

DR. DILIP B GHEEWALA

M.D. (Medicine)

Reg No: G 17770.

Mo: 9825338408

Consultant Physician & Ex. Professor Of Medicine

OPD Days: Monday, Saturday

OPR NO:

Shalby MD Physician Clinic

Patient Name:-

Nikhil J. Parwale

Age / Sex :-

31 M

Chief Complaints:-

No clo
except
dyspepsia.

Drug / Food Allergy:-

NAD

Past History :-

Family History:-

Systemic Examination:-

RS
WT
PA
CVT / NAD

Date: 23/3/24

Weight: 64.9 kg

Height: 168 cm

Nutritional assessment:-

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

Pulse: 72 b/min

BP: 120/70 mmHg

SpO2: 99%

Provisional Diagnosis:-

SHALBY HOSPITAL, SURAT

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CIN: L85110GJ2004PLC044667



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 : SUR0000362061 OP-001

REPORT STATUS : Interim



Patient Name : **Mr Nikhil Sureshchandra Panwala /** Registered On : 23-Mar-2024 09:26 AM
 Lab ID : 403901854 Collected On : 23-Mar-2024 09:28 AM
 Gender/Age : Male / 30 Years DOB : 25-Aug-1993 Received On : 23-Mar-2024 09:53 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>	12.4	g/dL	13.0 - 17.0
RBC COUNT <i>Electrical Impedance</i>	5.06	mill/cmm	4.5 - 5.5
HCT <i>Calculated</i>	38.6	%	40 - 50
MCV <i>Calculated based on the RBC histogram</i>	76.3	fL	83 - 101
MCH <i>Calculated</i>	24.5	pg	27 - 32
MCHC <i>Calculated</i>	32.1	g/dL	31.5 - 34.5
RDW <i>Calculated</i>	13.0	%	13.3 - 18.3

TOTAL LEUCOCYTE COUNTTotal WBC Count *Electrical Impedance* 8740 cells/cmm 4000 - 10000**DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)**

NEUTROPHILS <i>Flow Cytometry</i>	50	%	40 - 80
LYMPHOCYTES <i>Flow Cytometry</i>	41	%	20 - 40
EOSINOPHILS <i>Flow Cytometry</i>	3	%	1 - 6
MONOCYTES <i>Flow Cytometry</i>	6	%	2 - 10
BASOPHIL <i>Flow Cytometry</i>	0	%	0 - 2

PLATELET INDICES

PLATELET COUNT <i>Electrical Impedance</i>	415000	/cmm	150000 - 410000
MPV <i>Calculated based on PLT Histogram</i>	7.9	fL	7.5 - 12.0

PERIPHERAL SMEAR EXAMINATION

RBCs	Mild hypochromic and microcytic.
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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*Pankaj Agrawal***Dr Pankaj Agrawal**M.B., D.C.P
Consulting Pathologist

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Ref. By : Dr. Health Check Up . Shalby	Received On : 23-Mar-2024 09:53 AM
	Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
BLOOD GROUP (Tube agglutination: Forward & reverse)			
ABO Type	"A"		
RH Type	POSITIVE		

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Parameter	Result	Unit	Biological Ref. Interval
ESR 1st hour * <i>Modified Westergren Method</i>	19	mm in 1 hour	0 - 15
HBA1C			
HbA1c - Glycated Haemoglobin * <i>Boronate Affinity Assay</i>	5.7	%	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) * 117 mg/dL
Calculated

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 Gender/Age : Male / 30 Years DOB : 25-Aug-1993 Received On : 23-Mar-2024 10:17 AM
 Ref. By : Dr. Health Check Up . Shalby Sample Type : Fluoride F, Urine (PP),
 Fluoride PP, Urine (F)

Parameter	Result	Unit	Biological Ref. Interval
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PLASMA GLUCOSE LEVEL**FASTING PLASMA GLUCOSE**

Plasma Glucose (F)	88	mg/dL	74 - 106
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GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

Urine Sugar (F)	ABSENT	mg/dL	Absent
------------------------	--------	-------	--------

Glucose-oxidase/oxidase reaction

POST PRANDIAL PLASMA GLUCOSE

Plasma Glucose (PP)	127	mg/dL	Normal: 100-140 Impaired: 140 -199 Diabetic :=>200
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GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

Urine Sugar (PP)	SNR	mg/dL	Absent
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Glucose-oxidase/oxidase reaction

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Collected On : 23-Mar-2024 09:28 AM

Gender/Age : Male / 30 Years

DOB : 25-Aug-1993

Received On : 23-Mar-2024 10:12 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>	210	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
SERUM TRIGLYCERIDE <i>Lipase/GK/GPO/POD</i>	143	mg/dL	Normal : <150 Borderline High : 150-199 High : 200-499 Very High : > 500
HDL CHOLESTEROL DIRECT * <i>Phosphotungstic Acid/Mgc12 - Enzymatic</i>	47	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : >= 60
Non HDL Cholesterol <i>Calculated</i>	163	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
LDL Cholesterol <i>Calculated</i>	134	mg/dL	Optimal: <100 Near to above Optimal: 100 - 129 Borderline High: 130 - 159 High: 160 - 189 Very High: > 190
VLDL <i>Calculated</i>	29	mg/dL	6 - 38
LDL/dHDL * <i>Calculated</i>	2.9		2.5 - 3.5
Chol/dHDL * <i>Calculated</i>	4.5	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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Received On : 23-Mar-2024 10:12 AM	Sample Type : Serum
Ref. By : Dr. Health Check Up . Shalby	

Parameter	Result	Unit	Biological Ref. Interval
RENAL FUNCTION TEST			
Urea Nitrogen (BUN) <i>Urease, colorimetric</i>	8	mg/dL	9 - 20
UREA <i>Calculated</i>	17	mg/dL	19 - 43
Creatinine <i>Enzymatic - Creatinine amidohydrolase</i>	0.95	mg/dL	0.66 - 1.25
S. URIC ACID <i>Uricase/Peroxidase, Colorimetric</i>	6.0	mg/dL	3.5 - 8.5
Calcium <i>Arsenazo III dye</i>	9.1	mg/dL	8.4 - 10.2
Phosphorus * <i>Phosphomolybdate reduction (PMA Phenol)</i>	4.5	mg/dL	2.5 - 4.5
Sodium <i>Direct Ion Selective Electrode</i>	140	mmol/L	137 - 145
S. POTASSIUM <i>Direct Ion Selective Electrode</i>	4.37	mmol/L	3.5 - 5.1
Chloride <i>Direct Ion Selective Electrode</i>	101	mmol/L	98 - 107

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Received On : 23-Mar-2024 10:12 AM	Sample Type : Serum
Ref. By : Dr. Health Check Up . Shalby	

Parameter	Result	Unit	Biological Ref. Interval
Liver Function Test			
Liver Function Test			
SGPT (ALTV) <i>Multi Point Rate with P-5-P</i>	38	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>	110	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>	24	U/L	15 - 73
S. PROTEIN <i>Biuret (Alkaline cupric sulfate), End Point</i>	7.2	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>	2.9	g/dL	2.3 - 3.6
A/G Ratio <i>Calculated</i>	1.5	Ratio	1.0 - 2.3
Bilirubin Total <i>Azobilirubin/Dyphylline/Diazonium Salt</i>	0.4	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>	0.3	mg/dL	Unconjugated bilirubin Adults: 0.0-1.1 Neonates: 0.6-10.5
Bilirubin Direct <i>Calculated</i>	0.1	mg/dL	Conjugated bilirubin and Delta bilirubin (Bilirubin covalently bound to albumin) 0.0-0.4

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Gender/Age : Male / 30 Years	DOB : 25-Aug-1993
Received On : 23-Mar-2024 10:16 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
Transparency	Clear		Clear
Chemical Examination			
Glucose	<i>Glucose-oxidase/oxidase reaction</i> Negative		Negative
Bilirubin	<i>Azo coupling Reaction with diazonium</i> Negative		Negative
Ketone	<i>Sodium Nitroprusside reaction</i> Negative		Negative
Specific Gravity	<i>Refractometric Method - Bromthymol blue</i> 1.015	S.G. value	1.001 - 1.035
Blood	<i>Peroxidase like activity of hemoglobin</i> Negative		Negative
pH	<i>Double Indicator principle</i> 7.0	PH value	4.6 - 8.0
Protein	<i>Protein Error of Indicator Principle</i> Negative		Negative
Urobilinogen *	<i>Modified Ehrlich reaction</i> 0.2	EU/dL	Upto 1.0 mg/dL (EU/dL)
Nitrite *	<i>Diazotization reaction of nitrite with an aromatic amine</i> Negative		Negative
Leucocyte	<i>Leucocyte Esterase Test</i> Negative		Negative
Microscopic Examination			
Pus cells	2-3/hpf	/hpf	0-5/hpf
Red blood cells	Nil	/hpf	NIL/hpf
Epithelial cells	4-5/hpf	/hpf	NA
Crystals	Nil		Nil
Cast *	Nil		Nil
Bacteria	Nil		Nil
Amorphous	Nil		Nil
Yeast	Nil		Nil
Others	Nil		Nil

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DOB : 25-Aug-1993

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Ref. By : Dr. Health Check Up . Shalby

Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
THYROID PROFILE (TFT)			
Total T3 * <i>Chemiluminescence immunoassay (CLIA)</i>	130	ng/dL	87 - 178
Total T4 * <i>Chemiluminescence immunoassay (CLIA)</i>	8.86	µg/dL	99% Reference Interval (µg/dL) 4.82 - 15.65
TSH * <i>Chemiluminescence immunoassay (CLIA)</i>	4.477	µIU/mL	0.38 - 5.33

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

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Consulting Pathologist

Patient ID:	SUR0000362061	Patient Name:	NIKHIL S PANWALA
Age:	31 Years	Sex:	M
Accession Number:	3308 MHC	Modality:	DX
Referring Physician:	DR.SHALBY	Study:	CHEST PA
Study Date:	23-Mar-2024		

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

DMRD (Radiodiagnosis)

G-14916

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CIN: L85110GJ2004PLC044667



Pre - op

Post-op

Health Check-up

Date : 23/03/24

Patient Reg. No. : _____

Patient Name : Nikhil S. Parmar Age / Sex : 31/M

Address : Surest

Complaints : NTD

Pain : _____

Bleeding gums : _____

Swelling : _____

Sensitivity : _____

Pus Discharge : _____

Medical History : NAD

Hypertension : _____ DM _____ Acidity _____ Pregnancy : _____

Bleeding Disorders : _____ Asthma : _____ Allergy : _____

Past Surgical Intervention : _____

Any Medication : _____

On Examination : NAD

Abscess : _____ Food lodgement : _____

Periodontitis : _____ Gingivitis : _____

Missing Teeth : _____ Mobility : _____

Treatment Advised :

Scaling : Sitzings 1 2 3 Deep Perio Surgery : _____

Restoration : _____ Class V Fillings : _____

RCT : _____ Extraction : 18

Dentures : _____ Partial Denture : _____

Implants : _____ 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"

Adesh Jaiswal

Dr. Darshini V. Shah
(Consultant Dental Surgeon)

DR. RUJUTA SHELAT

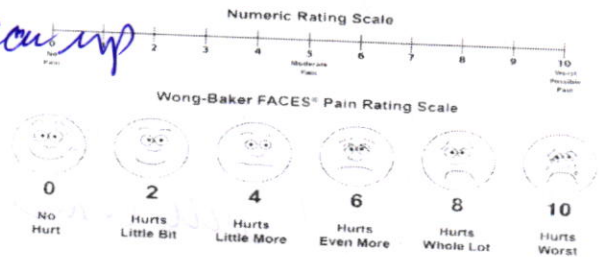
Consultant Ophthalmologist

Reg. No.: - G-48712

Name :- **NEKHIL S PANDHARA**

Date:- **23/03/24**

Chief Complaints:- **Refractive Eye clear up
has in done**



Pain Assessment:-

Past History:-

Family History:-

Allergy:- **no drugs Allergy**

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

General Examination:-

BP:- Pulse:- Temp:-

Visual Acuity:- **6/6**

Systemic Examination:-

HT:- WT:-

PH Vision:- **6/6**

NCT **18**
18

Ant. Segment **STE 0.50m 6/6, no**
Both Eye

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CIN: L85110GJ2004PLC044667

RX-B50K

2016-02-25 17:36

SHOP: SHELAT GEN HOSP

NAME:

Anterior Chamber

REF. DATA	S	C	A
<R>	-0.25	-3.25	130
	-0.25	-3.25	129
	-0.25	-3.25	129
*	-0.25	-3.25	129
<L>	-0.50	-3.25	134
	-0.50	-3.25	133
	-0.50	-3.25	132
*	-0.50	-3.25	133

Rt. EYE

Lt. EYE

VD=0
PD=61

Investigation:-

Background:-

Macula:-

Diagnosis:-

Treatment:-

Nutritional Assessment:-

Preventive Care & Counsellings:-

Follow Up ON:-

Signature of the Consultant

K

Pt will come later on

- 1) Take Break after each 20 minutes
- look @ 20 feet/6 meters distance
- 20 times Blinks

20 - 20 - 20 Rules.

- ② 5l water intake
- ③ WARM Compression

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NR. NAVYUG COLLAGE, RANER ROAD
SURAT

Station
Telephone:

EXERCISE STRESS TEST REPORT

Patient Name: NIKHIL PANWALA ,
Patient ID: 362061
Height:
Weight:

DOB: 25.08.1993
Age: 30yrs
Gender: Male
Race: Asian

Study Date: 23.03.2024
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	00:20	0.00	0.00	102	120/80	
	STANDING	00:06	0.00	0.00	99		
EXERCISE	STAGE 1	03:00	2.70	10.00	151		
	STAGE 2	03:00	4.00	12.00	171	130/80	
	STAGE 3	01:16	5.40	14.00	176	150/80	
RECOVERY		02:54	0.00	0.00	129	120/80	

The patient exercised according to the BRUCE for 7:16 min:s, achieving a work level of Max. METS: 10.00. The resting heart rate of 105 bpm rose to a maximal heart rate of 176 bpm. This value represents 92 % of the maximal, age-predicted heart rate. The resting blood pressure of 120/80 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

NIKHIL PANWALA,

Patient ID 362061

23.03.2024

10:47:22

Male

30yrs Asian

Meds:

Test Reason:

Medical History:

Ref. MD: Ordering MD:

Technician: Test Type:

Comment:

Tabular Summary

SHALBY HOSPITAL

BRUCE: Total Exercise Time 07:16

Max HR: 176 bpm 92% of max predicted 190 bpm HR at rest: 105

Max BP: 150/80 mmHg BP at rest: 120/80 Max RPP: 26400 mmHg*bpm

Maximum Workload: 10.00 METS

Max. ST: -0.25 mm, 0.00 mV/s in III; EXERCISE STAGE 2 05:29

Arrhythmia: A:9

ST/HR index: 0.34 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	00:20	0.00	0.00	1.0	102	120/80	12240	0	0.35	
	STANDING	00:06	0.00	0.00	1.0	99			0	0.35	
EXERCISE	STAGE 1	03:00	2.70	10.00	4.6	151			0	0.40	
	STAGE 2	03:00	4.00	12.00	7.0	171	130/80	22230	0	0.10	
	STAGE 3	01:16	5.40	14.00	10.0	176	150/80	26400	0	-0.10	
RECOVERY		02:54	0.00	0.00	1.0	129	120/80	15480	0	0.50	

NIKHIL PANWALA,
Patient ID 362061
23.03.2024
10:47:49

101 bpm
120/80 mmHg

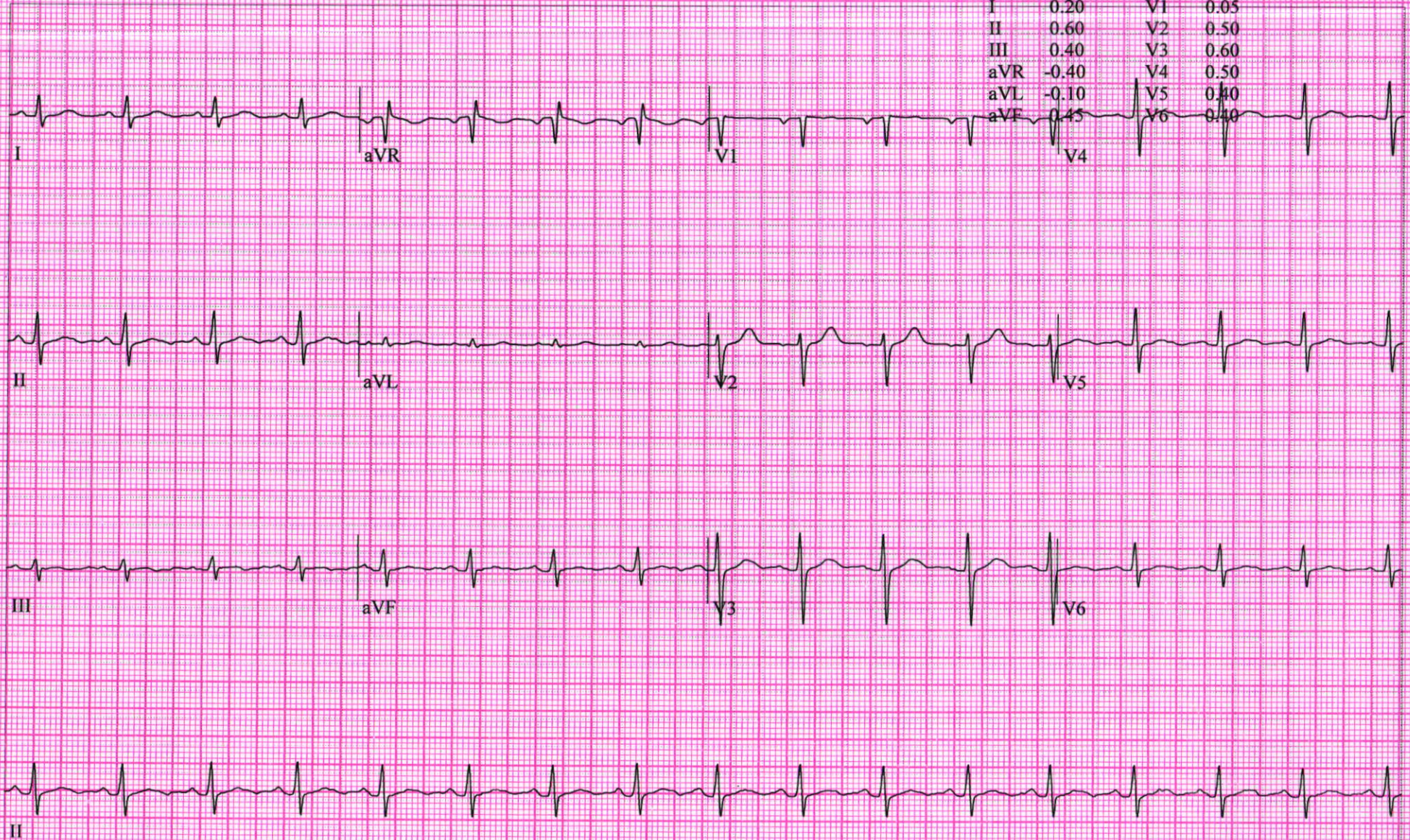
12-Lead Report
PRETEST
STANDING
00:21

BRUC
0.0 km/h
0.0 %

SHALBY HOSPITAL

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

Lead	ST(mm)	Lead	ST(mm)
I	0.20	V1	0.05
II	0.60	V2	0.50
III	0.40	V3	0.60
aVR	-0.40	V4	0.50
aVL	-0.10	V5	0.40
aVF	0.45	V6	0.40



NIKHIL PANWALA,

Patient ID 362061

23.03.2024

10:50:43

150 bpm

12-Lead Report

EXERCISE

STAGE 1

02:50

BRUC

2.7 km/h

10.0 %

SHALBY HOSPITAL

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

Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	0.25	V1	-0.15
II	0.55	V2	0.50
III	0.25	V3	0.65
aVR	-0.45	V4	0.45
aVL	0.00	V5	0.40
aVF	0.40	V6	0.25



NIKHIL PANWALA,
Patient ID 362061
23.03.2024
10:53:43

169 bpm
130/80 mmHg

12-Lead Report

EXERCISE
STAGE 2
05:50

BRUC.
4.0 km/h
12.0 %

SHALBY HOSPITAL

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

Lead	ST(mm)	Lead	ST(mm)
I	0.25	V1	-0.10
II	0.15	V2	0.60
III	-0.10	V3	0.20
aVR	-0.25	V4	0.10
aVL	0.20	V5	0.00
aVF	0.10	V6	0.05



NIKHIL PANWALA,

Patient ID 362061

23.03.2024

10:55:09

176 bpm

150/80 mmHg

EXERCISE

STAGE 3

07:16

12-Lead Report (PEAK EXERCISE)

BRUC

5.4 km/h

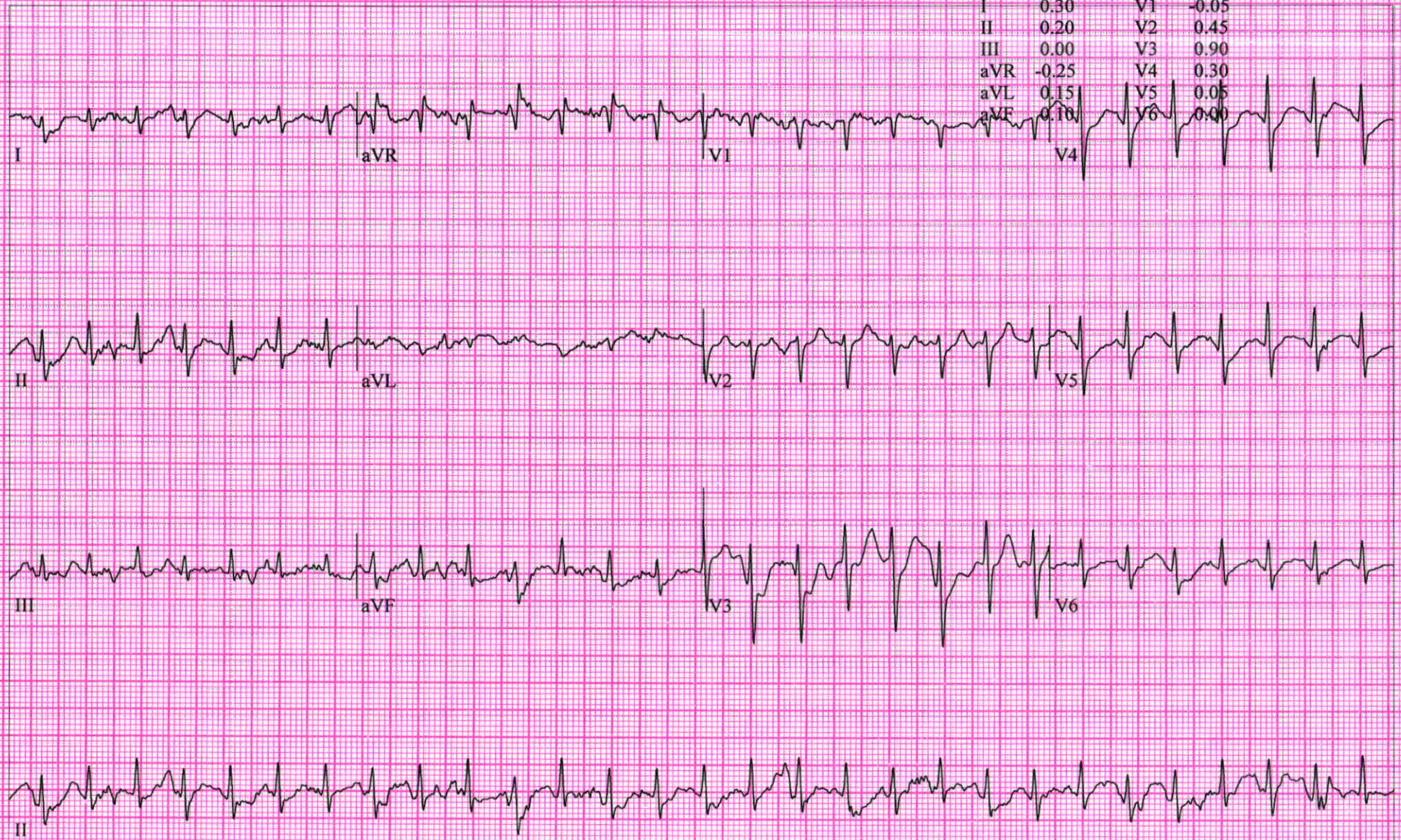
14.0%

SHALBY HOSPITAL

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

Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	0.30	V1	-0.05
II	0.20	V2	0.45
III	0.00	V3	0.90
aVR	-0.25	V4	0.30
aVL	0.15	V5	0.05
aVF	0.10	V6	0.00



NIKHIL PANWALA,

Patient ID 362061

23.03.2024

10:55:59

12-Lead Report

RECOVERY

#1

00:50

BRUC

0.0 km/h

0.0 %

SHALBY HOSPITAL

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

Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	0.50	V1	-0.05
II	0.90	V2	1.10
III	0.45	V3	1.75
aVR	-0.70	V4	1.15
aVL	0.00	V5	0.75
aVF	0.65	V6	0.55



NIKHIL PANWALA,

Patient ID 362061

23.03.2024

10:56:59

134 bpm

150/80 mmHg

12-Lead Report

RECOVERY

#1

01:50

BRUC

0.0 km/h

0.0 %

SHALBY HOSPITAL

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

Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	0.25	V1	-0.10
II	0.75	V2	0.60
III	0.50	V3	1.20
aVR	-0.50	V4	0.80
aVL	-0.15	V5	0.60
aVF	0.65	V6	0.50



NIKHIL PANWALA,
Patient ID 362061
23.03.2024
10:57:59

12-Lead Report

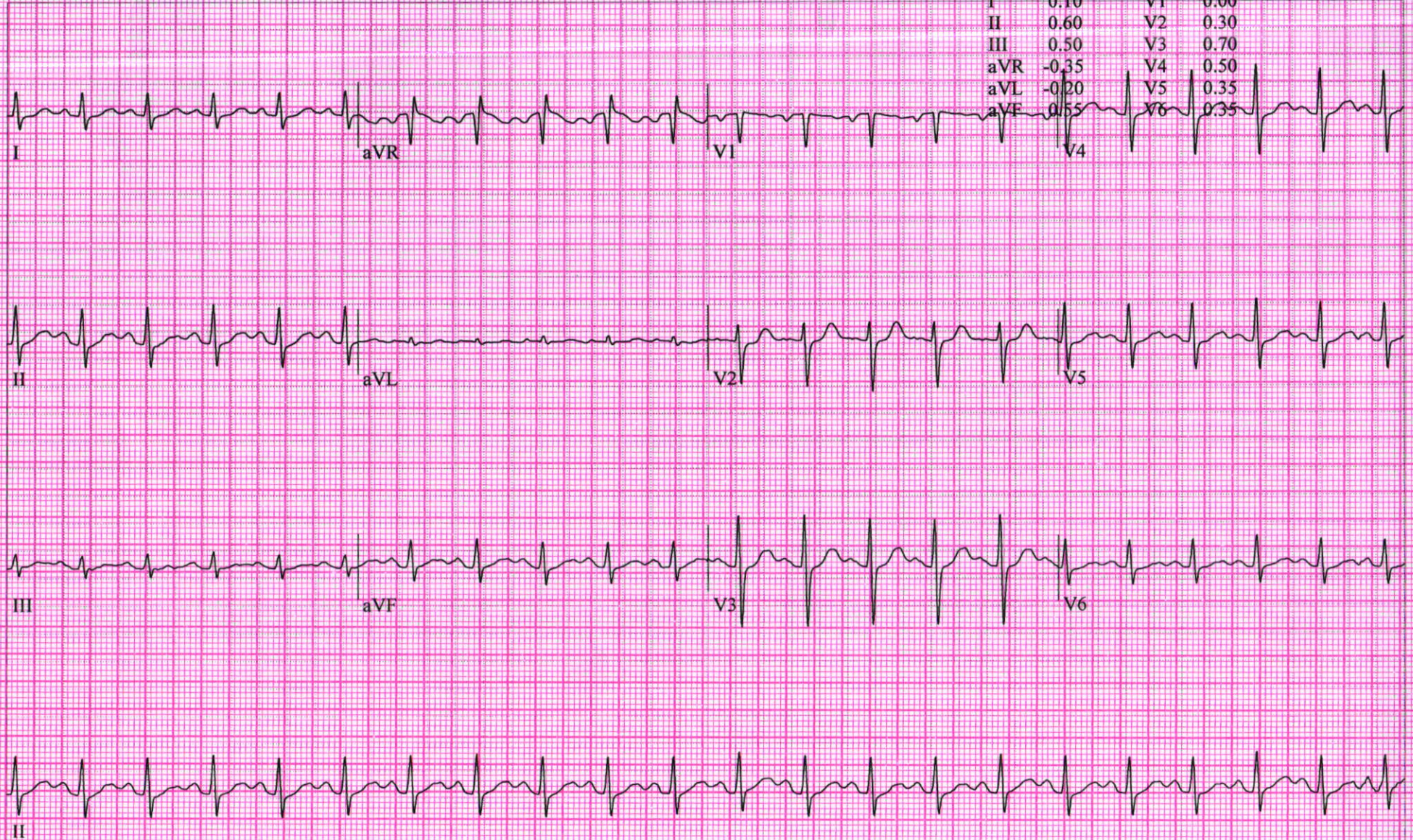
RECOVERY
#1
02:50

BRUC
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	0.00
II	0.60	V2	0.30
III	0.50	V3	0.70
aVR	-0.35	V4	0.50
aVL	-0.20	V5	0.35
aVF	0.55	V6	0.35



Patient Name: NIKHIL PANWALA		UHID: 362061	
Age / Sex: 31 Yrs. / Male		Study:	USG Abdomen + Pelvis
Referred By:	Dr. at shalby Hospital	Date: 23/03/2024	

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 and measures 23 x 32 x 29 mm (Approx. vol- 12 cc). 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**SHALBY HOSPITAL, SURAT**

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CIN: L85110GJ2004PLC044667

ID:
Name:

Sex: M
cm kg

Birth date: / mmHg

years

1100 Sinus rhythm
1470 with occasional supraventricular premature complexes
9140 ** abnormal rhythm ECG **

Medication:

Symptoms:

History:

Heart rate	94	bpm
PR int	146	ms
QRS dur	82	ms
QT/QTc (E) int	370/ 422	ms
QT/QTc axis	36/ -10/ 13	°
tV5/SV1 amp	1.10/ 0.95	mV
tV5+SV1 amp	2.06	mV

Niknii Panwala

Unconfirmed Report
Reviewed by:

EMR

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

5 mm/mV

