



**BHAILAL AMIN
GENERAL HOSPITAL**



H-2015-0297



MC-3004



E-2021-0037



CONCLUSION OF HEALTH CHECKUP

ECU Number : 1758

Age : 59

Weight : 67

Date : 13/02/2023

MR Number : 23200355

Sex : Male

Ideal Weight : 64

Patient Name: SAMSUBHAI NATHABHAI

Height : 167

BMI : 24.02

Dr.

null

Note : General Physical Examination & routine Investigations included in the Health Checkup have certain limitations and may not be able to detect all the latent and asymptomatic diseases.



BHAILAL AMIN GENERAL HOSPITAL



H-2015-0297



MC-3004



E-2021-0037



ECU Number : 1758 MR Number : 23200355 Patient Name: SAMSUBHAI NATHABHAI
Age : 59 Sex : Male Height : 167
Weight : 67 Ideal Weight : 64 BMI : 24.02
Date : 13/02/2023

Past H/O : NO P/H/O ANY MAJOR ILLNESS.

Present H/O : NO MEDICAL COMPLAINTS AT PRESENT.

Family H/O : NO F/H/O ANY MAJOR ILLNESS.

Habits : NO HABITS.
Gen.Exam. : G.C. GOOD
B.P : 160/100 mm Hg
Pulse : 82/MIN REG.
Others : SPO2 : 99 %
C.V.S : NAD
R.S. : NAD
Abdomen : NP
Spleen : NP
Skin : NAD
C.N.S : NAD
Advice :



ECU Number : 1758
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Weight : 67
Date : 13/02/2023

MR Number : 23200355
Sex : Male
Ideal Weight : 64

Patient Name: SAMSUBHAI NATHABHAI
Height : 167
BMI : 24.02

Ophthalmic Check Up :

Right

Left

Ext Exam

NIL

Vision Without Glasses

6/9

6/9

Vision With Glasses

6/6

6/6

Final Correction

+ 1.00 D SPH

+ 1.00 D SPH

Fundus

NORMAL

Colour Vision

NORMAL

Advice

NIL

Orthopaedic Check Up :

Ortho Consultation

Ortho Advice

ENT Check Up :

Ear

Nose

Throat

Hearing Test

ENT Advice

General Surgery Check Up :

General Surgery

Abdominal Lump

Hernia

External Genitals

PVR

Proctoscopy

Any Other

Surgical Advice

Dietary Assesment

ECU Number : 1758 MR Number : 23200355 Patient Name: SAMSUBHAI NATHABHAI
Age : 59 Sex : Male Height : 167
Weight : 67 Ideal Weight : 64 BMI : 24.02
Date : 13/02/2023

Body Type : Normal / Underwight / Overwight

Diet History : Vegetarian / Eggetarian / Mixed

Frequency of consuming fried food : / Day / Week or occasional

Frequency of consuming Sweets : / Day / or occasional

Frequency of consuming outside food : / Day / Week or occasional

Amount of water consumed / day : Glasses / liters

Life style assessment :

Physical activity : Active / moderate / Sedentary / Nil

Alcohol intake : Yes / No

Smoking : Yes / No

Allergic to any food : Yes / No

Are you stressed out ? : Yes / No

Do you travel a lot ? : Yes / No

General diet instructions :

Have small frequent meals.

Avoid fatty products like oil, ghee, butter, cheese.

Take salt restricted diet and avoid table salt.

Consume fibrous food regularly like whole grains, Daliya, Oats, Bajra, Flex seeds, Pulses, Fruits and Salads.

Keep changing your cooking oil every three months.

Avoid Maida, Starchy foods and Bakery products.

Consume 1-2 seervings of all fruits and vegetables, For Diabetic patients avoid Mango, Chikoo, Banana, Grapes and Custurd apple

Dring 3 to 4 liters (12 - 14 glass) of water daily.

Eat Beetroots, Figs, Almond, Walnut, Dates, Leafy vegetables, roasted Channa and Jeggary (Gur) for Heamoglobin in case of diabetic patient avoid Rasins, Dates and Jeggary

Drink green Tea or black Coffee once in a day.

Do brisk walking daily.



Patient Name : Mr. SAMSUBHAI NATHABHAI SANGADA
 Gender / Age : Male / 59 Years 10 Days
 MR No / Bill No. : 23200355 / 231066031
 Consultant : Dr. Manish Mittal
 Location : OPD

Type : OPD
 Request No. : 106338
 Request Date : 13/02/2023 08:28 AM
 Collection Date : 13/02/2023 08:35 AM
 Approval Date : 13/02/2023 01:21 PM

CBC + ESR

Test	Result	Units	Biological Ref. Range
Haemoglobin.			
Haemoglobin	14.1	gm/dL	13 - 17
Red Blood Cell Count (T-RBC)	6.36	mill/cmm	4.5 - 5.5
Hematocrit (HCT)	44.6	%	40 - 50
Mean Corpuscular Volume (MCV)	70.1	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	22.2	pg	27 - 32
MCH Concentration (MCHC)	31.6	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	14.9	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	36.0	fl	39 - 46
Total Leucocyte Count (TLC)			
Total Leucocyte Count (TLC)	9.10	thou/cmm	4 - 10
Differential Leucocyte Count			
Polymorphs	76	%	40 - 80
Lymphocytes	18	%	20 - 40
Eosinophils	2	%	1 - 6
Monocytes	4	%	2 - 10
Basophils	0	%	0 - 2
Polymorphs (Abs. Value)	6.91	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	1.71	thou/cmm	1 - 3
Eosinophils (Abs. Value)	0.10	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.33	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.05	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.3	%	1 - 3 : Borderline > 3 : Significant
Platelet Count			
Platelet Count	211	thou/cmm	150 - 410
Smear evaluation	Adequate		
ESR	1	mm/1 hr	0 - 12

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / retest may be requested.

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name	: Mr. SAMSUBHAI NATHABHAI SANGADA	Type	: OPD
Gender / Age	: Male / 59 Years 10 Days	Request No.	: 106338
MR No / Bill No.	: 23200355 / 231066031	Request Date	: 13/02/2023 08:28 AM
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CBC + ESR

Immature Granulocyte (IG) count is a useful early marker of infection or inflammation, even when other markers are normal. It is an early and rapid discrimination of bacterial from viral infections. It is also increased in patients on steroid therapy / chemotherapy or haematological malignancy. High IG is always pathological; except in pregnancy and neonates of < 7 days.
Method : HB by Non-Cyanide Hemoglobin analysis method. HCT by RBC pulse height detection method. RBC, TLC & PLC are by Particle Count by Electrical Impedance in Cell Counter. Optical Platelets by Fluorescent + Laser Technology. MCV, MCH, MCHC, RDW (CV & SD) are calculated parameter. DLC by Flowcytometry method using semi-conductor Laser+Smear verification. ESR on Ves metic 20, comparable to Westergrens method and in accordance to ICSH reference method.

--- End of Report ---

Dr. Sejal Odedra
M.D.Pathology

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GENERAL HOSPITAL**

DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mr. SAMSUBHAI NATHABHAI SANGADA Type : OPD
Gender / Age : Male / 59 Years 10 Days Request No. : 106338
MR No / Bill No. : 23200355 / 231066031 Request Date : 13/02/2023 08:28 AM
Consultant : Dr. Manish Mittal Collection Date : 13/02/2023 08:35 AM
Location : OPD Approval Date : 13/02/2023 12:45 PM

Haematology

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>Biological Ref. Range</u>
Blood Group			
ABO system	O		
Rh system.	Positive		

By Gel Technology / Tube Agglutination Method

Note :

- This blood group has been done with new sensitive Gel Technology using both Forward and Reverse Grouping Card with Autocontro
- This method check`s group both on Red blood cells and in Serum for "ABO" group.

---- End of Report ----

**Dr. Sejal Odedra
M.D.Pathology**

Test Results are dependent on a number of variables: & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / retest may be requested.



Patient Name : Mr. SAMSUBHAI NATHABHAI SANGADA Type : OPD
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 Location : OPD Approval Date : 13/02/2023 10:37 AM

HbA1c (Glycosylated Hb)

Test	Result	Units	Biological Ref. Range
HbA1c (Glycosylated Hb)			
Glycosylated Heamoglobin (HbA1c)	8.9	%	
estimated Average Glucose (e AG) *	208.73	mg/dL	

(Method:

By Automated HPLC analyser on D-10 Biorad. NGSP Certified, US-FDA approved, Traceable to IFCC reference method.

* Calculated valued for past 60 days, derived from HbA1c %, based on formula recommended by the A1c - Derived Average Glucose study from ADA and EASD funded The ADAG trial.

Guidelines for Interpretation:

Indicated Glycemic control of previous 2-3 months

HbA1c%	e AG (mg/dl)	Glycemic control
> 8	> 183	Action suggested...High risk of developing long-term complications. Action suggested, depends on individual patient circumstances
7 - 8	154 - 183	Good
< 7	< 154	Goal...Some danger of hypoglycemic reaction in type I Diabetics. Some Glucose intolerant individuals and Sub-Clinical diabetics may demonstrate (elevated) HbA1c in this area.
6 - 7	126 - 154	Near Normal
< 6	< 126	Nondiabetic level)

---- End of Report ----

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Complete Lipid Profile

Test	Result	Units	Biological Ref. Range
Complete Lipid Profile			
Appearance	Clear		
Triglycerides	108	mg/dL	1 - 150
<i>(By Lipase / Glycerol dehydrogenase on RXL Dade Dimension < 150 Normal 150-199 Borderline High 200-499 High > 499 Very High)</i>			
Total Cholesterol	173	mg/dL	1 - 200
<i>(By enzymatic colorimetric method on RXL Dade Dimension <200 mg/dL - Desirable 200-239 mg/dL - Borderline High > 239 mg/dL - High)</i>			
HDL Cholesterol	38	mg/dL	40 - 60
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension < 40 Low > 60 High)</i>			
Non HDL Cholesterol (calculated)	135	mg/dL	1 - 130
<i>(Non- HDL Cholesterol < 130 Desirable 139-159 Borderline High 160-189 High > 191 Very High)</i>			
LDL Cholesterol	115	mg/dL	1 - 100
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension < 100 Optimal 100-129 Near / above optimal 130-159 Borderline High 160-189 High > 189 Very High)</i>			
VLDL Cholesterol (calculated)	21.6	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	3.03		2.1 - 3.5
T. Ch./HDL Ch. Ratio	4.55		3.5 - 5
<i>(Recent NECP / ATP III Guidelines / Classification (mg/dl) :)</i>			

--- End of Report ---

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Liver Function Test (LFT)

Test	Result	Units	Biological Ref. Range
Bilirubin			
Bilirubin - Total	0.32	mg/dL	0 - 1
Bilirubin - Direct	0.07	mg/dL	0 - 0.3
Bilirubin - Indirect	0.25	mg/dL	0 - 0.7
<i>(By Diazotized sulfanilic acid on RXL Dade Dimension.)</i>			
Aspartate Aminotransferase (SGOT/AST)	25	U/L	15 - 40
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alanine Aminotransferase (SGPT/ALT)	50	U/L	16 - 63
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alkaline Phosphatase	76	U/L	56 - 119
<i>(BY PNPP AMP method on RXL Dade Dimension.)</i>			
Gamma Glutamyl Transferase (GGT)	37	U/L	15 - 85
<i>(By IFCC method on RXL Dade Dimension.)</i>			
Total Protein			
Total Proteins	6.76	gm/dL	6.4 - 8.2
Albumin	3.25	gm/dL	3.4 - 5
Globulin	3.51	gm/dL	3 - 3.2
A : G Ratio	0.93		1.1 - 1.6
<i>(By Biuret endpoint and Bromocresol purple method on RXL Dade Dimension.)</i>			

--- End of Report ---

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Patient Name : Mr. SAMSUBHAI NATHABHAI SANGADA
 Gender / Age : Male / 59 Years 10 Days
 MR No / Bill No. : 23200355 / 231066031
 Consultant : Dr. Manish Mittal
 Location : OPD

Type : OPD
 Request No. : 106338
 Request Date : 13/02/2023 08:28 AM
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Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea (By Urease Kinetic method on RXL Dade Dimension)	11	mg/dL	10 - 45
Creatinine (By Modified Kinetic Jaffe Technique)	0.90	mg/dL	0.9 - 1.3
Estimate Glomerular Filtration rate (Ref. range : > 60 ml/min for adults between age group of 18 to 70 yrs. EGFR Calculated by IDMS Traceable MDRD Study equation. Reporting of eGFR can help facilitate early detection of CKD. By Modified Kinetic Jaffe Technique)	More than 60		
Uric acid (By Uricase / Catalase method on RXL Siemens)	5.4	mg/dL	3.4 - 7.2

— End of Report —

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mr. SAMSUBHAI NATHABHAI SANGADA Type : OPD
Gender / Age : Male / 59 Years 10 Days Request No. : 106338
MR No / Bill No. : 23200355 / 231066031 Request Date : 13/02/2023 08:28 AM
Consultant : Dr. Manish Mittal Collection Date : 13/02/2023 08:35 AM
Location : OPD Approval Date : 13/02/2023 12:45 PM

Prostate Sp. (Antigen)

Test	Result	Units	Biological Ref. Range
Total PSA	2.15	ng/ml	0 - 4

(Method : Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)

Remark :

Age related reference range for interpretation :

< 40 yrs : 0.21 - 1.72

40 - 49 yrs : 0.27 - 2.19

50 - 59 yrs : 0.27 - 3.42

60 - 69 yrs : 0.27 - 6.16

>69 yrs : 0.21 - 6.77

TPSA may be raised usually mildly in benign prostatic conditions like hyperplasia. Typically 30 % of BPH may show values between 4-10 and 7 % between 10-40.

In Prostatic Malignancy 43 % show values below 4

21 % between 4 to 10

20 % between 10 to 40 &

16 % above 40)

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

Dr. Sejal Odedra
M.D.Pathology

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / repeat may be suggested.



Patient Name : Mr. SAMSUBHAI NATHABHAI SANGADA
 Gender / Age : Male / 59 Years 10 Days
 MR No / Bill No. : 23200355 / 231066031
 Consultant : Dr. Manish Mittal
 Location : OPD

Type : OPD
 Request No. : 106338
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Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
------	--------	-------	-----------------------

Triiodothyronine (T3)	1.34	ng/ml	
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(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.

Reference interval (ng/ml)

1 - 3 days : 0.1 - 7.4

1 - 11 months : 0.1 - 2.45

1 - 5 years : 0.1 - 2.7

6 - 10 years : 0.9 - 2.4

11 - 15 years : 0.8 - 2.1

16 - 20 years : 0.8 - 2.1

Adults (20 - 50 years) : 0.7 - 2.0

Adults (> 50 years) : 0.4 - 1.8

Pregnancy (in last 5 months) : 1.2 - 2.5

(Reference : Tietz - Clinical guide to laboratory test, 4th edition))

Thyroxine (T4)	8.85	mcg/dL	
----------------	------	--------	--

(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.

Reference interval (mcg/dL)

1 - 3 days : 11.8 - 22.6

1 - 2 weeks : 9.8 - 16.6

1 - 4 months : 7.2 - 14.4

4 - 12 months : 7.8 - 16.5

1 - 5 years : 7.3 - 15.0

5 - 10 years : 6.4 - 13.3

10 - 20 years : 5.6 - 11.7

Adults / male : 4.6 - 10.5

Adults / female : 5.5 - 11.0

Adults (> 60 years) : 5.0 - 10.7

(Reference : Tietz - Clinical guide to laboratory test, 4th edition))

Thyroid Stimulating Hormone (US-TSH)	0.731	microlU/ml	
--------------------------------------	-------	------------	--

(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.

Reference interval (microlU/ml)

Infants (1-4 days) : 1.0 - 39

2-20 weeks : 1.7 - 9.1

5 months - 20 years : 0.7 - 6.4

Adults (21 - 54 years) : 0.4 - 4.2

Adults (> 55 years) : 0.5 - 8.9

Pregnancy :

1st trimester : 0.3 - 4.5

2nd trimester : 0.5 - 4.6

3rd trimester : 0.8 - 5.2

(Reference : Tietz - Clinical guide to laboratory test, 4th edition))

— End of Report —

Dr. Sejal Odedra
M.D.Pathology



Patient Name : Mr. SAMSUBHAI NATHABHAI SANGADA Type : OPD
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Urine routine analysis (Auto)

Test	Result	Units	Biological Ref. Range
Physical Examination			
Quantity	30	mL	
Colour	Pale Yellow		
Appearance	Clear		
Chemical Examination (By Reagent strip method)			
pH	6.5		
Specific Gravity	1.010		
Protein	Negative	gm/dL	0 - 5
Glucose	Negative	mg/dL	0 - 5
Ketones	Negative		0 - 5
Bilirubin	Negative		Negative
Urobilinogen	Negative		Negative (upto 1)
Blood	Negative		Negative
Leucocytes	Negative		Negative
Nitrite	Negative		Negative
Microscopic Examination (by Microscopy after Centrifugation at 2000 rpm for 10 min or on fully automated Sysmex urine sedimentation analyzer UF4000)			
Red Blood Cells	0 - 1	/hpf	0 - 2
Leucocytes	0 - 1	/hpf	0 - 5
Epithelial Cells	0 - 1	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil	/hpf	Nil
Mucus	Absent	/hpf	Absent
Organism	Absent		

---- End of Report ----

Dr. Sejal Odedra
M.D.Pathology



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DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 23200355 Report Date : 13/02/2023
Request No. : 190052803 13/02/2023 8.28 AM
Patient Name : Mr. SAMSUBHAI NATHABHAI SANGADA
Gender / Age : Male / 59 Years 10 Days

X-Ray Chest AP

Both lung fields are clear.
Both costophrenic sinuses appear clear.
Heart size is normal.
Hilar shadows show no obvious abnormality.
Aorta is normal.

ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
NOT VALID FOR MEDICO-LEGAL PURPOSES
CLINICAL CORRELATION RECOMMENDED

Hasani

Dr. Prerna C Hasani, MD
Consultant Radiologist



ADVANCED DIGITAL SOLUTIONS

Computer Radiography

Ultra Sensitive Colour Doppler

Ultra High Resolution Sonography

Multi-Detector CT Scan

Mammography

Interventional Radiology

Digital Subtraction Angiography

Foetal Echocardiography

Echocardiography



H-2016-0297



MC-3004



E-2021-0037



BUREAU OF VERIFICATION



DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 23200355 Report Date : 13/02/2023
Request No. : 190052801 13/02/2023 8.28 AM
Patient Name : **Mr. SAMSUBHAI NATHABHAI SANGADA**
Gender / Age : Male / 59 Years 10 Days

ADVANCED DIGITAL SOLUTIONS

- Computer Radiography
- Ultra Sensitive Colour Doppler
- Ultra High Resolution Sonography
- Multi-Detector CT Scan
- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

USG : Screening for Abdomen (excluding Pelvis) Or Upper Abdomen

Liver is normal in size and increased in echopattern. No mass lesion identified. The hepatic veins are clear and patent. PV patent. No dilated IHBR.

Gall bladder is well distended and shows no obvious abnormality. Common bile duct measures 4 mm in diameter.

Pancreas shows no obvious abnormality. Tail obscured. Spleen is normal size and echopattern.

Both kidneys are normal in shape and position. Normal echogenicity and cortico medullary differentiation is noted. No hydronephrosis or mass lesion seen.

Prostate appears normal in size and volume is ~ 21 cc. Prostate measures 28mm x 36mm x 36mm.

Urinary bladder is well distended and appears normal.

No ascites.

COMMENT:

Fatty liver.

Kindly correlate clinically

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
 • NOT VALID FOR MEDICO-LEGAL PURPOSES
 • CLINICAL CORRELATION RECOMMENDED

Hasani

Dr.Perna C Hasani, MD
Consultant Radiologist



Patient No. : 23200355 Report Date : 13/02/2023
Request No. : 190052853 13/02/2023 8.28 AM
Patient Name : Mr. SAMSUBHAI NATHABHAI SANGADA
Gender / Age : Male / 59 Years 10 Days

Echo Color Doppler

MITRAL VALVE : NORMAL, NO MS, NO MR
AORTIC VALVE : TRILEAFLET, NO AS, NO AR
TRICUSPID VALVE : NORMAL, TRIVIAL TR, NO PAH
PULMONARY VALVE : NORMAL, NO PR, NO PS
LEFT ATRIUM : NORMAL SIZE
AORTA : NORMAL
LEFT VENTRICLE : NORMAL LVEF – 60%, NO RWMA AT REST
RIGHT ATRIUM : NORMAL SIZE
RIGHT VENTRICLE : NORMAL SIZE
I.V.S. : INTACT
I.A.S. : INTACT
PULMONARY ARTERY : NORMAL
PERICARDIUM : NO EFFUSION
COLOUR/DOPPLER FLOW MAPPING : TRIVIAL TR NO PAH

FINAL CONCLUSION:

1. NORMAL SIZED ALL CARDIAC CHAMBERS
2. NORMAL LV SYSTOLIC FUNCTION LVEF – 60%
3. NO RESTING RWMA
4. NORMAL VALVES, NO MITRAL / AORTIC STENOSIS
5. NORMAL RIGHT HEART SIZE AND RV PRESSURE
6. NO PERICARDIAL EFFUSION, CLOT OR VEGETATION SEEN, SR+.

DR. KILLOL KANERIA MD,DM
INTERVENTIONAL CARDIOLOGIST



Name: Samsubhal sangada -
 Patient ID: 2300355

13.02.2023 09:59:09
 Standard 12-lead

Date of birth: Undefined
 Gender: Undefined
 Height: Undefined
 Weight: Undefined
 Ethnicity: Unknown
 Pacemaker: Unknown
 Indication: Remark

Visit ID:
 Room:
 Medication:
 Order ID:
 Ord. prov.:
 Ord. prof.:

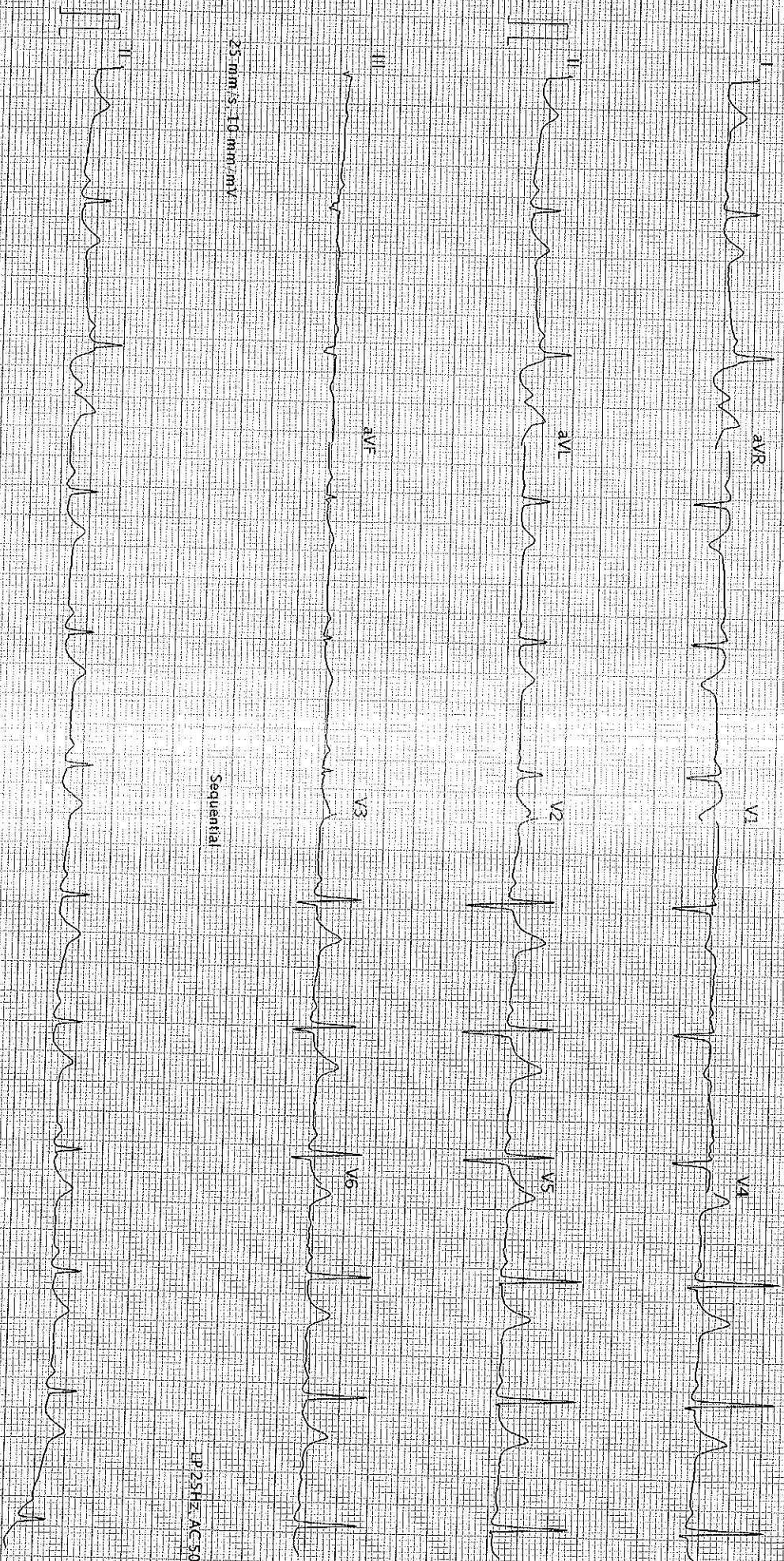
HR: 68 bpm
 P axis: 57°
 QRS axis: 14°
 T axis: 19°

RR: 888 ms
 PR: 106 ms
 QRS: 75 ms
 QT: 382 ms
 QTcB: 411 ms

Sinus rhythm
 Normal electrical axis
 Normal ECG
 Unconfirmed report

pe cm

Normal



25 mm/s, 10 mm/mV

Sequential

LP25HZ, AC50HZ

25 mm/s, 10 mm/mV

AT-102 G2 1.2.0 (1080.011030)

Printed on 13.02.2023 09:59:22

SCHILLER

LP25HZ, AC50HZ

Page 1 of 1

Dr. Sonica Peshin

Cosmetic Dentist & Implantologist

Reg. No. : 6966-A

M. : 9586867301



**BHAILAL AMIN
GENERAL HOSPITAL**

Dental assessment form

13/02/2023

Name: Samsu Natha Sangada

Age/ Sex: 59 years/Male

Patient has come for an oral hygiene check up

On Examination:

- Stains++ Calculus++
- History of horizontal brushing
- Generalised attrition, recession
- History of tobacco chewing habit
- Whitish patch in right lower buccal sulcus with a history of placement of tobacco for a long duration in the region
- Missing teeth with respect to 31, 41
- Fractured RPD with respect to 21

Provisional diagnosis:

- Chronic generalised gingivitis

Treatment plan:

- Scaling and polishing
- Prosthesis with respect to 21, 31, 41
- Quit the habit

Advised:

- Brush your teeth twice daily
- Salt water rinses atleast once a day.
- Clean your tongue and floss in between everyday.
- Follow vertical brushing technique.

Sonica Peshin

ITEM CODE:SMD066

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