

OPR NO:

Consultant Physician Clinic

Patient Name:-

Avinash Kumar

Age / Sex :-

37 yrs/m

Chief Complaints:-

None

Date: 11/3/23

Weight:- 84.5 kg

Height:- 175 cm

BMI:- 27.6

Nutritional assessment:-

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

Drug / Food Allergy:- NADA.

Pulse:- 88/min

BP:- 130/80

SpO2:- 99%

Past History :-

No comorbidities.

Family History:-

Systemic Examination:-

NAD.

Provisional Diagnosis:

Normal

Investigation :-

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

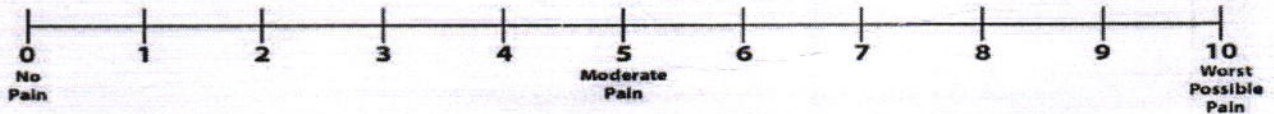
Rx

Follow Up Date:-

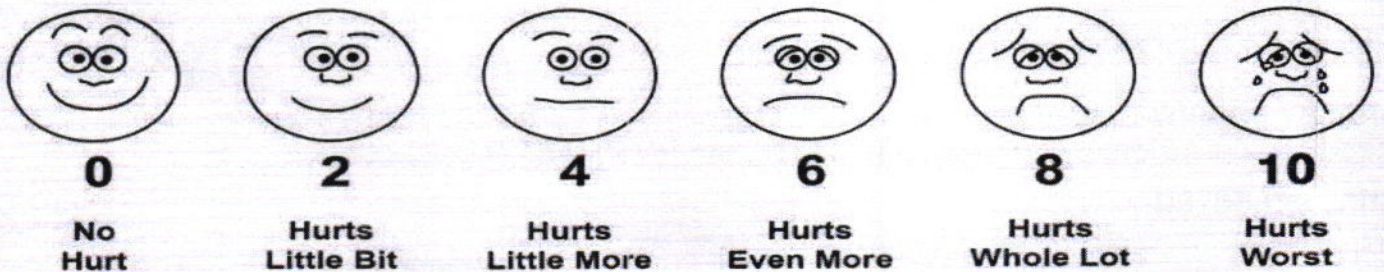
બધી દવાઓ ડોક્ટરને બતાવીને લેવી.

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

Numeric Rating Scale



Wong-Baker FACES® Pain Rating Scale





Patient ID: <small>Certificate No. : MC-5200</small>	SUR 3075	Patient Name:	AVINASH KUMAR
Age:	37 Years	Sex:	M
Accession Number:	3075	Modality:	DX
Referring Physician:		Study:	CHEST PA
Study Date:	11-Mar-2023		

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 R Desai
Consultant Radiologist

SHALBY HOSPITAL, SURAT

(A Unit of Shalby Limited)

Near Navyug College, Rander Road, Adajan, Surat. Gujarat, India.

Ph. : 0261-7190000 | Email : info.surat@shalby.org.

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CIN : L85110GJ2004PLC044667

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Certificate No.: MC-5290

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

PID : SUR0000337386 OP-001

REPORT STATUS : Interim



Patient Name : Mr Avinash Kumar	/	Registered On : 11-Mar-2023 09:11 AM
Lab ID : 303900766		Collected On : 11-Mar-2023 09:11 AM
Gender/Age : Male / 38 Years	DOB : 19-Apr-1984	Received On : 11-Mar-2023 09:42 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>	13.4	g/dL	13.0 - 17.0
RBC COUNT <i>Electrical Impedance</i>	5.23	mill/cmm	4.5 - 5.5
HCT <i>Calculated</i>	40.5	%	40 - 50
MCV <i>Calculated based on the RBC histogram</i>	77.4	fL	83 - 101
MCH <i>Calculated</i>	25.6	pg	27 - 32
MCHC <i>Calculated</i>	33.1	g/dL	31.5 - 34.5
RDW <i>Calculated</i>	14.0	%	13.3 - 18.3
TOTAL LEUCOCYTE COUNT			
Total WBC Count <i>Electrical Impedance</i>	6840	cells/cmm	4000 - 10000
DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)			
NEUTROPHILS <i>Flow Cytometry</i>	59	%	40 - 80
LYMPHOCYTES <i>Flow Cytometry</i>	30	%	20 - 40
EOSINOPHILS <i>Flow Cytometry</i>	7	%	1 - 6
MONOCYTES <i>Flow Cytometry</i>	4	%	2 - 10
BASOPHIL <i>Flow Cytometry</i>	0	%	0 - 2
PLATELET INDICES			
PLATELET COUNT <i>Electrical Impedance</i>	169000	/cmm	150000 - 410000
MPV <i>Calculated based on PLT Histogram</i>	10.9	fL	7.5 - 12.0
PERIPHERAL SMEAR EXAMINATION			
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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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 & reverse)

ABO Type	"B"		
RH Type	POSITIVE		
ESR 1st hour *	12	mm in 1 hour	0 - 15
<i>Modified Westergren Method</i>			
HBA1C			
HbA1c - Glycated Haemoglobin *	5.1	%	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
<i>Boronate Affinity Assay</i>			

Estimated Average Glucose (eAG) (mg/dL) *	100	mg/dL
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Calculated

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REPORT STATUS : Interim



Patient Name : Mr Avinash Kumar /

Registered On : 11-Mar-2023 09:11 AM

Lab ID : 303900766

Collected On : 11-Mar-2023 09:11 AM

Gender/Age : Male / 38 Years

DOB : 19-Apr-1984

Received On : 11-Mar-2023 09:50 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>	137	mg/dL	Desirable: <200 Borderline High: 200 - 239 High \geq 240
SERUM TRIGLYCERIDE <i>Lipase/GK/GPO/POD</i>	117	mg/dL	Normal : <150 Borderline High : 150-199 High : 200-499 Very High : > 500
HDL CHOLESTEROL DIRECT * . <i>Phosphotungstic Acid/Mgcl2 - Enzymatic</i>	34	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : \geq 60
Non HDL Cholesterol <i>Calculated</i>	103	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : \geq 220
S.LDL <i>Calculated</i>	80	mg/dL	Optimal: <100 Near to above Optimal: 100 - 129
VLDL <i>Calculated</i>	23	mg/dL	Borderline High: 130 - 159 High: 160 - 189 Very High: > 190
LDL/dHDL * <i>Calculated</i>	2.4		6 - 38
Chol/dHDL * <i>Calculated</i>	4.0	Ratio	2.5 - 3.5 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) <i>Urease, colorimetric</i>	10	mg/dL	9 - 20
UREA <i>Calculated</i>	21	mg/dL	19 - 43
S. CREATININE <i>Enzymatic - Creatinine amidohydrolase</i>	0.71	mg/dL	0.66 - 1.25
S. URIC ACID <i>Uricase/Peroxidase, Colorimetric</i>	7.3	mg/dL	3.5 - 8.5
Calcium <i>Arsenazo III dye</i>	9.3	mg/dL	8.4 - 10.2
S. PHOSPHORUS * <i>Phosphomolybdate reduction (PMA Phenol)</i>	3.5	mg/dL	2.5 - 4.5
Sodium <i>Direct Ion Selective Electrode</i>	145	mmol/L	137 - 145
S. POTASSIUM <i>Direct Ion Selective Electrode</i>	4.51	mmol/L	3.5 - 5.1
Chloride <i>Direct Ion Selective Electrode</i>	107	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>	114	ng/dL	87 - 178
Total T4 * <i>Chemiluminescence immunoassay (CLIA)</i>	8.47	µg/dL	6.09 - 12.23
TSH * <i>Chemiluminescence immunoassay (CLIA)</i>	2.66	µIU/mL	0.38 - 5.33

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Lab ID : 303900766		Collected On : 11-Mar-2023 09:11 AM
Gender/Age : Male / 38 Years	DOB : 19-Apr-1984	Received On : 11-Mar-2023 09:56 AM
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	2-4/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	NIL		Nil

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Gender/Age : Male / 38 Years	DOB : 19-Apr-1984	Received On : 11-Mar-2023 09:50 AM
Ref. By : Dr. Health Check Up . Shalby		Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
Liver Function Test			
Liver Function Test			
SGPT (ALTV) <i>Multi Point Rate with P-5-P</i>	36	U/L	21 - 72
SGOT (AST) <i>Multi Point Rate with P-5-P</i>	31	U/L	17 - 59
Alkaline Phosphatase <i>PNPP, AMP Buffer</i>	104	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>	17	U/L	15 - 73
S. PROTEIN <i>Biuret (Alkaline cupric sulfate), End Point</i>	8.2	g/dL	6.3 - 8.2
Albumin <i>Bromocresol Green (BCG), Colorimetric</i>	4.7	g/dL	3.5 - 5.0
S. GLOBULIN <i>Calculated</i>	3.5	g/dL	2.3 - 3.6
A/G Ratio <i>Calculated</i>	1.3	Ratio	1.0 - 2.3
Bilirubin Total <i>Azobilirubin/Dyphylline/Diazonium Salt</i>	0.9	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>	0.9	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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 M.B., D.C.P
 Consulting Pathologist

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Approved On : 11-Mar-2023 11:05 AM

Pre - op

Post- op

Health Check-up

Date : 11/03/23

Patient Reg. No. : _____

Patient Name : Animesh Kumar

Age / Sex : 37/M

Address : Sonnet

Complaints :

Pain : _____

Bleeding gums : _____

Sensitivity : _____

Swelling : _____

Pus Discharge : _____

Medical History :

Hypertension : _____ DM _____ Acidity _____ Pregnancy : _____

Bleeding Disorders : _____ Asthma : _____ Allergy : _____

Past Surgical Intervention : _____

Any Medication : Stem⁺

On Examination :

Abscess : _____

Food lodgement : _____

Periodontitis : _____

Gingivitis : _____

Missing Teeth : _____

Mobility : _____

Treatment Advised :

Scaling : Sitzings 1 2 3 Deep

Perio Surgery : _____

Restoration : _____

Class V Fillings : _____

RCT : _____

Extraction : _____

Dentures : _____

Partial Denture : _____

Implants : _____

Crown & Bridge

Present : _____

Crown / Bridge Replacement
 Advised Crown / Bridge
 Advised X - Ray / O.P.G.

17/11

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 an well maintained.

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

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

Solu.

Routine scaling

Dr. Darshini V. Shah
 (Consultant Dental Surgeon)



Patient Name: AVINASH KUMAR		
Age / Sex: 39Yrs. / Male	Study: USG Abdomen + Pelvis	
Referred By: Dr. at shalby Hospital	Date: 11/03/2023	

ULTRASOUND OF ABDOMEN AND PELVIS

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 shows normal echotexture and corticomedullary differentiation. There is no evidence of scarring, hydronephrosis or calculi.

Left kidney 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:

- No any significant abnormality is seen.

Thanks for referral.


Dr. Nimit R Desai
Consultant Radiologist

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SHALBY HOSPITAL
NR. NAVYUG COLLAGE, RANDE ROAD
SURAT

Station
Telephone: --

EXERCISE STRESS TEST REPORT

Patient Name: AVINASH, KUMAR
Patient ID: 96052
Height:
Weight:

DOB: 19.11.1983
Age: 39yrs
Gender: Male
Race: Indian

Study Date: 11.03.2023
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	02:07	0.80	0.00	75	130/80	
EXERCISE	STAGE 1	03:00	2.70	10.00	114	140/80	
	STAGE 2	03:00	4.00	12.00	144	150/80	
	STAGE 3	01:01	5.40	14.00	160	150/80	
RECOVERY		01:58	0.00	0.00	82	130/80	

The patient exercised according to the BRUCE for 7:01 min:s, achieving a work level of Max. METS: 10.00. The resting heart rate of 88 bpm rose to a maximal heart rate of 160 bpm. This value represents 88 % of the maximal, age-predicted heart rate. The resting blood pressure of 130/80 mmHg, rose to a maximum blood pressure of 150/80 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

AVINASH, KUMAR
Patient ID 96052
11.03.2023
11:18:42

86 bpm
130/80 mmHg

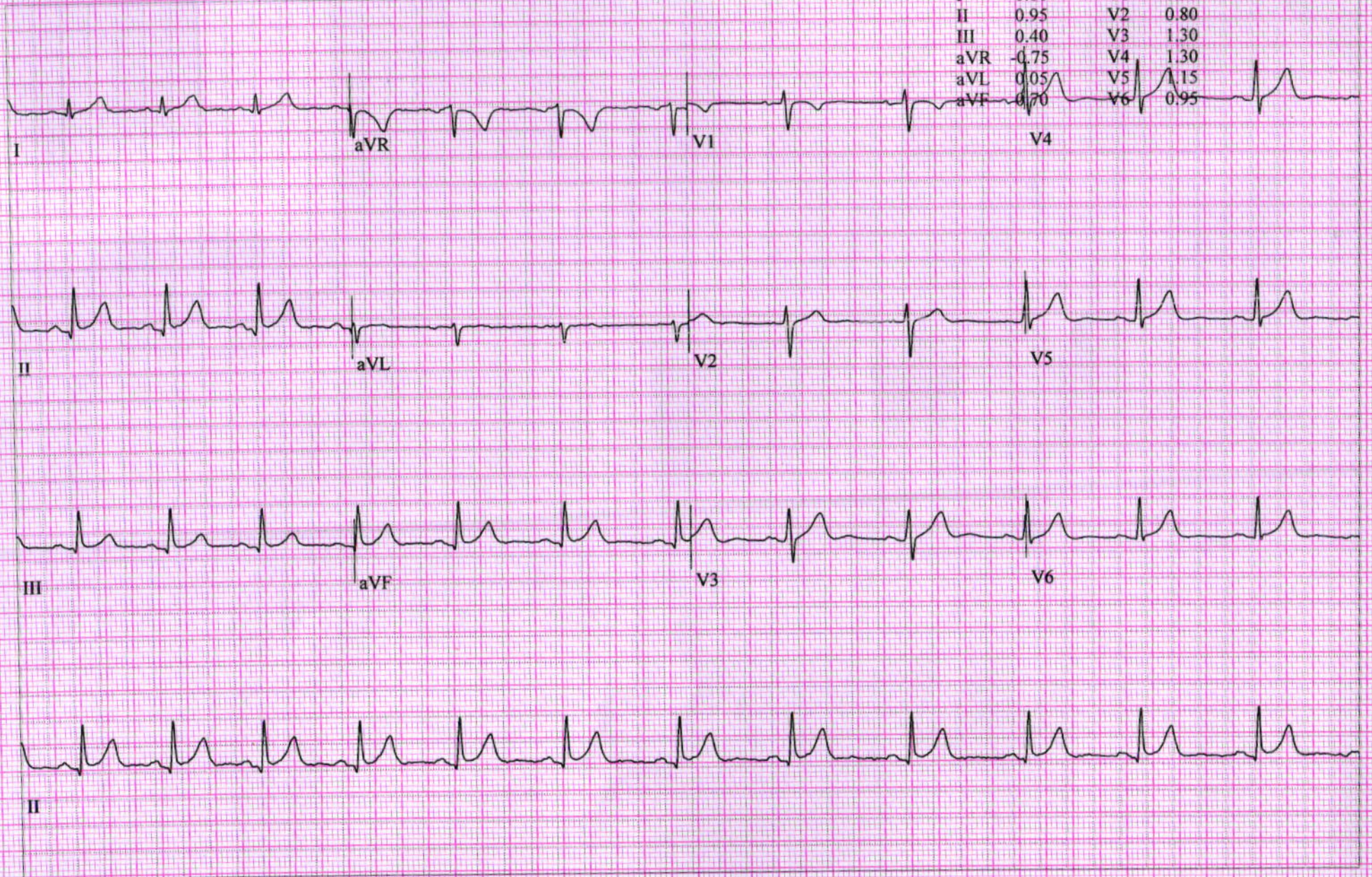
12-Lead Report
PRETEST
SUPINE
01:57

BRUCL
0.0 km/h
0.0 %

SHALBY HOSPITAL

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

Lead	ST(mm)	Lead	ST(mm)
I	0.60	V1	0.25
II	0.95	V2	0.80
III	0.40	V3	1.30
aVR	-0.75	V4	1.30
aVL	0.05	V5	1.15
aVF	0.70	V6	0.95



AVINASH, KUMAR

Patient ID 96052

11.03.2023

Male

11:16:39

39yrs Indian

Meds:

Test Reason:

Medical History:

Ref. MD: Ordering MD:

Technician: Test Type:

Comment:

Tabular Summary

SHALBY HOSPITAL

BRUCE: Total Exercise Time 07:01

Max HR: 160 bpm 88% of max predicted 181 bpm HR at rest: 88

Max BP: 150/80 mmHg BP at rest: 130/80 Max RPP: 22950 mmHg*bpm

Maximum Workload: 10.00 METS

Max. ST: -0.90 mm, 0.00 mV/s in III; EXERCISE STAGE 3 07:01

Arrhythmia: A:5, PVC:1

ST/HR index: 1.05 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 (III mm)	Comment
PRETEST	SUPINE	02:07	0.80	0.00	1.3	75	130/80	9750	0	0.10	
EXERCISE	STAGE 1	03:00	2.70	10.00	4.6	114	140/80	15960	1	0.10	
	STAGE 2	03:00	4.00	12.00	7.0	144	150/80	21600	0	-0.35	
	STAGE 3	01:01	5.40	14.00	10.0	160	150/80	24000	0	-0.90	
RECOVERY		01:58	0.00	0.00	1.0	82	130/80	10660	0	-0.10	

AVINASH, KUMAR

Patient ID 96052

11.03.2023

11:21:42

12-Lead Report

EXERCISE

STAGE 1

02:50

BRUCL

2.7 km/h

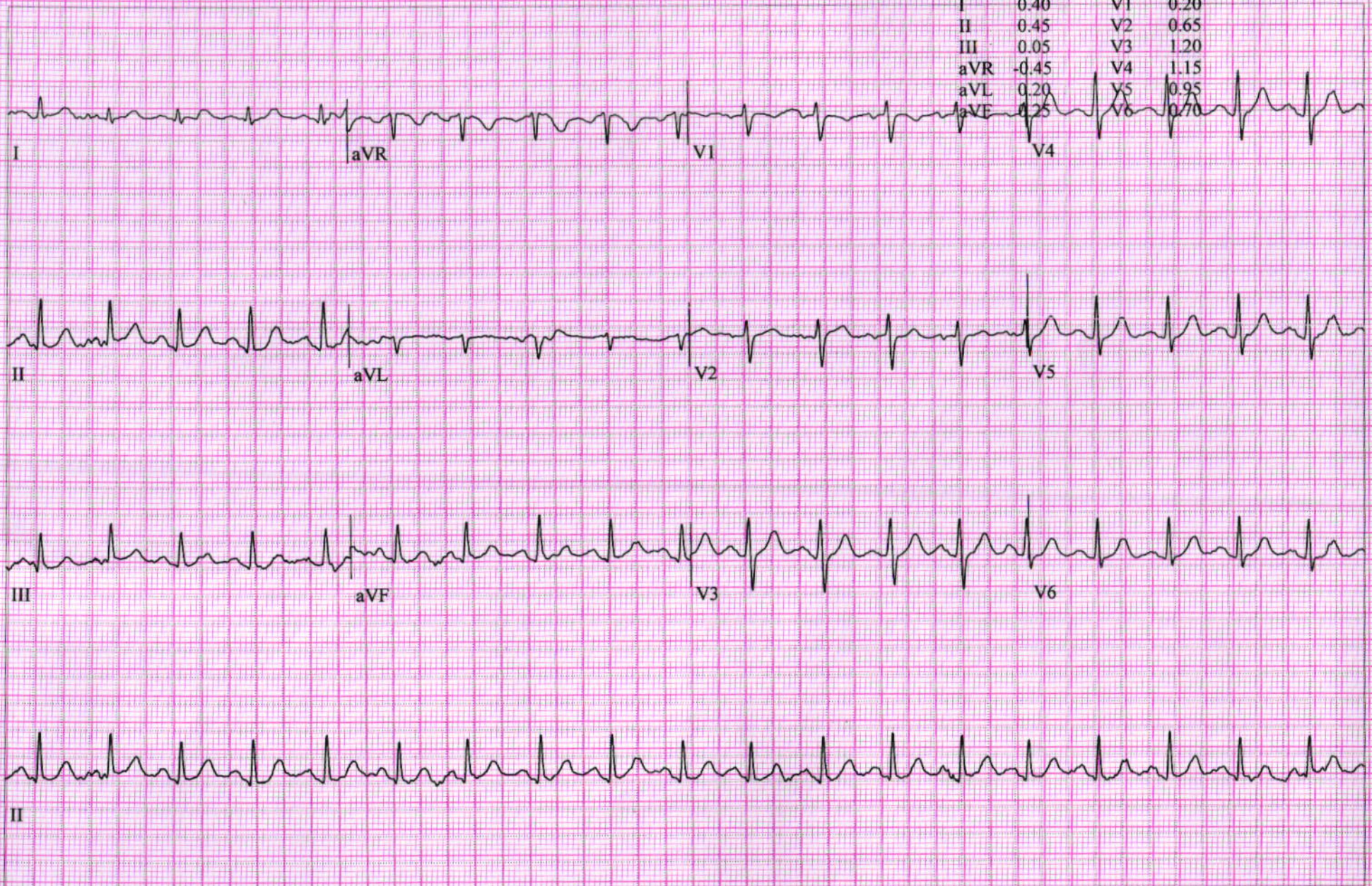
10.0 %

SHALBY HOSPITAL

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

Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	0.40	V1	0.20
II	0.45	V2	0.65
III	0.05	V3	1.20
aVR	-0.45	V4	1.15
aVL	0.20	V5	0.95
aVF	0.25	V6	0.70



AVINASH, KUMAR

Patient ID 96052

11.03.2023

11:24:42

142 bpm

150/80 mmHg

12-Lead Report

EXERCISE

STAGE 2

05:50

BRUCE

4.0 km/h

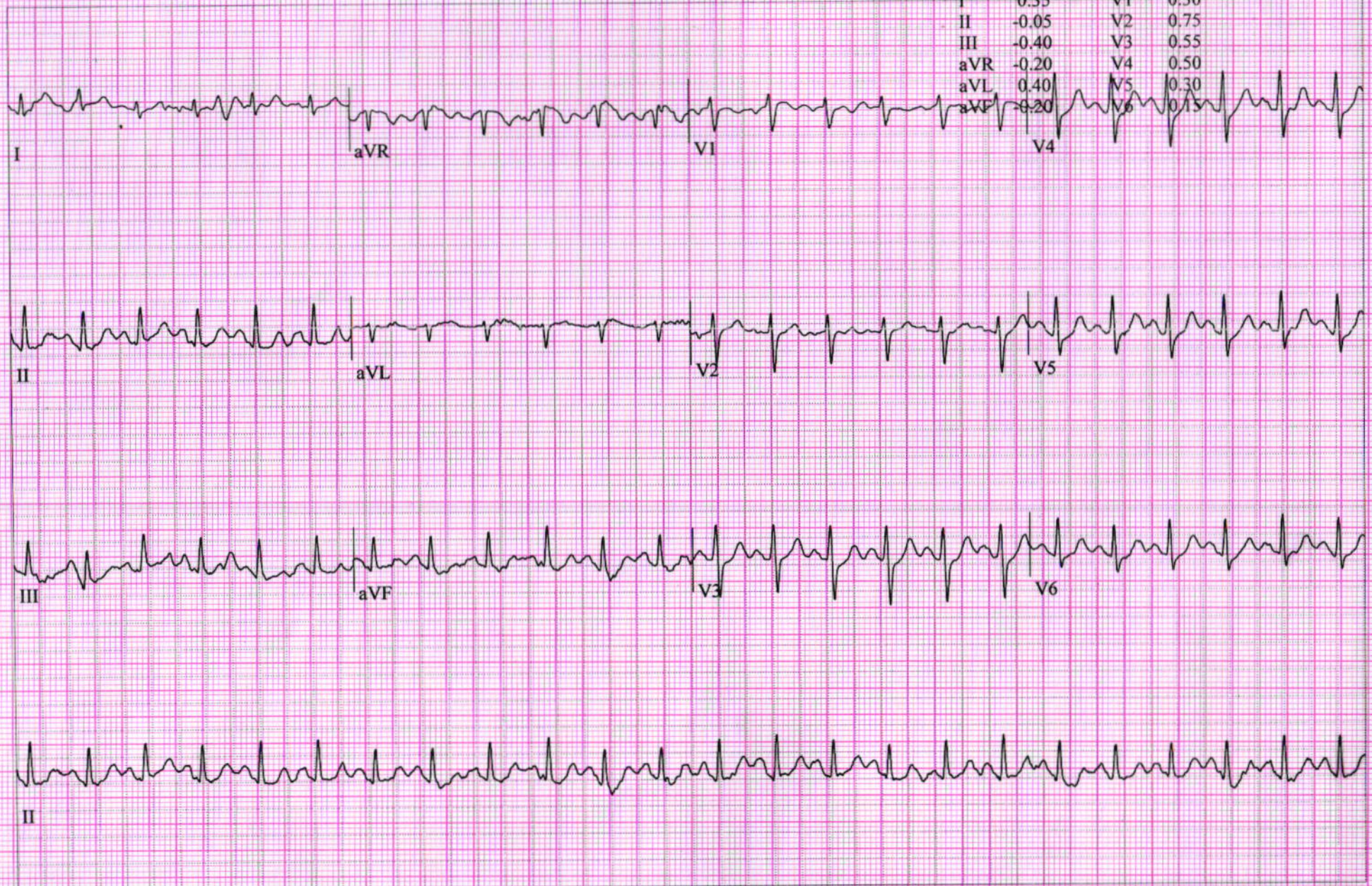
12.0 %

SHALBY HOSPITAL

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

Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	0.35	V1	0.30
II	-0.05	V2	0.75
III	-0.40	V3	0.55
aVR	-0.20	V4	0.50
aVL	0.40	V5	0.30
aVF	-0.20	V6	0.15



AVINASH, KUMAR

Patient ID 96052

11.03.2023

11:25:53

160 bpm
150/80 mmHg

EXERCISE
STAGE 3
07:01

12-Lead Report (PEAK EXERCISE)

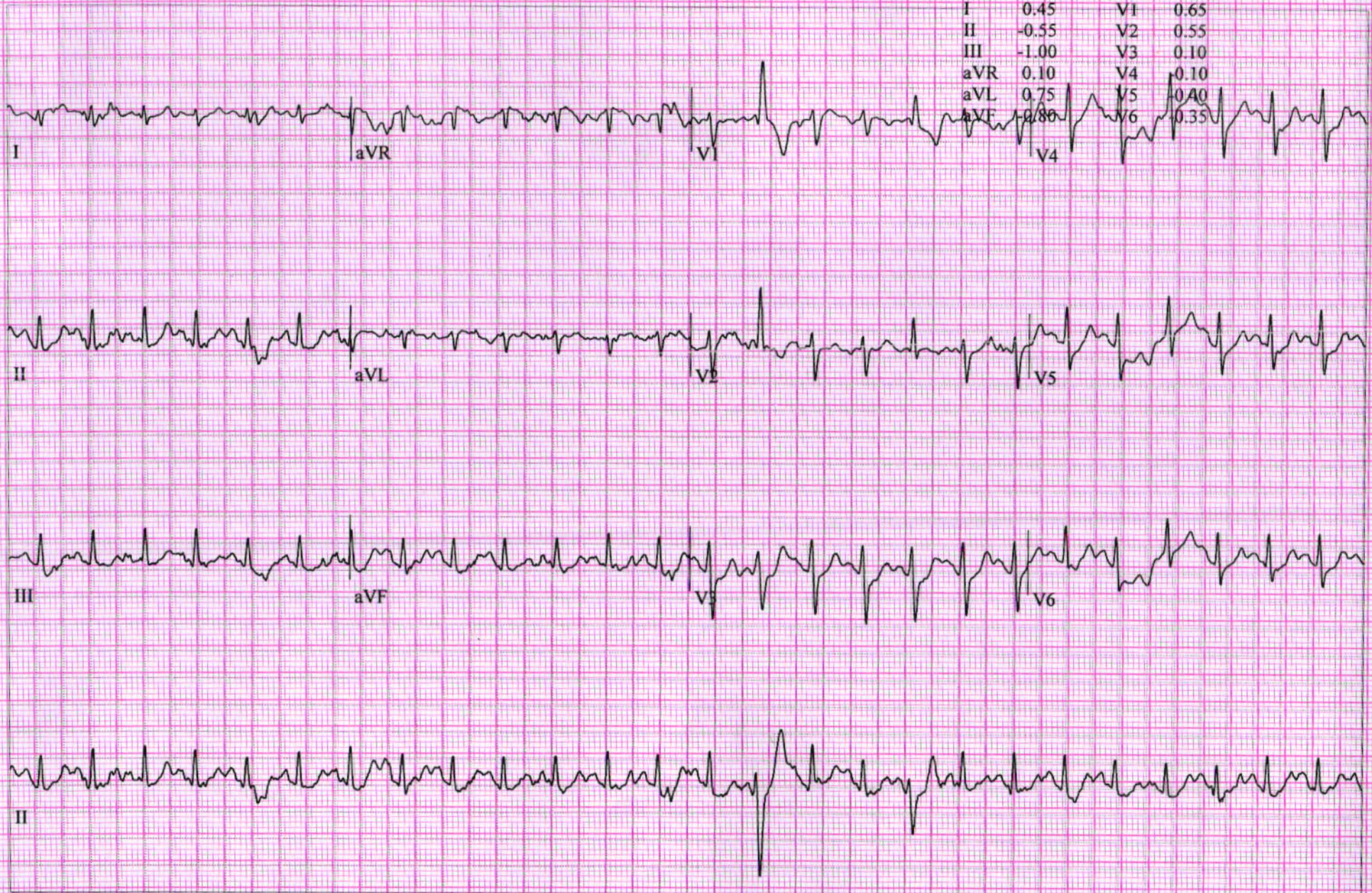
BRUCI
5.4 km/h
14.0 %

SHALBY HOSPITAL

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

Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	0.45	VI	0.65
II	-0.55	V2	0.55
III	-1.00	V3	0.10
aVR	0.10	V4	0.10
aVL	0.75	V5	0.40
aVF	-0.80	V6	0.35



AVINASH, KUMAR

Patient ID 96052

11.03.2023

11:26:43

120 bpm

12-Lead Report

RECOVERY

#1

00:50

BRUCL

0.0 km/h

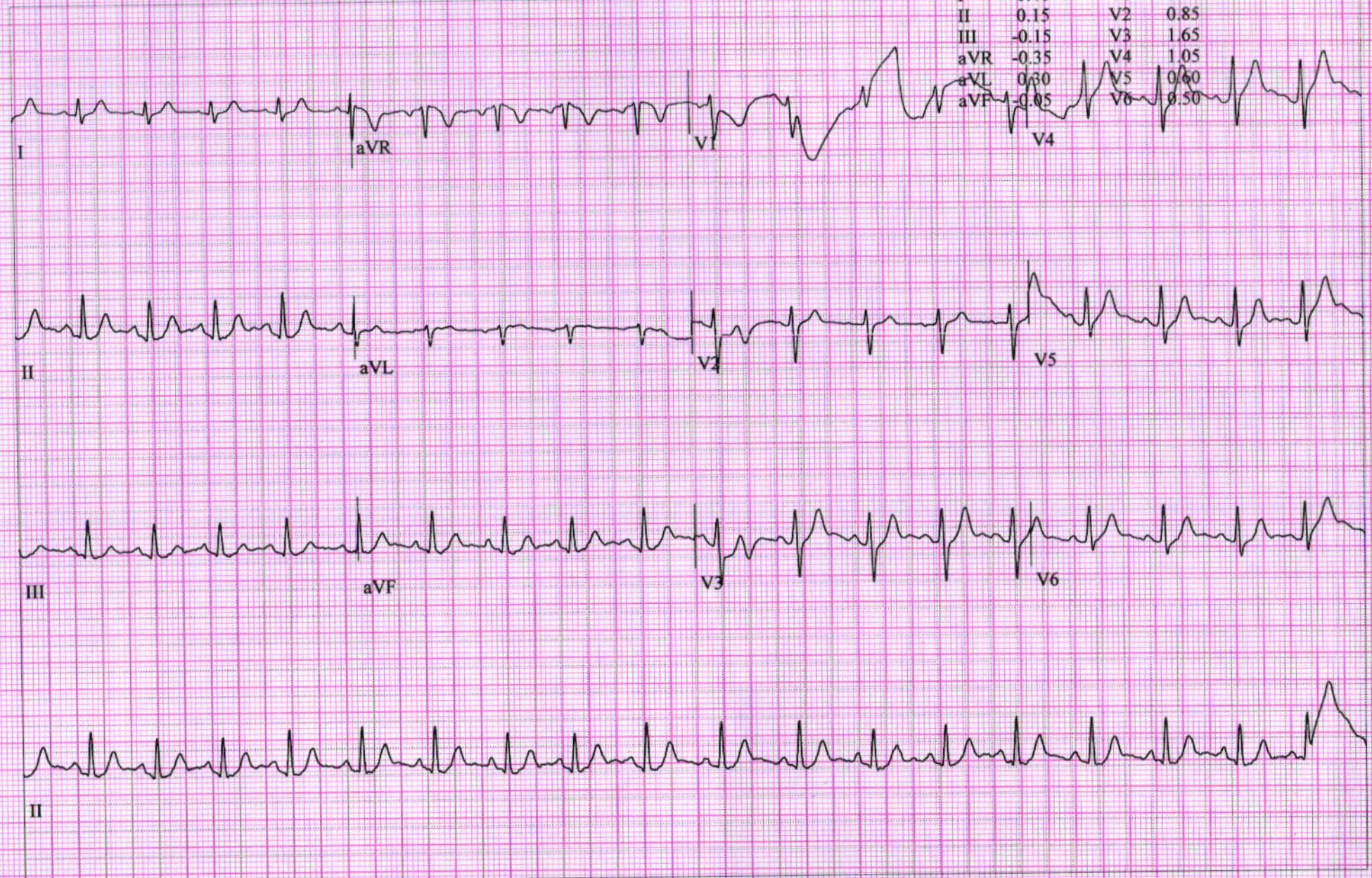
0.0 %

SHALBY HOSPITAL

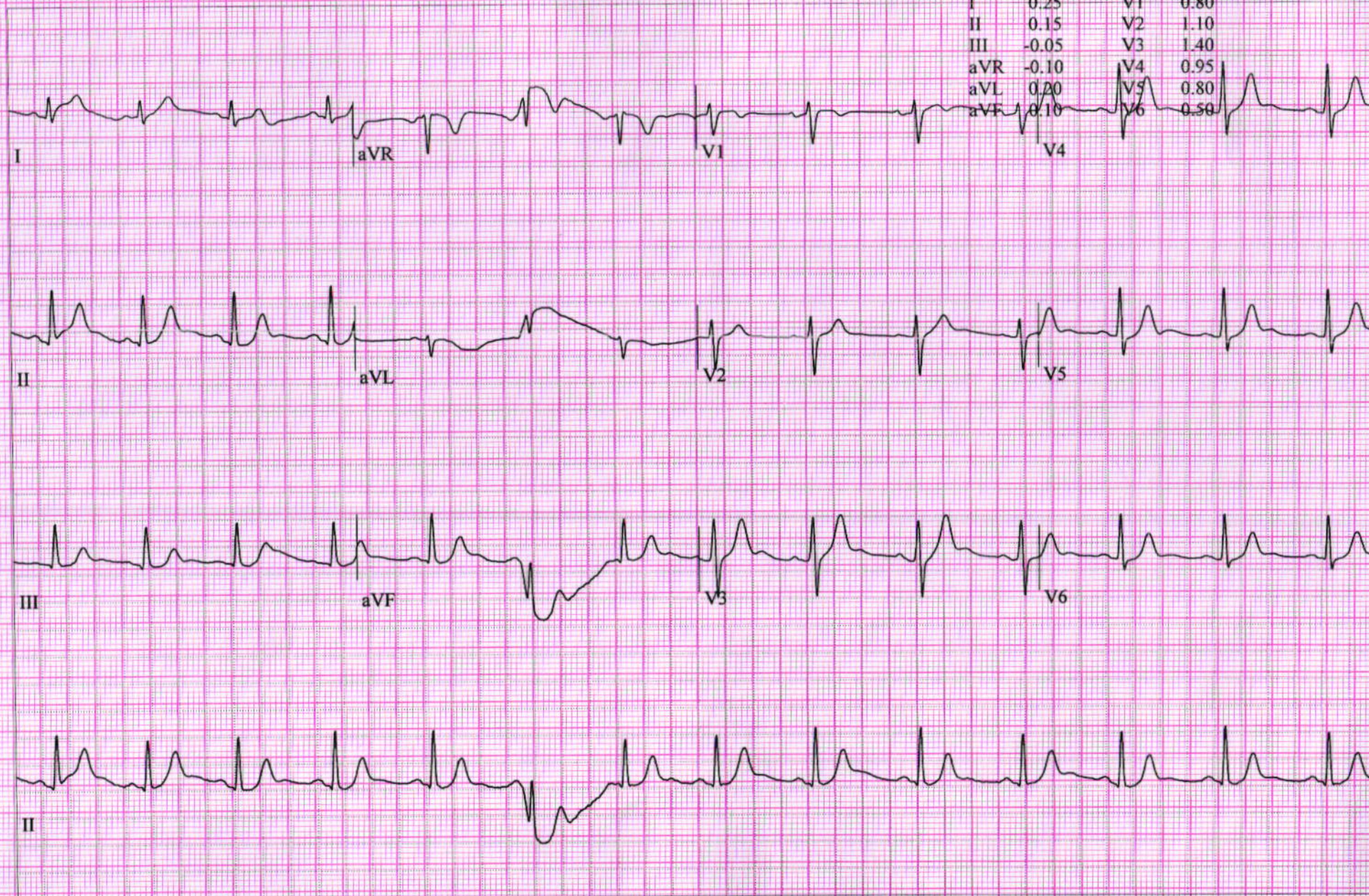
Measured at 60ms Post J (10mm/mV)

Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	-0.40	V1	-0.40
II	0.15	V2	0.85
III	-0.15	V3	1.65
aVR	-0.35	V4	1.05
aVL	0.30	V5	0.60
aVF	-0.05	V6	0.50



Lead	ST(mm)	Lead	ST(mm)
I	0.25	V1	0.80
II	0.15	V2	1.10
III	-0.05	V3	1.40
aVR	-0.10	V4	0.95
aVL	0.20	V5	0.80
aVF	0.10	V6	0.50



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

Name :- *Avinash Kumar*

Date:- *11/3/23*

Chief Complaints:-

nil

Pain Assessment:-

Past History:-

WNL

Family History:-

Allergy:-

Personal History:- **Habits**:- Alcohol:- Y/N Tobacco: Y/N Smoking: Y/N Regular Exercise: Y/N

General Examination:-

Systemic Examination:-

P:- Pulse:- Temp:-

HT:- WT:-

Visual Acuity:- *6/6*

PH Vision:-

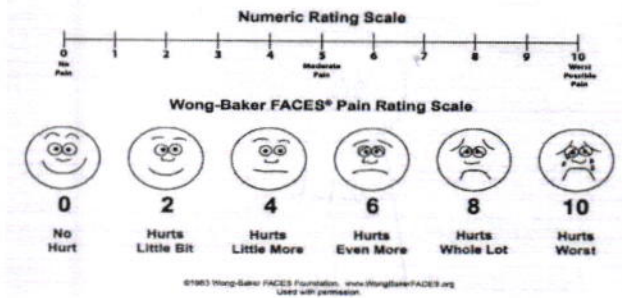
NCT *< 15* mm of Hg

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:- Glass

ILD. Refresh tear TDs

Nutritional Assessment:-

Preventive Care & Counsellings:-

Follow Up ON:- After 6 month

RMS

Signature of the Consultant

Avinash kumar

1100 Sinus
9110 ** normal ECG **

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

Medication:
 Symptoms:
 History:
 Tent. rate 65 bpm
 PR int 164 ms
 PRS dur 84 ms
 QT/QTc(E) int 380/ 391 ms
 P/QRS/T axis 40/ 58/ 38 °
 RV5/SV1 amp 1.17/ 0.34 mV
 RV5+SV1 amp 1.51 mV

Ⓡ
 11.3.23

Unconfirmed Report
Reviewed by:

