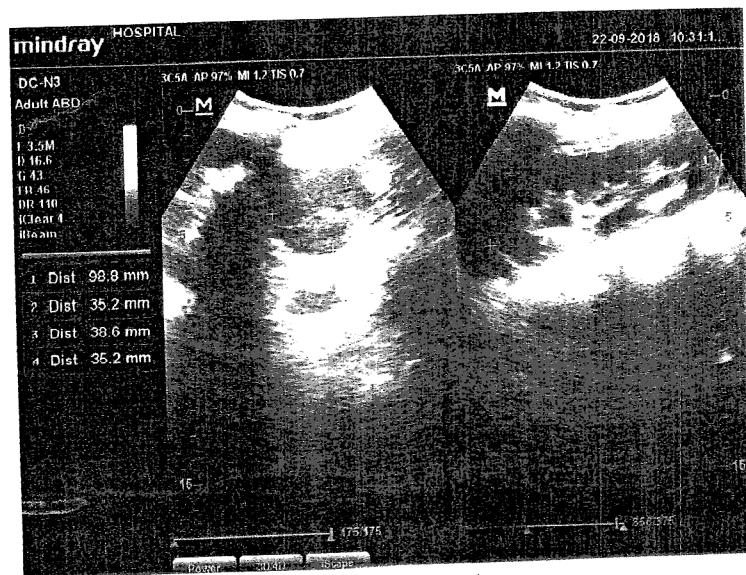
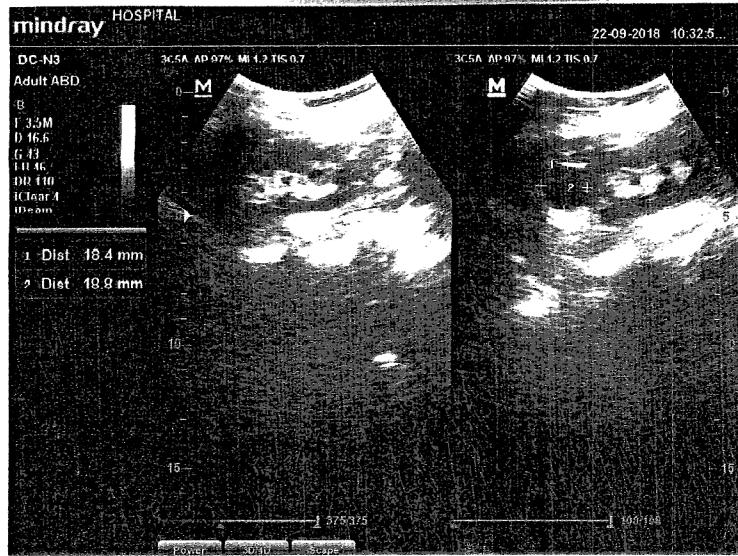
② BECOZYME C FORTE 250 mg

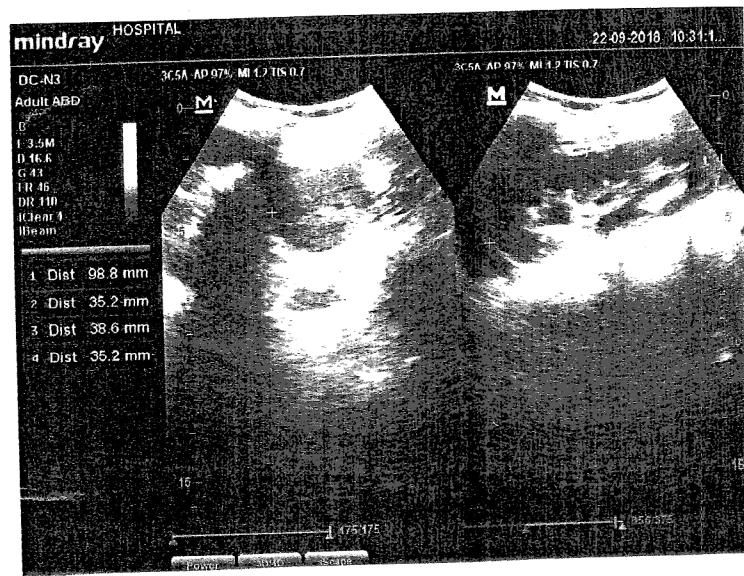
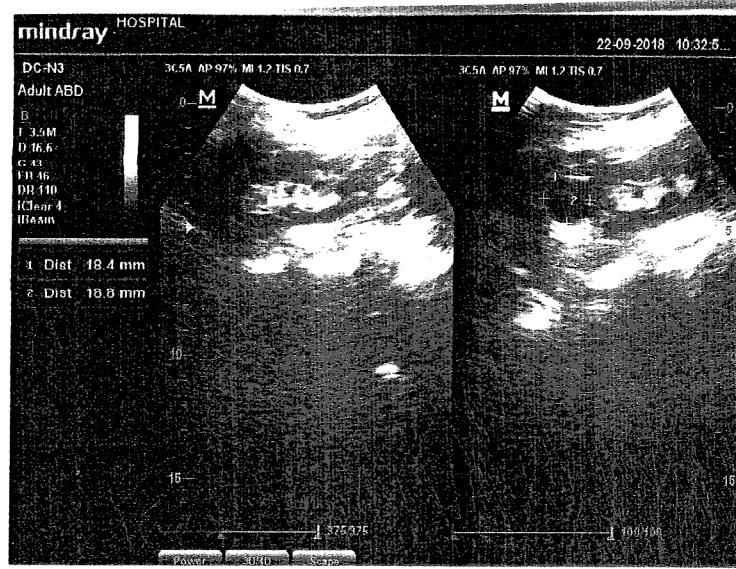
1 O.D.  
BYANT  
999/999 S. Pandit

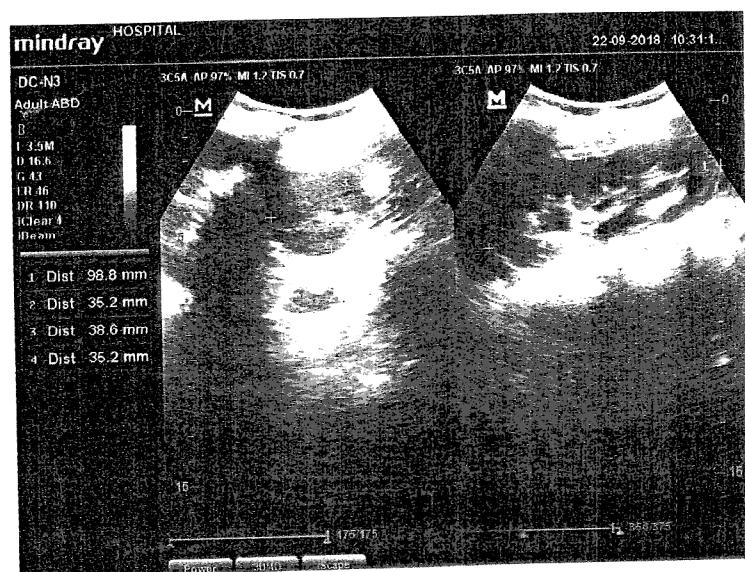
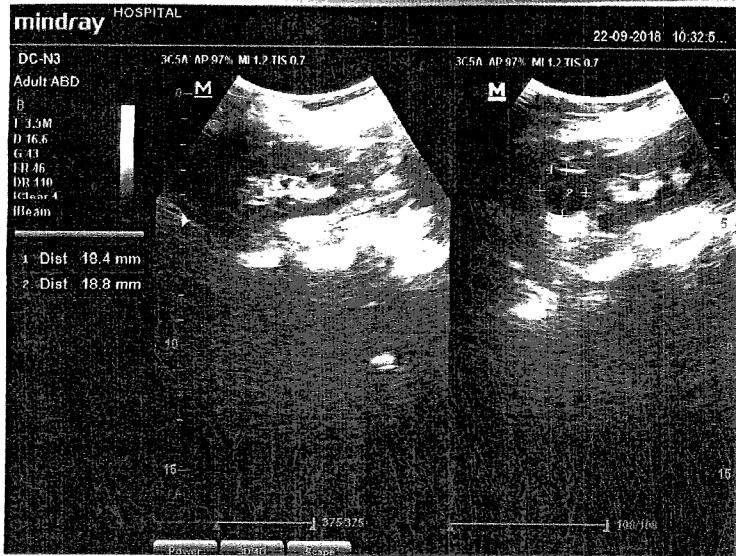
49-50, Community Centre, East of Kailash, New Delhi - 110065, (India)  
Phones : +91-11-26414156, 26414075, 26414157, 26225845, 26225849, 26428373, 26428374, 46600700, 46606600  
Fax : +91-11-26426372 E-mail : contact@nationalheartinstitute.com, contact@nhil.in Website : www.nationalheartinstitute.com  
24 HOURS HEART HELPLINES : +91-11-65900900, 65900000

Unit of All India Heart Foundation (WHO) Collaborative Centre in Preventive Cardiology

Ref. No. PMT/COM/01, Rev. No. 0.0, W.E.F. 11/05/11







Sed Rockville Park

er. Hepatorenal C<sup>o</sup> D<sup>o</sup> Detal  
STM

1. Capoccia-DR  
1890

2. Meacham.  
DR

3. Fiv 20<sup>th</sup>  
1887

4. Td. Endo. 70<sup>th</sup>  
1820

5. Td. Mental 50<sup>th</sup>  
1880

6. Tolosaym 20<sup>th</sup>  
1880

7. Putrotz-M  
87)

**DEVI ULTRASOUND & X-RAY****Dr. ANUJ KUMAR**M.B.B.S. M.D. (Radio Diagnosis)  
M.C.I. Reg. No.-36799

P-219, SANJAY NAGAR, GHAZIABAD

CLINIC : 0120-2788466, CELL. No. : 9971298776

Registered under PNDT ACT : registration No. GZB/2006/26

**Equipped with Color Doppler Ultrasound Scanner System**

Mrs. Radhika Devi

June 21, 2016

**ULTRASOUND WHOLE ABDOMEN**

No evidence of pleural fluid.

Liver is normal in size (98mm). Echopattern reveals no definite abnormality.  
No obvious focal lesion is evident. IHBRD is not evident.Gall Bladder is normal in size. Wall thickness - normal. Lumen appears normal.  
Portal vein caliber - normal.

CBD Caliber - within normal limits(5mm).

Pancreas is normal in size and echopattern.

Spleen is normal in size(74mm). Echopattern is normal.

Right Kidney size: 74x30mm , small in size. Renal outline is irregular. Cortical echogenicity is mildly increased. Corticomedullary differentiation is normal. Hydronephrosis is not evident. Definite renal calculus is not evident.

Left Kidney size: 97x35mm. normal in size. Cortical echogenicity is mildly increased. Corticomedullary differentiation is normal. Definite renal calculus is not evident.  
Minimal pelvicalyceal distension is seen.  
35x33mm Well defined hypoechoic nodule in middle part of left kidney.

Bilateral few simple renal cortical cysts are seen( at least one in right kidney and two in left kidney; largest cyst is 20mm approximately in size).

Paraaortic region reveals no obvious lymphadenopathy.  
Small bowel loops are not dilated.Urinary Bladder is well distended and normal in appearance.  
Uterus is atrophic

No free fluid in pouch of Douglas.

Right ovary/Adnexae reveal no obvious definite solid/cystic mass lesion.  
Left ovary/Adnexae reveal no obvious definite solid/cystic mass lesion.**OPINION:** small size right kidney with mildly increased cortical echo in both kidneys - suggestive of renal parenchymal disease . Bilateral renal cortical cysts and minimal left renal pelvicalyceal distension. Hypoechoic nodule in middle part of left kidney ? solid nodular mass ? cyst containing Echogenic fluid matter

Advised : CT scan abdomen, KFT

Please review findings in light of clinical background  
--- \*\*\* ---

Ultrasound images are not always true representation of scanned organ. Due to diagnostic limitation of Ultrasound Technique and also of the machine, findings should always be correlated clinically and with relevant investigations.

**NOT FOR MEDICO LEGAL PURPOSE**

SHRIMATI RADHIKAR DEVI PANDAY  
85 yrs

26-7-2016  


1. n (15/ao)  
non-tuberous teeth  
2. History - cause - RCC (CT) / AIIMS-UROLOGY  
infiltration in L-S Region?

Thoracic Lateralizing CT, x-ray neck, MS

X-ray - L-S spine AP  
Lateral

- IN TUC x Test

CINE - ~~not~~ AFB c/s.

Reflexes  
T.D.C. S. Pandey  
PSS/HBBS 26.7.2016

Rp

- (1) NATRILIX SR - 10.D. ~~500~~  
(2) BECOZYMEC FORTE 211H  
10.D.  
OTGANT  
SSS (age) S. Pandey -

49-50, Community Centre, East of Kailash, New Delhi - 110065, (India)  
Phones : +91-11-26414156, 26414075, 26414157, 26225845, 26225849, 26428373, 26428374, 46600700, 46606600  
Fax : +91-11-26428372 E-mail : contact@nationalheartinstitute.com, contact@nhiln Website : www.nationalheartinstitute.com  
24 HOURS HEART HELPLINES : +91-11-65900900, 65900000  
Unit of All India Heart Foundation (WHO) Collaborative Centre in Preventive Cardiology

FORM NO. FAH-COMM1, Rev. No. 0.0, W.E.F. 11/05/11

# जिला चिकित्सालय, बलिया



छोटा परिवार  
मुखी परिवार

रोगी का नाम ..... राधिका देवी  
ग्राम ..... जिला .....  
आयु ..... ५५ साली/पुरुष ..... बच्चों की संख्या .....

IA (U.P.)

10SIS

CMEN)

दिनांक

लक्षण तथा उपचार २२-४-०९

O-P.D.

22/9/18

SEX Male/Female

DATE 22/9/18

Metric Legal language

1 normal echotexture & no

paranchymal lesion seen

2 calculus or mass lesion seen

3 calculus

item and echotexture

item.

4 position & echopattern. CWL

5 no calcu-

lus or calculus

6 position & echopattern. CML

7 no calcu-

lus or calculus

8 in size Endometrium is nor mal

9 by the size

\* यह पचास केवल एक दिन के लिए मात्र है।

\* चिकित्सालय में रक्त कोष की सुविधा उपलब्ध है।

\* एड्स का कोई इलाज नहीं, बचाव के लिए कण्डोम का प्रयोग करें।

OVARIES : Are normal in size. No cal-

UB : Distended with urine. No calculus or debris seen. Wall thickness is nor mal

PROSTATE : Normal in size with normal shape & echopattern. Capsule intact.

OTHERS : No localised collection or debris

IMPRESSION : No lymphadenopathy

RADIOLOGIST



# Deewan Diagnostics

Enhancing Health



CERTIFICATE NO-M-0744

Add :- A-1 Patel Nagar -II, Ghaziabad - 201001, Ph.: 0120-2834144, 4132344 Web.:www.dewandiagnostics.com  
DEPT. OF RADIOLOGY & IMAGING INVESTIGATION REPORT

Patient Name : RADHIKA DEVI

Age : 86 Years

Ref By : Dr. ANIL KUMAR TYAGI

Sex : Female

Report Date : 27/06/2016

Req ID/No : 6071

## CT SCAN WHOLE ABDOMEN

10mm contiguous axial sections were acquired through upper abdomen after oral and intravenous contrast.

A well defined homogenously enhancing soft tissue mass is seen in anterior part of mid polar region of left kidney measuring 35 mm in size approx. It appears to be invading renal capsule, however appears to be limited to Gérota's fascia. No evidence of any invasion into adjacent bowel loops is seen. Left renal vein and IVC are normal in caliber and contrast enhancement without any thrombus within it. No ascitis or retroperitoneal lymphadenopathy is noted.

Liver is normal in size and contour and reveals homogenous contrast enhancement, no evidence of any focal mass lesion is seen. Intrahepatic biliary and venous radicals are normal.

Gall Bladder is normal in size and wall thickness. No evidence of any calculi or mass lesion is seen. Common Bile Duct is normal.

Right kidney is normal in size and outline showing prompt excretion and adequate concentration of contrast. No evidence of any hydronephrosis, calculi or mass lesion is seen. Simple cortical cyst are noted in both kidneys.

Pancreas is normal in size and outline, no focal mass or duct dilatation is seen. No definite peripancreatic collection is seen.

Spleen is normal in size and attenuation values. Visualized bowel loops appear normal.

Urinary Bladder is normal in size and wall thickness, no filling defect or focal mass lesion is seen.

Uterus is normal in size, outline and attenuation, no focal mass is seen in myometrium. Uterine cavity is empty.

Both ovaries are normal in size and attenuation. No cyst or mass lesion is seen in adnexa. Pouch of Douglos is clear.

**IMPRESSION : Left Renal Mass likely Renal Cell Carcinoma. Robson Stage 2.**

**ADVISE : FNAC / biopsy for confirmation.**

Dr. Rahul Kansal  
MBBS, MD  
Consultant Radiologist

Dr. Monika Gupta  
MBBS, DNB  
Consultant Radiologist

Dr. Anil Kumar Tyagi  
MBBS, MD  
Consultant Radiologist



अ० भा० आ० स० अस्पताल/A.I.I.M.S. HOSPITAL  
बहिरंग रोगी विभाग /Out Patient Department

अस्पताल के अन्दर धूम्रपान मता है।/SMOKING IS PROHIBITED IN HOSPITAL PREMISES

MON,WED,FRI

OPR-6

2016072811536

एकाक/Unit

2016/021/0008630

विभाग/Dept.

29 JULY  
(मूवरेसा विभाग) Urology / Urology

ब०रो०वि० पंजीकृत सं०/O.P.D. Regn. No.

UHID: 101993355

नाम/Name

मिता/उत्तर/पर्सी/उत्तरी  
F / S / W / D of

RADHIKA DEVI

W/O: Lt. D.  
Pandey

लिंग  
Sex

F

आयु  
Age

80 वर्ष/ Y

पता/Address

Judge Compund, J-67,  
Govind Puram, Ghaziabad,  
UTTAR PRADESH,  
INDIA M: 9968081831

निदान/Diagnosis

$\Delta$  RCC in left kidney.

दिनांक/Date

उपचार/Treatment

Registration Time : 01:30 PM 03:00 PM

Done By: RAK OPD/7201

Room No. 7 Urology, Fifth Floor(पांचवां मंज़िल)

01/07/2016 02:17:58 PM

\*TO TAKE APPOINTMENT NUMBER THROUGH PHONE, DIAL: 011-65900669

\*\*फोन के माध्यम से ऑपाइंटमेंट नंबर लेने के लिए, डियल: 011-65900669

\*\*\*Doctor may not be available, However you may be seen by some of the doctors in the department

\*\*\*आपके डॉक्टर के उपलब्ध न होने पर, आपको विभाग में अन्य किसी डॉक्टर द्वारा देखा जा सकता है।

Clo

→ pain in left abdomen x1year

grün hematuria x 2-4 times  
in urine

No dysuria.

C78C9

left kidney  
mass

g size

35 mm

Lt kidney small/pne

case 0/1

Advice

Plan

→ IVP

urinary  
nephrectomy

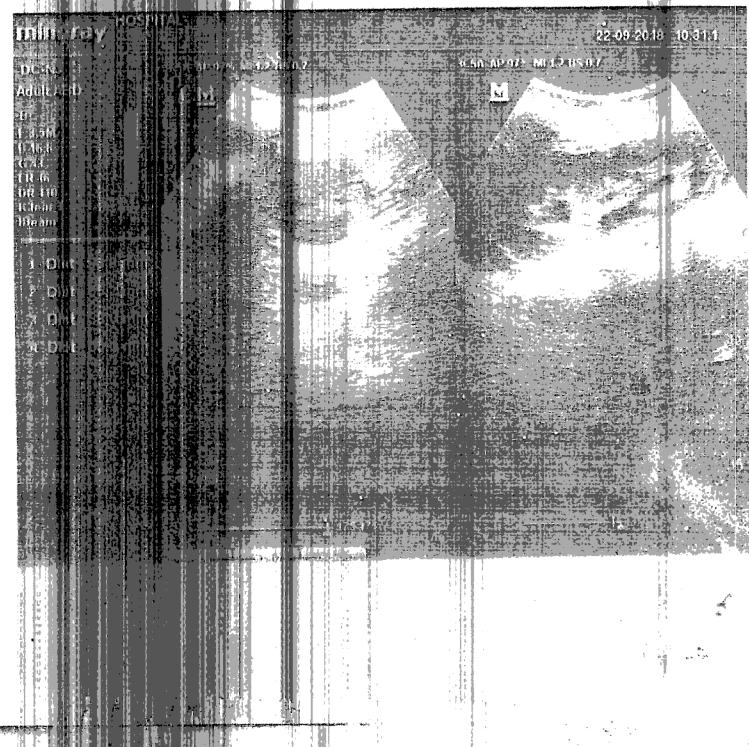
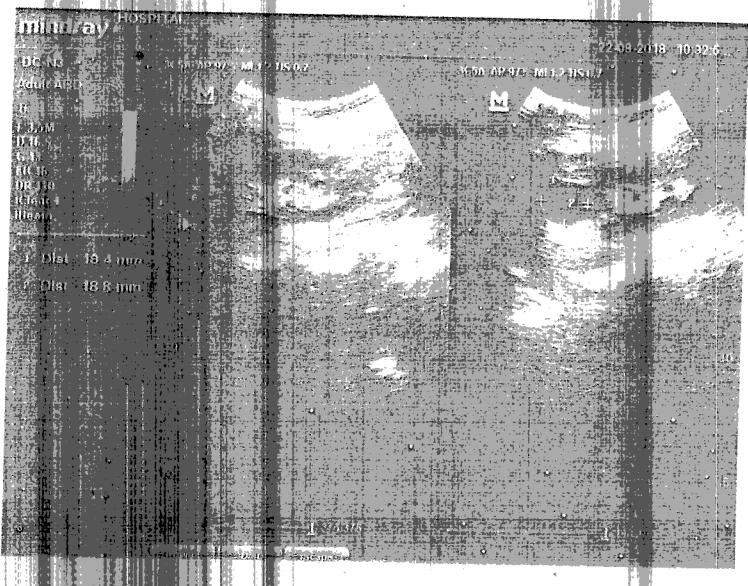
wNL

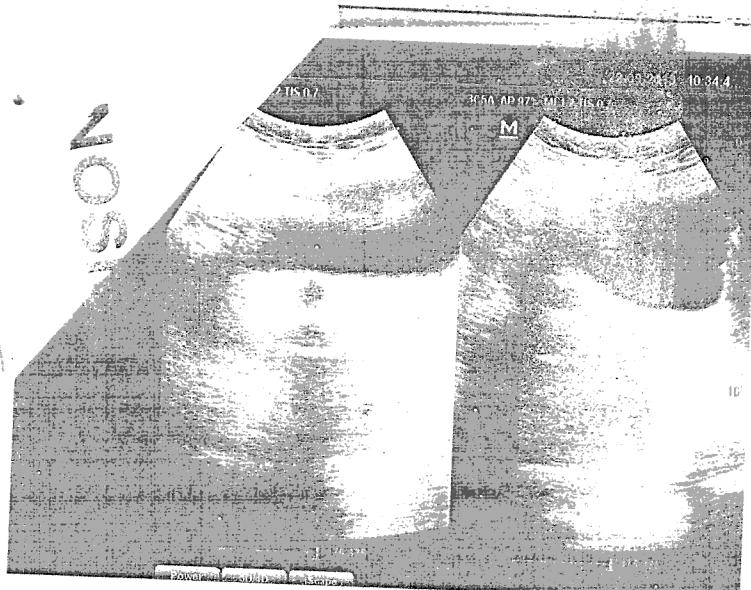
urine (-) wNL

→ PAC.

→ Review after PAC

Signature





T  
Male/Female

22-09-18

for Legal purpose

~~U~~ Normal echotexture and  
an anechoic lesion seen  
cervix or mass lesion seen  
calculus.

Normal echotexture.  
Atrophic endometrium.

Position & echopattern C.M.D.  
Retrograde (7mm x 3mm)  
No calcification or calculus.

Position & echopattern C.M.D.  
Endometrium 3.8mm thick  
No calcification or calculus.

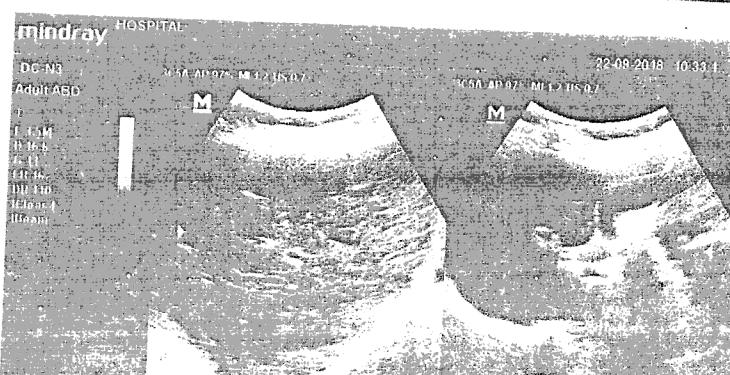
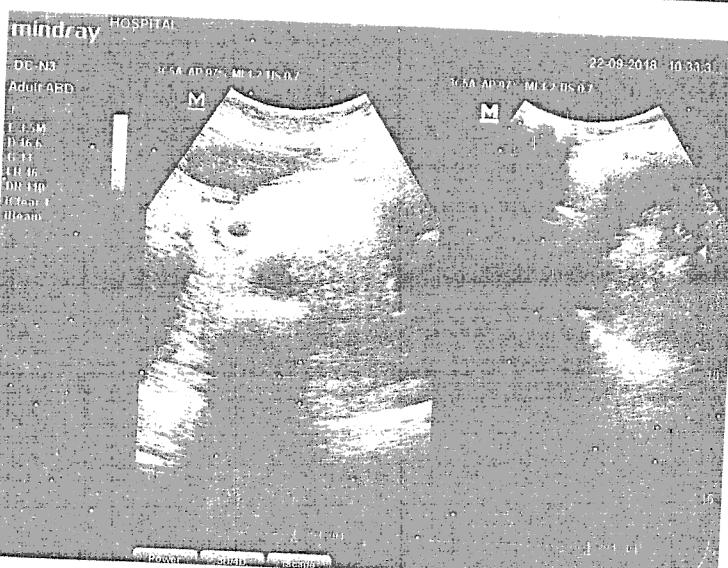
Position & echopattern C.M.D.  
Endometrium 3.8mm thick  
No calcification or calculus.  
Larger in size Endometrium is not  
concentric with the uterine lumen.

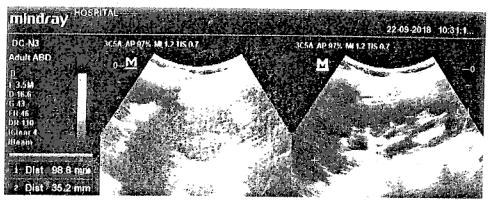
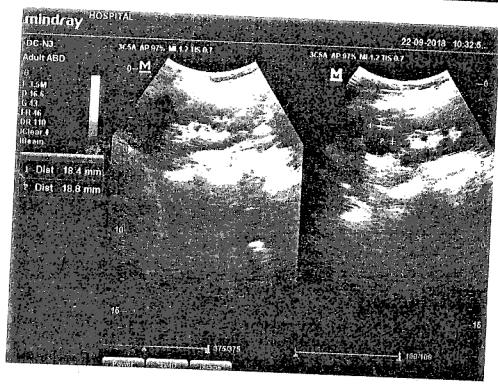
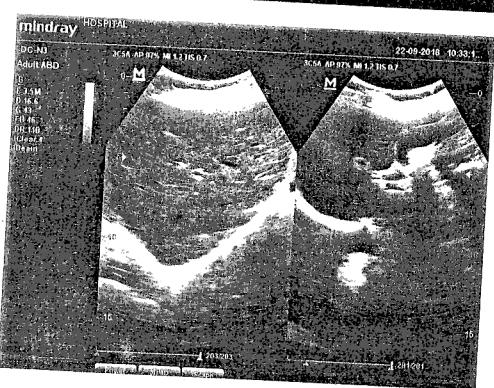
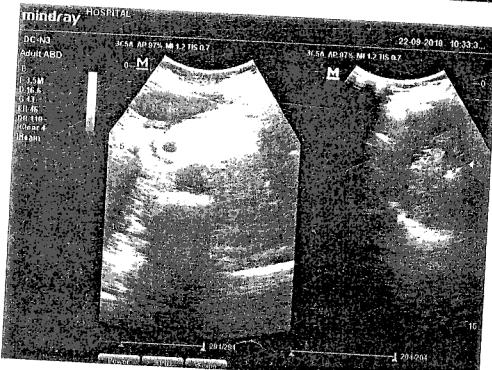
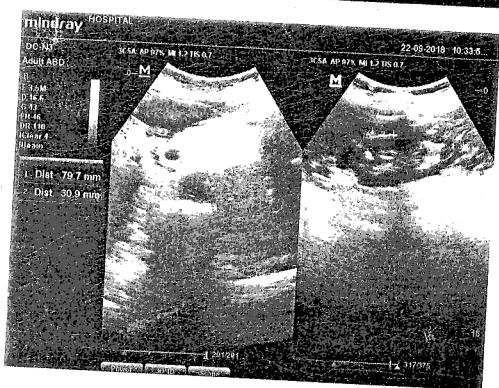
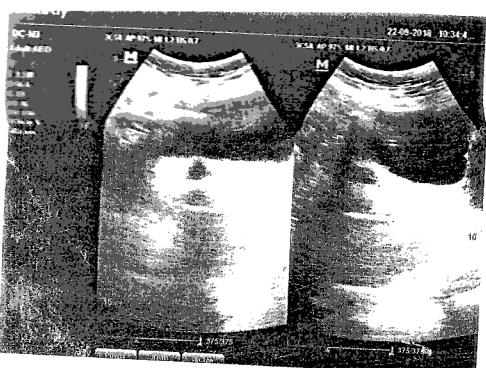
No debris seen.

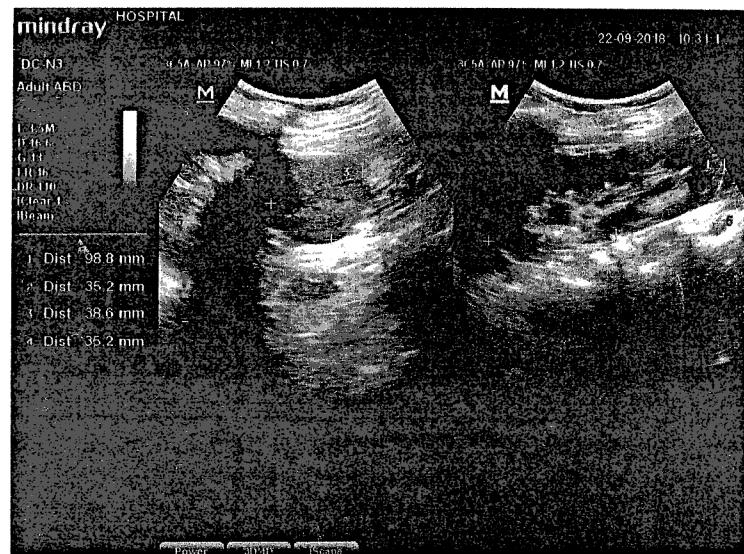
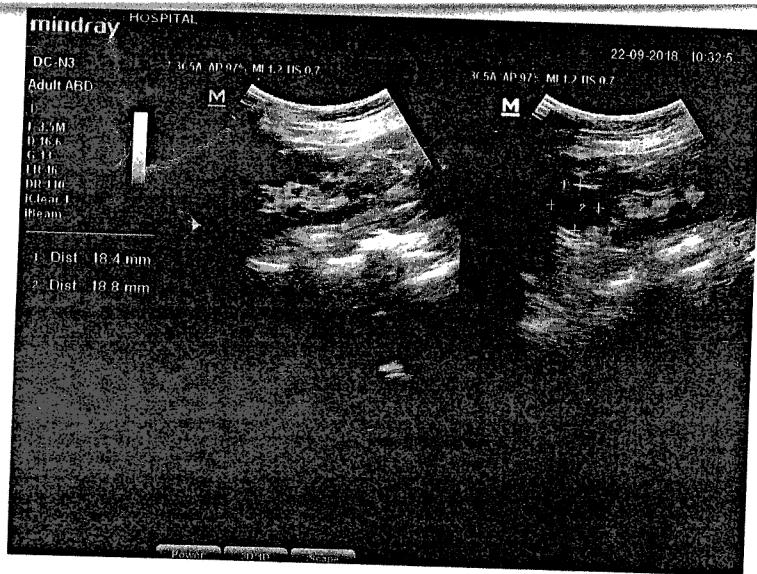
No debris seen. Wall thickness is not  
increased.

Position & echopattern. Capsule intact.  
No debris seen.

RADIC







**mindray** HOSPITAL

**DEVI ULTRASOUND & X-RAY****Dr. ANUJ KUMAR**M.B.B.S. M.D. (Radio Diagnosis)  
M.C.I. Reg. No.-36799

P-219, SANJAY NAGAR, GHAZIABAD

CLINIC : 0120-2788466, CELL. No. : 9971298776

Registered under PNDT ACT : registration No. GZB/2006/26

**Equipped with Color Doppler Ultrasound Scanner System**

Mrs. Radhika Devi

June 21, 2016

**ULTRASOUND WHOLE ABDOMEN**

No evidence of pleural fluid.

Liver is normal in size (98mm). Echopattern reveals no definite abnormality.  
No obvious focal lesion is evident. IHBRD is not evident.

Gall Bladder is normal in size. Wall thickness - normal. Lumen appears normal.

Portal vein caliber - normal.

CBD Caliber - within normal limits(5mm).

Pancreas is normal in size and echopattern.

Spleen is normal in size(74mm). Echopattern is normal.

Right Kidney size: 74x30mm , small in size. Renal outline is irregular. Cortical echogenicity is mildly increased. Corticomedullary differentiation is normal. Hydronephrosis is not evident. Definite renal calculus is not evident.

Left Kidney size: 97x35mm. normal in size. Cortical echogenicity is mildly increased. Corticomedullary differentiation is normal. Definite renal calculus is not evident.

Minimal pelvicalyceal distension is seen.

35x33mm Well defined hypoechoic nodule in middle part of left kidney.

Bilateral few simple renal cortical cysts are seen( at least one in right kidney and two in left kidney; largest cyst is 20mm approximately in size).

Para-aortic region reveals no obvious lymphadenopathy.

Small bowel loops are not dilated.

Urinary Bladder is well distended and normal in appearance.

Uterus is atrophic

No free fluid in pouch of Douglas.

Right ovary/Adnexae reveal no obvious definite solid/cystic mass lesion.

Left ovary/Adnexae reveal no obvious definite solid/cystic mass lesion.

OPINION: small size right kidney with mildly increased cortical echo in both kidneys - suggestive of renal parenchymal disease . Bilateral renal cortical cysts and minimal left renal pelvicalyceal distension. Hypoechoic nodule in middle part of left kidney ? solid nodular mass ? cyst containing Echogenic fluid matter

Advised : CT scan abdomen, KFT

Please review findings in light of clinical background

--- \*\*\* ---

SHRIMATI RADHIKA DEVI PANDAY  
85 yrs

26-7-2016



Dr. SHRIDHAR DWIVEDI  
MD, PhD, FRCP, FAMS, FIACS  
Senior Consultant Cardiologist  
NATIONAL HEART INSTITUTE  
DMC Registration-6858

H/N (holo)  
deciduous Teeth  
Painless Haematuria - Cause RCC (CT) / AIIMS-UROLOGY  
Depression in LS Region?  
Reversed Lab workup CT, xRay w/o, US.

FCW  
XRay LS Spine AP  
MANTOUX Test Lateral  
URINE - not AFB c/s.

Heatic  
LIPIDS  
FBG/PPBS

S. Dwivedi  
26.7.2016

R

- (1) NATRILIX SR - 10.D. 500E
- (2) BECOZYME C FORTE 811H  
OXYANT 500/500 S. Dwivedi -



इन्द्रप्रस्थ महिला महाविद्यालय  
(दिल्ली विश्वविद्यालय)  
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शांभवी पाण्डेय 2017-18

SHAMBHAVI PANDEY

B.A. (HONS.) POL. SC. III RD YEAR

Roll No. : 17/POL/091 Blood Grp : B+VE

Date of Admn : July 2017 DOB : 14.10.2000

Mother's Name : MRS. SHRUTIBHA PANDEY

Father's Name : RAM KISHOR PANDEY

Shambhavi

Student's Signature

Sign. of Principal

C.R.P.C. EM-2019 B-1

Rahul's  
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Student Identity Card



Name : Keerti Pandey

Reg. No. : RIAS/2018/JS/2547

Course : JUDICIAL SERVICES- EM-I

Admitted : 20 August 2018

Valid Upto : 15 September 2019

Rahul's  
Proprietor's Signature

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