

OPR NO:

Patient Name:- Zankhna J. Patel Consultant Physician Clinic

Age / Sex :- 28 yrs / F

Chief Complaints:-
Goitre

Date: 15/04/23
Weight:- 66.2 kg
Height:- 166 cm
BMI:- 24

Nutritional assessment:-

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

Drug / Food Allergy:- None. Covid vaccination done

Pulse:- 78 b/min
BP:- 120/70 mm
SpO2:- 99%

Past History :-

Nil

Family History:- Nil

Systemic Examination:-

None

Provisional Diagnosis: Anemia

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CIN: L85110GJ2004PLC044667

Investigation :-

Treatment and further advices:-
(Write in Capital Letters)

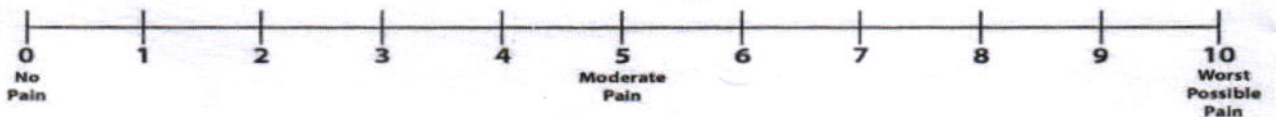
Rx - P. Linogen - 2 OD x 3 months.

Follow Up Date:- 202-

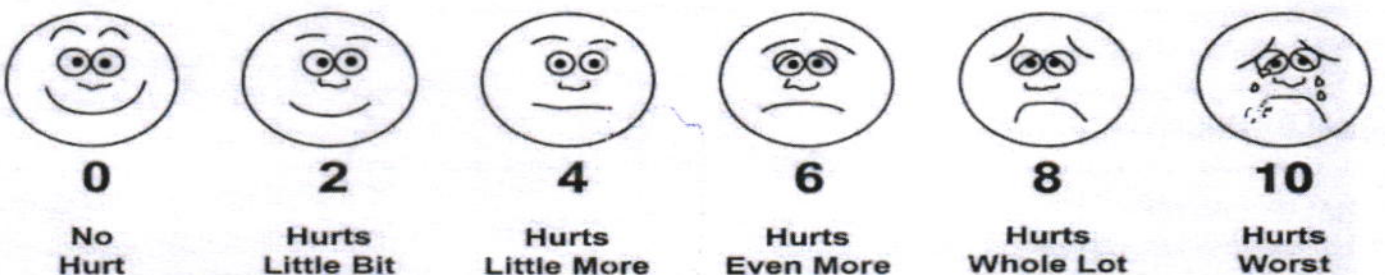
બધી દવાઓ ડોક્ટરને બતાવીને લેવી.

Incase of emergency Please report to Emergency Department of Hospital OR Call:- 0261-7190000 / ૧૧૧૨૬૬૦૦૯૬

Numeric Rating Scale



Wong-Baker FACES® Pain Rating Scale




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PID : SUR0000339917 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Zankhna Jatin Patel	/	Registered On : 15-Apr-2023 09:03 AM
Lab ID : 304901060		Collected On : 15-Apr-2023 09:00 AM
Gender/Age : Female / 25 Years	DOB : 21-Aug-1997	Received On : 15-Apr-2023 10:00 AM
Ref. By : Dr. Health Check Up . Shalby		Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
BLOOD COUNT AND INDICIES			
HAEMOGLOBIN <i>Colorimetric Non Cyanide</i>	9.7	g/dL	12.0 - 15.0
RBC COUNT <i>Electrical Impedance</i>	3.87	mill/cmm	3.8 - 4.8
HCT <i>Calculated</i>	31.3	%	36 - 46
MCV <i>Calculated based on the RBC histogram</i>	80.9	fL	83 - 101
MCH <i>Calculated</i>	25.1	pg	27 - 32
MCHC <i>Calculated</i>	31.0	g/dL	31.5 - 34.5
RDW <i>Calculated</i>	14.3	%	11.6 - 14.0

TOTAL LEUCOCYTE COUNT

Total WBC Count <i>Electrical Impedance</i>	5480	cells/cmm	4000 - 10000
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DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)

NEUTROPHILS <i>Flow Cytometry</i>	64	%	40 - 80
LYMPHOCYTES <i>Flow Cytometry</i>	27	%	20 - 40
EOSINOPHILS <i>Flow Cytometry</i>	4	%	1 - 6
MONOCYTES <i>Flow Cytometry</i>	5	%	2 - 10
BASOPHIL <i>Flow Cytometry</i>	0	%	0 - 2

PLATELET INDICES

PLATELET COUNT <i>Electrical Impedance</i>	315000	/cmm	150000 - 410000
MPV <i>Calculated based on PLT Histogram</i>	9.4	fL	7.5 - 12.0

PERIPHERAL SMEAR EXAMINATION

RBCs	Hypochromic microcytic with anisopoikilocytosis.
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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Pankaj Agrawal

Dr Pankaj Agrawal

M.B., D.C.P
 Consulting Pathologist

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Ref. By : Dr. Health Check Up . Shalby		Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
BLOOD GROUP (Tube agglutination: Forward & reverse)			
ABO Type	"B"		
RH Type	POSITIVE		

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Parameter	Result	Unit	Biological Ref. Interval
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ESR 1st hour *	9	mm in 1 hour	0 - 20
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Modified Westergren Method

HBA1C

HbA1c - Glycated Haemoglobin *	5.8	%	
---------------------------------------	-----	---	--

Boronate Affinity Assay

Non-diabetic: <= 5.6
Pre-diabetic: 5.7-6.4
Diabetic: >= 6.5
Therapeutic goals for glycemc 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) * 120 mg/dL

Calculated

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Collected On : 15-Apr-2023 09:00 AM

Gender/Age : Female / 25 Years

DOB : 21-Aug-1997

Received On : 15-Apr-2023 09:49 AM

Ref. By : Dr. Health Check Up . Shalby

Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
Liver Function Test			
Liver Function Test			
SGPT (ALTV) <i>Multi Point Rate with P-5-P</i>	16	U/L	9 - 52
SGOT (AST) <i>Multi Point Rate with P-5-P</i>	18	U/L	14 - 36
Alkaline Phosphatase <i>PNPP, AMP Buffer</i>	76	U/L	20-50 yrs.: 42 - 98 4-19 yr : 54 - 369 >=51 yr : 56 - 119
GGT * <i>L-gamma-glutamyl-4-nitroanalide/glycylglycine Kinetic</i>	17	U/L	12 - 43
S. PROTEIN <i>Biuret (Alkaline cupric sulfate), End Point</i>	7.1	g/dL	6.3 - 8.2
Albumin <i>Bromocresol Green (BCG), Colorimetric</i>	4.3	g/dL	3.5 - 5.0
S. GLOBULIN <i>Calculated</i>	2.8	g/dL	2.3 - 3.6
A/G Ratio <i>Calculated</i>	1.5	Ratio	1.0 - 2.3
Bilirubin Total <i>Azobilirubin/Dyphylline/Diazonium Salt</i>	0.3	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 Adult : 0.2 - 1.3
Bilirubin Unconjugated <i>End-point Colorimetric (Dual wavelength spectrophotometric)</i>	0.3	mg/dL	Unconjugated bilirubin Adults: 0.0-1.1 Neonates: 0.6-10.5
BILIRUBIN DIRECT <i>Calculated</i>	0.0	mg/dL	Conjugated bilirubin and Delta bilirubin (Bilirubin covalently bound to albumin) 0.0-0.4

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

Parameter	Result	Unit	Biological Ref. Interval
LIPID PROFILE			
LIPID PROFILE			
Cholesterol <i>Cholesterol Esterase, Oxidase, Peroxidase</i>	115	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
SERUM TRIGLYCERIDE <i>Lipase/GK/GPO/POD</i>	49	mg/dL	Normal : <150 Borderline High : 150-199 High : 200-499 Very High : > 500
HDL CHOLESTEROL DIRECT * <i>Phosphotungstic Acid/Mgcl2 - Enzymatic</i>	33	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : >= 60
Non HDL Cholesterol <i>Calculated</i>	82	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
S.LDL <i>Calculated</i>	72	mg/dL	Optimal: <100 Near to above Optimal: 100 - 129 Borderline High: 130 - 159 High: 160 - 189 Very High: > 190
VLDL <i>Calculated</i>	10	mg/dL	6 - 38
LDL/dHDL * <i>Calculated</i>	2.2		2.5 - 3.5
Chol/dHDL * <i>Calculated</i>	3.5	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 : Dr. Health Check Up . Shalby		Sample Type : Serum, Urine (PP), Fluoride P, Urine

Parameter	Result	Unit	Biological Ref. Interval
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PLASMA GLUCOSE LEVEL

FASTING PLASMA GLUCOSE

Plasma Glucose (F)	95	mg/dL	74 - 106
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GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

Urine Sugar (F)	ABSENT	mg/dL	ABSENT
------------------------	--------	-------	--------

Glucose-oxidase/oxidase reaction

POST PRANDIAL PLASMA GLUCOSE

Plasma Glucose (PP)	109	mg/dL	Normal: 100-140 Impaired: 140 -199 Diabetic : =>200
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GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

Urine Sugar (PP)	ABSENT	mg/dL	ABSENT
-------------------------	--------	-------	--------

Glucose-oxidase/oxidase reaction

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

Parameter	Result	Unit	Biological Ref. Interval
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RENAL FUNCTION TEST**RENAL FUNCTION TEST****Urea Nitrogen (BUN)**

10

mg/dL

7 - 17

*Urease, colorimetric***UREA**

21

mg/dL

15 - 36

*Calculated***S. CREATININE**

0.60

mg/dL

0.52 - 1.04

*Enzymatic - Creatinine amidohydrolase***S. URIC ACID**

4.5

mg/dL

2.5 - 6.2

*Uricase/Peroxidase, Colorimetric***Calcium**

9.1

mg/dL

8.4 - 10.2

*Arsenazo III dye***S. PHOSPHORUS ***

4.2

mg/dL

2.5 - 4.5

*Phosphomolybdate reduction (PMA Phenol)***Sodium**

141

mmol/L

137 - 145

*Direct Ion Selective Electrode***S. POTASSIUM**

4.17

mmol/L

3.5 - 5.1

*Direct Ion Selective Electrode***Chloride**

104

mmol/L

98 - 107

Direct Ion Selective Electrode

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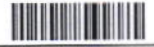
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Gender/Age : Female / 25 Years

DOB : 21-Aug-1997

Received On : 15-Apr-2023 09:49 AM

Ref. By : Dr. Health Check Up . Shalby

Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
Total T3 * <i>Chemiluminescence immunoassay (CLIA)</i>	74	ng/dL	87 - 178
Total T4 * <i>Chemiluminescence immunoassay (CLIA)</i>	6.97	µg/dL	6.09 - 12.23
TSH * <i>Chemiluminescence immunoassay (CLIA)</i>	3.91	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

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Gender/Age : Female / 25 Years	DOB : 21-Aug-1997	Received On : 15-Apr-2023 09:52 AM
Ref. By : Dr. 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			
Blood	<i>Peroxidase like activity of hemoglobin</i>	Trace (+/-)	RBCs/ μ L
Bilirubin	<i>Azo coupling Reaction with diazonium</i>	NIL	mg/dL
Urobilinogen	<i>Modified Ehrlich reaction</i>	NORMAL	mg/dL
Ketone	<i>Sodium Nitroprusside reation</i>	NIL	mg/dL
Protein	<i>Protein Error of Indicator Principle</i>	NIL	mg/dL
Nitrite	<i>Diazotization reaction of nitrite with an aromatic amine</i>	NEGATIVE	mg/dL
Glucose	<i>Glucose-oxidase/oxidase reaction</i>	NIL	mg/dL
pH	<i>Double Indicator principle</i>	6.0	PH value
Specific Gravity	<i>Refractometric Method - Bromthymol blue</i>	1.025	S.G. value
Leucocyte	<i>Leucocyte Esterase Test</i>	NEGATIVE	WBCs/ μ L
Microscopic Examination			
Pus cells	2-3/hpf	/hpf	0-5/hpf
Red blood cells	2-3/hpf	/hpf	0-2/hpf
Epithelial cells	0-2/hpf	/hpf	NA
Crystals	Triple Phosphate		Nil
Cast	NIL/LPF		Nil/LPF
Bacteria	NIL		Nil
Amorphous	NIL		Nil
Yeast	NIL		Nil

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

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Pre - op

Post - op

Health Check-up

Date : 15/08/23

Patient Reg. No. : _____

Patient Name : Zankhna J. Patel

Age / Sex : 26 / R

Address : Vegat

Complaints :

Pain : _____

Bleeding gums : _____

Sensitivity : _____

Swelling : _____

Pus Discharge : _____

Medical History :

Hypertension : _____ DM _____ Acidity _____ Pregnancy : _____

Bleeding Disorders : _____ Asthma : _____ Allergy : _____

Past Surgical Intervention : _____

Any Medication : sterion *

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 : 15 Extraction : _____

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 an well maintained.

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

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

Adv.

- scaling
 - RCT of 15

Dr. Darshini V. Shah
 (Consultant Dental Surgeon)

DR. HIMANI THAKER (VYAS)

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

Shalby Women's Health Clinic

Age - 26 yrs

Date: 15/4/23

Weight:-

Height:-

OPR NO:-

Nutritional Assessment:-

- Obese
- Well Nourished
- Mild-Moderate Nourished
- Severely Mal-Nourished

LMP:- 11/4/23

DS

Name:- Zankhana Patel
Chief Complaints:-

clo - nit

M/H:- Pant - 34 days Rhen
30

O/H :-
OH - induced P14
1 PTV or SMA for ? cardiac problem
caused
FTUS 01/4/23

P/H:-
F/H
Examination:-

P/A - soft

Provisional Diagnosis:-

Pls - PAP smear not fake

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Tel: 079 40203000 | Fax: 079 40203109 | info.sg@shalby.org | www.shalby.org
CIN: L85110GJ2004PLC044667

Patient ID:	SUR000004742	Patient Name:	ZANKHNA J PATEL
Age:	26 Years	Sex:	F
Accession Number:	4742	Modality:	DX
Referring Physician:		Study:	CHEST PA
Study Date:	15-Apr-2023		

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
CONSULTANT RADIOLOGIST

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
Tel: 079 40203000 | Fax: 079 40203109 | info.sg@shalby.org | www.shalby.org
CIN: L85110GJ2004PLC044667

Patient's Name: Mrs. Zankhna Patel

Age: 26 yrs/ Female

Date: 15 / 04 / 2023

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:21

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

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Tel: 079 40203000 | Fax: 079 40203109 | info.sg@shalby.org | www.shalby.org

CIN: L85110GJ2004PLC044667

Patient Name: ZANKHANA JATIN PATEL		
Age / Sex: 26 Yrs. / Female	Study: USG Abdomen + Pelvis	
Referred By: Dr. at shalby hospital	Date: 15/04/2023	

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 anteverted normal in size. 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
CONSULTANT RADIOLOGIST

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Zankhna

1100 Sinus rhyt.
0102 ARTIFACT PRESENT
9110 ** normal ECG **

years

Birth date: / mm/yy

Sex: M / kg

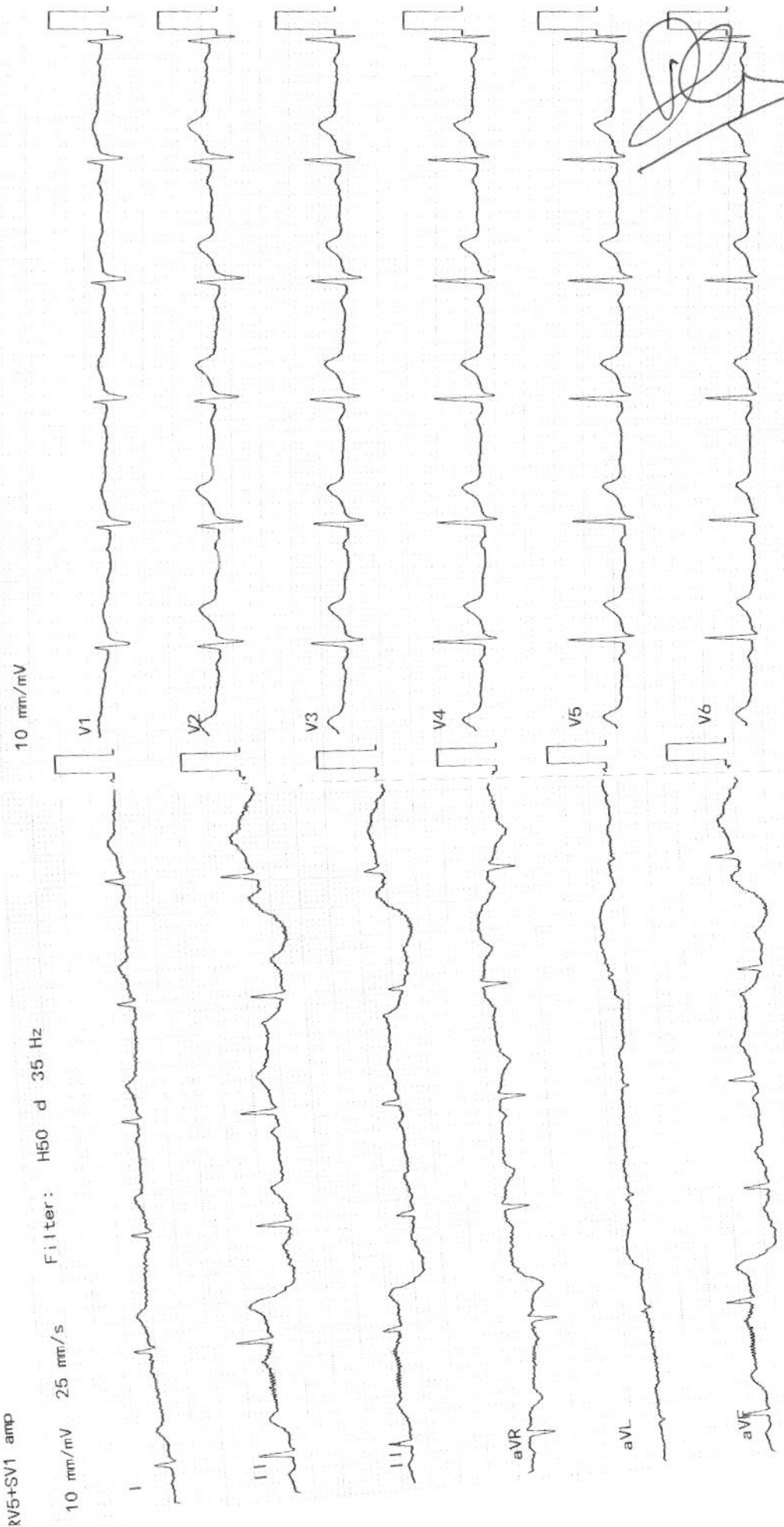
Medication:

Symptoms:

History:

vent. rate 75 bpm
 PR int 156 ms
 QRS dur 80 ms
 QT/QTc(E) int 348/ 377 ms
 P/QRS/T axis 58/ 62/ 44 °
 RV5/SV1 amp 1.04/ 0.40 mV
 RV5+SV1 amp 1.44 mV

Unconfirmed Report
Reviewed by:



Exam:

DR. RUJUTA SHELAT
Consultant Ophthalmologist
Reg. No.:- G-48712

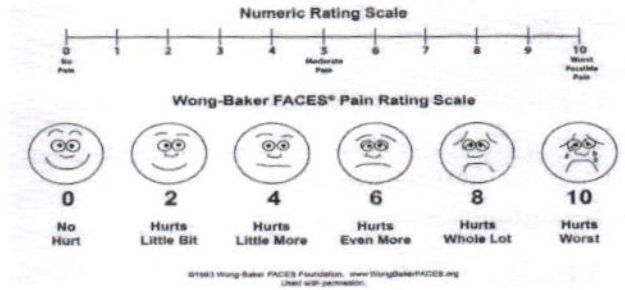
Name :-

Date:-

16/4
20/8/23

Chief Complaints:-

- Regular check up -



Pain Assessment:-

Past History:-

Family History:-

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:- WT:-

Visual Acuity:- 1/6

PH Vision:-

NCT

ON Examination

Ant. Segment

Both Eye

-WNL-

Cornea

Anterior Chamber

Lens

Fundus

Rt. EYE

Lt. EYE

Media:-

Disc:-

Blood Vessel:-

Background:-

Macula:-

Diagnosis:-

Treatment:-

Investigation:-

-WNI-

Nutritional Assessment:-

Preventive Care & Counsellings:-

Follow Up ON:-

(x 2 months)

Signature of the Consultant

Ray