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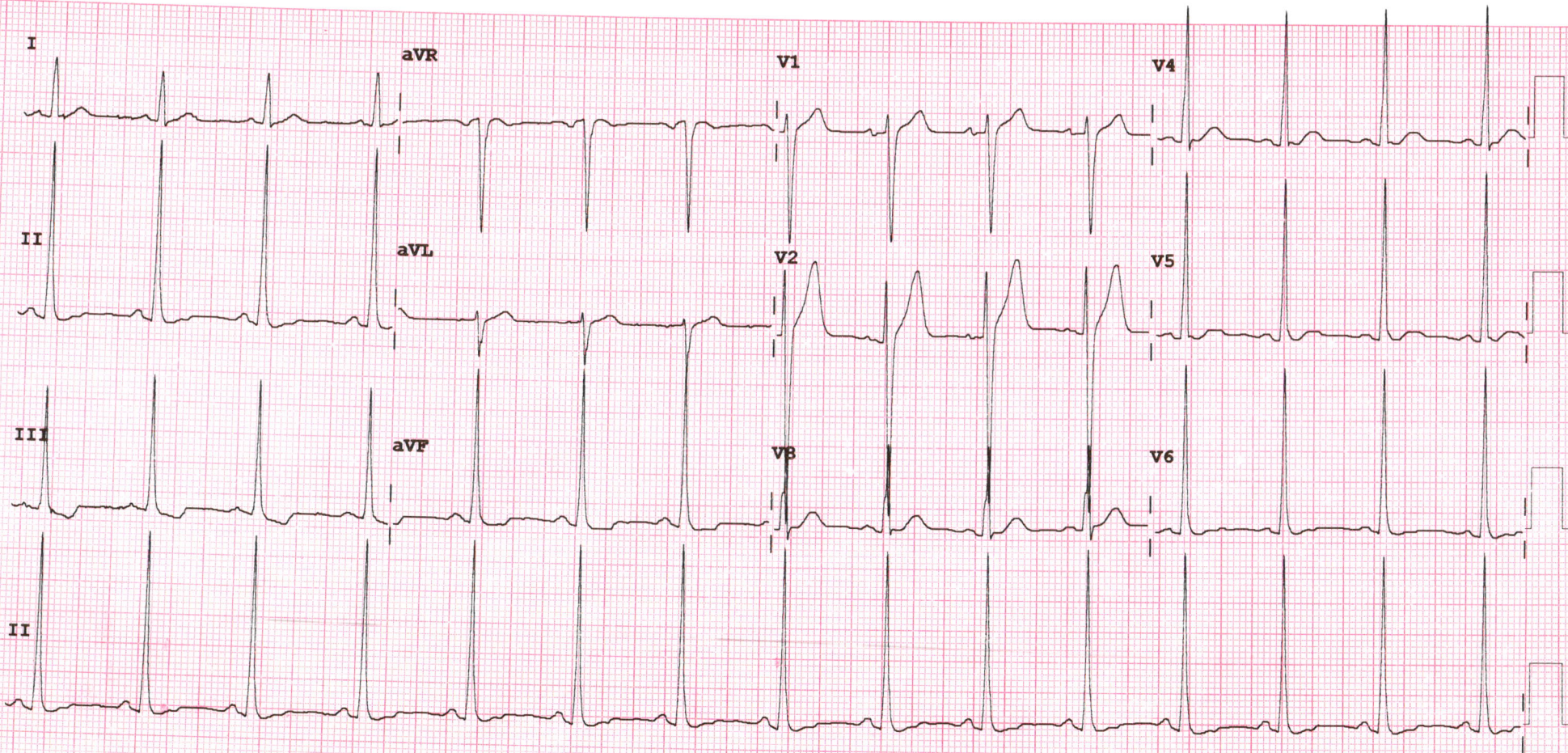
Rate 89

PR 144  
QRSD 84  
QT 312  
QTc 380

--AXIS--

P 66  
QRS 70  
T -25

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?

for PHILIPS

REORDER M2242B



## **2D-ECHOCARDIOGRAPHY AND COLOR DOPPLER REPORT**

**NAME: JIGNESHKUMAR PARMAR**

**AGE/SEX: 37 YRS/MALE**

**DATE: 29/03/2024**

**REF BY: DIRECT**

### **OBSERVATION:**

- NORMAL LV SIZE AND NORMAL LV SYSTOLIC FUNCTION. LVEF = 60% (VISUAL).
- NO RWMA AT REST.
- GRADE I 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: 12/14MM**

**LVPW: 12/15MM**

**LVID: 39/24MM**

### **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: JIGNESH PARMAR**

**AGE/SEX: 37 YRS/M**

**DATE: Friday, 29 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. 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.*



<b>PATIENT NAME: JIGNESH KUMAR PARMAR</b>	
<b>AGE/SEX: 37 YRS/M</b>	<b>DATE: Friday, 29 March 2024</b>

**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 :** Jigneshkumar Govindbhai Parmar

**Sample No. :** 20240314831

**Patient ID :** 20240309243

**Visit No. :** OPD20240329435

**Age / Sex :** 37y/Male

**Call. Date :** 29/03/2024 09:31

**Consultant :** DR SAURABH JAIN

**S. Coll. Date :** 29/03/2024 13:22

**Ward :** -

**Report Date :** 29/03/2024 16:30

### CBC, ESR


Investigation	Result	Normal Value
Hemoglobin :	14.8 gm/dl	13.5 to 18.0 gm/dl
P.C.V. :	43.8 %	42.0 to 52.0 %
M.C.V. :	85.4 fL	78 to 100 fL
M.C.H. :	28.8 pg	27 to 31 pg
M.C.H.C. :	33.8 g/dl	32 to 36 g/dl
RDW :	11.4 %	11.5 to 14.0 %
RBC Count :	5.13 X 10 <sup>6</sup> / cumm	4.7 to 6.0 X 10 <sup>6</sup> / cumm
Polymorphs :	80 % [H]	38 to 70 %
Lymphocytes :	17 %	15 to 48 %
Eosinophils :	1 %	0 to 6 %
Monocytes :	2 % [L]	3 to 11 %
Basophils :	0 %	0.0 to 1.0 %
Total :	100	< 100 > 100
WBC Count :	7600 /cmm	4000 to 10000 /cmm
Platelets Count :	203000 /cmm	1,50,000 to 4,50,000 /cmm
ESR - After One Hour :	9 mm/hr	1 to 13 mm/hr

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







<b>Patient Name :</b>	Jigneshkumar Govindbhai Parmar	<b>Sample No. :</b>	20240314831 
<b>Patient ID :</b>	20240309243	<b>Visit No. :</b>	OPD20240329435
<b>Age / Sex :</b>	37y/Male	<b>Call. Date :</b>	29/03/2024 09:31
<b>Consultant :</b>	DR SAURABH JAIN	<b>S. Coll. Date :</b>	29/03/2024 13:22
<b>Ward :</b>	-	<b>Report Date :</b>	29/03/2024 16:30

### Blood Group

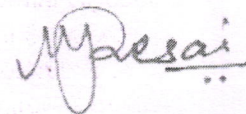
Investigation	Result	Normal Value
<b>BLOOD GROUP :</b>		
<b>ABO</b>	O	
<b>Rh</b>	Positive	

### FBS & PPBS

Investigation	Result	Normal Value
Blood Sugar (FBS) :	115 mg/dl [H]	74 - 100 mg/dl
Urine Sugar ( FUS ) :	Nil	
Blood Sugar (PP2BS) :	116 mg/dl	70 to 120 mg/dl
Urine Sugar ( PP2US ) :	Nil	

### HBA1C


Investigation	Result	Normal Value
Glycosylated Hb :	5.3 %	Near Normal Glycemia : 6 to 7 Excellent Control : 7 to 8 Good Control : 8 to 9 Fair Control : 9 to 10 Poor Control : > 10
Average Plasma Glucose of Last 3 Months :	105.41	



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



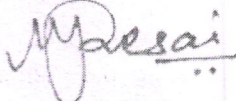


<b>Patient Name :</b>	Jigneshkumar Govindbhai Parmar	<b>Sample No. :</b>	20240314831 
<b>Patient ID :</b>	20240309243	<b>Visit No. :</b>	OPD20240329435
<b>Age / Sex :</b>	37y/Male	<b>Call. Date :</b>	29/03/2024 09:31
<b>Consultant :</b>	DR SAURABH JAIN	<b>S. Coll. Date :</b>	29/03/2024 13:22
<b>Ward :</b>	-	<b>Report Date :</b>	29/03/2024 16:30

### Lipid Profile

Investigation	Result	Normal Value
Sample :	Fasting	
Sample Type :	Normal	
Cholesterol (Chol) :	134 mg/dl	Low risk : < 200 Moderate risk : 200 - 239 High risk : > or = 240
Triglyceride :	90 mg/dl	Normal : < 200.0 High : 200 - 499 Very High : > or = 500
HDL Cholesterol :	43 mg/dl	Low risk : >or = 60 mg/dL High risk : Up to 35 mg/dL
LDL :	73 mg/dl [L]	131.0 to 159.0(N) < 130.0(L) > 159.0(H)
VLDL :	18 mg/dl	Up to 0 to 34 mg/dl
LDL/HDL Ratio :	1.7	Low risk : 0.5 to 3.0 Moderate risk : 3.0 to 6.0 Elevted level high > 6.0
Total Chol / HDL Ratio :	3.12	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 :	567 mg/dl	400 to 700 mg/dl


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



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

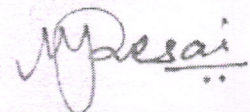




<b>Patient Name :</b>	Jigneshkumar Govindbhai Parmar	<b>Sample No. :</b>	20240314831 
<b>Patient ID :</b>	20240309243	<b>Visit No. :</b>	OPD20240329435
<b>Age / Sex :</b>	37y/Male	<b>Call. Date :</b>	29/03/2024 09:31
<b>Consultant :</b>	DR SAURABH JAIN	<b>S. Coll. Date :</b>	29/03/2024 13:22
<b>Ward :</b>	-	<b>Report Date :</b>	29/03/2024 16:30

**RENAL FUNCTION TEST**

Investigation	Result	Normal Value
Creatinine :	0.8 mg/dl	0.6 - 1.4 mg/dl
Urea :	31 mg/ dl	13 - 45 mg/dl
Uric Acid :	5.6 mg/dl	3.5 - 7.2 mg/dl
Calcium :	8.9 mg/dl	8.5 - 10.5



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



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

Parivar Char Rasta, Waghodia-Dabhoi Ring Road, Vadodara-390019  
0265-2578844 / 2578849 ✉ mh@savitahospital.com 🌐 savitahospital.com

**Patient Name :** Jigneshkumar Govindbhai Parmar

**Sample No. :** 20240314831



**Patient ID :** 20240309243

**Visit No. :** OPD20240329435

**Age / Sex :** 37y/Male

**Call. Date :** 29/03/2024 09:31

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**S. Coll. Date :** 29/03/2024 13:22

**Ward :** -

**Report Date :** 29/03/2024 16:30

### LFT (Liver Function Test)

Investigation	Result	Normal Value
Total Bilirubin :	0.7 mg/dl	0.2 to 1.0 mg/dl
Direct Bilirubin :	0.5 mg/dl	0.0 to 0.2 mg/dl
Indirect Bilirubin :	0.2 mg/dl	0.0 to 0.8 mg/dl
AST (SGOT) :	15 U/L	5 to 34 U/L
ALT (SGPT) :	26 U/L	0 to 55 U/L
Total Protein (TP) :	7.1 g/dL	6.4 to 8.3, g/dl
Albumin (ALB) :	4.4 g/dl	3.5 to 5.2 g/dl
Globulin :	2.7 g/dl	2.3 to 3.5 g/dl
A/G Ratio :	1.63	
Alkaline Phosphatase (ALP) :	110 U/L	40 to 150 U/L
GAMMA GT. :	21 U/L	7 to 35 U/L

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






# Savita

## Superspeciality Hospital

(A Unit of Solace Healthcare Pvt. Ltd.)

Parivar Char Rasta, Waghodia-Dabhoi Ring Road, Vadodara-390019

☎ 0265-2578844 / 2578849 ✉ mh@savitahospital.com 🌐 savitahospital.com

<b>Patient Name :</b>	Jigneshkumar Govindbhai Parmar	<b>Sample No. :</b>	20240314831 
<b>Patient ID :</b>	20240309243	<b>Visit No. :</b>	OPD20240329435
<b>Age / Sex :</b>	37y/Male	<b>Call. Date :</b>	29/03/2024 09:31
<b>Consultant :</b>	DR SAURABH JAIN	<b>S. Coll. Date :</b>	29/03/2024 13:22
<b>Ward :</b>	-	<b>Report Date :</b>	29/03/2024 16:30

### Urine R/M

Investigation	Result	Normal Value
Quantity - :	20 ml	
Colour - :	Pale Yellow	
Reaction (pH) :	6.0	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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1. Under the best of circumstances, no test is having 100% sensitivity & 100% specificity. In the majority of laboratory parameters, the combination of short-term physiologic variation & analytical error/technological limitations are sufficient to render the interpretation of single determinations difficult especially when the concentrations are in borderline range. Any particular laboratory test result may be misleading (not correlating with clinical findings) for large varieties of reasons, regardless of high quality of laboratory, such results should be rechecked. If indicated new specimen should be submitted.
2. Reference ranges (biological reference interval) vary from one laboratory to another and with age, sex, race, size, physiologic status (e.g. pregnancy & lactation) that apply to the particular patient. Reference values represent the statistical data for 95% of the population; values outside these ranges do not necessarily represent disease. Result may still be within the reference range but be elevated above the patient's baseline, which is why serial testing is important in a number of conditions.
3. The effects of drugs on laboratory test values must never be overlooked. Laboratory values in elderly must be interpreted in light of many factors that affects "normal" values in this group.
4. Negative laboratory test results do not necessary rule out a clinical diagnosis.

## TEAM OF DOCTORS

Dr. Girish Gupta, MD (Path)	Dr. Rakesh Shah MD (Path) , DCP
Dr. Ankit Jhaveri MD (Path)	Dr. Vishal Jhaveri, DCP
Dr. Rachna Parekh DCP	Dr. Hetal Parikh MD (Path) FRCPPath (UK)
Dr Priya Mangukiya MD (Microbiology)	Dr. Mitesh Rathwa MD (Path)
Dr. Varsha Raimalani, PhD	Dr. Shreyas Nisarta MD(Path)
Dr. Nehal Tiwari MD (Path)	Dr. Vaishali Bhatt, DCP
Dr. Usha Amliyar DCP	Dr. Manjari Bhabhor DCP

## OUR UNITS

- a) Aayu Path Lab (Tarsali) - 9376224836, 7043940202
- b) Purak Hi-Tech Lab (Nizampura) - 7229046350, 9377559900
- c) Dr. Jhaveri Laboratory (Akota) - 0265-2329428, 9998724579
- d) Dr. Jhaveri Laboratory (Polo Ground) - 0265-2424335, 9725282172
- e) Jhaveri Advanced Path Lab (Subhanpura)
- f) Jhaveri Advanced Path Lab (Waghodiya road)



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Unipath Specialty Laboratory (Baroda) LLP - Platinum Complex, Opp. HDFC Bank, Nr. Radha Krishna char rasta, Akota, Vadodara - 390020  
Phone: 0269-2354437 / 2326208 | Mobile: 7228800500 / 8155028222 | Email: info.baroda@unipathllp.in  
Home Visit / OPD Reception : 9998724579



## TEST REPORT

<b>Reg. No.</b> : 40301017415	<b>Reg. Date</b> : 29-Mar-2024 12:22	<b>Collected On</b> : 29-Mar-2024 12:22
<b>Name</b> : Mr. JIGNESHKUMAR PARMAR		<b>Approved On</b> : 29-Mar-2024 14:34
<b>Age</b> : 37 Years	<b>Gender</b> : Male	<b>Ref. No.</b> :
<b>Ref. By</b> :		<b>Dispatch At</b> :
<b>Location</b> : SAVITA SUPERSPECIALTY HOSPITAL @ WAGHODIYA ROAD		<b>Tele No.</b> :

Test Name	Results	Units	Bio. Ref. Interval
<b>THYROID FUNCTION TEST</b>			
T3 (triiodothyronine) <i>Method:CLIA</i>	1.23	ng/mL	0.6 - 1.81
T4 (Thyroxine) <i>Method:CLIA</i>	12.10	µg/dL	4.5 - 12.6
TSH ( ultra sensitive) <i>Method:CLIA</i>	1.159	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 (hypothalamus) 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 Edition. Philadelphia: WB Saunders,2012:2170

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

This is an electronically authenticated report. Test done from collected sample.

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

Reg. G-13041

LLP Identification Number: AAN-8932  
Page 1 of 1

Printed On: 29-Mar-2024 14:34

We are open 24 x 7 & 365 days



**Examination by Ophthalmologist**

Name: JIGNESHKUMAR PAMAR

Reg. No: 20240309243

Age/ Sex: 37/MALE

DOE: 29/03/2024

Nil

**Medical History:**

H/O chemical fall x (LE) x 2017

**Examination of Eye:**

Right

LEFT

External Examination:

— WNL —

Anti seg Examination:

WNL

Nasal pterygium

Schiot Tonometry IOP:

—

—

Fundus:

Without Glass Distant Vision:

6/6

6/9

Near Vision:

N6

N6

With Glass

Distant Vision:

Near Vision:

Colour Vision (With Ishihara Chart):

WNL

Impression:

(LE) nasal pteeygium.

Advice:

(LE) pteeygium excision ↓ LA

(LE) moxiciap

eye drops — Qbs

Signature:





**Examination by Physician**

Name: JIGNESHKUMAR PARMAR

Reg. No: 20240309243

Age/ Sex: 37/MALE

DOE: 29/03/2024

**Physical Examination**

Height: 156cm Weight: 61kg BMI: 25.06  
Temperature: N Pulse: 94 BP: 125/79

SpO2 = 98

**Chief Complaints:**

NO complaints

**Past History:**

NAD

**Examination:**

General Examination:

NAD

Systemic Examination:

NAD

**Investigation:**

RBS \_\_\_\_\_

ECG \_\_\_\_\_

Others \_\_\_\_\_

Advice:

BP monitoring  
T. DOLO (650) 1 tab sos Headache

Signature \_\_\_\_\_





सत्यमेव जयते  
भारत सरकार



आधार

भारत सरकार  
Government of India

भारतीय विशिष्ट ओળખ प्राधिकरण  
Unique Identification Authority of India

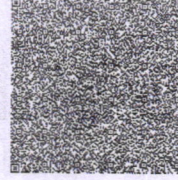
नोंधणीनी ओળખ / Enrollment No. : 0648/01365/12509

To  
Jigneshkumar Govindbhai Parmar  
જીનેશકુમાર ગોવિંદભાઈ પરમાર  
S/O: Govindbhai Parmar,  
nani vadol,  
nani vadol,  
VTC: Nani Vadol, PO: Chadasana,  
Sub District: Idar, District: Sabarkantha,  
State: Gujarat, PIN Code: 383110,  
Mobile: 9978005196

28039607



KG280396075F



આપનો આધાર નંબર / Your Aadhaar No. :

**5078 5582 6425**

મારો આધાર, મારી ઓળખ



ભારત સરકાર



આધાર

Issue Date: 11/01/2013



જીનેશકુમાર ગોવિંદભાઈ પરમાર  
Jigneshkumar Govindbhai Parmar  
જન્મ તારીખ / DOB: 29/01/1997  
પુરુષ / Male

**5078 5582 6425**

મારો આધાર, મારી ઓળખ