



BREACH CANDY HOSPITAL TRUST

CIN: U85100MH1946GAP005082

60-A, Bhulabhai Desai Road, Mumbai 400 026.

Telephone: 2366-7788, 2367-1888/2888

Email: info@breachcandyhospital.org; www.breachcandyhospital.org

Discharge Summary

Admission No :	IP-22090178	BH No :	BCH0861481
Name :	Mr PANKAJ MAHENDRA GUGARIA	Age/Gender :	45 Years 8 Months / MALE
Address :	VILLA NO - 02,,,,DUBAI,,DUBAI,UAE.51307		
Admission Date :	06/09/2022	Discharge Date :	08/09/2022
Category :	CASH	Discharge Type:	Normal
Consultant :	Dr. MUKUL NANDKUMAR PADHYE		

FINAL DIAGNOSIS: Left mandibular cyst

SURGERY PERFORMED: Cystic enucleation - left mandible done on 06/09/2022

PRESENTING COMPLAINTS AND MEDICAL HISTORY:

A 45-year-old male patient underwent regular health checkup in which he came to know about cyst in the mandible.

CBCT (Both Arch) 16/08/2022: A well-defined unilocular radiolucent lesion visible in 37-38 region measuring approximately 28 x 21 x 14 mm size extending from distal margin of 36 CEJ region of 38 posteriorly from alveolar crest to lower border of mandible and slightly beyond inferiorly and from lingual to buccal cortex laterally. Margins are corticated and internal structure is radiolucent.

Expansion, thinning with perforation visible in lingual cortex. Inferior alveolar canal displaced inferiorly.

Findings suggestive of dentigerous cyst.

Now admitted for further management.

SIGNIFICANT PAST HISTORY:

History of wisdom teeth removal under LA

RESIDENT DOCTOR'S SIGNATURE:
1 of 3

Page

In case of fever, severe headache, soakage, bleeding from surgical site, excruciating unexplained pain kindly contact Emergency Medical Services (022-23667809) and your consultant in-charge.

Home Collection Services (Pathology), Call - 23667766/7819 & Home Physiotherapy Services, Call -23667858/7859



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ALLERGIES: Not Known

EXAMINATION AT THE TIME OF ADMISSION:

Temperature	Afebrile
Pulse rate	78/min
Blood Pressure	120/80 mmHg
Respiratory rate	18/min

SYSTEMIC EXAMINATION:

Central Nervous System: Conscious and oriented.
Cardio-Vascular System: S1S2 normal. No murmur.
Respiratory System: Clear AEBE.
Abdomen: Soft. Non-tender.

SURGERY DETAILS: Cystic enucleation - left mandible on 06/09/2022

SURGEON: Dr. Mukul Padhye

ASSISTANT SURGEON: Dr. Rushika

ANAESTHETIST: Dr. D. Desai

ANAESTHESIA: General Anaesthesia

PROCEDURE:

Patient intubated, scrubbed and draped
Local anesthesia (2% lignocaine with 1:80,000 adrenaline) administered in lower left mandible
Ward's incision given, mucoperiosteal flap reflected
Bony window created and cystic lining exposed
Cystic lining curetted out
Carnoy's solution applied and washed
Closure done with 3-0 Vicryl
Hemostasis achieved

INVESTIGATIONS: Attached overleaf

COURSE DURING HOSPITAL STAY:

Patient's stay in the hospital was uneventful

RESIDENT DOCTOR'S SIGNATURE:
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TREATMENT GIVEN:

Inj. Augmentin 1.2 gm IV. BD

Inj. Dexta 4 mg IV. BD

Inj. Perfalgan 1 gm IV. BD

Inj. Dynapar 75 mg IV. SOS if severe pain

Syp. Duphalac 20 ml 0-0-1

Blood transfusion if any: NIL

TREATMENT ADVISED ON DISCHARGE:

NAME OF DRUGS	DOSE	FREQUENCY	NO OF DAYS
TAB. AUGMENTIN	625 MG	1-0-1	5 DAYS
TAB. DOLO	650 MG	1-0-1	5 DAYS
TAB. DISPERZYME		1-0-1	5 DAYS
TAB. PAN	40 MG	1-0-1	5 DAYS
TAB. BECOZINC		1-0-0	10 DAYS

INSTRUCTIONS:

Soft high protein diet at home

Regular brushing with soft brush.

To collect histopathology report.

FOLLOW UP: Follow up with Dr. Mukul Nandkumar Padhye as advised.

NAME OF THE CONSULTANT: DR. MUKUL NANDKUMAR PADHYE

RESIDENT DOCTOR'S SIGNATURE:

NAME OF THE RESIDENT DOCTOR: Dr. J. N. Sadmek

REGISTRATION NO: I-68310-A

RESIDENT DOCTOR'S SIGNATURE:

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DEPARTMENT OF BLOOD BANK (BLOOD BANK LAB)

BCH.No	: BCH0861481	Reg.Date	: 03-Sep-2022 / 08:46 AM
Name	: Mr.PANKAJ MAHENDRA GUGARIA	Collection	: 03-Sep-2022 / 08:47 AM
Age\Sex	: 45Y(s) 8M(s) 19D(s)/Male	Authenticate	: 03-Sep-2022 / 15:58 PM
Lis No	: 2200160456	Print	:
Referral Dr	: Dr. MUKUL NANDKUMAR PADHYE	Location	: OPD

BLOOD BANK

PATIENT ROUTINE BLOOD GROUPING ON ADMISSION / OPD

Test Name	Result	Unit	Biological Reference Interval
BLOOD GROUP	O		
RH FACTOR	POSITIVE		

Sample Type : WHOLE BLOOD

--- End Of Report ---



**KRISHNEN
DU J
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BLOOD BANK OFFICER
Dr. SUNITA TULSIANI
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Dr. KRISHNENDU
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Lab result should always be correlated and interpreted along with clinical details

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DEPARTMENT OF BIOCHEMISTRY AND MICROBIOLOGY

BCH.No	: BCH0861481	Reg.Date	: 03-Sep-2022 / 08:46 AM
Name	: Mr.PANKAJ MAHENDRA GUGARIA	Collection	: 03-Sep-2022 / 08:47 AM
Age\Sex	: 45Y(s) 8M(s) 19D(s)/Male	Authenticate	: 03-Sep-2022 / 11:42 AM
Lis No	: 2200160452	Print	:
Referral Dr	: Dr. MUKUL NANDKUMAR PADHYE	Location	: OPD

IMMUNOLOGY

HIV, HBSAG & HCV - ADMISSION TEST

Test Name	Result	Unit	Biological Reference Interval
HIV (I & II) Method:ECLIA	Non-Reactive		Non Reactive
Hepatitis B Surface Antigen (HBsAg) Method:ECLIA	Negative		Negative
Hepatitis C Virus Antibody Method:ECLIA	Non-Reactive		Non Reactive

Remark:

After exposure to the virus, the tests are likely to be negative for up to 6 weeks, hence repeat tests may be done after 6 weeks if clinically indicated.

Sample Type : SERUM

--- End Of Report ---

ARUNA
ANANDA
POOJARY

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DEPARTMENT OF HAEMATOLOGICAL MEDICINE (HAEMATOLOGY LAB)

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Lis No	:	Print	:
Referral Dr	: Dr. MUKUL NANDKUMAR PADHYE	Location	: OPD

HAEMATOLOGY COAGULATION PROFILE

Test Name	Result	Unit	Biological Reference Interval
PT-PTT			
Prothrombin Time	12.3	Sec	11-15 Biological reference range of patient not on medication.
Control Prothrombin Time	12.7	Sec	Control - 13
APTT	0.97	Sec	1.0-1.2
Partial Thromboplastin Time	28.9	Sec	26-36 Biological reference range of patient not on medication.
Control Partial Thromboplastin Time	28.7	Sec	Control - 26
SF			
Serum Fibrinogen	373	mg%	200-400
TT			
Thrombin Time	16.6	Sec	
Control	18.0	Secs	0-0

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Age\Sex	: 45Y(s) 8M(s) 19D(s)/Male	Authenticate	: 03-Sep-2022 / 10:16 AM
Lis No	: 2200160455	Print	:
Referral Dr	: Dr. MUKUL NANDKUMAR PADHYE	Location	: OPD

Principle : (Viscosity Based Detection System) Clot based.

Done By : Stago Compact Max 2. Automated Analyser.

Clinical and therapeutic correlation is essential in all cases

INTERPRETATION:

Prothrombin time (PT)

Prothrombin time (PT) is a basic coagulation screening test for the assessment of congenital and acquired deficiencies of the extrinsic pathway (factors II, V, VII, X). It is also used in monitoring warfarin therapy because of its sensitivity to variations in the concentration of vitamin-K dependent factors.

Prothrombin Time test is used for,

The incubation and monitoring of oral anticoagulant therapy with vitamin K antagonists.

Diagnosing genetically caused deficiencies in coagulation factors.

Diagnosing acquired deficiencies in coagulation factors.

Checking the synthesis performance of the liver in hepatic diseases.

INTERPRETATION:

Activated partial thromboplastin time (APTT)

The activated partial thromboplastin time (APTT) is a basic screening test for the intrinsic coagulation pathway (factors XII, XI, IX, VIII, X, V, II, and I). It is used to detect congenital and acquired deficiencies of these factors and to monitor heparin therapy

Fibrinogen INTERPRETATION:

Low functional Fibrinogen levels may be seen in DIC, during massive bleeding, Liver disease, in the rare congenitally deficient patient (afibrinogenemia), or patients with non-functional fibrinogen protein. Elevated fibrinogen levels can be observed in diabetes or inflammatory syndromes, and maybe associated with an increase of cardio-vascular disease and prethrombotic states.

Thrombin Time Interpretations:

- Prolongation of the thrombin time (TT) is consistent with the presence of heparin-like anticoagulants, hypofibrinogenemia, dysfibrinogenemia, fibrin degradation products, and antibody inhibitors of thrombin. An immeasurably prolonged TT is usually the result of heparin in the specimen or, rarely, the presence of thrombin antibodies or afibrinogenemia
- Fibrin degradation products (e.g. in DIC)
- Factor IIa inhibitors (e.g. dabigatran)
- Heparin

Sample Type : Citrate Plasma

--- End Of Report ---

**DIPSHA
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Age\Sex	: 45Y(s) 8M(s) 19D(s)/Male	Authenticate	: 03-Sep-2022 / 10:16 AM
Lis No	: 2200160453	Print	:
Referral Dr	: Dr. MUKUL NANDKUMAR PADHYE	Location	: OPD

HAEMATOLOGY Full Blood Count

Test Name	Result	Unit	Biological Reference Interval
White Blood Count	7.12	10 ³ /ul	3.9-9.9
Neutrophils	50.0	%	40-75
Neutrophils - Absolute Count	3.56	10 ³ /ul	2-7.5
Lymphocytes	36.4	%	20-45
Monocytes	5.6	%	1-10
Eosinophils	7.3	%	1-6
Basophils	0.7	%	0-1
Red Blood Cell	5.42	10 ⁶ /uL	4.2-6.5
Hemoglobin	13.8	g/dL	13-17
Hematocrit	43.7	%	40-50
MCV	80.6	fl	75-95
MCH	25.5	pg	25-32
MCHC	31.6	g/dL	30-35
RDW-SD	38.0	fl	40-57
Platelet Count	299	10 ³ /ul	140-440
MPV	8.9	fl	
Done By	Sysmex XN 1000 Fully Automated Analyser		

Principal : WBC & Differential: Fluorescence Flow Cytometry; RBC & Platelet: DC Detection Method; Hemoglobin: SLS Method; HCT: Cumulative Pulse Height Detection Method

Clinical and therapeutic correlation is essential in all cases.

CBC Interpretations:

It plays a role in the detection of a wide range of disorders, including anaemia, thrombocytopenia, Thrombocytosis, infection, leukaemia & immune system disorder. This test measures several cellular components and features of blood (Red blood cells which play a role in tissue perfusion, White cells which in host immunity and platelets which play a role in haemostasis and coagulation). This test should be interpreted carefully, correctly and in relation to the clinical history, to provide very useful information to assist in diagnosis, drug monitoring and management of diseases.

Sample Type : EDTA Blood

--- End Of Report ---

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DEPARTMENT OF BIOCHEMISTRY AND MICROBIOLOGY

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Collection : 03-Sep-2022 / 08:47 AM
Authenticate : 03-Sep-2022 / 10:46 AM
Print :
Location : OPD

BIOCHEMISTRY BIOCHEMISTRY TEST

Parameter	Result	Unit	Normal Range
Alkaline Phosphatase	102 SI :102.000	U/L	38-126 38 - 126
Bicarbonate Level	30	mmol/L	22-30
Blood Urea Nitrogen	9.9 SI :3.564	mg/dL	9-20 3.24 - 7.2
Inorganic Phosphorus	3.9 SI :1.260	mg/dL	2.5-4.5 0.8075-1.4535
Serum Calcium	9.7 SI :2.425	mg/dL mmol/L	8.4-10.2 2.1-2.52
Serum Creatinine	0.85 SI :75.140	mg/dL	0.5-1.5 44.2-132.6
SGOT	27 SI :27.000	U/L U/L	15-46 15-46
SGPT	26 SI :26.000	U/L	13-69 13 - 69
Total Proteins	7.08 SI :70.800	g/dL g/L	6.3-8.2 63-82
Albumin	4.16 SI :41.600	g/dL g/L	3.5-5 35-50
Globulin	2.92 SI :29.200	g/dL g/L	2.4-3.5 24 - 35
Albumin / Globulin Ratio	1.42 SI :1.420	.	1.1-2.2 1.1 - 2.2
Uric Acid	6.56	mg/dL	3.5-8.5

Sample Type : SERUM

--- End Of Report ---

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Lis No : 2200160454F **Print** :
Referral Dr : Dr. MUKUL NANDKUMAR PADHYE **Location** : OPD

BIOCHEMISTRY

Test Name	Result	Unit	Biological Reference Interval
Fasting Blood Sugar	99 SI :5.544	mg/dL mmol/L	65-110 3.64 - 6.16

Sample Type : PLASMA

Test Method : Dry Chemistry

--- End Of Report ---

**SRUSHTEE
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Lis No	: 2200160452	Print	:
Referral Dr	: Dr. MUKUL NANDKUMAR PADHYE	Location	: OPD

BIOCHEMISTRY

Test Name	Result	Unit	Biological Reference Interval
Gamma GT	19	U/L	12-58
	SI :19.000	U/L	12 - 58

Sample Type : SERUM

Test Method : Dry Chemistry

--- End Of Report ---



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Authenticate : 03-Sep-2022 / 10:46 AM
Print :
Location : OPD

BIOCHEMISTRY

Test Name	Result	Unit	Biological Reference Interval
Total Bilirubin	0.44 SI :7.524	mg/dL	0.2-1.3 3.42-22.23
Bilirubin Unconjugated (BU)	0.27 SI :4.617	mg/dL umol/L	0-1.1 0 - 18.81
Bilirubin Conjugated (BC)	0.00	mg/dL	0-0.3 0 - 5.13
Delta Bilirubin	0.17 SI :2.907	mg/dL umol/L	0-0.2 0 - 3.42

Sample Type : SERUM

Test Method : Dry Chemistry

--- End Of Report ---

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Location: Mumbai

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Dr.SEEMA N.ROHRA
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DEPARTMENT OF BIOCHEMISTRY AND MICROBIOLOGY

BCH.No	: BCH0861481	Reg.Date	: 03-Sep-2022 / 08:46 AM
Name	: Mr.PANKAJ MAHENDRA GUGARIA	Collection	: 03-Sep-2022 / 08:47 AM
Age\Sex	: 45Y(s) 8M(s) 19D(s)/Male	Authenticate	: 03-Sep-2022 / 10:46 AM
Lis No	: 2200160452	Print	:
Referral Dr	: Dr. MUKUL NANDKUMAR PADHYE	Location	: OPD

BIOCHEMISTRY SERUM ELECTROLYTES

Test Name	Result	Unit	Biological Reference Interval
Serum Sodium	143 SI :143.000	mmol/L mmol/L	137-145 137 - 145
Serum Potassium	4.72 SI :4.720	mmol/L mmol/L	3.5-5.1 3.5 - 5.1
Serum Chloride	106 SI :106.000	mmol/L mmol/L	98-107 98-107

Sample Type : SERUM

Test Method : Direct Ion selective electrode

--- End Of Report ---

SRUSHTEE
BIPIN
JIBHKATE

Digitally signed by
SRUSHTEE BIPIN JIBHKATE
Date: 2022.09.03 10:51:20
+05:30
Reason: BIOCHEMISTRY
Location: Mumbai

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Checked By - Mahendra Kumbhar



BREACH CANDY HOSPITAL TRUST

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DEPARTMENT OF ECHOCARDIOGRAPHY

Tel: (Direct) 23667870, 23667875

ECHOCARDIOGRAPHY REPORT

NAME: MR. PANKAJ GUGARIA

DATE: 06-09-2022

AGE: 45 YEARS

SEX: MALE

BED NO : 406

CONCLUSIONS:

Normal cardiac chamber dimensions (LA volume index of 28 ml/m²).

Normal left & right ventricular systolic function (LVEF = 60%).

No regional wall motion abnormality seen at rest.

No evidence of LV diastolic dysfunction (Avg. E/e'=8.8; E/A=1.3).

Normal cardiac valves.

No pericardial effusion seen.

No intracardiac shunt seen.

No intracardiac thrombus or vegetation seen.

B. B. Ichaporia

DR. B. B. ICHAPORIA,
M.D., D.M.



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DEPARTMENT OF SURGICAL PATHOLOGY AND CYTOLOGY

NAME	: PANKAJ MAHENDRA GUGARIA	DATE	: 09/09/2022
AGE / SEX	: 45 YRS / MALE	DATE RECD.	: 07/09/2022
REF. BY DR.	: MUKUL PADHYE	HIST NO	: WW 2235
WARD/OPD	: D SOUTH 406	PREVIOUS NO	:
ADM NO	: 22090178	IHC NO	:
BCH NO	: 0861481		

Pain and swelling on left side, with cyst in mandible on left side.

SURGICAL PATHOLOGY REPORT

SPECIMEN	Cyst in left side of mandible
GROSS	Received cyst wall fragment measuring 2.5x1.5 cm.
MICROSCOPIC	The sections reveal benign cyst, dentigerous cyst, inflamed.
INTERPRETATION	Dentigerous cyst, inflamed

DR. SARABJEET KAUR ARNEJA M.D.

Head, Department of Surgical Pathology and Cytology

Tel : 2366 7869

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