



OPD ASSESSMENT FORM



Name Dr. Kazem Singh Age.Sex 25/M MR.No. SK40950
 Doctor Dr. Giorgi Shaha Date 12/08/2023
 Ht: 169cm Wt: 75.1kg Temp: 98.6 Pulse: 48 bpm BP: 129/81 mmHg
 SPO2: 98.1 on RA Post of walk SPO2: _____

Chief Complaints :

nil

Drug / Food Allergy :

Prior Medication Reviewed : Yes No

On examination :

CS
RS] NAD.

Past History :

Provisional Diagnosis :

Nutritional Assessment :

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

**Treatment and further Advices :
(Write in Capital Letters)**

Rx Adv - Diet + Exercise.

Investigation advised :

T. Atorva (10) 0-0-1 x 3 months.

Repeat lipid profile after 3 months.

Follow Up : _____ Date : _____

Signature _____





OPD ASSESSMENT FORM

sunshine
GLOBAL HOSPITALS
health & happiness... always!



Name Mr. Karam Singh Age.Sex 26/M MR.No. 5140950

Doctor Dr. Umang Desai Date 12/08/23

Ht : _____ Wt : _____ Temp : _____ Pulse : _____ BP : _____

SPO2 : _____ Post of walk SPO2 : _____

Chief Complaints :

- Routine rental checkup

Drug / Food Allergy :

Prior Medication Reviewed : Yes No

On examination :

- Asthain

Past History :

Provisional Diagnosis :

Nutritional Assessment :

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

**Treatment and further Advices :
(Write in Capital Letters)**

R_x

M) Scaring

Investigation advised :

U. F. Desai



Follow Up : _____ Date : _____

Signature



OPD ASSESSMENT FORM



Name Mr. Karam Singh Age.Sex 26/M MR.No. 5140950
 Doctor Dr. Hardik Shroff Date 2/08/2023
 Ht : _____ Wt : _____ Temp : _____ Pulse : _____ BP : _____
 SPO2 : _____ Post of walk SPO2 : _____

Chief Complaints :

No. complaint

Drug / Food Allergy :

Prior Medication Reviewed : Yes No

On examination :

IR Ant-seg NAD
Vn right G6P N.6. P
G6P.

Past History :

Provisional Diagnosis :

Fundi (Central) IR-seg

Nil gorthalme

Treatment and further Advices :
(Write in Capital Letters)

R_x

Nutritional Assessment :

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

Investigation advised :

Dr. Hardik Shroff
DOMS, DNB (Ophthalmology)

Regd. No. G-28902

Follow Up : Soe Date : _____

SUNSHINE GLOBAL HOSPITAL
Signature
Piplod, SURAT.



PAT. NAME : Karan Singh	Date : 12/08/2023
REF. DOCTOR : Hosp. Dr.	AGE : 26 Yrs / M
INV. : USG Abdomen & Pelvis	MR NO. : S140950

Findings:

Liver is normal in size, shape and shows normal echopattern. No e/o any focal or diffuse lesion noted. Intrahepatic biliary radicals are normal.

Gall bladder is distended and appears normal. No e/o calculus, sludge or mass lesion is seen. CBD and Portal Vein appears normal is size and calibre.

Pancreas appears normal in size and shows normal echopattern to the extent assessed. Spleen appears normal in size, shape and homogenous echopattern.

Both kidneys appear normal in size, shape and echopattern. The corticomedullary differentiation is well maintained. No e/o any calculus or hydronephrosis is seen.

Aorta and para-aortic regions appears normal. No e/o any lymphadenopathy. Urinary bladder appears well distended and normal. Prostate appears normal in size, shape and echopattern. No e/o free fluid in abdomen / pelvis.

IMPRESSION:

- **No significant abnormality seen.**

Dr. Sneha Dumaswala
MBBS, DNB-Radiodiagnosis
Consultant Radiologist
G-21796




PAT. NAME : Karan Singh	Date : 12/08/2023
REF. DOCTOR : Hosp. Dr.	AGE : 26 Yrs / M
INV. : Radiograph of Chest PA	MR NO. : S140950

Clinical Details: HC

Observation:

- Both the lung fields appears normal.
- Both costophrenic angles appear clear.
- Both the hila appears normal.
- Trachea appears in midline.
- Cardiac size and other mediastinal shadows appears normal.
- Both domes of diaphragm appear normal.
- Bony thorax appears normal.


Dr. Sneha Dumaswala
MBBS, DNB-Radiodiagnosis
Consultant Radiologist
G-21796

Transcribed By: Asha

Page: 1 out of 1
Date & Time of report: 12/08/2023 - 11:40 AM

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MR No. : S140950	Collection Date : 12/08/2023 9:42AM
Patient Name : Mr. Karan Singh	Age : 26 Y Sex : Male
Ref By : Dr. Hospital A Doctor	Report Date : 12/08/2023 2:18 PM

HAEMATOLOGY

Parameter	Result	Units	Normal Range
CBC with ESR			
HAEMOGLOBIN	15.1	gm/dl	13.0 - 17.0
%CV	45.9	%	40 - 50
RBC COUNT	5.23	mill/cmm	4.5 - 5.5
MCV	87.8	fl	76 - 96
MCH	28.9	pg	26 - 32
MCHC	32.9	%	32 - 36
RDW	12.1	%	11 - 15
PLATELET COUNT	3.64	lacs/cmm	1.5 - 4.5
WBC COUNT	5290	/cmm	4000 - 11000
DIFFERENTIAL WBC COUNT			
NEUTROPHIL	49	%	40 - 70
LYMPHOCYTES	43	%	20 - 40
EOSINOPHILS	02	%	1 - 6
MONOCYTES	06	%	2 - 11
BASOPHILS	00	%	0 - 2
PERIPHERAL SMEAR			
RBC MORPHOLOGY	Normochromic Normocytic		
WBC MORPHOLOGY	Within Normal Range		
PLATELET ON SMEAR	Adequate		
HEMOPARASITES	Not Seen		

SYSTEMEX XN-550

***** End Report *****

Dr. Shobha Choksi
MD, DCP (Pathology)

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MR No. : S140950	Collection Date : 12/08/2023 9:42AM
Patient Name : Mr. Karan Singh	Age : 26 Y Sex : Male
Ref By : Dr. Hospital A Doctor	Report Date : 12/08/2023 2:20 PM

HAEMATOLOGY

<u>Parameter</u>	<u>Result</u>	<u>Normal Range</u>
BLOOD GROUP & RH FACTOR		
BLOOD GROUP	"A"	
RH FACTOR	POSITIVE	

BIOCHEMISTRY

FASTING BLOOD SUGAR (FBS)			
FASTING BLOOD GLUCOSE (Hexokinase)	107	mg/dl	74 - 110
FASTING URINE GLUCOSE	Absent		
FASTING URINE KETONE	Absent		

CLINICAL CHEMISTRY

THYROID FUNCTION TEST [TFT]			
TOTAL T3 (CLIA)	1.25	ng/ml	0.846 - 2.02
TOTAL T4 (CLIA)	7.66	ug/dl	5.1 - 14.0
TSH (CLIA)	1.88	uIU/ml	0.2 - 4.5

Note:-

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 (freeT4). Additionally the hypothalamic tripeptide, thyrotropin releasing hormone (TSH) 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 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.

***** End Report *****

Dr. Shobha Choksi
MD, DCP (Pathology)

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MR No. : S140950	Collection Date : 12/08/2023 9:42AM
Patient Name : Mr. Karan Singh	Age : 26 Y Sex : Male
Ref By : Dr. Hospital A Doctor	Report Date : 12/08/2023 2:21 PM

BIOCHEMISTRY

Parameter	Result	Units	Normal Range
HBA1C [GLYCOSYLATED HEAMOGLOBIN]			
HbA1C	5.6	%	Non-Diabetic level: <6 Good Control: 6 - 7 Poor Control: 7 - 8 Action Suggested > 8
MEAN BLOOD GLUCOSE	114.02	mg/dl	

The test is done on Cobas Integra 400plus-Turbidimetric Inhibition ImmunoAssay

Note:- Criteria for the diagnosis of diabetes HbA1c $\geq 6.5\%$

- HbA1c is important test for the assessment of long term blood glucose control (also called glycemic control).
- HbA1C reflects mean glucose concentration over past 6-8 weeks and provides a much better indication of long term glycemic control than blood glucose determination.
- HbA1C is formed by non-enzymatic reaction between glucose and Hb. This reaction is irreversible and therefore remains unaffected by short term fluctuations in blood glucose levels.
- Long term complications of diabetes such as retinopathy, nephropathy, and neuropathy are potentially serious and can lead to blindness kidney failure etc.
- Genetic Variants (Hb-S trait, Hb-C trait) elevated fetal haemoglobin & chemically modified derivatives of haemoglobin (eg carbamylated Hb in patients with renal failure) can affect the accuracy of HbA1C measurement.

***** End Report *****

Shobha

Dr. Shobha Choksi
MD, DCP (Pathology)

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MR No. : S140950	Collection Date : 12/08/2023 9:42AM
Patient Name : Mr. Karan Singh	Age : 26 Y Sex : Male
Ref By : Dr. Hospital A Doctor	Report Date : 12/08/2023 2:23 PM

BIOCHEMISTRY

Parameter	Result	Units	Normal Range
LIPID PROFILE			
SERUM CHOLESTEROL CHOD PAP	236	mg/dl	50 - 200
IDL CHOLESTEROL Direct	38	mg/dl	40 - 60
LDL CHOLESTEROL Direct	180.5	mg/dl	0 - 100
SERUM TRIGLYCERIDE GPO PAP	86	mg/dl	50 - 150
VLDL Calc	17.2	mg/dl	0 - 30
CHOLESTEROL / HDL RATIO	6.21		0 - 5
LDL / HDL RATIO	4.75		0 - 3

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment.
- Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.
- Details on test interpretation available from the lab.

TEST	NEAR OPTIMAL (Moderate Risk)	BORDER LINE (Risk)	HIGH (Risk)	VERY HIGH
CHOLESTROL	160-199	200-239	240-279	280
HDL	50-59	40-49	< 40	
LDL	100-129	130-159	160-190	>190
TRJGLYCERIDES	150-169	170-199	240-499	>500
CHO/HDL RATIO	3.3-4.4	4.4-11.0	>11.0	
LDL/HDL RATIO	0.5-3.0	3.0-6.0	>6.0	

***** End Report *****

For

Dr. Shobha Choksi
MD, DCP (Pathology)

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MR No. : S140950

Patient Name : Mr. Karan Singh

Ref By : Dr. Hospital A Doctor

Collection Date : 12/08/2023 9:42AM

Age : 26 Y Sex : Male

Report Date : 12/08/2023 2:24 PM

BIOCHEMISTRY

Parameter	Result	Units	Normal Range
LIVER FUNCTION TEST			
ALKALINE PHOSPHATASE (IFCC)	82	U/L	35 - 130
BILIRUBIN TOTAL Diazo	0.3	mg/dl	0.0 - 1.2
BILIRUBIN DIRECT Diazo	0.1	mg/dl	0.0 - 0.4
BILIRUBIN INDIRECT (Calc)	0.2	mg/dl	0.0 - 0.8
SGPT (IFCC)	32	U/L	5 - 41
SGOT (IFCC)	20	U/L	5 - 40
SERUM TOTAL PROTEIN Bluret	7.9	gm/dl	6.6 - 8.7
SERUM ALBUMIN BCG	4.9	gm/dl	3.5 - 5.2
SERUM GLOBULIN Calc	3	gm/dl	1.5 - 3.5
SERUM A/G RATIO Calc	1.63	gm/dl	1.5 - 2.5
SERUM CREATININE			
SERUM CREATININE (JAFPE)	0.8	mg/dl	0.7 - 1.2
SERUM URIC ACID			
SERUM URIC ACID (Uricase)	6.2	mg/dl	3.4 - 7.0
BUN [BLOOD UREA NITROGEN]			
BUN	8.0	mg/dl	8 - 23

***** End Report *****

Dr. Shobha Choksi
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MR No. : S140950	Collection Date : 12/08/2023 9:42AM
Patient Name : Mr. Karan Singh	Age : 26 Y Sex : Male
Ref By : Dr. Hospital A Doctor	Report Date : 12/08/2023 2:27 PM

BIOCHEMISTRY

Parameter	Result	Units	Normal Range
ALBUMIN-CREATININE RATIO URINE ALBUMIN/MICROALBUMIN (Immunturbidimetry)	4.5	mg/L	
URINE CREATININE (JAFPE)	61.2	mg/dl	
ALBUMIN-CREATININE RATIO (Calculated)	7.35	mg/gm	Normal: <30; Microalbuminuria: 30-299; Clinical Albuminuria: >300

***** End Report *****

Dr. Shobha Choksi
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MR No. : S140950	Collection Date : 12/08/2023 9:42AM
Patient Name : Mr. Karan Singh	Age : 26 Y Sex : Male
Ref By : Dr. Hospital A Doctor	Report Date : 12/08/2023 2:26 PM

CLINICAL PATHOLOGY

Parameter	Result	Normal Range
URINE ROUTINE & MICROSCOPIC EXAMINATION		
TYPE OF SPECIMEN - URINE	Random	
PHYSICAL EXAMINATION		
QUANTITY	50	ml
COLOUR	Pale Yellow	
APPEARANCE	Clear	
REACTION (pH)	6.5	
SPECIFIC GRAVITY	1.020	
CHEMICAL EXAMINATION		
PROTEIN	Absent	
GLUCOSE	Absent	
KETONE	Absent	
BILE SALT	Absent	
BILE PIGMENT	Absent	
OCCULT BLOOD	Absent	
MICROSCOPIC EXAMINATION		
PUS CELLS	1-2	/hpf
EPITHELIAL CELLS	1-2	/hpf
RBC	Absent	/hpf
CASTS	Absent	
CRYSTALS	Absent	
BACTERIA	Absent	
YEAST CELLS	Absent	

***** End Report *****

For

Dr. Shobha Choksi
MD, DCP (Pathology)

Reg. No.: G-9074

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MR No. : S140950	Collection Date : 12/08/2023 9:42AM
Patient Name : Mr. Karan Singh	Age : 26 Y Sex : Male
Ref By : Dr. Hospital A Doctor	Report Date : 12/08/2023 2:31 PM

BIOCHEMISTRY

Parameter	Result	Units	Normal Range
POST PRANDIAL BLOOD GLUCOSE [PPBS]			
POST PRANDIAL BLOOD GLUCOSE (Hexokinase)	99	mg/dl	100 - 140
POST PRANDIAL URINE GLUCOSE	SNR		
POST PRANDIAL URINE KETONE	SNR		

***** End Report *****

Dr. Shobha Choksi
MD, DCP (Pathology)

Reg. No.: G-9074

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DOB: 25yr, MALE

Vent rate: 69 BPM
PR int: 163 ms
QRS dur: 103 ms
QT/QTc: 346/365 ms
P-R-T axes: 53 25 38

SINUS RHYTHM
NORMAL ECG

Reviewed by -----

Dr. Kumar Singh
26/11

