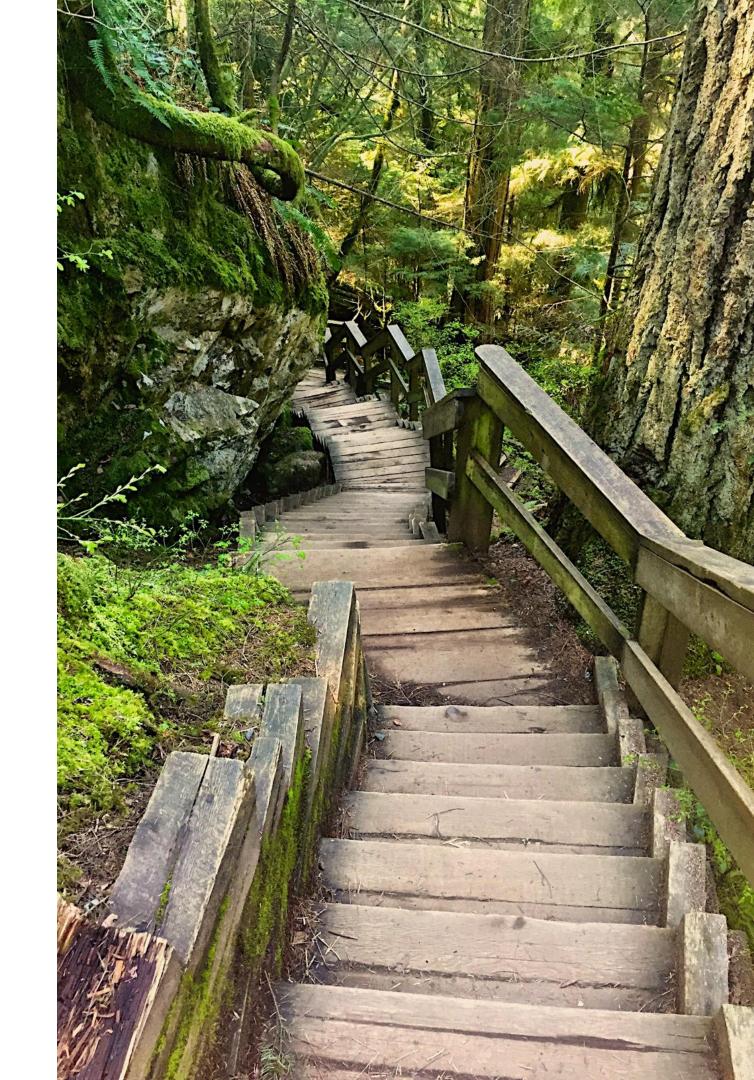


Cholelithiasis/es; Gallbladder stone management/removal







Medical history

Cholecystolithiases, fatty liver (MILD)



ULTRASOUND REPORT

ULTRASOUND OF THE WHOLE ABDOMEN

The liver is not enlarged showing homogeneous parenchymal echopattern with slight increase in parenchymal echogenicity. The intrahepatic ducts are not dilated. No mass lesion noted.

The gallbladder is physiologically distended measuring 2.1 cm in its transverse diameter with several hyperechoic foci exhibiting posterior acoustic shadowing with aggregate measurement of 3.7 cm.

The GB wall is not thickened. The common duct measures 3.5 mm with no intraluminal echo.

The pancreas is normal in size showing normal echotexture. No mass lesion or calcification noted.

The spleen is normal in size and echopattern with smooth borders. No mass lesion noted.

Both kidneys are normal in size and parenchymal echogenicity with intact central echocomplexes.

The renal cortical thicknesses are within normal limits. No calculus or focal mass noted.

The right kidney measures $9.6 \times 3.6 \times 3.6$ cm with corticomedullary thickness of 1.0 cm while the left kidney measures $10.7 \times 5.4 \times 5.4$ cm with cortical thickness of 1.5 cm.

The urinary bladder is distended with smooth mucosal lining. No intraluminal mass or calculus seen. Postvoid volume is minimal.

The uterus is normal in size and anteverted. No focal mass seen. Both adnexae are unremarkable.

IMPRESSION:

CHOLECYSTOLITHIASES.

MILD FATTY INFILTRATION OF THE LIVER.

ULTRASONICALLY NORMAL PANCREAS, SPLEEN, KIDNEYS, UTERUS, ADNEXAE AND URINARY BLADDER.

Labs done:

- (Maxicare October 23, 2022)
- Ultrasound (whole abdomen)

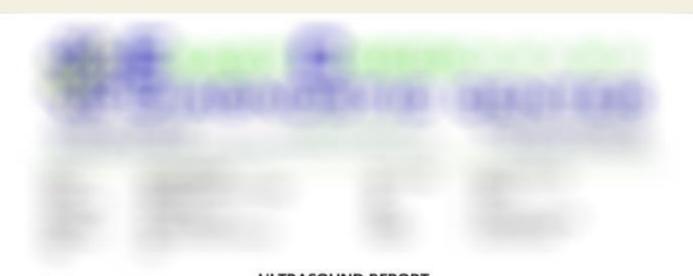
- Cholecystolithiases (3.7cms)
- Fatty Liver (MILD)



 Hospital Management > Cholecystectomy







ULTRASOUND REPORT

UPPER ABDOMEN ULTRASOUND

Liver is normal in size with increased echopattern. No focal mass lesion is seen.

Gallbladder is normal in size with no intraluminal echoes seen. Its wall is not thickened.

Intrahepatic and extrahepatic ducts are not dilated. Common bile duct measures 0.36 cm.

Pancreas and spieen are normal in size and echopattern. No focal mass lesion is seen.

IMPRESSION:

HEPATIC STEATOSIS

NORMAL SONOGRAM OF THE GALLBLADDER, PANCREAS AND SPLEEN

NON DILATED DUCTS

Labs done:

- (ExactCheck Diagnosis Center December 18, 2022)
- Ultrasound (whole abdomen)



- Negative for Cholecystolithiases
- Fatty Liver (MILD)

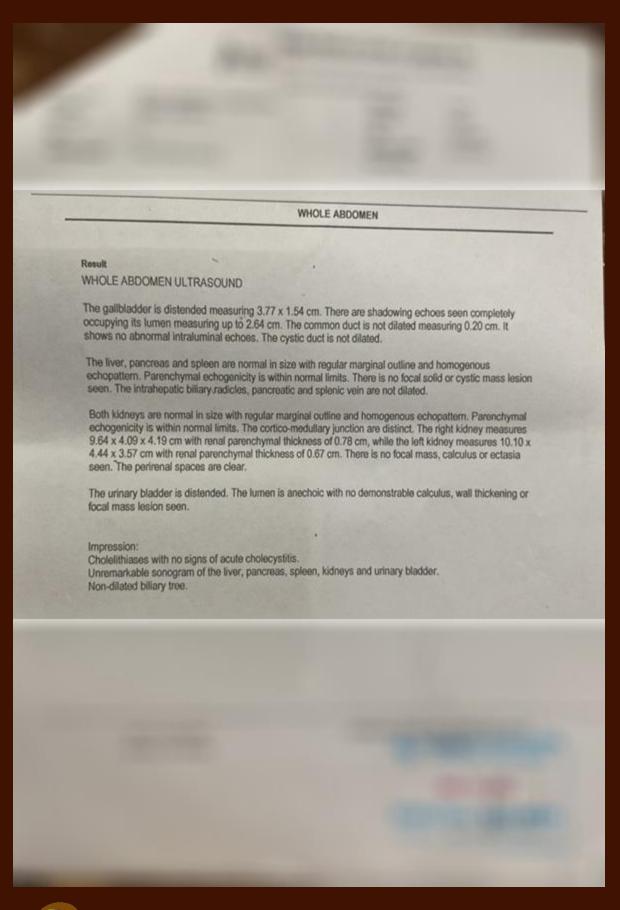




Medical history

Cholelithiases





Labs done:

- (Global Medical Center of Laguna Inc March 04, 2023)
- Ultrasound (whole abdomen)



 Hospital Management > Cholecystectomy



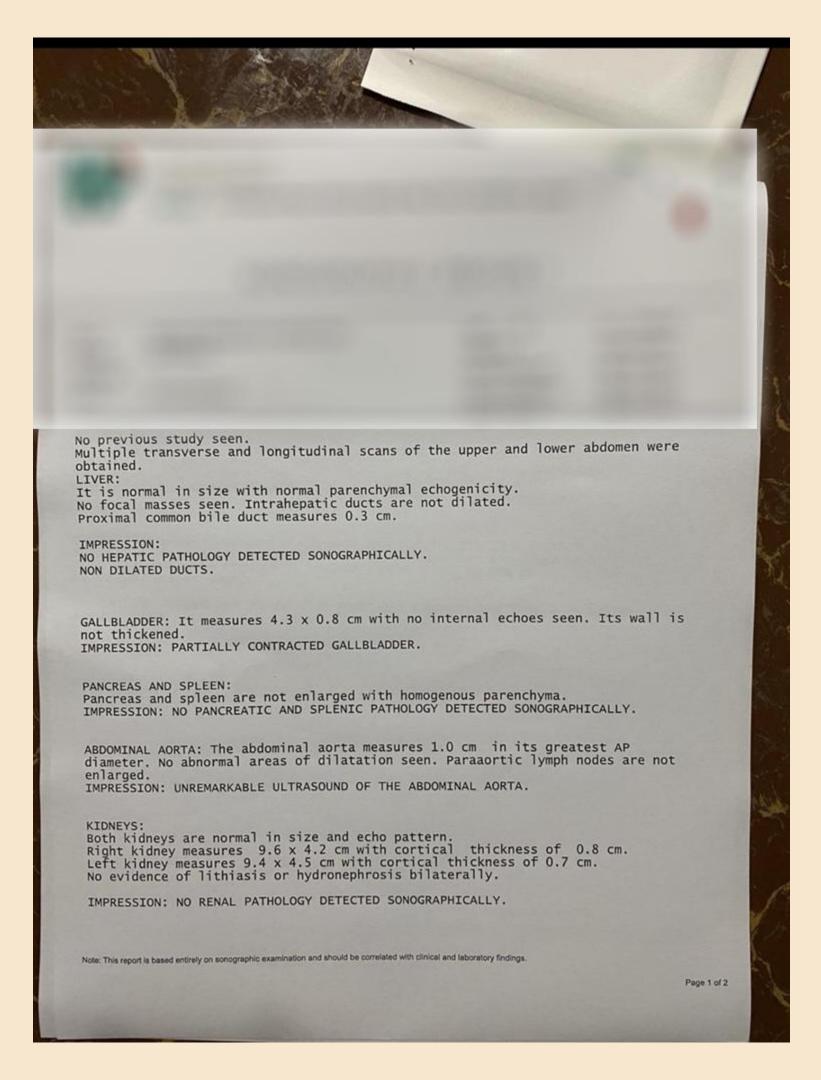


Labs done:

- (Hi-Precision Diagnostics May 03, 2023)
- Ultrasound (whole abdomen)

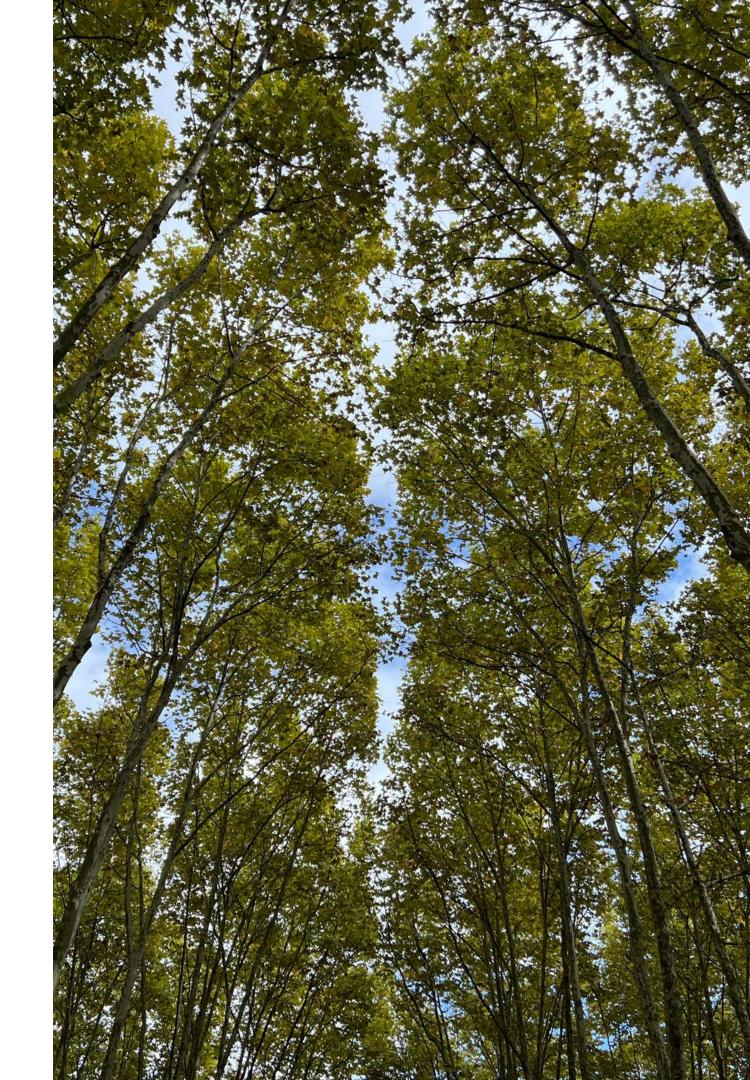


 Negative for Cholelithiases

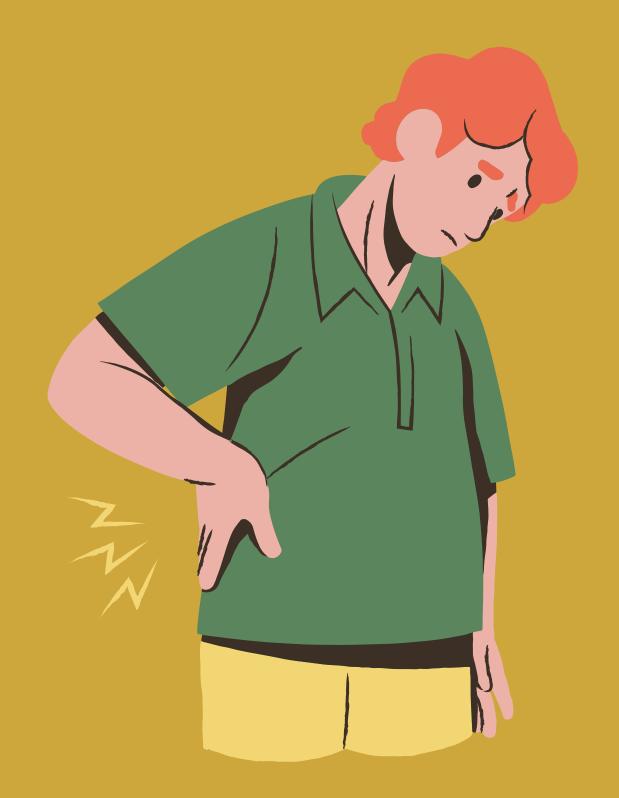




Prostatomegaly/ Prostate enlargement







Medical history

Fatty Liver, Cholelithiases, Prostatomegaly (Stage 2)



000

Labs done:

 (St. Claire Clinic - September 08, 2022)

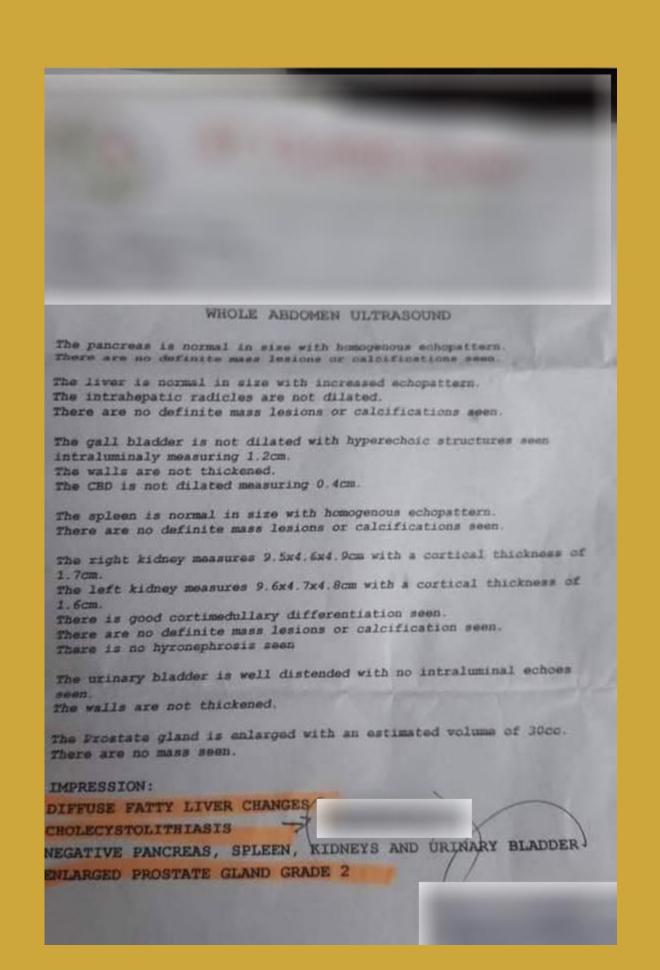
Ultrasound (Whole Abdomen)



- Fatty Liver
- Cholecystolithiasis (1.2cm)
- Prostatomegaly (Stage 2)

Hospital management > Medications; TURP





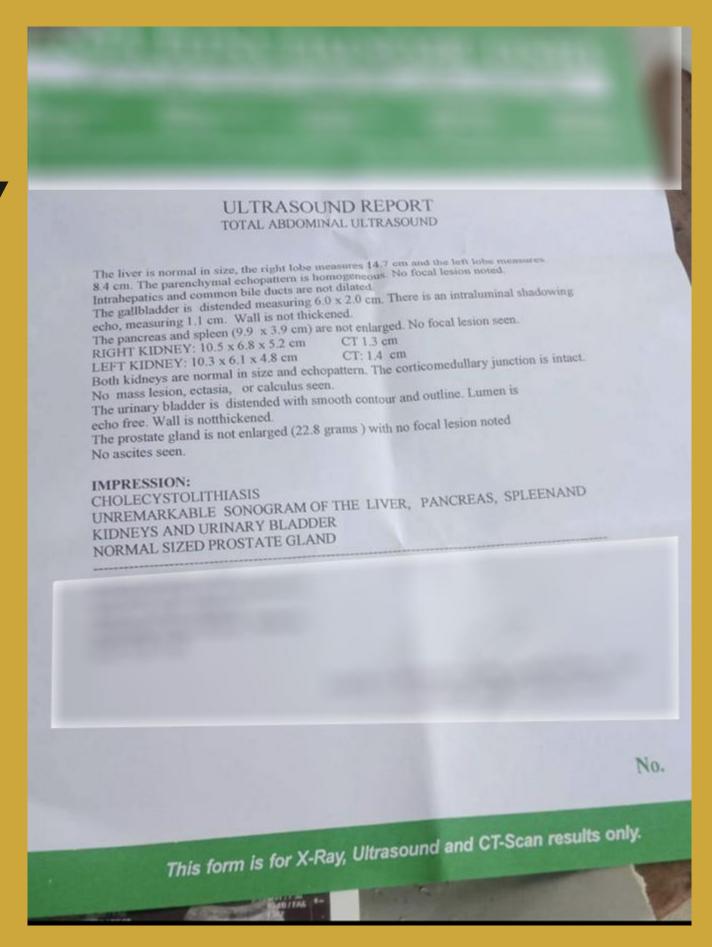


Labs done:

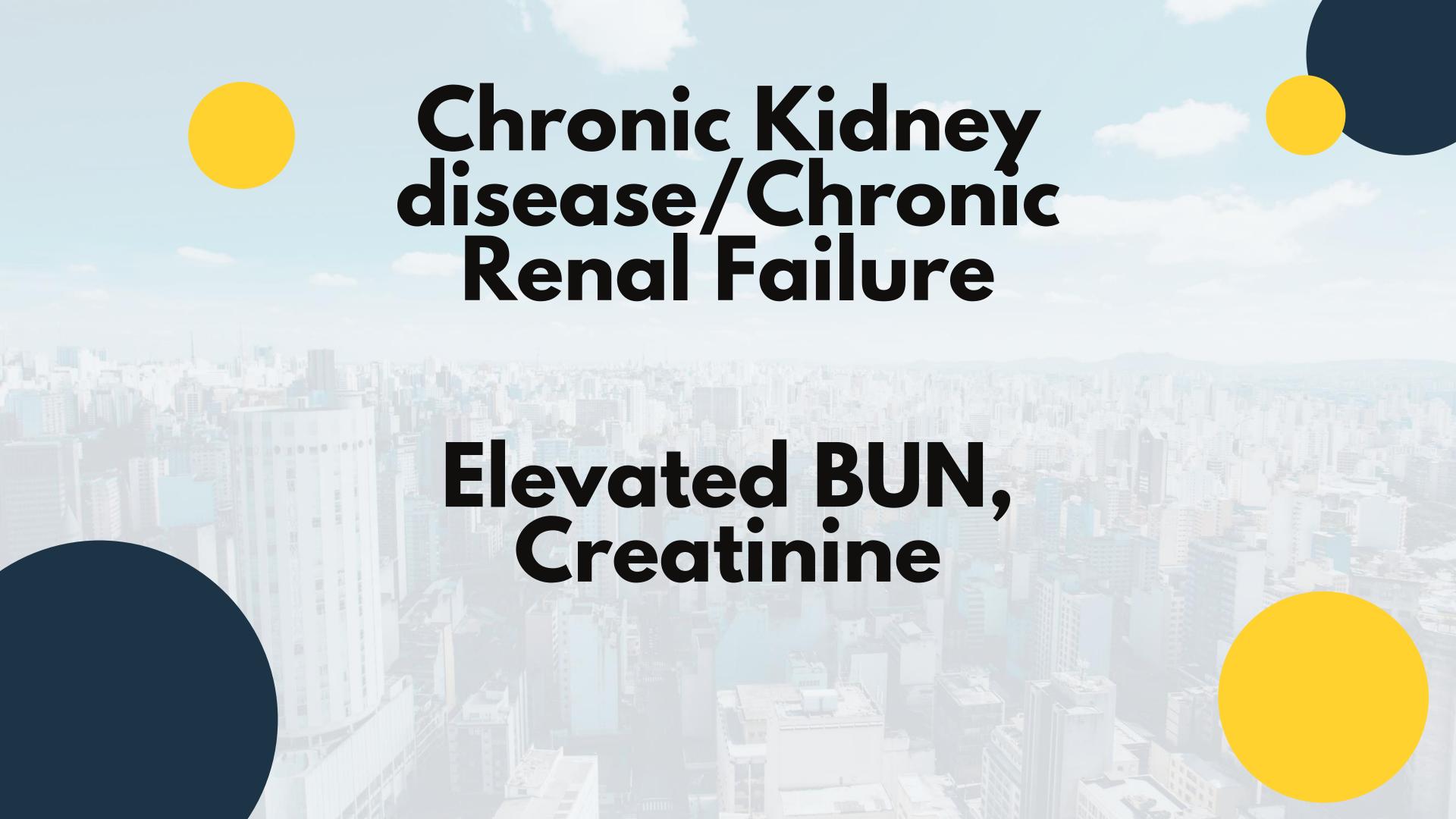
- (Sta. Elena Diagnostic Center January 05, 2023)
- Ultrasound (Whole Abdomen)



- Essentially normal liver
- Cholecystolithiasis down to (1.1cm)
- Essentially normal Prostate gland









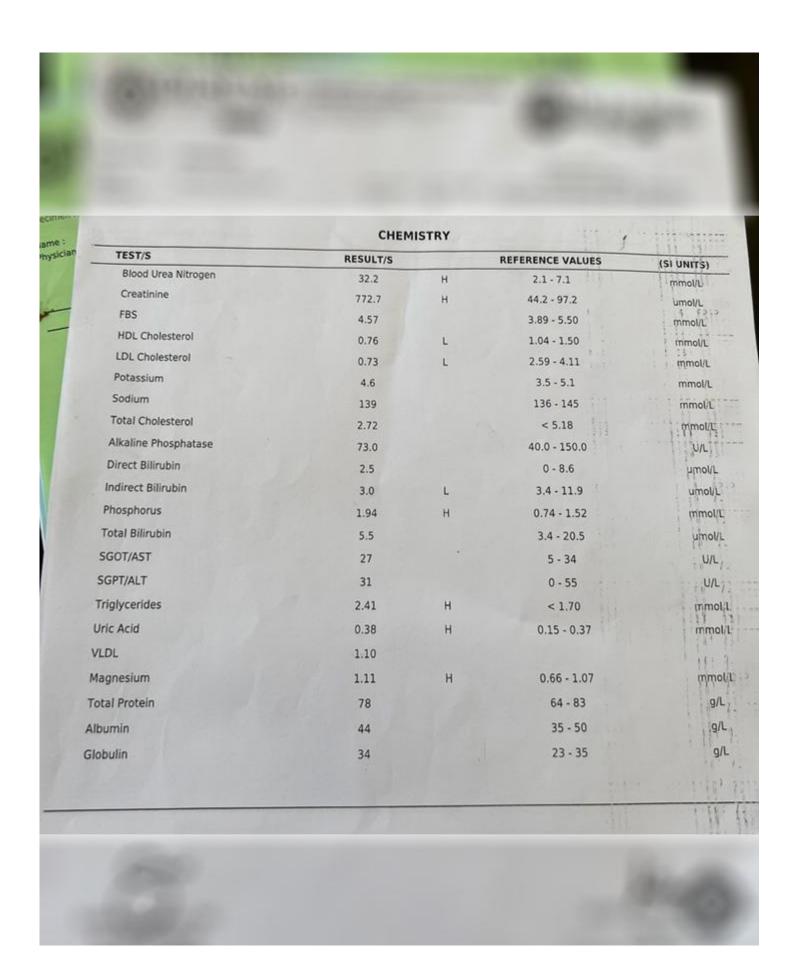
Medical history

Chronic Renal Failure;
Hypertension x15 years;
s/p Radical Nephrectomy,
RIGHT

Medications:

- Clonidine HCL 150mg/tab TID
- Amlodipine 10mg/tab 0D
- Hemarate FA BID
- Sodium Bicarbonate (NaHCO3) 650mg/tab TID
- Rosuvastatin 10mg/tab OD HS
- Omacor OD
- Ketobest 600mg/tab 2 tabs TID
- Urinorm 40mg/tab OD
- Cranberry caps OD
- Sevelamer 800mg/tab
- Epoetin 4000 IU/ml once per week





Labs done:

- (De La Salle University Medical Center March 29, 2023)
- Blood Chem



- Hospital management
 → Hemodialysis
 → Kidney transplant







CLINICAL CHEMISTRY

BLOOD CHEMISTRY

		S.I. UNIT		CONVENTIONAL UNIT	
TEST NAME		Result	Reference Range	Result	Reference Range
Creatinine	н	570	45 - 84 umol/L	6.44	0.51 - 0.95 mg/dL
Estimated Glomerular Filtration Rate (eGFR)		7	ml/min/1.73m^2		
Urea Nitrogen (BUN)	н	23.5	2.1 - 7.1 mmol/L	65.82	5.88 - 19.89 mg/dL
BUN/Creatinine Ratio		10.21		10.21	

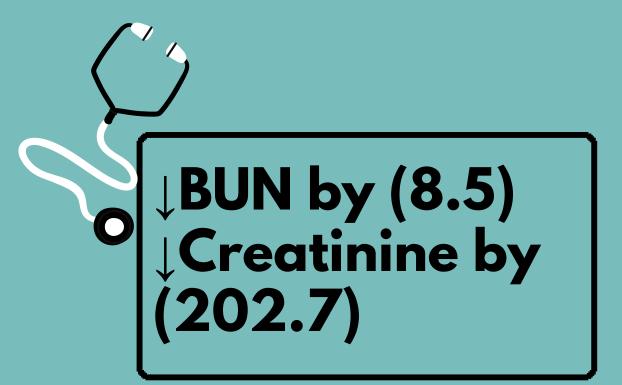
REMARKS:

CREATININE AND UREA NITROGEN: RESULT/S VERIFIED. TEST/S DONE TWICE.

Laboratory report must be clinically correlated by your attending physician.

Labs done:

- (New World Diagnostics May 12,2023)
- Blood Chem







Patient/Male

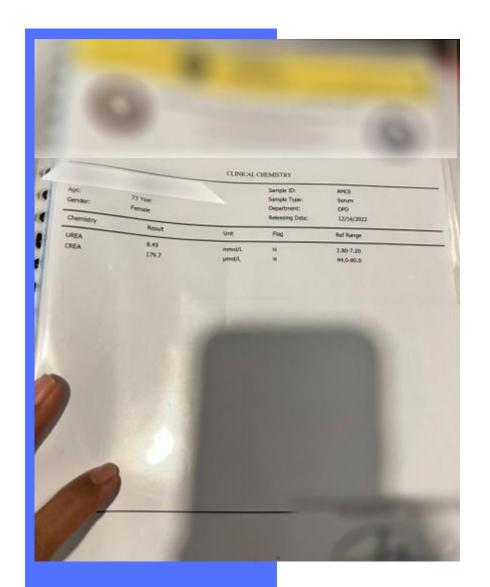


Chronic Renal Disease (Stage 3 B); Prostatomegaly

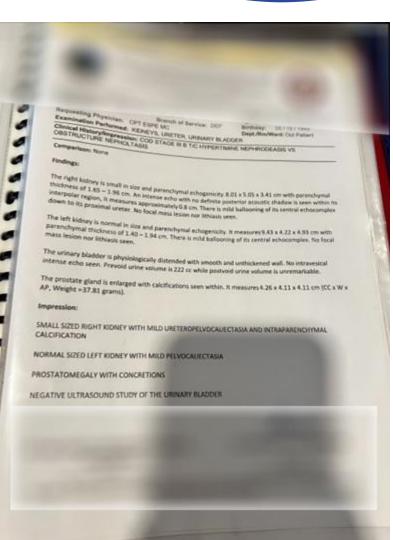


Labs Done (Dec 2022):

- Blood
 - UREA 8.49mmol/L
- Creatinine 179.7mmol/L
 - Ultrasound
- RIGHT Kidney w/ Ureteropelvocaliectas ia and Intraparenchymal Calcification 0.8cm
- LEFT Kidney w/ mild pelvocaliectasia
 - Prostatomegaly



- Hospital management
 → Hemodialysis
- → Kidney transplant

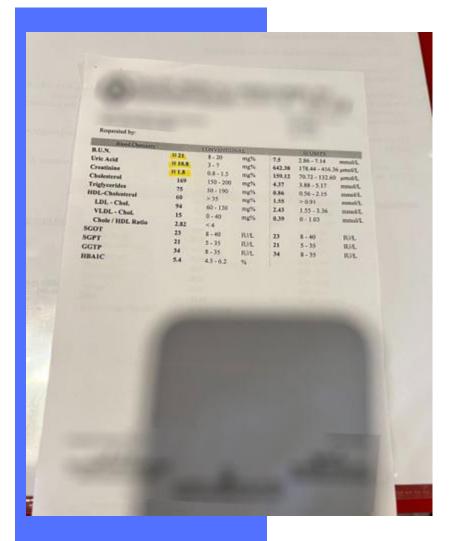


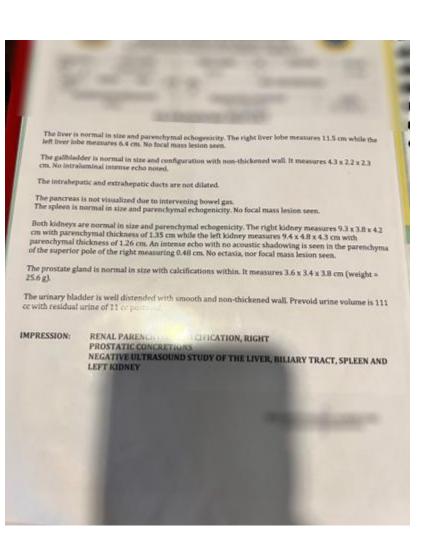




Labs Done (Feb 2023):

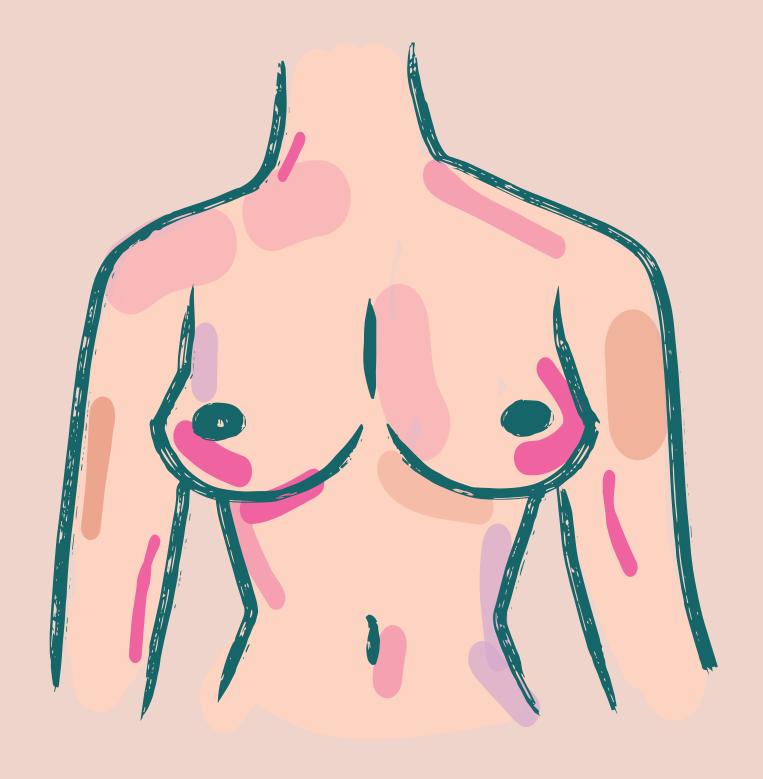
- Blood
 - UREA 7.5mmol/L
- Creatinine 159.1mmol/L
 - Ultrasound
- RIGHT Kidney Calcification reduced to 0.4cm
- LEFT Kidney E/N
- Prostate E/N











38/Female

Medical history

GOPO; ≥ 2 Year HX of Breast Lesion, RIGHT



EXAMINATION: 2D + 3D BREAST ULTRASOUND

HISTORY: (+) FAMILY HISTORY OF BREAST CA - SISTER AND GRANDMOTHER

COMPARISON: FOLLOW - UP STUDY TO JULY 2016

INTERPRETATION AND FINDINGS

Breast ultrasound revealed the following:

[<LEFT BREAST>]

No discrete mass lesion.

[<RIGHT BREAST>]

Complex nodule with intraductal component at 3A position measuring 0.6 x 0.4 x 0.6 cm.
 TISSUE CORRELATION is recommended.

IMPRESSION:

TISSUE CORRELATION is recommended for the complex nodule in the right breast Unremarkable left breast

AXILLARY AREAS: Axillary regions show no abnormality

BIRADS CATEGORY: 4

BIRADS CATEGORY

Category 0 - Incomplete - Additional imaging evaluation needed before final assessment

Category 1 - Negative - No lesion found (routine follow -up)

Category 2 - Benign Finding - No malignant features: eg cyst (routine follow-up for age, clinical management)

Category 3 - Probably benign finding: Malignancy is highly unlikely eg fibroadenoma (initial short interval follow-up)

Category 4 - Suspicious abnormality - Low to moderate probability of cancer, biopsy should be considered

Category 5 - Highly suggestive for malignancy: almost certainly cancer, appropriate action should be taken.

Category 6 - Known cancer - Biopsy proven malignancy, prior to institution of therapy.

Note

 Not all breast abnormalities like microcalcifications or diffuse breast parenchymal changes show up on breast ultrasound, hence a stand-alone ultrasound examination cannot be used as a screening modality for early breast lesions.

Ultrasound, being complementary to mammography should be accompanied by a mammogram so that an accurate BIRADS category can be given.

3. Utilization of either or both modalities is based upon a patient's risk for breast cancer, clinical evaluation and expert opinion of the attending physician.

This radiologic interpretation is only a part of the overall assessment of a patient's condition. It must be correlated with the clinical, laboratory and other ancillary parameters for a comprehensive analysis.

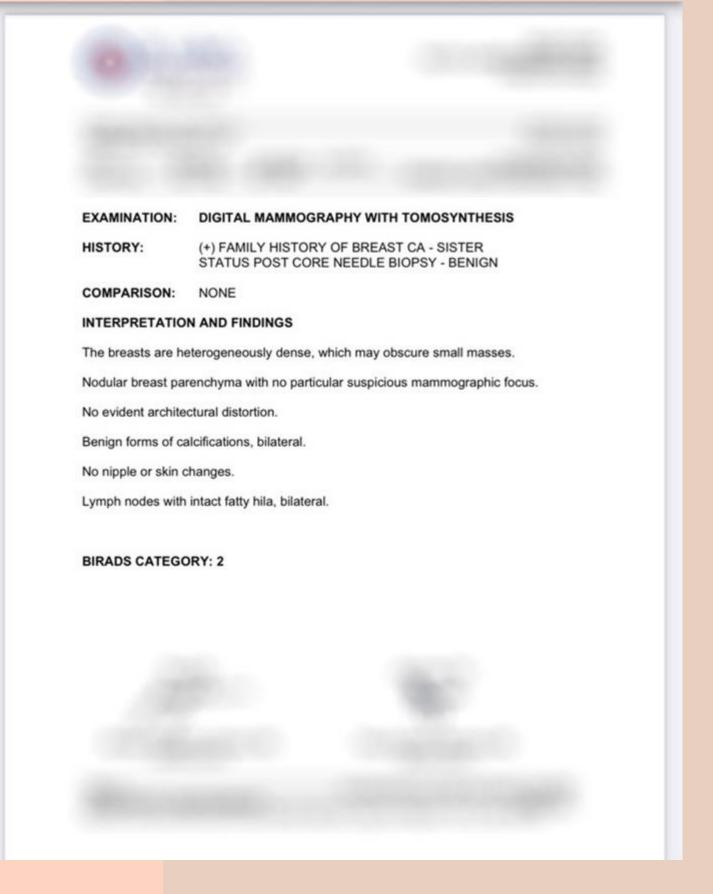
Hospital Management:

Excision
Biopsy with
or without
Lumpectomy

Ultrasound Breast, Bilateral (May 2022)



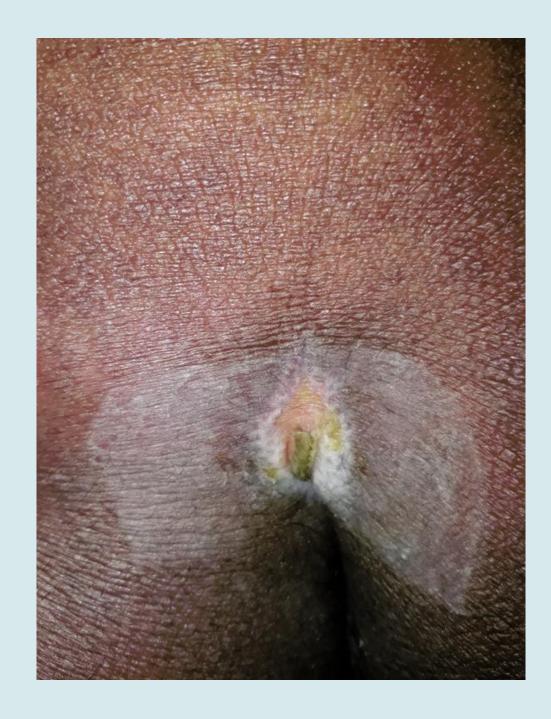
EXAMINATION: 2D + 3D BREAST ULTRASOUND HISTORY: (+) FAMILY HISTORY OF BREAST CA - SISTER STATUS POST CORE NEEDLE BIOPSY - BENIGN COMPARISON: FOLLOW - UP STUDY TO MAY 2022 INTERPRETATION AND FINDINGS Breast ultrasound revealed the following: [<LEFT BREAST>] No discrete mass lesion. [<RIGHT BREAST>] 1. Cyst at 3A position measuring 0.6 x 0.3 x 0.4 cm. IMPRESSION: Nodule with benign features, right breast **AXILLARY AREAS:** No discrete abnormality **BIRADS CATEGORY: 2**



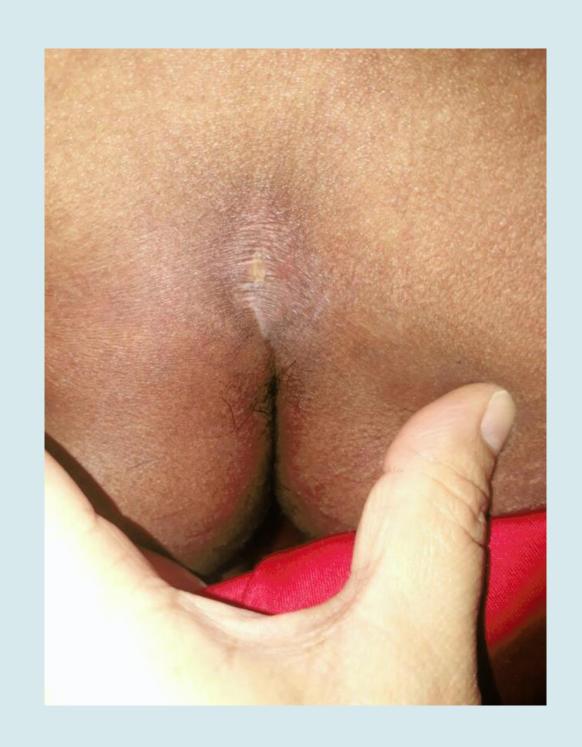
Ultrasound Breast, Bilateral (May 2023)



ADMITTED MALE PATIENT WITH DECUBITUS ULCER STAGE III



PRE

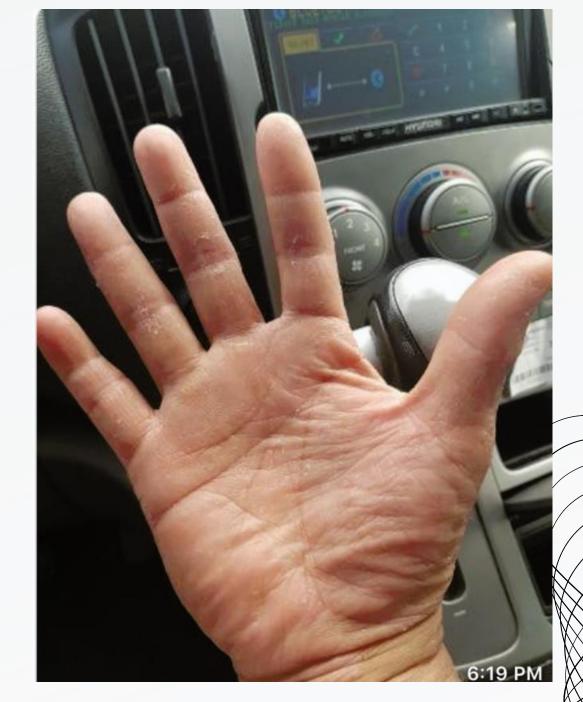


POST



Male Patient w/ > 10 year history of severe eczema







PR

POST

Male Patient w/ > 5 year history of severe eczema



PRE



POST



Mission Statement

Mission

- Present premium health management options
- Deliver superior patient results by championing all aspects of natural and integrative medicine
- Vision
- Disrupt the healthcare landscape by utilizing evidencebased, holistic and integrative therapeutic methods
- Establish a world class healthcare facility offering the best healtcare solutions



Business Concept

As healthcare becomes more virtual, fragmented and specialized but limited; we empower patients by providing options to address the presenting health condition. We optimize health and wellbeing through evidence-based, sustainable, integrative approaches. WE provide HIGHLY EFFECTIVE, FULLY-CUSTOMIZABLE HEALTHCARE EXPERIENCES built on emphasizing the therapeutic relationship between practitioner and patient, as informed by evidence, which makes use if all appropriate therapies. We deliver BOLD, EFFECTIVE TREATMEANTS with healing-oriented medicine that takes account of the whole person, including all aspects of lifestyle. By working together, WE EMPOWER THEM TO ACTIVELY SHAPE THEIR HEALTH JOURNEY.

