



### OPD ASSESSMENT FORM



Name Mrs Pratima Choudhary Age.Sex 32/F MR.No. 3148554

Doctor Dr Hardik Shroff Date 18/01/24

Ht : \_\_\_\_\_ Wt. : \_\_\_\_\_ Temp : \_\_\_\_\_ Pulse : \_\_\_\_\_ BP : \_\_\_\_\_

SPO2 : \_\_\_\_\_ Post of walk SPO2 : \_\_\_\_\_

Chief Complaints :

Drug / Food Allergy :

No complaints

Prior Medication Reviewed : Yes  No

On examination : RG Ant. seg MAD Past History :

Dr (Grip) Nib Fundi (Central)  
RG MAD

Provisional Diagnosis :

Nutritional Assessment :

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

N.A. asymptomatic

Treatment and further Advices :  
(Write in Capital Letters)

Investigation advised :

Rx

Dr. Hardik Shroff  
BAMS, DNB (Ophthalmology)

Follow Up : COP Date : \_\_\_\_\_

SUNSHINE GLOBAL HOSPITALS  
Piplod, SURAT.



**GYNAECOLOGICAL CONSULTATION**

MR. NO.

Name: Mrs. Pratima Chaudhary

Date: 14/01/24

Age: 32 HL: 162cm WL: 59kg B.P.: 110/68 mmHg

Clinical Evaluation / History / Presenting Complain:

Rough

Gynecological History :

1. Have you ever noticed any bleeding between menstrual periods ?  
કોઈ પણ વચ્ચે સ્ત્રીયુગ્મન વચ્ચે રક્તસ્રાવ થયેલો છે ?
2. Are / were your periods Irregular ?  
પીરિયડ્સ રેગ્યુલર છે ?
3. Are you pregnant now ?  
સાચાં રીતે ગર્ભવતી છે ?
4. Have you had your change of life (Menopause)?  
મેનોપોઝ ની હોઈ લક્ષણ ની અનુભવ છે ?
5. Are / were you taking birth control pills?  
બેબી સિટીંગ પીલ્સ લેવામાં આવેલ છે ?
6. Do you have a lump in your breast ?  
સપ્તકમાં દુઃખાવો / સોજા / ગાંઠ છે ?
7. Did anyone in your family suffer from breast cancer ?  
કુટુંબમાં કોઈને બ્રેસ્ટ કેન્સર છે ?
8. Did anyone in you family suffer from any other cancer ?  
કુટુંબમાં કોઈને કોઈ પણ અન્ય કેન્સર છે ?

Yes No

<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>
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<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Obstetric History :

1. Menstrual History : Menarche at 14 Yrs  
Menses: a. Scanty / Average / Excess  
b. No of Days: 3-5 / 5-7 / More than 7 days  
c. Interval ..... days Beg / Irregular  
d. Pain : Before / During / After / Painless

Last menstrual Period (LMP): 3/11/24

2. Obstetric History :

Gravida ..... Pare ..... Abortion ..... Live .....

Married life with cohabitation.....

Children M: 3 F: ..... Last Delivery: ..... Yrs back

Any bad Obstetric event / history Yes / No

If yes Describe:

History of Contraception & Family Planning:

**Examination**

- a. Breast Examination - Right *W/O* Left *M*
- b. Per abdomen examination *slow A L/S*
- c. Local examination Vulva: *norm* Vagina: *verruca*
- d. Per Speculum Examination *1/3 amplicin +*
- e. Per vaginal examination :
  - Cervi : Uterus : *AV/RV* : *Normal / Bulky*
  - Adnexa :
  - PAP's Smear Taken Yes / No

**Clinical Impression:**

**Recommendation:**

**A. Additional Inv. / Referral Suggested**

**B. Therapeutic Advice**

*2 weeks*

**Followup Date**

*[Signature]*  
**DR. BHAVNA DESAI**  
MD, DGO  
REG. NO. - 10538  
**SUNSHINE GLOBAL HOSPITAL**  
SURAT.

**Gynaecologist's Signature**





Pratias,

14/1/24

- Cap Duty-1 (14)  
9 L

- Feb Manupul (21)  
20/1  
→ → →

- Feb R. U. 24 8 (10)  
→ → →

- Clingen full veg tab (6)  
9/1/24 2/1/24 2/1/24 2/1/24

- C 2 2/1/24 NIB Cien  
A/1/1/24 1/1/24

**DR. BHAVNA DESAI**  
MD, DGO

REG. NO.-10538

**SUNSHINE GLOBAL HOSPITAL**  
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<b>PAT. NAME:</b> Pratima Chaudhari	<b>Date :</b> 13/01/2024
<b>REF. DOCTOR :</b> Hosp. Dr.	<b>AGE :</b> 32 Yrs / F
<b>INV. :</b> USG Abdomen & Pelvis	<b>MR NO. :</b> S148554

**Findings:**

Liver is normal in size, shape and shows normal echopattern. No e/o any focal or diffuse lesion noted. Intrahepatic biliary radicals are normal.

Gall bladder is distended and appears normal. No e/o calculus, sludge or mass lesion is seen. CBD and Portal Vein appears normal in size and calibre.

Pancreas appears normal in size and shows normal echopattern to the extent assessed. Spleen appears normal in size, shape and homogenous echopattern.

Both kidneys appear normal in size, shape and echopattern. The corticomedullary differentiation is well maintained. No e/o any calculus or hydronephrosis is seen.

Aorta and para-aortic regions appear normal. No e/o any lymphadenopathy.

Urinary bladder appears well distended and normal.

Uterus appears normal size, shape and echopattern. No e/o any focal or diffuse lesion noted.


Endometrial thickness is normal.

Both ovaries appear normal in size, shape and echopattern.

No e/o free fluid in abdomen / pelvis.

**IMPRESSION:**

- No significant abnormality seen.

  
**Dr. Sneha Dumaswala**  
**MBBS, DNB-Radiodiagnosis**  
**Consultant Radiologist**  
**G-21796**

Transcribed By: Asha

Page: 1 out of 1  
Date & Time of report: 13/01/2024 - 11:59 AM




PAT. NAME: Pratima Chaudhari	Date : 13/01/2024
REF. DOCTOR : Hosp. Dr.	AGE : 32 Yrs / F
INV. : Radiograph of Chest PA	MR NO. : S148554

**Clinical Details:** HC

**Observation:**

- Both the lung fields appears normal.
- Both costophrenic angles appear clear.
- Both the hila appears normal.
- Trachea appears in midline.
- Cardiac size and other mediastinal shadows appears normal.
- Both domes of diaphragm appear normal.
- Bony thorax appears normal.

  
**Dr. Sneha Dumaswala**  
MBBS, DNB-Radiodiagnosis  
Consultant Radiologist  
G-21796

Transcribed By: Asha

Page: 1 out of 1  
Date & Time of report: 13/01/2024 – 11:57 AM

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# OPD ASSESSMENT FORM



Name Mrs. Pratiha Choudhary Age. Sex \_\_\_\_\_ MR.No. \_\_\_\_\_

Doctor Dr. Shailja Desai Date 14/01/24

Ht : \_\_\_\_\_ Wt. : \_\_\_\_\_ Temp : \_\_\_\_\_ Pulse : \_\_\_\_\_ BP : \_\_\_\_\_

SPO2 : \_\_\_\_\_ Post of walk SPO2 : \_\_\_\_\_

Chief Complaints :

Drug / Food Allergy :

— Routine Dental check up

Prior Medication Reviewed : Yes  No

On examination :

Past History :

— HStain teaculery

Provisional Diagnosis :

Nutritional Assessment :

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

Treatment and further Advices :  
(Write in Capital Letters)

Investigation advised :

Rx

1) Scaling

U. P. Desai

**Dr. Shailja Desai**

B.D.S. (Dental Surgeon)

A-9783

Dental Surgeon

Sunshine Global Hospitals

Follow Up : \_\_\_\_\_ Date : \_\_\_\_\_

Signature



MR No.	: S148554	Collection Date	: 13/01/2024 10:47AM
Patient Name	: Mrs. Pratima Milind Chaudhari	Age	: 33 Y Sex : Female
Ref By	: Dr. Hospital A Doctor	Report Date	: 13/01/2024 11:52AM

**HAEMATOLOGY**

Parameter	Result	Units	Normal Range
<b>CBC with ESR</b>			
HAEMOGLOBIN	11.8	gm/dl	12.0 - 15.0
PCV	36.7	%	36 - 46
RBC COUNT	4.33	mill/cmm	4.0 - 5.0
MCV	84.8	fl	76 - 96
MCH	27.3	pg	26 - 32
MCHC	32.2	%	32 - 36
RDW	12.6	%	11 - 15
PLATELET COUNT	1.94	lacs/cmm	1.5 - 4.5
WBC COUNT	5920	/cmm	4000 - 11000
ESR	13	mm/hr	0 - 15
<b>DIFFERENTIAL WBC COUNT</b>			
NEUTROPHIL	56	%	40 - 70
LYMPHOCYTES	32	%	20 - 40
EOSINOPHILS	03	%	1 - 6
MONOCYTES	09	%	2 - 11
BASOPHILS	00	%	0 - 2
<b>PERIPHERAL SMEAR</b>			
RBC MORPHOLOGY	Normochromic		
	Normocytic		
WBC MORPHOLOGY	Within Normal Range		
PLATELET ON SMEAR	Adequate		
HEMOPARASITES	Not Seen		

SYSMEX XN-550

\*\*\*\*\* End Report \*\*\*\*\*

**Dr. Shobha Choksi**  
 MD, DCP (Pathology)







MR No. : S148554	Collection Date : 13/01/2024 10:47AM
Patient Name : Mrs. Pratima Milind Chaudhari	Age : 33 Y Sex : Female
Ref By : Dr. Hospital A Doctor	Report Date : 13/01/2024 11:49AM

**BIOCHEMISTRY**

Parameter	Result	Units	Normal Range
<b>HBA1C [GLYCOSYLATED HEAMOGLOBIN]</b>			
HbA1C	5.5	%	Non-Diabetic level: <6 Good Control: 6 - 7 Poor Control: 7 - 8 Action Suggested > 8
MEAN BLOOD GLUCOSE	111.15	mg/dl	

The test is done on Cobas Integra 400plus-Turbidimetric Inhibition ImmunoAssay

Note:- Criteria for the diagnosis of diabetes HbA1c  $\geq 6.5\%$

- HbA1c is important test for the assessment of long term blood glucose control (also called glycemic control).
- HbA1C reflects mean glucose concentration over past 6-8 weeks and provides a much better indication of long term glycemic control than blood glucose determination.
- HbA1C is formed by non-enzymatic reaction between glucose and Hb. This reaction is irreversible and therefore remains unaffected by short term fluctuations in blood glucose levels.
- Long term complications of diabetes such as retinopathy, nephropathy, and neuropathy are potentially serious and can lead to blindness kidney failure etc.
- Genetic Variants (Hb-S trait, Hb-C trait) elevated fetal haemoglobin & chemically modified derivatives of haemoglobin (eg carbamylated Hb in patients with renal failure) can affect the accuracy of HbA1C measurement.

**SERUM URIC ACID**

SERUM URIC ACID (Uricase)	4.5	mg/dl	2.4 - 5.7
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\*\*\*\*\* End Report \*\*\*\*\*

**Dr. Shobha Choksi**  
MD, DCP (Pathology)

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MR No. : S148554	Collection Date : 13/01/2024 10:47AM
Patient Name : Mrs. Pratima Milind Chaudhari	Age : 33 Y Sex : Female
Ref By : Dr. Hospital A Doctor	Report Date : 13/01/2024 11:49AM

**BIOCHEMISTRY**

Parameter	Result	Units	Normal Range
<b>LIPID PROFILE</b>			
SERUM CHOLESTEROL CHOD PAP	164	mg/dl	50 - 200
HDL CHOLESTEROL Direct	42	mg/dl	40 - 60
LDL CHOLESTEROL Direct	<b>100.7</b>	mg/dl	0 - 100
SERUM TRIGLYCERIDE GPO PAP	106	mg/dl	50 - 150
LDL Calc	21.2	mg/dl	0 - 30
CHOLESTEROL / HDL RATIO	3.9		0 - 5
LDL / HDL RATIO	2.4		0 - 3

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment.
- Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.
- Details on test interpretation available from the lab.

TEST	NEAR OPTIMAL (Moderate Risk)	BORDER LINE (Risk)	HIGH (Risk)	VERY HIGH
CHOLESTROL	160-199	200-239	240-279	280
HDL	50-59	40-49	< 40	
LDL	100-129	130-159	160-190	>190
TRIGLYCERIDES	150-169	170-199	240-499	>500
CHO/HDL RATIO	3.3-4.4	4.4-11.0	>11.0	
LDL/HDL RATIO	0.5-3.0	3.0-6.0	>6.0	

\*\*\*\*\* End Report \*\*\*\*\*

**Dr. Shobha Choksi**  
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Reg. No.: G-9074

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MR No. : S148554	Collection Date : 13/01/2024 10:47AM
Patient Name : Mrs. Pratima Milind Chaudhari	Age : 33 Y Sex : Female
Ref By : Dr. Hospital A Doctor	Report Date : 13/01/2024 11:50AM

**BIOCHEMISTRY**

Parameter	Result	Units	Normal Range
<b>LIVER FUNCTION TEST</b>			
ALKALINE PHOSPHATASE (IFCC)	55	U/L	35 - 130
BILIRUBIN TOTAL Diazo	0.4	mg/dl	0.0 - 1.2
BILIRUBIN DIRECT Diazo	0.2	mg/dl	0.0 - 0.4
BILIRUBIN INDIRECT (Calc)	0.2	mg/dl	0.0 - 0.8
GPT (IFCC)	28	U/L	5 - 41
SGOT (IFCC)	25	U/L	5 - 40
SERUM TOTAL PROTEIN Bluret	7.0	gm/dl	6.6 - 8.7
SERUM ALBUMIN BCG	4.5	gm/dl	3.5 - 5.2
SERUM GLOBULIN Calc	2.5	gm/dl	1.5 - 3.5
SERUM A/G RATIO Calc	1.8	gm/dl	1.5 - 2.5
<b>SERUM CREATININE</b>			
SERUM CREATININE (JAFPE)	0.4	mg/dl	0.5 - 1.2
<b>BUN [BLOOD UREA NITROGEN]</b>			
BUN	7.2	mg/dl	8 - 23

\*\*\*\*\* End Report \*\*\*\*\*

*Shobha Choksi*  
Dr. Shobha Choksi  
MD, DCP (Pathology)

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MR No. : S148554  
Patient Name : Mrs. Pratima Milind Chaudhari  
Ref By : Dr. Hospital A Doctor  
Collection Date : 13/01/2024 10:47AM  
Age : 33 Y Sex : Female  
Report Date : 13/01/2024 11:53AM

**BIOCHEMISTRY**

Parameter	Result	Units	Normal Range
<b>ALBUMIN-CREATININE RATIO</b>			
URINE ALBUMIN/MICROALBUMIN (Immunoturbidimetry)	5.4	mg/L	
URINE CREATININE (JAFPE)	74.7	mg/dl	
ALBUMIN-CREATININE RATIO (Calculated)	7.22	mg/gm	Normal: <30; Microalbuminuria: 30-299; Clinical Albuminuria: >300

\*\*\*\*\* End Report \*\*\*\*\*

Dr. Shobha Choksi  
MD, DCP (Pathology)

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Page 1 of 1



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Ref By : Dr. Hospital A Doctor	Report Date : 13/01/2024 11:53AM

**CLINICAL PATHOLOGY**

Parameter	Result	Normal Range
<b>URINE ROUTINE &amp; MICROSCOPIC EXAMINATION</b>		
TYPE OF SPECIMEN - URINE	Random	
<b>PHYSICAL EXAMINATION</b>		
QUANTITY	20	ml
COLOUR	Pale Yellow	
APPEARANCE	Clear	
REACTION (pH)	6.0	
SPECIFIC GRAVITY	1.025	
<b>CHEMICAL EXAMINATION</b>		
PROTEIN	Absent	
GLUCOSE	Absent	
KETONE	Absent	
BILE SALT	Absent	
BILE PIGMENT	Absent	
OCCULT BLOOD	Present(Trace)	
NITRITE	Absent	
<b>MICROSCOPIC EXAMINATION</b>		
PUS CELLS	3-4	/hpf
EPITHELIAL CELLS	15-20	/hpf
RC	3-4	/hpf
CASTS	Absent	
CRYSTALS	Absent	
BACTERIA	Present(+)	
YEAST CELLS	Absent	

\*\*\*\*\* End Report \*\*\*\*\*

*US*  
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MR No. : S148554	Collection Date : 13/01/2024 10:47AM
Patient Name : Mrs. Pratima Milind Chaudhari	Age : 33 Y Sex : Female
Ref By : Dr. Hospital A Doctor	Report Date : 13/01/2024 1:18 PM

**BIOCHEMISTRY**

Parameter	Result	Units	Normal Range
<b>POST PRANDIAL BLOOD GLUCOSE [PPBS]</b>			
POST PRANDIAL BLOOD GLUCOSE (Hexokinase)	103	mg/dl	100 - 140
POST PRANDIAL URINE GLUCOSE	SNR		
POST PRANDIAL URINE KETONE	SNR		

\*\*\*\*\* End Report \*\*\*\*\*

*SC*

**Dr. Shobha Choksi**  
MD, DCP (Pathology)

Reg. No.: G-9074

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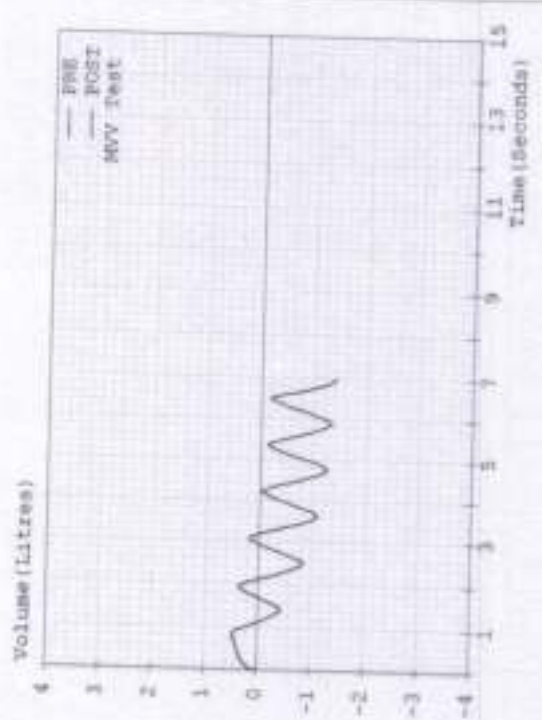
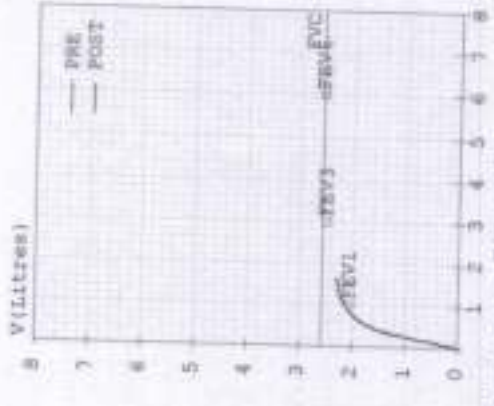
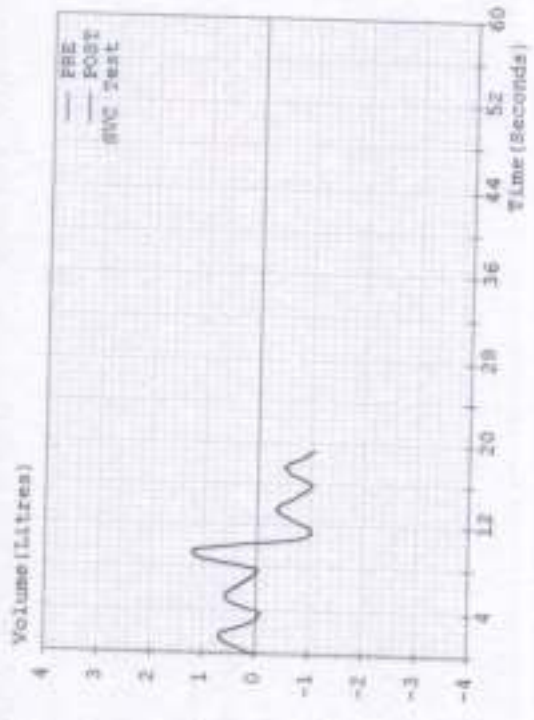
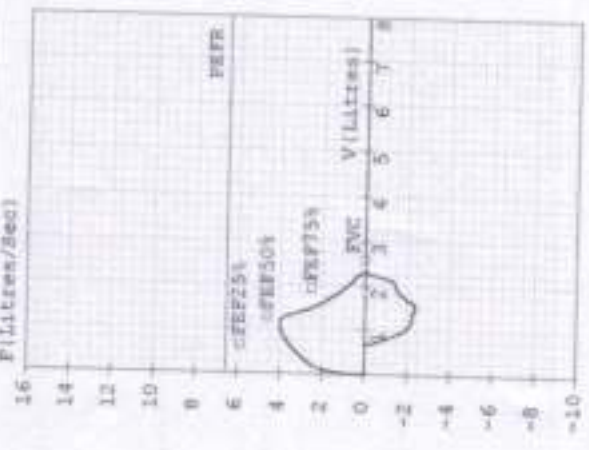
Patient: Pratima Chaudhari  
 Refd. By:  
 Pred. Eqns: RECORDERS

Age : 33 Yrs 10 Mths Gender : Female  
 Height : 162 Cms Smoker : No  
 Weight : 59 Kgs Eth. Corr: 100

ID : 8148554  
 Temp :  
 Date : 13-Jan-2024 01:36 PM

Spirometry results

Parameter	Unit	Obs	%Pred	%Post	%Pred	%Post
FVC	(L)	02.58	02.30	089	---	---
FEV1	(L)	02.05	02.15	105	---	---
FEV1/FVC	(%)	79.46	93.48	118	---	---
FEF25-75	(L/s)	02.89	03.06	106	---	---
PEFR	(L/s)	06.54	03.98	061	---	---
FIVC	(L)	---	01.65	---	---	---
FEV1.5	(L)	---	01.71	---	---	---
FEV3	(L)	02.51	02.30	092	---	---
VIR	(L/s)	---	03.37	---	---	---
PEFR-85	(L/s)	---	01.14	---	---	---
FEF2-1.2(L/s)	(L/s)	05.25	03.39	065	---	---
FEF 25%	(L/s)	05.90	03.29	057	---	---
FEF 50%	(L/s)	04.59	03.95	086	---	---
FEF 75%	(L/s)	02.52	01.60	063	---	---
FEV1.5/FVC	(%)	---	74.35	---	---	---
FEV3/FVC	(%)	97.29	100.00	103	---	---
FEF	(L/s)	---	01.59	---	---	---
ExpTime (Sec)	(Sec)	---	00.27	---	---	---
Lung Age (Yrs)	(Yrs)	033	---	094	---	---
FEV6	(L)	02.58	---	170	---	---
FIF 25%	(L/s)	---	00.65	---	---	---
FIF 50%	(L/s)	---	01.27	---	---	---
FIF 75%	(L/s)	---	01.94	---	---	---
SVC	(L)	01.20	02.24	107	---	---
ERV	(L)	01.38	01.00	072	---	---
IRV	(L)	---	00.61	---	---	---
VE	(L/min)	---	09.69	---	---	---
RI	(L/min)	---	15.38	---	---	---
Ti	(sec)	---	01.60	---	---	---
Te	(sec)	---	02.40	---	---	---
VT	(L)	---	00.63	---	---	---
VT/Ti	(L)	---	00.39	---	---	---
Ti/Ttot	(L)	---	00.41	---	---	---
IC	(L)	---	01.24	---	---	---
MVV	(L/min)	109	060	055	---	---
MRF	(L/min)	---	51.43	---	---	---
MOT	(L)	---	01.16	---	---	---



Pre Medication Report Indicates  
 Early Small Airway Obstruction as FEF 25-75 %Pred or PEFR %Pred < 70  
 Spirometry within normal limits as (FEV1/FVC)%Pred > 95 and FVCtPred > 80



13-Jan-2024 10:48:07

DOB:  
yr, FEMALE

Heart rate: 81 BPM  
PR int: 138 ms  
QRS dur: 72 ms  
QT/QTc: 345/383 ms  
P-R-T axes: 54 56 60

SINUS RHYTHM  
NORMAL ECG  
INTERPRETATION BASED ON A DEFAULT AGE OF 40 YEARS  
Reviewed by -----

Mrs. Arshina Chandhara  
32/F

