

# Government Moulvi Ameer Shah Memorial Hospital Peshawar

(Pathology Department) Pathologist: Dr. Azhar Yaqoob

Patient Name:	Saila	Date & Time:	26-Dec-23, 9:49 AM
Sex:	Female	Report No:	2277
Test Required:	FBC.		

TEST	RESULT	UNIT	N. RANGE
Hemoglobin	10.2	g/dl	M: 14-18, F: 12-14
Total Leucocytes Count	10,000	/cmm	4,000 - 11,000
Neutrophils	72	%	40 - 75
Eosinophiles	25	%	20 - 40
Lymphophils	02	%	01 - 05
Monocytes	01	%	01 - 08
Platelets Count	275,000	/cmm	1,50,000 - 4,50,000

PREPARED BY

INCHARGE LABORATORY



# MOULVI AMEER SHAH MEMORIAL HOSPITAL PESHAWAR



OPD PRESCRIPTION REPORT

GYNAE

Patient Name : SAILA

Age : 35 Years

Contact No :

Reg Date : 26-DEC-23 Time : 08:34:10

Refer To : GENERAL

Address : QAZI KALAY PESHAWAR

Token No : 6

Serial No : 16

W/O, D/O, S/O : JOHAR

Gender : Female

MR # : 75851223

OPD No

CNIC : 1610144624066

Amount Recieved : 10 pkr.

### Examination

Temperature :

BP :

120/80

Pulse :

Weight :

KG

Height :

### Complaints

### Diagnosis

CUB3

21/1/24. Resist

### Treatment Advised

Syp Doro Bn  
Syp Fsa (adamp)  
Q 11 Q

Measure 2m  
Syp Fymnt m.

Sas ABF . ①

Sas Ostibon ①

① BOFERIN in  
W Q 21

2270

Doctor Name & Signature

Radiology

Pathology

*(Handwritten signature)*

Hos.  
10-284

# AL SHIFA

Welfare Society  
Medical Center



# الشفاء

ويلفيلير سوسائٹی ميڈیکل سنٹر  
اینڈ مفت فی بی کلینک

Name Saba Age 35Y Gender F Date 23-12-23

Clinical Record

Rx

Deep massage 4

B.P:

Tad Spast

Pulse:

Chin map

Temp:

Weight:

Spast 2  
43 67

Adv:

4/R2  
H/M

چارسده روڈ بالمقابل گریڈ اسٹیشن پشاور

# AL-SHIFA WELFARE SOCIETY MEDICAL



## ULTRASOUND REPORT

Name Sifa Age \_\_\_\_\_ Gender ♀ Date 23/12/23

### OBS

Single 1st Twins \_\_\_\_\_  
FHR 140 C.R.L. \_\_\_\_\_  
OPD \_\_\_\_\_ F.L. 36w  
Presentation Head Down Lie \_\_\_\_\_  
Racete R Ammonitic Fluid A  
EDD 30/1/24 Alive \_\_\_\_\_ or \_\_\_\_\_ Dead \_\_\_\_\_

### PELVIC

UD \_\_\_\_\_ Right Ovary \_\_\_\_\_ Le.Ovary \_\_\_\_\_  
Both Andexa \_\_\_\_\_ Urinary Bladder \_\_\_\_\_  
Free Fluid \_\_\_\_\_

### ABDOMEN

Liver \_\_\_\_\_ Gallbladder \_\_\_\_\_ Speleen \_\_\_\_\_  
Right Kidney \_\_\_\_\_ Left Kidney \_\_\_\_\_ Pancreas \_\_\_\_\_

Conclusion \_\_\_\_\_

Signature \_\_\_\_\_