



the future of HEALTH CARE

PALMLAND HOSPITAL

(Managed By Rai Palmland Hospital Pvt. Ltd.)

Personal DATA

Name	SOLANKI SHAILESHBHAI RASIKLAL		Employee Code		Sr. No	5
Age	59	Sex	MALE		Date	02-05-2023
Designation/dep.	BANKING OPERATION/OPERATIC		ID MARK	MOLE ON THE LEFT CHEEK		
Company Name	BANK OF BARODA (MEDIWHEEL)					

Built History

Height	161CM	Past History	NO
Weight	66KG	BMI	25.5
Allergic To	NO	Family History	NAD
Addiction	NO	Personal History	NAD
		Occupational History	NAD
Present Complain	NOT ANY		

General Examination

T/P/R	N/93/16	Blood Pressure	130/80MMHG
SpO2 %	98%		
Pallor/Icterus/ Cyanosis/ Clubbing / Odema/ Lymphnodes/ Others	No		

Systemic Examination

CVS	NAD	ENT Exa.	NAD
R/S	NAD	Skin Exa.	NAD
A/S	NAD	Musculoskeletal System	NAD
CNS	NAD	Genitourinary System	NAD

Vision Testing

Acuity Of Vision							
Without Glass				With Glass			
Right Eye		Left Eye		Right Eye		Left Eye	
Distant	Near	Distant	Near	Distant	Near	Distant	Near
3.00	N/6	N/6	N/6	3.25	N/6	N/6	N/6

COLOR BLINDNESS- NO

Laboratory Investigation

Blood Group	A POSITIVE	HAEMOGRAM	NORMAL
-------------	------------	-----------	--------

Other Investigation

Vertigo Test	N/A	AUDIOMETRY	N/A
USG ABDOMEN	B/L RENAL CYST,CALCULUS		
ECG	WITHIN NORMAL LIMIT		X-Ray Chest
PFT	WITHIN NORMAL LIMIT		
	N/A		

Advice/ Remarks: PHYSICIAN REFF.DONE - No Hebe *[Signature]*

Fitness Status: PERSON FIT FOR JOB

[Signature] DR. WASIM RAJ
M.B.B.S., M.D., CIH

Occupational Health
Physician & Consultant
Reg. No. 22785

Falshruti Nagar, Station Road, Bharuch, Gujarat - 392001

02642 - 263108 | 97378 55550

www.palmlandhospital.com | follows us on :

24X7 EMERGENCY FACILITY

CBDT APPROVED HOSPITAL U/S 17(2) OF THE IT





the future of HEALTH CARE

PALMLAND HOSPITAL

(Manage By Raj Palmland Hospital Pvt. Ltd.)

OPD NEW CASE

CASE NO : 2324/N/650 (UHID : 2324/00850)
 NAME : SOLANKI SHAILESHKUMAR RASIKLAL
 ADDRESS : SAKTINATH, BHARUCH
 PATIENT TYPE : CREDIT
 CONS. DR. : WASIM RAJ

DATE TIME : 02/05/2023 09:36 AM
 AGE / SEX : 59Y / MALE
 PHONE NO. : 9429944149
 COMPANY : BOB
 REF. DR. : DIRECT

VITALS :

TEMP :

PULSE : 92 /MIN

BP : 110/70MM/HG

SPO2 : 98 %

RBS :

RS : AEBE ⊕

CVS : SLS ⊕

CNS : covered

INVESTIGATION

BLOOD :

Ht: 161
Wt: 66.5

RADIO :

OTHER :

- all reports within in normal limit
 - phy reff done for renal calculi + renal cyst
 - pt is fit for duty

Wasim Raj
DR. WASIM RAJ
 M.B.B.S., M.D., CH
 Occupational Health
 Physician & Consultant
 M.D. (INTERNAL MEDICINE)
 Reg. No. G-22785

REG NO. G - 22785

📍 Falshruti Nagar, Station Road, Bharuch, Gujarat - 392001

☎ 02642 - 263108 | 97378 55550

🌐 www.palmlandhospital.com | follows us on :



CERT APPROVED HOSPITAL U/S 17(2) OF THE IT A

BEDSIDE ECHOCARDIOGRAPHY AND COLOR DOPPLER REPORT

Near Tagorenagar Opp. Suryakiran Complex Old Padra Road, Vadodara -390015
Phone: (0265) 2324004, 2320404, 320099, Fax: (0265) 2327401

BHI/N/FM/165

Email: info@bankersheart.com
CIN : U85110GJ2003PTC042677

PATIENT'S NAME : MR. Sheelashtrumar Solanki

DATE : 21/5/23, AGE : 59y/m, REF BY : DR. Wasim Raza.

LV SIZE : (N) EF : 60 % (VISUAL)

DIASTOLIC DYSFUNCTION : Grade I LVH : Mild LVH

RWMA : ANTERIOR WALL :
ANTERIOR SEPTUM :
IVS :
LV APEX : No RWMA
POSTERIOR WALL :
LATERAL WALL :
INFERIOR WALL :

MITRAL VALVE : Trivial MR, No MS. AORTIC VALVE : No AR/AS.

PULMONARY VALVE : (N) TRICUSPID VALVE : No TR

PAH : NO PAH PASP : 20 mmHg

RA :
RV : } (N) LA :
IVC : } (N)

AS :
IVS : } (N) PDA :
COARCTATION : } Nil

LA: ³³ mm; AO: ²⁷ mm; IVS : 10 mm; LVPW : 9 mm; LVID : 40 mm

LVEF : ⁵⁵ % (VISUAL) - Mild concentric LV hypertrophy

CONCLUSION : - Normal LV systolic function.

Dr. Darshan Banker - No RWMA

Dr. Darshan Banker

Interventional Cardiologist

- Trivial MR, Normal PA pressure

Dr. Jemi

Dr. Payal D. Shah

M.B.B.S., M.D. (Radiodiagnosis)

Dr. Darshit B. Shah

M.B.B.S., M.D. (Radiodiagnosis)

Ex- Clinical Associate, Lilavati hospital
(Mumbai)



MADHURAM Imaging Center

- MRI (1.5 T)
- Multi Slice CT Scan
- Sonography
- X-Ray
- Colour Doppler

Pt Name: Solanki Shaileshkumar R.

Date: 02/05/2023

USG OF ABDOMEN & PELVIS

Liver is normal in size, measuring approx. 129mm and normal in shape and echotexture.
No evidence of focal SOL or dilatation of IHBR seen.
Porta hepatis appear normal.

Gallbladder appeared normal. No calculi seen.
Gallbladder wall appear normal. No e/o pericholecystic edema noted.
CBD appears normal. no evidence of calculi.

Pancreas appeared normal in size and normal in echotexture.
Spleen appeared normal in size, shape and normal in echotexture.
Aorta appeared normal. No para aortic lymphnodes seen.

Right kidney measures 100x44mm.

- A non-obstructive 7mm sized calculus in lower pole calyx.
- Approx. 10x9.5mm sized cortico-exophytic cyst seen in upper pole.

Left kidney measures 115x52mm.

Collecting system of left kidney appeared normal.
No calculi or obstructive uropathy.

- Approx. 11.5x10mm sized simple cyst seen in mid pole cortex.

Urinary bladder: bulb noted in situ.

- Mild to moderate circumferential wall thickening is seen, maximum thickness measures approximately 11mm.
- No calculi are seen.
- Prostate appears mildly enlarged in size; measuring approximately 32x43x35mm; VOL: 26cc.

Appendix not seen due to bowel gas.

Bowels are visualized and appeared normal.
No evidence of free fluid in pelvis.

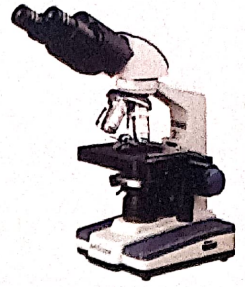
Conclusion:

- Mild prostatomegaly.
- Urinary bladder cystitis.
- Non-obstructive right renal calculus.
- Bilateral renal cyst.

Thanks for the reference

Dr. Payal D. Shah (MBBS, MD)
Consultant Radiologist

Dr. Darshit B. Shah (MBBS, MD)
Consultant Radiologist



DIAGNOSTIC REPORT

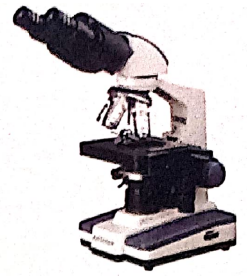
Name : SOLANKI SHAILESHKUMAR RASIKLAL
Ref By : DR. WASIM RAJ [BOB]

Age/Sex : 59 Yrs./M
Date : 02/05/2023
Report ID. : W-6
Ward : -/
9429944149

HAEMATOLOGY ANALYSIS

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>METHOD</u>	<u>REFERENCE INTERVAL</u>
<u>BLOOD COUNTS & INDICES</u>				
Haemoglobin	: 17.00	gm%		13.5 - 17.0 gm%
Total RBC	: 5.00	mill/cmm		4.6 - 6.2 mill/cmm
PCV	: 45.10	%		40 - 54 %
MCV	: 90.20	fL		80 - 96 fL
MCH	: 34.00	pg		27 - 31 pg
MCHC	: 37.69	%		32 - 36 %
RDW	: 13.50	%		10 - 15 %
Total WBC	: 6,300	/cmm		4,000 - 11,000/cmm
Platelet Count	: 1,52,000	/cmm		1.5 - 4.0 Lac/cmm.
<u>DIFFERENTIAL LEUCOCYTES COUNT</u>				
Neutrophils	: 64	%		55 - 70 %
Lymphocytes	: 30	%		20 - 40 %
Eosinophils	: 03	%		01 - 06 %
Monocytes	: 03	%		02 - 08 %
Basophils	: 00	%		00 - 01 %
<u>ABSOLUTE COUNTS</u>				
Neutrophils	: 4032	/μL		2000 - 7000 /μL
Lymphocytes	: 1890	/μL		800 - 4000 /μL
Eosinophils	: 189	/μL		20 - 500 /μL
Monocytes	: 189	/μL		120 - 1200 /μL
<u>NEUTROPHIL : LYMPHOCYTE</u>				
Ratio	: 2.13			
Platelet In Smear	: ADEQUATE			
<u>ERYTHROCYTES SEDIMENTATION RATE</u>				
ESR	: 7	mm	Westergren	01 - 07 mm
Blood Group	: " A "			
Rh Factor (Anti D.)	: " POSITIVE "			

End Of Report



DIAGNOSTIC REPORT

Name : SOLANKI SHAILESHKUMAR RASIKLAL
Ref By : DR. WASIM RAJ [BOB]

Age/Sex : 59 Yrs./M
Date : 02/05/2023
Report ID. : W-6
Ward : -/
0429944149

HbA1C REPORT BY HPLC METHOD

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>REFERENCE INTERVAL</u>
<u>GLYCOSYLATED HB</u>			
Hb A1C	: 5.1	%	Non Diabetic : 4.3 - 6.3 % Good Control : 6.4 - 7.5 % Moderate Control : 7.5 - 9.0 Poor Control : 9.0 % & Above
Avg. Blood Glucose Level	: 104	mg/dl	

Notes :

<u>Average Blood Glucose</u>	<u>Hemoglobin A1c%</u>
298	12 %
269	11 %
240	10 %
212	09 %
183	08 %
154	07 %
126	06 %
97	05 %

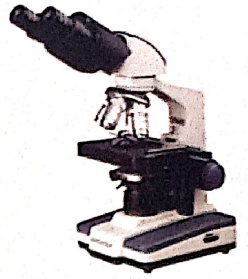
Comment:

HbA1c is an important indicator of long-term glycemic control with the ability to reflect the cumulative glycemic history of the preceding two to three months. HbA1c not only provides a reliable measure of chronic hyperglycemia but also correlates well with the risk of long-term diabetes complications.

Test done by HPLC Method.

End Of Report

DR. DEV VARMA
M.D. (PATH) (G) (G)



DIAGNOSTIC REPORT

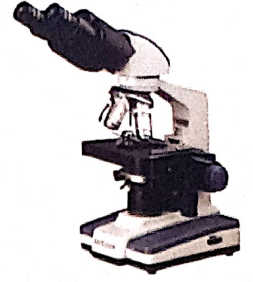
Name : SOLANKI SHAILESHKUMAR RASIKLAL
Ref By : DR. WASIM RAJ [BOB]

Age/Sex : 59 Yrs./M
Date : 02/05/2023
Report ID. : W-6
Ward : -/
9429944149

BIOCHEMISTRY ANALYSIS

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>REFERENCE INTERVAL</u>
Blood Urea	: 12.50	mg/dl	10 - 50 mg/dl
Blood Urea Nitrogen	: 5.80	mg/dl	4.5 - 19 mg/dl
Creatinine	: 1.3	mg/dl	0.70 - 1.40 mg/dl
S. Uric Acid	: 6.00	mg/dl	2.5-7.0 mg/dl
Fasting Blood Glucose (FBS)	: 83	mg/dl	70 - 110 mg/dl
Urine Glucose	: NIL		
Post-Prandial Blood Glucose	: 89	mg/dl	80 to 140 mg/dl
Urine Glucose	: NIL		

End Of Report



DIAGNOSTIC REPORT

Name : SOLANKI SHAILESHKUMAR RASIKLAL
Ref By : DR. WASIM RAJ [BOB]

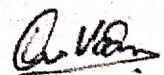
Age/Sex : 59 Yrs./M
Date : 02/05/2023
Report ID. : W-6
Ward : -/
9429944149

LIVER FUNCTION TEST

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>REFERENCE INTERVAL</u>
Total Billirubin	: 1.70	mg/dl	0 - 1.0 mg/dl
Direct Billirubin	: 0.50	mg/dl	up to 0.25 mg/dl
Indirect Billirubin	: 1.20	mg/dl	0.1 - 1.0 mg/dl
S. Alk. Phosphatase	: 87	U/L	36.00 - 113.00 U/L
S.G.P.T.	: 25	U/L	10 - 40 U/L
S.G.O.T.	: 17	IU/L	up to 40 IU/L
Total Protein	: 7.60	g/dl	6.0 - 8.0 g/dl
Albumin	: 4.30	g/dl	3.5 - 5.0 g/dl
Globulin	: 3.30	g/dl	2.3 - 3.5 g/dl
A.G. Ratio	: 1.3		2.5 - 1.2 : 1
GGTP	: 18		5 - 85

Test done by (DIASYS)

End Of Report





the future of HEALTH CARE

PALMLAND LABORATORY



DIAGNOSTIC REPORT

Name : SOLANKI SHAILESHKUMAR RASIKLAL
Ref By : DR. WASIM RAJ [BOB]

Age/Sex : 59 Yrs./M
Date : 02/05/2023
Report ID. : W-6
Ward : -/
0420044140

LIPID PROFILE

TEST	RESULT	UNIT	REFERENCE INTERVAL
Total Lipid (Calculated)	: 515	mg/dL	350 - 750 mg/dL
Serum Cholesterol	: 161.0	mg/dL	130 - 200 mg/dL
Serum Triglyceride	: 110.0	mg/dL	60 - 165 mg/dL
HDL Cholesterol	: 41.0	mg/dL	30 - 70 mg/dL
LDL Cholesterol	: 98.0	mg/dL	Upto 150 mg/dL
CHOL./HDL Chol. Ratio	: 3.93	: 1	Less than 5
LDL Chol/HDL Chol Ratio	: 2.39	: 1	Less than 3.5

Interpretation Based On New N.C.E.P. Guidelines

Test	Result (mg/dl)	Interpretation
CHOLESTEROL	< 200	Desirable
	200 - 239	Borderline
	> = 240	High
TRIGLYCERIDES	< 170	Normal
	170 - 199	Borderline
	> 200	High
LDL CHOLESTEROL	< 100	Desirable
	100 - 129	Sub-Optional
	130 - 159	Borderline High
	> 160	High
HDL CHOLESTEROL	< 35	Low
	> 60	High

End Of Report

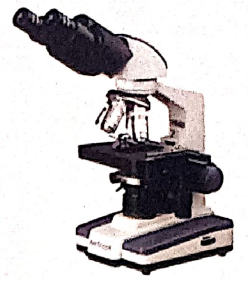
DR. DEV VARMA

Condition of Reporting : (1) The Reports are not valid for medico - legal purposes. (2) Individual Laboratory investigations are never conclusive, but are for the referring doctor's information and should be interpreted along with other relevant clinical history and examination to conclude final diagnosis, keeping in mind the limitation of methodology of technology. (3) For any query in the report, or if results indicate unexpected abnormality, it is suggested to Contact to laboratory to help carry out follow up action. (rechecking, repeat sampling reflex / confirmatory testing etc.) (4) In unanticipated circumstances (non availability of kits, instrument breakdown & natural calamities) tests may not be reported as per schedule.



the future of HEALTH CARE

PALMLAND
LABORATORY



DIAGNOSTIC REPORT

Name : SOLANKI SHAILESHKUMAR RASIKLAL
Ref By : DR. WASIM RAJ [BOB]

Age/Sex : 59 Yrs./M
Date : 02/05/2023
Report ID. : W-6
Ward : -/
9429944149

THYROID FUNCTION TEST

TEST	RESULT	UNIT	METHOD	REFERENCE INTERVAL
Total Triiodothyronine(T3)	: 0.90	ng/ml	ELIFA	0.97-1.69 ng/ml
Total Thyroxine(T4)	: 8.90	ug/dl	ELIFA	6.09-12.23ug/dl
Thyroid Stimulating Hormone (TSH)	: 1.70	µIU/ml		0.38-5.33 uIU/ml

NORMAL VALUES

Age	T3 ng/ml	T4 µg/dl	T.S.H. µIU/ml
01 - 12 Month	1.05 - 2.80	7.8 - 16.5	New Born : 1.3-19.0 3 Days : 1.1-17.0 10 weeks : 0.6-10.0 14 months: 0.4-7.0
01 - 05 Yrs	1.05 - 2.69	7.3 - 15.0	0.4-6.0
05 - 10 Yrs	0.94 - 2.41	6.04 - 13.3	0.25-5.25
10 - 15 Yrs	0.83 - 2.13	5.60 - 11.7	0.25-5.25
15 - 20 Yrs	0.80 - 2.00	4.20 - 11.8	0.25-5.25
> 20 Yrs	0.79 - 1.58	4.00 - 11.0	0.25-5.25

*Test done by Access-2 Beckman Coulter / mini Vidas

End Of Report

Dr. Dev Varma

Condition of Reporting : (1) The Reports are not valid for medico - legal purposes. (2) Individual Laboratory investigations are never conclusive, but are for the referring doctor's information and should be interpreted along with other relevant clinical history and examination to conclude final diagnosis, keeping in mind the limitation of methodology and technology. (3) For any query in the report, or if results indicate unexpected abnormality, it is suggested to Contact to laboratory to help carry out follow up action. (rechecking, repeat sampling reflex / confirmatory testing etc.) (4) In unanticipated circumstances (non availability of kits, instrument breakdown & natural calamities) tests may not be reported as per schedule.

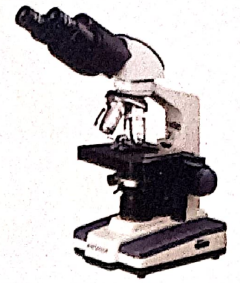
Palmland Hospital, Falshruti Nagar, Near S.T. Depot, Station Raod, Bharuch-392 001. (Guj.)



the future of HEALTH CARE

PALMLAND
LABORATORY

DIAGNOSTIC REPORT



Name : SOLANKI SHAILESHKUMAR RASIKLAL
Ref By : DR. WASIM RAJ [BOB]

Age/Sex : 59 Yrs./M
Date : 02/05/2023
Report ID. : W-6
Ward : -/
9429944149

PROSTATE SPECIFIC ANTIGEN

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>REFERENCE INTERVAL</u>
P. S. A.	: 1.300	ng/ml	0.0 - 4.0 ng / ml (i) 04 - 15 ng/ml Possibly Benign Prostate H _y (ii) > 20 ng/ml Suspected Prostate Carcino

End Of Report

DR. DEV VARMA

M.D. (PATHOLOGY)

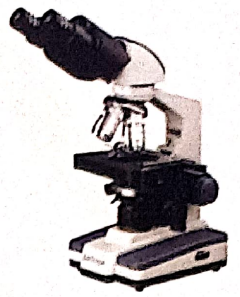
Condition of Reporting : (1) The Reports are not valid for medico - legal purposes. (2) Individual Laboratory investigations are never conclusive, but are for the referring doctor's information and should be interpreted along with other relevant clinical history and examination to conclude final diagnosis, keeping in mind the limitation of methodology and technology. (3) For any query in the report, or if results indicate unexpected abnormality, it is suggested to Contact to laboratory to help carry out follow up action. (rechecking, repeat sampling reflex / confirmatory testing etc.) (4) In unanticipated circumstances (non availability of kits, instrument breakdown & natural calamities) tests may not be reported as per schedule.



the future of HEALTH CARE

PALMLAND
LABORATORY

DIAGNOSTIC REPORT



Name : SOLANKI SHAILESHKUMAR RASIKLAL
Ref By : DR. WASIM RAJ [BOB]

Age/Sex : 59 Yrs./M
Date : 02/05/2023
Report ID. : W-6
Ward : -/
9429944149

URINE ANALYSIS

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>
Sample	:	RANDOM
<u>PHYSICAL EXAMINATION</u>		
Quantity	:	25 ml
Colour	:	PALE YELLOW
Transperancy	:	CLEAR
Specific Gravity	:	1.020
pH	:	ACIDIC
<u>CHEMICAL EXAMINATION</u>		
Albumin	:	ABSENT
Sugar	:	ABSENT
Acetone	:	ABSENT
Bile Salts	:	ABSENT
Bile Pigments	:	ABSENT
Occult Blood	:	ABSENT
<u>MICROSCOPIC EXAMINATION</u>		
Pus Cells / h.p.f.	:	1-2
R.B.C. / h.p.f.	:	ABSENT
Epithelial / h.p.f.	:	3-4

End Of Report

Dr. Dev Varma

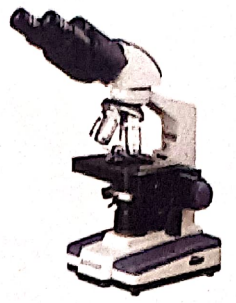
DR. DEV VARMA

Condition of Reporting : (1) The Reports are not valid for medico - legal purposes. (2) Individual Laboratory investigations are never conclusive, but are for the referring doctor's information and should be interpreted along with other relevant clinical history and examination to conclude final diagnosis, keeping in mind the limitation of methodology and technology. (3) For any query in the report, or if results indicate unexpected abnormality, it is suggested to Contact to laboratory to help carry out follow up action. (rechecking, repeat sampling reflex / confirmatory testing etc.) (4) In unanticipated circumstances (non availability of kits, instrument breakdown & natural calamities) tests may not be reported as per schedule.



the future of HEALTH CARE

PALMLAND
LABORATORY



DIAGNOSTIC REPORT

Name : SOLANKI SHAILESHKUMAR RASIKLAL
Ref By : DR. WASIM RAJ [BOB]

Age/Sex : 59 Yrs./M
Date : 02/05/2023
Report ID. : W-6
Ward : -/
9429944149

STOOL ANALYSIS

TEST

RESULT UNIT

REFERENCE INTERVAL

PHYSICAL EXAMINATION

Quantity : 10 gms.
Colour : YELLOW
Consistency : SEMI FORMED
Blood : ABSENT
Parasites : ABSENT

CHEMICAL TEST

Occult Blood : ABSENT ABSENT

MICROSCOPIC EXAMINATION / HPF

Ova : ABSENT
Cysts. : ABSENT
Pus Cells : ABSENT
Red Blood Cells : ABSENT
Epithelial Cells : ABSENT

End Of Report

DR. DEV VARMA
M.D. (PATHOLOGY)

Condition of Reporting : (1) The Reports are not valid for medico - legal purposes. (2) Individual Laboratory investigations are never conclusive, but are for the referring doctor's information and should be interpreted along with other relevant clinical history and examination to conclude final diagnosis, keeping in mind the limitation of methodology and technology. (3) For any query in the report, or if results indicate unexpected abnormality, it is suggested to Contact to laboratory to help carry out follow up action. (rechecking, repeat sampling reflex / confirmatory testing etc.) (4) In unanticipated circumstances (non availability of kits, instrument breakdown & natural calamities) tests may not be reported as per schedule.

ID: 51

SHAILESHKUMAR

Male 59Years

UHID :

02-05-2023 10:27:45 AM

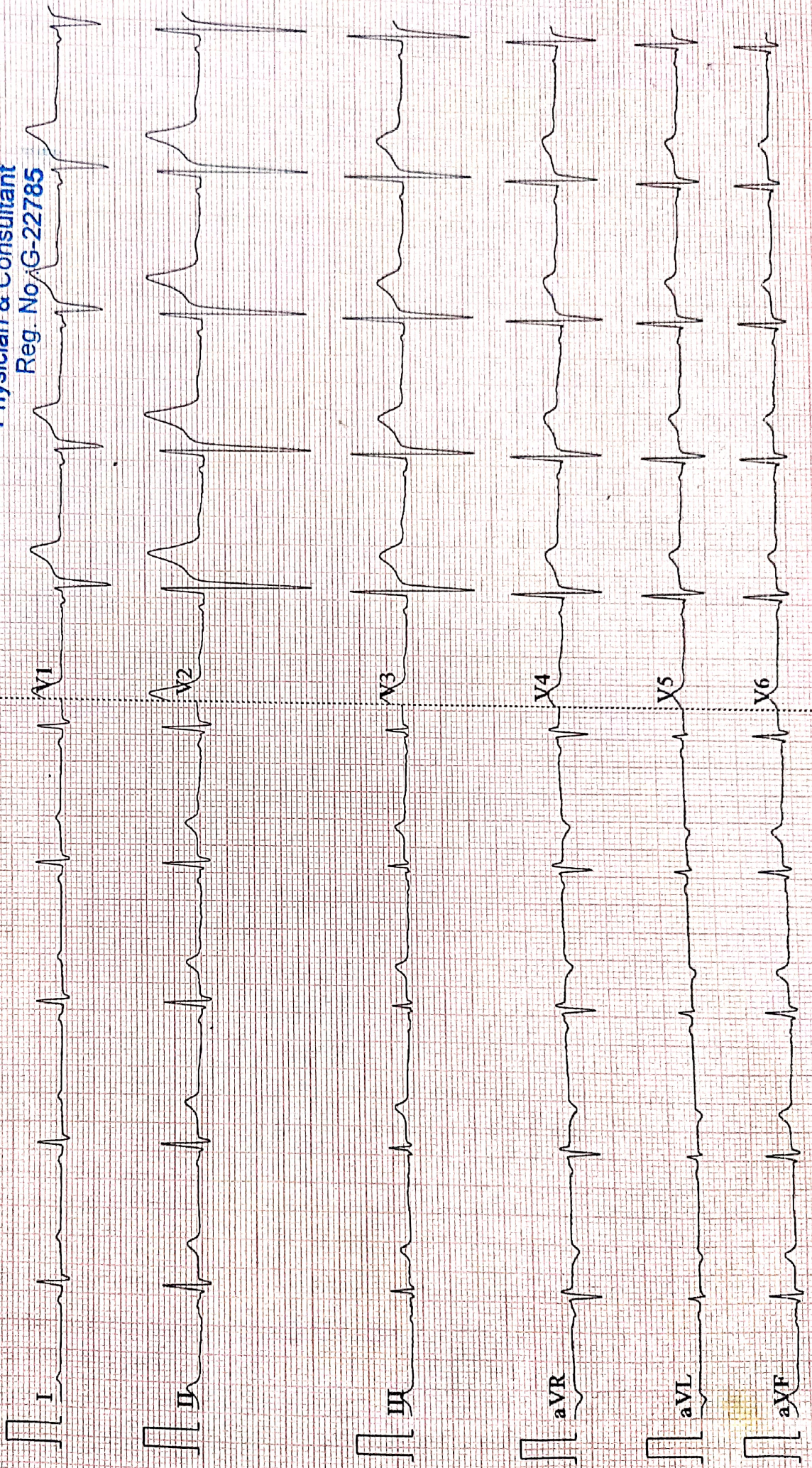
HR : 59 bpm
 P : 5
 PR : 124 ms
 QRS : 101 ms
 QT/QTc : 432/431 ms
 P/QRS/T : -1/52/70 °
 RV5/SV1 : 0.791/0.819 mV

Diagnosis Information:

Sinus Bradycardia.

DR. WASIM RAJ
 M.B.B.S., M.D., CIH
 Occupational Health
 Physician & Consultant
 Reg. No: G-22785

Technician :
 Unconfirmed Report.





PALMLAND HOSPITAL

(Unit of Raj Palmland Hospital Pvt. Ltd.)

OPHTHALMOLOGY CONSULTATION

Name: _____ Date: _____

Age: _____ Sex: Male Female HCP Reg.No.: _____

Ophthalmic History:

1. Do you feel that your eyesight is falling? Yes No
આંખે ઓછું દેખાતું હોય તેવું લાગે છે?
2. Any time feel to experience black outs? Yes No
કોઈવાર અંધારા આવે છે?
3. Any unexpected flicking of eyes? Yes No
આંખ વારંવાર અચાનક ધ્રુવે છે?
4. Do you get difficulty in reading small letters? Yes No
નાના અક્ષર વાંચવામાં તસલીફ પડે છે?
5. Do you experience black dots temporarily? Yes No
આંખ સામે કોઈવાર કાળા ટપકા દેખાય છે?
6. Do you have exclusive aids? Yes No
વાંચવા કે જોવા માટે કોઈ ચશ્મા કે સ્પેશીયલ સાધન વાપરો છો?

Clinical Evaluation / History / Presenting Complain:

.....
.....
.....

Examination Eyes:

1. Eyelids
Right *nl* Left *nl*
2. Cornea & Conjunctiva
Right *nl* Left *nl*
3. Vision
Right *nl* Left *nl*

SPH	CYY	AXIS	VN
+05	+05	180	6/6

SPH	CYY	AXIS	VN
+2.75	+05	180	6/6

+3.0	+05	180	
------	-----	-----	--

+3.25	+05	180	
-------	-----	-----	--

📍 Falshruti Nagar, Station Road, Bharuch, Gujarat - 392001

☎ 02642 - 263108 | 97378 55550

🌐 www.palmlandhospital.com | follows us on:  



24X7 EMERGENCY FACILITY

CBDT APPROVED HOSPITAL U/S 17(2) OF THE IT ACT.

Colour Vision:

Tonometry:
Right

Left

Fundus: (Must in case of DM & HT)

Right *NY*

Left *NY*

Eye Movements:

Right
Left *g*

Clinical Impression:

[Empty box for Clinical Impression]

Recommendation:

A. Additional Inv. / Referral Suggested

[Empty box for Recommendation A]

B. Therapeutic advise

Ophthalmology's Signature

Pt Name:	SOLANKI SHAILESHKUMAR RASIKLAL	Date:	02/05/2023
----------	--------------------------------	-------	------------

Plain Skiagram chest (PA View)

Bilateral lung lobes appear normal.

Both dome of hemi diaphragms appear normal.

Bilateral CP angle appears normal.

Bony thorax appears normal.

Cardiac shadow appears normal.

Conclusion:

- No significant abnormalities are seen.

Thanks for the reference.



Dr. Payal D. Shah (MBBS, MD)
Consultant Radiologist

Dr. Darshit B. Shah (MBBS, MD)
Consultant Radiologist

📍 Falshruti Nagar, Station Road, Bharuch, Gujarat - 392001

☎ 02642 - 263108 | 97378 55550

🌐 www.palmlandhospital.com | follows us on :  

24x7 EMERGENCY FACILITY



CBDT APPROVED HOSPITAL U/S 17(2) OF THE IT ACT.