

33 Years

Rate 66

PR 132

QRSD 90

QT 388

QTc 407

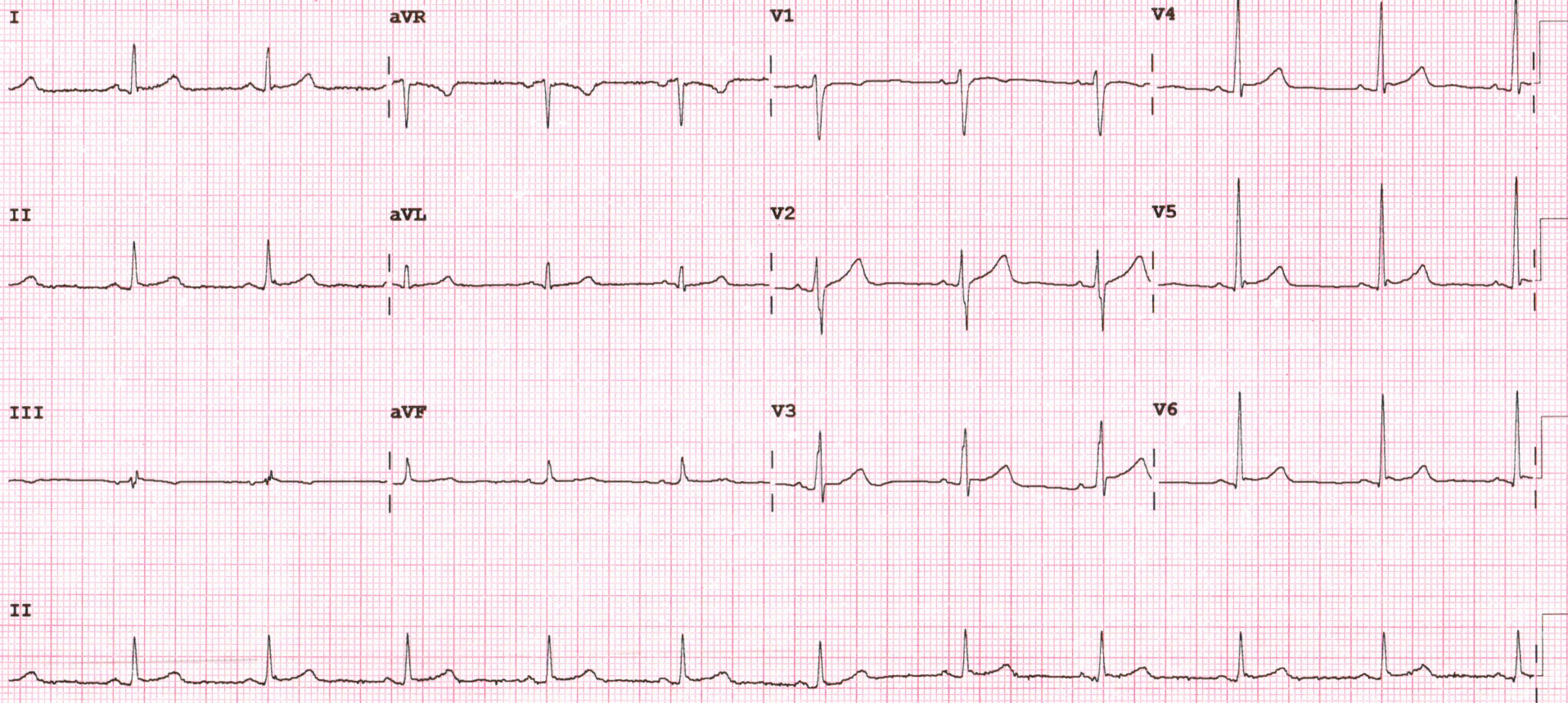
--AXIS--

P 15

QRS 38

T 26

12 Lead; Standard Placement



Device:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 50~ 0.50-150 Hz W

PH09

P?



2D-ECHOCARDIOGRAPHY AND COLOR DOPPLER REPORT

NAME: SHANKARBHAI AMALIYAR

AGE/SEX: 33 YRS/MALE

DATE: 23/03/2024

REF BY: DIRECT

OBSERVATION:

- NORMAL LV SIZE AND NORMAL LV SYSTOLIC FUNCTION. LVEF = 60% (VISUAL).
- NO RWMA AT REST.
- NORMAL LV DIASTOLIC DYSFUNCTION.
- TRIVIAL MR. NO MS.
- NO AR. NO AS.
- TRIVIAL TR. NO PAH.
- NORMAL SIZED LA, RA & RV WITH NORMAL RV SYSTOLIC FUNCTION.
- NORMAL SIZED MPA, RPA & LPA.
- INTACT IAS & IVS.
- NO E/O INTRACARDIAC CLOT/VEGETATION/PE.
- NORMAL IVC.
- NORMAL PERICARDIUM.

LA: 29MM

AO: 27MM

IVS: 10/12MM

LVPW: 09/11MM

LVID: 43/24MM

CONCLUSION:

- NORMAL LV/RV SIZE AND SYSTOLIC FUNCTION.
- NO RWMA AT REST.
- LVEF = 60% (VISUAL).

DR.NIRAV BHALANI
[CARDIOLOGIST]

DR.ARVID SHARMA
[CARDIOLOGIST]



PATIENT NAME: SHANKAR AMALIYAR

AGE/SEX: 33 YRS/M

DATE: Saturday, 23 March 2024

CHEST X-RAY (PA)

Both lung fields appear normal.

Both hila appear normal

Bilateral costo-phrenic angles appear grossly clear

Mediastinum and cardiac shadow appear normal

Bony thorax appears unremarkable

No evidence of free gas under domes of diaphragm

IMPRESSION:

- NO SIGNIFICANT ABNORMALITY NOTED IN LUNG FIELDS
- NORMAL CARDIAC SHADOW


DR SHARAD RUNGTA (MD & DNB)
CONSULTANT RADIOLOGIST

Not all pathologies can be detected on ultrasound in each scan. Further radiographic evaluation is suggested if required.



PATIENT NAME: SHANKARBHAI N AMALIYAR	
AGE/SEX: 33 YRS/M	DATE: Saturday, 23 March 2024

ULTRASOUND OF ABDOMEN & PELVIS

LIVER appears normal in size and **shows raised parenchymal echogenicity**. No evidence of focal lesion. No evidence of dilated IHBR or portal vein. CBD appears normal.

GALL BLADDER is distended. No e/o wall thickening, pericholecystic edema or calculus within.

VISUALIZED PART OF PANCREAS appears normal. MPD is WNL.

SPLEEN appears normal in size and shows normal parenchymal echogenicity. No evidence of focal lesion.

BOTH KIDNEYS appear normal in size and position.

Show normal cortical echogenicity. Corticomedullary differentiation is maintained.

No calculus or hydronephrosis on either side.

URINARY BLADDER is full. Mucosal surface appears smooth with no e/o obvious wall thickening or calculus within.

PROSTATE appears normal in size (15.5 cc). No evidence of focal lesion noted.

BOWEL LOOPS appear normal and show normal peristalsis

No evidence of LYMPHADENOPATHY noted.

No evidence of ASCITES or PLEURAL EFFUSION noted.


IMPRESSION:

- **Grade I Fatty Liver.**


DR SHARAD RUNGTA (MD & DNB)
CONSULTANT RADIOLOGIST

Not all pathologies can be detected on ultrasound in each scan. Further radiographic evaluation is suggested if required.




Patient Name :	Shankarbhai Natavarbhai Amaliyar	Sample No. :	20240314625
Patient ID :	20240309096		
Age / Sex :	33y/Male	Visit No. :	OPD20240328992
Consultant :	DR SAURABH JAIN	Call. Date :	23/03/2024 09:45
Ward :	-	S. Coll. Date :	23/03/2024 11:28
		Report Date :	23/03/2024 17:24

CBC, ESR

Investigation	Result	Normal Value
Hemoglobin :	14.9 gm/dl	13.5 to 18.0 gm/dl
P.C.V. :	48 %	42.0 to 52.0 %
M.C.V. :	74.5 fL [L]	78 to 100 fL
M.C.H. :	23.1 pg [L]	27 to 31 pg
M.C.H.C. :	31 g/dl [L]	32 to 36 g/dl
RDW :	11.6 %	11.5 to 14.0 %
RBC Count :	6.44 X 10 ⁶ /cumm [H]	4.7 to 6.0 X 10 ⁶ /cumm
Polymorphs :	69 %	38 to 70 %
Lymphocytes :	26 %	15 to 48 %
Eosinophils :	3 %	0 to 6 %
Monocytes :	2 % [L]	3 to 11 %
Basophils :	0 %	0.0 to 1.0 %
Total :	100	< 100 > 100
WBC Count :	5900 /cmm	4000 to 10000 /cmm
Platelets Count :	177000 /cmm	1,50,000 to 4,50,000 /cmm
ESR - After One Hour :	8 mm/hr	1 to 13 mm/hr

Dr. Mehul Desai
M.B.D.C.P
Reg.No.G-9521



Patient Name :	Shankarbhai Natavarbhai Amaliyar	Sample No. :	20240314625 
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Blood Group

Investigation	Result	Normal Value
BLOOD GROUP :		
ABO	A	
Rh	Positive	

RENAL FUNCTION TEST

Investigation	Result	Normal Value
Creatinine :	0.7 mg/dl	0.6 - 1.4 mg/dl
Urea :	15 mg/ dl	13 - 45 mg/dl
Uric Acid :	5.9 mg/dl	3.5 - 7.2 mg/dl
Calcium :	8.4 mg/dl	8.5 - 10.5

Dr.Mehul Desai
M.B.D.C.P
Reg.No.G-9521




Patient Name : Shankarbhai Natavarbhai Amaliyar	Sample No. : 20240314625
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Age / Sex : 33y/Male	Visit No. : OPD20240328992
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LFT (Liver Function Test)

Investigation	Result	Normal Value
Total Bilirubin :	0.6 mg/dl	0.2 to 1.0 mg/dl
Direct Bilirubin :	0.3 mg/dl	0.0 to 0.2 mg/dl
Indirect Bilirubin :	0.3 mg/dl	0.0 to 0.8 mg/dl
AST (SGOT) :	20 U/L	5 to 34 U/L
ALT (SGPT) :	25 U/L	0 to 55 U/L
Total Protein (TP) :	6.7 g/dL	6.4 to 8.3, g/dl
Albumin (ALB) :	3.8 g/dl	3.5 to 5.2 g/dl
Globulin :	2.9 g/dl	2.3 to 3.5 g/dl
A/G Ratio :	1.31	
Alkaline Phosphatase (ALP) :	74 U/L	40 to 150 U/L
GAMMA GT. :	18 U/L	7 to 35 U/L

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Patient Name :	Shankarbai Natavarbhai Amaliyar	Sample No. :	20240314625 
Patient ID :	20240309096	Visit No. :	OPD20240328992
Age / Sex :	33y/Male	Call. Date :	23/03/2024 09:45
Consultant :	DR SAURABH JAIN	S. Coll. Date :	23/03/2024 11:28
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Lipid Profile

Investigation	Result	Normal Value
Sample :	Fasting	
Sample Type :	Normal	
Cholesterol (Chol) :	174 mg/dl	Low risk : < 200 Moderate risk : 200 - 239 High risk : > or = 240
Triglyceride :	68 mg/dl	Normal : < 200.0 High : 200 - 499 Very High : > or = 500
HDL Cholesterol :	45 mg/dl	Low risk: >or = 60 mg/dL High risk : Up to 35 mg/dL
LDL :	115.4 mg/dl [L]	131.0 to 159.0(N) < 130.0(L) > 159.0(H)
VLDL :	13.6 mg/dl	Up to 0 to 34 mg/dl
LDL/HDL Ratio :	2.56	Low risk : 0.5 to 3.0 Moderate risk : 3.0 to 6.0 Elevted level high > 6.0
Total Chol / HDL Ratio :	3.87	Low Risk : 3.3 to 4.4 Average Risk : 4.4 to 7.1 Moderate Risk : 7.1 to 11.0 High Risk : > 11.0
Total Lipids :	587 mg/dl	400 to 700 mg/dl

Note :- Lipemic samples give high triglyceride value and falsely low LDL value.

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M.B.D.C.P
Reg.No.G-9521



Savita
Superspeciality Hospital
(A Unit of Solace Healthcare Pvt. Ltd.)

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mh@savitahospital.com savitahospital.com



Patient Name : Shankarbhai Natavarbhai Amaliyar	Sample No. : 20240314625
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Urine R/M

Investigation	Result	Normal Value
Quantity - :	20 ml	
Colour - :	Pale Yellow	
Reaction (pH) :	7.5	4.6-8.0
Turbidity :	Clear	
Deposit :	Absent	Absent
Sp.Gravity :	1.010	1.005-1.010
Protein :	Absent	Absent
Glucose :	Absent	Absent
Bile Salts :	Absent	Absent
Bile pigments :	Absent	Absent
Ketones :	Absent	Absent
Urobilinogen :	Absent	
Blood :	Absent	Absent
Pus Cells :	0-1 /hpf	0-5/hpf
Red Blood Cells :	Absent /hpf	Absent
Epithelial Cells :	0-1 /hpf	

Dr. Mehul Desai
M.B.D.C.P
Reg.No.G-9521



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 Unipath Specialty Laboratory (Baroda) LLP - Platinum Complex, Opp. HDFC Bank, Nr. Radha Krishna char rasta, Akota, Vadodara - 390020
 Mobile: 7228800500 / 8155028222 | Email: info.baroda@unipathllp.in
 Home Visit / OPD Reception : 9998724579



TEST REPORT

Reg. No. : 40301014689 Reg. Date : 23-Mar-2024 12:15
 Name : Mr. SHANKARBHAI AMALIYAR
 Age : 33 Years Gender : Male Ref. No. :
 Ref. By :
 Location : SAVITA SUPERSPECIALTY HOSPITAL @ WAGHODIYA ROAD
 Collected On : 23-Mar-2024 12:15
 Approved On : 23-Mar-2024 13:22
 Dispatch At :
 Tele No. :

Test Name	Results	Units	Bio. Ref. Interval
THYROID FUNCTION TEST			
T3 (triiodothyronine) <i>Method:CLIA</i>	1.46	ng/mL	0.6 - 1.81
T4 (Thyroxine) <i>Method:CLIA</i>	10.90	µg/dL	4.5 - 12.6
TSH (ultra sensitive) <i>Method:CLIA</i>	1.548	µIU/mL	0.55 - 4.78
Sample Type:Serum			

Comments:

Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulate the thyroid gland to synthesize and secrete T3 and T4. Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamic) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

TSH levels During Pregnancy :

- First Trimester : 0.1 to 2.5 µIU/mL
- Second Trimester : 0.2 to 3.0 µIU/mL
- Third trimester : 0.3 to 3.0 µIU/mL

Reference : Carl A.Burtis,Edward R.Ashwood,David E.Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Eddition. Philadelphia: WB Saunders,2012:2170

-----End Of Report -----

This is an electronically authenticated report.

Test done from collected sample.

Printed On: 23-Mar-2024 13:22

We are open 24 x 7 & 365 days

Dr. Vishal Jhaveri
 M.B.B.S, D.C.P

Reg. G-13041
 LLP Identification Number: AAN-8932
 Page 1 of 1



Examination by Physician

Name: SHANKARBHAI AMALIYAR

Reg. No: 20240309096

Age/ Sex: 33/MALE

DOE: 23/03/2024

Physical Examination

Height: 174 cm Weight: 79 kg BMI: 26.1
Temperature: _____ Pulse: 68 BP: 127/98

SBP = 98

Chief Complaints:

NO complaints

Past History:

NAD

Examination:

General Examination: NAD

Systemic Examination: NAD

Investigation:

RBS _____

ECG _____

Others _____

Advice: _____

Signature _____





Examination by Ophthalmologist

Name: SHANKARBHAI AMALIYAR

Reg. No: 20240309096

Age/ Sex: 33/MALE

DOE: 23/03/2024

Routine check up

Medical History:

Nil

Examination of Eye:

	<u>Right</u>	<u>LEFT</u>
External Examination:	<u>(N)</u>	<u>(N)</u>
Anti seg Examination:	<u>(N)</u>	<u>(N)</u>
Schiot Tonometry IOP:	<u>12</u>	<u>14</u>
Fundus:	<u>Normal</u>	
Without Glass Distant Vision:	<u>6/6</u>	<u>6/6</u>
Near Vision:	<u>N/6</u>	<u>N/6</u>
With Glass Distant Vision:	<u>-</u>	<u>-</u>
Near Vision:	<u>-</u>	<u>-</u>
Colour Vision (With Ishihara Chart):	<u>(N)</u>	<u>(N)</u>

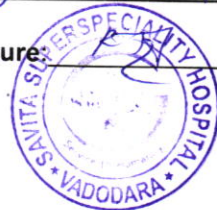
Impression:

Normal

Advice:

CMC 1% eye drop
1-1-1

Signature: _____





बैंक ऑफ बड़ौदा
Bank of Baroda

नाम

Name

शंकरभाई नटवरभाई आमलीयार

SHANKARBHAI NATAVARBHAI AMALIYAR

कर्मचारी कूट क्र.

E.C. No. 123111



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Signature of Holder