



BHAILAL AMIN
GENERAL HOSPITAL

ESTD. 1964

CONCLUSION OF HEALTH CHECKUP

ECU Ref. No : MH/22/000585 Patient No : 21040553 Date : 26/03/2022
Name : SONIA ALOK BAKSHI Sex / Age : F 57
Height / Weight : 153 Cms 63 Kgs Ideal Weight : 54 Kgs BMI : 26.9

Dr. Manish Mittal
Physician

Note: General Physical Examination & Routine Investigations included in the Health Checkup have certain limitations and may not be able to detect all the latent and asymptomatic diseases.

Page 1 of 5



Name : SONIA ALOK BAKSHI

Sex / Age : F 57

Present History

NO MEDICAL COMPLAINTS AT PRESENT.

Past History

K/C/O HYPOTHYROID - 5 YRS --> ON MEDICATION.

Family History

MOTHER : IHD.

Personal History

VEG DIET.

Clinical Examination

B.P. 13/70 mm Hg

Pulse 80/MIN REG.

Others -

Respiratory System

CLINICALLY NAD

Cardio Vascular System

CLINICALLY NAD

Abdominal System

CLINICALLY NAD

Neurological System

CLINICALLY NAD



Name : SONIA ALOK BAKSHI

Sex / Age : F 57

Eye Checkup

Doctor Name DR.SIDDHARTH DUA

	Right	Left
History	THYROID	
Uncorrected vision	6/6	6/6
Corrected vision	-	-
IOP	-	-
Fundus	-	-
Any other	RETINA NEEDED	
Advice	NIL	



Name : **SONIA ALOK BAKSHI** Sex / Age : F 57
Height / Weight : 153 Cms 63 Kgs Ideal Weight : 54 Kgs BMI : 26.9

Obstetric History 2 FTND'S
Menstrual History POSTMENOPAUSAL - 10 YRS.
Present Menstrual Cycle REGULAR
Past Menstrual Cycle -

Chief Complaints

NIL

Gynac Examination

P/A SOFT
P/S Cx - (N) Vg - SENILE VAGINITIS
P/V UT NS Fx CLEAR
Breast examination - Right NORMAL
Breast examination - Left NORMAL
PAP Smear TAKEN
BMD
Mammography
Advice FOLLOWUP WITH REPORTS.

Dr. Sonia Golani
Gynecologist



Dietary Assessment

Name : SONIA ALOK BAKSHI Sex / Age : F 57
Height : 153 Cms Weight : 63 Kgs Ideal Weight : 54 Kgs BMI : 26.9

Body Type : Normal / Underweight / Over weight

Diet History

Diet preference : Vegetarian / Eggeterian / Mixed

Frequency of consuming fried food : / day / week or occasional

Frequency of consuming sweets : / day or occasional

Frequency of consuming outside food : / week or occasional

Amount of water consumed / day : glasses / liters

Life style assessment

Physical activity : Active / moderate / Sedentary / Nil

Alcohol intake : Yes / No

Smoking : Yes / No

Allergic to any food : Yes / No

Are you stressed out ? : Yes / No

Do you travel a lot ? : Yes / No

General diet instructions :

Have small frequent meals.

Avoid fatty products like oil, ghee, butter, cheese.

Take salt restricted diet and avoid table salt.

Consume fibrous food regularly like whole grains, Daliya, Oats, Bajra, Flex seeds, Pulses, Fruits and Salads.

Keep changing your cooking oil every three months.

Avoid Maida, Starchy foods and Bakery products.

Consume 1-2 servings of all fruits and vegetables, For Diabetic patients avoid Mango, Chikoo, Banana, Grapes and Custurd Apple.

Drink 3 to 4 liters (12 - 14 glass) of water daily.

Eat Beetroot, Figs, Almond, Walnut, Dates, leafy vegetables, roasted Channa and Jeggary (Gur) for Heamoglobin. In case of diabetic patient avoid Rasins, Dates and Jeggary.

Drink green Tea or black Coffee once in a day.

Do brisk walking daily.

Dietitian

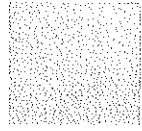


Patient Name : Mrs. SONIA ALOK BAKSHI
 Gender / Age : Female / 57 Years 5 Months 15 Days
 MR No / Bill No. : 21040553 / 221033877
 Consultant : Dr. Manish Mittal
 Location : OPD

Type : OPD
 Request No. : 35002
 Request Date : 26/03/2022 08:50 AM
 Collection Date : 26/03/2022 09:20 AM
 Approval Date : 26/03/2022 12:13 PM

CBC + ESR

Test	Result	Units	Biological Ref. Range
Haemoglobin.			
Haemoglobin	12.1	gm/dL	12 - 15
Red Blood Cell Count (T-RBC)	3.94	mill/cmm	3.8 - 4.8
Hematocrit (HCT)	36.9	%	36 - 46
Mean Corpuscular Volume (MCV)	93.7	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	30.7	pg	27 - 32
MCH Concentration (MCHC)	32.8	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	11.9	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	41.3	fl	39 - 46
Total Leucocyte Count (TLC)			
Total Leucocyte Count (TLC)	6.48	thou/cmm	4 - 10
Differential Leucocyte Count			
Polymorphs	70	%	40 - 80
Lymphocytes	25	%	20 - 40
Eosinophils	2	%	1 - 6
Monocytes	3	%	2 - 10
Basophils	0	%	0 - 2
Polymorphs (Abs. Value)	4.48	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	1.61	thou/cmm	1 - 3
Eosinophils (Abs. Value)	0.17	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.20	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.02	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.0	%	1 - 3 : Borderline > 3 : Significant
Platelet Count			
Platelet Count	287	thou/cmm	150 - 410
Smear evaluation	Adequate		
ESR	18	mm/1 hr	0 - 19



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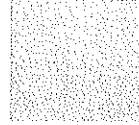
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CBC + ESR

Immature Granulocyte (IG) count is a useful early marker of infection or inflammation, even when other markers are normal. It is an early and rapid discrimination of bacterial from viral infections. It is also increased in patients on steroid therapy / chemotherapy or haematological malignancy. High IG is always pathologic; except in pregnancy and neonates of < 7 days.
 Method : HB by Non-Cyanide Hemoglobin analysis method. HCT by RBC pulse height detection method. RBC, TLC & PLC are by Particle Count by Electrical Impedance in Cell Counter. Optical Platelets by Fluorescent + Laser Technology. MCV, MCH, MCHC, RDW (CV & SD) are calculated parameter. DLC by Flowcytometry method using semi-conductor Laser+Smear verification. ESR on Ves metic 20, comparable to Westergrens method and in accordance to ICSH reference method.

--- End of Report ---

Dr. Nikunj V. Mehta
MD (Path.)



Patient Name : Mrs. SONIA ALOK BAKSHI
 Gender / Age : Female / 57 Years 5 Months 15 Days
 MR No / Bill No. : 21040553 / 221033877
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Haematology

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>Biological Ref. Range</u>
Blood Group			
ABO system	A		
Rh system	Positive		

By Gel Technology / Tube Agglutination Method

Note :

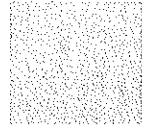
- This blood group has been done with new sensitive Gel Technology using both Forward and Reverse Grouping Card with Autocontrol
- This method check's group both on Red blood cells and in Serum for "ABO" group.

---- End of Report ----

Dr. Nikunj V. Mehta
MD (Path.)

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DEPARTMENT OF LABORATORY MEDICINE

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Clinical Biochemistry

Test	Result	Units	Biological Ref. Range
Fasting Plasma Glucose	87	mg/dL	70 - 110

---- End of Report ----

Dr. Rakesh Vaidya
Approved By Dr. Sejal Odedra

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DEPARTMENT OF LABORATORY MEDICINE

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Clinical Biochemistry

Test	Result	Units	Biological Ref. Range
Glycosylated Hemoglobin (HbA1c)	5.2	%	
estimated Average Glucose (e AG) *	102.54	mg/dL	

(Method:

By Automated HPLC analyser on D-10 Biorad. NGSP Certified, US-FDA approved, Traceable to IFCC reference method.

* Calculated value for past 60 days, derived from HbA1c %, based on formula recommended by the A1c - Derived Average Glucose study from ADA and EASD funded The ADAG trial.

Guidelines for Interpretation:

Indicated Glycemic control of previous 2-3 months

HbA1c%	e AG (mg/dl)	Glycemic control
> 8	> 183	Action suggested...High risk of developing long-term complications. Action suggested, depends on individual patient circumstances
7 - 8	154 - 183	Good
< 7	< 154	Goal...Some danger of hypoglycemic reaction in type I Diabetics. Some Glucose intolerant individuals and Sub-Clinical diabetics may demonstrate (elevated) HbA1c in this area.
6 - 7	126 - 154	Near Normal
< 6	< 126	Nondiabetic level)

---- End of Report ----

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Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea (By Urease Kinetic method on RXL Dade Dimension)	15	mg/dL	10 - 45
Creatinine (By Modified Kinetic Jaffe Technique)	0.72	mg/dL	0.6 - 1.1
Estimate Glomerular Filtration rate (Ref. range : > 60 ml/min for adults between age group of 18 to 70 yrs. EGFR Calculated by IDMS Traceable MDRD Study equation. Reporting of eGFR can help facilitate early detection of CKD. By Modified Kinetic Jaffe Technique)	More than 60		
Uric acid (By Uricase / Catalase method on RXL Siemens)	3.8	mg/dL	2.2 - 5.8

--- End of Report ---

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Pap Smear

Test	Result	Units	Biological Ref. Range
Pap Smear	Pap Smear Screening Report / Cervico-Vaginal Cytology...		

Pap Smear Screening Report / Cervico-Vaginal Cytology...

Received at 12:05 PM

Cyto No : 432/22

Clinical Details : No complains.

P/S findings - Cx : NAD / Vg : senile vaginitis.

LMP : 10 years back.

TBS Report / Impression :

- * Satisfactory for complete evaluation; transformation zone components identified.
- * Postmenopausal smears, with atrophic changes and repair.
- * Mild inflammatory cellularity (Neutrophils rich).
- * No epithelial cell abnormality favouring squamous intraepithelial lesion or frank malignancy (NILM).

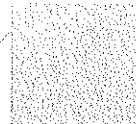
Note / Method :

The material received in LBC container, cytosmear was stained by rapid pap method and reported with due consideration to The Bethesda system (Modified 2014)

---- End of Report ----

**Dr. Nikunj V. Mehta
MD (Path.)**

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Complete Lipid Profile

Test	Result	Units	Biological Ref. Range
Complete Lipid Profile			
Appearance	Clear		
Triglycerides (By Lipase / Glycerol dehydrogenase on RXL Dade Dimension < 150 Normal 150-199 Borderline High 200-499 High > 499 Very High)	88	mg/dL	1 - 150
Total Cholesterol (By enzymatic colorimetric method on RXL Dade Dimension <200 mg/dL - Desirable 200-239 mg/dL - Borderline High > 239 mg/dL - High)	263	mg/dL	1 - 200
HDL Cholesterol (By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension < 40 Low > 60 High)	72	mg/dL	40 - 60
Non HDL Cholesterol (calculated) (Non- HDL Cholesterol < 130 Desirable 139-159 Borderline High 160-189 High > 191 Very High)	191	mg/dL	1 - 130
LDL Cholesterol (By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension < 100 Optimal 100-129 Near / above optimal 130-159 Borderline High 160-189 High > 189 Very High)	175	mg/dL	1 - 100
VLDL Cholesterol	17.6	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	2.43		2.1 - 3.5
T. Ch./HDL Ch. Ratio (Recent NECP / ATP III Guidelines / Classification (mg/dl) :)	3.65		3.5 - 5

--- End of Report ---

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Approved By Dr. Sejal Odedra

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Liver Function Test (LFT)

Test	Result	Units	Biological Ref. Range
Bilirubin			
Bilirubin - Total	0.32	mg/dL	0 - 1
Bilirubin - Direct	0.08	mg/dL	0 - 0.3
Bilirubin - Indirect	0.24	mg/dL	0 - 0.7
<i>(By Diazotized sulfanilic acid on RXL Dade Dimension.)</i>			
Aspartate Aminotransferase (SGOT/AST)	16	U/L	13 - 35
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alanine Aminotransferase (SGPT/ALT)	21	U/L	7 - 35
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alkaline Phosphatase	64	U/L	53 - 141
<i>(BY PNPP AMP method on RXL Dade Dimension.)</i>			
Gamma Glutamyl Transferase (GGT)	23	U/L	5 - 55
<i>(By IFCC method on RXL Dade Dimension.)</i>			
Total Protein			
Total Proteins	7.32	gm/dL	6.4 - 8.2
Albumin	3.56	gm/dL	3.4 - 5
Globulin	3.76	gm/dL	3 - 3.2
A : G Ratio	0.95		1.1 - 1.6
<i>(By Biuret endpoint and Bromocresol purple method on RXL Dade Dimension.)</i>			

---- End of Report ----

Dr. Rakesh Vaidya
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Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
------	--------	-------	-----------------------

Triiodothyronine (T3)	0.704	ng/ml	
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(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.
 Reference interval (ng/ml)

1 - 3 days : 0.1 - 7.4
 1-11 months : 0.1 - 2.45
 1-5 years : 0.1 - 2.7
 6-10 years : 0.9 - 2.4
 11-15 years : 0.8 - 2.1
 16-20 years : 0.8 - 2.1
 Adults (20 - 50 years) : 0.7 - 2.0
 Adults (> 50 years) : 0.4 - 1.8
 Pregnancy (in last 5 months) : 1.2 - 2.5

(Reference : Tietz - Clinical guide to laboratory test, 4th edition))

Thyroxine (T4)	6.83	mcg/dL	
----------------	------	--------	--

(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.
 Reference interval (mcg/dL)

1 - 3 days : 11.8 - 22.6
 1 - 2 weeks : 9.8 - 16.6
 1 - 4 months : 7.2 - 14.4
 4 - 12 months : 7.8 - 16.5
 1-5 years : 7.3 - 15.0
 5 - 10 years : 6.4 - 13.3
 10 - 20 years : 5.6 - 11.7
 Adults / male : 4.6 - 10.5
 Adults / female : 5.5 - 11.0
 Adults (> 60 years) : 5.0 - 10.7

(Reference : Tietz - Clinical guide to laboratory test, 4th edition))

Thyroid Stimulating Hormone (US-TSH)	2.56	microIU/ml	
--------------------------------------	------	------------	--

(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.
 Reference interval (microIU/ml)

Infants (1-4 days) : 1.0 - 39
 2-20 weeks : 1.7 - 9.1
 5 months - 20 years : 0.7 - 6.4
 Adults (21 - 54 years) : 0.4 - 4.2
 Adults (> 55 years) : 0.5 - 8.9

Pregnancy :

1st trimester : 0.3 - 4.5
 2nd trimester : 0.5 - 4.6
 3rd trimester : 0.8 - 5.2

(Reference : Tietz - Clinical guide to laboratory test, 4th edition))

--- End of Report ---

Dr. Rakesh Vaidya
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Urine Routine

Test	Result	Units	Biological Ref. Range
Physical Examination			
Quantity	30	mL	
Colour	Pale Yellow		
Appearance	Turbid (Slight)		
Chemical Examination (By Reagent strip method)			
pH	6.0		
Specific Gravity	1.015		
Protein	Negative	gm/dL	Negative
Glucose	Negative	mg/dL	Negative
Ketones	Negative		Negative
Bilirubin	Negative		Negative
Urobilinogen	Negative		Negative (upto 1)
Blood	Negative		Negative
Bile Salt	Absent		Absent
Leucocytes	Trace		Negative
Bile Pigments	Absent		Absent
Nitrite	Negative		Negative

Microscopic Examination (After Centrifugation at 2000 rpm for 10 min)

Red Blood Cells	Nil	/hpf	0 - 2
Leucocytes	Present (2-5)	/hpf	0 - 5
Epithelial Cells	Present (0-2)	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil		Nil
Mucus	Absent		Absent
Organism	Absent		

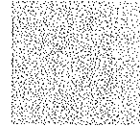
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Dr. Nikunj V. Mehta
MD (Path.)Dr. Rakesh Vaidya
Approved By Dr. Sejal Odedra

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Clinical Biochemistry

Test	Result	Units	Biological Ref. Range
Fasting Plasma Glucose	87	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	103	mg/dL	70 - 140

By Hexokinase method on RXL Dade Dimension

--- End of Report ---

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Mammography

Interventional Radiology

Digital Subtraction Angiography

Foetal Echocardiography

Echocardiography

Patient No. : 21040553 Report Date : 26/03/2022
Request No. : 190014866 26/03/2022 8.50 AM
Patient Name : SONIA ALOK BAKSHI
Gender / Age : Female / 57 Years 5 Months 15 Days

USG : Screening for Abdomen (excluding Pelvis) Or Upper Abdomen

Liver is normal in size and echopattern. No mass lesion identified. The hepaticveins are clear and patent. PV patent. No dilated IHBR.

Gall bladder is well distended and shows no obvious abnormality. Common bile duct is not dilated.

Pancreas shows no obvious abnormality. Tail obscured.
Spleen is normal size and echopattern.

Both kidneys are normal in shape and position. Normal echogenicity and cortico medullary differentiation is noted. No hydronephrosis or mass lesion seen.

Uterus is Post menopausal in size and echo pattern. There is 10x12 mm calcified fibroid seen in uterus.

Uterine length : 46 mm.
A.P. : 27 mm.

No adnexal mass seen.

Urinary bladder is well distended and appears normal.

No ascites.

COMMENT:

Uterine Fibroid.

Kindly correlate clinically

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
• NOT VALID FOR MEDICO-LEGAL PURPOSES
• CLINICAL CORRELATION RECOMMENDED

Hasani

Dr. Purna C Hasani, MD
Consultant Radiologist





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DEPARTMENT OF DIAGNOSTIC RADIOLOGY

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Computer Radiography

Ultra Sensitive Colour Doppler

Ultra High Resolution Sonography

Multi-Detector CT Scan

Mammography

Interventional Radiology

Digital Subtraction Angiography

Foetal Echocardiography

Echocardiography

Patient No. : 21040553 Report Date : 26/03/2022
Request No. : 190014877 26/03/2022 8.50 AM
Patient Name : **SONIA ALOK BAKSHI**
Gender / Age : Female / 57 Years 5 Months 15 Days

Mammography (Both Breast)

Both side mammogram has been obtained in mediolateral oblique (MLO) as well as craniocaudal (CC) projections.

Both breasts show scattered fibro glandular parenchyma.
No obvious focal mass seen on either side.
No obvious micro/cluster calcification seen.
Bilateral benign specks of calcifications are seen.
No obvious skin thickening or nipple retraction seen.
No enlarged axillary lymph nodes seen.

IMPRESSION:

No obvious focal mass in breasts. BI-RADS category 2.
Kindly correlate clinically /Follow up

BIRADS: 0- needs additional imaging, 1- negative, 2- benign, 3- probably benign (require short term follow up), 4- suspicious (require further evaluation with biopsy), 5- highly suspicious for malignancy, 6- biopsy proven malignancy.

INFORMATION REGARDING MAMMOGRAMS:

- A REPORT THAT IS NEGATIVE FOR MALIGNANCY SHOULD NOT DELAY BIOPSY IF THERE IS A DOMINANT OR CLINICALLY SUSPICIOUS MASS.
- IN DENSE BREASTS, AN UNDERLYING MASS LESION MAY BE OBSCURED.
- FALSE POSITIVE DIAGNOSIS OF CANCER MAY OCCURE IN SMALL PERCENTAGE OF CASES.

Prerna C Hasani

Dr. Prerna C Hasani, MD
Consultant Radiologist



• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
• NOT VALID FOR MEDICO-LEGAL PURPOSES
• CLINICAL CORRELATION RECOMMENDED



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DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 21040553 Report Date : 26/03/2022
Request No. : 190014864 26/03/2022 8.50 AM
Patient Name : **SONIA ALOK BAKSHI**
Gender / Age : Female / 57 Years 5 Months 15 Days

ADVANCED DIGITAL SOLUTIONS

Computer Radiography
Ultra Sensitive Colour Doppler
Ultra High Resolution Sonography
Multi-Detector CT Scan
Mammography
Interventional Radiology
Digital Subtraction Angiography
Foetal Echocardiography
Echocardiography

X-Ray Chest AP

Both lung fields are clear.

Both costophrenic sinuses appear clear.

Heart size is normal.

Hilar shadows show no obvious abnormality.

Aorta is normal.

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
• NOT VALID FOR MEDICO-LEGAL PURPOSES
• CLINICAL CORRELATION RECOMMENDED

Prerna C Hasani

Dr. Prerna C Hasani, MD
Consultant Radiologist





ELU



BHAILAL AMIN
GENERAL HOSPITAL

Patient No. : 21040553 Report Date : 26/03/2022
Request No. : 190014884 26/03/2022 8.50 AM
Patient Name : SONIA ALOK BAKSHI
Gender / Age : Female / 57 Years 5 Months 15 Days

Echo Color Doppler

MITRAL VALVE : NORMAL, NO MS, NO MR
AORTIC VALVE : TRILEAFLET, NO AS, NO AR
TRICUSPID VALVE : NORMAL, TRIVIAL TR, NO PAH
PULMONARY VALVE : NORMAL, NO PR, NO PS
LEFT ATRIUM : NORMAL SIZE
AORTA : NORMAL
LEFT VENTRICLE : NORMAL LVEF – 60%, NO RWMA AT REST
RIGHT ATRIUM : NORMAL SIZE
RIGHT VENTRICLE : NORMAL SIZE
I.V.S. : INTACT
I.A.S. : INTACT
PULMONARY ARTERY : NORMAL
PERICARDIUM : NO EFFUSION
COLOUR/DOPPLER FLOW MAPPING : TRIVIAL TR

FINAL CONCLUSION:

1. NORMAL SIZED ALL CARDIAC CHAMBERS
2. NORMAL LV SYSTOLIC FUNCTION LVEF – 60%
3. NO RESTING REGIONAL WALL MOTION ABNORMALITY
4. NORMAL VALVES, NO MITRAL / AORTIC STENOSIS
5. NORMAL RIGHT HEART SIZE AND RV PRESSURES
6. NO PERICARDIAL EFFUSION, CLOT OR VEGETATION SEEN, SR+.

DR.KILLOL KANERIA, M.D.,D.M.,CARD.

ECU/21040553
57 Years

26-Mar-22

9:41:52 AM
Female

MRS SONIA A BAKSHI

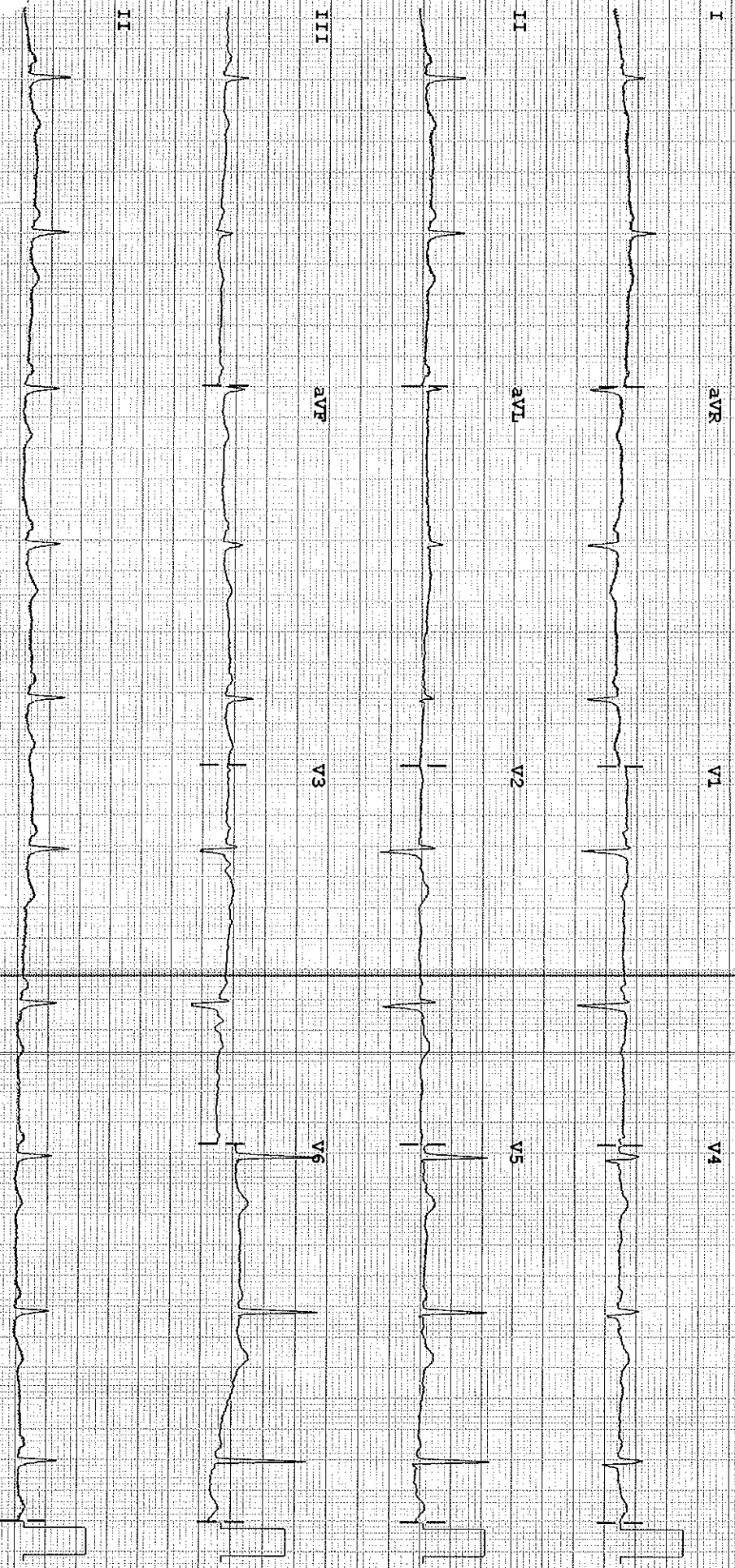


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PUNJAB ASSOCIATION OF PHYSICIANS
AN AMERICAN, NABL & ISO Accredited Institute

Doctor DR M ITTAL

Rate 59
PR 132
QRSD 81
QT 428
QTc 424

--AXIS--
P 63
QRS 52
T 70



Dev: Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10 mm/mV

50 ~ 0.15-150 Hz

PH08

P2

Dr. Sonica Peshin

Cosmetic Dentist & Implantologist

Reg. No. : 6966-A

M. : 9586867301



BHAILAL AMIN
GENERAL HOSPITAL

Dental assessment form

26/03/2022

Name: Sonia Alok Bakshi

Age/ Sex: 57 years/Female

Patient has come for a regular check up

On Examination:

- Calculus++ stains++
- History of horizontal brushing
- Generalised attrition, recession
- Missing tooth with respect to 38 causing supra-eruption of 28 and decay with respect to 28

Provisional diagnosis:

- Chronic generalised gingivitis

Treatment plan:

- Scaling and polishing
- Extraction of 28, if pain arises

Advised:

- Brush your teeth twice daily
- Salt water gargle twice daily
- Clean your tongue and floss in between everyday.
- Follow vertical brushing technique.


Dr Sonica Peshin

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