



TEST REQUISITION FORM (TRF)



Patient Details (PLEASE FILL IN CAPITAL LETTERS ONLY):

Name : Firoj Bagwan

Age : 43 Yrs : _____ Months _____ Days

Sex : Male ☒ Female ☐ Date of Birth :

Ph : _____

Client Details :

SPP Code 50-044

Customer Name _____

Customer Contact No _____

Ref Doctor Name Dr. Shikhi Salunke

Ref Doctor Contact No _____

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"/>
Sample Collection Time : AM / PM		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> Extra Large Biopsy. [L + Commando]		B4170029.

Clinical History:

No. of Samples Received:

Received by:

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.

Progress Note & Treatment Sheet

- Ca (M) lower
abdomen

Date & Time

Progress Note & Treatment

08/11/25 Mr. Vinod Bagwan
(43 yr / M)

B4270029
50-044

Pt. (43 yr) Ca (M) lower
abdomen

↓

Patient underwent

(M) Composite resection

[WLE of
(P) + Segmental
Mandibulotomy]

+ MND (D)

specimen for H&E

D. Singh

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	Firoj Bagwan	Order ID	1507037
Age / Gender	43 Years / Male	Sample ID	9519809
Physician	Dr. Abhijeet A. Kokate	Collection Date	NA
Customer	MCC18169-Oncorelife healthcare Pvt Ltd	Sample Received Date	04-11-2025 07:26 PM
Report Date	06-11-2025 11:21 PM	Report Status	Final
Test Name :	SMALL BIOPSY FOR HISTOPATHOLOGY		

Sample Details

Lab/Biopsy No : MBH-6527-25

Clinical Details : Non healing ulcer in (R) lower alveolus since few months.

Specimen Received : Biopsy.

Gross Examination : Specimen consists of multiple gray brown soft tissue fragments measuring 0.3 - 0.7cm. All embed.
(Grossing done by Dr. R T).

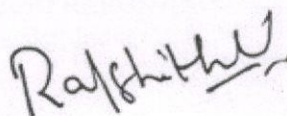
Result

MICROSCOPIC DESCRIPTION

Section shows tissue having Squamous cell carcinoma, grade 1. Surrounding stroma is fibrous and shows mild chronic inflammation.

IMPRESSION:

Squamous cell carcinoma, grade 1 - Biopsy. (R) Lower alveolus.



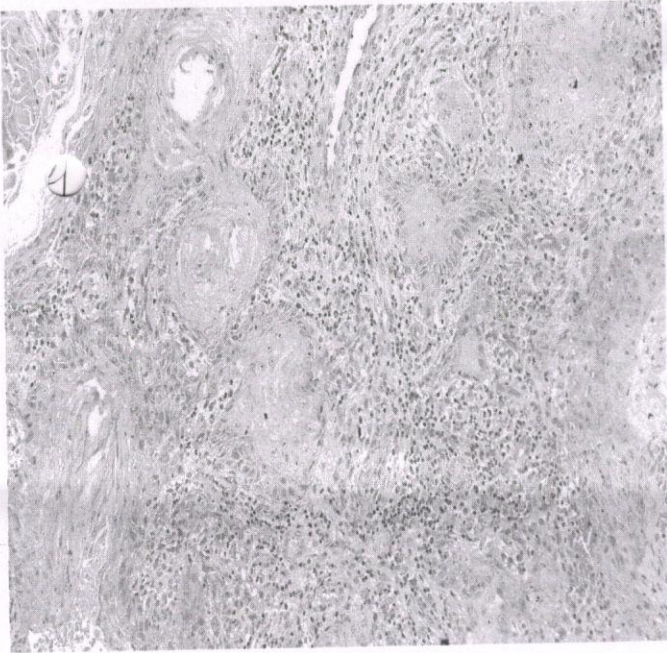
Dr. Rakshith V
Consultant Histopathologist
KMC95334



HISTOPATHOLOGY REPORT

Patient Name	Firoj Bagwan
Age / Gender	43 Years / Male
Physician	Dr. Abhijeet A. Kokate
Customer	MCC18169-Oncorelife healthcare Pvt Ltd
Report Date	06-11-2025 11:21 PM
Test Name :	SMALL BIOPSY FOR HISTOPATHOLOGY

Order ID	1507037
Sample ID	9519809
Collection Date	NA
Sample Received Date	04-11-2025 07:26 PM
Report Status	Final



End of Report

CONDITIONS OF LABORATORY TESTING AND REPORTING
Medgenome Labs Ltd, Bangalore, Karnataka, India



HISTOPATHOLOGY REPORT

Patient Name Firoj Bagwan
Age / Gender 43 Years / Male
Physician Dr. Abhijeet A. Kokate
Customer MCC18169-Oncorelife healthcare Pvt Ltd
Report Date 06-11-2025 11:21 PM
Test Name : SMALL BIOPSY FOR HISTOPATHOLOGY

Order ID 1507037
Sample ID 9519809
Collection Date NA
Sample Received Date 04-11-2025 07:26 PM
Report Status Final

- 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





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Ph. : 0217-299 2611 / 9923463388
Email : solarismedicare@gmailcom

Patient Name: FIROJ BAGWAN Scan Number: 20251103/020

Age: 43 **Sex:** Male

Date: 03/11/2025

Referred By:- Dr Shivaji Salunke, Barshi Cancer Hospital, Barshi.

Clinical Indication:- Carcinoma Right Buccal Mucosa – For evaluation of disease status.

WHOLE BODY PET CT IMAGING REPORT

PROCEDURE:-

10 mCi of 18F Fluoro Deoxy Glucose (FDG) was injected IV in fasting status. One hour later Whole body PET CT Imaging (Head to mid-thigh) was performed on a GE Discovery PET16 slice CT scanner. Oral and IV contrast not given for CT study.
Standardized Uptake Value (SUV) calculated for body weight and expressed as g/ml.
Fasting Blood Sugar: 100 mg / dl

PET CT FINDINGS:-

* Normal physiological FDG uptake seen in brain, pharyngeal tonsils, vocal cords, myocardium intestinal loops, kidneys & urinary bladder.

Brain:

- * Brain parenchyma appears normal in attenuation. Grey White differentiation is maintained.
- * Brain stem is normal. Basal cisterns and subarachnoid spaces are normal.
- * Cerebellum is normal.
- * Lateral, IIIrd & IVth ventricles appear normal. CSF spaces are unremarkable.
- * There is no evidence of any space occupying lesion/ mass effect or midline shift/ hemorrhagic pathology/ abnormal FDG tracer uptake in the supratentorial or infratentorial region.

Head & Neck:

- * Abnormal focal increased FDG tracer uptake noted in heterogeneously enhancing ill-defined soft tissue density lesion involving right gingivobuccal region causing lytic destruction of distal body and ramus of right mandible, lesion measures 67 x 38 mm (SUV Max 11.4)
- * Abnormal focal increased FDG tracer uptake noted in enlarged cervical level IA & right level IB lymph nodes, largest measuring 19 x 13 mm (SUV Max 7.8).
- * Oropharynx, nasopharynx, laryngopharynx & thyroid gland appear normal.
- * Common carotid artery and internal jugular vein appear normal.

Thorax:

- * Lung fields appear clear. No focal lesion.
- * No significant mediastinal lymphadenopathy.
- * Cardia and major vessels are normal.
- * No pleural or pericardial effusion.

Abdomen & Pelvis:

- * Gallbladder, spleen, liver and pancreas appear normal.
- * Adrenals, kidneys and urinary bladder appear normal.
- * No retroperitoneal mass lesion.
- * No significant abdominopelvic lymphadenopathy.
- * Contrast filled bowel loops are normal.

*For complaints and suggestions,
Please feel free to call or write us at*

Interpretation of the scan should be done in correlation with the clinical



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Ph. : 0217-299 2611 / 9923463388
Email : solarismedicare@gmailcom

Patient Name: FIROJ BAGWAN **Scan Number:** 20251103/020
Age: 43 **Sex:** Male
Date: 03/11/2025
Referred By:- Dr Shivaji Salunke, Barshi Cancer Hospital, Barshi.

Musculoskeletal:

* No evidence of any abnormal FDG tracer uptake seen in skeleton imaged up to mid thigh.

CONCLUSION:-

* FDG AVID HETEROGENEOUSLY ENHANCING ILL-DEFINED SOFT TISSUE DENSITY LESION INVOLVING RIGHT GINGIVOBUCAL REGION CAUSING LYTIC DESTRUCTION OF DISTAL BODY AND RAMUS OF RIGHT MANDIBLE – SUGGESTIVE OF METABOLICALLY ACTIVE PRIMARY MALIGNANCY.

* FDG AVID ENLARGED CERVICAL LEVEL IA & RIGHT LEVEL IB LYMPH NODES – SUGGESTIVE OF LYMPH NODAL METASTASES.

WARRANTS CLINICAL & HISTOPATHOLOGICAL CORRELATION.

* NO EVIDENCE OF ANY OTHER FDG AVID LYMPH NODAL / DISTANT METASTATIC DEPOSITS.

Dr.PAVAN SHEVGAN
MBBS,DMRE,DNB(NUCLEAR MED), MNAMS

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