



BHAILAL AMIN  
GENERAL HOSPITAL

ESTD. 1964



H-2015-0297



MC-3004



E-2021-0037



### CONCLUSION OF HEALTH CHECKUP

ECU Number : 1455

Age : 44

Weight : 78

Date : 27/01/2023

MR Number : 23199291

Sex : Male

Ideal Weight : 63

Patient Name: GAURANG INDUBHAI

Height : 165

BMI : 28.65

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



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Age : 44  
Weight : 78  
Date : 27/01/2023

MR Number : 23199291  
Sex : Male  
Ideal Weight : 63

Patient Name: GAURANG INDUBHAI  
Height : 165  
BMI : 28.65

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

Present H/O : NO MEDICAL COMPLAINTS AT PRESENT.

Family H/O : FATHER : HYPERTENSION AND MOTHER : DIABETES.

Habits : NO HABITS.

Gen.Exam. : G.C. GOOD

B.P : 120/80 mm Hg

Pulse : 87/MIN REG.

Others : SPO2 : 98 %

C.V.S : NAD

R.S. : NAD

Abdomen : NP

Spleen : NP

Skin : NAD

C.N.S : NAD

Advice :



**BHAILAL AMIN  
GENERAL HOSPITAL**



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MR Number : 23199291  
Sex : Male  
Ideal Weight : 63

Patient Name: GAURANG INDUBHAI  
Height : 165  
BMI : 28.65

**Ophthalmic Check Up :**

**Right**

**Left**

Ext Exam

NORMAL

Vision Without Glasses

6/6

6/6

Vision With Glasses

N.6

N.6

Final Correction

NORMAL

NORMAL

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

FVR

Proctoscopy

Any Other

Surgical Advice

**Dietary Assesment**

ECU Number : 1455      MR Number : 23199291      Patient Name: GAURANG INDUBHAI  
Age : 44      Sex : Male      Height : 165  
Weight : 78      Ideal Weight : 63      BMI : 28.65  
Date : 27/01/2023

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 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.



Patient Name : Mr. GAURANG INDUBHAI CONTRACTOR Type : OPD  
 Gender / Age : Male / 44 Years 7 Months 3 Days Request No. : 102687  
 MR No / Bill No. : 23199291 / 231062860 Request Date : 27/01/2023 08:32 AM  
 Consultant : Dr. Manish Mittal Collection Date : 27/01/2023 08:33 AM  
 Location : OPD Approval Date : 27/01/2023 01:45 PM

**CBC + ESR**

Test	Result	Units	Biological Ref. Range
<b>Haemoglobin.</b>			
Haemoglobin	14.0	gm/dL	13 - 17
Red Blood Cell Count (T-RBC)	4.60	mill/cmm	4.5 - 5.5
Hematocrit (HCT)	41.1	%	40 - 50
Mean Corpuscular Volume (MCV)	89.3	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	30.4	pg	27 - 32
MCH Concentration (MCHC)	34.1	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	11.9	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	39.3	fl	39 - 46
<b>Total Leucocyte Count (TLC)</b>			
Total Leucocyte Count (TLC)	8.73	thou/cmm	4 - 10
<b>Differential Leucocyte Count</b>			
Polymorphs	58	%	40 - 80
Lymphocytes	36	%	20 - 40
Eosinophils	2	%	1 - 6
Monocytes	4	%	2 - 10
Basophils	0	%	0 - 2
Polymorphs (Abs. Value)	5.02	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	<b>3.18</b>	thou/cmm	1 - 3
Eosinophils (Abs. Value)	<b>0.14</b>	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.36	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.03	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.3	%	1 - 3 : Borderline > 3 : Significant
<b>Platelet Count</b>			
Platelet Count	303	thou/cmm	150 - 410
Smear evaluation	Adequate		
ESR	5	mm/1 hr	0 - 10

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. GAURANG INDUBHAJ CONTRACTOR Type : OPD  
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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. Rakesh Vaidya  
MD (Path). DCP.



Patient Name : Mr. GAURANG INDUBHAI CONTRACTOR Type : OPD  
 Gender / Age : Male / 44 Years 7 Months 3 Days Request No. : 102687  
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**Haematology**

Test	Result	Units	Biological Ref. Range
<b>Blood Group</b>			
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 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.

365 Days / 24 Hours Laboratory Services

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



BHAILAL AMIN  
GENERAL HOSPITAL

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mr. GAURANG INDUBHAI CONTRACTOR Type : OPD  
Gender / Age : Male / 44 Years 7 Months 3 Days Request No. : 102687  
MR No / Bill No. : 23199291 / 231062860 Request Date : 27/01/2023 08:32 AM  
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**Fasting Plasma Glucose**

Test	Result	Units	Biological Ref. Range
<i>Fasting Plasma Glucose</i>			
Fasting Plasma Glucose	100	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	109	mg/dL	70 - 140

By Hexokinase method on RXL Dade Dimesion

---- End of Report ----

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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. GAURANG INDUBHAI CONTRACTOR Type : OPD  
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**HbA1c (Glycosylated Hb)**

Test	Result	Units	Biological Ref. Range
<i>HbA1c (Glycosylated Hb)</i>			
Glycosylated Hemoglobin (HbA1c)	5.9	%	
estimated Average Glucose (e AG) *	122.63	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
<b>Complete Lipid Profile</b>			
Appearance	Clear		
Triglycerides	133	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	174	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	39	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)	135	mg/dL	1 - 130
<i>(Non- HDL Cholesterol)</i>			
< 130 Desirable			
139-159 Borderline High			
160-189 High			
> 191 Very High)			
LDL Cholesterol	119	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)	26.6	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	3.05		2.1 - 3.5
T. Ch./HDL Ch. Ratio	4.46		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
<b>Bilirubin</b>			
Bilirubin - Total	0.46	mg/dL	0 - 1
Bilirubin - Direct	0.12	mg/dL	0 - 0.3
Bilirubin - Indirect	0.34	mg/dL	0 - 0.7
<i>(By Diazotized sulfanilic acid on RXL Dade Dimension.)</i>			
Aspartate Aminotransferase (SGOT/AST)	15	U/L	15 - 40
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alanine Aminotransferase (SGPT/ALT)	30	U/L	16 - 63
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alkaline Phosphatase	80	U/L	53 - 128
<i>(BY PNPP AMP method on RXL Dade Dimension.)</i>			
Gamma Glutamyl Transferase (GGT)	28	U/L	15 - 85
<i>(By IFCC method on RXL Dade Dimension.)</i>			
<b>Total Protein</b>			
Total Proteins	7.72	gm/dL	6.4 - 8.2
Albumin	3.77	gm/dL	3.4 - 5
Globulin	3.95	gm/dL	3 - 3.2
A : G Ratio	0.95		1.1 - 1.6
<i>(By Biuret endpoint and Bromocresol purple method on RXL Dade Dimension.)</i>			

---- End of Report ----

Dr. Rakesh Vaidya  
MD (Path). DCP.



Patient Name : Mr. GAURANG INDUBHAI CONTRACTOR  
 Gender / Age : Male / 44 Years 7 Months 3 Days  
 MR No / Bill No. : 23199291 / 231062860  
 Consultant : Dr. Manish Mittal  
 Location : OPD

Type : OPD  
 Request No. : 102687  
 Request Date : 27/01/2023 08:32 AM  
 Collection Date : 27/01/2023 08:33 AM  
 Approval Date : 27/01/2023 01:38 PM

**Renal Function Test (RFT)**

Test	Result	Units	Biological Ref. Range
Urea (By Urease Kinetic method on RXL Dade Dimension)	26	mg/dL	10 - 45
Creatinine (By Modified Kinetic Jaffe Technique)	0.84	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)	5.6	mg/dL	3.4 - 7.2

---- End of Report ----

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 MR No / Bill No. : 23199291 / 231062860 Request Date : 27/01/2023 08:32 AM  
 Consultant : Dr. Manish Mittal Collection Date : 27/01/2023 08:33 AM  
 Location : OPD Approval Date : 27/01/2023 01:37 PM

**Prostate Sp. (Antigen)**

Test	Result	Units	Biological Ref. Range
Total PSA	0.405	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. Rakesh Vaidya  
MD (Path). DCP.



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 Gender / Age : Male / 44 Years 7 Months 3 Days  
 MR No / Bill No. : 23199291 / 231062860  
 Consultant : Dr. Manish Mittal  
 Location : OPD

Type : OPD  
 Request No. : 102687  
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 Collection Date : 27/01/2023 08:33 AM  
 Approval Date : 27/01/2023 01:37 PM

**Thyroid Hormone Study**

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

Triiodothyronine (T3)	1.29	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)	8.90	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)	2.38	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 ---

Dr. Rakesh Vaidya  
 MD (Path). DCP.



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 Location : OPD Approval Date : 27/01/2023 10:33 AM

**Urine routine analysis (Auto)**

Test	Result	Units	Biological Ref. Range
<b>Physical Examination</b>			
Quantity	50	mL	
Colour	Pale Yellow		
Appearance	Clear		
<b>Chemical Examination (By Reagent strip method)</b>			
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
Leucocytes	Negative		Negative
Nitrite	Negative		Negative
<b>Microscopic Examination (by Microscopy after Centrifugation at 2000 rpm for 10 min or on fully automated Sysmex urine sedimentation analyzer UF4000)</b>			
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



Patient Name : Mr. GAURANG INDUBHAI CONTRACTOR Type : OPD  
 Gender / Age : Male / 44 Years 7 Months 3 Days Request No. : 102783  
 MR No / Bill No. : 23199291 / 231062860 Request Date : 27/01/2023 08:32 AM  
 Consultant : Dr. Manish Mittal Collection Date : 27/01/2023 11:40 AM  
 Location : OPD Approval Date : 27/01/2023 01:18 PM

**Stool Routine**

Test	Result	Units	Biological Ref. Range
<b>Physical Examination (Stool)</b>			
Colour	Brown		
Consistency	Semi Solid		
Mucus.	Absent		
Blood.	Absent		
<b>Chemical Examination</b>			
Reaction	Acidic		
Occult Blood	Negative		
<b>Microscopic Examination</b>			
Ova	Absent		
Cyst.	Absent		
Trophozoites	Absent		
Red Blood Cells.	Absent	/hpf	
Pus Cells	Absent	/hpf	
Epithelial Cells	Absent		
Fat	Absent		

(Method : Manual + Chemical (Occult Blood by Peroxidase like activity of Haemoglobin) + Microscopy)

Test Note :

- Stool Occult Blood test needs to be tested on three consecutive samples for proper interpretation.

- For 72 hours prior to Occult Blood test, patient should not take following items: Red meat, fish, poultry, turnips, horseradish, cauliflower, spinach, broccoli, bananas, black grapes, plums etc., drugs like aspirin, NSAIDs, anticoagulants, reserpine, iodine and high dose of Vitamin C.)

---- End of Report ----

Dr. Rakesh Vaidya  
MD (Path). DCP.





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**DEPARTMENT OF DIAGNOSTIC RADIOLOGY**

Patient No. : 23199291      Report Date : 27/01/2023

Request No. : 190050547      27/01/2023 8.32 AM

Patient Name : **Mr. GAURANG INDUBHAI CONTRACTOR**

Gender / Age : Male / 44 Years 7 Months 3 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

*Prerna C Hasani*

**Dr. Prerna C Hasani, MD**  
Consultant Radiologist





**BHAILAL AMIN**  
GENERAL HOSPITAL

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**DEPARTMENT OF DIAGNOSTIC RADIOLOGY**

**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

Patient No. : 23199291      Report Date : 27/01/2023  
Request No. : 190050577      27/01/2023 8.32 AM  
Patient Name : **Mr. GAURANG INDUBHAI CONTRACTOR**  
Gender / Age : Male / 44 Years 7 Months 3 Days

**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 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.

Prostate appears normal in size and volume is ~ 17 cc. Prostate measures 25mm x 36mm x 37mm.

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

*Prerna C*

**Dr.Prerna C Hasani, MD**  
Consultant Radiologist



Patient No. : 23199291      Report Date : 27/01/2023  
Request No. : 190050588      27/01/2023 8.32 AM  
Patient Name : Mr. GAURANG INDUBHAI CONTRACTOR  
Gender / Age : Male / 44 Years 7 Months 3 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 TR MAX ~ 26MMHG  
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+.

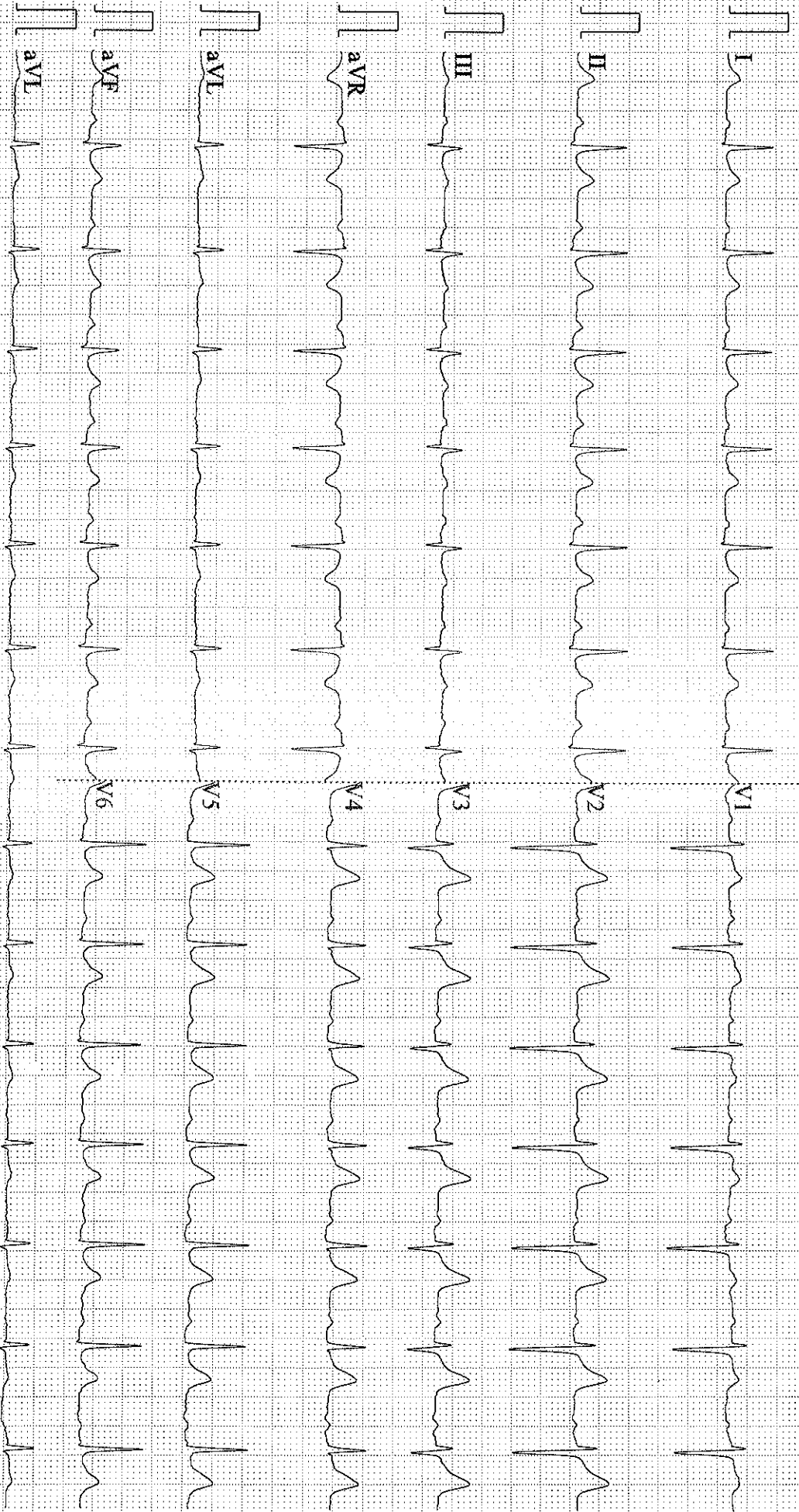
DR. V C CHAUHAN MD  
INTERVENTIONAL CARDIOLOGIST



HR : 87 bpm  
P : 107 ms  
PR : 181 ms  
QRS : 87 ms  
QT/QTc : 343/413 ms  
P/QRS/T : 65/43/49 °  
RV5/SV1 : 1.002/0.975 mV

Diagnosis Information:  
Sinus Rhythm  
Poor R Wave Progression (V3)

Report Confirmed by:



# Dr. Sonica Peshin

Cosmetic Dentist & Implantologist

Reg. No. : 6966-A

M. : 9586867301



BHAILAL AMIN  
GENERAL HOSPITAL

## Dental assessment form

27/01/2023

Name: Gaurang Indubhai Contractor

Age/ Sex: 44 years/Male

Patient has come for an oral hygiene check up

### On Examination:

- Stains+
- Mild fluorosis seen
- Fractured crown with food lodgement interdentally with respect to 37
- Impacted tooth causing food lodgement and gross decay of 47 seen
- History of horizontal brushing
- Generalised attrition, recession

### Provisional diagnosis:

- Regressive alterations of the teeth

### Treatment plan:

- Extraction of 47, if pain arises
- Crown with respect to 37

### 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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