





Female

Date: - 20 Jan 2024

Patient Name: Mrs. VEER BALA Age
Consultant Name: - DR. (COL.) N. CHAKRAVARTY Age: - 69 yrs.

Mrs. VEER BALA 69 yrs. old postmenopausal lady, presented with progressively increasing lump left breast with Oct 2021. She has no positive family history of breast malignancy however history of ? HCC in mother. She was initially evaluated at Yashoda hospital Katsambis by surgical oncologist June 2023.

On clinical examination found to have lump left breast approx. 45x43 mm left upper outer quadrant. Left axillary nodes not palpable.

Left digital mammogram on 15 June 2023 suggested- presence Spiculated, ill-defined mass lesion upper quadrant at 12 O Clock position approx 33x26 mm BIRAV -V with left axillary node- largest 13.4x 06 mm in size. Sono-mammogram-detail not available. 18 F FDG PET CT Scan on 16 June 2023 suggested ill-defined irregular avid soft tissue thickening noted left upper quadrant left breast (approx. 15x 41 mm SUV max 2.2. Surrounding fat stranding noted. Fat plane with overlying skin/underlying muscle preserved.

Histonathological annualistic and approximation of the stranding muscle preserved.

Histopathological examination of trucut biopsy specimen from left breast (vide SN-604-23 dated 15 June

2023) hvasive ductal carcinoma breast- NST Liter UNDERWENT LEFT MRM at KHANDELWAL HOSPITAL & UROLOGY CENTRE on 21 June 2023 Histopathological examination of surgical specimen (vide Dr. LPL 442861785 dated 22 June 2023) Histopathological examination of surgical specimen (vide Dr. LPL 442861785 dated 22 June 2023) Histopathological examination of surgical specimen (vide Dr. LPL 442861785 dated 22 June 2023) Histopathological examination of surgical specimen (vide Dr. LPL 442861785 dated 22 June 2023) Histopathological examination of surgical specimen (vide Dr. LPL 442861785 dated 22 June 2023) Histopathological examination of surgical specimen (vide Dr. LPL 442861785 dated 22 June 2023) Histopathological examination of surgical specimen (vide Dr. LPL 442861785 dated 22 June 2023) Histopathological examination of surgical specimen (vide Dr. LPL 442861785 dated 22 June 2023) Histopathological examination of surgical specimen (vide Dr. LPL 442861785 dated 22 June 2023) Histopathological examination of surgical specimen (vide Dr. LPL 442861785 dated 22 June 2023) Histopathological examination of surgical specimen (vide Dr. LPL 442861785 dated 22 June 2023) Histopathological examination of surgical specimen (vide Dr. LPL 442861785 dated 22 June 2023) Histopathological examination of surgical specimen (vide Dr. LPL 442861785 dated 22 June 2023) Histopathological examination of surgical specimen (vide Dr. LPL 442861785 dated 22 June 2023) Histopathological examination of surgical specimen (vide Dr. LPL 442861785 dated 22 June 2023) Histopathological examination of surgical specimen (vide Dr. LPL 442861785 dated 22 June 2023) Histopathological examination of surgical specimen (vide Dr. LPL 442861785 dated 22 June 2023) Histopathological examination of surgical specimen (vide Dr. LPL 442861785 dated 22 June 2023) Histopathological examination (vide Dr. LPL 442861785 dated 22 June 2023) Histopathological examination (vide Dr. LPL 442861785 dated 22 June 2023) Histopathological examination (vide Dr. LPL 442861785 dated 22 June 2023) Histopathological examination (vi nuclear pleomorphism score 03, mitotic rate score 01 overall grade II, cut margin-free, LVSI- identified/ derm LVSI/PNI - not identified, 07 /16 left axillary node with extra nodal extension. ER -positive 55-60 %, PgR-positive 75%, Her2Neu-negative, Ki-67 (2)
She received **08** # adjuvant chemotherapy (04# lpi ADPIANYOIN discovered **09** properties of the properties of th

She received **08** # adjuvant chemotherapy (04# Inj. ADRIAMYCIN +Inj. CYCLOPHOSPHAMIDE) followed 04# Inj. PACLITAXELI till 24 Dec 2023 PACLITAXEL) till 24 Dec 2023

Currently she is doing fine. Left shoulder movement free Weight 46 76 Kg General & systemic examination found unremarkable

Left MRM scar-healthy. / left axilla -normal/left supraclavicular / Left arm- normal Right breast healthy. / right axilla -normal/right supraclavicular / right arm- normal. She has associated comorbidity (1) Type 2DM -on OHA In view of post mastectomy, node positive disease with extra nodal extension as high risk features she requires adjuvant radiation to chest wall & regional nodes

CARCINOMA BREAST (OPTD)- LEFT Stage pT2N2MO -III A POST MRM

Following a recommended

- 1) CBC IFT KFT weekly
- 2) X-ray Chest PA view
- 3) Ultrasound examination abdomen & pelvis
- 4) ECG.
- 5) Thermoplastic mould & CT simulation
- 6) 3 D Planning
- 7) Adjuvant radiation to left chest wall 50.4 Gy in /28 fraction by IGRT
- 8) Supportive care

You are requested to accord permission for above

Director Radiation Oncolo

REC Yashoda Susic

Yashoda Hospital & Research Centre Ltd

10 13 42 192 44 700

Yashoda Superspeciality Hospital & Cancer Institute

B 18 2 Sec. 23, San<sub>phy</sub> Nagar, Ghaziabad - 201002 Pn. 98/07 09038-0120-4612000

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Yashoda Hospital & Cancer Institute

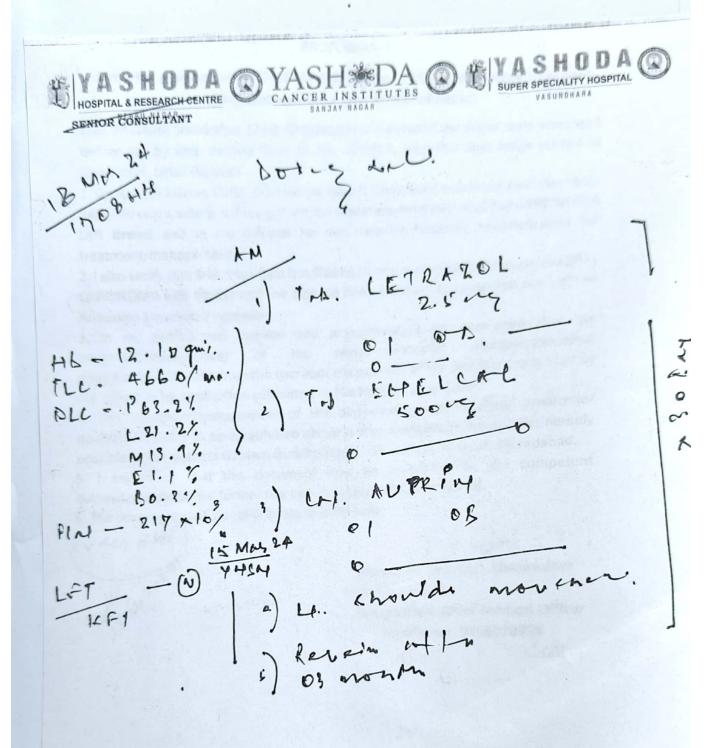
HC - 1, Sec - 15, Vasundhara, Chaziabad - 201012 Ph 98107 05772, 0120-4466000

YH/HRM/LH/V2

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VH/HRM/IL



### PROFORMA- I

## Remarks/ assessment of Chief Medical Officer/ Chief Medical Superintendent along with verified / countersigned papers

I, Dr. Bhavtosh Shankdhar, CMO, Ghaziabad have perused the documents presented before me by Smt. Archna Rani, ID No. UP1525, Add. Principal Judge posted at Ghaziabad, Uttar Pradesh.

1. Dr. Rakesh Kumar, EMO, DCH Sanjay Nagar, Ghaziabad examined Smt. Veer Bala aged- 69 years, who is suffering from the disease/syndrome/disability CARCINOMA Left Breast and in my opinion he may require frequent hospitalization for treatment/management.

2. I also verify that Smt. Veer Bala is suffering from the disease/ syndrome/disability CARCINOMA Left Breast and the disease finds mention at paragraph no. I of the Annexure 1 enclosed herewith.

3. In my professional opinion and assessment, I am convinced that the above-mentioned the disability/disorder in paragraph two above is possible at the districts mentioned by the officer in his application submitted to the Hon'ble High Court.

4. The treatment/management of the above-mentioned disease/ syndrome/ disability/disorder in paragraph two above is also available at the districts namely possible at the districts Gautam Buddha Nagar, Ghaziabad, Meerut, Moradabad.

5. I am aware that this document may be presented by the competent authority/applicant for further use by a competent Medical Board.

6. The document shall be valid for six months only.

Shy

Name: Dr. Bhavtosh Shankhdhar

ID No.181620

**Designation: Chief Medical Officer** Mobile No. 9456078958

Chief Medical Officer Grand to the



Dr. Sachdeva's

# Kosmos Superspeciality Hospital

# A UNIT OF SACHDEVA MEDICARE PVT. LTD.

C-60, Anand Vihar, (Vikas Marg), Delhi-110092 Ph.: 011 -22160000, 22160001, 22160002, 22160003

Emergency call: 85 86 82 82 82 E-mail: kosmoshospital@gmail.com Website: www.kosmoshospital.com



# **DISCHARGE SUMMARY**

**Patient Name** 

: Veer Bala

Age / Sex

: 68 / Female

: Judges Residence Modal Town Gzb Ghaziabad

: 61763

IPD No.

: 18828/23

UHID No.

Admission Date : 24/12/2023 10:35:15 AM

Discharge Date : 24/12/2023

Category / TPA : General

Room No. Doctor Incharge : Dr. Suresh Kumar

: 216

Department

: General Surgery

Discharge Reason :

POST OPERATIVE CASE OF LEFT BREAST CARCINOMA (INVASIVE DUCTAL CARCINOMA). DIAGNOSIS :-

T2/3, NO MO, ER-POSITIVE, PR-POSITIVE, HER2NEU -NEGATIVE...

KNOWN CASE OF T2 DM / HTN..

CHIEF COMPLAINTS & REASON FOR ADMISSION:-PATIENT IS A POST-OPERATIVE CASE OF LEFT BREAST CARCINOMA (INVASIVE DUCTAL CARCINOMA) T2/3, NO PATIENT IS A POST-OPERATIVE CASE OF LEFT BREAST CARCINOMA (INVASIVE DUCTAL CARCINOMA) T2/3, NO MO, ER-POSITIVE, PR-POSITIVE, HER2NEU -NEGATIVE. NOW PATIENT IS BEING ADMITTED FOR EIGHTH CYCLE OF CHEMOTHERAPY, POST CHEMOTHERAPY HAIR FALL (+), LOSS OF APPETITE, NAUSEA (+), NO FEVER, NO THROMBOCYTOPENIA, NO LEUCOPENIA. PATIENT TOLERATED WELL EIGHTH CYCLE OF CHEMOTHERAPY AND POST CHEMOTHERAPY SIDE EFFECTS WITHOUT ADMISSION IN THE HOSPITAL.

### CLINICAL HISTORY :-

KNOWN CASE OF T2 DM / HTN ON TREATMENT

HISTORY OF LEFT MRM ON 21/06/2023

## ON EXAMINATION :-

At Admission:

Conscious Oriented PR: 102/min, BP: 140/70 mmHg, RR: 20/min, Temp: 98°F Chest - B/L AE EQUAL VBS (+)

Abdomen - SOFT BS (+) CVS - S-1 S-2 AUDIBLE

SPO2-98% ON RA, RBS-168MG/DL, WEIGHT: 44KG

LOCAL EXAMINATION:

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Chief District Medical Officer Shehdera District Directorate of Health Services Govt. of NCT of Delhi

