



विद्या हॉस्पिटल एवं आर्थो सेन्टर

निकट मोहिबुल्लापुर रेलवे स्टेशन, सीतापुर रोड,
महियाँव, लखनऊ | Mob.: 9565759303

Dr K. K. Gupta
M.B.B.S., D. Orth., MIOA
Orthopaedic Surgeon

- ▶ Ex Registrar-Meenakshi Mission Hospital & Research Centre, Madurai
- ▶ Ex. Senior Resident Govt. Medical College Ambedkar Nagar
- ▶ Member of Indian Medical Association
- ▶ Member of Indian Orthopaedic Association

उपलब्ध सुविधाएं

- ◆ आर्थोपैडिक सर्जरी
- ◆ C-Arm की सुविधा / जोड़ों के प्रत्यारोपण की सुविधा (Joint-Replacement)
- ◆ आर्थोस्कोपी की सुविधा
- ◆ रीढ़ की हड्डी के आपरेशन की सुविधा (Spine Surgery)
- ◆ जनरल मेडिसिन
- ◆ जनरल सर्जरी
- ◆ यूरो सर्जरी
- ◆ लेप्रोस्कोपिक सर्जरी
- ◆ पैथालॉजी
- ◆ एक्स-रे
- ◆ फिजियोथेरेपी

मिलने का समय व दिन

प्रत्येक दिन

प्रातः 10:00 AM से 03:00 PM

सायं 07:00 PM से 08:00 PM

रविवार :-

प्रातः 10:00 AM से 02:00 PM

रविवार सायंकाल अवकाश

**ICU, VENTILATOR
Facility Available**

ms' knees den G 7y 1 F 15/11/19

very both knee

cat: OA knee RT & LT

- 45° flex in both knee

- physiotherapy as advised

- difficulty in

- life style modification

squatty / cross legs

- T. Acetab SP

o/c swelling @

both knee

- v. heavy wt. on

crutches @

- c. calf B.M.

- c. 10-12 lb / w

- aft 20 day

APPOINTMENT No.: 9415032370, (0522) 2739371

THIS PRESCRIPTION IS NOT VALID FOR MEDICO LEGAL PURPOSE

पर्या 5 दिनों के लिये मान्य



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Mr. Rama Sen' 6 July 13/01/20

to c of orthopaedics
laxar

- 2 Surgery to lumb

- 7 CT scan 120 mg 800

- 4 Antib 90 mg 1000

- C: Bonostat k 2 cr

- Paracetamol 1000 mg

- 100 mg 1000 mg

[Signature]

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Ms. Kamesh Devi

67/1F

18/4/20

JA steroid
given
S/L.

Co OA lens

- & - strength exercise
- Avoid squatting / crossing
- Tab Naproxen ER 500mg
or
- Tab Pantone 400mg or
- Tab Corcum for 1000^{mg}
- Best socket / sock
- Rf 1 month

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25/7/2020

= Physics of the Capture
USM

- Job: A. Stryker
Acco - 57503-0

- Job: Panters 904 4

- Job: Colzem BOV

- Job: socket 14

- Job: pleuroth plus
over

- Ref 1 month





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ms. Prem 58215 18/5/21

for of ortho / LSA

- physio on advised

- 70% ultrasound BM } 70%
- 70% Pantone 80% } the
su

- 70% collagen strong

- 70% needal plus 70%

- Rf 1 month

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Mrs. Khans 68711

25/8/21

freq LBA (L-S - to B/L
radiculopathy)
to 2 times

- Physio treatment

- Tab. Paracetamol ER 500 mg

- Tab. Acetaminophen 500 mg

- Tab. Bonesta 300 mg

- Tab. Pregabalin 150 mg

- Cap. Vit D 600 IU

- up 1 month

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22/11/21

= Physio to be continued

IA 57. Juvet

- Tob. ... Anstjepan DP 150g

- Tob. Raban DP 150g

- Cap Calf DP 150g

- Tob. Augtit 100g

- Rp 1 month

10 days
then
50g

1



KING GEORGE'S MEDICAL UNIVERSITY, U.P., LUCKNOW
Gandhi Memorial & Associated Hospitals

UHID: 20210009142
DATE: 26-11-2021 11:11:04 AM
MRS. PRAMA DEVI
Age: 67Y 8M D 10M M (Female)
W/O P. J. NARAYAN
OFFICER COLONY NIZALANAGAR, UTTAR PRADESH,
PIN-226002, INDIA

Fees: Rs. 50.00
TOKEN NO.: 21
(General)
DPMR OPD U.SI.-1.5.6
NON VMC
26-11-21

26-11-21

△ LBP i Rediculopathy

Rx
Xray L/S spine AP
left

M
28-11-21

- Bed rest for 4 weeks
- Hot fomentation
- L-S. Corset
- H.C. Program
- Cap Roodom - DR x 100
- Tab Etorem - MR x 100
- Cap Ralceal x 100 x 1 month
- Tab Gabapim - NT x HS - 021m
- 500mg Secht (20) 5 cap
- Belodic gel for local use

Dr. Abhinav Singh
M.B.B.S., D.N.B. (Ph.R.), M.N.A.M.
Specialist Medical Officer
D.M.A. (R.C.C.)
King George's Medical University, Lucknow



Date	15/11/2019	Srl No.	1001	Patient Id	1911151001
Name	Mrs. PREMA DEVI	Age	67 Yrs.	Sex	F
Ref. By	DR. K.K. GUPTA				

Test Name	Value	Unit	Normal Value
CALCIUM	<u>6.80</u>	mg/dl	8.0 - 10.5
CRP Immunoturbidimetry	102.0		

INTERPRETATION :-

In normal healthy individuals, CRP levels generally do not exceed 6 mgm/L. CRP plays a role in host defence and tissue repair. There is a lag time of 6 -10 hrs between stimulus and rise in serum levels, as compared to a lag time of 24-72 hrs, for other acute phase reactants.

R.A.FACTOR	10.0	IU/mL	UPTO 20
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INTERPRETATION

ADVANTAGES OF QUANTITATION :-

Exact concentrations of RA Factor facilitate the following:

- * Accurate staging of disease.
- * Precise prognosis and indication of complications..
- * Adjustment of dose for treatment and follow up of treatment .

REMARKS :-

- * RA factor has been demonstrated in approximately 80 % of patients with rheumatoid arthritis.
- * False positive results may occur in hepatitis, sarcoidosis, cirrhosis of liver. Sjogren's syndrome, acute bacterial and viral infection.
- * Diagnosis of rheumatoid arthritis should be made in conjunction with complete clinical evaluation.

Checked By.....

Dr. Manish Singh
 MD-Pathology (AIIMS)

FACILITIES

- Pathology • Histopathology • FNAC • Hematology • Biochemistry
- Cancer Marker • Hormonal Assay • Microbiology • Allergy panel
- Electrolytes (ISE) • Bone Marrow Aspiration

Service 24x7 hours

• Home Blood Collection Facility Available

Please Intimate us for any typing, mistakes & report for correction with in 3 days.
 If clinical correction is not established kindly repeat the test at no additional cost.

Not Valid For Medico Legal Purpose

Date	15/11/2019	Srl No.	1001	Patient Id	1911151001
Name	Mrs. PREMA DEVI	Age	67 Yrs.	Sex	F
Ref. By	DR. K.K. GUPTA				

Test Name	Value	Unit	Normal Value
-----------	-------	------	--------------

ARTHRITIS PROFILE
HAEMATOLOGY
COMPLETE HAEMOGRAM

HAEMOGLOBIN (Hb)	10.0	gm/dl	12.0 - 17.0
TOTAL LEUCOCYTE COUNT (TLC) Automated Cell Counter KX 21	8,000	/cumm	4000 - 11000

DIFFERENTIAL LEUCOCYTE COUNT (DLC)

NEUTROPHIL	64	%	50 - 70
LYMPHOCYTE	30	%	20 - 40
EOSINOPHIL	04	%	01 - 06
MONOCYTE	02	%	02 - 10
BASOPHIL	00	%	0 - 0
R B C COUNT	3.52	Millions/cmm	3.8 - 4.8
P.C.V / HAEMATOCRIT	24.4	%	35 - 45
M C V	69.3	fl.	80 - 100
M C H	28.4	Picogram	27.0 - 31.0
M C H C	41.0	gm/dl	33 - 37
RDW %	14.60	%	11.0 - 16.0
PLATELET COUNT	2.34	Lakh/cmm	1.50 - 4.0

GENERAL BLOOD PICTURE

R.B.C: Predominantly normocytic normochromic.
 W.B.C: Total and differential leucocyte count are as mentioned.
 PLATELETS: Adequate.
 No haemoparasites seen. Atypical cells are not seen.

SERUM URIC ACID Uricase-POD	7.20	mg%	2.6 - 6.0
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Date 18/04/2020	Srl No. 1001	Patient Id 2004181001
Name Mrs. PREMA DEVI	Age 67 Yrs.	Sex F
Ref. By DR.K.K. GUPTA		

Test Name	Value	Unit	Normal Value
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BIOCHEMISTRY

CALCIUM	<u>6.80</u>	mg/dl	8.0 - 10.5
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SEROLOGY

VITAMIN D 25 HYDROXY
(CLIA)

Test Description	Results	Biological Reference Range	Units
Vitamin D, 25 Hydroxy (CLIA)	<u>20.5</u>	30-100	ng/mL

INTERPRETATION OF RESULT:

Deficiency	-	Below 20 ng/ml
Insufficiency	-	20 - 29 ng/ml
Sufficiency	-	30 - 150 ng/ml
Toxicity	-	Above 150 ng/ml

COMMENTS :

Lower-than-normal levels suggest a vitamin D deficiency. This condition can result from lack of exposure to sunlight, lack of adequate vitamin D in the diet, liver and kidney diseases and Malabsorption.

A vitamin D deficiency may lead to:

- Low blood calcium levels (hypocalcaemia)
- Thin or weak bones (rickets, osteoporosis and osteomalacia)
- High levels of parathyroid hormone (secondary hyperparathyroidism)

Total 25-hydroxyvitamin D (D2 + D3) is the correct measure of Vitamin D status.

Higher-than-normal levels suggest excess vitamin D, a condition called hypervitaminosis D. It is usually caused by vitamin D in the form of doctor-prescribed dietary supplements.

95% of serum vitamin D is Vit D3.

D2 is only received from supplements.

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● Home Blood Collection Facility Available



Date 25/08/2021	Srl No. 1001	Patient Id 2108251001
Name Mrs. PREMA DEVI	Age 67 Yrs.	Sex F
Ref. By DR. K.K. GUPTA		

Test Name	Value	Unit	Normal Value
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ARTHRITIS PROFILE

A.S.O (QUANTITATIVE) Immunoturbidimetry	75.6	Iu/ml	
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Normal value : Adult < 200 Iu/ml
Children < 200 Iu/ml

Antistreptolysins are specific antibodies to extracellular products of Streptococcus Pyogenes, among which " Antistreptolysin O" (ASO) is the one most used for clinical laboratory evaluation. Antibodies against Streptolysin (O) can be detected 1-3 weeks after infection with maximum levels reached at 3-6 weeks. Positive " ASO " always indicates the presence of a Streptococcal infection whereas a negative result cannot exclude an existing or preceding group A Streptococcus infection. End point determination of concentration of ASO ensures high degree of sensitivity and permits objective follow up of ASO levels.

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Date	25/08/2021	Srl No.	1001	Patient Id	2108251001
Name	Mrs. PREMA DEVI	Age	67 Yrs.	Sex	F
Ref. By	DR. K.K. GUPTA				

Test Name	Value	Unit	Normal Value
CALCIUM	<u>7.00</u>	mg/dl	8.0 - 10.5
CRP Immunoturbidimetry	0.50		

INTERPRETATION :-

In normal healthy individuals, CRP levels generally do not exceed 6 mgm/L. CRP plays a role in host defence and tissue repair. There is a lag time of 6 -10 hrs between stimulus and rise in serum levels, as compared to a lag time of 24-72 hrs, for other acute phase reactants.

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Ref. By DR. K.K. GUPTA		

Test Name	Value	Unit	Normal Value
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ARTHRITIS PROFILE

HAEMATOLOGY

COMPLETE HAEMOGRAM

HAEMOGLOBIN (Hb)	10.2	gm/dl	12.0 - 17.0
TOTAL LEUCOCYTE COUNT (TLC) Automated Cell Counter KX 21	8,900	/cumm	4000 - 11000

DIFFERENTIAL LEUCOCYTE COUNT (DLC)

NEUTROPHIL	66	%	50 - 70
LYMPHOCYTE	26	%	20 - 40
EOSINOPHIL	04	%	01 - 06
MONOCYTE	04	%	02 - 10
BASOPHIL	00	%	0 - 0
R B C COUNT	3.54	Millions/cmm	3.8 - 4.8
P.C.V / HAEMATOCRIT	33.8	%	35 - 45
M C V	95.5	fl.	80 - 100
M C H	28.8	Picogram	27.0 - 31.0
M C H C	30.2	gm/dl	33 - 37
RDW %	16.20	%	11.0 - 16.0
PLATELET COUNT	2.28	Lakh/cmm	1.50 - 4.0

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