

Consultant Physician Clinic

Patient Name:- *Taruji Brijesh Maisuriya*

Age / Sex :- *30/F.*

Chief Complaints:-

- Pt. aware

cp. no any coplan

OPR NO:

Date: *22/10/24*

Weight:- *46.3kg*

Height:- *146cm*

BMI:-

Nutritional assessment:-

- Obese
- Well nourished
- Mild-moderate nourished
- Severely mal-nourished

Drug / Food Allergy:-

Past History :-

- kmo epilepsy, a kllls

Family History:-

Systemic Examination:-

'Asiant seigne' tal lucra (200)
107

- Pt
Dr

Pulse:- *59 bpm*

BP:- *100/70 mmHg*

SpO2:- *97%*

Provisional Diagnosis:

Ad

At picture no treatment at present

Mogal



Pre - op

Post- op

Health Check-up

Date : 22/10/20

Patient Reg. No. : _____

Patient Name : Tamvi B Maiseloyal Age / Sex : 30/F

Address : Adajan

Complaints :

Pain : _____

Bleeding gums : _____

Swelling : _____

Sensitivity : _____

Pus Discharge : _____

Medical History :

Hypertension : _____ DM _____ Acidity _____ Pregnancy : _____

Bleeding Disorders : _____ Asthma : _____ Allergy : _____

Past Surgical Intervention : _____

Any Medication : Epilepsy

On Examination :

Abscess : _____ Food lodgement : _____

Periodontitis : _____ Gingivitis : _____

Missing Teeth : _____ Mobility : _____

Treatment Advised :

Scaling : Sittings 1 2 3 Deep

Perio Surgery : _____

Restoration : _____

Class V Fillings : _____

RCT : _____

Extraction : 78

Dentures : _____

Partial Denture : _____

Implants : _____

Crown & Bridge Present : _____

Crown / Bridge Replacement :

Advised Crown / Bridge :

Advised X - Ray / O.P.G. :

Some Golden Rules :

1. Brush your teeth twice a day.
2. Floss your teeth daily.
3. Gargle forcefully after each meal.
4. Visit your dentist twice a year.
5. Any dental treatment should be performed in a well maintained.

hygienic setup using "autoclaved" instruments & "sterilized pouch" facility.

After knee replacement any treatment should be done under "Antibiotic Coverage"

Adv: Extraction 18

Jadg 07.12

Dr. Darshini V. Shah
(Consultant Dental Surgeon)

SHALBY LIMITED

• Passion • Compassion • Innovation •

DR. RUJUTA SHELAT

Consultant Ophthalmologists

Reg. No.: - G-48712

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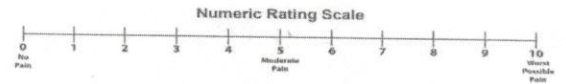
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Name:- Tarvi Maisuriga.

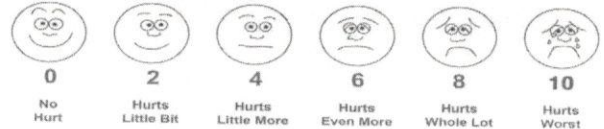
Date:- 22-10-24

Chief Complaints:-

- N/H/O recent eye complaints.
- Came for regular checkup.



Wong-Baker FACES[®] Pain Rating Scale



©1997 Wong Baker FACES Foundation www.WongBakerFACES.org Used with permission.

Pain Assessment:-

Past History:-

Nil

Family History:-

Allergy:- No allergy

Personal History:- Habits: - Alcohol: - Y/N Tobacco: Y/N Smoking: Y/N Regular Exercise: Y/N

General Examination:-

BP: - Pulse: - Temp: -

Systemic Examination:-

HT: - Nil WT: - Nil

Visual Acuity:-

Consp. 6/6

6/6

6/6

PH Vision:-

NCT < 12
12

ON Examination

Ant. Segment

Both Eye

CON

PACD = 1

CON

SHALBY HOSPITAL, SURAT

Near Navyug College, Rander Road, Adajan, Surat. Gujarat, India. | Ph.: 0261-7190000 | Email : info.surat@shalby.org

SHALBY LIMITED

Regd. Office: Opp. Karnavati Club, S. G. Road, Ahmedabad - 380 015, Gujarat, India.

Corp. Office: B-301 & 302, Mondeal Heights, Opp. Karnavati Club, S. G. Road, Ahmedabad - 380 015, Gujarat, India

Cornea

clear.

clear, Anterior Chamber

Lens

Fundus

Rt. EYE

Lt. EYE

Media:-

Disc:-

Blood Vessel:-

Background:-

Macula:-

WML

Investigation:-

Diagnosis:-

- BG : Emmetropic

Treatment:-

Nutritional Assessment:-

Preventive Care & Counselling:-

Follow Up ON:-

505/1 year.

Signature of the Consultant

DR. Anjana Khat

DR. HIMANI THAKER (VYAS)

M.S (Gynec)
Consultant Obstetrician & Gynecologist
Laposcopic Surgeon
Infertility Specialist
Email-ID:- thaker.himani@gmail.com
Register No. G-31062

Shalby Women's Health Clinic

Name:- Tanni
Chief Complaints:-

Date: 21/10/24
Weight:-
Height:-
OPR NO:-

- Nutritional Assessment:-
- Obese
 - Well Nourished
 - Mild-Moderate Nourished
 - Severely Mal-Nourished

Clonit

M/H:- paup - 34 days, then 35

LMP:- 5/10/24

O/H:- OH - B, U

P/H:- frusc / 0 / sym / L,
F/H
Examination:-

PLA - soft

Provisional Diagnosis:- Pls - All healthy
PAP taken

Treatment & Further Advices:-
(Write in Capital Letters)

Investigaion Advised:-

dx

-SYP M₂ tone - (1) }
2-0-2 } 6 months

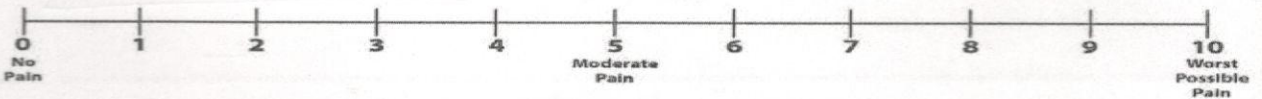
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Follow Up:

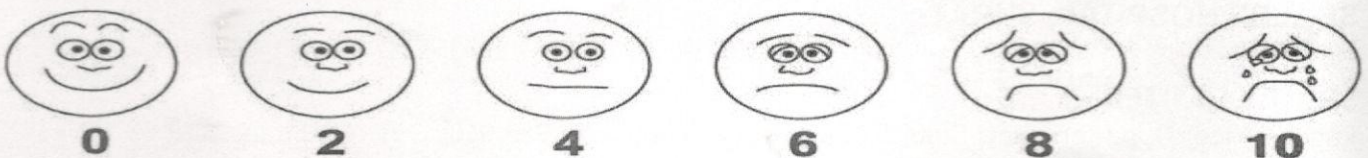
Date:- _____

Incase of emergency Please report to Emergency Department of Hospital OR Call:- 0261-7190000 / 9512660096

Numeric Rating Scale



Wong-Baker FACES® Pain Rating Scale



ID:

Name:

kg

Birth date:

years

mmHg

Sex: M
 cm
 Indication:
 Symptoms:
 History:
 Heart rate: 63 bpm
 RR int: 136 ms
 PR dur: 74 ms
 QT/QTc(E) int: 356/364 ms
 P/QRS/T axis: 62/68/41
 RV5/SV1 amp: 1.24/1.02 mV
 RV5+SV1 amp: 2.26 mV

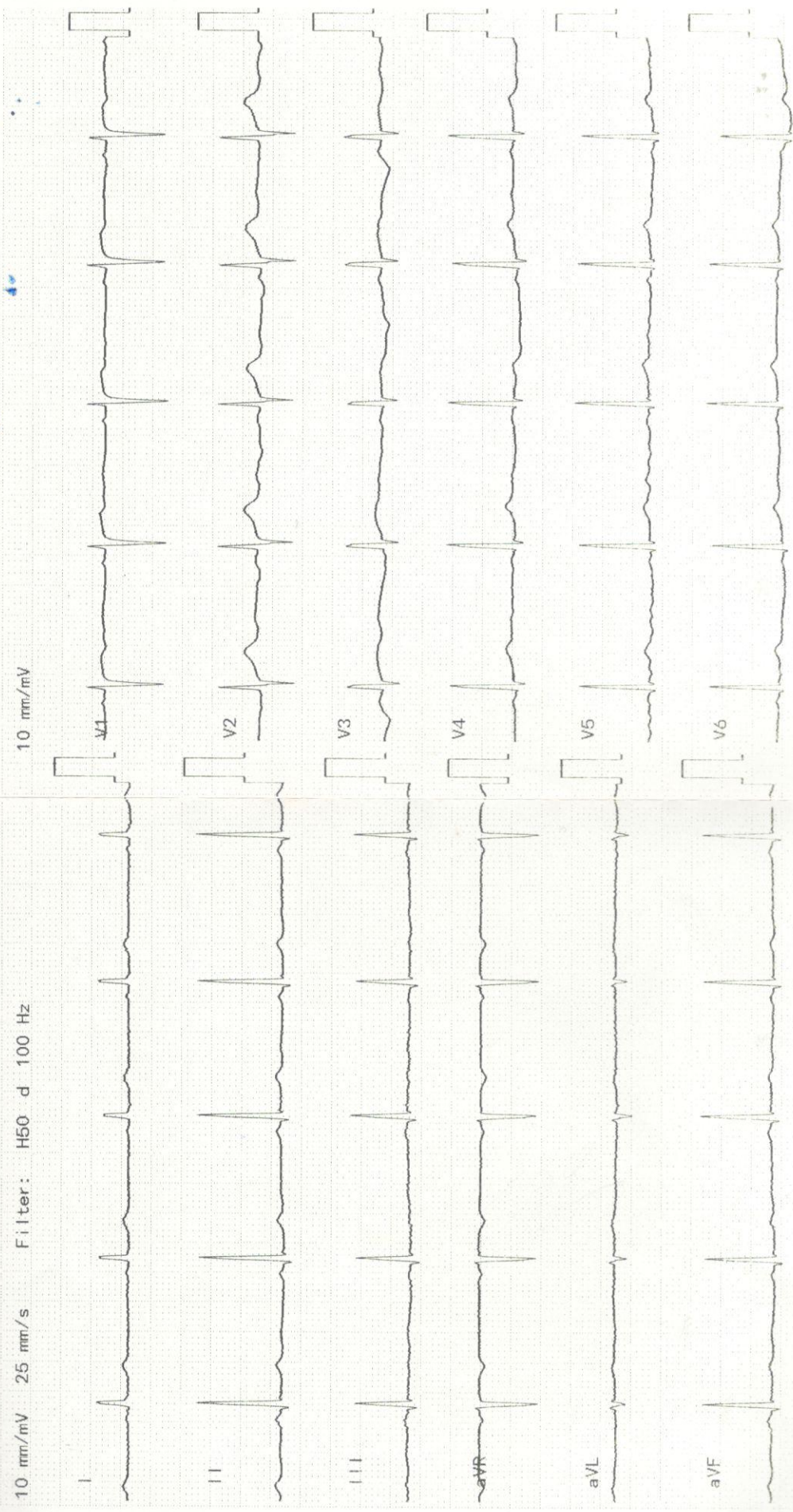
1100 Sinus rhythm

4068 Nonspecific Twave abnormality

9130 ** borderline ECG **

Tarwi Matsuyama

Unconfirmed Report
Reviewed by:



10 mm/mV

25 mm/s Filter: H50 d 100 Hz

Patient's Name: Tanvi Maisuriya

UHID:373556

Age: 30 yrs / Female

Date:22 / 10 / 2024

ECHOCARDIOGRAPHY REPORT**Valves:-**

Mitral valve :Normal, No MR

Aortic valve :Normal, No AR

Tricuspid valve :Normal, No TR

Pulmonary valve:Normal, No PR

Chambers:-

Left Atrium:Normal

Right Atrium:Normal

Right Ventricle:Normal size cavity, Good RV systolic function With TAPSE:20

Left Ventricle: Normal size cardiac chambers, No Regional wall Motion abnormality.
Normal LV systolic function
with Ejection Fraction 60 %.
Normal Diastolic Flow Pattern.

Septae:-

IVS: Intact. No residual VSD.

IAS :Intact.

Pericardium:Normal.

IVC:13 mm with more than 50% collapsibility.

OTHER FINDINGS :- Bilateral lung angle clear**CONCLUSION:-**

- Normal LV Systolic function
- No RWMA
- EF 60 %

**DR.SUSHIL YADAV**

Consultant Clinical cardiologist

Note : Normal echo study does not rule out underlying Coronary artery disease

Patient Name: TANVI BRIJESH MAISURIYA	UHID: SUR0000373557
Age / Sex: 30 Yrs. / Female	Study: USG Abdomen + Pelvis
Referred By: Dr. at shalby hospital	Date: 22.10.2024

ULTRASOUND OF ABDOMEN AND PELVIS (TAS)

Liver is normal in size and appearance. It shows normal parenchymal reflectivity. No focal lesion seen. The Hepatic veins appear normal. No evidence of dilated I.H.B.R. **Portal vein** appears normal.

Gall bladder is well distended and appears normal. No evidence of calculi seen. Wall appears normal. No pericholecystic fluid seen. **CBD** appears normal.

Pancreas appears normal in size and echotexture.
Spleen appears normal in size and appearance. No focal lesion seen.

Right kidney it shows normal echotexture and corticomedullary differentiation. There is no evidence of scarring, hydronephrosis or calculi.

Left kidney it shows normal echotexture and corticomedullary differentiation. There is no evidence of scarring, hydronephrosis or calculi.

Urinary bladder well distended and appears normal. No evidence of any intraluminal mass or calculi.

Uterus appears normal in size and measures 59 x 31 x 49 mm. The uterine myometrial echotexture is homogenous. No focal lesion is seen. There is no evidence of any ovarian or adnexal mass lesion.

No ascites is seen. No abnormal bowel wall thickening and dilatation seen.

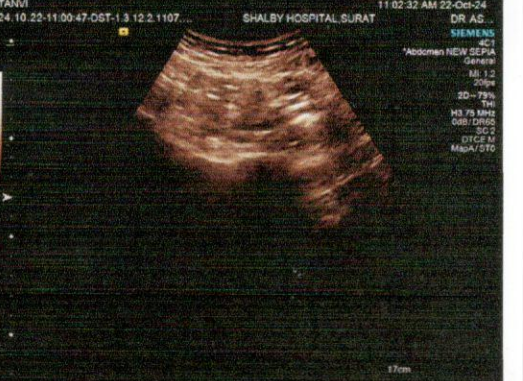
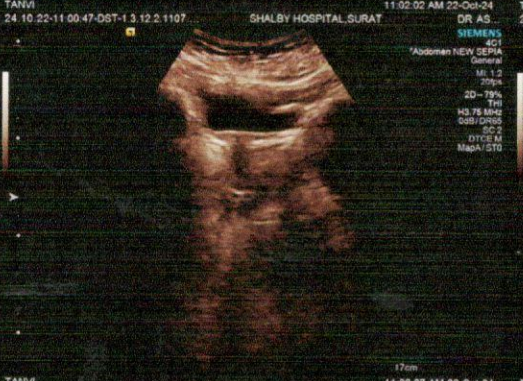
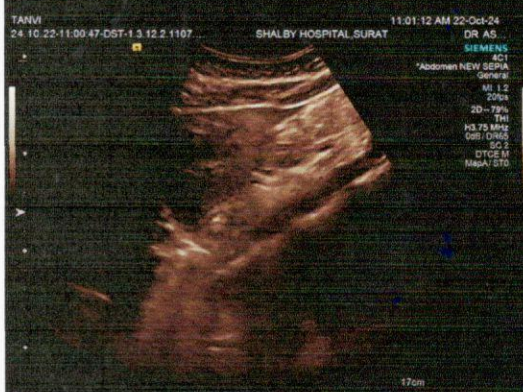
IMPRESSION:

- No significant abnormality detected.

Thanks for referrals.



DR. ASHUTOSH GANDHI
DMRD (Radiodiagnosis)
G-14916



9 D=6.92 cm
 10 D=3.14 cm
 8 D=4.86 cm

5 D=6.71 cm

Patient ID:	SUR0000373557	Patient Name:	TANVI B MAISURIYA
Age:	30 Years	Sex:	F
Accession Number:	10538 MHC	Modality:	DX
Referring Physician:	DR SHALBY	Study:	CHEST PA
Study Date:	22-Oct-2024		

CHEST X-RAY (PA)

Both lung fields appear normal.

No evidence of consolidation or cavitation is seen.

Both costo-phrenic angles appear clear.

Cardiac size is within normal limits.

Both domes of diaphragm appear normal.

Bony thoracic cage and soft tissue shadow appear normal.

IMPRESSION:

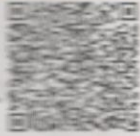
- No significant abnormality seen.

Thanks for referral.

**DR. ASHUTOSH GANDHI**

DMRD (Radiodiagnosis)

G-14916



Certificate No.: MC-5200

Shalby Hospital (A Unit of Shalby Limited) Near Navyug College, Rander Road, Adajan, Surat, Gujarat. India.
Tel.: 0261 7190000 | Ext.: 851 | Mo.: 9512036046 | Email : pathology.surat@shalby.in | Web : www.shalby.org

PID : SUR0000373557 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Tanvi Brijesh Maisuriya / Registered On : 22-Oct-2024 10:36 AM
 Lab ID : 410901677 Collected On : 22-Oct-2024 10:39 AM
 Gender/Age : Female / 30 Years DOB : 12-Nov-1993 Received On : 22-Oct-2024 10:46 AM
 Ref. By : Health Check Up Shalby Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
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BLOOD COUNT AND INDICIES

HAEMOGLOBIN	Colorimetric Non Cyanide	12.1 ✓	g/dL	12.0 - 15.0
RBC COUNT	Electrical Impedance	4.64	mill/cmm	3.8 - 4.8
HCT	Calculated	37.2	%	36 - 46
MCV	Calculated based on the RBC histogram	80.2	fL	83 - 101
WCH	Calculated	26.1	pg	27 - 32
MCWC	Calculated	32.5	g/dL	31.5 - 34.5
RDW	Calculated	12.2	%	11.6 - 14.0

TOTAL LEUCOCYTE COUNT

Total WBC Count	Electrical Impedance	6840 ✓	cells/cmm	4000 - 10000
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DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)

NEUTROPHILS	Flow Cytometry	52	%	40 - 80
LYMPHOCYTES	Flow Cytometry	37	%	20 - 40
EOSINOPHILS	Flow Cytometry	6	%	1 - 6
MONOCYTES	Flow Cytometry	5	%	2 - 10
BASOPHIL	Flow Cytometry	0	%	0 - 2

PLATELET INDICES

PLATELET COUNT	Electrical Impedance	268000 ✓	/cmm	150000 - 410000
MPV	Calculated based on PLT Histogram	9.4	fL	7.5 - 12.0

PERIPHERAL SMEAR EXAMINATION

RBCs Normochromic and Normocytic.
 WBCs Total and differential leucocyte counts are within normal limit.
 PLATELETS Adequate in number and normal in morphology.
 MALARIAL PARASITE Malarial parasites are not seen on smear examination.

EDTA Whole Blood - Tests done on Automated Five Part Cell Counter. (WBC, RBC, MCV & Platelet count by classical impedance method, Hb by cyanide-free colorimetric method, WBC differential by Chemical dye, Flowcytometry, Semi-conductive Laser scatter Method, independent Basophil channel & other parameters calculated). All Haemograms are reviewed & confirmed microscopically.

Reference Interval: Dacie and Lewis practical haematology 11th edition.

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Dr Pankaj Agrawal
 M.B., D.C.P
 Consulting Pathologist



Certificate No. : MC-5200



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BLOOD GROUP

(Tube agglutination: Forward & reverse)

ABO Type	"A"
RH Type	POSITIVE

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Parameter	Result	Unit	Biological Ref. Interval
ESR 1st hour <i>Modified Westergren Method</i>	16	mm in 1 hour	0 - 20
HBA1C			
HbA1c - Glycated Haemoglobin <i>Boronate Affinity Assay</i>	5.4	%	Non-diabetic: <= 5.6 Pre-diabetic: 5.7-6.4 Diabetic: >= 6.5 Therapeutic goals for glycemic control Age > 19 years Goal of therapy: < 7.0 Action suggested: > 8.0 Age < 19 years Goal of therapy: <7.5
Estimated Average Glucose (eAG) (mg/dL) <i>Calculated</i>	108	mg/dL	

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Ref. By : Health Check Up Shalby Sample Type : Fluoride F, Urine (PP),
Fluoride PP, Urine (F),S

Parameter	Result	Unit	Biological Ref. Interval
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PLASMA GLUCOSE LEVEL

FASTING PLASMA GLUCOSE

Plasma Glucose (F)	82	mg/dL	74 - 106
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GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

Urine Sugar (F)	ABSENT	mg/dL	Absent
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Glucose-oxidase/peroxidase reaction

Liver Function Test

Liver Function Test

SGPT (ALTV)	11	U/L	9 - 52
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Multi Point Rate with P-5-P

SGOT (AST)	19	U/L	14 - 36
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Multi Point Rate with P-5-P

Alkaline Phosphatase	65	U/L	20-50 yrs.: 42 - 98
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PNPP, AMP Buffer

4-19 yr : 54 - 369
>=51 yr : 56 - 119

GGT	18	U/L	12 - 43
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L-gamma-glutamyl-4-nitroanalide/glycylglycine Kinetic

S. PROTEIN	7.6	g/dL	6.3 - 8.2
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Biuret (Alkaline cupric sulfate), End Point

Albumin	3.7	g/dL	3.5 - 5.0
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Bromocresol Green (BCG), Colorimetric

S. GLOBULIN	3.9	g/dL	2.3 - 3.6
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Calculated

A/G Ratio	0.9	Ratio	1.0 - 2.3
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Calculated

Bilirubin Total	0.4	mg/dL	0-1 day (premature) 1.0 - 8.0 0-1 day (full term) : 2.0 - 6.0 1-2 day (premature) : 6.0 - 12.0 1-2 day (full term) : 6.0 - 10.0 3-5 day (premature) : 10.0 - 14.0 3-5 day (full term) : 4.0 - 8.0
------------------------	-----	-------	--

Azobilirubin/Dyphylline/Diazonium Salt

Adult : 0.2 - 1.3

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 Ref. By : Health Check Up Shalby Sample Type : Fluoride F, Urine (PP),
 Fluoride PP, Urine (F),S

Liver Function Test

Bilirubin Unconjugated <i>End-point Colorimetric (Dual wavelength spectrophotometric)</i>	0.4	mg/dL	Unconjugated bilirubin Adults: 0.0-1.1 Neonates: 0.6-10.5
Bilirubin Direct <i>Calculated</i>	0	mg/dL	Conjugated bilirubin and Delta bilirubin (Bilirubin covalently bound to albumin) 0.0-0.4

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Ref. By : Health Check Up Shalby Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
LIPID PROFILE			
LIPID PROFILE			
Cholesterol <i>Cholesterol Esterase, Oxidase, Peroxidase</i>	179	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
SERUM TRIGLYCERIDE <i>Lipase/GK/GPO/POD</i>	93	mg/dL	Normal : <150 Borderline High : 150-199 High : 200-499 Very High : > 500
HDL CHOLESTEROL DIRECT <i>Phosphotungstic Acid/MgCl2 - Enzymatic</i>	46 ✓	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : >= 60
Non HDL Cholesterol <i>Calculated</i>	133	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
LDL Cholesterol (hand) <i>Calculated</i>	114	mg/dL	Optimal: <100 Near to above Optimal: 100 - 129 Borderline High: 130 - 159 High: 160 - 189 Very High: > 190
VLDL <i>Calculated</i>	19	mg/dL	6 - 38
LDL/dHDL <i>Calculated</i>	2.5		2.5 - 3.5
Chol/dHDL <i>Calculated</i>	3.9	Ratio	3.5 - 5.0

Note: Reference interval as per National Cholesterol Education Programme (NCEP) Adult Treatment Panel III Report. VLDL, CHOL/dHDL RATIO, LDL/dHDL RATIO, LDL Cholesterol, Non HDL Cholesterol are calculated parameters. Estimation of LDL by direct method is recommended when TG>400 mg/dL.

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 Ref. By : Health Check Up Shalby Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
THYROID PROFILE (TFT)			
Total T3 <i>Chemiluminescence immunoassay (CLIA)</i>	88	ng/dL	87 - 178
Total T4 <i>Chemiluminescence immunoassay (CLIA)</i>	9.08	µg/dL	99% Reference Interval (µg/dL) 4.82 - 15.65
TSH <i>Chemiluminescence immunoassay (CLIA)</i>	2.202 ✓	µIU/mL	Non Pregnant Females: 0.38-5.33 µIU/mL Pregnant Females (1st trimester): 0.05-3.70 µIU/mL Pregnant Females (2nd trimester): 0.31-4.35 µIU/mL Pregnant Females (3rd trimester): 0.41-5.18 µIU/mL

TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm . The variation is of the order of 50% .hence

time of the day has influence on the measured serum TSH concentrations.

TSH levels During Pregnancy :

First Trimester :0.1 to 2.5 µIU/mL Second Trimester : 0.2 to 3.0 µIU/mL Third trimester : 0.3 to 3.0 µIU/mL

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Gender/Age : Female / 30 Years

DOB : 12-Nov-1993

Received On : 22-Oct-2024 10:46 AM

Ref. By : Health Check Up Shalby

Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
RENAL FUNCTION TEST			
<u>NABL Accredited Parameters</u>			
Urea Nitrogen (BUN) <i>Urease, colorimetric</i>	10	mg/dL	7 - 17
UREA <i>Calculated</i>	21	mg/dL	15 - 36
Creatinine <i>Enzymatic - Creatinine amidohydrolase</i>	0.60	mg/dL	0.52 - 1.04
S. URIC ACID <i>Uricase/Peroxidase, Colorimetric</i>	3.9	mg/dL	2.5 - 6.2
Calcium <i>Arsenazo III dye</i>	9.7	mg/dL	8.4 - 10.2
Sodium <i>Direct Ion Selective Electrode</i>	139	mmol/L	137 - 145
S. POTASSIUM <i>Direct Ion Selective Electrode</i>	4.4	mmol/L	3.5 - 5.1
Chloride	106	mmol/L	98 - 107

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Dr Pankaj AgrawalM.B., D.C.P
Consulting Pathologist



Shalby Hospital (A Unit of Shalby Limited) Near Navyug College, Rander Road, Adajan, Surat, Gujarat. India.
Tel.: 0261 7190000 | Ext.: 851 | Mo.: 9512036046 | Email : pathology.surat@shalby.in | Web : www.shalby.org

PID : SUR0000373557 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Tanvi Brijesh Maisuriya /

Registered On : 22-Oct-2024 10:36 AM

Lab ID : 410901677

Collected On : 22-Oct-2024 10:39 AM

Gender/Age : Female / 30 Years

DOB : 12-Nov-1993

Received On : 22-Oct-2024 10:46 AM

Ref. By : Health Check Up Shalby

Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
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BIOCHEMISTRY

Phosphorus (Not in NABL Scope)

4.1

mg/dL

2.5 - 4.5

Phosphomolybdate reduction (PMA Phenol)

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PID : SUR0000373557 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Tanvi Brijesh Maisuriya / Registered On : 22-Oct-2024 10:36 AM
 Lab ID : 410901677 Collected On : 22-Oct-2024 10:40 AM
 Gender/Age : Female / 30 Years DOB : 12-Nov-1993 Received On : 22-Oct-2024 10:46 AM
 Ref. By : Health Check Up Shalby Sample Type : Urine

URINE EXAMINATION

Parameter	Result	Unit	Biological Ref. Interval
Physical Examination			
Colour	Pale Yellow		Pale yellow
Transparency	Clear		Clear
Chemical Examination			
Glucose	<i>Glucose-oxidase/oxidase reaction</i> Negative		Negative
Bilirubin	<i>Azo coupling Reaction with diazonium</i> Negative		Negative
Ketone	<i>Sodium Nitroprusside reaction</i> Negative		Negative
Specific Gravity	<i>Refractometric Method - Bromthymol blue</i> 1.020	S.G. value	1.001 - 1.035
Blood	<i>Peroxidase like activity of hemoglobin</i> Trace (+/-)		Negative
pH	<i>Double Indicator principle</i> 6.0	PH value	4.6 - 8.0
Protein	<i>Protein Error of Indicator Principle</i> Negative		Negative
Urobilinogen	<i>Modified Ehrlich reaction</i> 0.2	EU/dL	Upto 1.0 mg/dL (EU/dL)
Nitrite	<i>Diazotization reaction of nitrite with an aromatic amine</i> Negative		Negative
Leucocyte	<i>Leucocyte Esterase Test</i> Negative		Negative
Microscopic Examination			
Pus cells	4-5/hpf	/hpf	0-5/hpf
Red blood cells	2-3/hpf	/hpf	NIL/hpf
Epithelial cells	6-8/hpf	/hpf	NA
Crystals	Nil		Nil
Cast	Nil		Nil
Bacteria	Nil		Nil
Amorphous	Nil		Nil
Yeast	Nil		Nil
Others	Nil		Nil

----- End of Report -----

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REPORT STATUS : Interim



Patient Name : Mrs. Tanvi Brijesh Maisuriya /	Registered On : 22-Oct-2024 10:36 AM
Lab ID : 410901677	Collected On : 22-Oct-2024 10:40 AM
Gender/Age : Female / 30 Years	DOB : 12-Nov-1993
Ref. By : Health Check Up Shalby	Received On : 22-Oct-2024 10:47 AM
	Sample Type : Fluoride F, Urine (PP), Fluoride PP, Urine (F)

Parameter	Result	Unit	Biological Ref. Interval
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PLASMA GLUCOSE LEVEL

FASTING PLASMA GLUCOSE

Plasma Glucose (F)	82 ✓	mg/dL	74 - 106
<i>GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric</i>			

Urine Sugar (F)	ABSENT	mg/dL	Absent
<i>Glucose-oxidase/oxidase reaction</i>			

POST PRANDIAL PLASMA GLUCOSE

Plasma Glucose (PP)	78 ✓	mg/dL	Normal: 100-140 Impaired: 140-199 Diabetic :=>200
<i>GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric</i>			

Urine Sugar (PP)	ABSENT	mg/dL	Absent
<i>Glucose-oxidase/oxidase reaction</i>			

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