



KIMS102306060097

Discharge Summary

Dept. of EMERGENCY MEDICINE

General Information

Head of the Dept :	Admitting Doctor/ Consultant :	Dr Rasananda Polei
Unit :	D.O.A :	June 8, 2023 6:15:53 PM
Unit Head :	D.O.D :	Jun 19, 2023 11:06 AM
Name of Patient :	IP No :	ADNKIMS10230608092
Age/Sex :	Mobile No :	
13 Yrs 8 Mnth 9 Days / FEMALE		
Address :		boinda Angul Odisha INDIA

Patient's History

Clinical Profile:

A 13 year old female patient came with complaints of fever, rash and bilateral knee and elbow joint pain with swelling for 12 days. Rashes increased during fever spikes.

No history of vomiting, loose stool, cough, cold and burning micturition.

PAST HISTORY- H/o COVID 19 infection 1 month back
no similar episodes in past

no history of prior hospitalization

MENSTRUAL HISTORY- attained menarche 3 years back, regular cycle, no history of dysmenorrhea.

FAMILY HISTORY- not significant

IMMUNISATION HISTORY- immunized till age as per NIS

DEVELOPEMENT HISTORY- as per age

ALLERGY HISTORY - no allergy

GENERAL PHYSICAL EXAMINATION: -

No Pallor, Icterus, cyanosis, edema, lymphadenopathy

VITALS:

BP - 116/80mmHg

PR- 104/min

"Healthcare with Healing Touch"

Kushabhadra Campus (KIIT Campus - 5), Patia, Bhubaneswar - 751024, Odisha, India
For hospital information (Hello KIMS) : 0674-2304400, 7111000, Ambulance : 0674-7105399, 7440070010
24x7 Emergency (Casualty) : 0674-2725228, 7105354, E-mail : info@kims.ac.in, Website : www.kims.ac.in

For next appointment :
Contact - 0674-7111000

For next visit :
Date : Time :



**Kalinga Institute of Medical Sciences (KIMS)
Pradyumna Bal Memorial Hospital**



KIMS102306060097

RR- 24/min
SPO2%- 98% at RA
Temp- 102F

SYSTEMIC EXAMINATION:
CVS- S1S2+ NO MURMUR
RS- B/L AE +, B/L VBS+,
CNS-ALERT, ACTIVE
P/A- SOFT, NON-TENDER, NON DISTENDED

Local examination- maculopapular rashes all over body.

Investigations- Enclosed
Anthropometry -
Weight- 77kg
Height-149 cm
BMI- 36 (obese)

FINAL DIAGNOSIS- MULTISYSTEM INFLAMMATORY SYNDROME WITH OBESITY

Final Diagnosis

SARS-COV-2:

SURGERY/(if any)/Course in the hospital:

The patient came with the above mentioned complaints, vitals were stable, relevant investigations sent and she was started conservatively on antibiotics (Tab AMOXYCLAV 625 given for 4 days) and other supportive measures. I/V/O suspected connective tissue disorder, RHEUMATOLOGY consultation taken and relevant investigations (ANA profile, RF) done which came to be normal. I/v/o fever spike not subsiding antibiotics upgraded to INJ XONE given for 4 days. Since the patient had history of covid infection 4weeks back and all infections were ruled out, criteria for MIS-C fulfilled. The patient was started on TAB OMNACORTIL as advised from RHEUMATOLOGY. OBESITY workup done. The patient is afebrile for 5 days and is being discharged in hemodynamically stable state.

SURGERY NAME

DATE

Type of Discharge:

Normal Discharge

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KIMS102306060097

Advice On Discharge

- Diet:** As advised by Dietician
Avoid fatty and junk food
- Follow up:** FOLLOW UP IN PAEDIATRIC OPD AFTER 7 DAYS WITH 2D ECHO REPORT ON TUESDAY OR THURSDAY OR AS AND WHEN REQUIRED.
FOLLOW UP IN RHEUMATOLOGY OPD AFTER 7 DAYS

2D ECHO TO BE DONE AFTER 1 WEEK AND AFTER 4 WEEKS.
- Physical activity:** Daily exercise for 30mins
- Medication:**
- 1.TAB OMNACORTIL 30MG IN THE MORNING AND 10MG IN THE EVENING AFTER FOOD FOR 5 DAYS
 - f/b TAB OMNACORTIL 30MG IN THE MORNING AND 5MG IN THE EVENING AFTER FOOD FOR 5 DAYS
 - f/b TAB OMNACORTIL 30MG ONCE DAILY IN THE MORNING AFTER FOOD FOR 5 DAYS
 - f/b TAB OMNACORTIL 25MG ONCE DAILY IN THE MORNING AFTER FOOD FOR 5 DAYS
 - f/b TAB OMNACORTIL 20MG ONCE DAILY IN THE MORNING AFTER FOOD FOR 5 DAYS
 - f/b TAB OMNACORTIL 15MG ONCE DAILY IN THE MORNING AFTER FOOD FOR 5 DAYS
 - f/b TAB OMNACORTIL 10MG ONCE DAILY IN THE MORNING AFTER FOOD FOR 5 DAYS
 - f/b TAB OMNACORTIL 5MG ONCE DAILY IN THE MORNING AFTER FOOD FOR 5 DAYS
- 2.TAB PAN 40 MG 1 TAB ONCE DAILY BEFORE BREAKFAST FOR 15 DAYS
 - 3.TAB ATARAX 25MG 1 TAB THRICE DAILY BEFORE FOOD FOR 5 DAYS.
 - 4.CALAPURE LOTION FOR LOCAL APPLICATION

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KIMS102306060097

Drug Name	Strength	Quantity	Instruction
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Miscellaneous(If any):

Investigations: Enclosed

LAB INVESTIGATIONS

Radiology Service
ECHO WITHOUT FILM

DATE
2023-06-11 11:32:55.723

Prepared By (Name & designation):

for Dr S. Sahu
Dr Ishani PGI

Dr Rasananda Polei
PAEDIATRICS
Admitting Doctor/Primary Consultant

Please understand your discharge prescription from your doctor before using the medicines.
You can contact Emergency Room Physician, KIMS HOSPITALS

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Kalinga Institute of Medical Sciences (KIMS) Pradyumna Bal Memorial Hospital



CENTRAL LABORATORY, KIMS
Lab Report : Biochemistry

MRN	KIMS102306060097	Specimen	SERUM
IP No	ADNKIMS10230608092	Visit Type	IP / IP-001
Name	Ms ABHIPSHA PATTANAIK	Sample No	2306170279
Age / Sex	13.8 Y / FEMALE		
Patient Location	O AND G TWIN SHARING CABIN/86B	Collected On	17/06/2023 06:58
Mobile No	9437662316	Referring Doctor	Dr. Rasananda Polei
Consulting Doctor	Dr. Rasananda Polei	Received On	17/06/2023 08:24
Department	EMERGENCY MEDICINE	Reported On	17/06/2023 10:49

Test Name	Result	Unit	Biological Reference Interval
LIPID PROFILE			
SERUM CHOLESTEROL (CHOD-POD)	151 N	mg/dL	Desirable: <200 border line: 200-239 high: ≥240
SERUM TRIGLYCERIDE (Enzymatic Colorimetric Test)	183 ↑	mg/dL	Desirable <150
SERUM HDL CHOLESTEROL (Direct Homogeneous Enzymatic Colorimetric – Dextran Sulfate)	18 ↓	mg/dL	Desirable >40
SERUM LDL CHOLESTEROL (Detergent based enzymatic colorimetric assay)	97 N	mg/dL	Desirable <130
SERUM V.L.D.L (Calculated)	37	mg/dL	2.0-30.0
CHOLESTROL HDL RATIO	9		
THYROID PANEL II (FT3, FT4, TSH 3RD)			
FT3 (Competitive Chemiluminescence)	2.60	pg/ml	adult and child: 2.10-4.40 pregnancy: 2.0-3.8 cord: 0.15-3.91
FT4 TCD vitros 5600) (Competitive Chemiluminescence)	<u>1.49</u>	ng/dL	Adults: 0.8-1.8 Pregnancy: First trimester: 0.7- 2.0 Second and third trimester: 0.5-1.6 Newborns (1-4 days): 2.2-5.3 Children (2 wks - 20 yrs): 0.8-2.0



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For next appointment : Contact - 0674-7111000	Page 1 of 2 Date : Time :	For next visit :
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MC-2776



Kalinga Institute of Medical Sciences (KIMS) Pradyumna Bal Memorial Hospital



CENTRAL LABORATORY, KIMS
Lab Report : Biochemistry

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IP No	ADNKIMS10230608092	Visit Type	IP / IP-001
Name	Ms ABHIPSHA PATTANAİK	Sample No	2306170279
Age / Sex	13.8 Y / FEMALE	Collected On	17/06/2023 06:58
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Mobile No	9437662316	Received On	17/06/2023 08:24
Consulting Doctor	Dr. Rasananda Polei	Reported On	17/06/2023 10:49
Department	EMERGENCY MEDICINE		

Test Name	Result	Unit	Biological Reference Interval
THYROID PANEL II (FT3,FT4,TSH 3RD)			
TSH (Con. : Fluorimetric) Chem: luminescence)	<u>2.523</u>	μIU/mL	Adults: - 18 - 60 yrs - 0.35 - 4.2 and >60yrs - 0.5 - 8.9 Pregnancy: - 1 trimester - 0.3 - 4.5 2 trimester - 0.5 - 4.6 3 trimester - 0.8 - 5.2 Pediatrics :- cord blood - 2.3 - 13.2 Birth to 4 days 1.0 - 39.0 2 - 20 wks - 1.7 - 9.1 21 wks - 18 yrs - 0.3 - 6.4 Premature infant - 0.5 - 29.0
CRP QUANTITATIVE (Immunoturbidometry Method)	38.4	mg/L	<5

← 155

--- End of Report ---



[Signature]

Performed By : Mr Biswajit Kar
Performed On : 17/06/2023 10:10

Result Certified By : Prof Dr. Sumit Jhajharia
M.DBiochem
Result Certified On : 17/06/2023 10:49



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For next appointment : Contact - 0674-7111000	Page 2 of 2 Date : Time :	For next visit :
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Lab Report : Biochemistry

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IP No	ADNKIMS10230608092	Visit Type	IP / IP-001
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Department	EMERGENCY MEDICINE	Reported On	17/06/2023 10:49

Test Name	Result	Unit	Biological Reference Interval
GLYCOSYLATED HEMOGLOBIN(HbA1C)	6.3	%	Non-Diabetic: (<5.7) Pre-Diabetic: (5.7 - 6.4) Diabetic: (>6.5)
ESTIMATED AVERAGE BLOOD GLUCOSE LEVEL (HPLC)	134.11	mg/dL	

Report Status : Final

--- End of Report ---



Performed By : Mr Biswajit Kar
Performed On : 17/06/2023 10:11

Result Certified By : Prof Dr. Sumit Jhajharia
M.DBiochem
Result Certified On : 17/06/2023 10:49



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 Page 1 of 1 of Fpr next visit :
 Date : Time :

Dr. Samarendra Nath Das

M.B.B.S. (Hons), M.D.(Jipmer)
Professor in Medicine
Ex-Faculty & HOD Medicine
Govt. Medical Colleges, Odisha

Mahatab Road
Cuttack - 12
☎ : 9437705461

16 AUG 2023

Ashya Patraik
HF 14
Boinda, Angul.

wt 78 kg
Pulse. 140/min
BP - 118/68

Post Covid

fever, chills, cough,
rash,
arthralgia,

eye burning
rash +
blanching
Cm (H)
no (H)

T.I.A : S & M's Disease

Chest xray (N)

USG abdomen - hepatomegaly

Cep 249 mg/L

Esr 120 mg

S. ferritin - 632

CBC Hb 10.5 TLC 19200

Urine R. (N) (H)

MP (ILT) - negative

Instal & folic 3439

17 AUG 2023

Curewell Lab

21050/1021
Mahatabad

Pulse - 108/min
rash +
fever +
BP - 110/70

Already
received
Corticosteroids
earlier

Senior Consultant in Medical Disorders & Complicated Diabetes.

Timing : 8 AM to 11 AM and 4 PM to 6 PM on week days (Subject to availability)

Appointment : Same day before 8 AM or 4 PM in Person

No Consultation on Saturdays & Sundays at Cuttack

Consultation possible in Bhubaneswar on weekends on prior appointment only.

BHAJANI MEDICAL STORE

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MAHATAB ROAD, CUTTACK - 753012, Mob. : 9937398715

P
①

Naprosyn 250 mg

0 0

1 tab three times
after food x 20 d

② Zofen 0.8n

1 cap 3x x 30 d

③ Folixon x 15 mg = 8.

1 tab once a week
every Friday.

④ Meganeston 20 plus

1 cap 1x
Sunday to Wednesday

25 AUG 2023

① Naprosyn .500

1 tab three x 20 d

②
③
④

to eat

⑤ Wysolone 10mg

1 tab 1x
1/2 tab 1x

03 OCT 2023
130/84

ESR 32, 26
CRP 7.4, 5.04

Urospas

0 0 1 tab three times x 30 d

Dr. Samarendra Nath Das

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Professor in Medicine
Ex-Faculty & HOD Medicine
Govt. Medical Colleges, Odisha

Mahatab Road
Cuttack - 12
☎ : 9437705461

22 NOV 2023

Abhishek Patraik
Age 14.
BBSR

Pulse. 108/min
209
BP. 104/66

DIAGNOSIS: Still's Disease

adv

ESR 48
CRP -64.9
CBC

Hb 11.6
TLC 16800
N 85%

Continue all
Wysolone 15mg

Senior Consultant in Medical Disorders & Complicated Diabetes.

Timing : 8 AM to 11 AM and 4 PM to 6 PM on week days (Subject to availability)
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MAHATAB ROAD, CUTTACK - 753012, Mob. : 9937398715



Regd. No. 17/1998



Certificate No. MC-2760
NABL ISO 15189 : 2012

CURE WELL LABORATORY

NABL ACCREDITED

A Unit of Advanced Curewell Laboratory & Diagnostics Pvt. Ltd.

Mangalabag, Cuttack-753001

Ph.: (0671) 2306114 / 2306344

Fax : (0671) -2306115

E-mail : cure_well@yahoo.com

Website : www.curewell.info

Name : ABHIPSA PATTNAIK
Age/Gender : 14 Years / Female
Refer By : Dr. Samarendra Nath Das
Sample Collected By : Main Branch

Reg. No. : 
230817CTRB069

Reg. Date : 17-Aug-23 10:38 AM

Received On : 17-Aug-23 10:38 AM

Reported On : 17-Aug-23 12:04 PM

Test Particular	Result	Unit	Biological Reference Interval	Methodology
E.S.R	110	mm	Normal (< 20)	WESTERGREN'S METHOD
CBC :- (Whole Blood EDTA) (BY DxH-800 Hematology Analyzer)				
Haemoglobin	10.5	gm%	Adult Men (13 - 18) Adult Women (11.5 - 16.5)	Photometric
P. C. V.	32.9	%	(35 - 45)	Electrical Impedance
Total Platelet Count	2.4	Lacs/cmm	(1.5-4.0)	Electrical Impedance
Total R. B. C. Count	4.1	Millions/uL	Women(4.2 - 5.4) Men(4.7 - 6.1) Children(4.6 - 4.8)	Electrical Impedance
Total W. B. C. Count	✓ 19,200	Per cmm	Adult :- (4,000 - 11,000) Children :- New Born(10,000 - 26,000) (1-4) Years :(6,000 - 18,000) (5-7) Years :(5,000 - 15,000) (8-12) Years :(4,500 - 12,500)	Electrical Impedance
M. C. V.	80.3	fl	(76 - 96)	Calculated
MCH	25.7	pg	(22 - 32)	Calculated
MCHC	32.0	g/dl	(30 - 35)	Calculated
DIFFERENTIAL COUNT :-				
Neutrophils	84 ✓	%		Microscopic
Eosinophils	02	%		Microscopic
Basophils	00	%		Microscopic
Lymphocytes	14	%		Microscopic
Monocytes	00	%		Microscopic



Scan To Verify

P.T.O.

Dr. S. Panda, M.D. (Bio)
Biochemist

Dr. Shreekanth Tiwari, M.D. (Micro)
Microbiologist

Dr. Sasmita Panda, M.D. (Path.)
Asso. Prof. A.H.R.C.C.


Dr. Basanti Mishra
M.D. (Path. & Bact.)
Dr. Basanti Mishra, M.D. (Path. & Bact.)
Chief Pathologist

- The results of the Supplied Sample are dependant upon the quality of the sample received in the lab.
- The results should be clinically correlated and the unexpected result may be repeated.



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230817CTRB069

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Received On : 17-Aug-23 10:38 AM

Reported On : 17-Aug-23 11:32 AM

Test Particular	Result	Unit	Biological Reference Interval	Methodology
C-Reactive Protein [CRP] (By Turbidimetric Assay)	248.97	mg/L	(< 6.0)	



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Reported On : 17-Aug-23 12:38 PM

Test Particular	Result	Unit	Biological Reference Interval	Methodology
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Malaria Parasite : - (By Immuno Chromato Test)

Plasmodium Falciparum	Negative			
Plasmodium Vivax	Negative			



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Test Particular	Result	Unit	Biological Reference Interval	Methodology
Serum Ferritin	✓ 652.5	ng/ml	Men(30 - 400) Women(13 - 150)	

Ferritin:-

Ferritin is a high molecular weight iron-containing protein in the body, that functions as a storage compound. The assessment of serum ferritin aids in the detection of iron deficiency at an early stage and over load states. It is also used to monitor the patient under iron therapy.

Serum ferritin is increased in the following :-

- Acute and chronic liver disease.
- Inflammation
- Malignancy
- Chronic renal failure
- Anemia other than iron deficiency

Ferritin levels are decreased:-

- Iron deficiency
- Haemodiolysis



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Reported On : 17-Aug-23 01:47 PM

URINE RM

Particular	Findings	Unit
PHYSICAL		
Colour	Yellowish	
Deposit	xx	
CHEMICAL		
Reaction	Acidic	
Sugar	Nil	
Albumin	Trace	
Phosphate	Nil	
MICROSCOPIC		
RBC	Nil	/HPF
Pus Cells	1-3	/HPF
Epith Cells	6-8	/HPF
Casts	Nil	/HPF
Crystals	Nil	/HPF
Yeast	Nil	
Bacteria	Nil	
Fat Globules	Nil	
Microfilaria	Nil	
Spermatozoa	Nil	/HPF

End Of Report

Printed On : 17-Aug-23 16:33:21

Printed By : Prasad

Printed From : Cuttack [Dispatch-4]

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CURE WELL LABORATORY

NABL ACCREDITED

A Unit of Advanced Curewell Laboratory & Diagnostics Pvt. Ltd.

Mangalabag, Cuttack-753001

Ph.: (0671) 2306114 / 2306344

Fax : (0671) -2306115

E-mail : cure_well@yahoo.com

Website : www.curewell.info

Name : ABHIPSA PATTANAIK
Age/Gender : 14 Years / Female
Refer By : Dr. Samarendra Nath Das
Sample Collected By : Main Branch

Reg. No. : 
230825CTRD048

Reg. Date : 25-Aug-23 10:52 AM

Received On : 25-Aug-23 10:52 AM

Reported On : 25-Aug-23 12:10 PM

Test Particular	Result	Unit	Biological Reference Interval	Methodology
Haemoglobin	10.3	gm%	Adult Men (13 - 18) Adult Women (11.5 - 16.5)	Photometric
E.S.R	120	mm	Normal (< 20) ,	WESTERGREN'S METHOD
Total W. B. C. Count	18,000	Per cmm	Adult :-(4,000 - 11,000) Children :- New Born(10,000 - 26,000) (1-4) Years :(6,000 - 18,000) (5-7) Years :(5,000 - 15,000) (8-12) Years :(4,500 - 12,500)	Electrical Impedance

DIFFERENTIAL COUNT :-

DIFFERENTIAL COUNT :-

Neutrophils	80	%	Microscopic
Eosinophils	02	%	Microscopic
Basophils	00	%	Microscopic
Lymphocytes	18	%	Microscopic
Monocytes	00	%	Microscopic

Scan To Verify



P.T.O.



Dr. Basanti Mishra
M.D (Path. & Bact.)

Dr. Basanti Mishra, M.D. (Path. & Bact.)
Chief Pathologist

Dr. S. Panda, M.D. (Bio)
Biochemist

Dr. Shreekanth Tiwari, M.D. (Micro)
Microbiologist

Dr. Sasmita Panda, M.D. (Path.)
Asso. Prof. A.H.R.C.C.

- The results of the Supplied Sample are dependant upon the quality of the sample received in the lab.
- The results should be clinically correlated and the unexpected result may be repeated.

Prince Line



Regd. No. 17/1998



Certificate No. MC-2760
NABL ISO 15189:2012

CURE WELL LABORATORY

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A Unit of Advanced Curewell Laboratory & Diagnostics Pvt. Ltd.

Mangalabag, Cuttack-7530
Ph.: (0671) 2306114 / 230634
Fax : (0671) -2306115
E-mail : cure_well@yahoo.com
Website : www.curewell.info

Name : ABHIPSA PATTANAIK
Age/Gender : 14 Years / Female
Refer By : Dr. Samarendra Nath Das
Sample Collected By : Main Branch

Reg. No. : 
230825CTRD048
Reg. Date : 25-Aug-23 10:52 AM
Received On : 25-Aug-23 10:52 AM
Reported On : 25-Aug-23 11:57 AM

Test Particular	Result	Unit	Biological Reference Interval	Methodology
C-Reactive Protein [CRP] (By Turbidimetric Assay)	227.20	mg/L	(< 6.0)	



End Of Report


Scan To Verify



Dr. S. Panda, M.D. (Bio)
Biochemist

Dr. Shreekant Tiwari, M.D. (Micro)
Microbiologist

Dr. Sasmita Panda, M.D. (Path.)
Asso. Prof. A.H.R.C.C.


Dr. Basanti Mishra
M.D (Path. & Bact.)
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Chief Pathologist

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Regd. No. : 90/2009

CURE WELL DIAGNOSTIC

Mangalabag, Kathagola Road, Cuttack-1

E-mail : cure_well@yahoo.com

Website : www.curewell.in

Name: ABHIPSA PATTNAIK

Age: 14 years

Sex: Female

Referred by: Prof. Dr. Samarendra Nath Das

Date: 17-Aug-2023

USG OF ABDOMEN & PELVIS

- LIVER:** Enlarged in size- 15.9 cm. Homogeneous echotexture. No IHBR dilatation. PV - normal in caliber. Hepatic veins appear normal.
- GB:** Anechoic lumen. Normal wall thickness.
- CBD:** Normal in caliber. Lumen anechoic.
- PANCREAS:** Normal in size and echogenicity. No calcification/MPD dilatation is seen.
- SPLEEN:** Size - 10.4 cm. Normal in echotexture. Splenic vein- normal.
- RIGHT KIDNEY:** Size - 9.3 x 4.3 cm. Cortical echogenicity appears normal. Cortico-medullary differentiation maintained. No hydronephrosis/calculus seen.
- LEFT KIDNEY:** Size - 10.3 x 5.0 cm. Cortical echogenicity appears normal. Cortico-medullary differentiation maintained. No hydronephrosis/calculus seen.
- PELVIS:** UB empty.
- UTERUS:** Not visualized.
- OVARIES:** B/L ovaries are not visualized.
- ROA:** No peritoneal collection seen. Bowel loops appear normal. No enlarged PA nodes seen.
- IMPRESSION:** **MILD HEPATOMEGALY.**

Sug: Follow up scan in full bladder.

Dr. P. D. Mangaraj (M.D)
Consultant Radiologist



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Website : www.curewell.info

Name : ABHIPSA PATTANAİK
Age/Gender : 14 Years / Female
Refer By : Dr. Samarendra Nath Das
Sample Collected By : Main Branch

Reg. No. : 
230904CTRA118

Reg. Date : 04-Sep-23 12:35 PM
Received On : 04-Sep-23 12:35 PM
Reported On : 04-Sep-23 02:35 PM

Test Particular	Result	Unit	Biological Reference Interval	Methodology
Haemoglobin	11.2	gm%	Adult Men (13 - 18) Adult Women (11.5 - 16.5)	Photometric
E.S.R	78	mm	Normal (< 20)	WESTERGREN'S METHOD
Total W. B. C. Count	19,000	Per cmm	Adult :-(4,000 - 11,000) Children :- New Born(10,000 - 26,000) (1-4) Years :(6,000 - 18,000) (5-7) Years :(5,000 - 15,000) (8-12) Years :(4,500 - 12,500)	Electrical Impedance

DIFFERENTIAL COUNT :-

DIFFERENTIAL COUNT :-

Neutrophils	80	%	Microscopic
Eosinophils	02	%	Microscopic
Basophils	00	%	Microscopic
Lymphocytes	18	%	Microscopic
Monocytes	00	%	Microscopic

P.T.O.

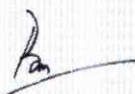
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Dr. S. Panda, M.D. (Bio)
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Microbiologist

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Chief Pathologist

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Name : ABHIPSA PATTANAIK

Age/Gender : 14 Years / Female

Refer By : Dr. Samarendra Nath Das

Sample Collected By : Main Branch

Reg. No. :



230904CTRA118

Reg. Date : 04-Sep-23 12:35 PM

Received On : 04-Sep-23 12:35 PM

Reported On : 04-Sep-23 01:27 PM

Test Particular	Result	Unit	Biological Reference Interval	Methodology
C-Reactive Protein [CRP] (By Turbidimetric Assay)	94.44	mg/L	(<6.0)	



End Of Report

Scan To Verify



Dr. S. Panda, M.D. (Bio)
Biochemist

Dr. Shreekanth Tiwari, M.D. (Micro)
Microbiologist

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Regd. No. 177 1998



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Mangalabag, Cuttack-75300

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Fax : (0671) -2306115

E-mail : cure_well@yahoo.com

Website : www.curewell.info

Name : **ABHIPSA PATTANAIK**

Age/Gender : 14 Years / Female

Refer By : Dr. Samarendra Nath Das

Sample Collected By : Main Branch

Reg. No. :



231003CTRD101

Reg. Date : 03-Oct-23 01:06 PM

Received On : 03-Oct-23 01:06 PM

Reported On : 03-Oct-23 01:32 PM

Test Particular	Result	Unit	Biological Reference Interval	Methodology
Haemoglobin	11.7	gm%	Adult Men (13 - 18) Adult Women (11.5 - 16.5)	Photometric
E.S.R	32	mm	Normal (< 20)	WESTERGREN'S METHOD
Total W. B. C. Count	10,200	Per cmm	Adult :-(4,000 - 11,000) Children :- New Born(10,000 - 26,000) (1-4) Years :(6,000 - 18,000) (5-7) Years :(5,000 - 15,000) (8-12) Years :(4,500 - 12,500)	Electrical Impedance

DIFFERENTIAL COUNT :-

DIFFERENTIAL COUNT :-

Neutrophils	67	%		Microscopic
Eosinophils	04	%		Microscopic
Basophils	00	%		Microscopic
Lymphocytes	29	%		Microscopic
Monocytes	00	%		Microscopic

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P.T.O.

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Chief Pathologist

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Biochemist

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Website : www.curewell.info

Name : ABHIPSA PATTNAIK
Age/Gender : 14 Years / Female
Refer By : Dr. Samarendra Nath Das
Sample Collected By : Main Branch



MC-2760

Reg. No. : 
231122CTRD101

Reg. Date : 22-Nov-23 11:14 AM

Received On : 22-Nov-23 11:14 AM

Reported On : 22-Nov-23 12:36 PM

Test Particular	Result	Unit	Biological Reference Interval	Methodology
E.S.R	48	mm	Normal (< 20)	WESTERGREN'S METHOD
CBC :- (Whole Blood EDTA) (BY DxH-800 Hematology Analyzer)				
Haemoglobin	11.6	gm%	Adult Men (13 - 18) Adult Women (11.5 - 16.5)	Photometric
P. C. V.	35.9	%	(35 - 45)	Electrical Impedance
Total Platelet Count	3.0	Lacs/cmm	(1.5-4.0)	Electrical Impedance
Total R. B. C. Count	4.2	Millions/uL	Women(4.2 - 5.4) Men(4.7 - 6.1) Children(4.6 - 4.8)	Electrical Impedance
Total W. B. C. Count	16,800	Per cmm	Adult :-(4,000 - 11,000) Children :- New Born(10,000 - 26,000) (1-4) Years :(6,000 - 18,000) (5-7) Years :(5,000 - 15,000) (8-12) Years :(4,500 - 12,500)	Electrical Impedance
M. C. V.	85.9	fl	(76 - 96)	Calculated
MCH	27.9	pg	(22 - 32)	Calculated
MCHC	32.4	g/dl	(30 - 35)	Calculated
DIFFERENTIAL COUNT :-				
Neutrophils	85	%		Microscopic
Eosinophils	02	%		Microscopic
Basophils	00	%		Microscopic
Lymphocytes	13	%		Microscopic
Monocytes	00	%		Microscopic

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P.T.O.

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Chief Pathologist

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Prince Line



No. 17/1998 Certificate No. MC-2760
NABL ISO 15189 : 2012

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E-mail : cure_well@yahoo.com
Website : www.curewell.info

Name : ABHIPSA PATTNAIK
Age/Gender : 14 Years / Female
Refer By : Dr. Samarendra Nath Das
Sample Collected By : Main Branch



MC-2760

Reg. No. : 

231122CTRD101

Reg. Date : 22-Nov-23 11:14 AM

Received On : 22-Nov-23 11:14 AM

Reported On : 22-Nov-23 12:26 PM

Test Particular	Result	Unit	Biological Reference Interval	Methodology
C-Reactive Protein [CRP] (By Turbidimetric Assay)	64.91	mg/L	(< 6.0)	



Scan To Verify



End Of Report



Dr. Basanti Mishra
M.D (Path. & Bact.)

Dr. S. Panda, M.D. (Bio)
Biochemist

Dr. Shreekanth Tiwari, M.D. (Micro)
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Prince Line

9 New
RBS

INSTITUTE OF MEDICAL SCIENCES & SUM HOSPITAL

(Faculty of Medical Sciences)
SIKSHA 'O' ANUSANDHAN
(DEEMED TO BE UNIVERSITY)

Kalinga Nagar, Ghatikia, Bhubaneswar-751003, Ph : 0674 - 2386281, 2386292, 6606200



OPD APPOINTMENT SLIP

PMRN : SUM.202311210854



202311210854

Patient Name	Ms. ABHIPSHA PATTNAIK	Reg Date	21-Nov-2023 15:39 PM
Age/Sex	14 Yrs 0 Mon 0 Day / Female	Visit Date	21-Nov-2023 15:39 PM
Department	IMMUNOLOGY AND RHEUMATOLOGY	Visit No.	1
Patient Type	GENERAL / SELF	Contact No.	9437662316
Doctor Name		Address	Khurda, Odisha, India
Print Date/Time:	21-11-2023 15:39:51		

Diagnosis New/No drug allergy (A) 1:50 PM
Coronabiditis neg RBS

Complaints wt 80kg
Still's - SJA / started Covid symptoms
Covid RT PCR +ve
Covid ab +ve
↓
MISC

Findings Fever / evanescent rash
Chest/abd

Investigation Polyarthralgia
H/O cervical LNIT
Hepatospleny - USG
2D/ecto N
RF/ANA neg

Treatment/Advice Given steroid 0.5mg/kg → Tapering
Flare in Aug
PDI 10mg + MTX

DR. RASMI RANJAN SAHOO
Associate Professor
Department of Clinical Immunology & Rheumatology
Regd. No-16861

FACILITIES AVAILABLE

- 24 Hrs service in Casualty & Emergency • All departmental Service including General Surgery • Neurosurgery • Laparoscopic Surgery • Paediatric Surgery
- Plastic Surgery • Nephrology • Obstetrics & Gynaecology • Cosmetic Surgery • Laser Therapy (Skin) • Orthopaedic & Trauma Surgery • Polio reconstruction Surgery
- Eye & ENT • Cornea replacement • ICU • NICU • Intertility Clinic • Haematology • TB & Chest • General Medicine • Endocrinology & Diabetes • Paediatrics
- Skin & VD • Cardiology • M.TB Culture • DOTS Therapy for TB (Free) • Endoscopy • Bronchoscopy • ECHO • USG • X ray • Digital Xray • CT Scan
- MRI Scan • Eye Bank • Blood Bank • Pathology • Microbiology & Biochemistry Lab • Pharmacy Physiotherapy • Modular OT • 24 hr. Ambulance Service
- Psychiatry • Pain Clinic • Dialysis • CTVS • Gastro Surgery

(ପୂନରାୟ ଆସିଲାବେଳକୁ ଏହି ଚିକିତ୍ସାପତ୍ର ସାଜାରେ ଆଣିବେ)

Signature of Doctor

Treatment/Advice:

R_x

currently active ds - (L+) wrist
 MCP square
 Knees/ankles
 T+

No fever
 Right +

chest NAD

10mg - morning
 10mg - night

- 1) T. folitrex (~~15~~) 1 tab on Friday
- 2) T. folvite (5) 1 tab on Saturday
- 3) T. Omnechel (10) - morning (8am)
 (5) - evening (6pm)
 after food
- 4) C. Par D 1 cap OD BF
- 5) T. Napresyn (500) 1 tab BD
 O/O AF
- 6) T. stelbel HD 1 tab OD
- 7) C. Uprese D3 (600)
 1 cap/week

Nutritional Advice:

Adx

(CBC, ESR, CRP)
 S. GOT/S. GPT
 S. creatinine
 S. ferritin

RAS

24/11/23

S. GOT/PT/CRP N
 S. ferritin 180.5

GENERAL CONSENT

I request & authorize hospital doctors & medical staffs to provide medical care & administer anything required for Diagnostic & Treatment procedures as per the judgment of the Doctors.

ମୁଁ ଏବଂ ମୋର ପରିବାର ସହିତ ଡାକ୍ତରମାନଙ୍କର ଚିକିତ୍ସା, ଅନ୍ୟାନ୍ୟ କର୍ମଚାରୀଙ୍କୁ ମୋର ନିକର ବା ମୋର ରୋଗୀ/ନବଜାତ ଶାଶୁ ନିମନ୍ତେ ଯଥୋଚିତ ଓ ଆବଶ୍ୟକୀୟ ନିଦାନ ଯଥା ଉଚିତ ପରାମର୍ଶ/ସୂଚନା, ବିପଦ ରହିତ କାର୍ଯ୍ୟବିଧି ଓ ଉପଚାର ପାଇଁ ଅନୁମତି ଓ ଅଧିକାର ପ୍ରଦାନ କରୁଅଛି ।

Review 3 weeks

CBC
 ESR
 S. GOT/S. GPT
 S. creatinine

Signature of Patient/ NOK

INSTITUTE OF MEDICAL SCIENCES & SUM HOSPITAL

(Faculty of Medical Sciences)

SIKSHA 'O' ANUSANDHAN

(DEEMED TO BE UNIVERSITY)

SUM CENTRAL LABORATORY

(NABL accredited laboratory)



Certificate No: H-2021-0814



MC-2239

Patient Name : Ms. ABHIPSHA PATTNAIK

UHID : 202311210854

Age/Gender : 14 Y(s) / Female

Mobile No. : 9437662316

Patient Type : OPD

Invoice No. : INV/107202311230008284



Lab Registration No : 2311230969

Sample Collected Date : 23-Nov-23 03:06 PM

Reporting Date : 24-Nov-23 09:33 AM

Report Type : Final

Investigation	Result	Unit	Biological Reference Interval
BIOCHEMISTRY			
CREATININE SERUM	0.53	mg/dl	(0.5 - 1.5)
Sample Type: SERUM Method: Jaffe's Methods- IDMS			
SGOT	18	Iu/L	(5 - 40)
Sample Type: SERUM Method: UV Without PSP IFCC			
Alanine Transaminase (SGPT)	16	Iu/L	(5.0 - 40.0)
Sample Type: SERUM Method: UV Without PSP IFCC			
SERUM FERRITIN	180.5	ng/ml	(30 - 400) Male (13 - 150) Female
Sample Type: SERUM Method: ECLIA			

Serum Ferritin contains 20-25% of Iron. Its concentration is a good measure

of iron stores in normal persons and individuals with iron deficiency. Ferritin level <10ng/ ml usually indicates iron deficiency anemia. Ferritin level >250ng/ml would normally indicate haemochromatosis, fasting, acute leukemia, inflammatory diseases etc.

-Plasma ferritin is a marker of the total amount of iron stored in the body, hence serum ferritin is used as a diagnostic test for iron-deficiency anemia.

-It is a useful, noninvasive screening test for iron overload, which may allow the detection of idiopathic hemochromatosis in the precirrhotic stages.

-The determination of ferritin has proved to be of value in liver metastasis.

-Ferritin is an acute phase reactant. It can be found to be elevated in the following conditions and do not reflect actual body iron stores like Inflammation, Significant tissue destruction, Liver diseases, Malignancies such as acute leukemia and Hodgkins disease, Therapy with iron supplements

Scan To Verify



Printed On: 24/Nov/23 13:19:17
By: Sanghamitra

Dr. PRACHI JENA
Assistant Professor (Biochemistry)

End Of Report

Page : 1 | 1

K-8, Kalinga Nagar, Bhubaneswar, Odisha

☎ : (0674) 6606200, Email: centrallab.ims@soa.ac.in

🌐 : www.ims.ac.in

N.B: This Report is not valid for Medicolegal Purpose / "If test results are not consistent with clinical observations, Please contact the laboratory for necessary action"