



**BHAILAL AMIN
GENERAL HOSPITAL**



CONCLUSION OF HEALTH CHECKUP

ECU Number	: 390	MR Number	: 21962469	Patient Name	: MOHAN SINGH
Age	: 39	Sex	: Male	Height	: 170
Weight	: 80	Ideal Weight	: 66	BMI	: 27.68
Date	: 26/11/2022				

Dr. Manish Mittal

Internal Medicine

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



ECU Number : 390 MR Number : 21962469 Patient Name: MOHAN SINGH
Age : 39 Sex : Male Height : 170
Weight : 80 Ideal Weight : 66 BMI : 27.68
Date : 26/11/2022

Past H/O : K/C/O HYPERTENSION AND DYLIPEMIA

Present H/O : NO MEDICAL COMPLAIN AT PRESENT

Family H/O : FATHER AND MOTHER: HYPERTENSION

Habits : NO HABITS
Gen.Exam. : G.C.GODD
B.P : 130/80 mm Hg
Pulse : 84/MIN REG
Others : SPO2-98%
C.V.S : CLINICALLY NAD
R.S. : CLINICALLY NAD
Abdomen : NP
Spleen : NP
Skin : NAD
C.N.S : NAD
Advice :



BHAILAL AMIN GENERAL HOSPITAL



ECU Number : 390 MR Number : 21962469 Patient Name: MOHAN SINGH
Age : 39 Sex : Male Height : 170
Weight : 80 Ideal Weight : 66 BMI : 27.68
Date : 26/11/2022

Ophthalmic Check Up :	Right	Left
Ext Exam		NIL
Vision Without Glasses	.	.
Vision With Glasses	6/6 N.5	6/6 N.5
Final Correction	SAME AS PATIENT'S OWN	
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 Assessment

ECU Number : 390 MR Number : 21962469 Patient Name: MOHAN SINGH
Age : 39 Sex : Male Height : 170
Weight : 80 Ideal Weight : 66 BMI : 27.68
Date : 26/11/2022

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 servings 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.

365 Days / 24 Hours Laboratory Services

Home Collection Facility Available
(Mon To Sat 8:00 am to 5:00 pm)



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DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mr. MOHAN SINGH
Gender / Age : Male / 39 Years 6 Months 19 Days
MR No / Bill No. : 21962469 / 231050543
Consultant : Dr. Manish Mittal
Location : OPD

Type : OPD
Request No. : 88826
Request Date : 26/11/2022 09:04 AM
Collection Date : 26/11/2022 09:19 AM
Approval Date : 26/11/2022 02:00 PM

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 ICSSH reference method.

--- End of Report ---

Dr. Rakesh Vaidya
MD (Path). DCP.

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. MOHAN SINGH
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CBC + ESR

Test	Result	Units	Biological Ref. Range
Haemoglobin.			
Haemoglobin	14.1	gm/dL	13 - 17
Red Blood Cell Count (T-RBC)	4.76	mill/cmm	4.5 - 5.5
Hematocrit (HCT)	43.3	%	40 - 50
Mean Corpuscular Volume (MCV)	91.0	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	29.6	pg	27 - 32
MCH Concentration (MCHC)	32.6	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	13.4	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	45.3	fl	39 - 46
Total Leucocyte Count (TLC)			
Total Leucocyte Count (TLC)	5.45	thou/cmm	4 - 10
Differential Leucocyte Count			
Polymorphs	61	%	40 - 80
Lymphocytes	34	%	20 - 40
Eosinophils	2	%	1 - 6
Monocytes	3	%	2 - 10
Basophils	0	%	0 - 2
Polymorphs (Abs. Value)	3.29	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	1.81	thou/cmm	1 - 3
Eosinophils (Abs. Value)	0.12	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.19	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.04	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.6	%	1 - 3 : Borderline > 3 : Significant
Platelet Count			
Platelet Count	189	thou/cmm	150 - 410
Smear evaluation	Adequate		
ESR	2	mm/1 hr	0 - 10

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Patient Name	: Mr. MOHAN SINGH	Type	: OPD
Gender / Age	: Male / 39 Years 6 Months 19 Days	Request No.	: 88826
MR No / Bill No.	: 21962469 / 231050543	Request Date	: 26/11/2022 09:04 AM
Consultant	: Dr. Manish Mittal	Collection Date	: 26/11/2022 09:19 AM
Location	: OPD	Approval Date	: 26/11/2022 03:12 PM

Haematology

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>Biological Ref. Range</u>
<i>Blood Group</i>			
ABO system	A		
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 Autocontrol.
- This method check's group both on Red blood cells and in Serum for "ABO" group.

--- End of Report ---

Dr. Rakesh Vaidya
MD (Path), DCP.

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Fasting Plasma Glucose

Test	Result	Units	Biological Ref. Range
<i>Fasting Plasma Glucose</i>			
Fasting Plasma Glucose	91	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	86	mg/dL	70 - 140

By Hexokinase method on RXL Dade Dimesion

---- End of Report ----

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Complete Lipid Profile

Test	Result	Units	Biological Ref. Range
Complete Lipid Profile			
Appearance	Clear		
Triglycerides	243	mg/dL	1 - 150
<i>(By Lipase / Glycerol dehydrogenase on RXL Dade Dimension)</i>			
< 150 Normal			
150-199 Borderline High			
200-499 High			
> 499 Very High			
Total Cholesterol	127	mg/dL	1 - 200
<i>(By enzymatic colorimetric method on RXL Dade Dimension)</i>			
<200 mg/dL - Desirable			
200-239 mg/dL - Borderline High			
> 239 mg/dL - High			
HDL Cholesterol	35	mg/dL	40 - 60
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension)</i>			
< 40 Low			
> 60 High			
Non HDL Cholesterol (calculated)	92	mg/dL	1 - 130
<i>(Non- HDL Cholesterol)</i>			
< 130 Desirable			
139-159 Borderline High			
160-189 High			
> 191 Very High			
LDL Cholesterol	63	mg/dL	1 - 100
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension)</i>			
< 100 Optimal			
100-129 Near / above optimal			
130-159 Borderline High			
160-189 High			
> 189 Very High			
VLDL Cholesterol (calculated)	48.6	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	1.8		2.1 - 3.5
T. Ch./HDL Ch. Ratio	3.63		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	0.64	mg/dL	0 - 1
Bilirubin - Direct	0.12	mg/dL	0 - 0.3
Bilirubin - Indirect	0.52	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)	45	U/L	16 - 63
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alkaline Phosphatase	56	U/L	53 - 128
<i>(By PNPP AMP method on RXL Dade Dimension.)</i>			
Gamma Glutamyl Transferase (GGT)	76	U/L	15 - 85
<i>(By IFCC method on RXL Dade Dimension.)</i>			
Total Protein			
Total Proteins	7.92	gm/dL	6.4 - 8.2
Albumin	4.30	gm/dL	3.4 - 5
Globulin	3.62	gm/dL	3 - 3.2
A : G Ratio	1.19		1.1 - 1.6
<i>(By Biuret endpoint and Bromocresol purple method on RXL Dade Dimension.)</i>			

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.

---- End of Report ----

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Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea (By Urease Kinetic method on RXL Dade Dimension)	23	mg/dL	10 - 45
Creatinine (By Modified Kinetic Jaffe Technique)	0.96	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)	6.1	mg/dL	3.4 - 7.2

--- End of Report ---

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Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
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Triiodothyronine (T3)	0.544	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)	3.56	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)	6.20	microIU/ml	
--------------------------------------	------	------------	--

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

Reference interval (microIU/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 —

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HbA1c (Glycosylated Hb)

Test	Result	Units	Biological Ref. Range
HbA1c (Glycosylated Hb)			
Glycosylated Heamoglobin (HbA1c)	5.5	%	
estimated Average Glucose (e AG) *	111.15	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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 Location : OPD

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 Request No. : 88826
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 Approval Date : 26/11/2022 11:49 AM

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	6.0		
Specific Gravity	1.025		
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
Bile Salt	Absent		Absent
Leucocytes	Negative		Negative
Bile Pigments	Absent		Absent
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	0.0 - 1.0	/hpf	0 - 2
Leucocytes	0.0 - 1.0	/hpf	0 - 5
Epithelial Cells	0.0 - 1.0	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil	/hpf	Nil
Mucus	Absent	/hpf	Absent
Organism	Absent		

--- End of Report ---

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DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 21962469 Report Date : 26/11/2022
Request No. : 190042759 26/11/2022 9.04 AM
Patient Name : **Mr. MOHAN SINGH**
Gender / Age : Male / 39 Years 6 Months 19 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

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

Dr. Priyanka Patel, MD
Consultant Radiologist





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DEPARTMENT OF DIAGNOSTIC RADIOLOGY

- SCD
- ADVANCED DIGITAL SOLUTIONS
 - Computer Radiography
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 - Multi-Detector CT Scan
 - Mammography
 - Interventional Radiology
 - Digital Subtraction Angiography
 - Foetal Echocardiography
 - Echocardiography

Patient No. : 21962469 Report Date : 26/11/2022
Request No. : 190042752 26/11/2022 9.04 AM
Patient Name : Mr. MOHAN SINGH
Gender / Age : Male / 39 Years 6 Months 19 Days

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

Liver is normal in size and shows increased in echo pattern. No mass lesion identified. The hepatic veins are clear and patent.

Gall bladder is well distended and shows no obvious abnormality. Common bile duct measures 3.5 mm in diameter.

Pancreas shows no obvious abnormality. Tail obscured. Spleen is normal in 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.

	RIGHT	LEFT
Renal length :	114 mm.	1050 mm.
A.P. :	44 mm.	54 mm.

No ascites.

COMMENT:

• Fatty liver.

Kindly correlate clinically.

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

Dr. Patel
Dr. Priyanka Patel, MD
Consultant Radiologist



H-2015-0297

MC-3004

E-2021-0037

Patient No. : 21962469 Report Date : 26/11/2022
Request No. : 190042786 26/11/2022 9.04 AM
Patient Name : Mr. MOHAN SINGH
Gender / Age : Male / 39 Years 6 Months 19 Days

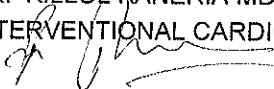
Echo Color Doppler

MITRAL VALVE : NORMAL, NO MS, TRIVIAL MR
AORTIC VALVE : TRILEAFLET, NO AS, TRACE 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 – 65 %, 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 : TRACE AR, TRIVIAL MR, TR NO PAH

FINAL CONCLUSION:

1. NORMAL SIZED ALL CARDIAC CHAMBERS
2. NORMAL LV SYSTOLIC FUNCTION LVEF – 65 %
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

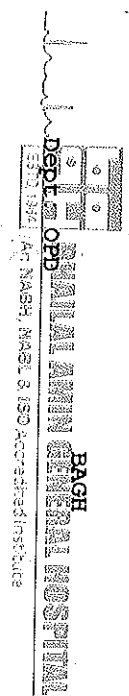


ECU/21962469
39 Years

26-NOV-22

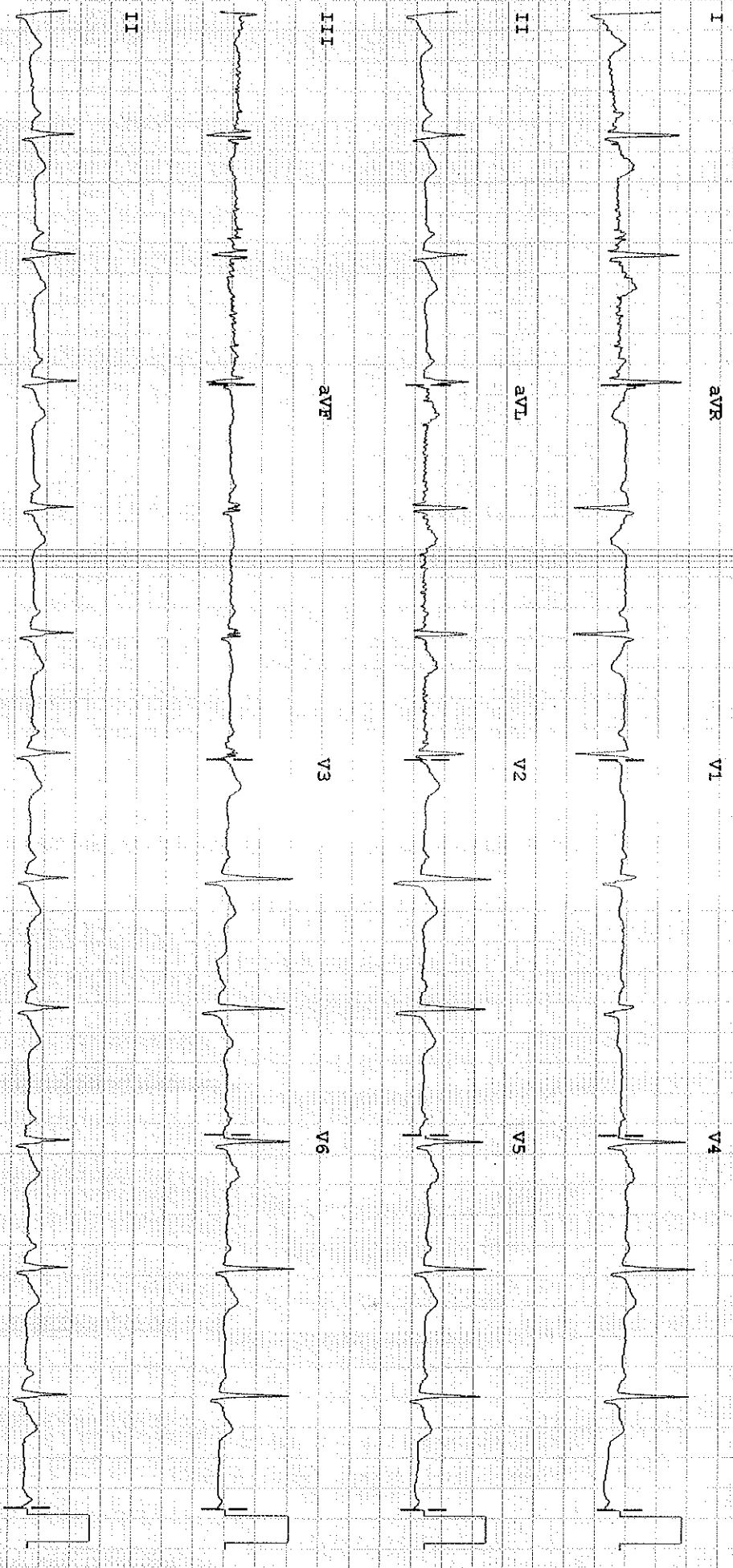
9:52:36 AM
Male

MR. MOHAN SINGH



Doctor MANISH MITTAL

Rate 72
PR 176
QRSD 95
QT 352
QTc 385
--AXIS--
P 55
QRS 19
T 10



Dev: Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10 mm/mV

F 50~0.5-150 Hz W PH08 P2

Dr. Sonica Peshin

Cosmetic Dentist & Implantologist

Reg. No. : 6966-A

M. : 9586867301



BHAILAL AMIN
GENERAL HOSPITAL

Dental assessment form

26/11/2022

Name: Mohan Singh

Age/ Sex: 39 years/Male

Patient has come for an oral hygiene check up

On Examination:

- Stains++ Calculus++
- History of horizontal brushing
- Mild attrition, recession
- Missing tooth with respect to 18
- supra-erupting tooth with respect to 48
- History of RCT and reduced tooth with respect to 17
- Missing teeth with respect to 16, 35

Provisional diagnosis:

- Chronic generalised gingivitis

Treatment plan:

- Scaling and polishing
- IOPAR with respect to 17 followed by crown
- Extraction of 48, if pain arises
- Prosthesis with respect to missing teeth

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.


Dr. Sonica Peshin

ITEM CODE:SMD066

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Bhailal Amin Marg, Gorwa, Vadodara, Gujarat - 390003

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