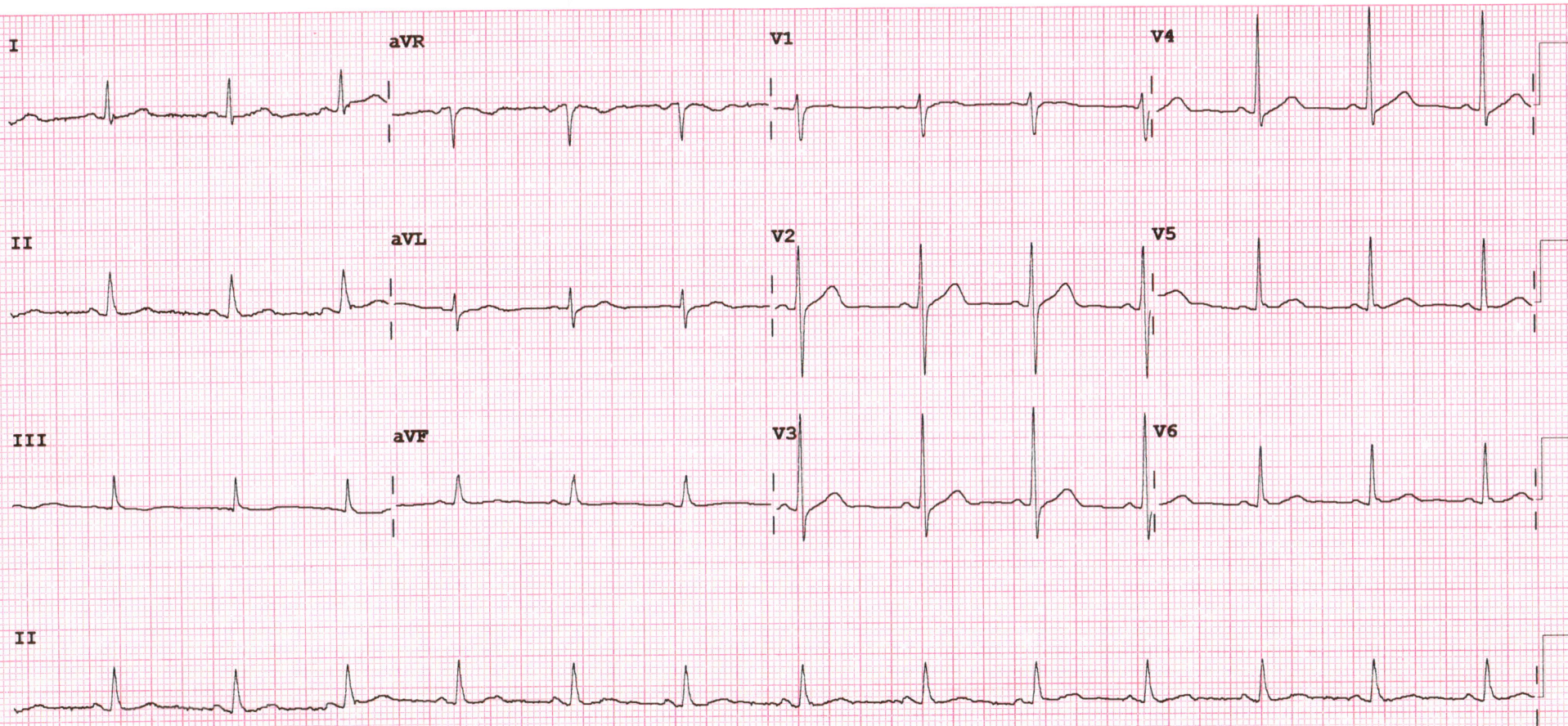


Rate 80
PR 136
QRSD 66
QT 344
QTc 397

--AXIS--

P 36
QRS 58
T 9

12 Lead; Standard Placement



Device:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV Elect. Off

F 50~ 0.50-150 Hz W

PH09

P?



2D-ECHOCARDIOGRAPHY AND COLOR DOPPLER REPORT

NAME: VANRAJSINH V CHAUHAN

AGE/SEX: 33 YRS/MALE

DATE: 26/03/2024

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.
- MILD TR. NO PAH. RVSP : 27 MMHG.
- 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: 32MM

AO: 29MM


IVS: 10/12MM

LVPW: 09/11MM

LVID: 45/27MM

CONCLUSION:

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


DR. NIRAV BHALANI
[CARDIOLOGIST]

DR. ARVIND SHARMA
[CARDIOLOGIST]



PATIENT NAME: VANRAJSINH CHAUHAN

AGE/SEX: 33 YRS/M

DATE: Tuesday, 26 March 2024

ULTRASOUND OF ABDOMEN & PELVIS

LIVER appears normal in size and shows normal 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:

- **NO SIGNIFICANT ABNORMALITY NOTED IN PRESENT SCAN.**


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: VANRAJSINH CHAUHAN

AGE/SEX: 33 YRS/M

DATE: Tuesday, 26 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 : Vanrajsinh Vijaysinh Chauhan

Sample No. : 20240314727



Patient ID : 20220904589

Visit No. : OPD20240329134

Age / Sex : 33y 6m/Male

Call Date : 26/03/2024 10:58

Consultant : DR SAURABH JAIN

S. Coll. Date : 26/03/2024 12:54

Ward : -


Report Date : 26/03/2024 15:50

CBC, ESR

Investigation	Result	Normal Value
Hemoglobin :	13.5 gm/dl	13.5 to 18.0 gm/dl
P.C.V. :	42.4 %	42.0 to 52.0 %
M.C.V. :	63.3 fL [L]	78 to 100 fL
M.C.H. :	20.1 pg [L]	27 to 31 pg
M.C.H.C. :	31.8 g/dl [L]	32 to 36 g/dl
RDW :	12.5 %	11.5 to 14.0 %
RBC Count :	6.7 X 10 ⁶ /cumm [H]	4.7 to 6.0 X 10 ⁶ /cumm
Polymorphs :	73 % [H]	38 to 70 %
Lymphocytes :	22 %	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 :	5100 /cmm	4000 to 10000 /cmm
Platelets Count :	166000 /cmm	1,50,000 to 4,50,000 /cmm
ESR - After One Hour :	11 mm/hr	1 to 13 mm/hr

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



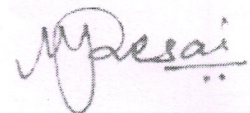
Patient Name :	Vanrajsinh Vijaysinh Chauhan	Sample No. :	20240314727 
Patient ID :	20220904589	Visit No. :	OPD20240329134
Age / Sex :	33y 6m/Male	Call. Date :	26/03/2024 10:58
Consultant :	DR SAURABH JAIN	S. Coll. Date :	26/03/2024 12:54
Ward :	-	Report Date :	26/03/2024 15:50

Blood Group

Investigation	Result	Normal Value
BLOOD GROUP :		
ABO	O	
Rh	Positive	

RENAL FUNCTION TEST

Investigation	Result	Normal Value
Creatinine :	1 mg/dl	0.6 - 1.4 mg/dl
Urea :	15 mg/ dl	13 - 45 mg/dl
Uric Acid :	6.8 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




Savita

Superspeciality Hospital

(A Unit of Solace Healthcare Pvt. Ltd.)

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

Patient Name :	Vanrajsinh Vijaysinh Chauhan	Sample No. :	20240314727 
Patient ID :	20220904589	Visit No. :	OPD20240329134
Age / Sex :	33y 6m/Male	Call. Date :	26/03/2024 10:58
Consultant :	DR SAURABH JAIN	S. Coll. Date :	26/03/2024 12:54
Ward :	-	Report Date :	26/03/2024 15:50

FBS & PPBS

Investigation	Result	Normal Value
Blood Sugar (FBS) :	<u>114 mg/dl [H]</u>	74 - 100 mg/dl
Urine Sugar (FUS) :	Nil	
Blood Sugar (PP2BS) :	135 mg/dl [H]	70 to 120 mg/dl
Urine Sugar (PP2US) :	Nil	

HBA1C


Investigation	Result	Normal Value
Glycosylated Hb :	<u>6 % [H]</u>	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 : 125.5



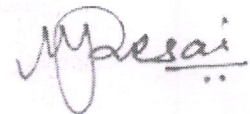
Dr.Mehul Desai
M.B.D.C.P
Reg.No.G-9521



Patient Name :	Vanrajsinh Vijaysinh Chauhan	Sample No. :	20240314727 
Patient ID :	20220904589	Visit No. :	OPD20240329134
Age / Sex :	33y 6m/Male	Call. Date :	26/03/2024 10:58
Consultant :	DR SAURABH JAIN	S. Coll. Date :	26/03/2024 12:54
Ward :	-	Report Date :	26/03/2024 15:50

LFT (Liver Function Test)

Investigation	Result	Normal Value
Total Bilirubin :	0.5 mg/dl	0.2 to 1.0 mg/dl
Direct Bilirubin :	0.2 mg/dl	0.0 to 0.2 mg/dl
Indirect Bilirubin :	0.3 mg/dl	0.0 to 0.8 mg/dl
AST (SGOT) :	15 U/L	5 to 34 U/L
ALT (SGPT) :	10 U/L	0 to 55 U/L
Total Protein (TP) :	7.2 g/dL	6.4 to 8.3, g/dl
Albumin (ALB) :	4.2 g/dl	3.5 to 5.2 g/dl
Globulin :	3 g/dl	2.3 to 3.5 g/dl
A/G Ratio :	1.4	
Alkaline Phosphatase (ALP) :	144 U/L	40 to 150 U/L
GAMMA GT. :	26 U/L	7 to 35 U/L



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M.B.D.C.P
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☎ 0265-2578844 / 2578849 ✉ mh@savitahospital.com 🌐 savitahospital.com

Patient Name : Vanrajsinh Vijaysinh Chauhan

Sample No. : 20240314727



Patient ID : 20220904589

Visit No. : OPD20240329134

Age / Sex : 33y 6m/Male

Call. Date : 26/03/2024 10:58

Consultant : DR SAURABH JAIN

S. Coll. Date : 26/03/2024 12:54

Ward : -

Report Date : 26/03/2024 15:50


Lipid Profile

Investigation	Result	Normal Value
Sample :	Fasting	
Sample Type :	Normal	
Cholesterol (Chol) :	153 mg/dl	Low risk : < 200 Moderate risk : 200 - 239 High risk : > or = 240
Triglyceride :	140 mg/dl	Normal : < 200.0 High : 200 - 499 Very High : > or = 500
HDL Cholesterol :	32 mg/dl [L]	Low risk : > or = 60 mg/dL High risk : Up to 35 mg/dL
LDL :	93 mg/dl [L]	131.0 to 159.0(N) < 130.0(L) > 159.0(H)
VLDL :	28 mg/dl	Up to 0 to 34 mg/dl
LDL/HDL Ratio :	2.91	Low risk : 0.5 to 3.0 Moderate risk : 3.0 to 6.0 Elevted level high > 6.0
Total Chol / HDL Ratio :	4.78	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 :	625 mg/dl	400 to 700 mg/dl

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

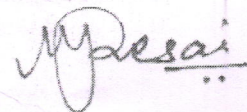
Dr. Mehul Desai
M.B.D.C.P
Reg.No.G-9521



Patient Name :	Vanrajsinh Vijaysinh Chauhan	Sample No. :	20240314727 
Patient ID :	20220904589	Visit No. :	OPD20240329134
Age / Sex :	33y 6m/Male	Call. Date :	26/03/2024 10:58
Consultant :	DR SAURABH JAIN	S. Coll. Date :	26/03/2024 12:54
Ward :	-	Report Date :	26/03/2024 15:50

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 :	1.025	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 :	0-1 /hpf	Absent
Epithelial Cells :	0-1 /hpf	



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

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7. A requested test might not be performed in case of following reasons: a) Insufficient quantity of specimen (inadequate collection/spillage in transit) b) Specimen quality unacceptable (hemolysed/clotted/lipemic etc) c) Incorrect specimen type d) Incorrect identity of specimen. In above mentioned circumstances it is expected that a fresh specimen will be sent for the purpose of the reporting on the same parameter.
8. In unanticipated circumstances (non-availability of kits, instrument breakdown & natural calamities) tests may not be reported as per schedule. However USL(B). LLP. will ensure that the delay is minimized.
9. The sex of the fetus will not be revealed as per the Prenatal Diagnostic Technique (Regulation and Prevention of Misuse Act, 1994)
10. Tests parameters marked by asterisks (*) are excluded from the "scope" of NABL accredited tests.
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14. Any queries regarding possible interpretation / clinical - pathological correlation from referring doctor/patient should be directed to the pathologists.
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GENERAL PRINCIPLES OF LABORATORY TESTING & LABORATORY REFERENCE RANGES

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) FRCPATH (UK)
Dr. Priya Mangukiya MD (Microbiology)	Dr. Sukanya Patra MBBS, MD (Path)
Dr. Varsha Raimalani, PhD	Dr. Shreyas Nisarta MD(Path)
Dr. Nehal Tiwari MD (Path)	Dr. Vaishali Bhatt, 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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 Mobile: 7228800500 / 8155028222 | Email: info.baroda@unipathllp.in
 Home Visit / OPD Reception : 9998724579



TEST REPORT

Reg. No. : 40301015707 Reg. Date : 26-Mar-2024 15:13 Collected On : 26-Mar-2024 15:16
 Name : Mr. VANRAJSINH V CHAUHAN Approved On : 26-Mar-2024 17:56
 Age : 33 Years Gender : Male Ref. No. : Dispatch At :
 Ref. By : Tele No. :
 Location : SAVITA SUPERSPECIALTY HOSPITAL @ WAGHODIYA ROAD

Test Name	Results	Units	Bio. Ref. Interval
THYROID FUNCTION TEST			
T3 (triiodothyronine) <i>Method:CLIA</i>	0.67	ng/mL	0.6 - 1.81
T4 (Thyroxine) <i>Method:CLIA</i>	6.40	µg/dL	4.5 - 12.6
TSH (ultra sensitive) <i>Method:CLIA</i>	1.656	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: 26-Mar-2024 17:57

We are open 24 x 7 & 365 days



Examination by Ophthalmologist

Name: VANRAJSINH CHAUHAN

Reg. No: 20220904589

Age/ Sex: 33/MALE

DOE: 26/03/2024

NOI

Medical History:

Nil

Examination of Eye:

Right

LEFT

External Examination:

BE dry eyes

Anti seg Examination:

curv

Schiot Tonometry IOP:

Fundus:

Without Glass Distant Vision:

6/6 6/6

Near Vision:

No No

With Glass Distant Vision:

Near Vision:

Colour Vision (With Ishihara Chart): curv

Impression:

BE dry eyes.

Advice:

BE Ecoteas gel eye drop - BD

Signature: _____





Examination by Physicia

Name: VANRAJSINH CHAUHAN

Reg. No: 20220904589

Age/ Sex: 33/MALE

DOE: 26/03/2024

Physical Examination

Height: 176cm Weight: 73kg BMI: 23.56

Temperature: N Pulse: 86 BP: 116/82 SpO2: 99%

ChiefComplaints:

NO complaints

PastHistory:

NAD

Examination:

General Examination:

NAD

Systemic Examination:

NAD

Investigation:

RBS _____

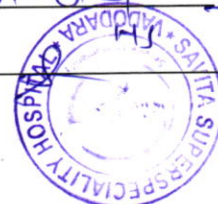
ECG _____

Others _____

Advice: ① T. Pan - p (40/30) 1-0-0 x 10 days, BRF

② Syp. duplelax 20 cc 0-0-0 ①

Signature _____





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गुजरात, 389001

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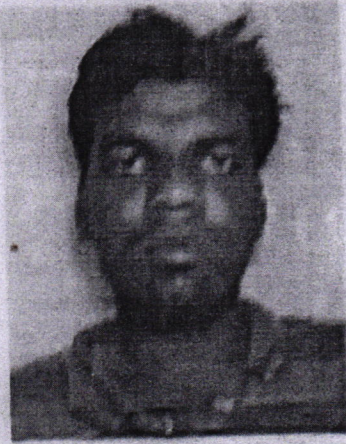


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Government of India



ચૌહાણ વનરાજસિંહ

Chauhan Vanrajsinh

જન્મ તારીખ / DOB : 17/08/1990

પુરુષ / Male



7289 8912 9171

આધાર - સામાન્ય માણસનો અધિકાર