C.C.SHROFF MEMORIAL HOSPITAL

(NANDINI RAMESH GANDHI PUBLIC CHARITABLE TRUST)

3-4-801, BARKATPURA , HYDERABAD - 500 027. (TELANGANA)
Ph: 040-27566666, 9848675666, info@ccshroffhospital.com
webmail-https://mail.ccshroffhospital.com

NABH

(3)

OUT PATIENT ASSESSMENT RECORD

Patient Name	: Mr. DINESHWAR SINGH	Age/Gender	: 61Y(s)/Male	UMR No	: UMR676024
S/D/W. Of.	: LATE RAJENDER PRASAD SINGH	Occupation	: Not Specified	Reg. Date	: 03-Jun-2024
Mother Name	:	Martial Status	: Not Specified	Consultation Fee	: 330.00
Address	: H NO 3-6-947/48 NARAYANAGUDA HIMAYATH NAGAR , HYDERABAD	Patient Type	: General	Nationality	: Indian
		Mobile No	: 9030359830		

Consultation.No OP24-051700 **Consultation.Date : 20-Jul-2024 12:40:46PM**

Consultant.Name : Dr. BISHNUPADA DAS **Dept: NEUROLOGY**
MBBS, MD, DNB (NEURO) [REG.No:13536] **Room no**

PR :	BP /	RR :	Temp :	Ht :	Wt :	BMI :

Pain Scale :

0	2	4	6	8	10
No Hurt	Hurts Little Bit	Hurts Little More	Hurts Even More	Hurts Whole Lot	Hurts Worst

Present Illness	Clinical Notes / Investigations	Treatment
	L5-S1 RADICULOPATHY (R)	
	AND.	✓.
	/ Dry cough	
	- L5 flow at low back	
	- as on x-day	
		S

Nutritional Status Ok

Provisional Diagnosis

Any Known Drug Allergies

Followup DW 4.6.24

< PAY > Validity :1 Consultation(s) Before 03-AUG-24

Please Sign after all entries

Note : If there are any side effects with the medicine, stop the medicine and report immediately to the hospital.