

CPPC

From: Drashy Shukla
Sent: Wednesday, April 5, 2023 3:20 PM
To: CPPC
Subject: Fwd: Health Check up Booking Confirmed Request(bobE36603),Package Code-PKG10000240, Beneficiary Code-57809

Fyyi

Sent from [Outlook for Android](#)

From: Mediwheel <wellness@mediwheel.in>
Sent: Wednesday, 5 April 2023, 3:07 pm
To: Drashy Shukla <DRASHY.SHUKLA@bankofbaroda.com>
Cc: customercare@mediwheel.in <customercare@mediwheel.in>
Subject: Health Check up Booking Confirmed Request(bobE36603),Package Code-PKG10000240, Beneficiary Code-57809

****सावधान:** यह मेल बैंक डोमेन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिंक पर क्लिक ना करें या अटैचमेंट ना खोलें.

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011-41195959

Email:wellness@mediwheel.in

Dear **MR. SHUKLA DRASHY**,

Please find the confirmation for following request.

Booking Date :29-03-2023
Package Name :Medi-Wheel Metro Full Body Health Checkup Male Below 40
Name of Diagnostic/Hospital :Aashka Multispeciality Hospital
Address of Diagnostic/Hospital :Between Sargasan & Reliance Cross Road
Contact Details :9879752777/7577500900
City :Gandhi Nagar
State :Gujarat
Pincode :382315
Appointment Date :08-04-2023
Confirmation Status :Confirmed
Preferred Time :8:00am-9:00am
Comment :APPOINTMENT TIME 8:30AM

Instructions to undergo Health Check:

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
2. During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
3. Bring urine sample in a container if possible (containers are available at the Health Check centre).
4. Please bring all your medical prescriptions and previous health medical records with you.
5. Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

For Women:

1. Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
2. It is advisable not to undergo any Health Check during menstrual cycle.

Request you to reach half an hour before the scheduled time.

In case of further assistance, Please reach out to Team Mediwheel.

DR. DIPESH FATANIYA
M.D., IDCCM.
CRITICAL CARE MEDICINE
M.NO.-9909906809
R.NO.G-41495

UHID: 00423060		Date: 8/4/23	Time:
Patient Name: DARSHY SHUULA		Height: 177 cm	Weight: 88 kg
Age / Sex: 39 M LMP:			
History:			
C/C/O: Headache		History: HT	
Allergy History:		Addiction:	
Nutritional Screening: Well-Nourished / Malnourished / Obese			
Vitals & Examination:			
Temperature:			
Pulse: 80			
BP: (130/100 / 124/94)			
SPO2: 98			
Provisional Diagnosis:			

DR.TAPAS RAVAL
MBBS . D.O
(FELLOW IN PHACO & MEDICAL
RATINA)
REG.NO.G-21350

UHID: 00423060	Date: 08/04/23	Time:
Patient Name: Mr. Dheishy Shukley	Age / Sex: 33 / M.	Height: 177cm
		Weight: 88.7kg
History: do - Routine check up.		
Allergy History:		
Nutritional Screening: Well-Nourished / Malnourished / Obese		
Examination: NML 6/6 E 92		
Diagnosis:		



LABORATORY REPORT



Name : DRASHY SHUKLA	Sex/Age : Male / 39 Years	Case ID : 30402200157
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2665674
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 08-Apr-2023 09:36	Sample Type :	Mobile No :
Sample Date and Time : 08-Apr-2023 09:37	Sample Coll. By : non	Ref Id1 : O0423060
Report Date and Time :	Acc. Remarks : Normal	Ref Id2 : O2324209

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
Haemogram (CBC)			
PCV(Calc)	39.35	%	40.00 - 50.00
MCV (RBC histogram)	81.8	fL	83.00 - 101.00
MCHC (Calc)	34.9	gm/dL	31.50 - 34.50
Lipid Profile			
Cholesterol	246.76	mg/dL	110 - 200
Chol/HDL	4.93		0 - 4.1
LDL Cholesterol	163.55	mg/dL	65 - 100

Abnormal Result(s) Summary End

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)



LABORATORY REPORT



Name : DRASHY SHUKLA Sex/Age : Male / 39 Years Case ID : 30402200157
 Ref.By : HOSPITAL Dis. At : Pt. ID : 2665674
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 08-Apr-2023 09:36	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 08-Apr-2023 09:37	Sample Coll. By : non	Ref Id1 : O0423060
Report Date and Time : 08-Apr-2023 11:13	Acc. Remarks : Normal	Ref Id2 : O2324209

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
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HAEMOGRAM REPORT

HB AND INDICES

Haemoglobin (Colorimetric)	13.7	G%	13.00 - 17.00
RBC (Electrical Impedance)	4.81	millions/cumm	4.50 - 5.50
PCV(Calc)	L 39.35	%	40.00 - 50.00
MCV (RBC histogram)	L 81.8	fL	83.00 - 101.00
MCH (Calc)	28.6	pg	27.00 - 32.00
MCHC (Calc)	H 34.9	gm/dL	31.50 - 34.50
RDW (RBC histogram)	14.60	%	11.00 - 16.00

TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)

Total WBC Count	6910	/μL	4000.00 - 10000.00
Neutrophil	[%] 61.0	%	EXPECTED VALUES 40.00 - 70.00 [Abs] 4215
Lymphocyte	27.0	%	20.00 - 40.00 1866
Eosinophil	6.0	%	1.00 - 6.00 415
Monocytes	6.0	%	2.00 - 10.00 415
Basophil	0.0	%	0.00 - 2.00 0

PLATELET COUNT (Optical)

Platelet Count	264000	/μL	150000.00 - 410000.00
Neut/Lympho Ratio (NLR)	2.26		0.78 - 3.53

SMEAR STUDY

RBC Morphology	Normocytic Normochromic RBCs.
WBC Morphology	Total WBC count within normal limits.
Platelet	Platelets are adequate in number.
Parasite	Malarial Parasite not seen on smear.

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Shah

Dr. Manoj Shah
M.D. (Path. & Bact.)

Dr. Shreya Shah
M.D. (Pathologist)

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LABORATORY REPORT



Name : DRASHY SHUKLA Sex/Age : Male / 39 Years Case ID : 30402200157
Ref.By : HOSPITAL Dis. At : Pt. ID : 2665674
Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 08-Apr-2023 09:36	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 08-Apr-2023 09:37	Sample Coll. By : non	Ref Id1 : O0423060
Report Date and Time : 08-Apr-2023 11:48	Acc. Remarks : Normal	Ref Id2 : O2324209

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
ESR	12	mm after 1hr	3 - 15	

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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LABORATORY REPORT



Name : DRASHY SHUKLA Sex/Age : Male / 39 Years Case ID : 30402200157
 Ref.By : HOSPITAL Dis. At : Pt. ID : 2665674
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 08-Apr-2023 09:36	Sample Type : Spot Urine	Mobile No :
Sample Date and Time : 08-Apr-2023 09:37	Sample Coll. By : non	Ref Id1 : O0423060
Report Date and Time : 08-Apr-2023 10:05	Acc. Remarks : Normal	Ref Id2 : O2324209

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
URINE EXAMINATION (STRIP METHOD AND FLOWCYTOMETRY)				

Physical examination

Colour : Pale yellow
 Transparency : Clear

Chemical Examination By Sysmex UC-3500

Sp.Gravity	>1.025		1.005 - 1.030
pH	6.00		5 - 8
Leucocytes (ESTERASE)	Negative		Negative
Protein	Negative		Negative
Glucose	Negative		Negative
Ketone Bodies Urine	Negative		Negative
Urobilinogen	Negative		Negative
Bilirubin	Negative		Negative
Blood	Negative		Negative
Nitrite	Negative		Negative

Flowcytometric Examination By Sysmex UF-5000

Leucocyte	Nil	/HPF	Nil
Red Blood Cell	Nil	/HPF	Nil
Epithelial Cell	Present +	/HPF	Present(+)
Bacteria	Nil	/ul	Nil
Yeast	Nil	/ul	Nil
Cast	Nil	/LPF	Nil
Crystals	Nil	/HPF	Nil

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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LABORATORY REPORT



Name : DRASHY SHUKLA Sex/Age : Male / 39 Years Case ID : 30402200157
 Ref.By : HOSPITAL Dis. At : Pt. ID : 2665674
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 08-Apr-2023 09:36 Sample Type : Spot Urine Mobile No :
 Sample Date and Time : 08-Apr-2023 09:37 Sample Coll. By : non Ref Id1 : O0423060
 Report Date and Time : 08-Apr-2023 10:05 Acc. Remarks : Normal Ref Id2 : O2324209

Parameter	Unit	Expected value	Result/Notations				
			Trace	+	++	+++	++++
pH	-	4.6-8.0					
SG	-	1.003-1.035					
Protein	mg/dL	Negative (<10)	10	25	75	150	500
Glucose	mg/dL	Negative (<30)	30	50	100	300	1000
Bilirubin	mg/dL	Negative (0.2)	0.2	1	3	6	-
Ketone	mg/dL	Negative (<5)	5	15	50	150	-
Urobilinogen	mg/dL	Negative (<1)	1	4	8	12	-

Parameter	Unit	Expected value	Result/Notifications				
			Trace	+	++	+++	++++
Leukocytes (Strip)	/micro L	Negative (<10)	10	25	100	500	-
Nitrite(Strip)	-	Negative	-	-	-	-	-
Erythrocytes(Strip)	/micro L	Negative (<5)	10	25	50	150	250
Pus cells (Microscopic)	/hpf	<5	-	-	-	-	-
Red blood cells(Microscopic)	/hpf	<2	-	-	-	-	-
Cast (Microscopic)	/lpf	<2	-	-	-	-	-

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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Neuberg Supratech Reference Laboratories Private Limited

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Phone : 079-40408181 / 61618181 | Email : contact@supratechlabs.com | Website : www.neubergsupratech.com



LABORATORY REPORT



Name : DRASHY SHUKLA Sex/Age : Male / 39 Years Case ID : 30402200157
 Ref.By : HOSPITAL Dis. At : Pt. ID : 2665674
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 08-Apr-2023 09:36	Sample Type : Plasma Fluoride F, Plasma Fluoride PP	Mobile No :
Sample Date and Time : 08-Apr-2023 09:37	Sample Coll. By : non	Ref Id1 : 00423060
Report Date and Time : 08-Apr-2023 13:29	Acc. Remarks : Normal	Ref Id2 : 02324209

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Biochemical Investigations by Dimension EXL (Siemens)

Plasma Glucose - F <i>Photometric, Hexokinase</i>	96.57	mg/dL	70 - 100
Plasma Glucose - PP <i>Photometric, Hexokinase</i>	118.69	mg/dL	70.0 - 140.0

Reference range has been changed as per recent guidelines of ISPAD 2018.

<100 mg/dL : Normal level

100-<126 mg/dL: Impaired fasting glucoseer guidelines

>=126 mg/dL: Probability of Diabetes, Confirm as per guidelines

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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LABORATORY REPORT



Name : DRASHY SHUKLA Sex/Age : Male / 39 Years Case ID : 30402200157
 Ref.By : HOSPITAL Dis. At : Pt. ID : 2665674
 Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 08-Apr-2023 09:36 Sample Type : Serum Mobile No :
 Sample Date and Time : 08-Apr-2023 09:37 Sample Coll. By : non Ref Id1 : O0423060
 Report Date and Time : 08-Apr-2023 11:36 Acc. Remarks : Normal Ref Id2 : O2324209

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Liver Function Test

S.G.P.T. <i>UV with P5P</i>	49.83	U/L	16 - 63	
S.G.O.T. <i>UV with P5P</i>	25.46	U/L	15 - 37	
Alkaline Phosphatase <i>Enzymatic, PNPP-AMP</i>	107.34	U/L	46 - 116	
Gamma Glutamyl Transferase <i>Enzymatic</i>	32.21	U/L	0.00 - 64.00	
Proteins (Total) <i>Colorimetric, Biuret</i>	7.35	gm/dL	6.4 - 8.2	
Albumin <i>Bromocresol purple</i>	4.82	gm/dL	3.4 - 5	
Globulin <i>Calculated</i>	2.53	gm/dL	2 - 4.1	
A/G Ratio <i>Calculated</i>	1.9		1.0 - 2.1	
Bilirubin Total	0.58	mg/dL	0.2 - 1.0	
Bilirubin Conjugated <i>Diazotized Sulfanilic Acid Method</i>	0.20	mg/dL	0 - 0.20	
Bilirubin Unconjugated <i>Calculated</i>	0.38	mg/dL	0 - 0.8	

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh ,A-Abnormal)

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LABORATORY REPORT



Name : DRASHY SHUKLA	Sex/Age : Male / 39 Years	Case ID : 30402200157
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2665674
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 08-Apr-2023 09:36	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 08-Apr-2023 09:37	Sample Coll. By : non	Ref Id1 : O0423060
Report Date and Time : 08-Apr-2023 11:00	Acc. Remarks : Normal	Ref Id2 : O2324209

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Glycated Haemoglobin Estimation				
HbA1C	5.79		% of total Hb 4.80 - 6.00	
Estimated Avg Glucose (3 Mths) <i>Calculated</i>	119.47	mg/dL		

Please Note change in reference range as per ADA 2021 guidelines.

Interpretation :

HbA1C level reflects the mean glucose concentration over previous 8-12 weeks and provides better indication of long term glycemic control.
 Levels of HbA1C may be low as result of shortened RBC life span in case of hemolytic anemia.
 Increased HbA1C values may be found in patients with polycythemia or post splenectomy patients.
 Patients with Homozygous forms of rare variant Hb(CC,SS,EE,SC) HbA1c can not be quantitated as there is no HbA.
 In such circumstances glycemic control can be monitored using plasma glucose levels or serum Fructosamine.
 The A1c target should be individualized based on numerous factors, such as age, life expectancy, comorbid conditions, duration of diabetes, risk of hypoglycemia or adverse consequences from hypoglycemia, patient motivation and adherence.

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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LABORATORY REPORT



Name : DRASHY SHUKLA	Sex/Age : Male / 39 Years	Case ID : 30402200157
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2665674
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 08-Apr-2023 09:36	Sample Type : Serum	Mobile No :
Sample Date and Time : 08-Apr-2023 09:37	Sample Coll. By : non	Ref Id1 : O0423060
Report Date and Time : 08-Apr-2023 10:42	Acc. Remarks : Normal	Ref Id2 : O2324209

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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Thyroid Function Test

Triiodothyronine (T3)	116.29	ng/dL	70 - 204	
Thyroxine (T4) CMIA	7.1	ng/dL	4.6 - 10.5	
TSH CMIA	1.421	µIU/mL	0.4 - 4.2	

INTERPRETATIONS

- Circulating TSH measurement has been used for screening for euthyroidism, screening and diagnosis for hyperthyroidism & hypothyroidism. Suppressed TSH (<0.01 µIU/mL) suggests a diagnosis of hyperthyroidism and elevated concentration (>7 µIU/mL) suggest hypothyroidism. TSH levels may be affected by acute illness and several medications including dopamine and glucocorticoids. Decreased (low or undetectable) in Graves disease. Increased in TSH secreting pituitary adenoma (secondary hyperthyroidism), PRTN and in hypothalamic disease thyrotropin (tertiary hyperthyroidism). Elevated in hypothyroidism (along with decreased T4) except for pituitary & hypothalamic disease.
- Mild to modest elevations in patient with normal T3 & T4 levels indicates impaired thyroid hormone reserves & incipient hypothyroidism (subclinical hypothyroidism).
- Mild to modest decrease with normal T3 & T4 indicates subclinical hyperthyroidism.
- Degree of TSH suppression does not reflect the severity of hyperthyroidism, therefore, measurement of free thyroid hormone levels is required in patient with a suppressed TSH level.

CAUTIONS

Sick, hospitalized patients may have falsely low or transiently elevated thyroid stimulating hormone. Some patients who have been exposed to animal antigens, either in the environment or as part of treatment or imaging procedure, may have circulating antianimal antibodies present. These antibodies may interfere with the assay reagents to produce unreliable results.

TSH ref range in pregnancy

First trimester
Second trimester
Third trimester

Reference range (microIU/ml)

0.24 - 2.00
0.43-2.2
0.8-2.5

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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 Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 08-Apr-2023 09:36	Sample Type : Serum	Mobile No. :
Sample Date and Time : 08-Apr-2023 09:37	Sample Coll. By : non	Ref Id1 : O0423060
Report Date and Time : 08-Apr-2023 10:42	Acc. Remarks : Normal	Ref Id2 : O2324209

Interpretation Note:

Ultra sensitive-thyroid-stimulating hormone (TSH) is a highly effective screening assay for thyroid disorders. In patients with an intact pituitary-thyroid axis, s-TSH provides a physiologic indicator of the functional level of thyroid hormone activity. Increased s-TSH indicates inadequate thyroid hormone, and suppressed s-TSH indicates excess thyroid hormone. Transient s-TSH abnormalities may be found in seriously ill, hospitalized patients, so this is not the ideal setting to assess thyroid function. However, even in these patients, s-TSH works better than total thyroxine (an alternative screening test), when the s-TSH result is abnormal, appropriate follow-up tests T4 & free T3 levels should be performed. If TSH is between 5.0 to 10.0 & free T4 & free T3 level are normal then it is considered as subclinical hypothyroidism which should be followed up after 4 weeks & If TSH is > 10 & free T4 & free T3 level are normal then it is considered as overt hypothyroidism.

Serum triiodothyronine (T3) levels often are depressed in sick and hospitalized patients, caused in part by the biochemical shift to the production of reverse T3. Therefore, T3 generally is not a reliable predictor of hypothyroidism. However, in a small subset of hyperthyroid patients, hyperthyroidism may be caused by overproduction of T3 (T3 toxicosis). To help diagnose and monitor this subgroup, T3 is measured on all specimens with suppressed s-TSH and normal FT4 concentrations.

Normal ranges of TSH & thyroid hormones vary according trimester in pregnancy.

TSH ref range in Pregnancy	Reference range (microIU/ml)
First trimester	0.24 - 2.00
Second trimester	0.43-2.2
Third trimester	0.8-2.5

	T3	T4	TSH
Normal Thyroid function	N	N	N
Primary Hyperthyroidism	↑	↑	↓
Secondary Hyperthyroidism	↑	↑	↑
Grave's Thyroiditis	↑	↑	↑
T3 Thyrotoxicosis	↑	N	N/↓
Primary Hypothyroidism	↓	↓	↑
Secondary Hypothyroidism	↓	↓	↓
Subclinical Hypothyroidism	N	N	↑
Patient on treatment	N	N/↑	↓

----- End Of Report -----

For test performed on specimens received or collected from non-NSRL locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender. NSRL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Manoj Shah
M.D. (Path. & Bact.)

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Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

08.04.2023 11:12:59 AM
AASHIKA HOSPITAL LTD.
SARGASAN
GANDHINAGAR

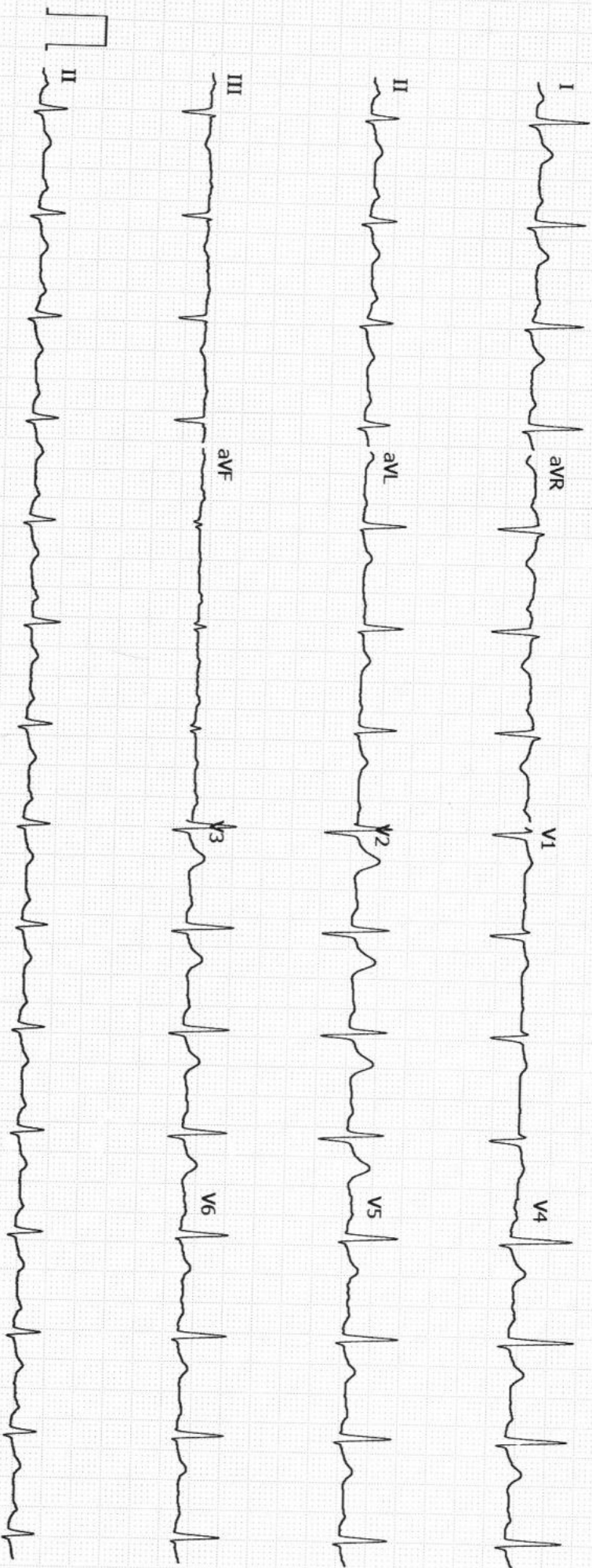
Location: 1
Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3:

Room:

88 bpm
-- / -- mmHg

QRS : 80 ms
QT / QTcBaz : 354 / 428 ms
PR : 186 ms
P : 118 ms
RR / PP : 682 / 681 ms
P / QRS / T : 43 / -7 / 14 degrees

Normal sinus rhythm
Inferior infarct , age undetermined
Abnormal ECG



GE MAC2000 1.1 12SL™ v241

25 mm/s 10 mm/mV

ADS 0.56-20 Hz 50 Hz

Unconfirmed
4x2.5x3_25_R1 1/1

Aashka Hospitals Ltd.

Between Sargasan and Reliance Cross Roads

Sargasan, Gandhinagar - 382421. Gujarat, India

Phone: 079-29750750, +91-7575006000 / 9000

Emergency No.: +91-7575007707 / 9879752777

www.aashkahospitals.in

CIN: L85110GJ2012PLC072647

 **aashka**
H O S P I T A L



PATIENT NAME:MR.DRASHY SHUKLA

GENDER/AGE:Male / 39 Years

DATE:08/04/23

DOCTOR:

OPDNO:00423060

SONOGRAPHY OF ABDOMEN AND PELVIS

LIVER: Liver appears normal in size and shows increased parenchymal echoes suggest fatty changes. No evidence of focal lesion is seen. No evidence of dilated IHBR is seen. Intrahepatic portal radicles appear normal. No evidence of solid or cystic mass lesion is seen.

GALL BLADDER: Gall bladder is physiologically distended and appears normal. No evidence of calculus or changes of cholecystitis are seen. No evidence of pericholecystic fluid collection is seen. CBD appears normal.

PANCREAS: Pancreas appears normal in size and shows normal parenchymal echoes. No evidence of pancreatitis or pancreatic mass lesion is seen.

SPLEEN: Spleen appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen.

KIDNEYS: Both kidneys are normal in size, shape and position. Both renal contours are smooth. Cortical and central echoes appear normal. Bilateral cortical thickness appears normal. No evidence of renal calculus, hydronephrosis or mass lesion is seen on either side. No evidence of perinephric fluid collection is seen.

Right kidney measures about 10.0 x 4.1 cms in size.

Left kidney measures about 10.3 x 4.4 cms in size.

No evidence of suprarenal mass lesion is seen on either side.

Aorta, IVC and para aortic region appears normal.

No evidence of ascites is seen.

BLADDER: Bladder is normally distended and appears normal. No evidence of bladder calculus, diverticulum or mass lesion is seen. Prevoid bladder volume measures about 140 cc.

UTERUS: Uterus is anteverted and appears normal in size, shape and position. Endometrial and myometrial echoes appear normal. Endometrial thickness measures about 5.3 mm. No evidence of uterine mass lesion is seen.

Bilateral adenal regions appear unremarkable.

COMMENT: Grade I fatty changes.

Normal sonographic appearance of GB, pancreas, spleen, kidneys, para aortic region, bladder and uterus.


DR. SNEHAL PRAJAPATI

Aashka Hospitals Ltd.

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CIN: L85110GJ2012PLC072647



PATIENT NAME:MR.DRASHY SHUKLA

GENDER/AGE:Male / 39 Years

DATE:08/04/23

DOCTOR:

OPDNO:O0423060

X-RAY CHEST PA

Both lung fields show increased broncho-vascular markings.

No evidence of collapse, consolidation, mediastinal lymph adenopathy, soft tissue infiltration or pleural effusion is seen.

Both hilar shadows and C.P. angles are normal.

Heart shadow appears normal in size. Aorta appears normal.

Bony thorax and both domes of diaphragm appear normal.

No evidence of cervical rib is seen on either side.

DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST

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**PATIENT NAME:MR.DRASHY SHUKLA****GENDER/AGE:Male / 39 Years****DATE:08/04/23****DOCTOR:DR.HASIT JOSHI****OPDNO:O0423060****2D-ECHO**

MITRAL VALVE	: NORMAL	
AORTIC VALVE	: NORMAL	
TRICUSPID VALVE	: NORMAL	
PULMONARY VALVE	: NORMAL	
AORTA	: 34mm	
LEFT ATRIUM	: 38mm	
LV Dd / Ds	: 50/33mm	EF 65%
IVS / LVPW / D	: 14/12mm	CONCENTRIC LVH
IVS	: INTACT	
IAS	: INTACT	
RA	: NORMAL	
RV	: NORMAL	
PA	: NORMAL	
PERICARDIUM	: NORMAL	
VEL	: PEAK	MEAN
M/S	: Gradient mm Hg	Gradient mm Hg
MITRAL	: 1/1m/s	
AORTIC	: 1.7m/s	
PULMONARY	: 1.4m/s	
COLOUR DOPPLER	: TRIVIAL MR/TR	
RVSP	: 28mmHg	
CONCLUSION	: CONCENTRIC LVH; MILDLY DILATED LV; NORMAL LV FUNCTION.	

CARDIOLOGIST**DR.HASIT JOSHI (9825012235)**