

SPAN Diagnostic Labs

Partners in Care™

Test Requisition Form

Sl no. _____

Executive Name: Alok
Employee No.: _____
Signature: _____

For Lab use only
Specimen Barcode

PATIENT INFORMATION:

*** PATIENT'S NAME (Block Letters: First Name Mandatory)

Miss. SAKSHI RAMESH NISARGANDH
(First Name) (Middle Name) (Last Name)

Patient's Address: _____

Phone No.: _____

Email ID: _____

***Date of Birth: _____ ***Sex Male Female

Age: 19 Yrs _____ Months _____ Days _____

Height: _____ cms Weight: _____ Kgs

Test Requirements: Please refer to the Directory of services for correct Test Code

***Test Code HISTOPATH ***Test Description

A - sx - Appendicectomy

B - Right Ovary Cyst-wall

*** Temperature Sent Frozen (< -0° Celsius) *** Temperature Recd. Frozen (< -0° Celsius)

Cold (2-8° Celsius) Cold (2-8° Celsius)

Ambient (18° - 22° Celsius) Ambient (18° - 22° Celsius)

***Specimen Type (with Qty)

Serum	Bacter Bottle*
W. Blood ACD	uSwab
W. Blood EDTA	aPs
W. Blood Flouride	Body Fluid*
Plasma: EDTA/CIT/FL	BAL
W. Blood Heparin	aCF
W. Blood Sodium Citrate	Irafin Block*aFassueAP
aSide	Sputum
Urine (24 Hrs).jarUrine (Rando	(1st/ 2nd/ 3rd
/ 1st Morning)a	aFilter Paper
Stool (1st/ 2nd/ 3rd)	Bone Marrow

Any Others* _____

*Mention Type / Site of Sample Collection

Please Note: After completion of the ordered tests, the remaining sample may be stored and used for research in medical sciences.

I/ We agree to receive information or to be contacted through mail, telecommunication, electronic & personal means from Diagno Labs and related group companies, time to time.

Signature / Thumb impression of patient

Date: _____

Alok

Signature of Requisitioner

Date: _____

SPAN

Partners in Care™
Transfusion Services Diagnostics Genomics

PUB055183 TRF
SAKSHI RAMESH NISAR19/F



PUB055183

BILL TO:

***Client Code:
Name Address C019815

Phone No.: _____

Email ID: _____

DC Code: _____

*** Referring Doctor:

Doctor's Name: Dr. Swapnil Tajane.

Phone No.: _____ City _____

Email ID: _____

Specimen Information

Date & Time of sample Collection: 5-11-2014 Time AM / PM

For Repeat / Add on Test / Follow-up Patient

Old Lab Ref No.: _____

Essential Clinical Information
(Please fill in whatever is relevant)

1) Provisional diagnosis: _____

2) H/o Medication: _____

if yes, Name & Dose: _____ Yes / No

3) Status of Medication: Ongoing / Terminated

if ongoing, Duration: _____

if terminated, When: _____

4) LMP (where applicable): A 22663957

5) Fasting Period _____

6) 24 Hour Urine Volume _____

7) For Genome studies attach detailed history

8) Attach other relevant information

22663958

Received in Diagno Lab: B. 22663958

Date & Time: _____

Courier Barcode No. _____

No. of Samples received: _____

Any Discrepancy noted (if yes - record details): _____

Initials of Sample Receiving Staff: CM 196Pr

IMPORTANT : It is mandatory to provide all the requested information to enable accurate and timely reporting.

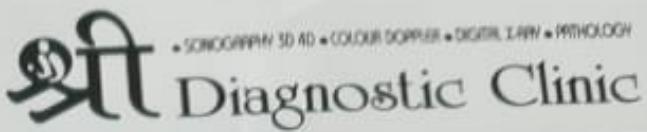
*** Mandatory field

Dr. Ranjeet D. Ghatge

MBBS, DMRE

Reg. No.: 2001/02/1106

Consultant Sonologist & Radiologist



Shop No. 5 & 6, Manikmoti Complex, C-2 Wing, Pune-Satara Road, Katraj, Pune-411046. Tel.: (020) 24371800

Name: SAKSHI RAMESH NISARGANDHA
Ref By: DR. SWAPNIL GULABRAO TAJANE

Date: 03-Nov-2021
Study: ABDOMEN PELVIS USG

USG: ABDOMEN & PELVIS

Liver is normal in size, shape and echotexture. No focal lesion seen at present. Intrahepatic biliary radicals and portal vein radicals appear normal. Portal vein measures 11 mms. CBD measures 2 mms.

Gall bladder is well distended with normal wall thickness. No calculi or changes of cholecystitis.

Pancreas appears normal in size, shape and echopattern. No focal lesion seen. Pancreatic duct is of normal caliber.

Spleen appears normal in size, shape & echopattern. No focal lesion seen.

E/o 42 x 8 mm inflammed aperistaltic tubular blind bowel loop noted in right iliac fossa with minimal free fluid around it and probe tenderness over it.

Right Kidney: 92x40 mm. Left Kidney: 90x42 mm.
No signs of obstruction or large calculus are seen. C-M differentiation is maintained.

Urinary bladder is distended and normal. No obvious intraluminal focal lesion noted.

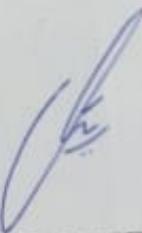
Uterus measures 83x40x43 mms. Endo echo is 8 mms. No focal lesion noted. Right ovary shows 4.7 x 4.4 cm cyst with thin internal septations. Left ovary measures 26x19 mms.

SUMMARY:

E/o 42 x 8 mm inflammed aperistaltic tubular blind bowel loop noted in right iliac fossa with minimal free fluid around it and probe tenderness over it. These findings are in favour of some inflammatory bowel pathology in rif, most likely appendicitis.

Right ovary shows 4.7 x 4.4 cm cyst with thin internal septations.

May I suggest a clinical corelation.



Dr. RANJEET DUSHYANT GHATGE