

- first manage for both



File No.: 039082

Nationality: Q

GYNAECOLOGICAL SHEET

DR LEILA HAMID MEDICAL CENTER

File No: 039082

Name: ALMAHA JARALLA ALNABIT

QID No: 29863402491

Sex: Female

Mob: 33319986

ADDRESS: MURIKH



Age: 25/10

Marital Status: 1 1/2 yrs

d's Name: Salem Jaralla Alnabet

Phone:

Residence Phone:

27 yrs
- not smoker
- healthy

SYMPTOMS:

c/o vulval skin tags
diagnosed as genital warts, not responded to
medical tx "cream". Also she has whitish vag.
discharge & itching. no urinary symptoms.

Medical History:

medically free

P.H.

gast. sleeve F.H. F+M (COM)
2018, abdominoplasty 2021 (FTN)

MENSTRUAL HISTORY:

Menarche:

15 yrs

L.N.M.P

13/6/24

Menstrual Habits:

regular. last for 5 days every month.

Menstrual Symptoms:

ass & dysmenorrhea

Menopause:

Parity:

P

Abortion

1

Ectopic

LCB



- I.V.F, aborted at 7 wks, complete.

EXAMINATION

General Examination: Ht. 155 cm

Wt. 72.8 Kg

BMI

Kg/m² Bp

110/80 mm Hg

cooperative, normal ♀ look, not pale

Chest, C.V.S.

NAD

Abdomen:

soft & abdominoplasty scar

Breasts:

not examined

PELVIC EXAMINATION:

Speculum Exam.

vulvitis ++ & sore & red skin, warts intruded

Bimanual Exam.

& lower vaginal ex small & tiny as, no

Rectal Exam.

lesion but easily bled on touch, no high

Investigation Requested:

vaginal warts - seen

cream used - ++

Diagnosis:

Genital warts

Plan of Management:

- Pap smear taken
- HUS.

Next Appointment:

DATE	FOLLOW UP	NEXT VISIT
10-8-24 73 Kg 120/80	- Came For review - No complaints - Local & Speculum - No new warty lesions but dry vulva - - Daflagyn gel + moisturizing cream - F/U in 2 months or earlier IF any new lesion Int. Cetradaasil 9 Imgiven	
18-9-24 110/80 71.6kg	Lmp: 1/9/24 - NO Complaints - NO new vulval lesions - NO post coital bleeding - Came For PAP smear, Referral & F/U in 3 months For ASCUS. - O/E VIS stable - - Local & Speculum 2. Normal vulva & copious vaginal discharge over the introitus & Labia - NO genital warts - Normal vagina - Healthy looking ex - Treatment of acute vaginitis & PAP smear in 1 wk	
23-9-24 Tel	* HVS: Normal Flora, Candidiasis Pt informed - Already on anti-mycotic	
26-9-24 70 110/70	for Pap smear small ex, no lesions smear taken Wants to conceive if smear is -ve Lmp: 1-9-2024	Open
29/9/24 tele	Pap smear ASCUS again for referral prefers to use Rx again	

Name : Almaha Jaralla Al-Nabet
Lab. No. : 332454923
Contract. : Dr. Layla Bashir
Patient No. : 2160-039082
File No. :

Sample Date : 26/09/2024 12:13 PM
Report Date : 28/09/2024 15:01 PM

this sample was collected outside lab

Branch : Qatar Waab Age : 25 Year Sex : Female Int. No. : 4G24.4118
Cytology Unit

Liquid Based Pap (Sure Path®)

SPECIMEN TYPE

PAP smear cytology (sure path)

CLINICAL DATA

Atypical squamous cells of undetermined significance (ASCUS)

ADEQUACY

Adequate, endocervical cells

INTERPRETATION

Smear shows superficial and intermediate squamous cells.

Mild inflammatory cells.

Some epithelial cells showed slightly enlarged dark nuclei suggesting Atypical squamous cells of undetermined significance (ASCUS).

RESULT

Atypical squamous cells of undetermined significance (ASCUS).

Inflammatory / Mild to moderate cervicitis / Clinical correlation.

RECOMMENDATION

Hr v-DNA testing is highly recommended and can be performed on the provided Liquid PAP sample upon request. (Within 30 Days)

COMMENT

- Follow up according to protocol.
- Review of previous smear with Accession No 332434403 is done showing Atypical squamous cells of undetermined significance (ASCUS) Growth of fungus, morphologically similar to Candida Growth of fungus, morphologically similar to Candida
- This report follows the updated Bethesda System for Reporting Cervical Cytology, third edition, 2014.

Name : Almaha Jaralla Al-Nabet
Lab. No. : 332454923
Contract. : Dr. Layla Bashir
Patient No. : 2160-039082
File No. :

Sample Date : 26/09/2024 12:13 PM
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this sample was collected outside lab

Branch : Qatar Waab Age : 25 Year Sex : Female Int. No. : 4G24.4118
Cytology Unit

Liquid Based Pap (Sure Path®)

EDUCATIONAL NOTES

- Pap test is a screening test for cervical cancer with inherent false negative result.
- Combined HPV DNA testing with cytological examination (Pap smear) is proved to be more sensitive and improves the specificity in detecting cervical abnormalities and minimizes the need of invasive diagnostic procedures when compared to Pap test alone.
- The Interim guidance was developed by American Society for Colposcopy and Cervical Pathology (ASCCP) and the Society for gynecological oncology (SGO) with input from representatives of five other organizations including the American Cancer Society (ACS), American College of Obstetricians and Gynecologists (ACOG), American Society for Clinical Pathology (ASCP), American Society of Cytopathology (ASC) and the college of American Pathologists (CAP).

References:

- 2012 Updated Consensus Guidelines for the Management of Abnormal Cervical Cancer Screening Tests and Cancer Precursors; American Society for Colposcopy and Cervical Pathology (ASCCP) Consensus Guidelines Conference.
- Huh WK et al 2015. Use of primary high-risk human papillomavirus testing for cervical cancer screening: interim clinical guidance.
- 2016 Practice Bulletin No. 168; American College of Obstetricians and Gynecologists (ACOG).

Verified By :

Dr. Elif Hasan





مختبرات دلتا العالمية د.م.م
DELTA INTERNATIONAL LABORATORIES W.L.L
Quality • Safety • Privacy

MICROBIOLOGY

Name : AL MAHA JARALLA
Sex/Age : F/ 25 y/ 8 m / 19 d
Nationality : Qatar
Sample Col. : At Lab
Ref. By Dr. : Dr Salwa
Ref. By Clinic : DRLEILAMC

Lab No : 36110
DL No : 25862
Entrance Tm: 18-SEP-2024 21:27:34
Exit Date : 20-SEP-2024 15:48:51
Ext. Ref. Num.: 039082

TEST	RESULT	UNIT	REFERENCE VALUE
Test Name	Culture and Sensitivity		
Sample	High Vaginal Swab		
Gram Stain			
Pus /hpf	2-3		
RBC's /hpf	0-1		
Epithelial cells /hpf	7-9		
Gram Positive Bacilli (Lactobacilli)	++		
Gardnerella	Absent		
Result	Normal flora of female genital tract seen after 48 hours of incubation.		
Sensitivity	-		
Comment:	Hyphael forms of Candida species seen. Vaginal smear and culture was suggestive of Candidiasis Candida spp. : Antimycotic treatment is recommended. Please correlate clinically.		

Pathologist Name. Dr .Swaroop, Anatomical and Clinical Pathologist

Dr Swaroop



Delta Intl. Labs-Qatar
مختبرات دلتا العالمية قطر
License No:4324 Doha - QATAR

Tel: +974 40064466 - Mob: +974 7064466 - P.O.Box: 214170, Al Sadd, Doha - Qatar
رقن : +974 40064466 - موب : +974 7064466 - ب.ع.ب : 214170 ، السد ، دoha - قطر



E.mail : info@deltalabsqatar.com

Website : www.deltalabsqatar.com



Name : Almaha Jaralla Al-Nabet
Lab. No. : 332436172
Contract. : Dr. Layla Bashir
Patient No. : 2160-039082
File No. :

Sample Date : 01/07/2024 16:44 PM
Report Date : 14/07/2024 14:45 PM

Branch : Qatar Waab Age : 25 Year Sex : Female

Pathology Unit

Test	Result
p16, IHC stain	Done and assign to Dr. Delaram digitally (under 4S24.3798)
IHC for Ki-67 Immunomarker	Done and assign to Dr. Delaram digitally (under 4S24.3798)

Comments

This test is outsourced to AL Borg Laboratories - Falasteen St.Jeddah.

Pathology Intradepartmental Consultation Done

Comments

Dr. Afnan Elsayed (Second opinion):
- Polypoid inflamed squamous lesion with features consistent with viral wart (Condyloma acuminatum).

Reviewed By:

افنان

Dr. Afnan Hassan Elsayed
MD
Anatomic Pathologist

Name : Almaha Jaralla Al-Nabet
Lab. No. : 332436172
Contract. : Dr. Layla Bashir
Patient No. : 2160-039082
File No. :
Sample Date : 01/07/2024 16:44 PM
Report Date : 08/07/2024 13:41 PM

this sample was collected outside lab

Branch : Qatar Waab Age : 25 Year Sex : Female

Molecular Biology Unit

Human Papilloma Virus (HPV28) detection and genotyping by PCR

Test	Result	Ref. Range
HPV Sample Type		
Sample Type	Cervical Brush on SurePath	
HPV Type 16:	Not Detected	Not Detected
HPV Type 18:	Not Detected	Not Detected
Other High Risk HPV		
HPV Type 26:	Not Detected	Not detected
HPV Type 31:	Not Detected	Not Detected
HPV Type 33:	Not Detected	Not Detected
HPV Type 35:	Not Detected	Not Detected
HPV Type 39:	Not Detected	Not Detected
HPV Type 45:	Not Detected	Not Detected
HPV Type 51:	Not Detected	Not Detected
HPV Type 52:	Not Detected	Not Detected
HPV Type 53:	Not Detected	Not detected
HPV Type 56:	Not Detected	Not Detected
HPV Type 58:	Not Detected	Not Detected
HPV Type 59:	Not Detected	Not Detected
HPV Type 66:	Not Detected	Not Detected
HPV Type 68:	Not Detected	Not detected
HPV Type 69:	Not Detected	Not detected
HPV Type 73:	Not Detected	Not detected
HPV Type 82:	Not Detected	
Low Risk HPV		
HPV Type 6:	Not Detected	Not detected
HPV Type 11:	Detected	Not Detected
HPV Type 40:	Not Detected	Not Detected
HPV Type 42:	Not Detected	Not Detected
HPV Type 43:	Not Detected	Not Detected
HPV Type 44:	Not Detected	Not Detected
HPV Type 54:	Not Detected	Not Detected
HPV Type 61:	Not Detected	Not Detected

Name : Almaha Jaralla Al-Nabet
Lab. No. : 332436172
Contract. : Dr. Layla Bashir
Patient No. : 2160-039082
File No. :

Sample Date : 01/07/2024 16:44 PM
Report Date : 08/07/2024 13:41 PM

this sample was collected outside lab

Branch : Qatar Waab Age : 25 Year Sex : Female

Molecular Biology Unit

Human Papilloma Virus (HPV28) detection and genotyping by PCR

Test	Result	Ref. Range
HPV Type 70:	Not Detected	Not Detected

Comments
Persistent infection with human papillomavirus (HPV) is the main cause of cervical cancer and its precursor cervical intraepithelial neoplasia (CIN). [Burd, Eileen M. 2003]. There are more than 118 different types of HPV [Bernard HU. 2005], and approximately 40 different HPVs that can infect the human anogenital mucosa [de Villiers EM, et al 2004]. However, only a subset of 13 to 19 of these types is considered high-risk for the development of cervical cancer [Clifford GM et al 2003]. Although persistent infection with high-risk (HR) HPV is a necessary cause of cervical cancer, more than 90% of infected women will mount an effective immune response and clear the infection within 6 to 24 months without any long term health consequences [Moscicki, A. et al 2006].

Methodology Brief:-

The HPV28 Assay is a qualitative multiplex real-time PCR for simultaneous amplification and detection of target nucleic acids of 19 high-risk HPV types (16, 18, 26, 31, 33, 35, 39, 45, 51, 52, 53, 56, 58, 59, 66, 68, 69, 73, 82) and 9 low-risk HPV types (6, 11, 40, 42, 43, 44, 54, 61, 70) as well as Internal Control (IC). in patient specimens. This test was developed, and its performance characteristics have been determined by Al Borg Medical laboratories – Jeddah – Saudi Arabia. It has not been cleared or approved by the FDA. Al Borg Medical Laboratories are regulated under CLIA guidelines (CAP# 7197774) as qualified to perform high complexity testing. This test is used for clinical purposes. It should not be regarded as investigational or for research.

Limitation:-

- 1-Detection of high, low-risk HPV is dependent on the number of copies present in the specimen and may be affected by specimen collection methods, cellularity, patient factors, stage of infection and the presence of interfering substances.
- 2- Though rare, mutations within the highly conserved regions of the genomic DNA of Human papillomavirus covered by the Test's primers and/or probes may result in failure to detect the presence of the viral DNA.
- 3-This test types is not recommended for evaluation of suspected sexual abuse.
- 4- The performance of the HPV28 Test has not been adequately established for HPV vaccinated individuals.
- 5-A negative high-risk HPV result does not exclude the possibility of future cytologic HSIL or underlying CIN2-3 or cancer, a regular follow up and liquid Pap testing are recommended.

Reviewed By:

Dr. Menatall El-Tahawy
Anatomical & Clinical Pathology
Dr. Menna El Tahawy

Verified By : Heba Elmasry
Printed By: System

Page 2 Of 2

PM :Printed Date 16:03 08/07/2024

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Al Borg Medical Laboratories Co. Ltd. Doha - Qatar. Email: csv.qatar@alboradix.com

Name : Almaha Jaralla Al-Nabet
Lab. No. : 332434403
Contract : Dr. Layla Bashir
Patient No. : 2160-039082
File No. :
Sample Date : 23/06/2024 12:15 PM
Report Date : 29/06/2024 15:24 PM

this sample was collected outside lab

Branch : Qatar Waab Age : 25 Year Sex : Female Int. No. : 4S24.3798
Pathology Unit

Biopsy (Small)

SPECIMEN:
Wart biopsy

CLINICAL DATA:

- Genital wart and cervical erosion.

MACROSCOPY:

Received in a labelled container with patient identification and fixed in formalin, were multiple fragments of warty lesion measured 1x0.5 cm in aggregate. Entire specimen submitted in one cassette.

Cold Ischemia Time: Not written
Fixation Time: 24 hours

Prepared by :Dr. Elif
Assisted by :Angeline

MICROSCOPY:

Revealed papillary exophytic hyperplastic squamous epithelium showing marked acanthosis with focal parakeratosis. Fibrovascular cores show congested blood vessels, with heavy mixed inflammatory infiltrate with neutrophils infiltrating the surface epithelium. Focal koilocytosis along with individual squamous cells apoptosis and dyskeratosis are seen. Reactive epithelial changes are seen.
No malignancy.

DIAGNOSIS:

Wart biopsy:
Most consistent with Condyloma Acuminatum (Genital Wart).

COMMENT:

P16 and ki67 Immunohistochemistry is recommended to support diagnosis.

Name : Almaha Jaralla Al-Nabet
Lab. No. : 332434403
Contract. : Dr. Layla Bashir
Patient No. : 2160-039082
File No. :

Sample Date : 23/06/2024 12:15 PM
Report Date : 29/06/2024 15:24 PM

this sample was collected outside lab

Branch : Qatar Waab Age : 25 Year Sex : Female Int. No. : 4S24.3798
Pathology Unit

Biopsy (Small)

Verified By :
Dr. Elif Hasan

Dr. Elif Hasan
Anatomic Pathologist
License No. 211133
Al Borg Laboratory

Name : Almaha Jaralla Al-Nabet
Lab. No. : 332434403
Contract. : Dr. Layla Bashir
Patient No. : 2160-039082
File No. :
Sample Date : 23/06/2024 12:15 PM
Report Date : 25/06/2024 18:42 PM

this sample was collected outside lab

Branch : Qatar Waab Age : 25 Year Sex : Female
Microbiology Unit

Vaginal Swab Examination C/S

Test	Result
Vaginal Discharge Examination	Few large gram positive bacilli; Some curved gram variable bacilli;
Gram Stain	Yeast cells present; many epithelial cells
Wbcs/ LPF	Some

Isolation Organisms:

(1) Candida spp

Modifier :

heavy growth

Antibiotics	(1)Candida spp	MIC
-	-	

P:Pos:-N:NegS:SensitiveI:IntermediateR:Resistant

Vaginal smear and culture was suggestive of Candidiasis
Candida spp.: Antimycotic treatment is recommended.

Assessment of Gram stain is based on Nugent Scoring System
Nugent Score = 4, which is considered indeterminate for Bacterial Vaginosis. Vaginal smear
gram stain shows altered vaginal flora.

Please correlate clinically.

Reviewed By:

Dr. Menatall El-Tahawy
Anatomical & Clinical Pathologist
Menna El-Tahawy

Verified By : Angelito Jr Velilla Austria
Printed By: System

Page 1 Of 1

AM :Printed Date 11:27 26/06/2024

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Al Borg Medical Laboratories Co. Ltd. Doha - Qatar. Email: csv.qatar@alborqdx.com

Name : Almaha Jaralla Al-Nabet
Lab. No. : 332434403
Contract. : Dr. Layla Bashir
Patient No. : 2160-039082
File No. :
Sample Date : 23/06/2024 12:15 PM
Report Date : 25/06/2024 14:00 PM

this sample was collected outside lab

Branch : Qatar Waab Age : 25 Year Sex : Female Int. No. : 4G24.2607
Cytology Unit

Liquid Based Pap (Sure Path®)

SPECIMEN TYPE

Pap smear cytology (sure path)

CLINICAL DATA

Genital wart and cervical erosion

ADEQUACY

Adequate, endocervical cells

INTERPRETATION

Smear shows superficial and intermediate squamous cells.
Heavy growth of fungus morphologically similar to Candida.
Mild to moderate mixed inflammatory cells infiltration.
Degenerative and regenerative changes seen.
Some metaplastic cells shows enlarged dark nuclei with irregular nuclear membrane, suggesting ASCUS.

RESULT

Atypical squamous cells of undetermined significance (ASCUS)
Growth of fungus, morphologically similar to Candida

RECOMMENDATION

- HPV-DNA testing is highly recommended and can be performed on the provided Liquid PAP sample upon request.
(Within 30 days)
- Follow up according to HPV result.

COMMENT

- This report follows the updated Bethesda System for Reporting Cervical Cytology, third edition, 2014.

Name : Almaha Jaralla Al-Nabet
Lab. No. : 332434403
Contract : Dr. Layla Bashir
Patient No. : 2160-039082
File No. :
Sample Date : 23/06/2024 12:15 PM
Report Date : 25/06/2024 14:00 PM

this sample was collected outside lab

Branch : Qatar Waab Age : 25 Year Sex : Female Int. No. : 4G24.2607
Cytology Unit

Liquid Based Pap (Sure Path®) EDUCATIONAL NOTES

- Pap test is a screening test for cervical cancer with inherent false negative result.
- Combined HPV DNA testing with cytological examination (Pap smear) is proved to be more sensitive and improves the specificity in detecting cervical abnormalities and minimizes the need of invasive diagnostic procedures when compared to Pap test alone.
- The Interim guidance was developed by American Society for Colposcopy and Cervical Pathology (ASCCP) and the Society for gynecological oncology (SGO) with input from representatives of five other organizations including the American Cancer Society (ACS), American College of Obstetricians and Gynecologists (ACOG), American Society for Clinical Pathology (ASCP), American Society of Cytopathology (ASC) and the college of American Pathologists (CAP).

References:

- 2012 Updated Consensus Guidelines for the Management of Abnormal Cervical Cancer Screening Tests and Cancer Precursors; American Society for Colposcopy and Cervical Pathology (ASCCP) Consensus Guidelines Conference.
- Huh WK et al 2015. Use of primary high-risk human papillomavirus testing for cervical cancer screening: interim clinical guidance.
- 2016 Practice Bulletin No. 168; American College of Obstetricians and Gynecologists (ACOG).

Verified By :

Dr. Elif Hasan





مختبرات البرج الطبية
Al Borg Medical Laboratories

Client Code

Date 26 / 9 / 24

PATHOLOGY REQUEST FORM

(Please complete required data for quality assurance)

Physician Data

Hospital/Clinic:

Physician Name:

Mob./Fax:

P.O.Box:

Email:

Patient Data

Name:

Age:

Nationality:

File No.:

Telephone:

Surgical Specimen:

Clinical data:

Previous investigations

- ☐ Previous Cytology
☐ Previous Biopsy
☐ Previous PAP smear
☐ Normal
☐ Abnormal

Lab No. ()

Radiological Findings and Lab. Investigation:

Provisional diagnosis:

Signature

Cytology (non Gynecology)

Date / /

☐ Conventional

☐ L B C

SPECIMEN SOURCE

☐ FNA

Site

No. of slides

☐ Body Fluids

- ☐ Pleural
☐ Peritoneal
☐ Pericardial
☐ CSF
☐ Nipple Discharge

☐ Urine

- ☐ Voided
☐ Catheterized

☐ Respiratory

- ☐ Sputum
☐ Bronchial Wash
☐ Rt.
☐ Lt.

☐ Synovial Fluid

☐ Source

- ☐ Rt.
☐ Lt.

☐ Others

CLINICAL DATA

RADIOLOGICAL FINDINGS

Signature

Al Salam Street Muaither North
New Rayyan, Zone 53, Doha Qatar
E-mail: dr.leilamedcenter@gmail.com
Telephone Nos.: +974 44817651
Fax Nos.: +974 44812796 - P.O. Box 2505
Mobile No. : 55868523

1 JUL 2024

BY: *[Signature]*



already sent to
the lab

شمال معيذر شارع السلام
الريان الجديد / منطقة 53 / الدوحة، قطر
بريد الكتروني: dr.leilamedcenter@gmail.com
هاتف رقم: +974 44817651
فاكس رقم: +974 44812796 ص.ب: 2505
جوال رقم: 55868523

Nº 0006155

LABORATORY REQUEST FORM

Patient Name Almaha Jaralla Q I D No. F Patient File No. 039082
Nationality Q Age 25 yto Gender F Mobile
Specimen Requested By Dr. Leila Hamid Date of Request 1/7/2024 Specimen Collected By 1/7/2024
Collecting Med. Technician Signature VIRUS TYPING for ex ASCUS +ve Date 1/7/2024

Hematology / Coagulation	Albumin	Vitamin B3 (Nicotinamide)	HAV Ab Total
CBC	Total Globulin	Vitamin B6 (Pyridoxine)	HBs Ag
ESR	A / G Ratio	Vitamin E	HBs Ab
Platelet Count	BUN	Hormones	HBc Ab IgM
Reticulocyte count	Urea	β - HCG	HBc Ab Total
Sickle Cell Test	Creatinine	TSH	H Be Ag
Hb Electrophoresis	Uric Acid	FT 4	H Be Ab
G -6 - PD	Sodium	FT 3	HCV Ab
Malaria Film	Potassium	Total T4	HIV I & II
Bleeding Time	Chloride	Total T3	VDRL / RPR
Clotting	Bicarbonate (HCO ₃)	FSH	TPHA
PT	Creatinine Clearance	LH	Rubella IgM
PTT	Calcium (Totale)	Estradiol (E2)	Rubella IgG
Fibrinogen	Calcium (corrected)	Prolactin	Toxoplasma IgM
Coombs Test (Direct)	Phosphorus	Progesterone	Toxoplasma IgG
Coombs Test (Indirect)	Magnesium	Testosterone (Total)	CMV (IgG , IgM)
Blood Group ABO/Rh Typing	Iron	Testosterone (Free)	HSV I (IgG , IgM)
Biochemistry	TIBC	SHBG	HSV II (IgG , IgM)
Glucose(fasting)	Ferritin	DHEA - SO 4	TORCH Test
Glucose (2 hr PP)	CK (Total)	Anti- Mullerian Hormone	Anticardiolipn (IgG , IgM)
Glucose (random)	CK - MB	Insulin	Lupus Anticoagulant
Glucose 1 hr (50 gme)	LDH	C-Peptide	Anti-ds-DNA
Glucose Tolerance Test (GTT)	Amylase	Growth Hormone	Anti CCP
Hb Alc	Homocysteine	IGF - 1	Extractable Nuclear Ag (ENA)
Microalbumin (urine)	Zinc	Cortisol (AM , PM)	H. Pylori Ab (IgA , IgG)
Cholesterol (Total)	Lithium	17-OH Progesterone	Anti-Thyroid Peroxidase Ab
HDL - Cholesterol	Valproic Acid (Depakene)	PTH	Anti-Thyroglobulin Ab
LDL - cholesterol	Carbamazepine (Tegretol)	Immunology/Serology	Varicella Zoster (IgG,IgM)
Triglycerides	Serum Protein Electrophoresis	ASOT	Allergy Screen
Total Lipids	Vitamins	CRP	
AST (SGOT)	Vitamin D	RF	
ALT (SGPT)	Vitamin B 12	Brucella Test	
Alkaline Phosphatase	Folate , Serum	Widal Test	
Bilirubin (Total)	Folate , RBC	Monospot Test (I.M.)	OTHER
Bilirubin (Direct)	Vitamin A (Retinol)	EBV-VCA (IgM ,IgG)	
Gamma-GT	Vitamin B1 (Thiamine)	HAV Ab IgM	
Total Protein	Vitamin B2 (Riboflavin)	ANA	

Requesting Physician Signature Requesting Physician Stamp



مختبرات البرج الطبية
Al Borg Medical Laboratories

Client Code

Date 23/6/24

PATHOLOGY REQUEST FORM

(Please complete required data for quality assurance)

Physician Data

Hospital/Clinic: Dr. Leila Hamid M.
Physician Name: Dr. Leila Hamid
Mob./Fax:
P.O.Box: 2025
Email: Lhamid.Hassan@yahoo.com

Patient Data

Name: Al Maha Jaralla Al Nabet
Age: 25
Nationality: Q
File No.: 039082
Telephone:

Surgical Specimen:

Clinical data:

no genital warts +
cx erosion & bleeding
on touch.

Previous investigations

- ☐ Previous Cytology / No
☐ Previous Biopsy
☐ Previous PAP smear
☐ Normal
☐ Abnormal
Lab No. ()

Radiological Findings and Lab. Investigation:

Provisional diagnosis:

Non
Genital warts + cx erosion

Signature

Cytology (non Gynecology)

Date / /

☐ Conventional

☐ L B C

SPECIMEN SOURCE

☐ FNA

Site
No. of slides

☐ Body Fluids

- ☐ Pleural
☐ Peritoneal
☐ Pericardial
☐ CSF
☐ Nipple Discharge

☐ Urine

- ☐ Voided
☐ Catheterized

☐ Respiratory

- ☐ Sputum
☐ Bronchial Wash
☐ Rt.
☐ Lt.

☐ Synovial Fluid

☐ Source

- ☐ Rt.
☐ Lt.

☐ Others

CLINICAL DATA

RADIOLOGICAL FINDINGS

Signature



MEDICAL REFERRAL LETTER

GYNE AND GENERAL PATIENT'S

To Doctor : WWRC & Oncology clinic

From : DR. LEILA HAMID MEDICAL CENTER

Patient's Name: Al Maha Jarallah Al Nabit

Age: 25 Nationality: Qat

Is P 0 Abortion 1 Ectopic 0

☐ LOW RISK

☐ HIGH RISK

☐ I N F

☒ OTHERS Cx smear & Persistent ASCUS for further work up

Referred To :

Potl married ☐ For Booking to OPD

almost 2 yrs ☐ E R

Prega - IV F + Med

Presented June 2024 e genital swelling proved by H1P4
Immuno testing to be genital warts but virus typing for high
risk & low-risk types proved - ve, vaccinated e Gardasil-9

Referred By:

given topical Rx Dafflagyn

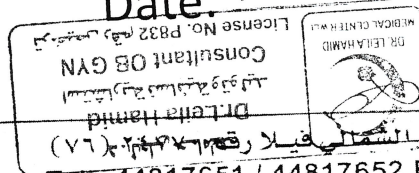
Doctor's Name:

daily for 3/12 - unfortunately smear still ASCUS.

Date: 02 OCT 2024

S/E Cx e no macroscopic +ve findings

for your kind care e thanks for coop



Date 23 / 06 / 24

New Patient Registration Form

Full Name المها حارثه السات الإسم الكامل

Date of Birth 1998 / 7 / 14 تاريخ الميلاد

Marital Status ☐ Single / أعزب ☒ Married / متزوج ☐ Divorced / مطلق ☐ Widowed / أرمل

Gender: ☐ Male / ذكر ☒ Female / أنثى Nationality قطرية الجنسية

Occupation طالبة المهنة

I.D Number 29863402491 رقم البطاقة الشخصية

Telephone No. (Home) رقم الهاتف المنزلي

Mobile Number 33319986 رقم الجوال

Emergency Contact Person أخت / مفضي أقرب الأقارب

Emergency Contact Number 66684484 رقم هاتف

Address: Building No. Zone No. Street No. العنوان

رقم البناية رقم المنطقة رقم الشارع العنوان

How did you hear about our Center من أين سمعت عن مركزنا؟

☐ Advertisements / إعلانات ☐ Referral by doctor ☒ Friends & Relatives / أصدقاء وأقارب

☐ Others / أخرى

How do you want us to address you ? كيف تفضل أن نناديك ؟

☒ By Name / بالإسم ☐ By No / بالرقم ☐ Others (please specify) / حدد الطريقة التي تفضلها

I receive my Rights & Responsibilities ☐ استلمت قائمة حقوق و مسؤوليات المريض

Signature Almaha التوقيع

File Number 039082



نموذج الموافقة المستنيرة

موافقة على العلاج الطبي

أوافق و أوجة الطبيب / الطيبة المعالج لي لمقابلتي وأجراء الكشف علي والقيام بتشخيصي ومعالجتي بالأدوية أو العقاقير أو عمليات إن إحتاج الأمر ، وأنا أدرك أن من مسؤوليتي الحضور في الوقت المحدد لمواعيدي واتباع أوامر الطبيب المعالج لي كما أدرك بأنني لدي الحق في طلب رأي ثاني لو لم أكن راضيا / راضية عن الرعاية المقدمة لي.

وأوافق على أي اجراء فحص طبي إن طلب مني من أجل تقديم رعاية طبية صحيحة.

وقد قرأت ووافقت على نموذج الموافقة المستنيرة حسب تعليمات وزارة الصحة العامة.

اسم المريض / المريضة: المحمدا جارا الله النابت



التاريخ: 10-8-2024

ملف رقم: 039082

التوقيع: *Almeha*



نموذج الموافقة المستنيرة

موافقة على العلاج الطبي

أوافق و أوجة الطبيب / الطبيبة المعالج لي لمقابلتي وأجراء الكشف علي والقيام بتشخيصي ومعالجتي بالأدوية أو العقاقير أو عمليات إن إحتاج الأمر ، وأنا أدرك أن من مسؤوليتي الحضور في الوقت المحدد لمواعيدي واتباع أوامر الطبيب المعالج لي كما أدرك بأنني لدي الحق في طلب رأي ثاني لو لم أكن راضيا / راضية عن الرعاية المقدمة لي.

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اسم المريض / المريضة: المها جلاله التات

1998/7/14

التاريخ:

03 9082

ملف رقم:

Almaha

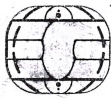
التوقيع :

د/ليلى حامد
Dr. Leila Hamid
استشارية نسائية وتوليد
ترخيص رقم P832

State of Qatar
ID. Card



دولة قطر
بطاقة إثبات شخصية



الرقم: ID. No: 29863402491

تاريخ الميلاد: D.O.B. 14/07/1998

الجنسية: QATAR / قطريه

الصلاحية: Date of expiry: 27/06/2028



الاسم: المها جارالله مبارك البخيت النابت

Name: ALMAHA JARALLA M A AL-NABET

منطقة 55 - شارع 671 - مبنى 135

العنوان:

Serial No 5358260A343D32DF

الرقم المسلسل:

مدير إدارة الجنسية و وثائق السفر
Authority's signature

توقيع حامل البطاقة
Holder's signature

