Dr. AMIT DUTT DWARY
MD,DM(AIIMS),Gold Medalist,
Ex-Head Dept. of Medical Oncology (TATA Medical Centre).
MEDICAL ONCOLOGY

Outpatient Summary and Prescription

Apollo HOSPITALS

Mrs. ASHISHIYANA KHATOON UHID : AMHL.0002190944
Female, DOB : 03-AUG-1987(36Y 0M 0D) OP Number - Visit ID : OP468424-1 Visit Date : 03-Aug-2023
Address : 21/H/2 JANNAGAR ROAD Kolkata Kolkata 70014 West Bengal India
Phone : 91-9836058354 Email : ABCD@GMAIL.CO

Allergy :- No Known Allergy

CHIEF COMPLAINTS

Dyspepsia Since 1 year. Abdominal pain since last 8 weeks. No loss of weight. 8. 7. 23 - Hb 11.9, WBC 11.2, platelet 4.16, RBS 102, creatinine 0.9, Amylase and Lipase normal, bilirubin 0.83, SGOT 31, SGPT 28, SAP 74. USG whole abdomen on 8. 7. 23 - hepatomegaly with grade I fatty changes, prominent CBD, cholelithiasis, bulky and elongated uterus, bulky right ovary with bilateral polycystic appearance, tubular cystic SOL closely adherent to right ovary with no septation, solid component and vascularity. Underwent laparoscopic cholecystectomy on 13. 7. 23. HPE- from Roy and trivedi- poorly differentiated infiltrating adenocarcinoma of gallbladder, pT3, surgical margin involved. CECT whole abdomen on 31. 7. 23 - few subcentimetric periportal node, hepatomegaly , paraovarian cyst in right ovary, postoperative change in gallbladder fossa. 30. 7. 23 - CBC acceptable, creatinine 0.63, FBS 105, LFT acceptable, CEA 1.08.

PAST MEDICAL HISTORY

No co-morbidities.(Visit Date:03 AUG 2023)

VITALS

· **Pulse Rate**	: 112 /min	(03-Aug-2023 03:51 PM)
· **BP**	: 130/80 mmHg	(03-Aug-2023 03:51 PM)
· **Resp Rate**	: 19 /mt	(03-Aug-2023 03:51 PM)
· **SpO2**	: 97 %	(03-Aug-2023 03:51 PM)
· **Height**	: 153 Cm	(03-Aug-2023 03:51 PM)
· **Weight**	: 88.10 Kg	(03-Aug-2023 03:51 PM)
· **BMI**	: 37.59	(03-Aug-2023 03:51 PM)
· **BSA**	: 1.93	(03-Aug-2023 03:51 PM)
· **Pain Score**	: 0	(03-Aug-2023 03:51 PM)

DIAGNOSIS :

1 . Gallbladder carcinoma, post laparoscopic cholecystectomy, pT3 Nx, margin positive.

ADVICE

Tablet Calpol T twice daily for 5 days then SOS IF pain. 0-0-
Tablet Megasty 160 mg after meal once daily for 2 weeks. 0-0-
Tablet Zocef 500 mg twice daily after meal for 7 days. 1-0-1-0-
Do CA 125, CA 19.9.
Do CECT chest.
Do Tc 99 Bone scan.
Review in OPD with reports.

PLAN

If non-metastatic disease found on further staging workup , then go for radical cholecystectomy.

Dr. AMIT DUTT DWARY

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Reg. No.	**: Q23H040103**	**Bill No.**	**: 41Q23H050044**
Name	**: Ms. ASHIYANA KHATOON**	Date/Time	: 05-08-2023 10:50:59 AM
Age/Sex	: 36Y /Female	Report Date	: 07-08-2023 09:55:59 AM
Ref By Dr.	:AMIT DUTT DWARY		

REPORT OF WHOLE BODY BONE SCINTIGRAPHY

IIISTORY & INDICATION:

Case of poorly differentiated adenocarcinoma of gall bladder.

PROTOCOL:

Three hours after intravenous injection of approx. 26.1 mCi of ^{99m}Tc-MDP whole body sweep were acquired in anterior & posterior views. SPECT-CT of pelvic region was acquired.

FINDINGS:

The whole body sweep images show satisfactory tracer clearance from the soft tissues with good skeletal tracer concentration for age.

Asymmetrically increased tracer uptake is noted in right sacroiliac joint, corresponding to degenerative changes in fused SPECT-CT images.

No other abnormal focal tracer concentration is seen elsewhere in rest of the skeleton.

Both kidneys are visualized. Physiological tracer activity is seen within the urinary bladder.

IMPRESSION:

Scintigraphic findings show degenerative changes at right sacroiliac joint with no evidence of osteoblastic skeletal metastases.

Debdip Roy

Dr. Debdip Roy
MBBS , DNB (NUCLEAR MEDICINE) , NUCLEAR MEDICINE PHYSICIAN

Dr. Dhritiman Chakraborty
MBBS(HONS.) MD(NUCL.MED)(PGI,CHANDIGARH) DM(THERAPEUTIC NUCL.MED)(AIIMS,NEW DELHI) FANMB,MICNM,MAMS
NUCLEAR MEDICINE PHYSICIAN

Dr. Somnath Pandey
MBBS, DNB (NUCLEAR MEDICINE) , FEBNM NUCLEAR MEDICINE PHYSICIAN

Checked By :

UserID :SD177

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ISO 9001 : 2015 certified

Department of Pathology

Reg. Number : Q23H040103/SPL-BIO-88
Patient Name: MS. ASHIYANA KHATOON
Patient Age : 36Y , Sex: Female
Address : 21/H/2 JANNAGAR ROAD, ENTALLY, KOLKATA
Referred By : DR AMIT DUTT DWARY

SCAN FOR GENUINITY

Bill Number : 41Q23H050044
Bill Date,Time : 05-Aug-2023 10:50 AM
Coll. Date,Time : 05-Aug-2023 11:11 AM
Lab Rec. Date, Time : 05-Aug-2023 11:30 AM
Rpt. Date, Time : 07-Aug-2023 01:44 PM

CA 19.9
(Test Report)

Test Parameter	Result	Unit	Biological Reference Interval
Serum CA 19.9 *Method: ELFA*	< 3.00	U/mL	(Upto 37)

Measuring Range of CA 19.9 : 3 to 500 I/mL

Limitations :

1. The CA 19.9 results should be interpreted in light of the total clinical presentation of the patient, including: symptoms, clinical history, data from additional tests, and other appropriate information.
2. Serum or plasma CA 19.9 antigen concentrations should not be interpreted as absolute evidence for the presence or absence of cancer. Elevated concentrations may be observed in the serum or plasma of patients with benign conditions or other non-cancer disorders (gall stones, bile duct blockage, liver disease, cystic fibrosis), as well as in pancreatic cancer and other malignant disease. The CA 19.9 assay should not be used as a cancer screening test.
3. CA 19.9 testing methods and results can vary from lab to lab. If anyone is getting tested regularly to monitor treatment for cancer, one may want to talk to with health care provider about using the same lab for all the tests, so that the results will be consistent.
4. For assays employing antibodies, the possibilities exists for interference by heterophile antibodies in the patient sample. Patients who have been regularly exposed to animals or immunoglobulin fragments may produce antibodies, e.g. HAMA, that interfere with immunoassays.

   Additionally, other heterophile antibodies such as human anti-goat antibodies may be present in patient samples.

Primary Sample : SERUM
Equipment(s) Used : VIDAS,

------End of Report------

Tsaufta.

Dr. Asish Kr. Datta	Dr. Subhasis Basu	Dr. Manas Muhury	Dr. Trishna Sengupta
CHIEF OF PATHOLOGY	CONSULTANT PATHOLOGIST	CONSULTANT PATHOLOGIST	CONSULTANT BIOCHEMIST
MD (PGI)	MD (MANIPAL)	MD (PATH)	Ph.D (Biochemistry)

VERIFIED
Checked by : KN303

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ISO 9001 : 2015 certified

Department of Pathology

Reg. Number : Q23H040103/SPL-BIO-88
Patient Name: MS. ASHIYANA KHATOON
Patient Age : 36Y , Sex: Female
Address : 21/H/2 JANNAGAR ROAD, ENTALLY, KOLKATA
Referred By : DR AMIT DUTT DWARY

SCAN FOR GENUINITY

Bill Number : 41Q23H050044
Bill Date,Time : 05-Aug-2023 10:50 AM
Coll. Date,Time : 05-Aug-2023 11:11 AM
Lab Rec. Date, Time : 05-Aug-2023 11:30 AM
Rpt. Date, Time : 07-Aug-2023 11:43 AM

CA 125
(Test Report)

Test Parameter	Result	Unit	Biological Reference Interval
Serum CA 125 *Method: CMIA*	10.7	U/mL	< 35

Limitations:

1. The CA 125 assay value should be used in conjunction with information available from clinical evaluation (e.g., symptoms, results of other tests, clinical impression etc). The ARCHITECT CA 125 assay should not be used as a cancer screening test.
2. Serum CA 125 is widely used as a tumour marker in the monitoring of epithelial ovarian cancer. If increased level is diagnosed with ovarian, endometrial, peritoneal or fallopian tube cancer, a decreasing CA 125 level often indicates that the cancer is responding to treatment. A rising CA 125 level may indicate a return or continued growth of the cancer.
3. A number of normal and noncancerous conditions can cause an elevated CA 125 level, including: (a) Endometriosis (b) Liver disease (c) Menstruation (d) Pelvic inflammatory disease (e) Pregnancy (f) Uterine fibroids.
4. CA 125 assay values obtained with different assay method cannot be used interchangeably due to differences in methods and reagent specificity. The lack of international standard for CA 125 hampers comparability among laboratories.
5. Heterophilic antibodies in human serum can react with reagent immunoglobulins, interfering with in vitro immunoassays. Patients routinely exposed to animals or to animal serum products can be prone to this interference and anomalous values may be observed. Additional information may be required for diagnosis.

Primary Sample : SERUM
Equipment(s) Used : Architect i1000 SR / Architect i2000 SR,

------End of Report------

Tsaufta.

Dr. Asish Kr. Datta	Dr. Subhasis Basu	Dr. Manas Muhury	Dr. Trishna Sengupta
CHIEF OF PATHOLOGY	CONSULTANT PATHOLOGIST	CONSULTANT PATHOLOGIST	CONSULTANT BIOCHEMIST
MD (PGI)	MD (MANIPAL)	MD (PATH)	Ph.D (Biochemistry)

VERIFIED
Checked by : AD233

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ISO 9001 : 2015 certified

Reg. No.	**: Q23H040103**	**Bill No.**	**: 53Q23H040414**
Name	**: Ms. ASHIYANA KHATOON**	Date/Time	: 04-08-2023 15:33:57 PM
Age/Sex	: 39Y 7M 3D /Female	Report Date	: 05-08-2023 16:35:56 PM
Ref By Dr.	:AMIT DUTT DWARY		

CT SCAN OF THORAX

Contrast enhanced CT scan of thorax done using a 128 slice spiral scanner

Known case of CA gall bladder, post lap. Cholecystectomy.

LUNG PARENCHYMA

Patchy areas of consolidation with atelectasis are seen in anterior segment of right upper lobe and bilateral lower lobes.

The intrapulmonary bronchial tree is normal. No evidence of bronchiectasis is seen.

MEDIASTINUM

Few subcentimeter lymphnodes are seen in prevascular and cardio-phrenic stations measuring upto 4 mms.

The mediastinum is central. The great vessels of the mediastinum are normal. The trachea and major bronchi are normal.

PLEURA

The pleura is normal on either sides. No evidence of pleural effusion, thickening, nodularity or calcification is seen.

BONES AND SOFT TISSUE

The bones under review are normal. The muscles and soft tissues of the thoracic wall under review are unremarkable.

OTHERS

Fat stranding is seen in right upper abdomen and adjacent to gall bladder fossa.

Prominent right cardiophrenic lymphnode seen (10 mms).

IMPRESSION:

Patchy areas of consolidation with atelectasis in both lungs.

Ishani

Dr. Pinak Pani Bhattacharyya	Dr. Chaturbhuj Lal Rajak	Dr. Sunetra Mukherjee	Dr. Ishani Shukla
MD(PGIMER), DNB	MD(PGIMER) DNB	MBBS MD(RADIOLOGY)	MBBS MD(RADIOLOGY)
CONSULTANT RADIOLOGIST	CONSULTANT RADIOLOGIST	CONSULTANT RADIOLOGIST	CONSULTANT RADIOLOGIST

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OUTPATIENT SUMMARY AND PRESCRIPTION

Mrs. ASHSHIYANA KHATOON
Female, DOB : 03-Aug-1987 (36y)
Address : 21/H/2 JANNAGAR ROAD Kolkata 70014 West Bengal India
Phone : 91-9836058354

UHID : AMHL.0002190944
OP Number - Visit ID : OP476092-1

Visit date : 09-Aug-2023

Email : abcd@gmail.co

ALLERGIES
- NO KNOWN ALLERGY

PRESENTING COMPLAINTS
- Referred by Dr Amit Dwary
- Pt not brought

HISTORY OF PRESENT ILLNESS
- Pain upper abdomen 2 years, No preop wt loss, anorexia, jaundice, GI bleed
- Detected to have Gallstone on 8/7/23 USG, no wall thickening noted.
- Lap chole 13/7/23, Bx: poorly diff adeno ca, margin involved, pT3,
- CT abdomen, Chest, done

PAST MEDICAL / SURGICAL HISTORY
- No comorbidity

SOURCE OF HISTORY
- Family member

TESTS/PROCEDURES ADVISED
- PRE DIALYSIS SEROLOGY PACKAGE - HBs Ag, HIV, anti HCV
- PROTHROMBIN TIME

IMPORTANT INSTRUCTIONS
- Incentive spirometry
- Daily walking
- High protein diet
- Dr debraj jash opinion
- To bring the patient in next visit

Dr. RAMDIP RAY SUPRIYO GHATAK SUMIT GULATI
Regn. No- ~~55351~~ (West Bengal)

Contact : +91 7301 275 275 / +91 33 2320 3040 (Extn 5251)

Please bring this prescription at your next visit