

DR. DILIP B. GHEEWAL

M.D. (Medicine)

Reg No: G 17770,

Mo: 9825338408

Consultant Physician & Ex. Professor Of Medicine

OPD Days: Monday

OPR NO:

Shalby MD Physician Clinic

Patient Name:-

Nayna R. Khandekar

Date: 28/03/23

Age / Sex :-

30 F

Weight:- 52 kg

Chief Complaints:-

Height:- 147 cm

NAD
w/clo.

Nutritional assessment:-

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

Drug / Food Allergy:-

NAD

Pulse:- 72 bpm

Past History :-

BP:- 100/70 mm

SpO2:- 99%

Family History:-

RS
W/P
PA
CNS

Systemic Examination:-

cia

Provisional Diagnosis:-

SHALBY HOSPITAL, SURAT

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Vapi - Indore - Jabalpur - Mohali - Naroda (Ahmedabad) - Surat - Jaipur - Mumbai

Investigation :-

Iron defⁿ anemia

er

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

Rx

cap. Ferrum XT (30)

T. FOSON (60)

ghul
28/3/23

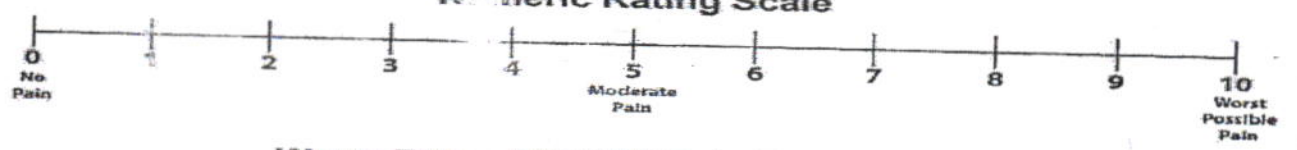
Follow Up:

બધી દવાઓ ડોક્ટરને બતાવીને લેવી.

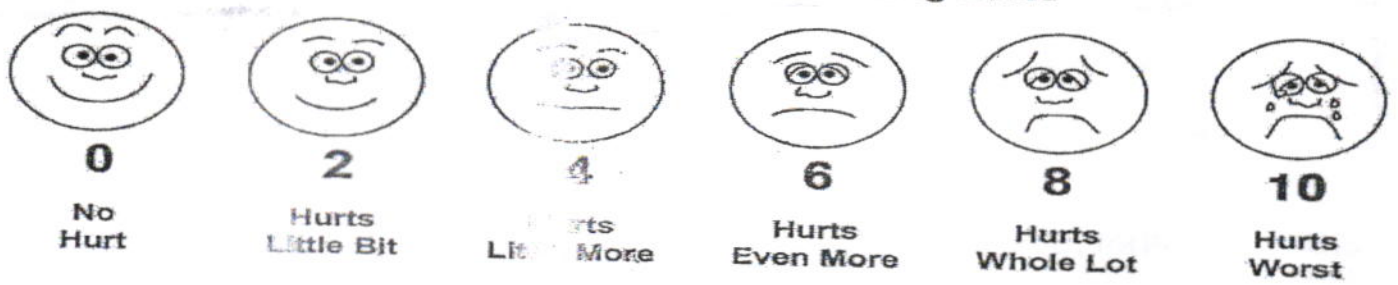
Date:- _____

Incase of emergency please report to Emergency Department of Hospital OR Call:- 0261-7190000 / 9512660096

Numeric Rating Scale



Wong-Baker FACES® Pain Rating Scale



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Tel.: 0261 7190000 | Ext.: 851 | Mo.: 9512036046 | Email : pathology.surat@shalby.in | Web : www.shalby.org

PID : SUR0000338741 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Nayana Ramesh Khandekar /

Registered On : 28-Mar-2023 10:28 AM

Lab ID : 303902188

Collected On : 28-Mar-2023 10:30 AM

Gender/Age : Female / 30 Years

DOB : 20-Feb-1993

Received On : 28-Mar-2023 10:38 AM

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)**

87

mg/dL

74 - 106

GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

Urine Sugar (F)

ABSENT

mg/dL

ABSENT

Glucose-oxidase/oxidase reaction

POST PRANDIAL PLASMA GLUCOSE**Plasma Glucose (PP)**

102

mg/dL

Normal: 100-140 Impaired: 140
-199 Diabetic :=>200

GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

Urine Sugar (PP)

ABSENT

mg/dL

ABSENT

Glucose-oxidase/oxidase reaction

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

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Dr Pankaj AgrawalM.B., D.C.P
Consulting Pathologist

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PID : SUR0000338741 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Nayana Ramesh Khandekar /	Registered On : 28-Mar-2023 10:28 AM
Lab ID : 303902188	Collected On : 28-Mar-2023 10:30 AM
Gender/Age : Female / 30 Years	DOB : 20-Feb-1993
Received On : 28-Mar-2023 10:37 AM	Sample Type : EDTA Whole Blood
Ref. By : Dr. Health Check Up . Shalby	

Parameter	Result	Unit	Biological Ref. Interval
BLOOD COUNT AND INDICIES			
HAEMOGLOBIN <i>Colorimetric Non Cyanide</i>	9.1	g/dL	12.0 - 15.0
RBC COUNT <i>Electrical Impedance</i>	4.86	mill/cmm	3.8 - 4.8
HCT <i>Calculated</i>	31.9	%	36 - 46
MCV <i>Calculated based on the RBC histogram</i>	65.6	fL	83 - 101
MCH <i>Calculated</i>	18.7	pg	27 - 32
MCHC <i>Calculated</i>	28.5	g/dL	31.5 - 34.5
RDW <i>Calculated</i>	16.0	%	11.6 - 14.0

TOTAL LEUCOCYTE COUNT

Total WBC Count <i>Electrical Impedance</i>	4670	cells/cmm	4000 - 10000
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DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)

NEUTROPHILS <i>Flow Cytometry</i>	53	%	40 - 80
LYMPHOCYTES <i>Flow Cytometry</i>	42	%	20 - 40
EOSINOPHILS <i>Flow Cytometry</i>	1	%	1 - 6
MONOCYTES <i>Flow Cytometry</i>	4	%	2 - 10
BASOPHIL <i>Flow Cytometry</i>	0	%	0 - 2

PLATELET INDICES

PLATELET COUNT <i>Electrical Impedance</i>	252000	/cmm	150000 - 410000
MPV <i>Calculated based on PLT Histogram</i>	9.2	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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Ref. By : Dr. Health Check Up . Shalby	Received On : 28-Mar-2023 10:37 AM
	Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
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BLOOD GROUP

(Tube agglutination: Forward & reverse)

ABO Type	"A"		
RH Type	POSITIVE		
ESR 1st hour * <i>Modified Westergren Method</i>	10	mm in 1 hour	0 - 20
HBA1C			
HbA1c - Glycated Haemoglobin * <i>Boronate Affinity Assay</i>	5.0	%	Non-diabetic: <= 5.6 Pre-diabetic: 5.7-6.4 Diabetic: >= 6.5 Therapeutic goals for glycemic 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) * <i>Calculated</i>	97	mg/dL
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Gender/Age : Female / 30 Years	DOB : 20-Feb-1993
Received On : 28-Mar-2023 10:38 AM	Sample Type : Serum
Ref. By : Dr. Health Check Up . Shalby	

Parameter	Result	Unit	Biological Ref. Interval
LIPID PROFILE			
LIPID PROFILE			
Cholesterol <i>Cholesterol Esterase, Oxidase, Peroxidase</i>	161	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
SERUM TRIGLYCERIDE <i>Lipase/GK/GPO/POD</i>	53	mg/dL	Normal : <150 Borderline High : 150-199 High : 200-499 Very High : > 500
HDL CHOLESTEROL DIRECT * <i>Phosphotungstic Acid/Mgcl2 - Enzymatic</i>	45	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : >= 60
Non HDL Cholesterol <i>Calculated</i>	116	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
S.LDL <i>Calculated</i>	105	mg/dL	Optimal: <100 Near to above Optimal: 100 - 129 Borderline High: 130 - 159 High: 160 - 189 Very High: > 190
VLDL <i>Calculated</i>	11	mg/dL	6 - 38
LDL/dHDL * <i>Calculated</i>	2.3		2.5 - 3.5
Chol/dHDL * <i>Calculated</i>	3.6	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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	Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
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RENAL FUNCTION TEST**RENAL FUNCTION TEST**

Urea Nitrogen (BUN) <i>Urease, colorimetric</i>	5	mg/dL	7 - 17
UREA <i>Calculated</i>	11	mg/dL	15 - 36
S. CREATININE <i>Enzymatic - Creatinine amidohydrolase</i>	0.50	mg/dL	0.52 - 1.04
S. URIC ACID <i>Uricase/Peroxidase, Colorimetric</i>	2.6	mg/dL	2.5 - 6.2
Calcium <i>Arsenazo III dye</i>	9.4	mg/dL	8.4 - 10.2
Sodium <i>Direct Ion Selective Electrode</i>	141	mmol/L	137 - 145
S. POTASSIUM <i>Direct Ion Selective Electrode</i>	4.70	mmol/L	3.5 - 5.1
Chloride <i>Direct Ion Selective Electrode</i>	104	mmol/L	98 - 107

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DOB : 20-Feb-1993	Sample Type : Serum
Ref. By : Dr. Health Check Up . Shalby	

Parameter	Result	Unit	Biological Ref. Interval
Total T3 * <i>Chemiluminescence immunoassay (CLIA)</i>	150	ng/dL	87 - 178
Total T4 * <i>Chemiluminescence immunoassay (CLIA)</i>	8.50	µg/dL	6.09 - 12.23
TSH * <i>Chemiluminescence immunoassay (CLIA)</i>	1.64	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 / 30 Years DOB : 20-Feb-1993 Received On : 28-Mar-2023 12:28 PM
 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	Slightly Turbid		Clear	
Chemical Examination				
Blood	<i>Peroxidase like activity of hemoglobin</i>	NIL	RBCs/ μ L	Absent
Bilirubin	<i>Azo coupling Reaction with diazonium</i>	NIL	mg/dL	Absent
Urobilinogen	<i>Modified Ehrlich reaction</i>	NORMAL	mg/dL	Absent
Ketone	<i>Sodium Nitroprusside reation</i>	NIL	mg/dL	Absent
Protein	<i>Protein Error of Indicator Principle</i>	NIL	mg/dL	Absent
Nitrite	<i>Diazotization reaction of nitrite with an aromatic amine</i>	NEGATIVE	mg/dL	Absent
Glucose	<i>Glucose-oxidase/oxidase reaction</i>	NIL	mg/dL	Absent
pH	<i>Double Indicator principle</i>	8.0	PH value	4.6 - 8.0
Specific Gravity	<i>Refractometric Method - Bromthymol blue</i>	1.005	S.G. value	1.003 - 1.035
Leucocyte	<i>Leucocyte Esterase Test</i>	NEGATIVE	WBCs/ μ L	Absent
Microscopic Examination				
Pus cells	4-5/hpf	/hpf		0-5/hpf
Red blood cells	NIL	/hpf		0-2/hpf
Epithelial cells	20-25/hpf	/hpf		NA
Crystals	NIL			Nil
Cast	NIL/LPF			Nil/LPF
Bacteria	PRESENT			Nil
Amorphous	NIL			Nil
Yeast	NIL			Nil

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Gender/Age : Female / 30 Years DOB : 20-Feb-1993 Received On : 28-Mar-2023 10:38 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>	23	U/L	9 - 52
SGOT (AST) <i>Multi Point Rate with P-5-P</i>	20	U/L	14 - 36
Alkaline Phosphatase <i>PNPP, AMP Buffer</i>	49	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>	18	U/L	12 - 43
S. PROTEIN <i>Biuret (Alkaline cupric sulfate), End Point</i>	7.2	g/dL	6.3 - 8.2
Albumin <i>Bromocresol Green (BCG), Colorimetric</i>	4.2	g/dL	3.5 - 5.0
S. GLOBULIN <i>Calculated</i>	3.0	g/dL	2.3 - 3.6
A/G Ratio <i>Calculated</i>	1.4	Ratio	1.0 - 2.3
Bilirubin Total <i>Azobillirubin/Dyphylline/Diazonium Salt</i>	0.5	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>	0.2	mg/dL	Conjugated bilirubin and Delta bilirubin (Bilirubin covalently bound to albumin) 0.0-0.4

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Consulting Pathologist

Generated On : 28-Mar-2023 12:58 PM

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Patient ID:	SUR00003917	Patient Name:	NAYANA KHANDEKAR
Age:	30 Years	Sex:	F
Accession Number:	3917	Modality:	DX
Referring Physician:		Study:	CHEST PA
Study Date:	28-Mar-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. Nimit R Desai
Consultant Radiologist

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DR. HIMANI THAKER (VYAS)
M.S (Gynec)
Consultant Obstetrician & Gynecologist
Laparoscopic Surgeon
Infertility Specialist
Email-ID:- thaker.himani@gmail.com
Register No. G-31062

Shalby Women's Health Clinic

Name:- *Mayanaben*
Chief Complaints:-

Age - 36 ym

Date: *20/3/23*
Weight:-
Height:-
OPR NO:-

- Nutritional Assessment:-
- Obese
 - Well Nourished
 - Mild-Moderate Nourished
 - Severely Mal-Nourished

LMP:- *20/3/23*

M/H:- *period - 34 days RHM*
30

O/H :-
o/h - P2L2

P/H:-
F/H
Examination:-
2 FND) 20th / 8 ym / L2
8 ym / L2
TL done

Provisional Diagnosis:-
PIA - scj
P/S - Gynaecology

PAP smear taken

Pre - op

Post- op

Health Check-up

Date : 28/03/23

Patient Reg. No. : _____

Patient Name : Nayana R. Khundekar Age / Sex : 30/F

Address : Surest

Complaints :

Pain : _____

Bleeding gums : _____

Sensitivity : _____

Swelling : _____

Pus Discharge : _____

Medical History :

Hypertension : _____ DM _____ Acidity _____ Pregnancy : _____

Bleeding Disorders : _____ Asthma : _____ Allergy : _____

Past Surgical Intervention : _____

Any Medication : sterlin +

On Examination :

Abscess : _____ Food lodgement : _____

Periodontitis : _____ Gingivitis : _____

Missing T eeth : _____ Mobility : _____

Treatment Advised :

Scaling : Sitzings 1 2 3 Deep Perio Surgery : _____

Restoration : _____ Class V Fillings : _____

RCT : _____ Extraction : _____

Dentur es : _____ Partial Denture : _____

Implants : _____ Crown & Bridge Present : _____

Crown / Bridge Replacement

Advised Crown / Bridge

Advised X - Ray / O.P.G.

	..150135

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.

- Routine scaling

Dr. Darshini V. Sha
(Consultant Dental Surge)



Patient's Name: Mrs. Nayana Khandekar

Age: 30 yrs/ Female

Date: 28 / 03 / 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:19

**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.

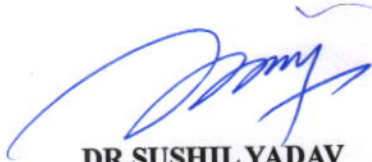
Pericardium:Normal.

IVC:14 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

Vapi - Indore - Jabalpur - Mohali - Naroda (Ahmedabad) - Surat - Jaipur **Upcoming Hospitals : Mumbai - Nasik**

Patient Name: NAYANA R KHANDEKAR	
Age / Sex: 30Yrs. / Female	Study: USG Abdomen + Pelvis
Referred By: Dr. at shalby hospital	Date: 28/03/2023

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 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 shows normal echotexture and corticomedullary differentiation. There is no evidence of scarring, hydronephrosis or calculi.

Left kidney 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 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. Nimit R Desai
Consultant Radiologist

SHALBY HOSPITAL, SURAT

Near Navyug College, Rander Road, Adajan, Surat. Gujarat, India. | Ph. : 0261-7190000 | Email : info.surat@shalby.org.

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Vapi - Indore - Jabalpur - Mohali - Naroda (Ahmedabad) - Surat - Jaipur - Mumbai

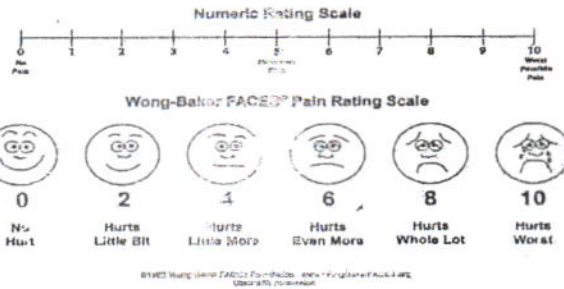
DR. RUJUTA SHELAT
Consultant Ophthalmologist
Reg. No.:- G-48712

Name :- *Nay anuben khundekar*

Date:- *28/3/23*

Chief Complaints:-

W/C



Pain Assessment:-

Past History:- *~ NAD*

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:- *6/6*

PH Vision:-

NCT *< 15 mm of hg*

ON Examination Ant. Segmenet Both Eye

~ WNL

Cornea

Anterior Chamber

Lens

Fundus

Rt. EYE

Lt. EYE

Media:-

Disc:-

Blood Vessel:-

Background:-

Macula:-

Diagnosis:-

Investigation:-

Treatment:-

Nutritional Assessment:-

Preventive Care & Counsellings:-

Follow Up ON:- After 6 month

RPS
Signature of the Consultant

Mayanaben

WNL

1100 Sinus rhythm
9110 ** normal ECG **

years

Birth date: / mmHg

kg

Medication:

Symptoms:

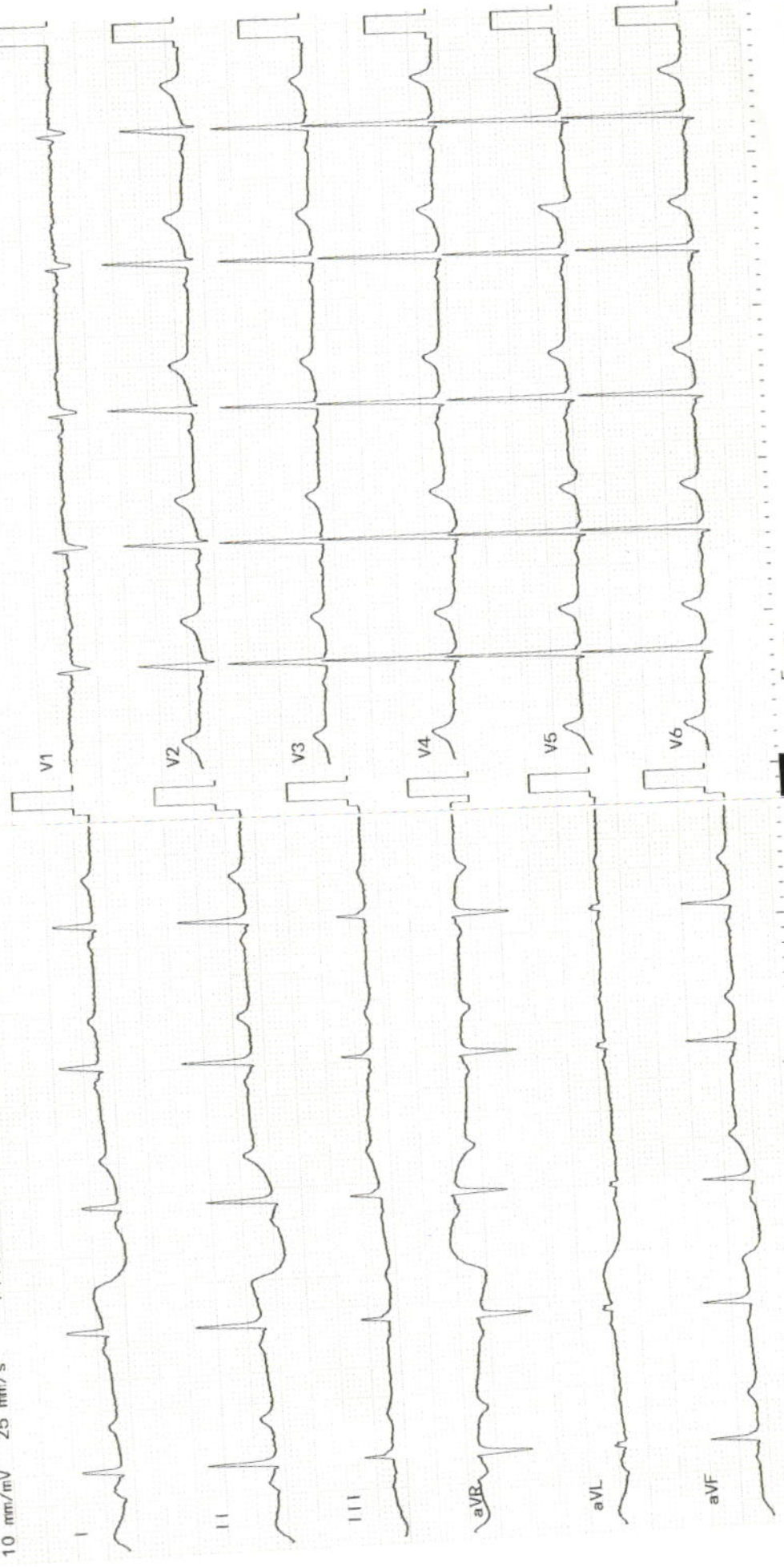
History:

PR int	68	bpm
QRS dur	144	ms
QT/QTc(E) int	78	ms
P/QRS/T axis	406/ 424	ms
RV5/SV1 amp	37/ 60/ 45	mV
RV5+SV1 amp	2.32/ 0.29	mV
	2.61	mV

Filter: H50 d 35 Hz

10 mm/mV 25 mm/s

10 mm/mV



Exam: