

Consultant Physician Clinic

Patient Name:- Ranilaben Pandaya.

Age / Sex :- 42yrs / Female

Chief Complaints:-

→ loss of appetite ①

→ depression x ①

→ hypoproteinaemia

Drug / Food Allergy:-

→ no

Past History :-

→ klebs pneumonia

Family History:-

Systemic Examination:-

- ng
1 mm

Provisional Diagnosis:

OPR NO:

Date:

Weight:- 42.2

Height:- 149

BMI:- 19

Nutritional assessment:-

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

Pulse:- 78b/min

BP:- 100/60

SpO2:- 98+

Investigation :-

Tab. Roxonin P (0001) (2 months)

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

High protein diet (high fiber diet)

Rx

Sugar

Tab. Sitaxid. m (100/500) 0001 → 20

Tab. ~~Diuron m~~ (1000) → 20

Tab. prachin (4mg) 1001 - (20 tabs)

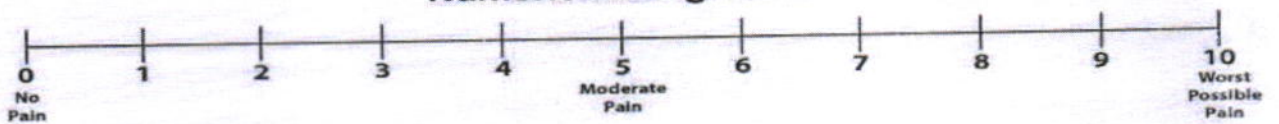
Tab. ~~Verbal, Dp~~ (0001) → (20 tabs)

Follow Up Date: _____

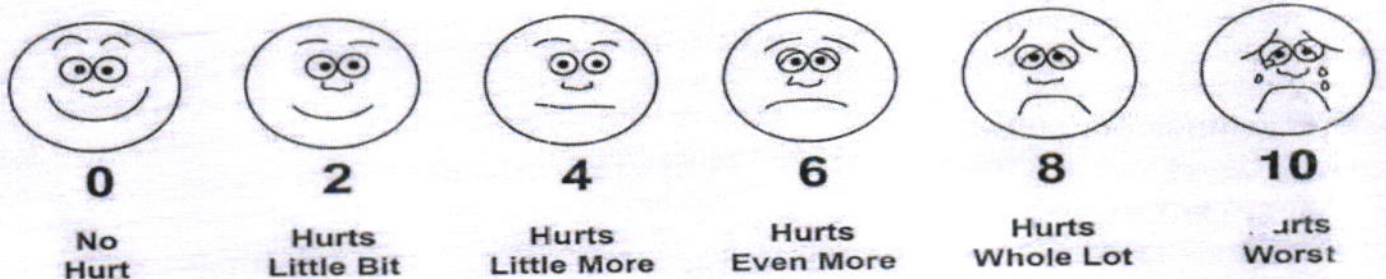
બધી દવાઓ ડોક્ટરને બતાવીને લેવી.

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

Numeric Rating Scale



Wong-Baker FACES® Pain Rating Scale





Certificate No.: MC-5200

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 : SUR0000340522 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Ramilaben Tida Padaya / Registered On : 25-Apr-2023 08:50 AM
 Lab ID : 304901731 Collected On : 25-Apr-2023 08:32 AM
 Gender/Age : Female / 47 Years DOB : 09-Apr-1976 Received On : 25-Apr-2023 08:55 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>	10.8 ✓	g/dL	12.0 - 15.0
RBC COUNT <i>Electrical Impedance</i>	3.75	mill/cmm	3.8 - 4.8
HCT <i>Calculated</i>	34.5	%	36 - 46
MCV <i>Calculated based on the RBC histogram</i>	92.1	fL	83 - 101
MCH <i>Calculated</i>	28.8	pg	27 - 32
MCHC <i>Calculated</i>	31.3	g/dL	31.5 - 34.5
RDW <i>Calculated</i>	17.1	%	11.6 - 14.0

TOTAL LEUCOCYTE COUNTTotal WBC Count *Electrical Impedance* 7170 cells/cmm 4000 - 10000**DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)**

NEUTROPHILS <i>Flow Cytometry</i>	56	%	40 - 80
LYMPHOCYTES <i>Flow Cytometry</i>	36	%	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 *Electrical Impedance* ✓ 746000 ✓ /cmm 150000 - 410000
 MPV *Calculated based on PLT Histogram* ✓ 7.5 ✓ fL 7.5 - 12.0

PERIPHERAL SMEAR EXAMINATION

RBCs Mild anisopoikilocytosis.
 WBCs Total and differential leucocyte counts are within normal limit
 PLATELETs **Increased on smear examination.**
 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 : 25-Apr-2023 10:56 AM

Dr Pankaj Agrawal

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



Certificate No. : MC-5200

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Ref. By : Dr. Health Check Up . Shalby	Received On : 25-Apr-2023 08:55 AM
	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

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Parameter	Result	Unit	Biological Ref. Interval
ESR 1st hour * <i>Modified Westergren Method</i>	88	mm in 1 hour	0 - 20
HBA1C HbA1c - Glycated Haemoglobin * <i>Boronate Affinity Assay</i>	9.0	%	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) * 212 mg/dL
Calculated

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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

Plasma Glucose (F) <i>GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric</i>	150 ✓	mg/dL	74 - 106
Urine Sugar (F) <i>Glucose-oxidase/peroxidase reaction</i>	ABSENT	mg/dL	ABSENT

POST PRANDIAL PLASMA GLUCOSE

Plasma Glucose (PP) <i>GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric</i>	215 ✓	mg/dL	Normal: 100-140 Impaired: 140-199 Diabetic :>=200
Urine Sugar (PP) <i>Glucose-oxidase/peroxidase reaction</i>	PRESENT[++]	mg/dL	ABSENT

Liver Function Test

Liver Function Test

SGPT (ALTV) <i>Multi Point Rate with P-5-P</i>	33	U/L	9 - 52
SGOT (AST) <i>Multi Point Rate with P-5-P</i>	21	U/L	14 - 36
Alkaline Phosphatase <i>PNPP, AMP Buffer</i>	182 ←	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>	123 ←	U/L	12 - 43
S. PROTEIN <i>Biuret (Alkaline cupric sulfate), End Point</i>	7.7	g/dL	6.3 - 8.2
Albumin <i>Bromocresol Green (BCG), Colorimetric</i>	4.0	g/dL	3.5 - 5.0
S. GLOBULIN <i>Calculated</i>	3.7	g/dL	2.3 - 3.6
A/G Ratio <i>Calculated</i>	1.1	Ratio	1.0 - 2.3

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Dr Pankaj Agrawal
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Consulting Pathologist



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Fluoride P, Urine, Serum

Liver Function Test

Bilirubin Total <i>Azobilirubin/Dyphylline/Diazonium Salt</i>	0.7	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>	0.7	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

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Gender/Age : Female / 47 Years	DOB : 09-Apr-1976
Received On : 25-Apr-2023 01:15 PM	Sample Type : Serum
Ref. By : Dr. Health Check Up . Shalby	

Parameter	Result	Unit	Biological Ref. Interval
LIPID PROFILE			
LIPID PROFILE			
Cholesterol <i>Cholesterol Esterase, Oxidase, Peroxidase</i>	198	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
SERUM TRIGLYCERIDE <i>Lipase/GK/GPO/POD</i>	373	mg/dL	Normal : <150 Borderline High : 150-199 High : 200-499 Very High : > 500
HDL CHOLESTEROL DIRECT * <i>Phosphotungstic Acid/Mgcl2 - Enzymatic</i>	28	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : >= 60
Non HDL Cholesterol <i>Calculated</i>	170	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
S.LDL <i>Calculated</i>	95	mg/dL	Optimal: <100 Near to above Optimal: 100 - 129 Borderline High: 130 - 159 High: 160 - 189 Very High: > 190
VLDL <i>Calculated</i>	75	mg/dL	6 - 38
LDL/dHDL * <i>Calculated</i>	3.4		2.5 - 3.5
Chol/dHDL * <i>Calculated</i>	7.1	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)

Urease, colorimetric

4

mg/dL

7 - 17

UREA

Calculated

9

mg/dL

15 - 36

S. CREATININE

Enzymatic - Creatinine amidohydrolase

0.57

mg/dL

0.52 - 1.04

S. URIC ACID

Uricase/Peroxidase, Colorimetric

3.5

mg/dL

2.5 - 6.2

Calcium

Arsenazo III dye

8.9

mg/dL

8.4 - 10.2

S. PHOSPHORUS *

Phosphomolybdate reduction (PMA Phenol)

4.0

mg/dL

2.5 - 4.5

Sodium

Direct Ion Selective Electrode

138

mmol/L

137 - 145

S. POTASSIUM

Direct Ion Selective Electrode

5.36

mmol/L

3.5 - 5.1

Chloride

Direct Ion Selective Electrode

102

mmol/L

98 - 107

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Dr Pankaj Agrawal

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

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Gender/Age : Female / 47 Years

DOB : 09-Apr-1976

Received On : 25-Apr-2023 01:15 PM

Ref. By : Dr. Health Check Up . Shalby

Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
Total T3 * <i>Chemiluminescence immunoassay (CLIA)</i>	113	ng/dL	87 - 178
Total T4 * <i>Chemiluminescence immunoassay (CLIA)</i>	<u>13.95</u>	µg/dL	6.09 - 12.23
TSH * <i>Chemiluminescence immunoassay (CLIA)</i>	2.99	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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 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
Bilirubin	<i>Azo coupling Reaction with diazonium</i>	NIL	mg/dL
Urobilinogen	<i>Modified Ehrlich reaction</i>	NORMAL	mg/dL
Ketone	<i>Sodium Nitroprusside reation</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>	6.5	PH value
Specific Gravity	<i>Refractometric Method - Bromthymol blue</i>	1.025	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	NIL	/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	PRESENT		Nil

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

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Dr Pankaj AgrawalM.B., D.C.P
Consulting Pathologist

Patient ID:	SUR0000340392	Patient Name:	RAMILABEN PADAYA
Age:	63 Years	Sex:	M
Accession Number:	5146	Referring Physician:	
Study Date:	25-Apr-2023	Study:	CHEST PA

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 DESAI
CONSULTANT RADIOLOGIST

SHALBY HOSPITAL, SURAT

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CIN: L85110GJ2004PLC044667

DR. POOJA PRESSWALA

M.B.B.S. DGO

FMAS, DMAS, FRM.

Obstetrician & Gynaecologist

Infertility Specialist (Kiel University, Germany)

Laparoscopic Surgeon (World Laparoscopy Hospital)

Shalby Women's Health Clinic

Name:-

Chief Complaints:-

e/o. Dysmenorrhea.

Date: 25/4/23

Weight:-

Height:-

OPR NO:-

Nutritional Assessment:-

Obese

Well Nourished

Mild-Moderate Nourished

Severely Mal-Nourished

LMP:- 11/4/23

M/H:-

Pregn - 2-3 d I/MPL
20-25

O/H:-

para 0/H - Nulliparous (I° Infertility)

P/H:-

F/H

Examination:-

P/S. pt refused for

BL Breasts - NAD.

Examination & PAP smear.

Provisional Diagnosis:-

SHALBY HOSPITAL, SURAT

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CIN: L85110GJ2004PLC044667

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

Investigaion Advised:-

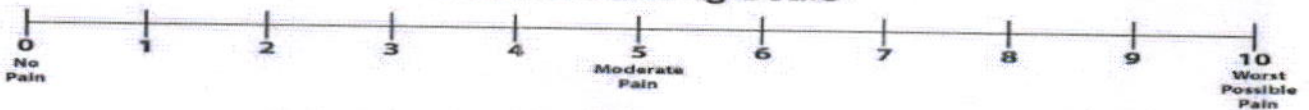
psychiatric reference.

Follow Up:

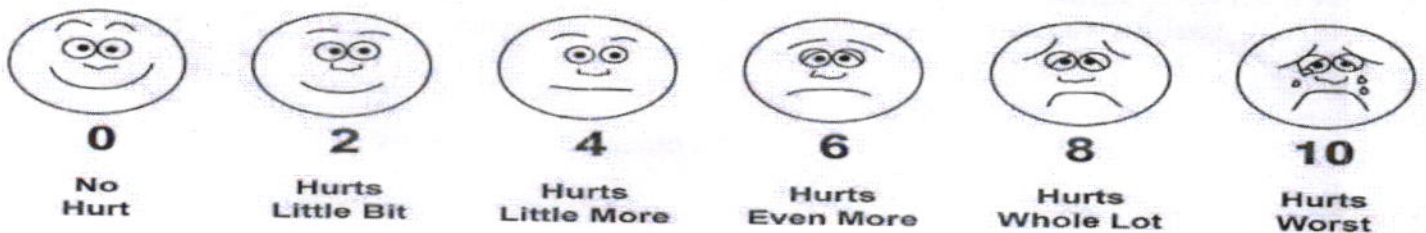
Date:- _____

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

Numeric Rating Scale



Wong-Baker FACES® Pain Rating Scale



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

Name :-

Rumilaben Padanya

Date:- 25/4/23

Chief Complaints:-

N/C

Pain Assessment:-

Past History:-

DM x 12yrs

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
e glass

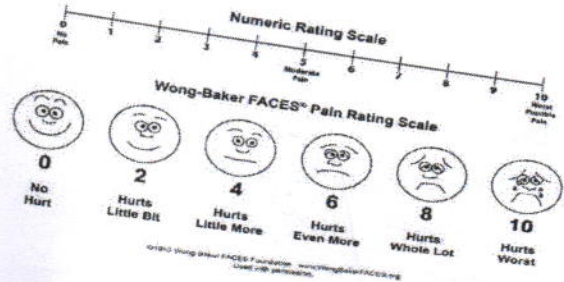
PH Vision:-

NCT 5 mm OS kg

ON Examination Ant. Segment

Both Eye

WNL



Cornea

Anterior Chamber

Lens

Fundus

Rt. EYE

Lt. EYE

Media:-

Disc:-

Blood Vessel:-

Background:-

Macula:-

Diagnosis:-

BE
WNL

Investigation:-

Treatment:-

Nutritional Assessment:-

Preventive Care & Counselling's:-

Follow Up ON:- After 6 month

RNR

Signature of the Consultant

Patient's Name: Mrs. Ramilaben T. Padaya

Age: 47 yrs/ Female

Date: 25 / 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 %.

Grade I 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
- Grade I LVDD
- EF 60 %



DR.SUSHIL YADAV
Consultant Clinical cardiologist

Note : Normal echo study does not rule out underlying Coronary artery disease

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.

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

CIN: L85110GJ2004PLC044667

ID:
 Name:
 Sex: M Birth date: / mmHg years
 cm kg

Medication:

Symptoms:

History:

Vent. rate 76 bpm
 PR int 144 ms
 QRS dur 72 ms
 QT/QTc(E) int 394/ 424 ms
 P/QRS/T axis 30/ 12/ 28 °
 RV5/SV1 amp 1.47/ 0.55 mV
 RV5+SV1 amp 2.02 mV

1100 Sinus rhythm
 2420 RSR (QR) in lead V1/V2, consistent with right ventricular
 conduction delay
 0102 ARTIFACT PRESENT
 9130 ** borderline ECG **

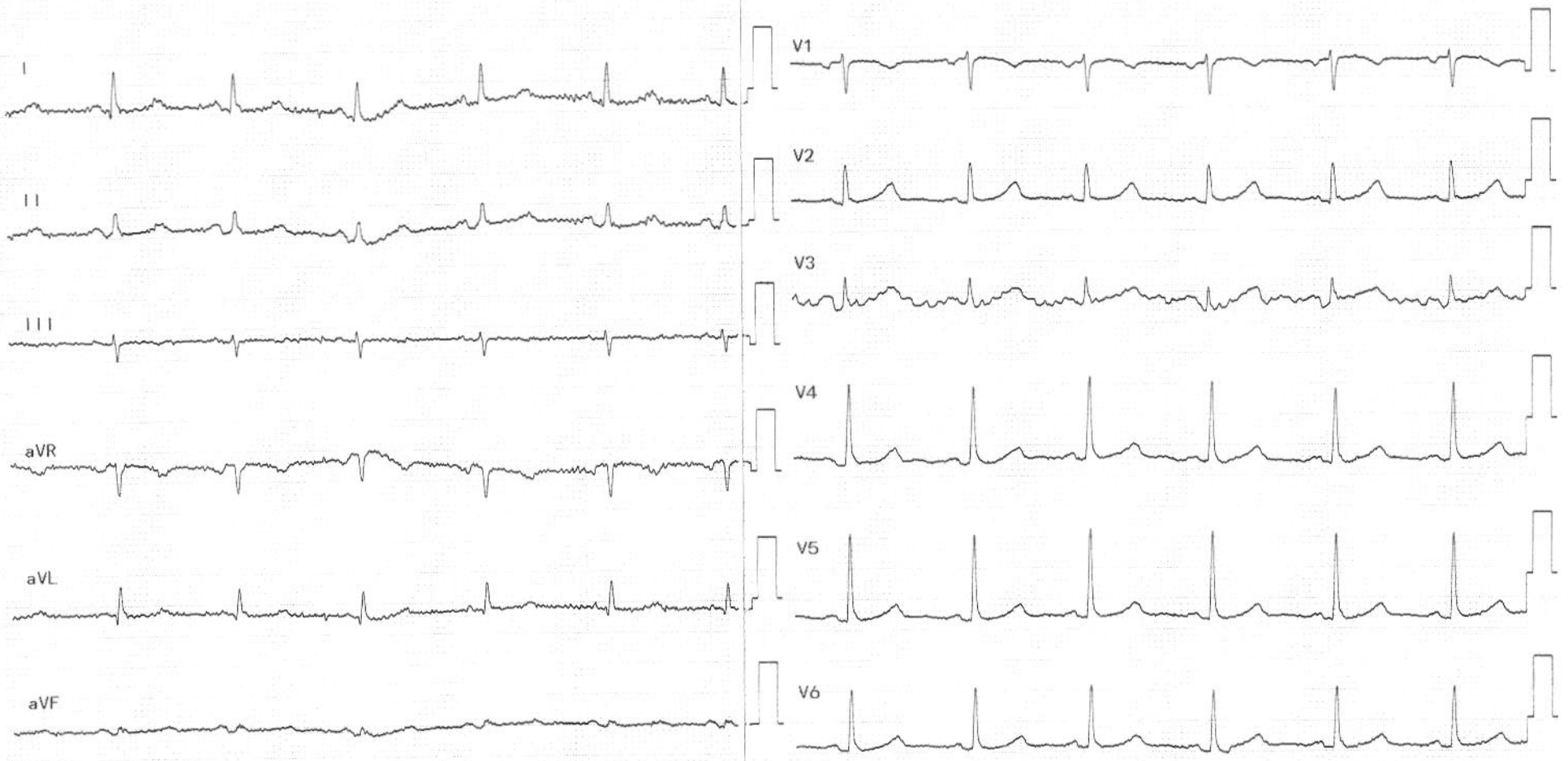
Ramitalaben

[Handwritten signature]

Unconfirmed Report
 Reviewed by:

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

10 mm/mV



Patient Name: RAMILABEN PADAYA		
Age / Sex: 48 Yrs. / Female	Study: USG Abdomen + Pelvis	
Referred By: Dr. at shalby hospital	Date: 25/04/2023	

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 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. ET: 6 MM.

25 x 15 mm sized intramural fibroid seen in fundal region.

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

19 x 17 mm and 20 x 18 mm sized follicles seen in left ovary.

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

IMPRESSION:

- Grade I fatty hepatomegaly.
- Uterine fibroid.
- No any other significant abnormality detected.

Thanks for referrals.


DR. NIMIT DESAI
CONSULTANT RADIOLOGIST

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CIN: L85110GJ2004PLC044667



Pre - op

Post- op

Health Check-up

25/04/23

Patient Reg. No. : _____

Name : Rammitaben T. Padeyad Age / Sex : 47/F

s : Sweet

Complaints : _____

Bleeding gums : _____

Swelling : _____

Oral hygiene : _____

Pus Discharge : _____

Medical History :

Hypertension : DM Acidity Pregnancy : _____

Diabetes : _____ Asthma : _____ Allergy : _____

Surgical Intervention : _____

Medication :

Examination :

General : _____ Food lodgement : _____

Oral : _____ Gingivitis : _____

Teeth : +3 Mobility : _____

Treatment Advised :

Prophylaxis : 815
Sittings 1 2 3 Deep

Perio Surgery : _____

Class V Fillings : _____

Extraction : _____

Partial Denture : +3

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 per formed in an well maintained.

hygienic setup using "autoclaved" instruments & "sterilized pouch" facility.

After knee replacement any treatment should be done under "Antibiotic Coverage"

Dr Harmit

DF

Dr. Darshini V. Shah
(Consultant Dental Surgeon)