

DR. DILIP B GHEEWALA

M.D. (Medicine)

Reg No: G 17770,

Mo: 9825338408

Consultant Physician & Ex. Professor Of Medicine

OPD Days: Monday

Shalby MD Physician Clinic

OPR NO:

Patient Name:-

Abhilasha Kumari
29 F.

Date: 14/04/23

Age / Sex :-

Weight:- 63.9K

Chief Complaints:-

Height:- 158 cm

No clo.

Nutritional assessment:-

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

Drug / Food Allergy:-

Past History :-

NAD

Pulse:- 88b/min

BP:- 120/80mm

SpO2:- 99%

Family History:-

Systemic Examination:-

RS / NAD
CS /
PA /
CVS /

Provisional Diagnosis:-

SHALBY HOSPITAL, SURAT

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

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CIN: L85110GJ2004PLC044667

Investigation :-

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

Rx

Cap. Aspirin (30)
- 1 - daily,
RBSOM D (20)
- 1 - daily

Follow Up:

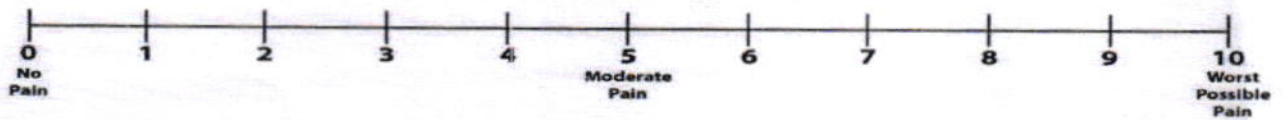
after 1 month *preewas*

બધી દવાઓ ડોક્ટરને બતાવીને લેવી.

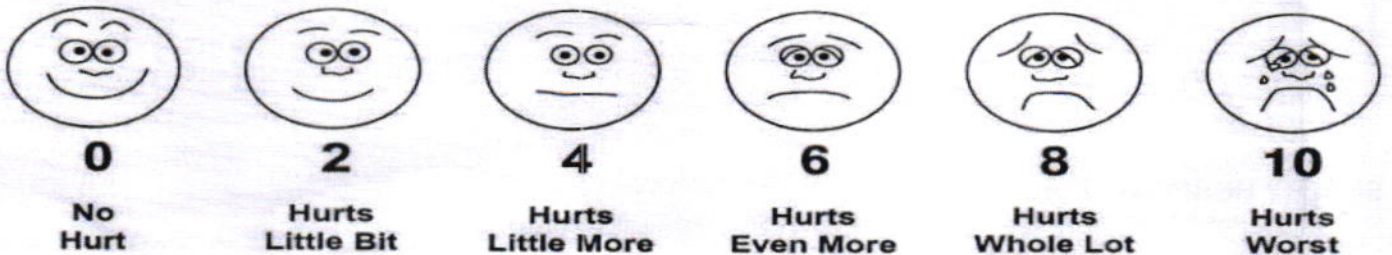
Date:- _____

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 : SUR0000339849 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Abhilasha Kumari	/	Registered On : 14-Apr-2023 08:41 AM
Lab ID : 304900962		Collected On : 14-Apr-2023 08:41 AM
Gender/Age : Female / 29 Years	DOB : 20-Dec-1993	Received On : 14-Apr-2023 09:39 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>	11.5	g/dL	12.0 - 15.0
RBC COUNT <i>Electrical Impedance</i>	4.12	mill/cmm	3.8 - 4.8
HCT <i>Calculated</i>	37.0	%	36 - 46
MCV <i>Calculated based on the RBC histogram</i>	89.7	fL	83 - 101
MCH <i>Calculated</i>	27.9	pg	27 - 32
MCHC <i>Calculated</i>	31.1	g/dL	31.5 - 34.5
RDW <i>Calculated</i>	12.5	%	11.6 - 14.0
TOTAL LEUCOCYTE COUNT			
Total WBC Count <i>Electrical Impedance</i>	6150	cells/cmm	4000 - 10000
DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)			
NEUTROPHILS <i>Flow Cytometry</i>	62	%	40 - 80
LYMPHOCYTES <i>Flow Cytometry</i>	30	%	20 - 40
EOSINOPHILS <i>Flow Cytometry</i>	2	%	1 - 6
MONOCYTES <i>Flow Cytometry</i>	6	%	2 - 10
BASOPHIL <i>Flow Cytometry</i>	0	%	0 - 2
PLATELET INDICES			
PLATELET COUNT <i>Electrical Impedance</i>	129000	/cmm	150000 - 410000
MPV <i>Calculated based on PLT Histogram</i>	13.6	fL	7.5 - 12.0
PERIPHERAL SMEAR EXAMINATION			
RBCs	Normochromic and Normocytic.		
WBCs	Total and differential leucocyte counts are within normal limit		
PLATELETs	Just adequate in number on smear examination with presence of few large platelets		
MALARIAL PARASITE	Malarial parasites are not seen on smear examination.		
PLATELET COUNT (MANUAL)	150000	/cmm	150000 - 500000

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Dr Pankaj Agrawal

M.B., D.C.P
Consulting Pathologist

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Ref. By : Dr. Health Check Up . Shalby		Sample Type : EDTA Whole Blood

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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Parameter	Result	Unit	Biological Ref. Interval
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BLOOD GROUP

(Tube agglutination: Forward & reverse)

ABO Type

"A"

RH Type

POSITIVE

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Parameter	Result	Unit	Biological Ref. Interval
ESR 1st hour * <i>Modified Westergren Method</i>	17	mm in 1 hour	0 - 20
HBA1C HbA1c - Glycated Haemoglobin * <i>Boronate Affinity Assay</i>	5.6	%	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) * 114 mg/dL
Calculated

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REPORT STATUS : Interim



Patient Name : **Mrs. Abhilasha Kumari** / Registered On : 14-Apr-2023 08:41 AM
 Lab ID : 304900962 Collected On : 14-Apr-2023 12:00 AM
 Gender/Age : Female / 29 Years DOB : 20-Dec-1993 Received On : 14-Apr-2023 09:44 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)	78	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)	88	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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Gender/Age : Female / 29 Years	DOB : 20-Dec-1993	Received On : 14-Apr-2023 09:44 AM
Ref. By : Dr. Health Check Up . Shalby		Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
LIPID PROFILE			
LIPID PROFILE			
Cholesterol <i>Cholesterol Esterase, Oxidase, Peroxidase</i>	160	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
SERUM TRIGLYCERIDE <i>Lipase/GK/GPO/POD</i>	64	mg/dL	Normal : <150 Borderline High : 150-199 High : 200-499 Very High : > 500
HDL CHOLESTEROL DIRECT * <i>Phosphotungstic Acid/Mgcl2 - Enzymatic</i>	42	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : >= 60
Non HDL Cholesterol <i>Calculated</i>	118	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>	13	mg/dL	6 - 38
LDL/dHDL * <i>Calculated</i>	2.5		2.5 - 3.5
Chol/dHDL * <i>Calculated</i>	3.8	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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Parameter	Result	Unit	Biological Ref. Interval
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RENAL FUNCTION TEST**RENAL FUNCTION TEST**

Urea Nitrogen (BUN) <i>Urease, colorimetric</i>	9	mg/dL	7 - 17
UREA <i>Calculated</i>	19	mg/dL	15 - 36
S. CREATININE <i>Enzymatic - Creatinine amidohydrolase</i>	0.65	mg/dL	0.52 - 1.04
S. URIC ACID <i>Uricase/Peroxidase, Colorimetric</i>	4.2	mg/dL	2.5 - 6.2
Calcium <i>Arsenazo III dye</i>	9.0	mg/dL	8.4 - 10.2
Sodium <i>Direct Ion Selective Electrode</i>	139	mmol/L	137 - 145
S. POTASSIUM <i>Direct Ion Selective Electrode</i>	4.32	mmol/L	3.5 - 5.1
Chloride <i>Direct Ion Selective Electrode</i>	104	mmol/L	98 - 107

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Ref. By : Dr. Health Check Up . Shalby		Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
Total T3 * <i>Chemiluminescence immunoassay (CLIA)</i>	103	ng/dL	87 - 178
Total T4 * <i>Chemiluminescence immunoassay (CLIA)</i>	9.98	µg/dL	6.09 - 12.23
TSH * <i>Chemiluminescence immunoassay (CLIA)</i>	5.67	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 : 304900962		Collected On : 14-Apr-2023 08:41 AM	
Gender/Age : Female / 29 Years	DOB : 20-Dec-1993	Received On : 14-Apr-2023 09:48 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> Trace (+/-)	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> 6.5	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> NEGATIVE	WBCs/ μ L	Absent
Microscopic Examination			
Pus cells	2-3/hpf	/hpf	0-5/hpf
Red blood cells	2-3/hpf	/hpf	0-2/hpf
Epithelial cells	0-2/hpf	/hpf	NA
Crystals	NIL		Nil
Cast	NIL/LPF		Nil/LPF
Bacteria	NIL		Nil
Amorphous	NIL		Nil
Yeast	NIL		Nil

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Parameter	Result	Unit	Biological Ref. Interval
Liver Function Test			
Liver Function Test			
SGPT (ALT) <i>Multi Point Rate with P-5-P</i>	60	U/L	9 - 52
SGOT (AST) <i>Multi Point Rate with P-5-P</i>	35	U/L	14 - 36
Alkaline Phosphatase <i>PNPP, AMP Buffer</i>	71	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>	26	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>	4.3	g/dL	3.5 - 5.0
S. GLOBULIN <i>Calculated</i>	2.9	g/dL	2.3 - 3.6
A/G Ratio <i>Calculated</i>	1.5	Ratio	1.0 - 2.3
Bilirubin Total <i>Azobilirubin/Dyphylline/Diazonium Salt</i>	0.4	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>	0.4	mg/dL	Unconjugated bilirubin Adults: 0.0-1.1 Neonates: 0.6-10.5
BILIRUBIN DIRECT <i>Calculated</i>	0.0	mg/dL	Conjugated bilirubin and Delta bilirubin (Bilirubin covalently bound to albumin) 0.0-0.4

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

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Patient ID:	SUR00004690	Patient Name:	ABHILASHA KUMARI
Age:	29 Years	Sex:	F
Accession Number:	4690	Modality:	DX
Referring Physician:		Study:	CHEST PA
Study Date:	14-Apr-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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CIN: L85110GJ2004PLC044667



Pre - op

Post-op

Health Check-up

Date : 24/08/23

Patient Reg. No. : _____

Patient Name : Abhishek kumarji

Age / Sex : 29/F

Address : Bharuch

Complaints : of Pain in gums.

Pain : _____

Bleeding gums : _____

Swelling : _____

Sensitivity : _____

Pus Discharge : _____

Medical History :

Hypertension : DM Acidity Pregnancy :

Bleeding Disorders : Asthma : Allergy :

Past Surgical Intervention : _____

Any Medication :

On Examination :

Abscess : _____ Food lodgement : _____

Periodontitis : _____ Gingivitis : Generalized

Missing Teeth : _____ Mobility : _____

Treatment Advised :

Scaling : Sittings 1 2 3 Deep

Perio Surgery : _____

Restoration : _____ Class V Fillings : _____

RCT : _____ Extraction : _____

Dentures : _____ Partial Denture : _____

Implants : _____ Crown & Bridge : _____

Present : _____

DR. HIMANI THAKER (VYAS)

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

Shalby Women's Health Clinic

Name:- Abhilasha Kumari
Chief Complaints:-

Age-29 yrs

Date: 14/4/23

Weight:-

Height:-

OPR NO:-

Nutritional Assessment:-

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

Cl - Irregular
menses +
dysmenorrhoea

LMP:- 16/2/23

M/H:- amp - 34 days
310-50

O/H :-

O/A - nulliparous

P/H:-

F/H

Examination:-

PLA - soft

Provisional Diagnosis:-

PLS - Co hearting

PAP - taken

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

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

Investigaion Adviced:-

Rx

wt deduction
diet
exercise

- TAB METFORMIN
 500 (10)

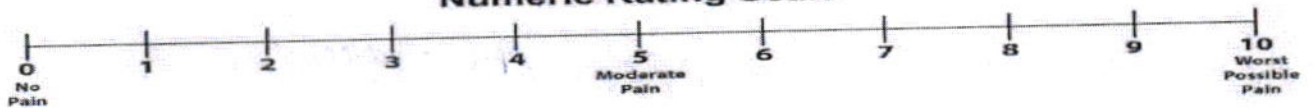
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Follow Up:

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



Patient Name: ABHILASHA KUMARI	
Age / Sex: 29 Yrs. / Female	Study: USG Abdomen + Pelvis
Referred By: Dr. at shalby hospital	Date: 14/04/2023

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

Left kidney it 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

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Tel: 079 40203000 | Fax: 079 40203109 | info.sg@shalby.org | www.shalby.org

CIN: L85110GJ2004PLC044667

Patient's Name: Mrs. Abhilasha Kumari

Age: 29 yrs/ Female

Date: 14 / 04 / 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:13 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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CIN: L85110GJ2004PLC044667

ID: _____ Name: _____ Birth date: _____ / _____ / _____ mmHg

Sex: M cm kg years

1100 Sinus rhy *cm*
9110 ** normal ECG **

Abhishek .

Medication: _____

Symptoms: _____

History: _____

Heart rate: 75 bpm

PR int: 180 ms

QRS dur: 76 ms

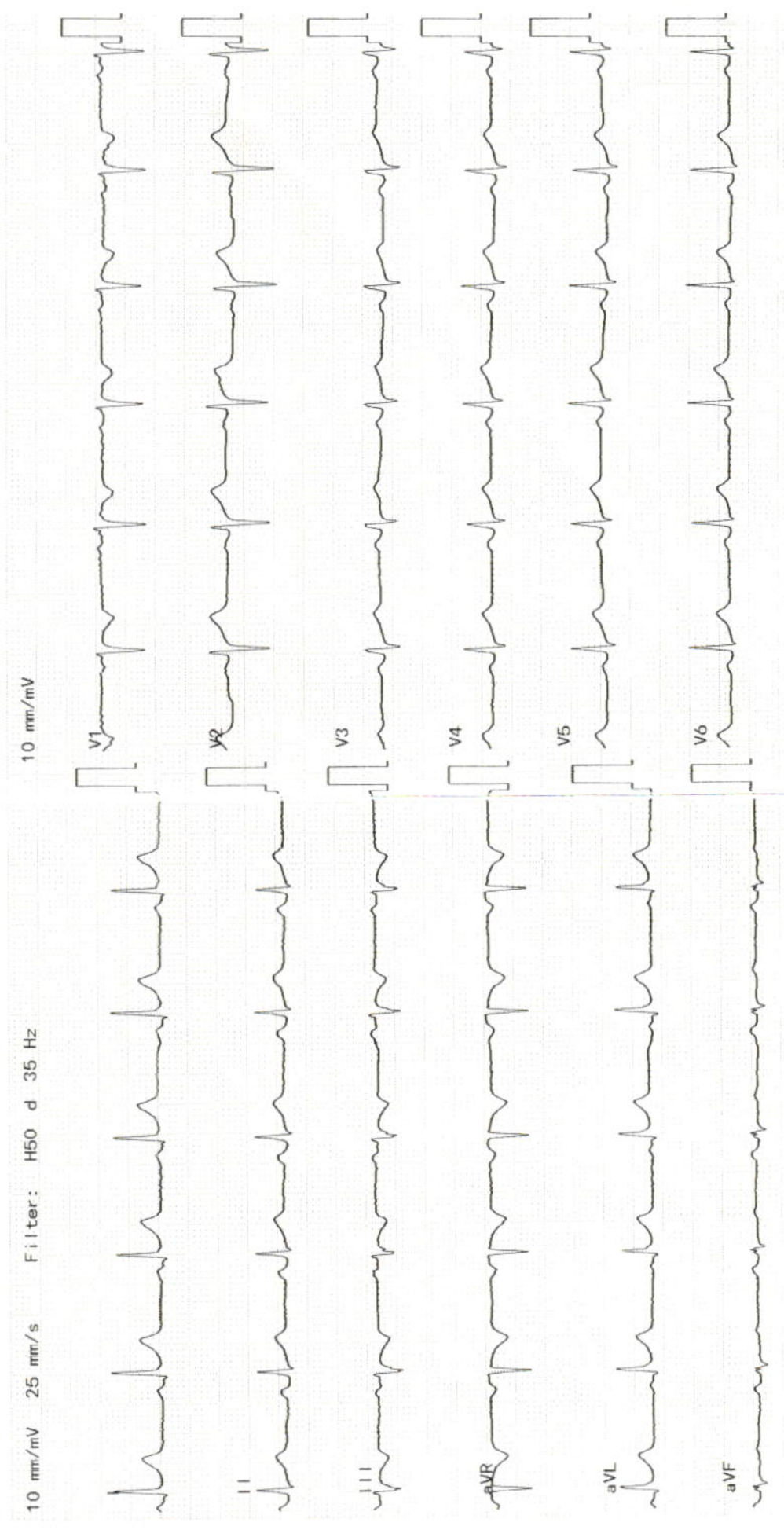
QT/QTc(E) int: 340/ 368 ms

P/QRS/T axis: 51/ 15/ 4 °

RV5/SV1 amp: 0.72/ 0.77 mV

RV5+SV1 amp: 1.49 mV

Unconfirmed Report
Reviewed by:



DR. RUJUTA SHELAT

Consultant Ophthalmologist

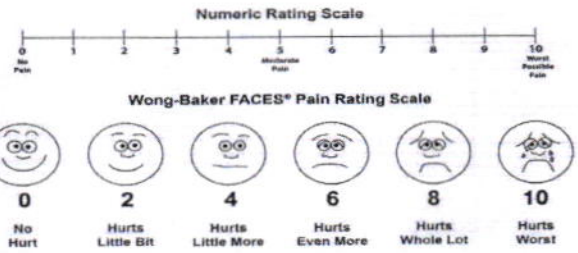
Reg. No.:- G-48712

Name :- *Abhinitasha Kumari*

Date:- *14/4/23*

Chief Complaints:-

POC



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 *1 1/4 mm or by*

ON Examination Ant. Segmenet

Both Eye

- WNL -

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CIN: L85110GJ2004PLC044667

Cornea

Anterior Chamber

Lens

Fundus

Rt. EYE

Lt. EYE

Media:-

Disc:-

Blood Vessel:-

Background:-

Macula:-

Diagnosis:-

} BE
WNL

Investigation:-

Treatment:-

Nutritional Assessment:-

Preventive Care & Counsellings:-

Follow Up ON:- After 6 month

RMS

Signature of the Consultant