



10/12/2022

CHANDRASINGH A. SOLANKI

52 YEARS/MALE

**ULTRASONOGRAPHY OF ABDOMEN AND PELVIS**

Liver shows normal size and echogenicity. No mass lesion detected.  
PV, CBD and intrahepatic biliary radicals shows no dilatation.

The gall bladder is distended and show normal gall bladder. There is no evidence of gallstones.

Spleen appears normal in size and echotexture. No evidence of focal lesion.

Pancreas appears normal in size and echotexture. No focal lesion.

Both kidneys show normal size, position and cortical echogenicity.

Right kidney measures 9.9 cm and Left kidney measures 10.4 cm.

Corticomedullary differentiation is preserved bilaterally.

No calculus or hydronephrosis on either side.

The urinary bladder is distended and shows mucosal irregularity and free floating echoes within s/o changes of cystitis.

Prostate measures approx. 27cc, s/o borderline prostatomegaly.

No evidence of Lymphadenopathy or ascites seen.

No e/o dilated bowel loops seen.

**CONCLUSION:**

- **CHANGES OF CYSTITIS**
- **BORDERLINE PROSTATOMEGALY**



**DR. CHETNA DUHAN, M.D**

**CONSULTANT RADIOLOGIST**



10/12/2022

CHANDRASINGH A. SOLANKI

52 YEARS/MALE

**CHEST X RAY PA VIEW**

Both the lung fields appear normal.

Both costophrenic angles appear clear.

Cardiac silhouette appear normal.

Both hila appears normal.

Mediastinum and aorta appear normal.

Bony thorax appears normal.

No evidence of free gas seen under dome of diaphragm.

**COMMENTS:**

- NORMAL BOTH LUNG FIELDS.
- NORMAL CARDIAC SIZE.



DR. CHETNA DUHAN, M.D  
CONSULTANT RADIOLOGIST



**2D-ECHOCARDIOGRAPHY AND COLOR DOPPLER REPORT**

**NAME: CHANDRASINGH A SOLANKI**

**AGE/SEX: 52YRS/MALE**

**DATE : 10/12/2022**

**REF BY: DR. SAURABH JAIN**

**OBSERVATION:**

- NORMAL LV SIZE WITH NORMAL LV SYSTOLIC FUNCTION. LVEF = 60% (VISUAL).
- NO RWMA AT REST.
- GRADE I LV DIASTOLIC DYSFUNCTION.
- CONCENTRIC LVH PRESENT.
- TRIVIAL MR. NO MS.
- NO AR. NO AS.
- TRIVIAL TR. NO PAH.
- NORMAL LA, RA & RV SIZE WITH NORMAL RV SYSTOLIC FUNCTION.
- NORMAL SIZED MPA, RPA & LPA.
- INTACT IAS & IVS.
- NO E/O INTRACARDIAC CLOT/VEGETATION/PE.
- NORMAL IVC.
- NORMAL PERICARDIUM.

**CONCLUSION:**

- NORMAL LV/RV SIZE AND NORMAL SYSTOLIC FUNCTION.
- CONCENTRIC LVH PRESENT.
- NO RWMA AT REST.
- LVEF = 60% (VISUAL).

**DR.NIRAV BHALANI**  
**[CARDIOLOGIST]**

**DR.ARVIND SHARMA**  
**[CARDIOLOGIST]**

**DR. CHIRAG SHETH**  
**[CARDIOLOGIST]**





Rate 70

PR 168

QRSD 84

QT 364

QTc 393

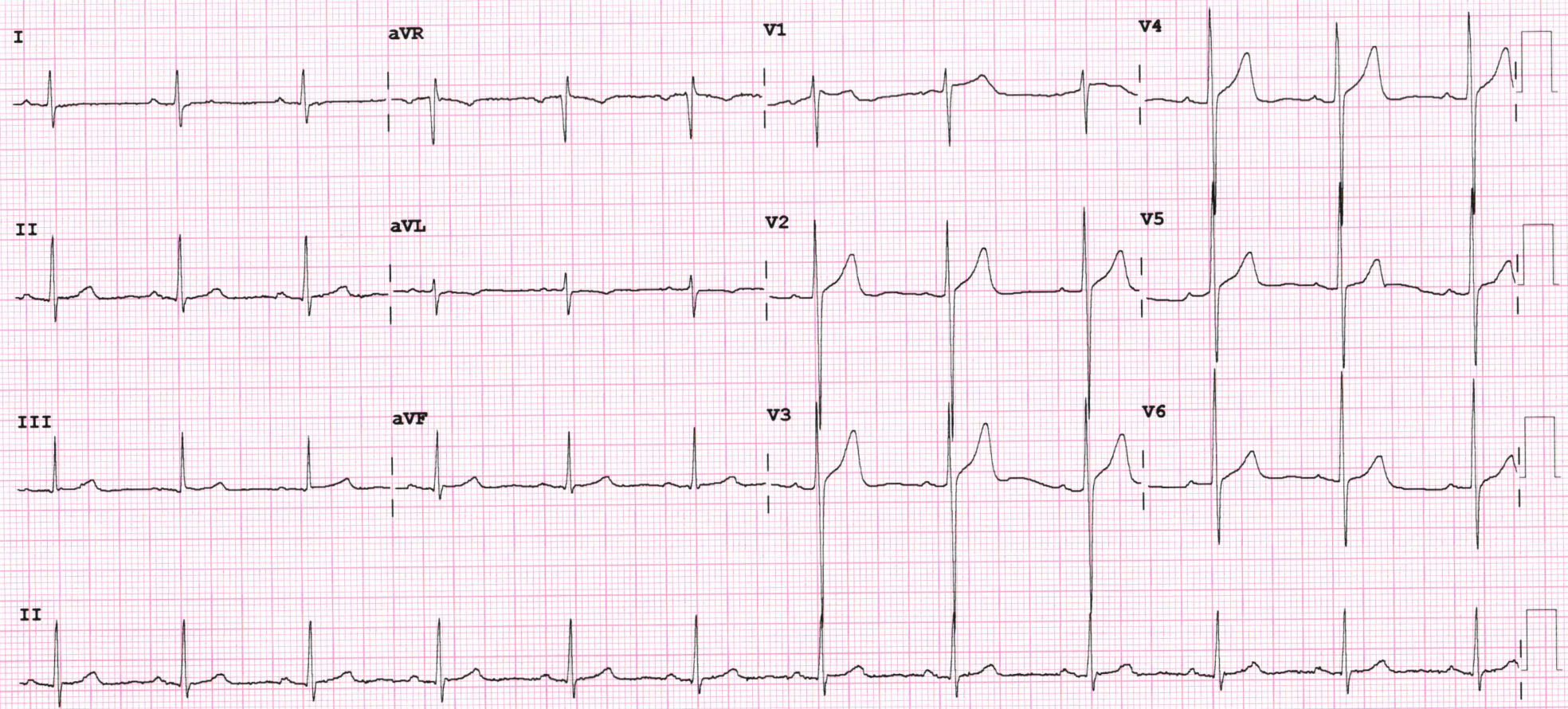
--AXIS--

P 42

QRS 71

T 81

12 Lead; Standard Placement







Unipath Specialty Laboratory (Baroda) LLP- Platinum Complex, Opp. HDFC Bank, Nr. Radha Krishna char rasta, Akota, Vadodara - 390020  
 Mobile: 7228800500 / 8155028222 | Email: info.baroda@unipathllp.in



### TEST REPORT

Reg. No. : 21201004144	Reg. Date : 10-Dec-2022 12:24	Collected On : 10-Dec-2022 12:24
Name : Mr. CHANDRASINGH SOLANKI		Approved On : 10-Dec-2022 13:26
Age : 52 Years	Gender : Male	Ref. No. :
Ref. By :		Dispatch At :
Location : SAVITA SUPERSPECIALTY HOSPITAL @ WAGHODIYA ROAD		Tele No. :

Test Name	Results	Units	Bio. Ref. Interval
<b>PROSTATE SPECIFIC ANTIGEN</b>			
PSA	0.450	ng/mL	0 - 4

Method: CLIA

Sample Type: Serum

**Note:**

PSA is a glycoprotein that is produced by the prostate gland, the lining of the urethra, and the bulbourethral gland. Normally, very little PSA is secreted in the blood. Increases in glandular size and tissue damage caused by benign prostatic hypertrophy, prostatitis, or prostate cancer may increase circulating PSA levels.

Digital rectal examination generally does not increase normal prostate-specific antigen (PSA) values. However, cystoscopy, urethral instrumentation, and prostate biopsy may increase PSA levels.

**Useful For**

1. Evaluating patients with documented prostate problems in whom multiple prostate-specific antigen tests may be necessary per year
2. Monitoring patients with a history of prostate cancer as an early indicator of recurrence and response to treatment.
3. Prostate cancer screening.

----- End Of Report -----

This is an electronically authenticated report.

Test done from collected sample.


Printed On: 10-Dec-2022 13:27

*M. Rathwa*  
**Dr Mitesh Rathwa**  
 MD PATHOLOGY  
 Reg No : G-24196

We are open 24 x 7 & 365 days

Page 1 of 1  
 LLP Identification Number: AAN-8932



<b>Patient Name :</b>	Mr.chandrasingh Amarsingh Solanki	<b>Sample No. :</b>	20221211671 
<b>Patient ID :</b>	20221206858	<b>Visit No. :</b>	OPD20221219906
<b>Age / Sex :</b>	52y/Male	<b>Coll. Date :</b>	10/12/2022 08:40
<b>Consultant :</b>	DR SAURABH JAIN	<b>S. Coll. Date :</b>	10/12/2022 09:36
<b>Ward :</b>	-	<b>Report Date :</b>	10/12/2022 16:26

**FBS & PPBS**

Investigation	Result	Normal Value
Blood Sugar (FBS) :	106 mg/dl [H]	74 - 100 mg/dl
Urine Sugar ( FUS ) :	Nil	
Blood Sugar (PP2BS) :	117 mg/dl	70 to 120 mg/dl
Urine Sugar ( PP2US ) :	Nil	

**HBA1C**

Investigation	Result	Normal Value
Glycosylated Hb :	7.1 % [H]	Near Normal Glycemia : 6 to 7 Excellent Control : 7 to 8 Good Control : 8 to 9 Fair Control : 9 to 10 Poor Control : > 10
Average Plasma Glucose of Last 3 Months :	157.07	



**Dr.Mehul Desai**  
**M.B.D.C.P**  
**Reg.No.G-9521**





## TEST REPORT

<b>Name</b>	: CHANDRASINHG SOLANKI	<b>Acc. ID</b>	: 221022696
<b>Age/Sex</b>	: 52 Years / Male	<b>Birthdate</b>	: Regd. Dt : 10-Dec-2022 02:02 PM
<b>Refd. By</b>	: SAVITA SUPERSPECIALITY HOSPITAL	<b>Status</b>	: Final
<b>Sample</b>	: Serum (Blood in Plain)	<b>PassportNo:</b>	: Coll Dt. TM. : 10-Dec-2022 01:15 PM
<b>Client Details</b>	: SAVITA SUPERSPECIALITY HOSPITAL	<b>Mobile</b>	: Recd. Dt. Tm. : 10-Dec-2022 02:02 PM
			: Report Dt. Tm. : 10-Dec-2022 03:37 PM

## IMMUNOLOGY

Test Name	Result	Unit	Biological Ref. Interval
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### THYROID FUNCTION TEST

<b>T3 (Triiodothyronine)</b> CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY	1.47	ng/mL	0.97 - 1.69
<b>T4 (Thyroxine)</b> CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY	9.91	µg/dL	5.5 - 11.0
<b>TSH</b> CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY	1.821	µIU/ml	0.4001 - 4.049

----- End Of Report -----

This is an Electronically Authenticated Report.

*Kinjal*

**Dr. Kinjal Patel**  
M. D. PATHOLOGY  
GMC No. G-33123

**Verified By**  
**Auto**

**Dr. VIRAL A. PATEL**  
M. D. PATHOLOGY  
GMC No. G-22658

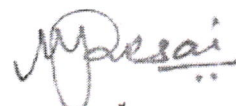
Page 1 of 1



<b>Patient Name :</b>	Mr.chandrasingh Amarsingh Solanki	<b>Sample No. :</b>	20221211671 
<b>Patient ID :</b>	20221206858	<b>Visit No. :</b>	OPD20221219906
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<b>Ward :</b>	-	<b>Report Date :</b>	10/12/2022 12:31

### Urine R/M


Investigation	Result	Normal Value
Quantity - :	20 ml	
Colour - :	Pale Yellow	
Reaction (pH) :	5.0	4.6-8.0
Turbidity :	Clear	
Deposit :	Absent	Absent
Sp.Gravity :	1.010	1.005-1.010
Protein :	Absent	Absent
Glucose :	Absent	Absent
Bile Salts :	Absent	Absent
Bile pigments :	Absent	Absent
Ketones :	Absent	Absent
Urobilinogen :	Absent	
Blood :	Absent	Absent
Pus Cells :	0-1 /hpf	0-5/hpf
Red Blood Cells :	Absent /hpf	Absent
Epithelial Cells :	1-3 /hpf	



**Dr.Mehul Desai**  
**M.B.D.C.P**  
**Reg.No.G-9521**





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### Lipid Profile


Investigation	Result	Normal Value
Sample :	Fasting	
Sample Type :	Normal	
Cholesterol (Chol) :	<u>213 mg/dl</u> [H]	Low risk : < 200 Moderate risk : 200 - 239 High risk : > or = 240
Triglyceride :	120 mg/dl	Normal : < 200.0 High : 200 - 499 Very High : > or = 500
HDL Cholesterol :	54 mg/dl	Low risk: >or = 60 mg/dL High risk : Up to 35 mg/dL
LDL :	<u>135 mg/dl</u> [N]	131.0 to 159.0(N) < 130.0(L) > 159.0(H)
VLDL :	24 mg/dl	Up to 0 to 34 mg/dl
LDL/HDL Ratio :	2.5	Low risk : 0.5 to 3.0 Moderate risk : 3.0 to 6.0 Elevted level high > 6.0
Total Chol / HDL Ratio :	3.94	Low Risk : 3.3 to 4.4 Average Risk : 4.4 to 7.1 Moderate Risk : 7.1 to 11.0 High Risk : > 11.0
Total Lipids :	687 mg/dl	400 to 700 mg/dl

**Note :-** Lipemic samples give high triglyceride value and falsely low LDL value.



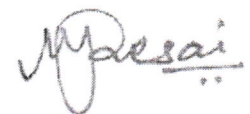
**Dr.Mehul Desai**  
**M.B.D.C.P**  
**Reg.No.G-9521**



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**LFT (Liver Function Test)**

Investigation	Result	Normal Value
Total Bilirubin :	0.3 mg/dl	0.2 to 1.0 mg/dl
Direct Bilirubin :	0.2 mg/dl	0.0 to 0.2 mg/dl
Indirect Bilirubin :	0.1 mg/dl	0.0 to 0.8 mg/dl
AST (SGOT) :	21 U/L	5 to 34 U/L
ALT (SGPT) :	14 U/L	0 to 55 U/L
Total Protein (TP) :	6.4 g/dL	6.4 to 8.3, g/dl
Albumin (ALB) :	4 g/dl	3.5 to 5.2 g/dl
Globulin :	2.4 g/dl	2.3 to 3.5 g/dl
A/G Ratio :	1.67	
Alkaline Phosphatase (ALP) :	120 U/L	40 to 150 U/L
GAMMA GT. :	13 U/L	7 to 35 U/L



**Dr.Mehul Desai**  
**M.B.D.C.P**  
**Reg.No.G-9521**





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### Blood Group

Investigation	Result	Normal Value
<b>BLOOD GROUP :</b>		
<b>ABO</b>	B	
<b>Rh</b>	Positive	


### RENAL FUNCTION TEST

Investigation	Result	Normal Value
<b>Creatinine :</b>	0.9 mg/dl	0.6 - 1.4 mg/dl
<b>Urea :</b>	16 mg/ dl	13 - 45 mg/dl
<b>Uric Acid :</b>	6.9 mg/dl	3.5 - 7.2 mg/dl
<b>Calcium :</b>	10.1 mg/dl	8.5 - 10.5
<b>Phosphorus :</b>	5.5 mg/dl	1.5 - 6.8



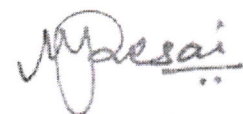
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### CBC, ESR

Investigation	Result	Normal Value
Hemoglobin :	13.7 gm/dl	13.5 to 18.0 gm/dl
P.C.V. :	44.4 %	42.0 to 52.0 %
M.C.V. :	67.8 fL [L]	78 to 100 fL
M.C.H. :	20.9 pg [L]	27 to 31 pg
M.C.H.C. :	30.9 g/dl [L]	32 to 36 g/dl
RDW :	13.4 %	11.5 to 14.0 %
RBC Count :	6.55 X 10 <sup>6</sup> / cumm [H]	4.7 to 6.0 X 10 <sup>6</sup> / cumm
Polymorphs :	78 % [H]	38 to 70 %
Lymphocytes :	18 %	15 to 48 %
Eosinophils :	2 %	0 to 6 %
Monocytes :	2 % [L]	3 to 11 %
Basophils :	0 %	0.0 to 1.0 %
Total :	100	< 100 > 100
WBC Count :	5900 /cmm	4000 to 10000 /cmm
Platelets Count :	223000 / cmm	1,50,000 to 4,50,000 /cmm
ESR - After One Hour :	17 mm/hr [H]	1 to 13 mm/hr



**Dr.Mehul Desai**  
M.B.D.C.P  
Reg.No.G-9521



## PHYSICIAN EXAMINATION

Name:-CHANDRASINH SOLANKI

Age: 52/MALE

Reg.No:20221206858

DOE: 10/12/2022

### Physical Examination:

Height: 174CM

Weight: 67KG

PULSE: 83

Temperature: NORMAL

BMI: 22.12

BP: 176/94

SPO2- 98%

Chief Complaint: CAME FOR REGULAR HEALTH CHECKUP

Past History: K/C/O HTM X 10 TRS ON Rx

DM-2 X 7TRS ON Rx

General Examination: NAD

Systemic Examination: RJ: AEBE CLTAV

CVS: S1, S2 CMS: CONCIOUS ORIENTED

### INVESTIGATION :

FBS:106 MG/dl , PP2BS :117

ECG:WNL

OTHERS:2D ECHO CONCENTRIC LVH

ADVICE: CONTINUE ANTI HTM + ANTI DM || Rx

\* GLIMP MP (21151500) 1---0---1

\* TEL -GAD -( 40) 1---0---0

\* TWIN BLOCK-M (50) 1---0---0

DR SAURABH JAIN







## Examination By Ophthalmologist

Name:-CHANDRASINH SOLANKI  
Reg.No: 20221206858

Age:52/MALE  
DATE: 10/12/22

Present Complaints: NAD

Medical History: NAD

Examination Of Eye:	<u>Right</u>	<u>Left</u>
External Examination :	NAD	NAD
Ati Seg Examination:	A/S WNL	NAD
Schiotz Tonometry IOP:	RRRL	RRRL

Fundus: NILL

Without Glass Distant Vision: \_\_\_\_\_

Near Vision: \_\_\_\_\_

With Glass: Distant Vision: 6/6 WITH -1.50/90 \_\_\_\_\_ 6/6 WITH -0.52/80

Near Vision: N6 WITH +1.0 DSPH \_\_\_\_\_ N6 WITH +1.0 DSPH

(BIOFOCAL)

Colour Vision (With Ishihara Chart): WNL

Advice: NAD

**DR CHETAN CHAUHAN**





## Examination by DENTAL

Name:-CHANDRASINH SOLANKI

Age:52/MALE

Reg.No: 20221206858

DOE: 10/12/2022

**Presenting Complaint: WANTS TO REPLACE HIS MISSING TEETH**

**Medical History : HYPERTENSIVE SINCE LAST 7-8 YEARS**

**DIABETIC SINCE LAST 8-9 YEARS**

**Examination: EDENTULOUS LOW ARCH**

**RESORBED BONE IN UPPER ARCH**

**ADVICE:-**

**\*UPPER FULL MOUTH EXTRACTION**

**\*UPPER COMPLETE DENTURE**

**\*IMPLANT SUPPORTED LOWER DENTURE**

**DR DISHANSH SHETH**





भारत सरकार

GOVERNMENT OF INDIA



चंद्रसिंह सोलंकी

Chandrasinh Solanki

जन्म तारीख/ DOB: 22/04/1971

पुरुष / MALE



3114 8509 6611

आधार-सामान्य माएसन्नी अधिकार



LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,  
Mediwheel (Arcofemi Healthcare Limited)  
Helpline number: 011- 41195959

Dear Sir / Madam,

**Sub: Annual Health Checkup for the employees of Bank of Baroda**

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MR. SOLANKI CHANDRASINGH AMARSINGH
EC NO.	49971
DESIGNATION	HEAD PEON
PLACE OF WORK	VADODARA,NAVAYARD
BIRTHDATE	22-04-1971
PROPOSED DATE OF HEALTH CHECKUP	12-11-2022
BOOKING REFERENCE NO.	22D49971100028430E

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **29-10-2022** till **31-03-2023** The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

**Chief General Manager  
HRM Department  
Bank of Baroda**



(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))