

Passion • Compassion • Innovation  
MBBS, D.N.B. (Family Medicine)  
C.I.H (Industrial Health)  
C.C.P.P.M (Pain & Palliative Medicine)  
MNAMS, Marine medical Examiner  
C.C.E.B.D.M. [Diabetes]  
Phone. No. : 9998480543  
OPD Days :

### Consultant Physician Clinic

Patient Name:- Sapna R. Jadhav.  
Age / Sex :- 27 y/f  
Chief Complaints:-

GO AWL

### OPR NO:

Date: 15/04/23  
Weight:- 54 kg  
Height:- 155 cm  
BMI:- 22.5

### Nutritional assessment:-

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

Drug / Food Allergy:- NADA. covid vaccination done

Pulse. 82 b/min  
BP:- 120/60 mm  
SpO2:- 100%

Past History :-

AWL  
AWL

Family History:-  
Systemic Examination:-

N.A.D.

Provisional Diagnosis: Normal health check up.

### 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.  
Corp. Office: B-301 & 302, Mondeal Heights, 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

Investigation :-

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

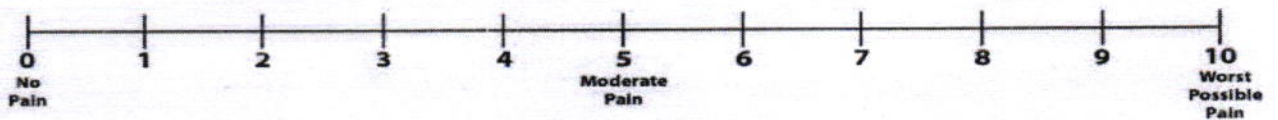
R<sub>x</sub>

Follow Up Date:-           sos          

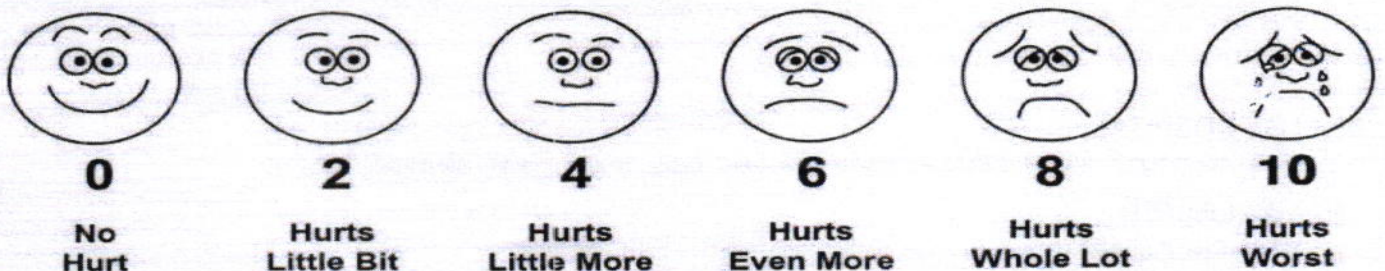
બધી દવાઓ ડોક્ટરને બતાવીને લેવી.

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

**Numeric Rating Scale**



**Wong-Baker FACES® Pain Rating Scale**



Shalby Hospital (A Unit of Shalby Limited) Near Navyug College, Rander Road, Adajan, Surat, Gujarat, India.  
Tel.: 0261 7190000 | Ext.: 851 | Mo.: 9512036046 | Email : pathology.surat@shalby.in | Web : www.shalby.org

PID : SUR0000339913 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Sapna Rajesh Jadav	/	Registered On : 15-Apr-2023 09:26 AM
Lab ID : 304901071		Collected On : 15-Apr-2023 09:31 AM
Gender/Age : Female / 27 Years	DOB : 01-Nov-1995	Received On : 15-Apr-2023 09:51 AM
Ref. By : Dr. Health Check Up . Shalby		Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
<b>BLOOD COUNT AND INDICIES</b>			
HAEMOGLOBIN <i>Colorimetric Non Cyanide</i>	10.9	g/dL	12.0 - 15.0
RBC COUNT <i>Electrical Impedance</i>	4.58	mill/cmm	3.8 - 4.8
HCT <i>Calculated</i>	35.0	%	36 - 46
MCV <i>Calculated based on the RBC histogram</i>	76.4	fL	83 - 101
MCH <i>Calculated</i>	23.8	pg	27 - 32
MCHC <i>Calculated</i>	31.2	g/dL	31.5 - 34.5
RDW <i>Calculated</i>	15.2	%	11.6 - 14.0

**TOTAL LEUCOCYTE COUNT**

Total WBC Count <i>Electrical Impedance</i>	7320	cells/cmm	4000 - 10000
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**DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)**

NEUTROPHILS <i>Flow Cytometry</i>	51	%	40 - 80
LYMPHOCYTES <i>Flow Cytometry</i>	45	%	20 - 40
EOSINOPHILS <i>Flow Cytometry</i>	1	%	1 - 6
MONOCYTES <i>Flow Cytometry</i>	3	%	2 - 10
BASOPHIL <i>Flow Cytometry</i>	0	%	0 - 2

**PLATELET INDICES**

PLATELET COUNT <i>Electrical Impedance</i>	345000	/cmm	150000 - 410000
MPV <i>Calculated based on PLT Histogram</i>	9.2	fL	7.5 - 12.0

**PERIPHERAL SMEAR EXAMINATION**

RBCs	<b>Hypochromic microcytic with anisopoikilocytosis.</b>
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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Dr Pankaj Agrawal

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

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Certificate No.: MC-6200

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Gender/Age : Female / 27 Years

DOB : 01-Nov-1995

Received On : 15-Apr-2023 09:51 AM

Ref. By : Dr. Health Check Up . Shalby

Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
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**BLOOD GROUP**

(Tube agglutination: Forward &amp; reverse)

ABO Type

"O"

RH Type

POSITIVE

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Parameter	Result	Unit	Biological Ref. Interval
<b>ESR 1st hour *</b> <i>Modified Westergren Method</i>	20	mm in 1 hour	0 - 20
<b>HBA1C</b> <b>HbA1c - Glycated Haemoglobin *</b> <i>Boronate Affinity Assay</i>	5.9	%	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) \*** 123 mg/dL  
*Calculated*

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Lab ID : 304901071 Collected On : 15-Apr-2023 09:31 AM  
Gender/Age : Female / 27 Years DOB : 01-Nov-1995 Received On : 15-Apr-2023 09:50 AM  
Ref. By : Dr. Health Check Up . Shalby Sample Type : Serum, Urine (PP),  
Fluoride P, Urine, Serum

Parameter	Result	Unit	Biological Ref. Interval
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**PLASMA GLUCOSE LEVEL****FASTING PLASMA GLUCOSE**

<b>Plasma Glucose (F)</b>	100	mg/dL	74 - 106
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GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

<b>Urine Sugar (F)</b>	ABSENT	mg/dL	ABSENT
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Glucose-oxidase/oxidase reaction

**POST PRANDIAL PLASMA GLUCOSE**

<b>Plasma Glucose (PP)</b>	94	mg/dL	Normal: 100-140 Impaired: 140-199 Diabetic :=>200
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GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

<b>Urine Sugar (PP)</b>	ABSENT	mg/dL	ABSENT
-------------------------	--------	-------	--------

Glucose-oxidase/oxidase reaction

**Liver Function Test****Liver Function Test**

<b>SGPT (ALT)</b>	32	U/L	9 - 52
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Multi Point Rate with P-5-P

<b>SGOT (AST)</b>	25	U/L	14 - 36
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Multi Point Rate with P-5-P

<b>Alkaline Phosphatase</b>	55	U/L	20-50 yrs.: 42 - 98
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PNPP, AMP Buffer

<b>GGT *</b>	44	U/L	4-19 yr : 54 - 369
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L-gamma-glutamyl-4-nitroanalide/glycylglycine Kinetic

<b>S. PROTEIN</b>	7.5	g/dL	12 - 43
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Biuret (Alkaline cupric sulfate), End Point

<b>Albumin</b>	4.4	g/dL	6.3 - 8.2
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Bromocresol Green (BCG), Colorimetric

<b>S. GLOBULIN</b>	3.1	g/dL	3.5 - 5.0
--------------------	-----	------	-----------

Calculated

<b>A/G Ratio</b>	1.4	Ratio	2.3 - 3.6
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Calculated

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Lab ID : 304901071

Collected On : 15-Apr-2023 09:31 AM

Gender/Age : Female / 27 Years

DOB : 01-Nov-1995

Received On : 15-Apr-2023 09:50 AM

Ref. By : Dr. Health Check Up . Shalby

Sample Type : Serum, Urine (PP),  
Fluoride P, Urine, Serum**Liver Function Test****Bilirubin Total**

0.7

mg/dL

Azobilirubin/Dyphylline/Diazonium Salt

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**Bilirubin Unconjugated**

0.7

mg/dL

End-point Colorimetric (Dual wavelength spectrophotometric)

Adult : 0.2 - 1.3

Unconjugated bilirubin

Adults: 0.0-1.1

Neonates: 0.6-10.5

**BILIRUBIN DIRECT**

0.0

mg/dL

Calculated

Conjugated bilirubin and  
Delta bilirubin (Bilirubin  
covalently bound to albumin)  
0.0-0.4

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Gender/Age : Female / 27 Years

DOB : 01-Nov-1995

Received On : 15-Apr-2023 09:50 AM

Ref. By : Dr. Health Check Up . Shalby

Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
<b>LIPID PROFILE</b>			
<b>LIPID PROFILE</b>			
<b>Cholesterol</b> <i>Cholesterol Esterase, Oxidase, Peroxidase</i>	183	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
<b>SERUM TRIGLYCERIDE</b> <i>Lipase/GK/GPO/POD</i>	93	mg/dL	Normal : <150 Borderline High : 150-199 High : 200-499 Very High : > 500
<b>HDL CHOLESTEROL DIRECT *</b> <i>Phosphotungstic Acid/Mgcl2 - Enzymatic</i>	42	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : >= 60
<b>Non HDL Cholesterol</b> <i>Calculated</i>	141	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
<b>S.LDL</b> <i>Calculated</i>	122	mg/dL	Optimal: <100 Near to above Optimal: 100 - 129 Borderline High: 130 - 159 High: 160 - 189 Very High: > 190
<b>VLDL</b> <i>Calculated</i>	19	mg/dL	6 - 38
<b>LDL/dHDL *</b> <i>Calculated</i>	2.9		2.5 - 3.5
<b>Chol/dHDL *</b> <i>Calculated</i>	4.4	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**

<b>Urea Nitrogen (BUN)</b> <i>Urease, colorimetric</i>	12	mg/dL	7 - 17
<b>UREA</b> <i>Calculated</i>	26	mg/dL	15 - 36
<b>S. CREATININE</b> <i>Enzymatic - Creatinine amidohydrolase</i>	0.62	mg/dL	0.52 - 1.04
<b>S. URIC ACID</b> <i>Uricase/Peroxidase, Colorimetric</i>	4.3	mg/dL	2.5 - 6.2
<b>Calcium</b> <i>Arsenazo III dye</i>	9.2	mg/dL	8.4 - 10.2
<b>S. PHOSPHORUS *</b> <i>Phosphomolybdate reduction (PMA Phenol)</i>	5.0	mg/dL	2.5 - 4.5
<b>Sodium</b> <i>Direct Ion Selective Electrode</i>	139	mmol/L	137 - 145
<b>S. POTASSIUM</b> <i>Direct Ion Selective Electrode</i>	4.52	mmol/L	3.5 - 5.1
<b>Chloride</b> <i>Direct Ion Selective Electrode</i>	106	mmol/L	98 - 107

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

Parameter	Result	Unit	Biological Ref. Interval
<b>Total T3 *</b> <i>Chemiluminescence immunoassay (CLIA)</i>	113	ng/dL	87 - 178
<b>Total T4 *</b> <i>Chemiluminescence immunoassay (CLIA)</i>	11.37	µg/dL	6.09 - 12.23
<b>TSH *</b> <i>Chemiluminescence immunoassay (CLIA)</i>	3.08	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 : 304901071		Collected On : 15-Apr-2023 10:04 AM
Gender/Age : Female / 27 Years	DOB : 01-Nov-1995	Received On : 15-Apr-2023 10:19 AM
Ref. By : Dr. Health Check Up . Shalby		Sample Type : Urine

## URINE EXAMINATION

Parameter	Result	Unit	Biological Ref. Interval
<b>Physical Examination</b>			
Colour	PALE YELLOW		Pale yellow
Transparency	Slightly Turbid		Clear
<b>Chemical Examination</b>			
Blood	<i>Peroxidase like activity of hemoglobin</i>	NIL	RBCs/ $\mu$ 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>	1.025	S.G. value
Leucocyte	<i>Leucocyte Esterase Test</i>	Present (+)	WBCs/ $\mu$ L
<b>Microscopic Examination</b>			
Pus cells	6-8/hpf	/hpf	0-5/hpf
Red blood cells	NIL	/hpf	0-2/hpf
Epithelial cells	15-20/hpf	/hpf	NA
Crystals	NIL		Nil
Cast	NIL/LPF		Nil/LPF
Bacteria	PRESENT		Nil
Amorphous	NIL		Nil
Yeast	NIL		Nil

End of Report

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Consulting Pathologist



Pre - op

Post-op

Health Check-up

Date : 25/04/23

Patient Reg. No. : \_\_\_\_\_

Patient Name : Sapna R. Jadhav

Age / Sex : 27/F

Address : Sweet

**Complaints :**

Pain : \_\_\_\_\_

Bleeding gums : \_\_\_\_\_

Swelling : \_\_\_\_\_

Sensitivity : \_\_\_\_\_

Pus Discharge : \_\_\_\_\_

**Medical History :**

Hypertension : \_\_\_\_\_ DM \_\_\_\_\_ Acidity \_\_\_\_\_ Pregnancy : \_\_\_\_\_

Bleeding Disorders : \_\_\_\_\_ Asthma : \_\_\_\_\_ Allergy : \_\_\_\_\_

Past Surgical Intervention : \_\_\_\_\_

Any Medication : sterim ++, antibiotics +

**On Examination :**

Abscess : \_\_\_\_\_ Food lodgement : \_\_\_\_\_

Periodontitis : \_\_\_\_\_ Gingivitis : \_\_\_\_\_

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  
Infertily Specialist  
Email-ID:- thaker.himani@gmail.com  
Register No. G-31062

**Shalby Women's Health Clinic**

Name:- Jayne Jadav  
Chief Complaints:-

Age - 27yrs

Date: 15/4/23

Weight:-

Height:-

OPR NO:-

Nutritional Assessment:-

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

Cl white discharge plv

LMP:- 14/3/23

M/H:- pain - 3-4 days plv  
30

O/H :- plv

P/H:- R FTND  
F/H and focus  
Examination:- (O) / 740 /  
(F) / 340 /  
tl done

Provisional Diagnosis:-  
PLA - soft  
PLS - erosion ⊕ on post lip.  
maternal follicles ⊕  
discharge ⊕.

**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.  
Corp. Office: B-301 & 302, Mondeal Heights, 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

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

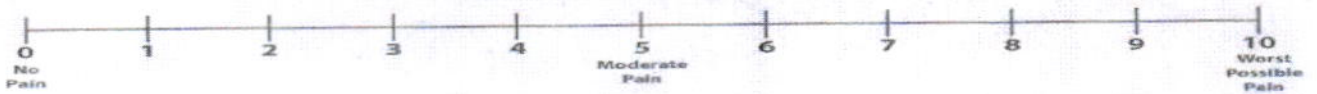
Investigaion Advised:-

Adv.  
Cervical  
Automyelography  
Biopsy

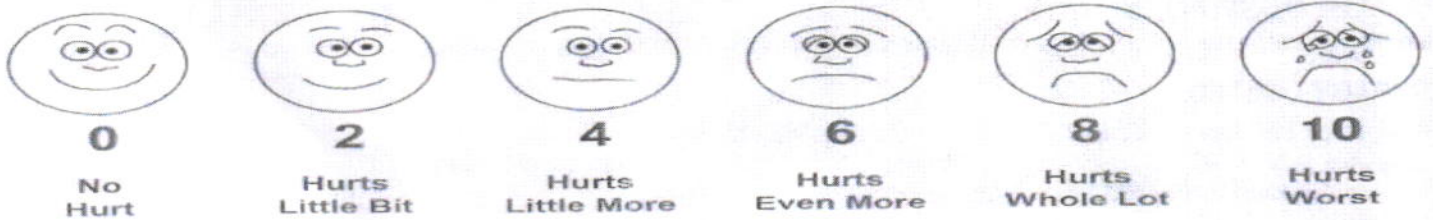
Follow Up:

Date: \_\_\_\_\_

**Numeric Rating Scale**



**Wong-Baker FACES® Pain Rating Scale**



<b>Patient ID:</b>	<b>SUR0004746</b>	<b>Patient Name:</b>	<b>SAPNA R JADAV</b>
<b>Age:</b>	<b>27 Years</b>	<b>Sex:</b>	<b>M</b>
<b>Accession Number:</b>	<b>4746</b>	<b>Modality:</b>	<b>DX</b>
<b>Referring Physician:</b>		<b>Study:</b>	<b>CHEST PA</b>
<b>Study Date:</b>	<b>15-Apr-2023</b>		

### 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. ASHUTOSH GANDHI**  
**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. Sapna Jadav

Age: 27 yrs/ Female

Date: 15 / 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:21

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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Tel: 079 40203000 | Fax: 079 40203109 | info.sg@shalby.org | www.shalby.org  
CIN: L85110GJ2004PLC044667



Patient Name: SAPNA JADAV		
Age / Sex: 27 Yrs. / Female	Study: USG Abdomen + Pelvis	
Referred By: Dr. at shalby hospital	Date: 15/04/2023	

## 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** anteverted 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. ASHUTOSH GANDHI  
CONSULTANT RADIOLOGIST

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CIN: L85110GJ2004PLC044667

Sapna Jadhav

1100 Sinus rhythm  
9110 \*\* normal ECG \*\*

years

Birth date: / mmHg

Sex: M cm kg

Medication:

Symptoms:

History:

Heart rate: 69 bpm

PR int: 124 ms

QRS dur: 76 ms

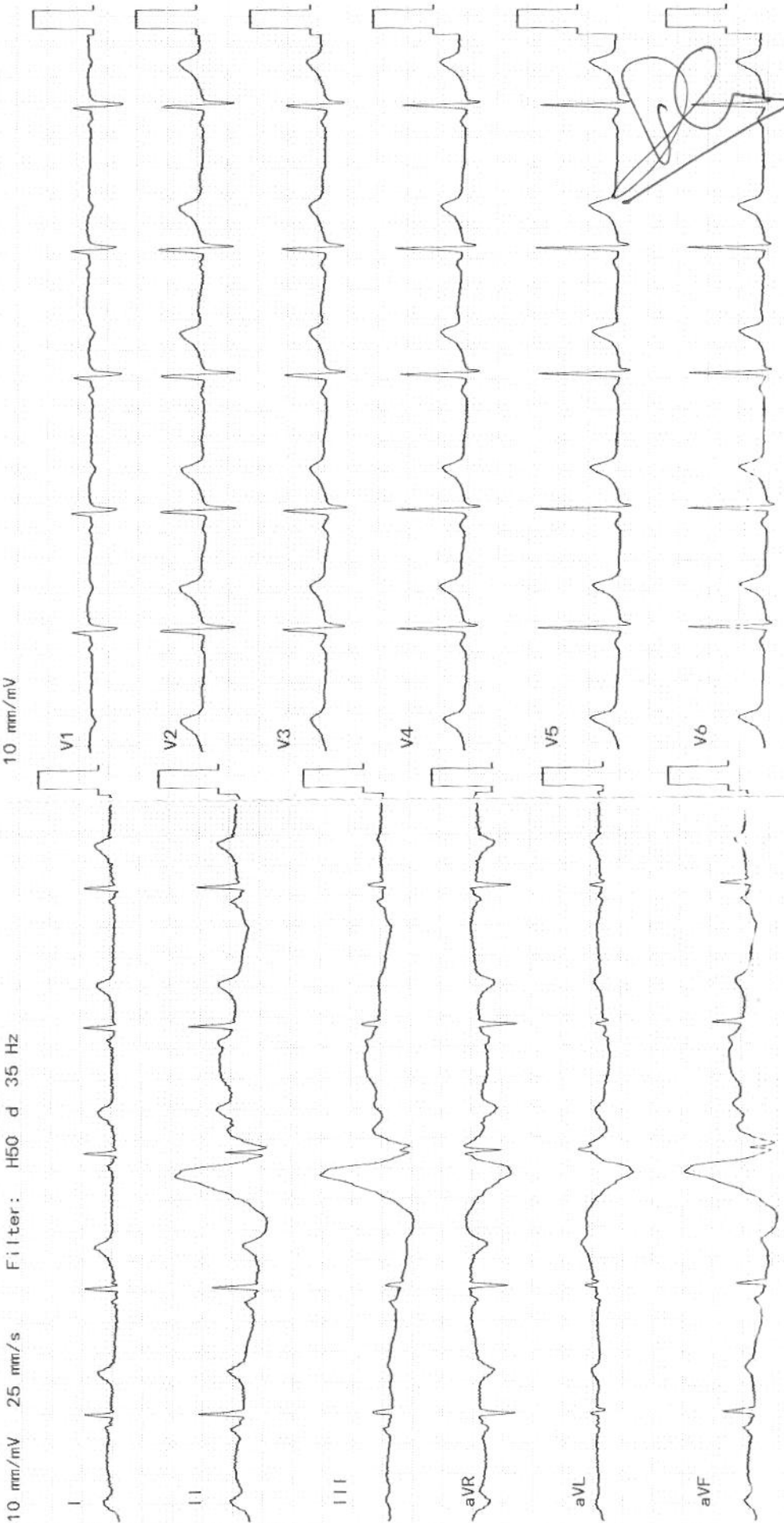
QT/QTc(E) int: 390/ 409 ms

P/QRS/T axis: 55/ 51/ 27 °

RV5/SV1 amp: 1.58/ 0.51 mV

RV5+SV1 amp: 2.09 mV

Unconfirmed Report  
Reviewed by:



Exam:

Dept.:

113-04 04-05

2023

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

Name :-

Date:- 15/4/23

Chief Complaints:-

Regular check up -

Pain Assessment:-

Past History:-

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:- 1/6/6.

PH Vision:-

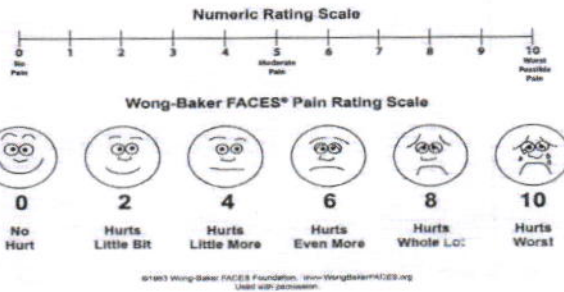
NCT

ON Examination

Ant. Segment

Both Eye

-WNC-



Cornea

Anterior Chamber

Lens

Fundus

Rt. EYE

Lt. EYE

Media:-

Disc:-

Blood Vessel:-

Background:-

Macula:-

Diagnosis:-

Investigation:-

- W N / -

Treatment:-

Nutritional Assessment:-

Preventive Care & Counsellings:-

Follow Up ON:-

(x 2 months)

Signature of the Consultant

Raj