



Scanned with
CamScanner

L40 - AMROHA CC - 2

Near Madhuram Banquet Hall, PakkaBagh,
 Bijnore Road, Amroha-9410060672
 U.P

Name	: Mrs. RANI GIRI	Collected	: 1/6/2021 12:43:00PM
Lab No.	: 307077165	Received	: 1/6/2021 1:14:31PM
Age: 55 Years	Gender: Female	Reported	: 2/6/2021 8:45:14AM
A/c Status : P	Ref By : Dr. CHITRAK BANSAL	Report Status	: Final

Test Name	Results	Units	Bio. Ref. Interval
ERYTHROCYTE SEDIMENTATION RATE (ESR) (Capillary photometry)	56	mm/hr	0 - 20

Note

1. C-Reactive Protein (CRP) is the recommended test in acute inflammatory conditions.
2. Test conducted on EDTA whole blood at 37°C.

C-REACTIVE PROTEIN; CRP, SERUM (Immunoturbidimetry)	33.40	mg/L	<6.00
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Comments

CRP is an acute phase reactant which is used in inflammatory disorders for monitoring course and effect of therapy. It is most useful as an indicator of activity in Rheumatoid arthritis, Rheumatic fever, tissue injury or necrosis and infections. As compared to ESR, CRP shows an earlier rise in inflammatory disorders which begins in 4-6 hrs, the intensity of the rise being higher than ESR and the recovery being earlier than ESR. Unlike ESR, CRP levels are not influenced by hematologic conditions like Anemia, Polycythemia etc.

FERRITIN, SERUM	79.40	ng/mL	10.00 - 291.00
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Note: Increase in serum ferritin due to inflammatory conditions (Acute phase response) can mask a diagnostically low result

Comments

Serum ferritin appears to be in equilibrium with tissue ferritin and is a good indicator of storage iron in normal subjects and in most disorders. In patients with some hepatocellular diseases, malignancies and inflammatory diseases, serum ferritin is a disproportionately high estimate of storage iron because serum ferritin is an acute phase reactant. In such disorders iron deficiency anemia may exist with a normal serum ferritin concentration. In the presence of inflammation, persons with low serum ferritin are likely to respond to iron therapy.

Increased Levels

- Iron overload - Hemochromatosis, Thalassemia & Sideroblastic anemia
- Malignant conditions - Acute myeloblastic & Lymphoblastic leukemia, Hodgkin's disease & Breast carcinoma
- Inflammatory diseases - Pulmonary infections, Osteomyelitis, Chronic UTI, Rheumatoid arthritis, SLE, burns
- Acute & Chronic hepatocellular disease

*Self Accepted
 Pooete
 01/10/2021*

L40 - AMROHA CC - 2
 Near Madhuram Banquet Hall, PakkaBagh,
 Bijnore Road, Amroha-9410060672
 U.P

Name	: Mrs. RANI GIRI	Collected	: 21/5/2021 2:25:00PM
Lab No.	: 307077524	Age: 55 Years	Gender: Female
A/c Status	: P	Ref By: SELF	Reported
			: 22/5/2021 9:17:54AM
			Report Status : Final

Test Name	Results	Units	Bio. Ref. Interval
D - DIMER, QUANTITATIVE @ (Immunoturbidimetry)	8.28	mg/L FEU	<0.50

Note

1. Degree of D-dimer increase does not definitely correlate with the clinical severity of associated disease state
2. Increased levels have a high probability of Venous thromboembolism (VTE) and require clinical correlation.
3. Lipemia falsely decreases D-dimer levels
4. Test conducted on Citrated plasma.

Comments

D-Dimer is one of the measurable byproducts of activation of the fibrinolytic system. It assesses fibrinolytic activation and intravascular thrombosis. D-dimer assays are characteristic for Disseminated Intravascular Coagulation (DIC) as this test demonstrates simultaneous presence of thrombin and plasmin formation. It can also be elevated in individuals with large vessel thrombosis, soft tissue hematomas, Pulmonary embolism, recent surgery, active or recent bleeding, pregnancy, liver disease, malignancy and hypercoagulable states. D-Dimer is of particular value in excluding the diagnosis of venous thromboembolism among patients at high risk.

Self Attended
Preeti
01/10/2021

TYPHI DOT/ SALMONELLA TYPHI IgM (ICT) Negative

Note

1. Low titre of IgM antibodies to S.typhi may persist for about 4 months post infection in endemic areas
2. All results to be clinically correlated

Comment

Accurate diagnosis of Typhoid fever at an early stage is not only important for etiological diagnosis, but also to identify and treat potential carriers and prevent acute typhoid fever outbreaks. The conventional Widal test detects antibodies to S.typhi in patient serum from the second week of onset of symptoms whereas early rising antibodies predominantly IgM in nature detected by this assay serve as a marker for recent infection.

Detectable IgM response

Onset of fever	Percent positive

LPL - AMROHA C.C.
 MOHHALLA, CHEWARA, BEHIND AMBEDEKAR
 PARK NEAR MASZID, (J.P. NAGAR)AMROHA,
 UTP 2
 PH : 9837266166

Name	: Mrs. RANI GIRI	Collected	: 27/5/2021 7:06:00PM
Lab No.	: 305050344	Age: 55 Years	Gender: Female
A/c Status	: P	Ref By : Dr. MAA PATH LAB	Report Status : Final
		Received	: 27/5/2021 7:20:35PM
		Reported	: 30/5/2021 3:06:24PM

Test Name	Results	Units	Bio. Ref. Interval
TB GOLD, INTERFERON GAMMA RELEASE ASSAY (IGRA), PLASMA @ (EIA)			
Gamma Interferon, Antigen tube	0.69	IU/mL	
Gamma Interferon, Nil tube	0.13	IU/mL	
Final Result	Positive		

Interpretation

NIL TUBE in IU/mL	ANTIGEN TUBE MINUS NIL TUBE in IU/mL	FINAL RESULT	INTERPRETATION
< = 8.00	<0.35	Negative	M. tuberculosis infection unlikely
	> = 0.35 & <25% of Nil tube	Negative	M. tuberculosis infection unlikely
	> = 0.35 & > = 25% of Nil tube	Positive	M. tuberculosis infection likely
>8.00	Any result	Indeterminate	This may be due to excessive levels of circulating gamma interferon or presence of heterophile antibodies

Note

1. This assay cannot differentiate between Latent infection and Active Tuberculosis.
2. Magnitude of measured Gamma Interferon cannot be correlated with stage or degree of infection, level of immune responsiveness or likelihood of progression to active disease.
3. False negative results maybe obtained if sample is taken prior to development of immune response. CDC recommends repeat test after 8 - 10 weeks in case of high suspicion of tuberculosis.
4. Immunocompromised patients can also show false negativity.
5. Negative result does not preclude the possibility of *Mycobacterium tuberculosis* infection / disease.

self tested
Preet
01/10/2021



JHA CC - 2

Madhuram Banquet Hall, Pakka Bagh,
 More Road, Amroha-9410060672

U.P

Name	: Mrs. RANI GIRI	Collected	: 21/5/2021 2:25:00PM
Lab No.	: 307077524	Received	: 21/5/2021 2:48:01PM
Age: 55 Years	Gender: Female	Reported	: 22/5/2021 9:17:54AM
A/c Status : P	Ref By : SELF	Report Status	: Final

Test Name	Results	Units	Bio. Ref. Interval
4-6 days	43.5		
6-9 days	92.9		
>9 days	99.5		

LDH;LACTATE DEHYDROGENASE, SERUM @ (IFCC) **301.00** U/L <247.00

Comments

Lactate dehydrogenase (LDH) is a nonspecific enzyme found in most organs. Highest concentrations are found in liver, heart, kidney and blood cells. LDH measurements are used in the diagnosis and treatments of liver diseases like Acute viral hepatitis, Cirrhosis & Metastatic carcinoma; Cardiac diseases like Myocardial infarction; Tumors of lungs / kidneys & Hematologic disorders like Megaloblastic anemia & Hemolytic anemia.

Akshita Agarwal

Dr. Akshita Agarwal
 MD, Pathology
 Consultant Pathologist

Ajay Gupta

Dr. Ajay Gupta
 MD, Pathology
 HOD Hematology &
 Immunohematology,
 NRL - Dr Lal PathLabs Ltd

Gurleen Oberoi

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 DNB,MNAMS
 Consultant & Technical Lead
 -Hematopathology
 NRL - Dr Lal PathLabs Ltd

Himangshu Mazumdar

Dr Himangshu Mazumdar
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 Senior Consultant - Clinical Chemistry
 & Biochemical Genetics
 NRL - Dr Lal PathLabs Ltd

Jatin

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 Consultant Pathologist
 Dr Lal PathLabs Ltd

Kamal Modi

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Sarita Kumari Lal

Dr.Sarita Kumari Lal
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Sunanda

Dr Sunanda
 MD, Pathology
 Consultant Pathologist
 Dr Lal PathLabs Ltd

*Self Affected
 Preeti
 01/10/2021*

-----End of report-----



KAILASH HOSPITALS LTD.

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 E-mail : kailash.gnoida@kailashhospital.com Web site : www.kailashhealthcare.com



O-0047

LAB REPORT

PHID : 1333689 No.: LAB/21G/17650 Date: 17/Jun/2021
 Name : Ms. RANI GIRI Request Number : 9799407 Status: Final
 Sex : F Age : 56 YEARS 2 MONTHS Registered : 17/Jun/2021 17:49:18
 Referred By : DR. RAHUL SHARMA Sample Collected : 17/Jun/2021 17:53:38
 Collected At : Lab Reported : 17/Jun/2021 19:55:28

Investigation	Result	Unit	Biological Ref Interval
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VITAMIN - D-25 -HYDROXY
(SERUM)

Vitamin D, 25-Hydroxy **9.05** nmol/L
(Electrochemiluminescence)

INTERPRETATION AS PER US NATIONAL OSTEOPOROSIS FOUNDATION

LEVEL	REFERENCE RANGE (IN nmol/L)	COMMENTS
Deficient	<25	High Risk for developing bone disease
Insufficient	25 - 74	Vitamin D concentration which normalizes Parathyroid hormone concentration.
Sufficient	75 - 250	Optimal concentration for maximal health benefit
Potential Intoxication	>250	high risk for toxic effects

Comment:
 The two most important forms of vitamin D are Vitamin D3 (cholecalciferol) and vitamin D2 (ergocalciferol). Vitamin D3 is synthesized in the skin by exposure to sunlight and vitamin D2 is taken up with food. In the human body vitamin D3 and D2 are transported to the liver where both are hydroxylated to 25 hydroxy vitamin D (25OHD). 25OHD is the metabolite that should be measured in blood to determine overall vitamin D status as this is the major storage form with circulating levels 1000 fold greater than 1,25(OH)₂ vitamin D and half life is 2-3 weeks. More than 95% of 25OHD, measurable in serum, is 25OH vitamin D3 (25OHD3) whereas 25OH vitamin D2 (25OHD2) reaches measurable level only in patients taking vitamin D2 supplements. Studies have shown less efficient conversion of vitamin D2 to 25OHD2. Furthermore, the half life of 25OHD2 is shorter and clinical potency is less than one third as compared to 25OHD3. Thus it may be reasonable to use vitamin D3 supplements. 25 hydroxy Vitamin D is increased in Vitamin D intoxication. It is decreased in following conditions: - Rickets, osteomalacia. - Secondary hyperparathyroidism. - Malabsorption of Vitamin D (eg. Severe liver disease, cholestasis). - Increased Vitamin D metabolism (eg. TB, sarcoidosis, primary hyperparathyroidism).

*Self Attended
 Preeti
 21/10/2021*

PANACEA HOSPITAL & RESEARCH CENTER

A 50 Bedded Multi Speciality Hospital

(Run By L.S.A Society), Next to LSA School, Amroha Joya Road, Amroha - 244221

Contacts : 70888 08000, 7617564028, www.panaceeamroha.com, phrcamro@gmail.com



DEPARTMENT OF GENERAL MEDICINE

CONSULTANT : DR. CHITRAK BANSAL, CARDIOLOGY AND GENERAL MEDICINE Mobile : 7088808000

UHID No : 12312797
 Patient Name : Mrs. RANI GIRI
 Age : 55 Years
 Address : COLLECTRATE AMROHA

Date : 2021-05-24 (21/12/21)
 OPD No : 5252113
 Sex : Female
 Fees : unpaid

Chief Complaints :

Co fever on 2 aft.
 Co Dry cough
 Co Weakness.

Examination :

Systemic Examination :

History : Co Mild Respiratory Distress.

No H/O. HTN/Dm/Thyroid Disturbance
 No Co: Bowel disturbance.

P.D.: Patch infiltrate of lungs Post Covid

Pulse Rate : 130 b/min.
 BP : 110/70 mm Hg
 RR/SPO2 : 98%.
 Temperature : 96.8°F
 Weight/Height : 38 kg.
 Drug Allergy if Any :

- Rx.
- Tab Broclear
 - Tab T3LC
 - Tab. Minda m/b 100
 - Tab. Leukotas ND ns
 - Tab. Vitron Q10
 - Cap. Esofex DSR
 - Tab. Keppad 200
 - In: LMWX 40mg SLIC - BD.
 - Tab. Coeliteng
 - Tab. Avas 10
 - Tab. Livchil forte
 - Tab. Zerodol SP

see After 10 days
10/10/2021

Investigation Required:

2/5/24 - Outride. D.Dim - 8.28
 Typhi test - Negative.
 LDH :- 301
 NB :- 11.00
 PC = 356000
 B. Glucos :- 107
 CRP :- 45.97.
 Follow up :

Dietary Advice :

- MDL Quickhale FB 200 2 P.M.
- Respiratory 10-15 ml.
- 10-15 ml.

Doctor Signature & Seal

Chitrak
Dr. Chitrak Bansal
 MBBS, MD, M.Med FM, FCC
 Reg. No: MCI 18-29424

ओ.पी.डी. - सोमवार से शनिवार (10 बजे से सायं 4 बजे तक) पर्चा केवल 5 दिन के लिये वैध NOT FOR MEDICO - LEGAL PURPOSE
 सारी सावधानी के बाद कोई भी दवा दुष्प्रभाव या रिएक्शन दिखा सकती है ऐसा होने पर तुरंत अस्पताल से संपर्क करें, पर इसके लिए अस्पताल या डॉक्टर जिम्मेदार नहीं होगा संपर्क करें-7617409000

Dr. VAIBHAV GUPTA

डाक्टर विभव गुप्ता

M.B.B.S., M.D. T.B. & Chest (KGMC LUCKNOW)

Consultant Chest Physician

Ex. Senior Resident-Critical Care PGI (Lucknow)

Interventional Bronchoscopist Worcester Institute (London)



डा० वैभव गुप्ता

डाक्टर विभव गुप्ता

एम.बी.बी.एस., एम.डी. (टी.बी. एवं चैस्ट)

के.जी.एम.सी. (लखनऊ)

कन्सल्टेंट चैस्ट फिजिशियन

पूर्व सीनियर रेजिडेंट- क्रिटिकल केयर पी.जी.आई. (लखनऊ)

इन्टरनेशनल ब्रांकोस्कोपिस्ट, वरसेस्टर इन्सटीट्यूट (लन्दन)

(छाती, दमा, टी.बी. व सांस रोग विशेषज्ञ)

पता :- A-8, गाँधी नगर, निकट रोडवेज बस स्टैण्ड, रामपुर रोड, मुरादाबाद मो० : 9452017944, 9219541805

Name Rani Age/Sex 55y/F Address Amroha Date _____

Breastlens
collar A 6 months
Acycx 1m

Valid Upto

on post covid med

No H/O DM/HTN/A??

RTPCR-Neg

9/E

Adv

~~Adv~~
spulm AFB
Temp chancy

for seroflo syndrome
Tab Aveloc 150
Tab Azce 500
Tab Nintanib
Tab Revamact

Self Attested
Pract
01/10/2024

शनिवार केवल इमरजेन्सी

सुविधायः

- थोरेकोस्कोपी • ब्रांकोस्कोपी • ई.सी.जी.
- नेब्युलाइजर व आक्सीजन थेरेपी
- आधुनिकतम स्लीप लैब (कम्प्यूटर मशीनों द्वारा नींद में सर्जरी की जाँच)
- पी.एफ.टी. (कम्प्यूटर मशीन द्वारा सांस व फेफड़ों की कमजोरी की जाँच)

मैडिकोलीगल कार्यों के लिये मान्य नहीं

पर्चा 7 दिन के लिये मान्य

फोन : 0591-2497944



OPD CARD

Pt Id. : 43205	Reg. date : 17/06/2021
Name : Mrs. RANI GIRI	Consultant : Dr. RAHUL SHARMA
Age/Sex : 55 F	Specialisation : PULMONARY MED
Tel No. : 9810855403	Qualification : MBBS, MD, DNB, DM
Company : CGHS CASH	Room No :

Timings	MON	TUE	WED	THU	FRI	SAT
Morning	10:00- 16:00	10:00- 16:00	10:00- 16:00	10:00- 16:00	10:00- 16:00	10:00- 16:00
Evening						

Temp 98.1 °F Pulse 114 Per minute B.P. 110/60 mmhg SpO2 99%

Height 1.7 cm Weight 38.5 Kg

Allergies XI Yes

History: Fever x 4 2 weeks
Cough during
Appetite low
NSD wt loss
+Hb = 10.9
+HbA1c = 5.8
+NTT = 133

*See Attached
Presc
01/10/2021*

liver report - No Rusts

CLINICAL ASSESSMENT:

Plan for FIBROSIS - Deftan &

Plan to start Empirical

ATT use - Med nap
Udal Pilsury
KAP

Basalft - mme

PROVISIONAL DIAGNOSIS:

Plan

B.S. Vit D; S. Galactomannan
ESR = 76. S. IgG for Aspergillus

LFT - approx 3 day of shut Tlb

- T. SOM-DIR 1BD
↓ Lomei (BM)
- T. Akinet-4 2 tabs (BM)
OD
- T. Benadone 4mg 1/2 OD
- T. COZIVIT 1 OD
- T. Emset 4mg SOS
'MD'
- T. Shalcal 10D
'HD'
- T. Udeliv 150mg BID

Unit of AKS Medical & Research Centre Pvt. Ltd.

Yatharth Super Speciality Hospital
Sector 01, Greater Noida West, Uttar Pradesh - 201306, India
Info@yatharthhospitals.com www.yatharthhospital.com

Diet as advised

Dr. Rahul Sharma
MD, DNB (Medicine), FCCP (USA)
DM Pulmonary & Critical Care (Gold Medalist)
FNCCP, FISDA, DMC - 05441
Senior Consultant & Interventional Pulmonologist
Helpline Numbers
8800110084, 8800110086



2

OPD CARD

Pt Id. : 43205
 Name : Mrs. RANI GIRI
 Age/Sex : 56 F
 Tel No. : 9810855403
 Company : CGHS CASH
 Reg. date : 26/06/2021
 Consultant : Dr. RAHUL SHARMA
 Specialisation : PULMONARY MED
 Qualification : MBBS, MD, DNB, DM
 Room No :

Timings	MON	TUE	WED	THU	FRI	SAT
Morning	10:00- 16:00	10:00- 16:00	10:00- 16:00	10:00- 16:00	10:00- 16:00	10:00- 16:00
Evening						

Temp _____ °F Pulse _____ Per minute B.P. _____ mmhg

Height _____ cm Weight 38.5 Kg Allergies _____

History:

Symp better

Mulung TB & CAP
 FOR 6 months
 Hypertension

Cap. SOM-DLR 1 BD
 T. Akuril 4 tabs ED 2mg
 T. Benadon 40/2 op
 Cap. Cozivit 100
 T. Suralal N/D 100
 T. Vitals 15mg BD
 Cap D-BON 60k once weekly

CLINICAL ASSESSMENT:

PROVISIONAL DIAGNOSIS:

Lfr - 7 days
 Self Attested
 Preeti
 01/10/2021

Dr. Rahul Sharma
 DNB (Medicine), FCCP (USA)
 M Pulmonary & Critical Care (Gold Medalist)
 CCP, FISDA, DMC - 05441
 Senior Consultant & Interventional Pulmonologist

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Helpline Numbers
 8800110084, 8800110086



3

OPD CARD

Pt Id. : 43205	Reg. date : 20/07/2021
Name : Mrs. RANI GIRI	Consultant : Dr. RAHUL SHARMA
Age/Sex : 56 F	Specialisation : PULMONARY MED
Tel No. : 9810855403	Qualification : MBBS, MD, DNB, DM
Company : CGHS CASH	Room No :

Timings	MON	TUE	WED	THU	FRI	SAT
Morning	10:00- 16:00	10:00- 16:00	10:00- 16:00	10:00- 16:00	10:00- 16:00	10:00- 16:00
Evening						

Temp 98.6 °F

Pulse 114 Per minute

B.P. 100/70 mmhg

Height 4.8 in/cm

Weight 39.5 Kg ✓

Allergies nil

History: Milky TB
ATT for 17/6/21

Milky TB @
type out D

Sp₂ → 97%

CLINICAL ASSESSMENT:

LFT

lung 15dy

PROVISIONAL DIAGNOSIS:

Self Attested
Dr. Prateek
21/10/2021

Jwells

Cap. SOM-OR 1 BID
↓ 2am
T. Akurei 4 3 tabs OD c
2ksp
Drugs.
R. Benadine 4mg 1/2
OD
Cap Corvir 100
T Medibon 100
T. Udiliv (1500 BR)
Cap D-BON 600 OD once weekly
Syp Aphelus 2ksp OD
T Allegra 20 mg / 12

Dr. Rahul Sharma
MD, DNB (Medicine), FCCP (USA)
DM Pulmonary & Critical Care (Gold Medalist)
FNCCP, FISDA, DMC - 05441
Consultant & Interventional Pulm

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Helpline Numbers
8800110084, 8800110086



(4)

OPD CARD

Pt Id. : 43205	Reg. date : 09/08/2021
Name : Mrs. RANI GIRI	Consultant : Dr. RAHUL SHARMA
Age/Sex : 56 F	Specialisation : PULMONARY MED
Tel No. : 9810855403	Qualification : MBBS, MD, DNB, DM
Company : CGHS CASH	Room No :

Timings	MON	TUE	WED	THU	FRI	SAT
Morning	10:00- 16:00	10:00- 16:00	10:00- 16:00	10:00- 16:00	10:00- 16:00	10:00- 16:00
Evening						

Temp °F Pulse Per minute B.P. mmhg
 Height cm Weight Kg Allergies

History: WT = 60 kgs
 No fever APT = 20/6/21

History of Hypertension

↓
 20/8/21

CLINICAL ASSESSMENT:

- Dry cough PAFus ap' week.
- HR — an 2wely

PROVISIONAL DIAGNOSIS:

Self Attested
 Prateek
 01/10/2021
 Today

- Cap. Sumorin 1 BD 0 — 0
20ml 1/2 20min
- r. Aleurit 4 tabs ODC 0 — x
2kpf of Eye.
- r. Senardine 4mg 1/2 OD 0 — x
- Cap Corvit 1 OD 0 — x
- Cap Medibin 1 OD 0 — x
- Cap Udoliv (150) OD 0 — x
- Cap D-BUN 60k once weekly.
- r. Alogon 12mg 1 OD x — 0
- Sp. Aphisal 2kpf Tds 0 — 0 — 0

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Helpline Numbers
 8800110084, 8800110086

YATHARTH

OPD CARD
SUPER SPECIALITY HOSPITALS



GET BETTER

Pt Id. : 43205	Reg. date : 20/09/2021
Name : Mrs. RANI GIRI	Consultant : Dr. RAHUL SHARMA
Age/Sex : 56 F	Specialisation : PULMONARY MED
Tel No. : 9810855403	Qualification : MBBS, MD, DNB, DM
Company : CGHS CASH	Room No :

Timings	MON	TUE	WED	THU	FRI	SAT
Morning	10:00- 16:00	10:00- 16:00	10:00- 16:00	10:00- 16:00	10:00- 16:00	10:00- 16:00
Evening						

Temp 97.3°F Pulse 109 Per minute B.P. 100/60 mmhg 3102-987
 Height 4.9 cm Weight 43.3 Kg Allergies T. Iron
 History: Sym better Pul TB ATI Jan 2021/2

Adm

CLINICAL ASSESSMENT:

LRV
KFT → S. Unchanged

PROVISIONAL DIAGNOSIS:

Imms
Self Attended
Preeth
01/10/2021

Cap-Sm-DSE 1BN
T. Akurit-3 3tab OD
T. Benadone 40mg 1/2 OD
Cap-Cozint 100
Cap D-BON 60K once weekly
Syp Aphusol 2sp TB
T. Allegra 120mg TB

A unit of AKS Medical & Research Centre Pvt. Ltd.

YATHARTH SUPER SPECIALITY HOSPITALS

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 MD, DNB (Medicine) & Critical Care (DNO-05441)
 FNCCP, FISA (Sleep Medicine) & Pulmonologist
 Senior Consultant & Interventional Critical Care
 Head Department of Sleep Medicine
 8800110084, 8800110086

YATHARTH
SUPER SPECIALITY HOSPITALS
GET BETTER
OPD CARD



Pt Id. : 43205	Reg. date : 19/10/2021
Name : Mrs. RANI GIRI	Consultant : Dr. RAHUL SHARMA
Age/Sex : 56 F	Specialisation : PULMONARY MED
Tel No. : 9810855403	Qualification : MBBS, MD, DNB, DM
Company : CGHS CASH	Room No :

Timings	MON	TUE	WED	THU	FRI	SAT
Morning	10:00- 16:00	10:00- 16:00	10:00- 16:00	10:00- 16:00	10:00- 16:00	10:00- 16:00
Evening						

Temp 98.9 °F Pulse 105 Per minute B.P. 100/60 mmhg SpO₂ 95%
 Height 4 ft 9 in cm Weight 43.6 Kg Allergies yes
 History: Asu better ATT from 20/6/21

CLINICAL ASSESSMENT:

Cap. SOM-DNR 1 B1D
 T. Akenit 33 tabs OD
 T. Benadene 40 72 OD
 Cap. Corivir 15D
 T. D-BONGOK Ouse
 wally
 Eye Aphusole 2kg OD
 T. Allegra 12mg 10D

PROVISIONAL DIAGNOSIS:

Lfr - emy 15 days

*Self Attested
 Prate
 01/10/2021*

T. Olfoncet 72 50D

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YATHARTH SUPER SPECIALITY HOSPITALS

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