INSTITUTE OF LIVER & BILIARY SCIENCES

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Do Hetesh-3

Follow-Up Sheet (Hepatology)

Date

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Patient Name: Mr. RAJENDRA KUMAR

: ILBS.0000074536

Doctor Name: Dr S. K. SARIN

: 25-09-2023 12:04:22

/ Sr. Resident / VC

Age/ Gender : 67 Years / Male

Designation : Sr. Professor

Address

J-16 JUDGES COLONY

City and State:	BAREILLY, UTTAR PRADESH
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Payer Category:

Pulse (BPM) : Temp (°F) :	BP (mmHg)	: 130/80	Saturation (%):	94.
	Waist (cms)	: 91	BMI (kg/m²) :	23,

Height (cms): Weight (Kg): 6 + 6 Walst (cms) : 9	DI-12 (Ng/ /		
CLINICAL DIAGNOSIS:		Previous	Present
	CTP		
Comowie PIBV (Country)	MELD		
	AARC		
etanhet / DOVA - NO	LSM		2.8
Ho, A las ? - log 2 - log L	CAP		2/3
	Fib4		
	HVPG		
- CKD (Dew - 1, L	SSM		
HIO SOHI PUT LOPA	BCLC		
De per			
EISTORY:			
- Complex of ran			
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PREVIOUS INVESTIG	ATIONS DONE:	ULTRASOUND:
(-1.2 23,1-0.70		CT / MRI:
ALT - 24 ALT - 3.9	HSA(-5-2 TIM · 3·)	ENDOSCOPY:
ALT 7.9	T379 · 3 ·)	ENDOSCOPY:



4ID: LBS.0000074536		Patient Name	Mr. RAJENO	ORA KUMAF	1	
INVESTIGATIONS (CURRENT VISIT) VIROLOGY RADIOLOGY AND IMAGING FIBROSCAN ENDOSCOPY Admission Advised: Tes REFERRALS IR - OB 1st Fic Transplant - Room No. 2061 GENERAL ADVICE & NUTRITION	USG Upper Abd Echo Fibroscan Liver UGIE + Antral/D Colonoscopy AUD - Room Dietitian - R	HBsAg(Q) In / Doppler Fibroscan Sp UGIE + End ERCP Adoma ERCP	INR HbA HBV DNA(Q) [CE CT Upper Abd Contrast Echo Meen Otherapy U Ward Nephro - Section HPB Surgery - S	Anti HCV Io (TP) M IGTE Variceal Screen US	Lipid (F) HCV RNA(Q)	SPECIAL INVESTIGATIONS Liver Biapsy TJLB + HVPG HVPG
		DRES	CRIPTION			
ir. No. Name of Medic	tine	Dose Mernin		ARRIVE.	Caration	Remarks
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7 Tel Pridar		w			The same of the sa	
2 Tels CALIAS	6017		A Comment of the Comm			
(4) Laropf	seunt					
INVESTIGATIONS (NEXT VISIT) VIROLOGY RADIOLOGY AND IMAGING FIBROSCAN ENDOSCOPY SPECIAL INVESTIGATIONS FOLLOW UP AI Day(s) Week	Mant	HBsAg(Q) do / Doppler Fibroscan S D2 UGIE + End ERCP TJLB + HVF	otherapy L	Anti HCV do (TP) M DGIE Variceal Scree EUS HVPG	HCV RNA(Q)	AFP Introducing ILBS Whatsapp Helpline Now use WhatsApp to access key services in ILBS 1. To connect to doctors in Emergency 2. To talk to Admission Desk 3. To find out OPD days of our consultants 4. To book appointments 5. To connect with billing department 6. To speak to Duty Officer And to access many other similar services and functions For this you no longer need to call and wait for someone to connect you. Our WhatsApp Chatbot will help you quickly and efficiently. Simply activate the Chatbot on your phone by doing the following: 1. Scan the QR code with iPhone camera or Google lens 2. Click the send button.

Peartny Liver, Realthy India | Liver Rep Robert | Liver Rep Robert | Liver Rep Robert | Repair Robert | Liver Rep Robert | Robert



INSTITUTE OF LIVER AND BILIARY D-1 VASANT KUNJ NEW DELHI SCIENCES 110070

SmartExam:

ON





KUMAR

RAJENDRA

74536

Height:

Weight:

DR SARIN Physician:

CAP (dB/m)

MEAN

213 3.8

E (kPa)

MEDIAN

IQR/Med

5% SWF = 50Hz

30 -

40 -

50 -

Exam:

Organ:

Operator:

E-MEASUREMENTS:

25/09/2023 12:23:40

10

CAP-LEVEL:

RAM KALYAN

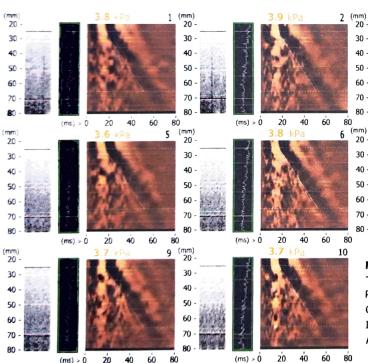
>100 %

60

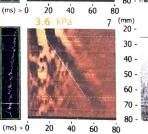
Fasting:

Yes

8



3 (mm) 20 (ms) > 0 20



(ms) > 0z'o 40

Measurement conditions

Thick subcutaneous tissues Patient positioning Choice of measurement position Intercostal Space **Axillary Line**

Anatomical landmarks 7th Med

No

Supine

/ SN: F0110459

M+ / SN: 2003298 Probe

FibroScan@ is a medical device intended as an aid for the management of patients with liver disease. Measurements should be performed by a certified operator. The values obtained must be interpreted by a physician experienced in dealing with liver disease, taking into account the complete medical records of the patient, the number of valid measurements and their dispersion. Probes must be calibrated according to the manufacturer's recommendations.





INSTITUTE OF LIVER & BILIARY SCIENCES



(An autonomous society under Government of NCT of Delhi)
D-1, Vasant Kunj, New Delhi. Ph: 011 46300000

FIBROSCAN IN LIVER DISEASES

Liver Stiffness as measured by transient elastography correlates with advanced fibrosis in Patient with chronic hepatitis B,C or nonalochilic fatty liver disease (NAFLD) and many other causes of liver diseases and cuttoffs vary according to the etiology of liver disease.

Liver Stiffness in normal adults in <5-6 kPa.

	Optimal cutoff for diagnosing significant fibrosis	Optimal cutoff for diagnosing significant cirrhosis
Chronic HBV infection	7-8kPa	10-11 kPa
Chronic HCV infection	7-8kPa	11-12 kPa
Non alcoholic fatty liver disease	6-7kPa	10-11 kPa

This technique works best for separating patients with minimal or no fibrosis from those with significant fibrosis. A linear correlation with increasing fibrosis does not occur, and 15-20% discordance between elastography scores and histologic fibrosis may occur.

Ultrasound elastography does not distinquish patients with no fibrosis from patients with minimal fibrosis, Advanced fibrosis may be underestimated and patients with macro nodular cirrhosis may be classified as non-cirrhotic

Fibrosis may be overestimated in patients with extrahepatic cholestasis, acute hepatocellular injury or after heavy meals.

Liver Fat:

Controlled attenuation parameter (CAP) correlates with fat content of the liver.

Optimal cutoff values of CAP for prediction of >33% and>66% fat in liver are 255-260 dB/m and 290-295dB/m respectively.

If the values of one or both Liver stiffness and CAP are abnormal, the individual is advised to be under regular follow up.