

Consultant Physician Clinic

Patient Name:- Hiral Kumar Desai
Age / Sex :- 39 yrs / M
Chief Complaints:-

Goitre

Drug / Food Allergy:- NADA

Past History :-

Nil

Family History:- DMT2
Systemic Examination:-

NAD

Provisional Diagnosis: Normal

OPR NO:

Date: 10/06/23

Weight:-

Height:-

BMI:-

Nutritional assessment:-

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

Pulse:-

BP:-

SpO2:-

Investigation :-

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

Rx

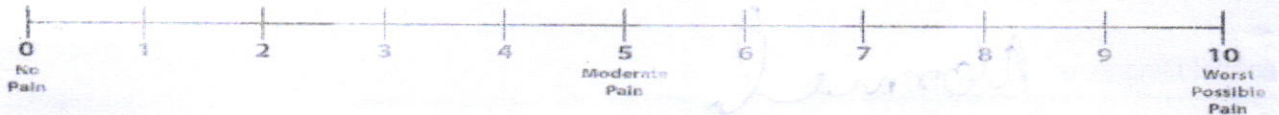
- Tab. Myomi-D OD x 40 days.

Follow Up Date:- col

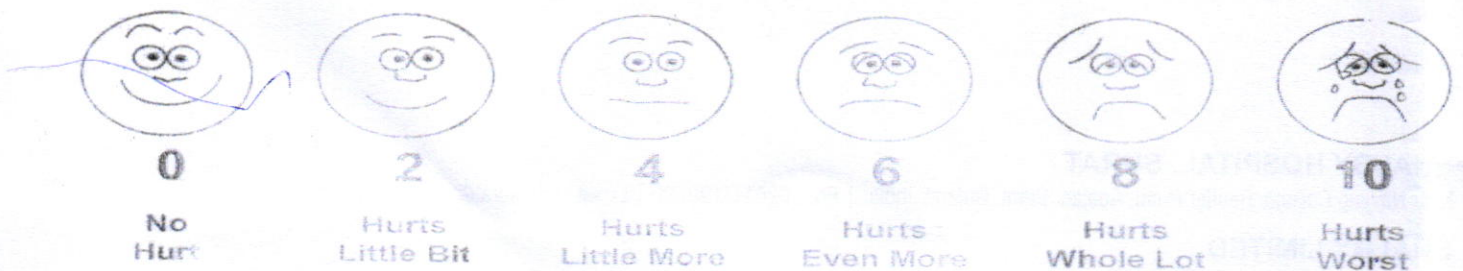
Dr
બધી દવાઓ ડોક્ટરને બતાવીને લેવી.

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

Numeric Rating Scale



Wong-Baker FACES® Pain Rating Scale



Patient ID:	SUR00007128	Patient Name:	HIRALKUMAR B. DESAI
Age:	39 Years	Sex:	M
Accession Number:	7128	Referring Physician:	DHAWAL MODI
Study Date:	10-Jun-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.

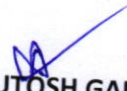
Both domes of diaphragm appear normal.

Bony thoracic cage and soft tissue shadow appear normal.

IMPRESSION:

- No significant abnormality seen.

Thanks for referral.


DR. ASHUTOSH GANDHI
CONSULTANT RADIOLOGIST

SHALBY HOSPITAL, SURAT

Near Navyug College, Rander Road, Adajan, Surat. Gujarat, India. | Ph. : 0261-7190000 | Email : info.surat@shalby.org.

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

PID : SUR0000343149 OP-001

REPORT STATUS : Interim



Patient Name : **Mr Hiralkumar Bhartbhai Desai** / Registered On : 10-Jun-2023 09:09 AM
 Lab ID : 306900645 Collected On : 10-Jun-2023 09:09 AM
 Gender/Age : Male / 39 Years DOB : 06-Nov-1983 Received On : 10-Jun-2023 09:20 AM
 Ref. By : Dr. Health Check Up . Shalby Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
<u>BLOOD COUNT AND INDICIES</u>			
HAEMOGLOBIN <i>Colorimetric Non Cyanide</i>	15.0	g/dL	13.0 - 17.0
RBC COUNT <i>Electrical Impedance</i>	5.22	mill/cmm	4.5 - 5.5
HCT <i>Calculated</i>	46.4	%	40 - 50
MCV <i>Calculated based on the RBC histogram</i>	88.9	fL	83 - 101
MCH <i>Calculated</i>	28.7	pg	27 - 32
MCHC <i>Calculated</i>	32.3	g/dL	31.5 - 34.5
RDW <i>Calculated</i>	12.7	%	13.3 - 18.3
<u>TOTAL LEUCOCYTE COUNT</u>			
Total WBC Count <i>Electrical Impedance</i>	5610	cells/cmm	4000 - 10000
<u>DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)</u>			
NEUTROPHILS <i>Flow Cytometry</i>	55	%	40 - 80
LYMPHOCYTES <i>Flow Cytometry</i>	34	%	20 - 40
EOSINOPHILS <i>Flow Cytometry</i>	6	%	1 - 6
MONOCYTES <i>Flow Cytometry</i>	5	%	2 - 10
BASOPHIL <i>Flow Cytometry</i>	0	%	0 - 2
<u>PLATELET INDICES</u>			
PLATELET COUNT <i>Electrical Impedance</i>	310000	/cmm	150000 - 410000
MPV <i>Calculated based on PLT Histogram</i>	7.7	fL	7.5 - 12.0
<u>PERIPHERAL SMEAR EXAMINATION</u>			
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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Dr Pankaj Agrawal

Dr Pankaj Agrawal

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

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Parameter	Result	Unit	Biological Ref. Interval
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BLOOD GROUP

(Tube agglutination: Forward & reverse)

ABO Type	"B"		
RH Type	POSITIVE		

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ESR 1st hour *	1	mm in 1 hour	0 - 15
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Modified Westergren Method

HBA1C

HbA1c - Glycated Haemoglobin *	5.5	%	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
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Boronate Affinity Assay

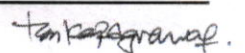
Estimated Average Glucose (eAG) (mg/dL) *	111	mg/dL	
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Calculated

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Gender/Age : Male / 39 Years	DOB : 06-Nov-1983
Received On : 10-Jun-2023 09:20 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)	86	mg/dL	74 - 106
<i>GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric</i>			

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

POST PRANDIAL PLASMA GLUCOSE

Plasma Glucose (PP)	83	mg/dL	Normal: 100-140 Impaired: 140 -199 Diabetic :=>200
<i>GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric</i>			

Urine Sugar (PP)	ABSENT	mg/dL	ABSENT
<i>Glucose-oxidase/oxidase reaction</i>			

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Gender/Age : Male / 39 Years DOB : 06-Nov-1983 Received On : 10-Jun-2023 09:47 AM
Ref. By : Dr. Health Check Up . Shalby Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
LIPID PROFILE			
LIPID PROFILE			
Cholesterol <i>Cholesterol Esterase, Oxidase, Peroxidase</i>	190	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
SERUM TRIGLYCERIDE <i>Lipase/GK/GPO/POD</i>	111	mg/dL	Normal : <150 Borderline High : 150-199 High : 200-499 Very High : > 500
HDL CHOLESTEROL DIRECT * <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>	150	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
S.LDL <i>Calculated</i>	128	mg/dL	Optimal: <100 Near to above Optimal: 100 - 129 Borderline High: 130 - 159 High: 160 - 189 Very High: > 190
VLDL <i>Calculated</i>	22	mg/dL	6 - 38
LDL/dHDL * <i>Calculated</i>	3.2		2.5 - 3.5
Chol/dHDL * <i>Calculated</i>	4.8	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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	Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
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RENAL FUNCTION TEST**RENAL FUNCTION TEST**

Urea Nitrogen (BUN) <i>Urease, colorimetric</i>	9	mg/dL	9 - 20
UREA <i>Calculated</i>	19	mg/dL	19 - 43
S. CREATININE <i>Enzymatic - Creatinine amidohydrolase</i>	0.54	mg/dL	0.66 - 1.25
S. URIC ACID <i>Uricase/Peroxidase, Colorimetric</i>	6.3	mg/dL	3.5 - 8.5
Calcium <i>Arsenazo III dye</i>	8.5	mg/dL	8.4 - 10.2
Sodium <i>Direct Ion Selective Electrode</i>	139	mmol/L	137 - 145
S. POTASSIUM <i>Direct Ion Selective Electrode</i>	4.48	mmol/L	3.5 - 5.1
Chloride <i>Direct Ion Selective Electrode</i>	105	mmol/L	98 - 107

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

Parameter	Result	Unit	Biological Ref. Interval
Total T3 * <i>Chemiluminescence immunoassay (CLIA)</i>	147	ng/dL	87 - 178
Total T4 * <i>Chemiluminescence immunoassay (CLIA)</i>	14.95	µg/dL	6.09 - 12.23
TSH * <i>Chemiluminescence immunoassay (CLIA)</i>	3.223	µIU/mL	0.38 - 5.33

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Lab ID : 306900645	Collected On : 10-Jun-2023 09:09 AM
Gender/Age : Male / 39 Years	DOB : 06-Nov-1983
Received On : 10-Jun-2023 09:20 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
Transperancy	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>	1.020	S.G. value
Leucocyte	<i>Leucocyte Esterase Test</i>	NEGATIVE	WBCs/ μ L
Microscopic Examination			
Pus cells	1-2/hpf	/hpf	0-5/hpf
Red blood cells	NIL	/hpf	0-2/hpf
Epithelial cells	2-3/hpf	/hpf	NA
Crystals	NIL		Nil
Cast	NIL/LPF		Nil/LPF
Bacteria	NIL		Nil
Amorphous	NIL		Nil
Yeast	NIL		Nil

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	Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
Liver Function Test			
Liver Function Test			
SGPT (ALT) <i>Multi Point Rate with P-5-P</i>	48	U/L	21 - 72
SGOT (AST) <i>Multi Point Rate with P-5-P</i>	27	U/L	17 - 59
Alkaline Phosphatase <i>PNPP, AMP Buffer</i>	87	U/L	20-50 yrs : 53 - 128 4-19 yr : 54 - 369 >=51 yr : 56 - 119
GGT * <i>L-gamma-glutamyl-4-nitroanalide/glycylglycine Kinetic</i>	28	U/L	15 - 73
S. PROTEIN <i>Biuret (Alkaline cupric sulfate), End Point</i>	6.5	g/dL	6.3 - 8.2
Albumin <i>Bromocresol Green (BCG), Colorimetric</i>	4.3	g/dL	3.5 - 5.0
S. GLOBULIN <i>Calculated</i>	2.2	g/dL	2.3 - 3.6
A/G Ratio <i>Calculated</i>	2.0	Ratio	1.0 - 2.3
Bilirubin Total <i>Azobilirubin/Dyphylline/Diazonium Salt</i>	0.8	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>	0.8	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

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

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

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

Name :- Hiral Desai

Date:- 15/6/23

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:- 26/6

PH Vision:-

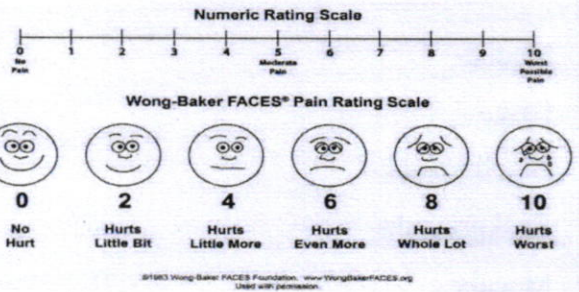
NCT 12
16

ON Examination

Ant. Segmenet

Both Eye

- WMC



Cornea

Anterior Chamber

Lens

Fundus

Rt. EYE

Lt. EYE

Media:-

Disc:-

Blood Vessel:-

Background:-

Macula:-

Diagnosis:-

Treatment:-

Investigation:-

-wa

Nutritional Assessment:-

Preventive Care & Counsellings:-

Follow Up ON:-

(+2 months)

Signature of the Consultant



Patient Name: HIRALKUMAR DESAI	
Age / Sex: 39 Yrs. / Male	Study: USG Abdomen + Pelvis
Referred By: Dr. at shalby Hospital	Date: 10/06/2023

ULTRASOUND OF ABDOMEN AND PELVIS

Liver is normal in size shows grade I fatty changes. 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.

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:

- Grade I fatty liver.
- No other significant abnormality is seen.

Thanks for referral.

DR. ASHUTOSH GANDHI

DMRD (Radiodiagnosis)
G-14916

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CIN: L85110GJ2004PLC044667

HIRALKUMAR DESAI
23.06.10-11-11-27-STD-1.3.12.2.1107



11:11:35 AM 10-Jun-23
HIRALKUMAR DESAI
23.06.10-11-11-27-STD-1.3.12.2.1107

SIEMENS
AC1
Abdomen
General
M: 1.2
18cm
2D-100%
TH
H4.00 MHz
S88.0/RT70
ACC-3
DTCE-M
MapQ-STD



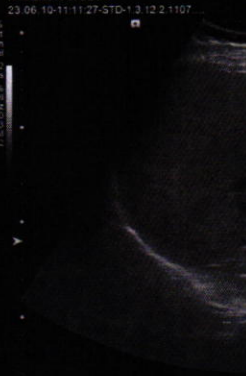
11:11:38 AM 10-Jun-23
HIRALKUMAR DESAI
23.06.10-11-11-27-STD-1.3.12.2.1107

SIEMENS
AC1
Abdomen
General
M: 1.2
18cm
2D-100%
TH
H4.00 MHz
S88.0/RT70
ACC-3
DTCE-M
MapQ-STD



11:11:47 AM 10-Jun-23

SIEMENS
AC1
Abdomen
General
M: 1.2
18cm
2D-100%
TH
H4.00 MHz
S88.0/RT70
ACC-3
DTCE-M
MapQ-STD

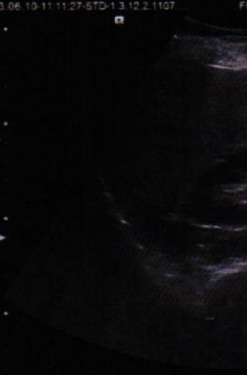


HIRALKUMAR DESAI
23.06.10-11-11-27-STD-1.3.12.2.1107



11:11:54 AM 10-Jun-23
HIRALKUMAR DESAI
23.06.10-11-11-27-STD-1.3.12.2.1107

SIEMENS
AC1
Abdomen
General
M: 1.2
18cm
2D-100%
TH
H4.00 MHz
S88.0/RT70
ACC-3
DTCE-M
MapQ-STD



11:11:58 AM 10-Jun-23
HIRALKUMAR DESAI
23.06.10-11-11-27-STD-1.3.12.2.1107

SIEMENS
AC1
Abdomen
General
M: 1.2
18cm
2D-100%
TH
H4.00 MHz
S88.0/RT70
ACC-3
DTCE-M
MapQ-STD



11:12:03 AM 10-Jun-23

SIEMENS
AC1
Abdomen
Gen
T: 0.5
F: 0.5
M: 1.2
18cm
2D-100%
TH
H4.00 MHz
S88.0/RT70
ACC-3
DTCE-M
MapQ-STD
C-100%
2.50MHz
S88 Gen
S88 STD
MapQ-F2

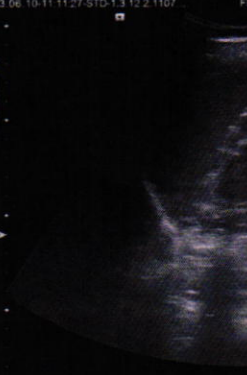


HIRALKUMAR DESAI
23.06.10-11-11-27-STD-1.3.12.2.1107



11:12:06 AM 10-Jun-23
HIRALKUMAR DESAI
23.06.10-11-11-27-STD-1.3.12.2.1107

SIEMENS
AC1
Abdomen
General
M: 1.2
18cm
2D-100%
TH
H4.00 MHz
S88.0/RT70
ACC-3
DTCE-M
MapQ-STD



11:12:10 AM 10-Jun-23
HIRALKUMAR DESAI
23.06.10-11-11-27-STD-1.3.12.2.1107

SIEMENS
AC1
Abdomen
General
M: 1.2
18cm
2D-100%
TH
H4.00 MHz
S88.0/RT70
ACC-3
DTCE-M
MapQ-STD

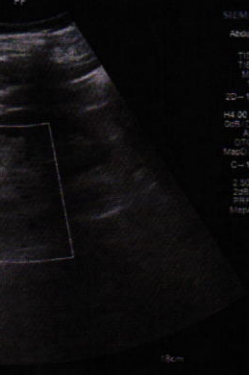


11:12:13 AM 10-Jun-23

SIEMENS
AC1
Abdomen
General
M: 1.2
18cm
2D-100%
TH
H4.00 MHz
S88.0/RT70
ACC-3
DTCE-M
MapQ-STD

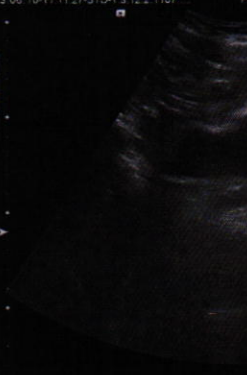


HIRALKUMAR DESAI
23.06.10-11-11-27-STD-1.3.12.2.1107



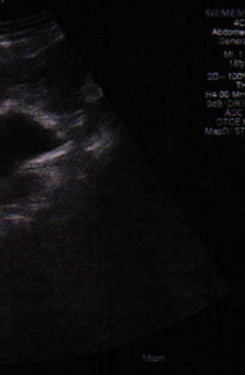
11:12:18 AM 10-Jun-23
HIRALKUMAR DESAI
23.06.10-11-11-27-STD-1.3.12.2.1107

SIEMENS
AC1
Abdomen
Gen
T: 0.5
F: 0.5
M: 1.2
18cm
2D-100%
TH
H4.00 MHz
S88.0/RT70
ACC-3
DTCE-M
MapQ-STD
C-100%
2.50MHz
S88 Gen
S88 STD
MapQ-F2



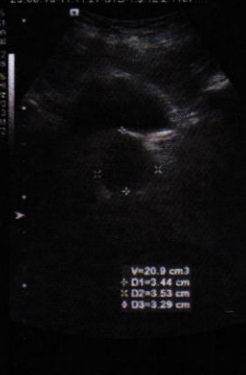
11:12:24 AM 10-Jun-23
HIRALKUMAR DESAI
23.06.10-11-11-27-STD-1.3.12.2.1107

SIEMENS
AC1
Abdomen
General
M: 1.2
18cm
2D-100%
TH
H4.00 MHz
S88.0/RT70
ACC-3
DTCE-M
MapQ-STD



11:12:43 AM 10-Jun-23

SIEMENS
AC1
Abdomen
General
M: 1.2
18cm
2D-100%
TH
H4.00 MHz
S88.0/RT70
ACC-3
DTCE-M
MapQ-STD



SHALBY HOSPITAL
NR. NAVYUG COLLAGE, RANDER ROAD
SURAT

Station
Telephone:

EXERCISE STRESS TEST REPORT

Patient Name: HIRALKUMAR DESAI,
Patient ID: 43093
Height:
Weight:

DOB: 26.11.1983
Age: 39yrs
Gender: Male
Race: Asian

Study Date: 10.06.2023
Test Type: --
Protocol: BRUCE

Referring Physician: --
Attending Physician: --
Technician: --

Medications:

--

Medical History:

--

Reason for Exercise Test:

--

Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (km/h)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	00:06	0.00	0.00		130/80	
	STANDING	00:18	0.80	0.00	85		
EXERCISE	STAGE 1	03:00	2.70	0.00	157	130/80	
	STAGE 2	03:00	4.00	12.00	179	140/80	
	STAGE 3	01:07	5.40	14.00	187	160/80	
RECOVERY		02:58	0.00	0.00	137	140/80	

The patient exercised according to the BRUCE for 7:07 min:s, achieving a work level of Max. METS: 10.00. The resting heart rate of 86 bpm rose to a maximal heart rate of 187 bpm. This value represents 103 % of the maximal, age-predicted heart rate. The resting blood pressure of 130/80 mmHg, rose to a maximum blood pressure of 160/80 mmHg. The exercise test was stopped due to Target heart rate achieved.

Interpretation

Summary: Resting ECG: normal.
Functional Capacity: normal.
HR Response to Exercise: appropriate.
BP Response to Exercise: normal resting BP - appropriate response.
Chest Pain: none.
Arrhythmias: none.
ST Changes: none.
Overall impression: Normal stress test.

Conclusions

TMT IS NEGATIVE FOR INDUCIBLE ISCHEMIA

Physician _____

Technician _____

HIRALKUMAR DESAI,

Patient ID 43093

10.06.2023 Male

10:32:30 39yrs Asian

Meds:

Test Reason:

Medical History:

Ref. MD: Ordering MD:

Technician: Test Type:

Comment:

Tabular Summary

SHALBY HOSPITAL

BRUCE: Total Exercise Time 07:07

Max HR: 187 bpm 103% of max predicted 181 bpm HR at rest: 86

Max BP: 160/80 mmHg BP at rest: 130/80 Max RPP: 29440 mmHg*bpm

Maximum Workload: 10.00 METS

Max. ST: -1.55 mm, 0.00 mV/s in II; EXERCISE STAGE 1 01:59

Arrhythmia: A:38, PVC:4, PSVC:1

ST/HR index: 0.63 μ V/bpm

Reasons for Termination: Target heart rate achieved

Summary: Resting ECG: normal. Functional Capacity: normal. HR Response to

Exercise: appropriate. BP Response to Exercise: normal resting BP - appropriate

response. Chest Pain: none. Arrhythmias: none. ST Changes: none. Overall

impression: Normal stress test.

Conclusion: TMT IS NEGATIVE FOR INDUCIBLE ISCHEMIA

Location Number: * 0 *

Phase Name	Stage Name	Time in Stage	Speed (km/h)	Grade (%)	Workload (METS)	HR (bpm)	BP (mmHg)	RPP (mmHg*bpm)	VE (/min)	ST Level (II mm)	Comment
PRETEST	SUPINE	00:06	0.00	0.00	1.0		130/80		0	--	
	STANDING	00:18	0.80	0.00	1.0	85			0	-0.15	
EXERCISE	STAGE 1	03:00	2.70	0.00	2.2	157	130/80	20410	0	-1.00	
	STAGE 2	03:00	4.00	12.00	7.0	179	140/80	25060	0	-0.60	
	STAGE 3	01:07	5.40	14.00	10.0	187	160/80	29920	0	-0.60	
RECOVERY		02:58	0.00	0.00	1.0	137	140/80	19180	0	0.40	

HIRALKUMAR DESAI,

Patient ID 43093

10.06.2023

10:32:50

12-Lead Report

PRETEST

STANDING

00:14

BRUCE

0.0 km/h

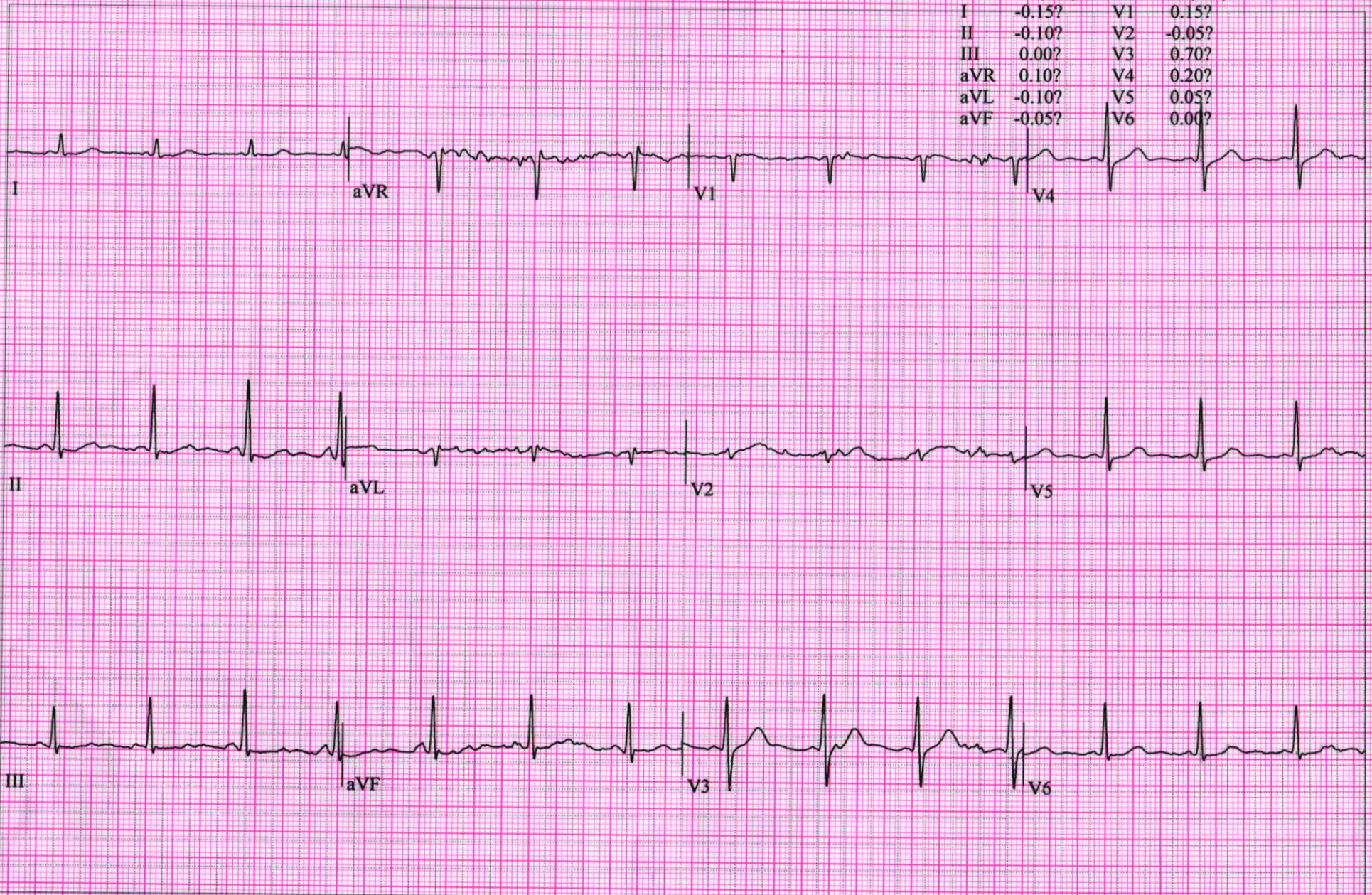
0.0 %

SHALBY HOSPITAL

86 bpm
130/80 mmHg

Measured at 60ms Post J (10mm/mV)
Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	-0.15?	V1	0.15?
II	-0.10?	V2	-0.05?
III	0.00?	V3	0.70?
aVR	0.10?	V4	0.20?
aVL	-0.10?	V5	0.05?
aVF	-0.05?	V6	0.00?



HIRALKUMAR DESAI,

Patient ID 43093

10.06.2023

10:35:48

12-Lead Report

EXERCISE

STAGE I

02:50

BRUCE

2.7 km/h

0.0 %

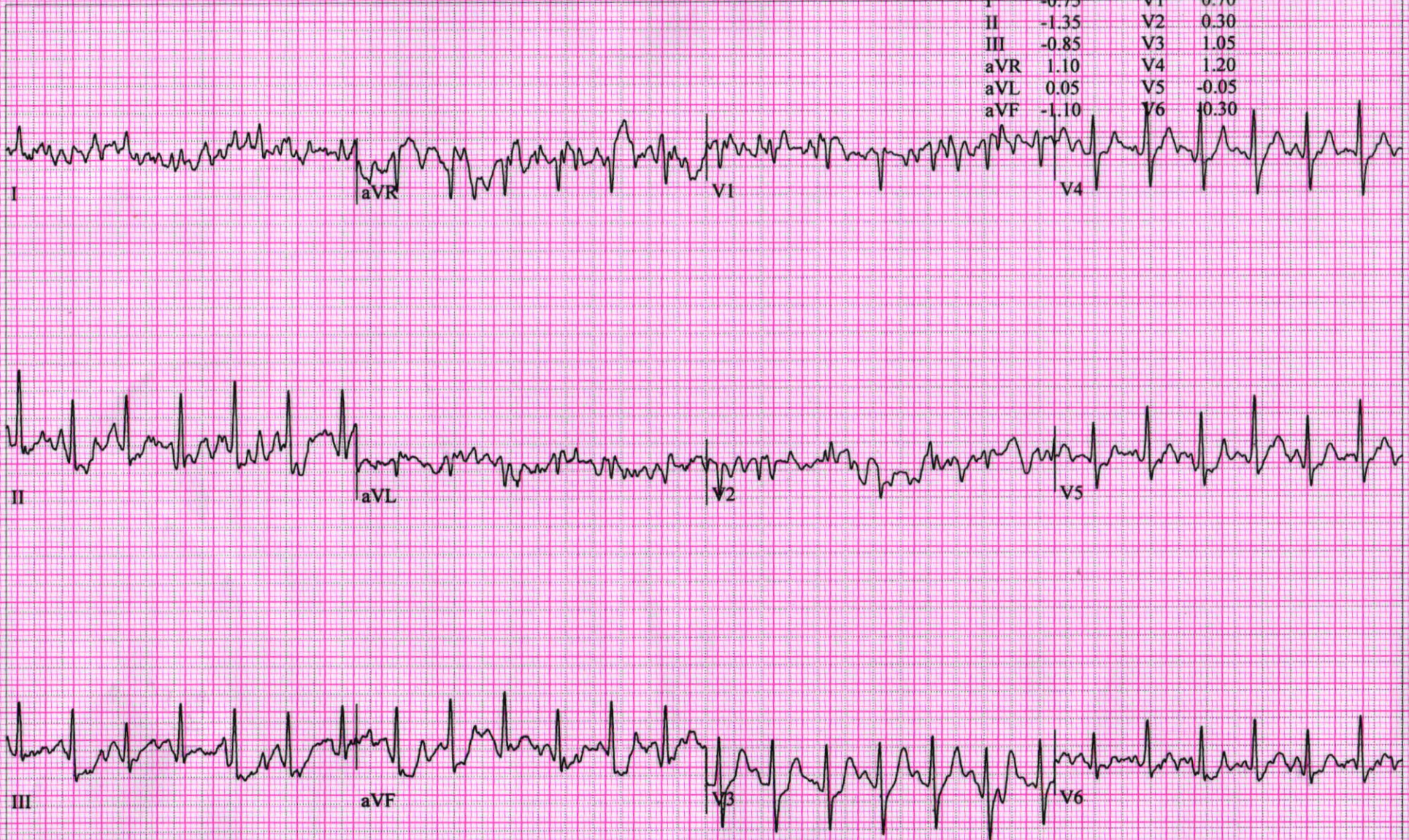
SHALBY HOSPITAL

157 bpm
130/80 mmHg

Measured at 60ms Post J (10mm/mV)

Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	-0.75	V1	0.70
II	-1.35	V2	0.30
III	-0.85	V3	1.05
aVR	1.10	V4	1.20
aVL	0.05	V5	-0.05
aVF	-1.10	V6	10.30



HIRALKUMAR DESAI,

Patient ID 43093

10.06.2023

10:38:48

12-Lead Report

179 bpm
140/80 mmHg

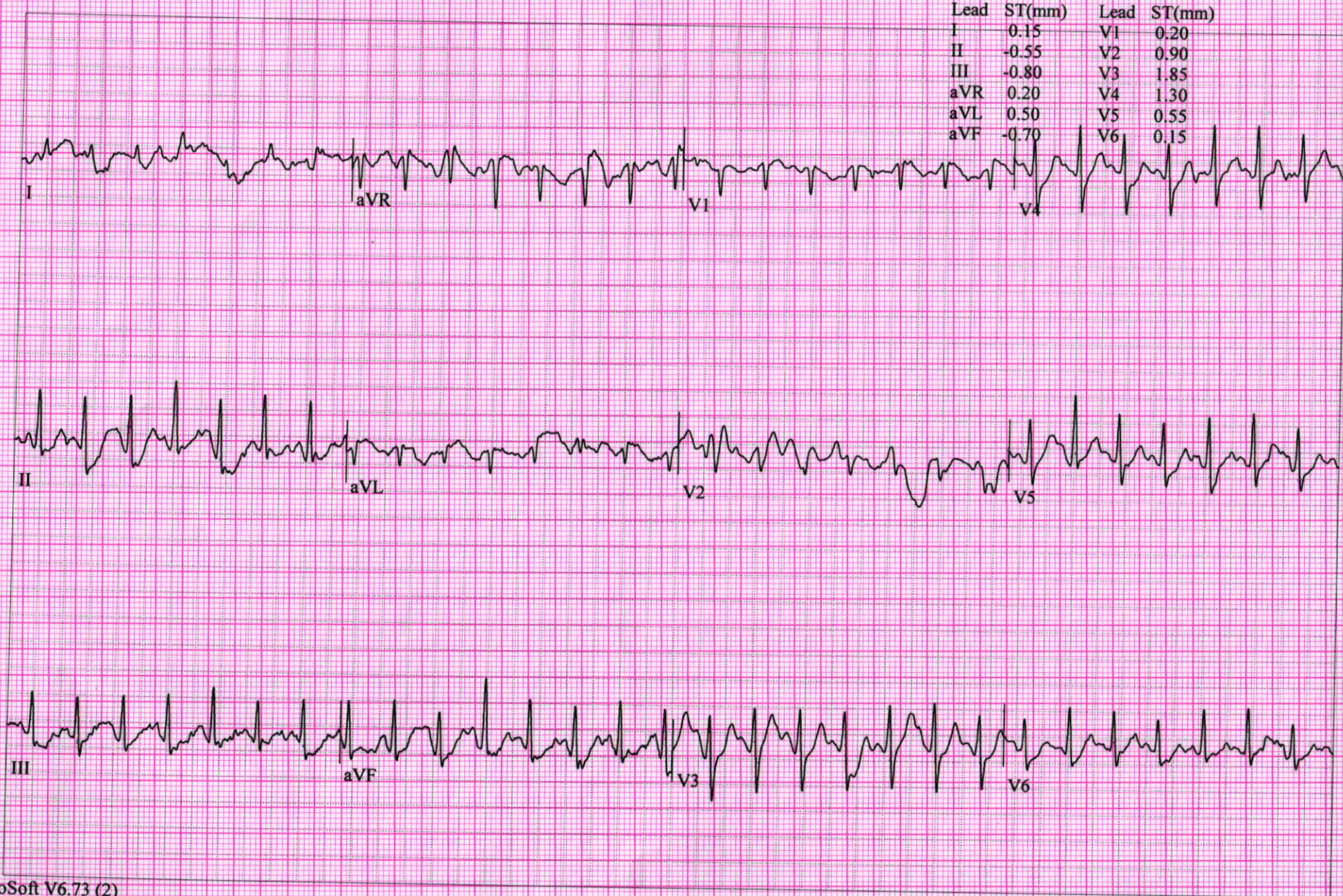
EXERCISE
STAGE 2
05:50

BRUCE
4.0 km/h
12.0 %

SHALBY HOSPITAL

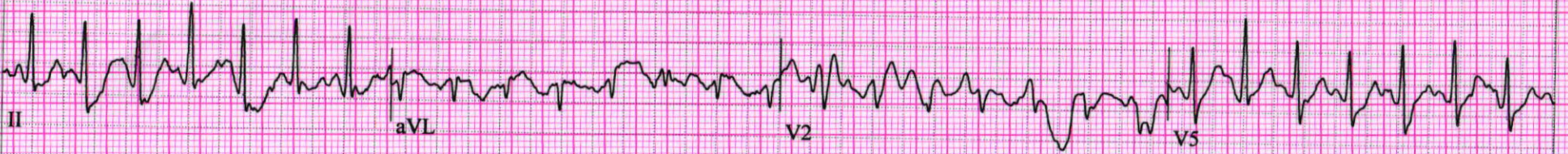
Measured at 60ms Post J (10mm/mV)
Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	0.15	V1	0.20
II	-0.55	V2	0.90
III	-0.80	V3	1.85
aVR	0.20	V4	1.30
aVL	0.50	V5	0.55
aVF	-0.70	V6	0.15



Measured at 60ms Post J (10mm/mV)
Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	0.15	V1	0.20
II	-0.55	V2	0.90
III	-0.80	V3	1.85
aVR	0.20	V4	1.30
aVL	0.50	V5	0.55
aVF	-0.70	V6	0.15



HIRALKUMAR DESAI,
Patient ID 43093
10.06.2023
10:40:05

187 bpm
160/80 mmHg

EXERCISE
STAGE 3
07:07

12-Lead Report (PEAK EXERCISE)

BRUCE
5.4 km/h
14.0 %

SHALBY HOSPITAL

Measured at 60ms Post J (10mm/mV)
Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	-0.75	V1	-0.40
II	-0.60	V2	0.20
III	-0.05	V3	1.05
aVR	0.75	V4	2.60
aVL	-0.35	V5	-0.05
aVF	-0.40	V6	-0.50

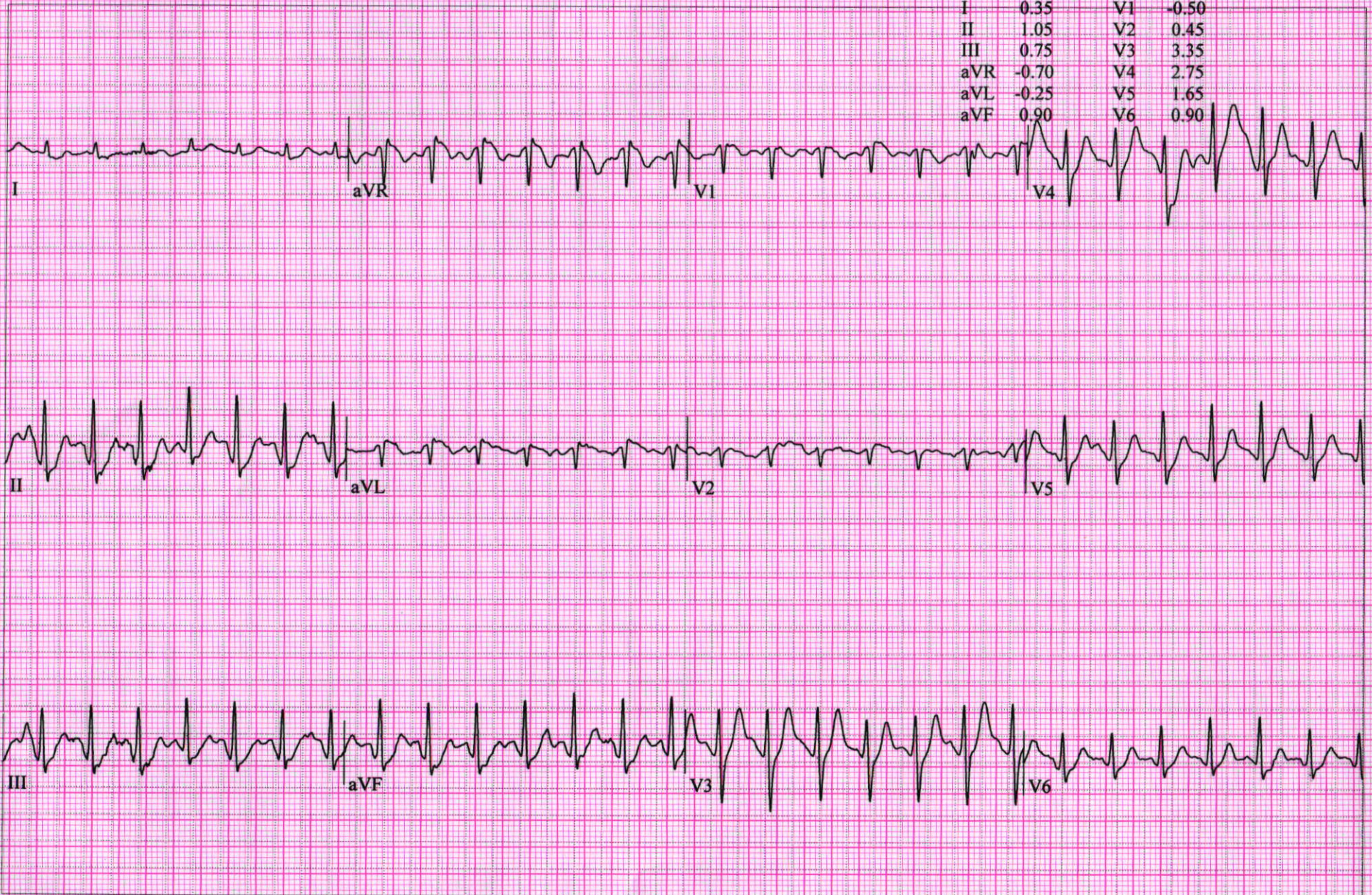


171 bpm

Measured at 60ms Post J (10mm/mV)

Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	0.35	V1	-0.50
II	1.05	V2	0.45
III	0.75	V3	3.35
aVR	-0.70	V4	2.75
aVL	-0.25	V5	1.65
aVF	0.90	V6	0.90



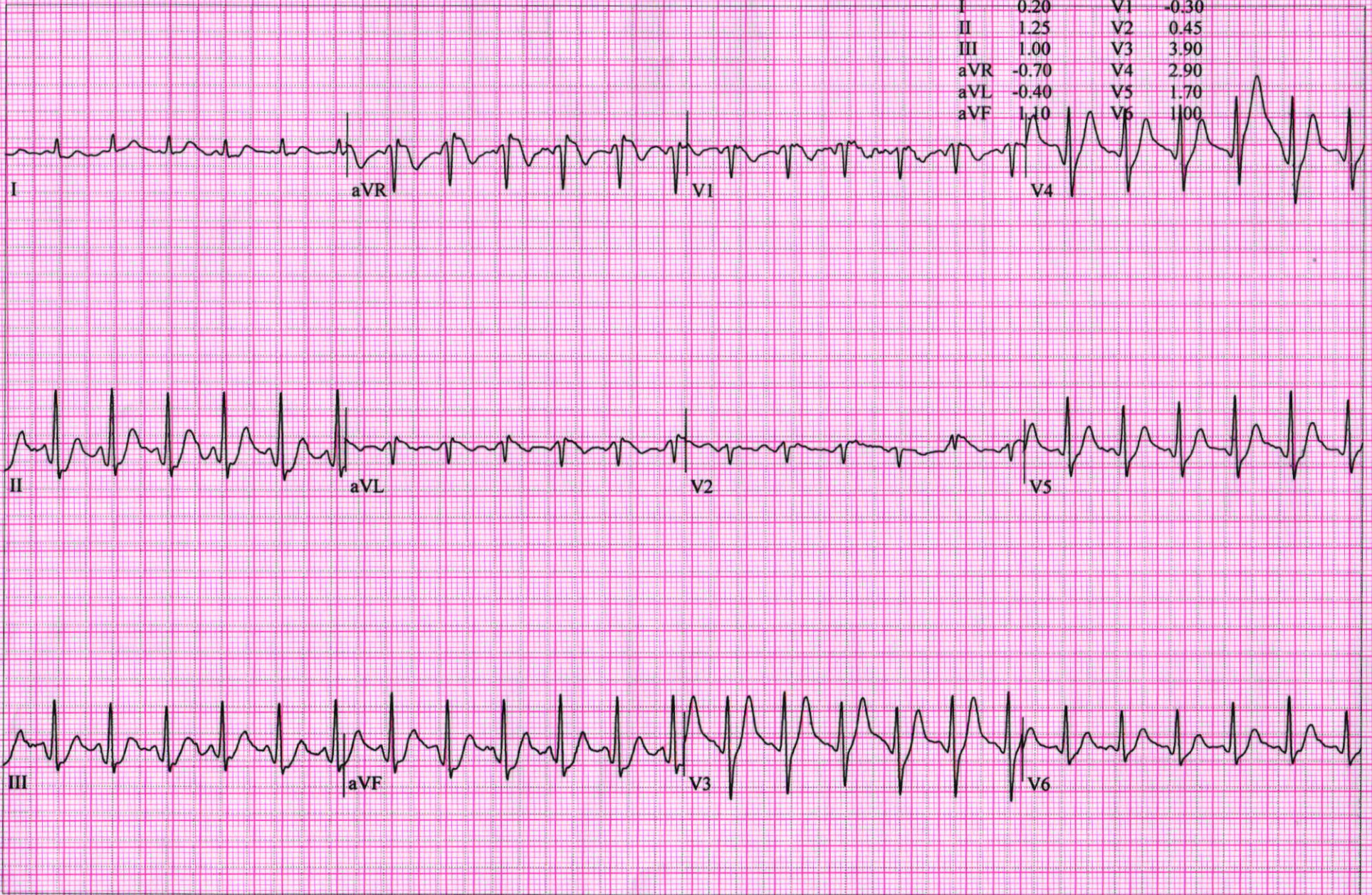
146 bpm

160/80 mmHg

Measured at 60ms Post J (10mm/mV)

Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	0.20	V1	-0.30
II	1.25	V2	0.45
III	1.00	V3	3.90
aVR	-0.70	V4	2.90
aVL	-0.40	V5	1.70
aVF	1.10	V6	1.00



HIRALKUMAR DESAI,
Patient ID 43093
10.06.2023
10:42:55

136 bpm
140/80 mmHg

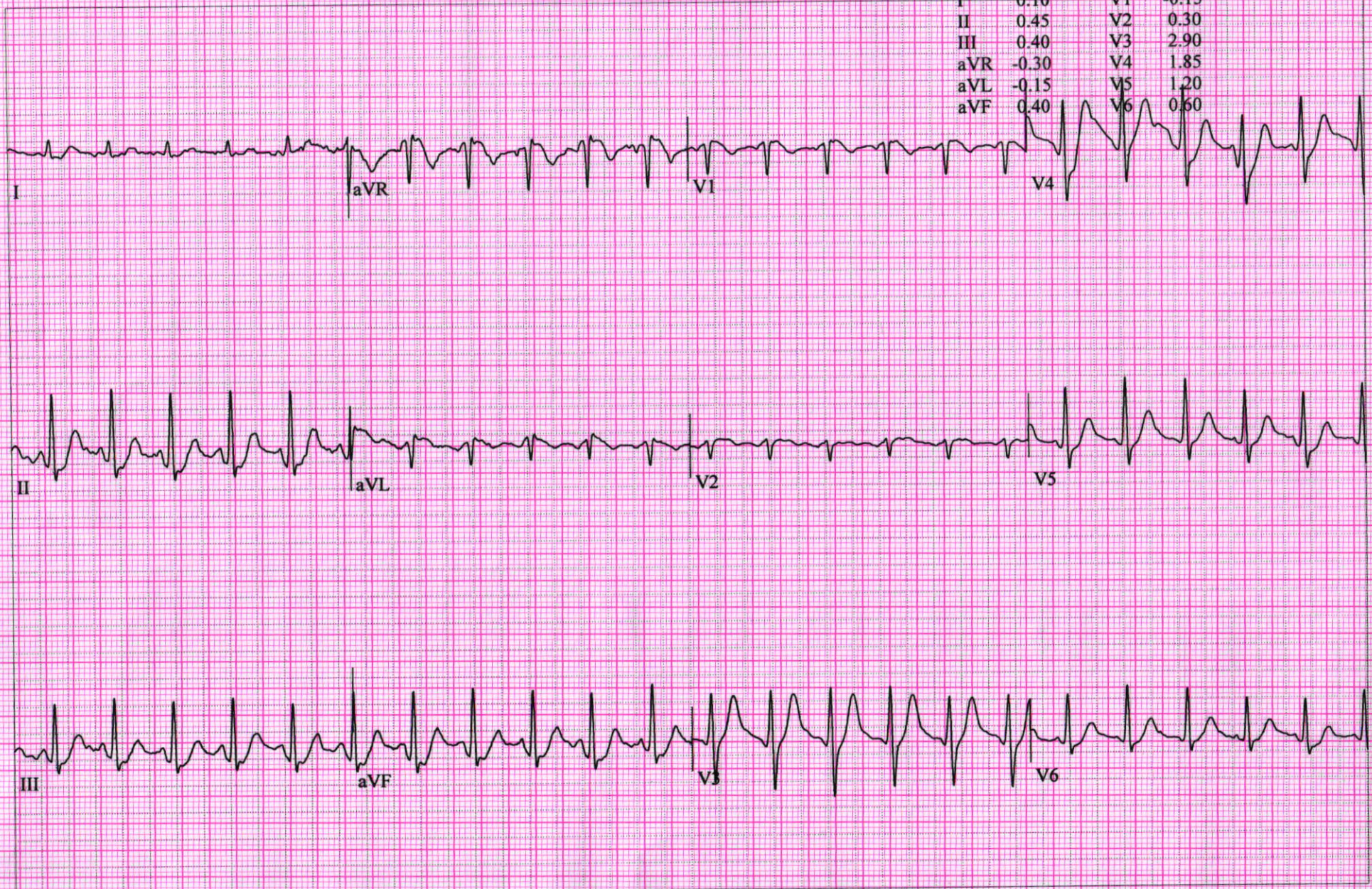
12-Lead Report
RECOVERY
#1
02:50

BRUCE
0.0 km/h
0.0 %

SHALBY HOSPITAL

Measured at 60ms Post J (10mm/mV)
Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	-0.10	V1	-0.15
II	0.45	V2	0.30
III	0.40	V3	2.90
aVR	-0.30	V4	1.85
aVL	-0.15	V5	1.20
aVF	0.40	V6	0.60



Hirai Kumar
Desai

1100 Sinus rhythm
9110 ** normal ECG **

Unconfirmed Report
Reviewed by:

years

mmHg

Birth date: / /

kg

cm

Medication:

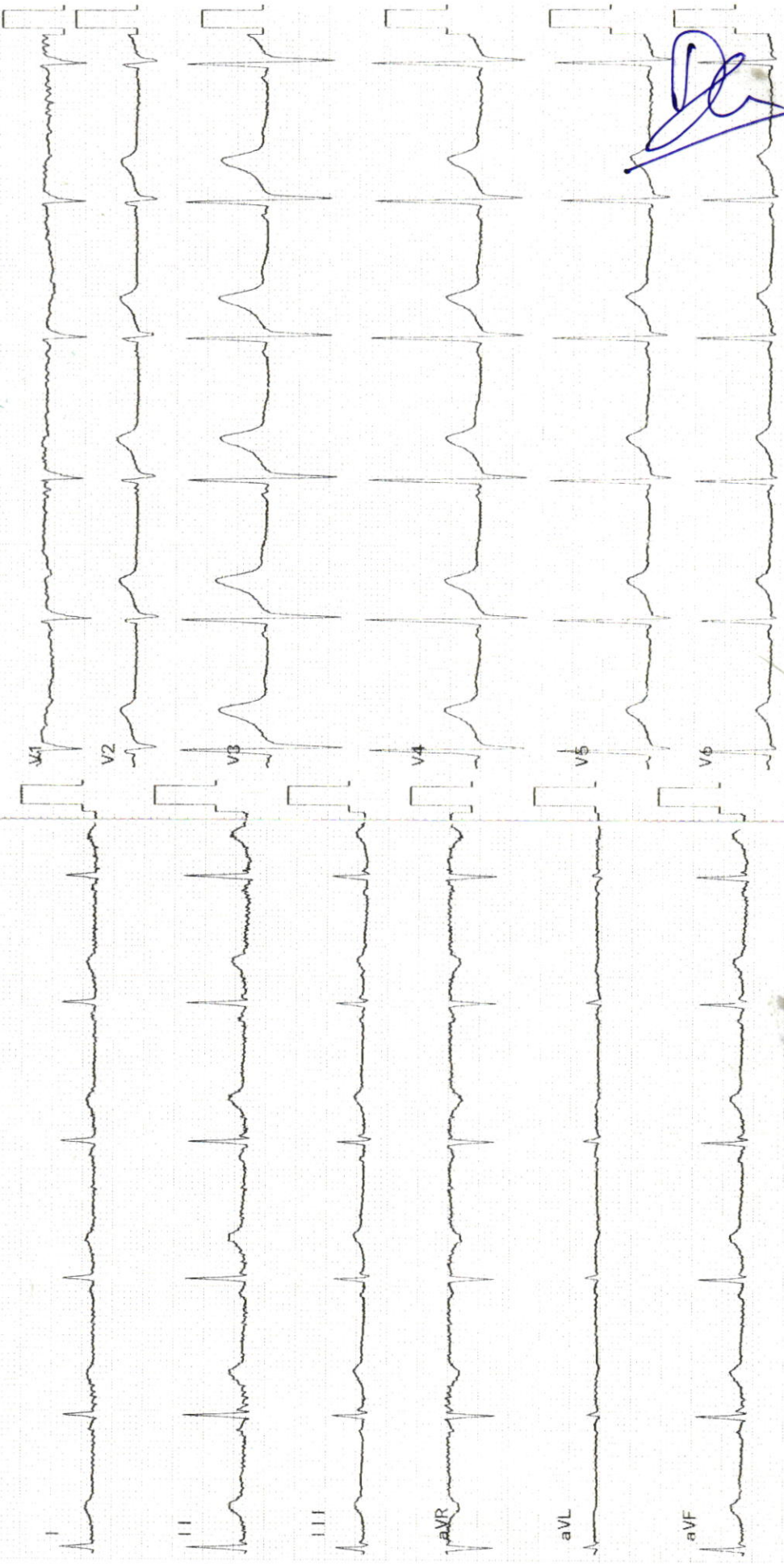
Symptoms:

History:

Heart rate 68 bpm
 PR interval 128 ms
 QTc (E) 90 ms
 QT/QTc (E) 402/420 ms
 P/QRS/T axis 90/60/68 °
 RV5/SV1 amp 1.54/0.67 mV
 RV5+SV1 amp 2.21 mV

10 mm/mV 25 mm/s Filter: H50 d 100 Hz

10 mm/mV





Pre - op

Post-op

Health Check-up

Date : 10-6-23

Patient Reg. No. : _____

Patient Name : Hiral Karmas Desai Age / Sex : 39 y IM

Address : Sarath

Complaints :

Pain : _____

Bleeding gums : _____

Sensitivity : _____

Swelling : _____

Pus Discharge : _____

Medical History :

Hypertension : _____ DM _____ Acidity _____ Pregnancy : _____

Bleeding Disorders : _____ Asthma : _____ Allergy : _____

Past Surgical Intervention : _____

Any Medication :

On Examination :

Abscess : _____ Food lodgement : _____

Periodontitis : _____ Gingivitis : _____

Missing Teeth : _____ Mobility : _____

Treatment Advised :

Scaling : Sitzings 1 2 3 Deep

Restoration : _____ Perio Surgery : _____

RCT : _____ Class V Fillings : _____

Dentures : _____ Extraction : _____

Implants : _____ Partial Denture : _____

Crown & Bridge Present : _____

Crown / Bridge Replacement :	<input type="checkbox"/>	<input type="checkbox"/>
Advised Crown / Bridge :	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Advised X - Ray / O.P.G. :	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>


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 performed in a well maintained.

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

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

Adv : Scaling
 Ret & cap ^A


Dr. Darshini V. Shah
 (Consultant Dental Surgeon)