

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:-

Rantu Vaghela

Date: *13/2/23*

Age / Sex :-

33 F.

Weight:-

Chief Complaints:-

Height:-

Nocha

Nutritional assessment:-

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

Drug / Food Allergy:-

Past History :-

NAD

Pulse:- *83/min*

BP:- *120/104*

SpO2:- *98%*

Family History:-

Systemic Examination:-

RS / NAD
PA
CNS

Provisional Diagnosis:-

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

Investigation :-

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

Rx

- I. Olmet AM (30)
1 tab. daily
- T. Cardinose 10mg (30)

- 1 -

normal except. hypertension

Follow Up:

after one month general

Date:-

13/2/23

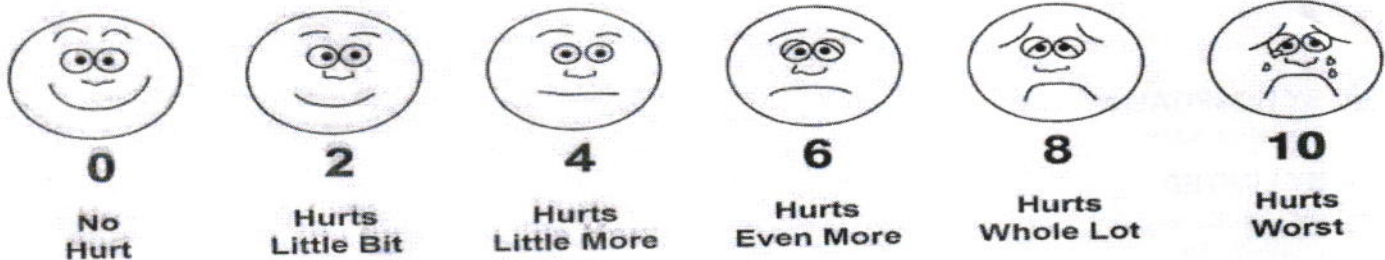
બધી દવાઓ ડોક્ટરને બતાવીને લેવી.

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

Numeric Rating Scale



Wong-Baker FACES® Pain Rating Scale



Patient ID:	SUR0000334753	Patient Name:	PARTH G. VAGHELA
Age:	33 Years	Sex:	M
Accession Number:	1668	Modality:	DX
Referring Physician:		Study:	CHEST PA
Study Date:	13-Feb-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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Vapi - Indore - Jabalpur - Mohali - Naroda (Ahmedabad) - Surat - Jaipur - Mumbai



For OPD & Billing Use

DR. NISHA . A. PATEL
B.D.S. DENTAL SURGEON
email ID : dr.nishapatel.2890@gmail.com
Mob. No. : 8758175452

SHALBY
MULTI-SPECIALTY
HOSPITAL

OPR NO:

Shalby Dental Clinic

Patient Name:- Parth Girishbhai Jayheda
Age / Sex :- 33/M
Chief Complaints:-

Date: 13/02/23
Weight:-
Height:-

Routine check up

Nutritional assessment:-

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

Drug / Food Allergy:-
Past History :-

Family History:-
Systemic Examination:-

Provisional Diagnosis:-

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

Investigation :-

-stein⁺⁺, calculus⁺

-cavity = 37

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

Adv.

-scaling

- Restoration of 37

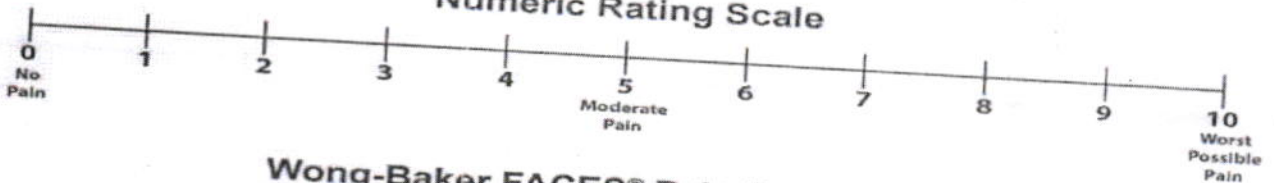
Follow Up:

બધી દવાઓ ડોક્ટરને બતાવીને લેવી.

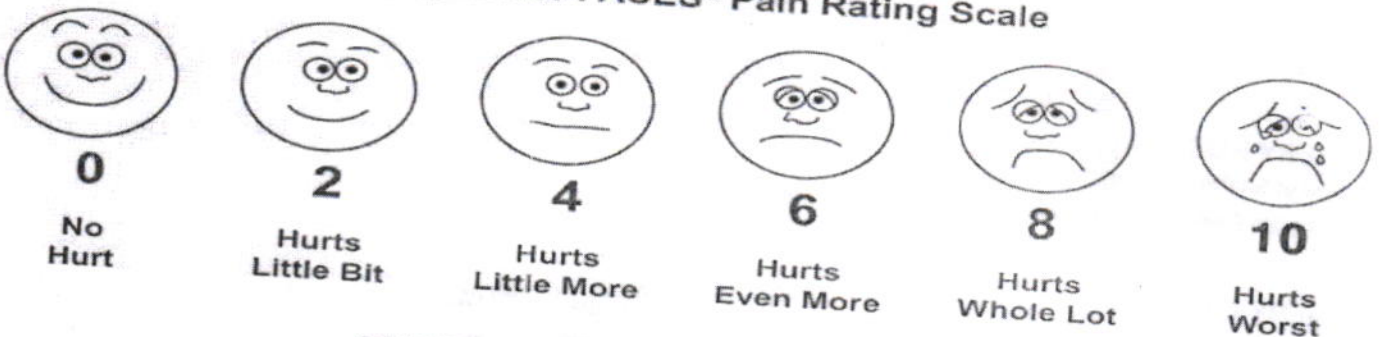
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Numeric Rating Scale



Wong-Baker FACES® Pain Rating Scale



Patient Name: Parth G Vaghela	
Age / Sex : 33 Yrs / Male	Study: USG Abdomen + Pelvis
Referred By: Dr. Shalby Hospital	Date: 13/02/2023

ULTRASOUND OF ABDOMEN AND PELVIS

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. **MPD** appears in size. No mass lesion or calcification seen.

Spleen appears normal in size and appearance. No focal lesion seen.

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

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

Ureters are not dilated.

Urinary bladder well distended and appears normal. No evidence of any intraluminal mass or calculi.

Prostate is normal in size. It has smooth outlines and normal reflectivity.

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

IMPRESSION:

- No any significant abnormality is seen.

Thanks for referral.


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Consultant Radiologist

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Patient's Name: Mr. Parth Vaghela

Age: 33 yrs/ male

UHID: 334753

Date: 13 / 02 / 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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ID: _____ Name: _____ years

Sex: M Birth date: / / mmHg

cm kg

Medication: _____

Symptoms: _____

History: _____

Heart rate: 83 bpm

PR int: 150 ms

QRS dur: 104 ms

QT/QTc(E) int: 338/ 378 ms

P/QRS/T axis: 8/ -5/ 30 °

RV5/SV1 amp: 1.32/ 0.59 mV

RV5+SV1 amp: 1.91 mV

1100 Sinus rhythm

2440 Incomplete right bundle branch block

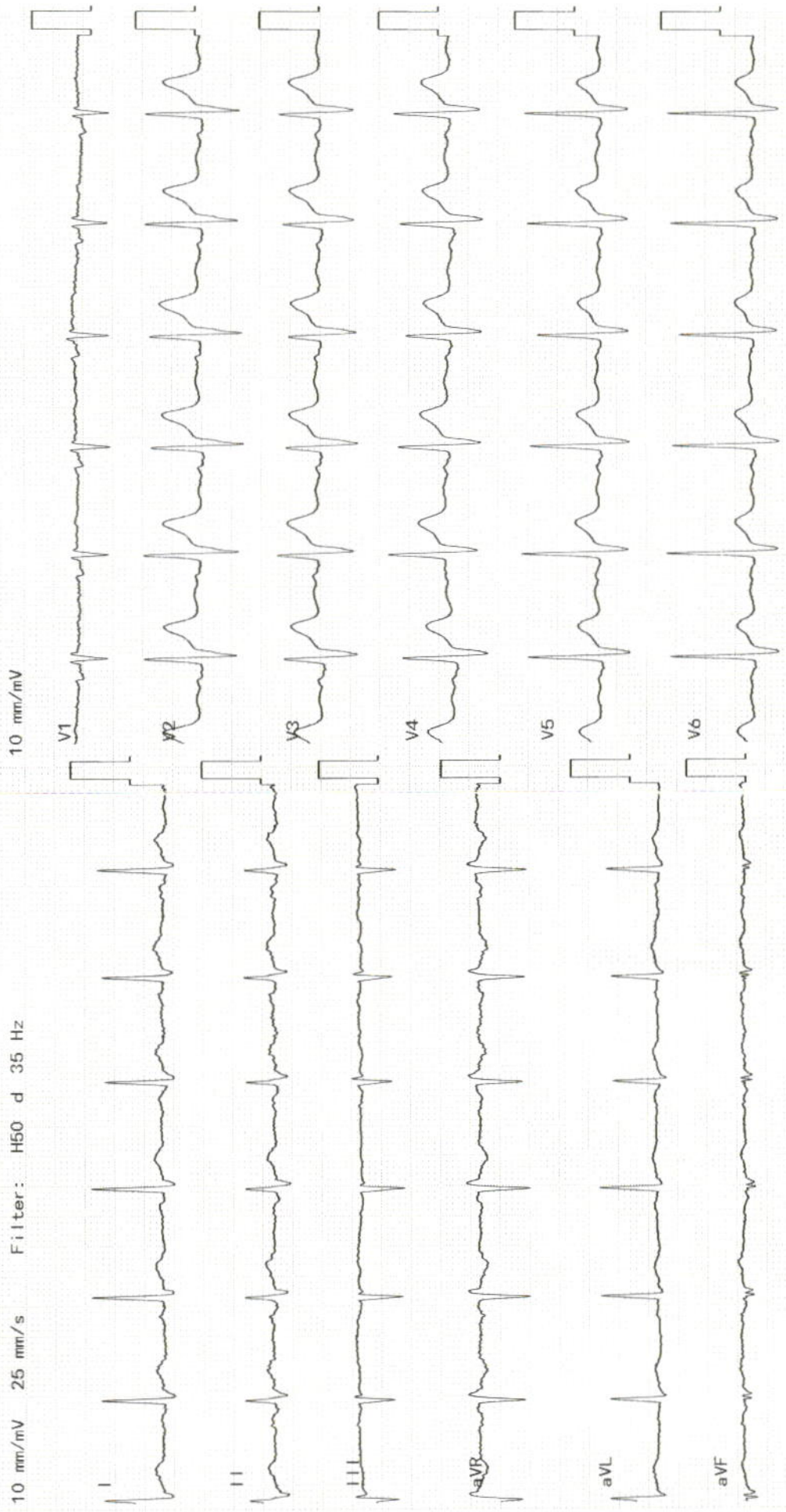
4038 Nonspecific ST elevation

4048 Nonspecific ST & Twave abnormality

9130 ** borderline ECG **

Reath

Unconfirmed Report
Reviewed by:



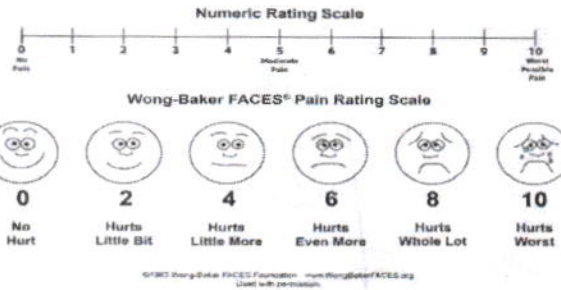
DR. RUJUTA SHELAT
Consultant Ophthalmologist
Reg. No.:- G-48712

Name :- *Parth Vaghela*

Date:- *13/2/23*

Chief Complaints:-

N/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 *< 13* mm of *fg*

ON Examination

Ant. Segmenet

Both Eye

- WNL -

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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

RRR

Signature of the Consultant

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

PID : SUR0000334753 OP-001

REPORT STATUS : Interim



Patient Name : Mr Parth Girishchandra Vaghela /	Registered On : 13-Feb-2023 09:18 AM
Lab ID : 302900931	Collected On : 13-Feb-2023 09:11 AM
Gender/Age : Male / 37 Years	DOB : 17-May-1985
Ref. By : Dr. Health Check Up . Shalby	Received On : 13-Feb-2023 09:33 AM
	Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
BLOOD COUNT AND INDICIES			
HAEMOGLOBIN <i>Colorimetric Non Cyanide</i>	16.0	g/dL	13.0 - 17.0
RBC COUNT <i>Electrical Impedance</i>	5.49	mill/cmm	4.5 - 5.5
HCT <i>Calculated</i>	49.0	%	40 - 50
MCV <i>Calculated based on the RBC histogram</i>	89.3	fL	83 - 101
MCH <i>Calculated</i>	29.1	pg	27 - 32
MCHC <i>Calculated</i>	32.6	g/dL	31.5 - 34.5
RDW <i>Calculated</i>	11.7	%	13.3 - 18.3
TOTAL LEUCOCYTE COUNT			
Total WBC Count <i>Electrical Impedance</i>	6210	cells/cmm	4000 - 10000
DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)			
NEUTROPHILS <i>Flow Cytometry</i>	52	%	40 - 80
LYMPHOCYTES <i>Flow Cytometry</i>	31	%	20 - 40
EOSINOPHILS <i>Flow Cytometry</i>	12	%	1 - 6
MONOCYTES <i>Flow Cytometry</i>	5	%	2 - 10
BASOPHIL <i>Flow Cytometry</i>	0	%	0 - 2
PLATELET INDICES			
PLATELET COUNT <i>Electrical Impedance</i>	295000	/cmm	150000 - 410000
MPV <i>Calculated based on PLT Histogram</i>	9.2	fL	7.5 - 12.0
PERIPHERAL SMEAR EXAMINATION			
RBCs	Normochromic and Normocytic.		
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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Approved On : 13-Feb-2023 11:09 AM

Dr Pankaj Agrawal
Dr Pankaj Agrawal
 M.B., D.C.P
 Consulting Pathologist

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	Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
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BLOOD GROUP

(Tube agglutination: Forward & reverse)

ABO Type	"O"		
RH Type	POSITIVE		
ESR 1st hour *	7	mm in 1 hour	0 - 15
<i>Modified Westergren Method</i>			
HBA1C			
HbA1c - Glycated Haemoglobin *	5.6	%	Non-diabetic: <= 5.6 Pre-diabetic: 5.7-6.4 Diabetic: >= 6.5 Therapeutic goals for glycemc 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) *	114	mg/dL
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Calculated

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Consulting Pathologist

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Received On : 13-Feb-2023 09:33 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)	97	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)	119	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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Ref. By : Dr. Health Check Up . Shalby	Received On : 13-Feb-2023 09:33 AM
	Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
LIPID PROFILE			
LIPID PROFILE			
Cholesterol <i>Cholesterol Esterase, Oxidase, Peroxidase</i>	184	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
S.TRIGLYCERIDE <i>Lipase/GK/GPO/POD</i>	136	mg/dL	Normal : <150 Borderline High : 150-199 High : 200-499 Very High : > 500
S.dHDL * <i>Phosphotungstic Acid/Mgcl2 - Enzymatic</i>	40	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : >= 60
Non HDL Cholesterol <i>Calculated</i>	144	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
S.LDL <i>Calculated</i>	117	mg/dL	Optimal: <100 Near to above Optimal: 100 - 129 Borderline High: 130 - 159 High: 160 - 189 Very High: > 190
VLDL <i>Calculated</i>	27	mg/dL	6 - 38
LDL/dHDL * <i>Calculated</i>	2.9		2.5 - 3.5
Chol/dHDL * <i>Calculated</i>	4.6	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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Ref. By : Dr. Health Check Up . Shalby	

Parameter	Result	Unit	Biological Ref. Interval
RENAL FUNCTION TEST			
RENAL FUNCTION TEST			
Urea Nitrogen (BUN)	10	mg/dL	9 - 20
<i>Urease, colorimetric</i>			
UREA	21	mg/dL	19 - 43
<i>Calculated</i>			
S. CREATININE	0.94	mg/dL	0.66 - 1.25
<i>Enzymatic - Creatinine amidohydrolase</i>			
S. URIC ACID	6.8	mg/dL	3.5 - 8.5
<i>Uricase/Peroxidase, Colorimetric</i>			
Calcium	9.1	mg/dL	8.4 - 10.2
<i>Arsenazo III dye</i>			
S. PHOSPHORUS *	3.5	mg/dL	2.5 - 4.5
<i>Phosphomolybdate reduction (PMA Phenol)</i>			
Sodium	139	mmol/L	137 - 145
<i>Direct Ion Selective Electrode</i>			
S. POTASSIUM	4.50	mmol/L	3.5 - 5.1
<i>Direct Ion Selective Electrode</i>			
Chloride	99	mmol/L	98 - 107
<i>Direct Ion Selective Electrode</i>			

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Ref. By : Dr. Health Check Up . Shalby	Received On : 13-Feb-2023 09:33 AM
	Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
Total T3 * <i>Chemiluminescence immunoassay (CLIA)</i>	110	ng/dL	87 - 178
Total T4 * <i>Chemiluminescence immunoassay (CLIA)</i>	11.13	µg/dL	6.09 - 12.23
TSH * <i>Chemiluminescence immunoassay (CLIA)</i>	1.91	µIU/mL	0.38 - 5.33

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Patient Name : Mr Parth Girishchandra Vaghela /	Registered On : 13-Feb-2023 09:18 AM
Lab ID : 302900931	Collected On : 13-Feb-2023 09:11 AM
Gender/Age : Male / 37 Years	DOB : 17-May-1985
Received On : 13-Feb-2023 09:33 AM	Sample Type : Urine
Ref. By : Dr. Health Check Up . Shalby	

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
Bilirubin	<i>Azo coupling Reaction with diazonium</i>	NIL	mg/dL
Urobilinogen	<i>Modified Ehrlich reaction</i>	NORMAL	mg/dL
Ketone	<i>Sodium Nitroprusside reaction</i>	NIL	mg/dL
Protein	<i>Protein Error of Indicator Principle</i>	NIL	mg/dL
Nitrite	<i>Diazotization reaction of nitrite with an aromatic amine</i>	NEGATIVE	mg/dL
Glucose	<i>Glucose-oxidase/oxidase reaction</i>	NIL	mg/dL
pH	<i>Double Indicator principle</i>	6.0	PH value
Specific Gravity	<i>Refractometric Method - Bromthymol blue</i>	1.020	S.G. value
Leucocyte	<i>Leucocyte Esterase Test</i>	NEGATIVE	WBCs/ μ L
Microscopic Examination			
Pus cells	0-2/hpf	/hpf	0-5/hpf
Red blood cells	0-1/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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Dr Pankaj Agrawal

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

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

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

PID : SUR0000334753 OP-001

REPORT STATUS : Interim



Patient Name : Mr Parth Girishchandra Vaghela /	Registered On : 13-Feb-2023 09:18 AM
Lab ID : 302900931	Collected On : 13-Feb-2023 09:11 AM
Gender/Age : Male / 37 Years	DOB : 17-May-1985
Received On : 13-Feb-2023 09:33 AM	Sample Type : Serum
Ref. By : Dr. Health Check Up . Shalby	

Parameter	Result	Unit	Biological Ref. Interval
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Liver Function Test**Liver Function Test**

SGPT (ALT) <i>Multi Point Rate with P-5-P</i>	58	U/L	21 - 72
SGOT (AST) <i>Multi Point Rate with P-5-P</i>	29	U/L	17 - 59
Alkaline Phosphatase <i>PNPP, AMP Buffer</i>	69	U/L	20-50 yrs : 53 - 128 4-19 yr : 54 - 369 >=51 yr : 56 - 119
GGT * <i>L-gamma-glutamyl-4-nitroanilide/glycylglycine Kinetic</i>	27	U/L	15 - 73
S. PROTEIN <i>Biuret (Alkaline cupric sulfate), End Point</i>	7.8	g/dL	6.3 - 8.2
Albumin <i>Bromocresol Green (BCG), Colorimetric</i>	4.8	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>	1.6	Ratio	1.0 - 2.3
Bilirubin Total <i>Azobilirubin/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>	0.4.	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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Consulting Pathologist

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