

Patient Name:	LASKAR.SURANA BEGUM	Gender/Age:	F/17Y
Patient ID:	1411/24	Date of Service:	24/21/09
Referring MD:		Modality :	MR

Final Report

MRI of the right knee. September 21, 2024 at 1803 hours

Clinical History: Swelling in upper leg.

Technique: Multiplanar multiecho sequences through the right knee were obtained without intravenous contrast.

Sagittal: MPR T2 STIR

Coronal: MPR T2 T1 TSE

Findings:

Large extra articular extra synovial expansile polypoidal lesion arising from the posterior aspect of the neck of fibula with medullary continuity. The lesion is away from the knee and superior-tibio-fibular joint.

The lesion has a fatty core consistent with medullary continuity with peripheral T1 intermediate and T2 hyperintense cap of maximum thickness 14 mm. No diffusion restriction.

There is no periosteal reaction or fracture.

No soft tissue component.

The posterior tibial vessels are displaced medially. No other obvious compression of neurovascular bundles. No myofascial edema.

Mild knee joint effusion with small Baker's cyst.

There is no fracture or osteonecrosis. The menisci, cruciate and collateral ligaments are intact.

Extensor mechanism is preserved. Articular cartilage in the medial and lateral femorotibial and patellofemoral compartments is relatively preserved.

Impression:

Large extra articular extra synovial expansile polypoidal lesion arising from the posterior aspect of the neck of fibula with medullary continuity. The lesion is away from the knee and superior-tibio-fibular joint.

The lesion has a fatty core consistent with medullary continuity with peripheral T1 intermediate and T2 hyperintense cap of maximum thickness 14 mm. No diffusion restriction.

There is no periosteal reaction or fracture.

No soft tissue component.

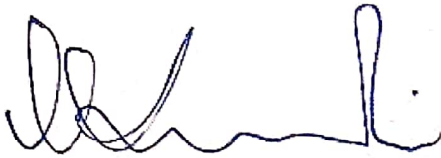
The posterior tibial vessels are displaced medially. No other obvious compression of neurovascular bundles. No myofascial edema.

Mild knee joint effusion with small Baker's cyst.

Features suggestive of osteochondroma with cartilage cap measuring about 14 mm in maximum thickness.

DEPARTMENT OF RADIOLOGY

Patient Name:	LASKAR.SURANA BEGUM	Gender/Age:	F/17Y
Patient ID:	1411/24	Date of Service:	24/21/09
Referring MD:		Modality :	MR



Report has been signed by: Kulkarni, DNB.Madhav



Regd. Office: 3rd floor, V.K. Trade Centre, Opp. Downtown Hospital, Guwahati - 781022, Assam
Ph: +91-90852 02020 | E: info@accf.in | W: www.assamcancercarefoundation.org | CIN U74999AS2017NPL018256
For Cancer Related Query Call 18003454325 (Toll Free) | 94356 47725
Centres: Dibrugarh* (PEH-2023-2243) | Barpeta | Jorhat | Tezpur | Lakhimpur | Darrang | Kokrajhar | Silchar | Diphu





SILCHAR CANCER CENTRE

Demographical Details

UHID	: SCL01.2400001411
Name	: MS.SURANA BEGUM LASKAR
Date of Reg	: 21-09-2024, 05:49:pm
Age & Sex	: 17Y8M25D, Female
Address	: Jaydhabn Pur ;Lailapur
District	: CACHAR
Country	: INDIA
Phone	: 7099972821
Alternate number	: 6002404479
Doctor	:
Company	: BPL(SCL)
Nationality	: INDIAN

Next Of Kin Details

Name	: Rahim Uddin Laskar
Relation	: Son-in-Law
Phone	: 6002404479





SILCHAR CANCER CENTRE

Cash Receipt (Original Copy)

Name : MS.SURANA BEGUM LASKAR

UHID

: SCL01.2400001411

Age/Sex : 17 Years/Female



Gaurdian : Atab Uddin Laskar

Date

: 21-09-2024

Address : Jaydhaba Pur

Contact No

: 7099972821

Receipt No : R/SCL/24-25/5265

Bill No

: SCL/OCS/24-25/5219

Payor : Patient

Consultant

:

Sl.No	Particulars	Unit	Amount(Rs)
OPD Services			
1	Registration Fee []	1	10.00
Gross Amount			10.00
Amount Paid			10.00

Received with thanks from / on-behalf of MS.SURANA BEGUM LASKAR an amount of Ten Rupees only
(By Cash :10.00)

Remarks :

Signature

Created By : HilloTP23

Printed By : HilloTP23

21-09-2024 17:54:25



**SILCHAR CANCER CENTRE****Cash Receipt (Original Copy)**

MRD NAME : MS.SURANA BEGUM LASKAR Bill No. : SCL/OCS/24-25/5223
Age/Sex : 17 Years/Female clinician : .Rmo .
Corporate : BPL(SCL) Category : Cash
Address : Jyithabn Pur Date : 21-09-2024
Mobile No : 7099972821 Rad ology ID : 141406
MRD ID. : SCL01.2400001411

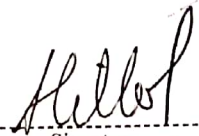
Sl.No	Particulars	Unit	Amount(Rs)
1	MRI RD0209 - MRI DIFFUSION (ADDITIONAL CHARGE) [.Rmo.]	1	980.00
2	Film charges RD0283 - RADIOLOGY FILM (14*17) [.Rmo.]	2	220.00

Gross Amount 1,200.00
Net Amount 1200.00
paid Amount 1200.00
Balance Amount 0.00

DELIVERED

Received with thanks from / on-behalf of MS.SURANA BEGUM LASKAR an amount of One thousand Two Hundred Rupees only
(By Cash :1,200.00)

Remarks :


Signature

Created By : HemkantiTP22

Printed By : HemkantiTP22

21-09-2024 19:04:05

6900874276

Patient Name:	LASKAR.SURANA BEGUM	Gender/Age:	F/17Y
Patient ID:	1411/24	Date of Service:	24/21/09
Referring MD:		Modality :	MR

Final Report

MRI of the right lower extremity. September 21, 2024 at 1803 hours

Clinical History: Swelling in upper leg by brith, pain in right lower limb no history of fall or injury.

Technique: Multiplanar multiecho sequences through the right lower extremity were obtained without intravenous contrast.

Findings:

Large extra articular extra synovial expansile polypoidal lesion arising from the posterior aspect of the neck of the fibula with medullary continuity. The lesion si away from the knee and superior-tibio-fibular joint.

The lesion has a fatty core consistent with medullary continuity with peripheral T1 intermediate and T2 hyperintense cap of maximum thickness 14mm. No diffusion restriction.

There is no periosteal reaction or fracture.

No soft tissue component.

The posterior tibial vessels are displaced medially. No other obvious compression of neurovascular bundles. No myofascial edema.

Mild knee joint effusion with small Baker's cyst.

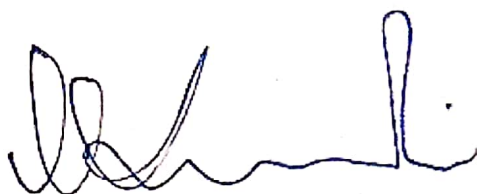
There is no fracture or osteonecrosis.

The soft tissues are unremarkable.

Impression:

1. Large extra articular extra synovial expansile polypoidal lesion arising from the posterior aspect of the neck of the fibula with medullary continuity. The lesion si away from the knee and superior-tibio-fibular joint.
2. The lesion has a fatty core consistent with medullary continuity with peripheral T1 intermediate and T2 hyperintense cap of maximum thickness 14mm. No diffusion restriction.
3. No periosteal reaction or fracture.
4. No soft tissue component.
5. The posterior tibial vessels are displaced medially. No other obvious compression of neurovascular bundles. No myofascial edema.
6. Mild knee joint effusion with small Baker's cyst.
7. Features suggestive of osteochondroma with cartilage cap measuring about 14 mm in maximum thickness.

Patient Name:	LASKAR.SURANA BEGUM	Gender/Age:	F/17Y
Patient ID:	1411/24	Date of Service:	24/21/09
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Report has been signed by: Kulkarni, DNB.Madhav

DEPARTMENT OF PATHOLOGY
SILCHAR MEDICAL COLLEGE
SILCHAR

Paying Non-Paying

SURGICAL & GYNAECOLOGICAL PATHOLOGY REQUISITION FORM

Name Susana Begum Laskar
Age 17 yrs Sex Female Race _____
Occupation _____

Address/Ward, Bed no. Ortho-III, Bed no-06

Hospital Regd.No. 20240224233

Laboratory Reference _____

Regd.No. _____

Date of Receipt _____

Date of Reporting _____

M.R.D. No. 2024 39559

Physician / Surgeon Dr. F. A. Choudhury

Clinical Notes

a) Mode of Origin.

b) Rate of Growth.

c) Time of first Appearance.

d) Nature of Specimen.

e) Any other relevant points, viz. Menstrual History etc.

Description of Specimen :-

a) Locality :- Right fibula

b) Size:- 10x 10 cm

c) Shape :-

d) Consistency:- Hard

e) If Capsulated :-

f) Any other features :-

If adherent to the neighbouring structures :-

if any neighbouring lymph nodes involved?

Which groups? Any sign of general dissemination.

Additional informations which might help diagnosis.

Removed by Operation/Postmortem

Clinical Diagnosis : Excisional biopsy
Osteochondroma of right fibula

Nature of Examination and opinion required. HPE of bony cartilaginous tissue
of right proximal fibula

Date of despatch : 27/09/24

Countersigned by
V.S./V.P.

Dr. S. G. Prasad
Ortho PGT,
Signature of
Registrar/Resident Surgeon

- Please give us as much information as possible, insufficient informations means delay.
The Surgeon may himself select the portion required for section.
Fix immediately on removal and use plenty of fixative and do not use to small a container.

