

Patient ID:	SUR000003834	Patient Name:	ANUPAMA SHARMA
Age:	35 Years	Sex:	F
Accession Number:	3834	Modality:	DX
Referring Physician:		Study:	CHEST PA
Study Date:	25-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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PID : SUR0000338596 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Anupama Sharma	/	Registered On : 25-Mar-2023 10:06 AM
Lab ID : 303901986		Collected On : 25-Mar-2023 10:10 AM
Gender/Age : Female / 35 Years	DOB : 22-Oct-1987	Received On : 25-Mar-2023 10:26 AM
Ref. By : Dr. Health Check Up . Shalby		Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
BLOOD COUNT AND INDICIES			
HAEMOGLOBIN <i>Colorimetric Non Cyanide</i>	11.0	g/dL	12.0 - 15.0
RBC COUNT <i>Electrical Impedance</i>	4.92	mill/cmm	3.8 - 4.8
HCT <i>Calculated</i>	37.0	%	36 - 46
MCV <i>Calculated based on the RBC histogram</i>	75.3	fL	83 - 101
MCH <i>Calculated</i>	22.4	pg	27 - 32
MCHC <i>Calculated</i>	29.7	g/dL	31.5 - 34.5
RDW <i>Calculated</i>	15.0	%	11.6 - 14.0

TOTAL LEUCOCYTE COUNT

Total WBC Count <i>Electrical Impedance</i>	8590	cells/cmm	4000 - 10000
---------------------------------------------	------	-----------	--------------

DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)

NEUTROPHILS <i>Flow Cytometry</i>	80	%	40 - 80
LYMPHOCYTES <i>Flow Cytometry</i>	15	%	20 - 40
EOSINOPHILS <i>Flow Cytometry</i>	3	%	1 - 6
MONOCYTES <i>Flow Cytometry</i>	2	%	2 - 10
BASOPHIL <i>Flow Cytometry</i>	0	%	0 - 2

PLATELET INDICES

PLATELET COUNT <i>Electrical Impedance</i>	273000	/cmm	150000 - 410000
MPV <i>Calculated based on PLT Histogram</i>	10.9	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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Pankaj Agrawal
Dr Pankaj Agrawal
 M.B., D.C.P
 Consulting Pathologist

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BLOOD GROUP

(Tube agglutination: Forward & reverse)

ABO Type	"A"		
RH Type	POSITIVE		
ESR 1st hour *	41	mm in 1 hour	0 - 20
<i>Modified Westergren Method</i>			
HBA1C			
HbA1c - Glycated Haemoglobin *	5.7	%	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
<i>Boronate Affinity Assay</i>			

Estimated Average Glucose (eAG) (mg/dL) *	117	mg/dL
-------------------------------------------	-----	-------

Calculated

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 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)	111	mg/dL	74 - 106
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GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

Urine Sugar (F)	ABSENT	mg/dL	ABSENT
------------------------	---------------	-------	--------

Glucose-oxidase/oxidase reaction

POST PRANDIAL PLASMA GLUCOSE

Plasma Glucose (PP)	135	mg/dL	Normal: 100-140 Impaired: 140 -199 Diabetic :=>200
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GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

Urine Sugar (PP)	ABSENT	mg/dL	ABSENT
-------------------------	---------------	-------	--------

Glucose-oxidase/oxidase reaction

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Consulting Pathologist

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Parameter	Result	Unit	Biological Ref. Interval
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LIPID PROFILE

LIPID PROFILE

Cholesterol

Cholesterol Esterase, Oxidase, Peroxidase

264 ✓

mg/dL

Desirable: <200
Borderline High: 200 - 239
High >=240

SERUM TRIGLYCERIDE

Lipase/GK/GPO/POD

412 ✓

mg/dL

Normal : <150
Borderline High : 150-199
High : 200-499
Very High : > 500

HDL CHOLESTEROL DIRECT *

Phosphotungstic Acid/Mgcl2 - Enzymatic

39 ↓

mg/dL

Major risk factor for heart disease : < 40
Negative risk factor for heart disease : >= 60

Non HDL Cholesterol

Calculated

225 ↓

mg/dL

Optimal : <130
Desirable : 130-159
Borderline high : 159-189
High : 189-220
Very High : >=220

VLDL

Calculated

82

mg/dL

6 - 38

Chol/dHDL *

Calculated

6.8

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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Ref. By : Dr. Health Check Up . Shalby		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>	0.66	mg/dL	0.52 - 1.04
S. URIC ACID <i>Uricase/Peroxidase, Colorimetric</i>	4.6	mg/dL	2.5 - 6.2
Calcium <i>Arsenazo III dye</i>	9.2	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>	4.79	mmol/L	3.5 - 5.1
Chloride <i>Direct Ion Selective Electrode</i>	104	mmol/L	98 - 107

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Lab ID : 303901986

Collected On : 25-Mar-2023 10:10 AM

Gender/Age : Female / 35 Years

DOB : 22-Oct-1987

Received On : 25-Mar-2023 10:26 AM

Ref. By : Dr. Health Check Up . Shalby

Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
Total T3 * <i>Chemiluminescence immunoassay (CLIA)</i>	112	ng/dL	87 - 178
Total T4 * <i>Chemiluminescence immunoassay (CLIA)</i>	9.95	µg/dL	6.09 - 12.23
TSH * <i>Chemiluminescence immunoassay (CLIA)</i>	3.15	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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Lab ID : 303901986		Collected On : 25-Mar-2023 10:10 AM
Gender/Age : Female / 35 Years	DOB : 22-Oct-1987	Received On : 25-Mar-2023 10:31 AM
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	Clear		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 reaction</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>	6.0	PH value	4.6 - 8.0
Specific Gravity	<i>Refractometric Method - Bromthymol blue</i>	1.025	S.G. value	1.003 - 1.035
Leucocyte	<i>Leucocyte Esterase Test</i>	Trace (+/-)	WBCs/ μ L	Absent
Microscopic Examination				
Pus cells	5-6/hpf	/hpf		0-5/hpf
Red blood cells	NIL	/hpf		0-2/hpf
Epithelial cells	6-8/hpf	/hpf		NA
Crystals	NIL			Nil
Cast	NIL/LPF			Nil/LPF
Bacteria	PRESENT			Nil
Amorphous	NIL			Nil
Yeast	PRESENT (Occasional)			Nil

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Gender/Age : Female / 35 Years	DOB : 22-Oct-1987	Received On : 25-Mar-2023 10:26 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>	36	U/L	9 - 52
SGOT (AST) <i>Multi Point Rate with P-5-P</i>	38	U/L	14 - 36
Alkaline Phosphatase <i>PNPP, AMP Buffer</i>	85	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>	37	U/L	12 - 43
S. PROTEIN <i>Biuret (Alkaline cupric sulfate), End Point</i>	7.5	g/dL	6.3 - 8.2
Albumin <i>Bromocresol Green (BCG), Colorimetric</i>	4.3	g/dL	3.5 - 5.0
S. GLOBULIN <i>Calculated</i>	3.2	g/dL	2.3 - 3.6
A/G Ratio <i>Calculated</i>	1.3	Ratio	1.0 - 2.3
Bilirubin Total <i>Azobilirubin/Dyphylline/Diazonium Salt</i>	0.6	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>	0.5	mg/dL	Unconjugated bilirubin Adults: 0.0-1.1 Neonates: 0.6-10.5
BILIRUBIN DIRECT <i>Calculated</i>	0.1	mg/dL	Conjugated bilirubin and Delta bilirubin (Bilirubin covalently bound to albumin) 0.0-0.4

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

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Dr Pankaj AgrawalM.B., D.C.P
Consulting Pathologist
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Patient's Name: Mrs. Anupama Sharma

Age: 35 yrs/ Female

Date: 25 / 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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Patient Name: ANUPAMA SHARMA	
Age / Sex: 35Yrs. / Female	Study: USG Abdomen + Pelvis
Referred By: Dr. at shalby hospital	Date: 25/03/2023

ULTRASOUND OF ABDOMEN AND PELVIS (TAS)

Liver shows grade I fatty hepatomegaly. No focal lesion seen. The Hepatic veins appear normal. No evidence of dilated I.H.B.R.

Portal vein appears normal.

Gall bladder not seen (cholecystectomy).

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.

31 x 22 and 21 x 18 mm sized cysts seen in right and left ovaries showing echoes within.

There is no evidence of any other ovarian or adnexal mass lesion.

No ascites is seen. No abnormal bowel wall thickening and dilatation seen.

IMPRESSION:

- Fatty liver.
- Small ovarian cysts bilaterally showing echoes within, ?hemorrhagic / endometriotic cysts.
- No any other significant abnormality detected.

Thanks for referrals.


Dr. Nimit R Desai
Consultant Radiologist

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ID:

Name:

Sex: M

Birth date:

years

cm

kg

/

mmHg

Medication:

Symptoms:

History:

Heart rate	92	bpm
PR int	152	ms
QRS dur	64	ms
QT/QTc(E) int	338/ 388	ms
P/QRS/T axis	70/ 77/ 32	°
RV5/SV1 amp	0.93/ 0.84	mV
RV5+SV1 amp	1.77	mV

- 1100 Sinus rhythm
- 4068 Nonspecific Twave abnormality
- 8102 Low QRS voltage in chest leads
- 9130 ** borderline ECG **

Amphetamine

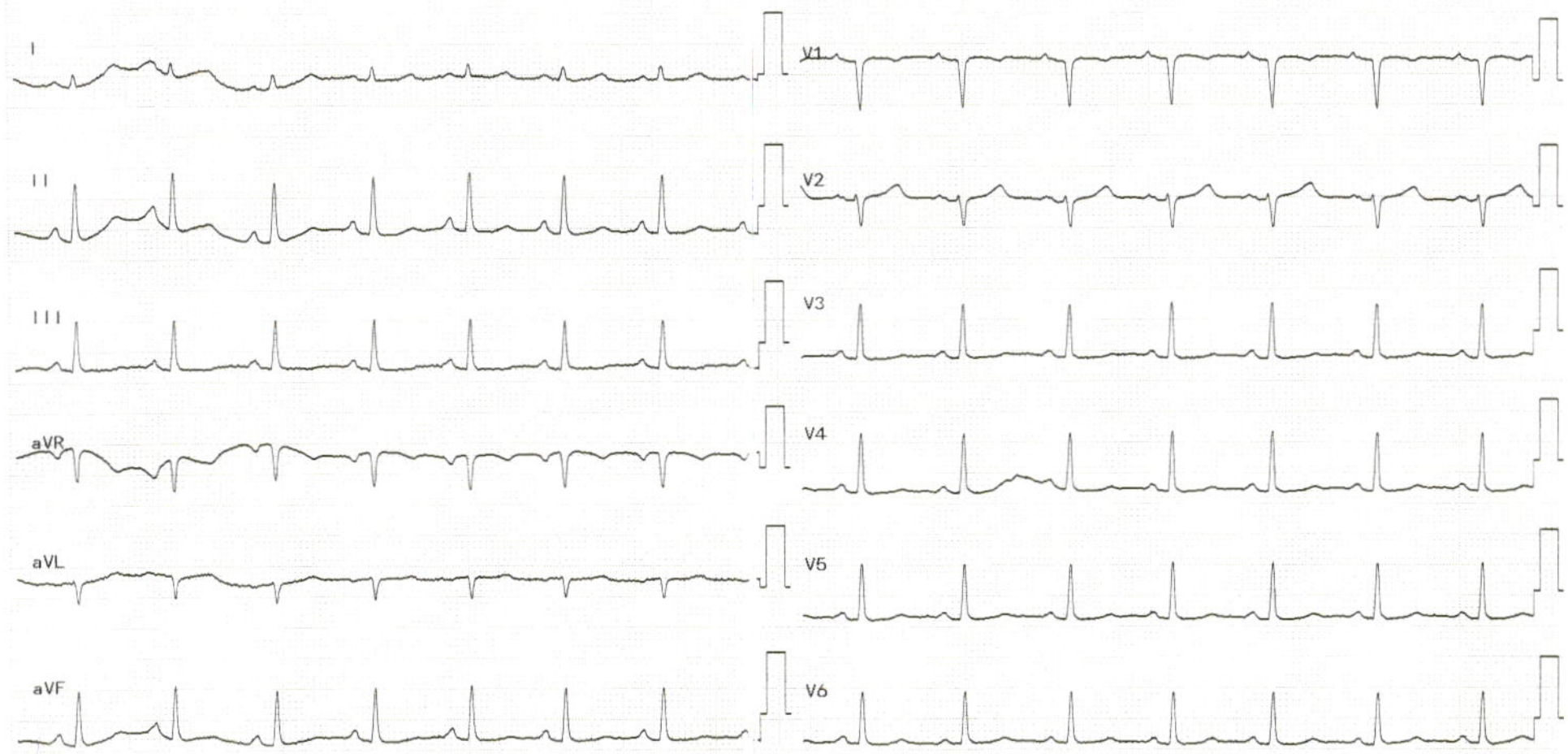
Unconfirmed Report

Reviewed by:

WNL

10 mm/mV 25 mm/s Filter: H50 d 35 Hz

10 mm/mV



Pre - op

Post- op

Health Check-up

Date : 25/03/23

Patient Reg. No. : _____

Patient Name : Anupama Shamma Age / Sex : 35 / F

Address : Jehangirpura

Complaints :

Pain : _____

Bleeding gums : _____

Sensitivity : _____

Swelling : _____

Pus Discharge : _____

Medical History :

Hypertension : _____ DM _____ Acidity _____ Pregnancy : _____

Bleeding Disorders : _____ Asthma : _____ Allergy : _____

Past Surgical Intervention : _____

Any Medication : sterim t

On Examination :

Abscess : _____ Food lodgement : _____

Periodontitis : _____ Gingivitis : _____

Missing Teeth : _____ Mobility : _____

Treatment Advised :

Scaling : Sitzings 1 2 3 Deep Perio Surgery : _____

Restoration : _____ Class V Fillings : _____

RCT : _____ Extraction : _____

Dentures : _____ Partial Denture : _____

Implants : _____ Crown & Bridge : _____

Present : _____

Crown / Bridge Replacement :
Advised Crown / Bridge :
Advised X - Ray / O.P.G. :

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"

add.
- Routine scaling



Dr. Darshini V. Sh.
(Consultant Dental Surg)



Certificate No. : MC-5200

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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

Age - 35 yrs

Name:-

Chief Complaints:-

Amenorrhea

Shalby Women's Health Clinic

Date: 25/3/23

Weight:-

Height:-

OPR NO:-

Nutritional Assessment:-

- Obese
- Well Nourished
- Mild-Moderate Nourished
- Severely Mal-Nourished

LMP:- 24/2/23

no - infertility.

M/H:-

Period - 3-4 days RBC

O/H :-

O/H -

IVF conceived & aborted at 6 months.

P/H:-

F/H

Examination:-

Pln -

H/o lap cholecystectomy

PlA - soft

Pls - Gp healthy

PAP smear taken

Provisional Diagnosis:-

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Treatment & Further Advices:-
(Write in Capital Letters)

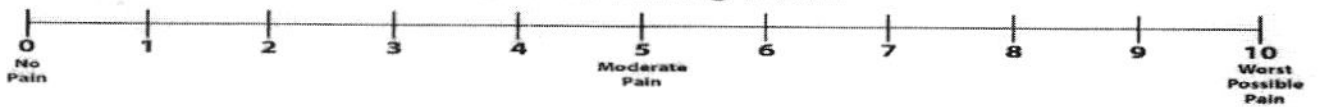
Investigaion Advised:-

Follow Up:

Date:- _____

Incase of emergency Please report to Emeregency Department of Hospital OR Call:- 0261-7190000 / 9512660096

Numeric Rating Scale



Wong-Baker FACES® Pain Rating Scale



0

No Hurt



2

Hurts Little Bit



4

Hurts Little More



6

Hurts Even More



8

Hurts Whole Lot



10

Hurts Worst

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

Name :- Anupama Sharma

Date:- 25/3/23

Chief Complaints:-

nilc

(BE) Lasik done

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:-

Visual Acuity:- 6/6

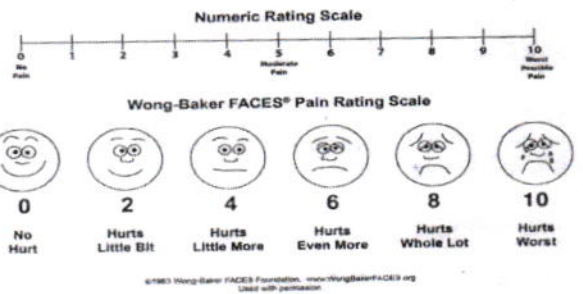
NCT 15 mm of hg

ON Examination

Ant. Segmenet

Both Eye

- WNL -



Cornea

Anterior Chamber

Lens

Fundus

Rt. EYE

Lt. EYE

Media:-

Disc:-

Blood Vessel:-

Background:-

Macula:-

Diagnosis:-

Investigation:-

↑ BE
WNL

Treatment:-

Nutritional Assessment:-

Preventive Care & Counsellings:-

Follow Up ON:- After 6 month

RMS

Signature of the Consultant

DR. DILIP B. GHEEWALA

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:-

Anupama sharma
F 35

Age / Sex :-

Chief Complaints:-

No obs

Date: 25/3/23

Weight:- 76.8 kg

Height:-

Nutritional assessment:-

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

Pulse:- 70/min

BP:- 127/85.

SpO2:- 99.1.

Drug / Food Allergy:-

Past History :-

NAD

Family History:-

Systemic Examination:-

RS
CS
PA
AS | NAD

Provisional Diagnosis:-

SHALBY HOSPITAL, SURAT

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

SHALBY LIMITED

Regd. Office : Opp. Karnavati Club, S.G. Road, Ahmedabad - 380 015. Gujarat, India
Tel: 079 40203000 | Fax : 079 40203109 | info.sg@shalby.org | www.shalby.org | CIN : L85110GJ2004PLC044667

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

Investigation :-

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

Rx

T. Cardiosose 10mg/40g
2 tab. daily
after dinner
Normal health check
up

Follow Up:

after 1 month.

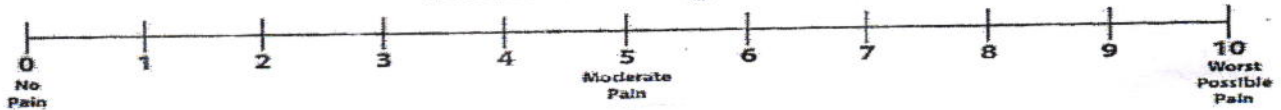
25/3/23.

બધી દવાઓ ડોક્ટરને બતાવીને લેવી.

Date:- _____

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Numeric Rating Scale



Wong-Baker FACES® Pain Rating Scale

