



PHYSICIAN EXAMINATION

Name :	VIJAYKUMAR SUTARIYA	Age :	37/MALE
Reg.No :	20230309350	DOE :	28/03/2023

Physical Examination:

Height:	171CM	Weight:	58 KG	PULSE:	84	Temperature:	NORMAL
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BMI :	19.83	BP :	120/76	SPO2	99%
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Chief Complaint :	NO COMPLAINTS
Past History :	NO SIGNIFICANTS
General Examination :	NAD
Systemic Examination :	NAD
INVESTIGATION :	NAD
ADVICE :	TAB: SUPRADYN 0--1--0 (30DAYS)

DR. SAURABH JAIN





Savita

Superspeciality Hospital
(A Unit of Solace Healthcare Pvt. Ltd.)

Parivar Char Rasta, Waghodia-Dabhoi Ring Road, Vadodara-390019

☎ 0265-2578844 / 2578849 ✉ mh@savitahospital.com 🌐 savitahospital.com

Examination By Ophthalmologist

Name :	VIJAYKUMAR SUTARIYA	Age :	37/MALE
Reg.No :	20230309350	DOE :	28/03/2023
Present Complaints :	NIL		
Medical History :	NIL		
Examination Of Eye :	NAD		
External Examination :	NAD	NAD	
Ati Seg Examination :	A/S WNL	NAD	
Schiotz Tonometry IOP :	P:RRRL	NAD	
Fundus :	NILL		
Without Glass	Distant Vision : 6/6	6/6	
	Near Vision : N6	N6	
With Glass	Distant Vision :		
	Near Vision :		
Colour Vision (With Ishihara Chart) :	WNL		
IMPRESSION:	PARTICAL COLOUR BLINDNESS		
Advice :	NIL		

X

DR CHETAN CHAUHAN





Patient Name : Vijaykumar Mahendrabhai Sutariya

Sample No. : 20230316859



Patient ID : 20230309350

Visit No. : OPD20230328281

Age / Sex : 37y/Male

Call. Date : 28/03/2023 08:52

Consultant : DR SAURABH JAIN

S. Coll. Date : 28/03/2023 12:22

Ward : -


Report Date : 28/03/2023 14:06

CBC, ESR

Investigation	Result	Normal Value
Hemoglobin :	15.6 gm/dl	13.5 to 18.0 gm/dl
P.C.V. :	43.5 %	42.0 to 52.0 %
M.C.V. :	88.2 fL	78 to 100 fL
M.C.H. :	31.6 pg [H]	27 to 31 pg
M.C.H.C. :	35.9 g/dl	32 to 36 g/dl
RDW :	11.2 %	11.5 to 14.0 %
RBC Count :	4.93 X 10 ⁶ / cumm	4.7 to 6.0 X 10 ⁶ / cumm
Polymorphs :	59 %	38 to 70 %
Lymphocytes :	37 %	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 :	5300 /cmm	4000 to 10000 /cmm
Platelets Count :	222000 /cmm	1,50,000 to 4,50,000 /cmm
ESR - After One Hour :	5 mm/hr	1 to 13 mm/hr

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



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Blood Group

Investigation	Result	Normal Value
BLOOD GROUP :		
ABO	B	
Rh	Positive	

FBS & PPBS

Investigation	Result	Normal Value
Blood Sugar (FBS) :	91 mg/dl	74 - 100 mg/dl
Urine Sugar (FUS) :	Nil	
Blood Sugar (PP2BS) :	80 mg/dl	70 to 120 mg/dl
Urine Sugar (PP2US) :	Nil	


HBA1C

Investigation	Result	Normal Value
Glycosylated Hb :	5 %	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 :	96.8	



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RENAL FUNCTION TEST

Investigation	Result	Normal Value
Creatinine :	0.8 mg/dl	0.6 - 1.4 mg/dl
Urea :	18 mg/ dl	13 - 45 mg/dl
Uric Acid :	5.5 mg/dl	3.5 - 7.2 mg/dl
Calcium :	9 mg/dl	8.5 - 10.5
Phosphorus :	3.9 mg/dl	1.5 - 6.8



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LFT (Liver Function Test)

Investigation	Result	Normal Value
Total Bilirubin :	0.9 mg/dl	0.2 to 1.0 mg/dl
Direct Bilirubin :	0.3 mg/dl	0.0 to 0.2 mg/dl
Indirect Bilirubin :	0.6 mg/dl	0.0 to 0.8 mg/dl
AST (SGOT) :	19 U/L	5 to 34 U/L
ALT (SGPT) :	16 U/L	0 to 55 U/L
Total Protein (TP) :	5.7 g/dL [L]	6.4 to 8.3, g/dl
Albumin (ALB) :	4 g/dl	3.5 to 5.2 g/dl
Globulin :	1.7 g/dl	2.3 to 3.5 g/dl
A/G Ratio :	2.35	
Alkaline Phosphatase (ALP) :	148 U/L	40 to 150 U/L
GAMMA GT. :	60 U/L [H]	7 to 35 U/L



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Lipid Profile

Investigation	Result	Normal Value
Sample :	Fasting	
Sample Type :	Normal	
Cholesterol (Chol) :	150 mg/dl	Low risk : < 200 Moderate risk : 200 - 239 High risk : > or = 240
Triglyceride :	65 mg/dl	Normal : < 200.0 High : 200 - 499 Very High : > or = 500
HDL Cholesterol :	46 mg/dl	Low risk : >or = 60 mg/dL High risk : Up to 35 mg/dL
LDL :	91 mg/dl [L]	131.0 to 159.0(N) < 130.0(L) > 159.0(H)
VLDL :	13 mg/dl	Up to 0 to 34 mg/dl
LDL/HDL Ratio :	1.98	Low risk : 0.5 to 3.0 Moderate risk : 3.0 to 6.0 Elevted level high > 6.0
Total Chol / HDL Ratio :	3.26	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 :	561 mg/dl	400 to 700 mg/dl

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

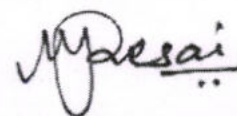
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Age / Sex :	37y/Male	Visit No. :	OPD20230328281
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Urine R/M

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	



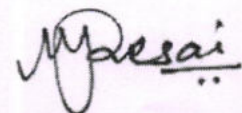
Dr.Mehul Desai
M.B.D.C.P
Reg.No.G-9521



Patient Name :	Vijaykumar Mahendrabhai Sutariya	Sample No. :	20230316868 
Patient ID :	20230309350	Visit No. :	OPD20230328281
Age / Sex :	37y/Male	Call. Date :	28/03/2023 08:52
Consultant :	DR SAURABH JAIN	S. Coll. Date :	28/03/2023 12:38
Ward :	-	Report Date :	28/03/2023 13:45

STOOL EXAMINATION

Investigation	Result	Normal Value
Quantity :	5 gm	
Colour :	Yellow	
Consistency :	Semi Solid	
Mucus :	Absent	
Blood :	Absent	
Occult Blood :	Negative	
Pus Cells :	2-4 /hpf	
RBCs Cells :	2-3 /hpf	
Epithelial Cells :	2-4 /hpf	
Vegetable Cells :	Present	
Reducing Sab. :	Negative	



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TEST REPORT

Reg. No. : 30301015902 Reg. Date : 28-Mar-2023 12:18 Collected On : 28-Mar-2023 12:18
 Name : Mr. VIJAY SUTARIYA Approved On : 28-Mar-2023 13:59
 Age : 37 Years Gender : Male Ref. No. : Dispatch At :
 Ref. By : Tele No. :
 Location : SAVITA SUPERSPECIALTY HOSPITAL @ WAGHODIYA ROAD

Test Name	Results	Units	Bio. Ref. Interval
THYROID FUNCTION TEST			
T3 (triiodothyronine) <i>Method:CLIA</i>	1.10	ng/mL	0.6 - 1.81
T4 (Thyroxine) <i>Method:CLIA</i>	9.80	µg/dL	4.5 - 12.6
TSH (ultra sensitive) <i>Method:CLIA</i>	3.130	µIU/mL	0.55 - 4.78
Sample Type:Serum			

Comments:

Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulate the thyroid gland to synthesize and secrete T3 and T4. Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

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

Reference : Carl A.Burtis,Edward R.Ashwood,David E.Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Eddition. Philadelphia: WB Saunders,2012:2170

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

This is an electronically authenticated report.

Test done from collected sample.

Dr. Vishal Jhaveri

37 Years

VIJAY SUTARIYA
Male

28-Mar-23 8:24:20 AM

Rate 64

PR 128

QRSD 98

QT 416

QTc 430

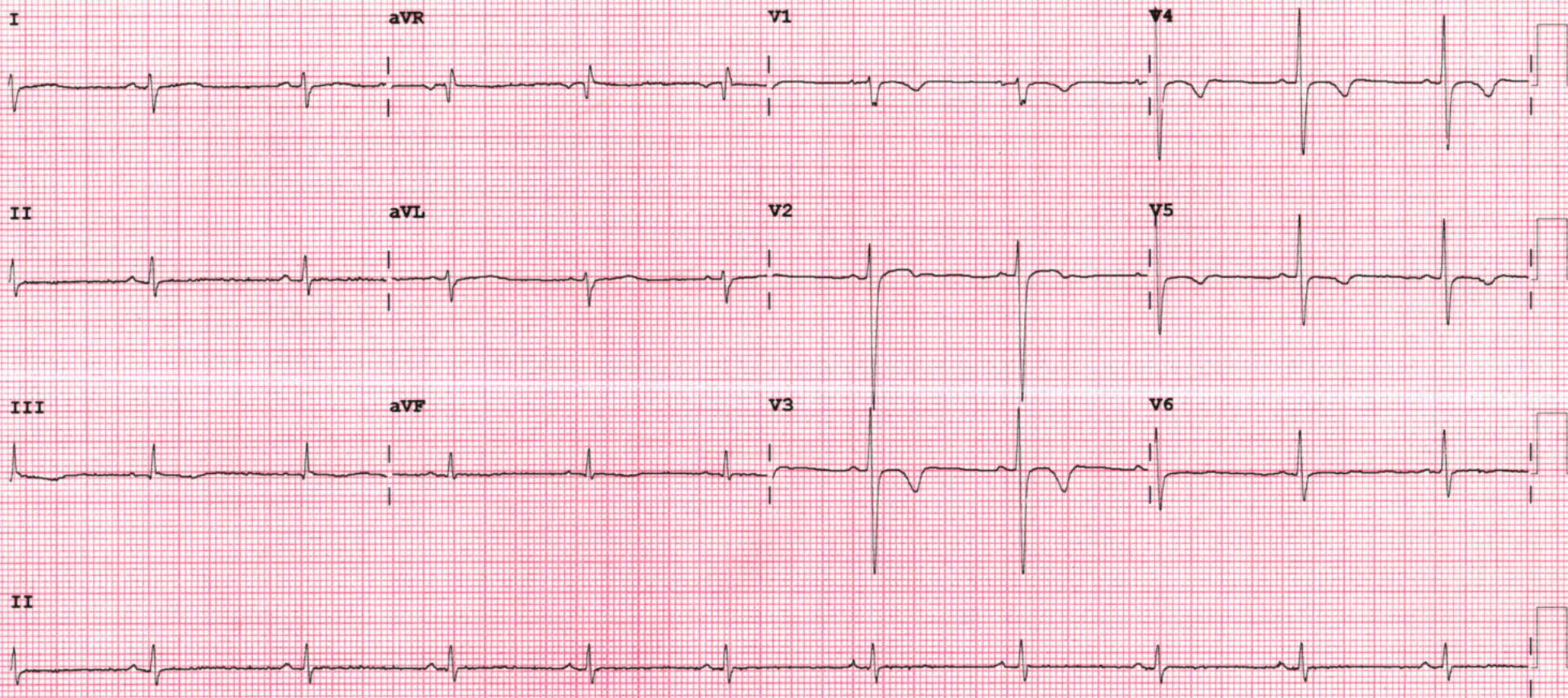
--AXIS--

P 28

QRS 110

T -17

12 Lead; Standard Placement



Device:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 50~ 0.50-150 Hz W

PH09

P?



2D-ECHOCARDIOGRAPHY AND COLOR DOPPLER REPORT

NAME: VIJAYKUMAR MAHENDRABHAI SUTARIYA

AGE/SEX: 37 YRS/MALE

DATE : 28/03/2023

REF BY: DR. SAURABH JAIN

OBSERVATION:

- NORMAL LV SIZE AND NORMAL LV SYSTOLIC FUNCTION. LVEF = 60% (VISUAL).
- NO RWMA AT REST
- MYXOMATOUS MITRAL VALVE, TRIVIAL MR. NO MS.
- TRIVIAL AR. NO AS.
- MILD TR. NO PAH
- NORMAL SIZED LA, RA & RV WITH NORMAL RV SYSTOLIC FUNCTION.
- NORMAL SIZED MPA, RPA & LPA.
- THIN IAS / INTACT IAS AND IVS.
- NO COARCTATION OF AORTA
- NO E/O INTRACARDIAC CLOT/VEGETATION/ PE.
- NORMAL IVC.

CONCLUSION:

- NORMAL LV/RV SIZE AND NORMAL LV SYSTOLIC FUNCTION.
- NO RWMA AT REST.
- LVEF = 60% (VISUAL).
- MILD TR / NO PAH

DR.NIRAV BHALANI
[CARDIOLOGIST]

DR.ARVIND SHARMA
[CARDIOLOGIST]

DR. CHIRAG SHETH
[CARDIOLOGIST]





Patient name	VIJAY SUTARIYA
Age / Sex	37Y/M
Date	Tuesday, 28 March 2023

ULTRASOUND OF ABDOMEN

LIVER appears normal in size (11.2 cm) and shows normal parenchymal echogenicity. No evidence of focal lesion. No evidence of dilated IHBR or portal vein. CBD appears normal.

GALL BLADDER is distended. No e/o wall thickening or calculus within.

VISUALIZED PART OF PANCREAS appears normal. MPD is WNL

SPLEEN appears normal in size (11.7 cm) and shows normal parenchymal echogenicity. No evidence of focal lesion.

BOTH KIDNEYS appear normal in size (RK: 10.2 cm & LK: 11.6 cm) and position. Show normal cortical echogenicity. Corticomedullary differentiation is maintained. No calculus or hydronephrosis on either side.

URINARY BLADDER is full. No e/o wall thickening or calculus within.

PROSTATE appears normal in size. No evidence of focal lesion noted.

BOWEL LOOPS appear normal and show normal peristalsis
No evidence of LYMPHADENOPATHY noted.
No evidence of ASCITES or PLEURAL EFFUSION noted.

IMPRESSION:

- NO SIGNIFICANT ABNORMALITY NOTED IN PRESENT SCAN.


DR SHARAD RUNGTA
MD RADIOLOGY

Not all pathologies can be detected on radiograph. Further radiographic evaluation is suggested if required.



NAME: VIJAYKUMAR SUTARIYA	AGE/SEX: 37 YRS/M
DATE: Tuesday, March 28, 2023	

CHEST XRAY (PA)

Both lung fields appear normal.
Both hila appear normal
Bilateral costo-phrenic angles appear grossly clear
Mediastinum and cardiac shadow appear normal
Bony thorax appears unremarkable
No evidence of free gas under domes of diaphragm

IMPRESSION:

- NO SIGNIFICANT ABNORMALITY NOTED IN LUNG FIELDS
- NORMAL CARDIAC SHADOW



DR SHARAD RUNGTA
MD RADIOLOGY

Not all pathologies can be detected on radiograph. Further radiographic evaluation is suggested if required.