



TEST REQUISITION FORM (TRF)


Patient Details (PLEASE FILL IN CAPITAL LETTERS ONLY):

Name : Sayara musawar

Age : 15 Yrs : _____ Months _____ Days

Sex : Male Female Date of Birth : 00 00 2000

Ph : _____

Client Details :

SPP Code SD - 044

Customer Name _____

Customer Contact No _____

Ref Doctor Name Dr. Shiva

Ref Doctor Contact No Dr. Shivaji Salunkhe

Specimen Details:

Sample Collection date :	Specimen Temperature :	Sent	Frozen (<-20°C) <input type="checkbox"/>	Refrigerator (2-8°C) <input type="checkbox"/>	Ambient(18-22°C) <input type="checkbox"/>
		Received	Frozen (<-20°C) <input type="checkbox"/>	Refrigerator(2-8°C) <input type="checkbox"/>	Ambient (18-22°C) <input type="checkbox"/>

Test Name / Test Code	Sample Type	SPL Barcode No
<u>Specimen</u>		
<u>Extra Large Biopsy.</u>		
		<u>13 3593557</u>

Clinical History:

Note: Attach duly filled respective forms viz. Maternal Screening form(for Dual, Triple & Quad markers), HIV consent form, Karyotyping History form, IHC form, HLA Typing form along with TRF.

No. of Samples Received:

Received by:

Progress Note & Treatment Sheet

— Ca breast (R)

Date & Time	Progress Note & Treatment
<p>07/11/15</p> <p>50-044/55X B359355</p>	<p>Mrs. Savara Mugalwar</p> <p>4571F</p> <p>Pt = 1990 @ breast (R), patient underwent left modified radical mastectomy</p> <p>Specimen.</p> <p>*. Entire breast + axillary lcn I, II (4N₃)</p> <p>1 6/2</p>

Dr. Shivaji Salunke
 Consultant Surgical Oncologist
 M.B.B.S., DNB General Surgery
 DrNB Surgical Oncology
 FMAS, FALS (Robotic Surgeon)
 MMC 2024020762

HISTOPATHOLOGY REPORT

Patient Name : Sayara Mujawar
 Age / Gender : 50 Years / Female
 Physician : Dr. Abhijeet A. Kokate
 Customer : MCC18169-Oncorelife healthcare Pvt Ltd
 Report Date : 03-11-2025 09:37 PM
 Test Name : SMALL BIOPSY FOR HISTOPATHOLOGY

Order ID : 1501284
 Sample ID : 9506926
 Collection Date : NA
 Sample Received Date : 30-10-2025 10:30 PM
 Report Status : Final

Sample Details

Lab/Biopsy No : MBH-6404-25
 Clinical Details : (L) Breast lump. BIRADS IV.
 Specimen Received : Core biopsy.
 Gross Examination : Specimen consists of multiple tiny white tissue bits measuring 0.1 - 0.7cm in length. All embed.
 (Grossing done by Dr. R T).

Result
MICROSCOPIC DESCRIPTION

Section shows cores of fibrous tissue containing breast ducts along with hyalinized cores admixed with crushed nests and dispersed atypical epithelial cells, morphology not clearly made out. Patchy necrosis seen.

IMPRESSION:

Atypical cell clusters seen. Highly suggestive of carcinoma - Core biopsy. (L) Breast.
 Extensive tissue crushing seen, limiting definite opinion.
 A repeat biopsy for confirmation and IHC is recommended.

COMMENTS:

NOTE : This biopsy is not suitable for IHC.



HISTOPATHOLOGY REPORT

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Physician	Dr. Abhijeet A. Kokate	Collection Date	NA
Customer	MCC18169-Oncorelife healthcare Pvt Ltd	Sample Received Date	30-10-2025 10:30 PM
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- Laboratory results should be used with other clinical information to determine a final diagnosis.
- In case of unexpected test results please contact the laboratory. We will investigate and repeat analysis if possible.
- The medical report must be viewed and reproduced as a whole
- This medical report is not intended for medico-legal purposes.
- The medical report is to be interpreted and used by medical personnel only
- Assays are performed and reported in accordance with the stated schedule.
- The results of a laboratory test are dependent on the quality of the sample as well as the assay procedure.
- The remaining specimens (if any) will be discarded after one month from the date of report release.
- A requested test may not be carried out if:
 - Sample is insufficient or inappropriate
 - Sample quality is unsatisfactory
 - Request for testing is withdrawn by the ordering doctor or patient
 - There is discord between the labelling of the sample container and the name on the test requisition.
- For any query contact customer support : +91(0)8067154932/33



Name : MRS. SAYRA FATARU MUJAWAR
Ref By : Dr. R. K. CHAAUDHRI MADAM

Age/Sex : 50 YEARS/F
Date : 22 Oct 2025

ULTRASOUND OF BREAST

Dense fibro fatty glandular tissue, obscuring the vision.

RIGHT BREAST :

The four quadrant of the right breast have been scanned. Normal appearance and distribution of fibro glandular breast parenchyma. No e/o asymmetry or distortion. There is no evidence of cystic or solid mass lesion. There is no evidence of right axillary lymphadenopathy. Right axillary tail, areolar and retro areolar regions appears normal.

LEFT BREAST :

Left breast shows fibro-fatty breast parenchyma. Ill defined, hetero-echoic, solid, lesion with speculated margins, measuring about 2.8x2.7x2.1 cm in size, is seen in left breast parenchyma situated at 12 o'clock to 2 o'clock position in left upper quadrants, approximately 2 cm from nipple areola complex. It is taller than wider. Central portion of this lesion shows mild vascularity on doppler images. Anteriorly it is seen extending upto the subcutaneous plane. There is loss of normal fat planes between the lesion and retro-mammary tissue.

IMPRESSION: USG study reveals,

- Ill defined, hetero-echoic, solid, lesion with speculated margins in left breast parenchyma situated at 12 o'clock to 2 o'clock position - as described above. Findings suggest possibility of neoplastic etiology. Ultrasound BIRADS IV A. Needs histopathological correlation.
- No e/o necrotic axillary lymphadenopathy on either side.

Thank you for the opportunity to participate in the care of this patient


DR. AMIT BHALKE
DNB
CONSULTANT RADIOLÓGIST