



Shalby Hospital (A Unit of Shalby Limited) - Shalby Hospital, Gujarat College, Rander Road, Adajan, Surat, Gujarat, India.
Tel.: 0261 7190000 | Ext.: 851 | Mo.: 9512036046 | Email : pathology.surat@shalby.in | Web : www.shalby.org

PID : SUR0000362950 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Gitaben Girish Ahir / Registered On : 11-Apr-2024 09:40 AM
Lab ID : 404900676 Collected On : 11-Apr-2024 09:10 AM
Gender/Age : Female / 50 Years DOB : 26-Jan-1974 Received On : 11-Apr-2024 10:19 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>	13.3	g/dL	12.0 - 15.0
RBC COUNT <i>Electrical Impedance</i>	4.80	mill/cmm	3.8 - 4.8
HCT <i>Calculated</i>	39.9	%	36 - 46
MCV <i>Calculated based on the RBC histogram</i>	83.2	fL	83 - 101
MCH <i>Calculated</i>	27.7	pg	27 - 32
MCHC <i>Calculated</i>	33.3	g/dL	31.5 - 34.5
RDW <i>Calculated</i>	12.1	%	11.6 - 14.0

TOTAL LEUCOCYTE COUNT

Total WBC Count *Electrical Impedance* 7030 cells/cmm 4000 - 10000

DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)

NEUTROPHILS <i>Flow Cytometry</i>	57	%	40 - 80
LYMPHOCYTES <i>Flow Cytometry</i>	38	%	20 - 40
EOSINOPHILS <i>Flow Cytometry</i>	2	%	1 - 6
MONOCYTES <i>Flow Cytometry</i>	3	%	2 - 10
BASOPHIL <i>Flow Cytometry</i>	0	%	0 - 2

PLATELET INDICES

PLATELET COUNT <i>Electrical Impedance</i>	353000	/cmm	150000 - 410000
MPV <i>Calculated based on PLT Histogram</i>	8.0	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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Generated On : 11-Apr-2024 12:54 PM
Approved On : 11-Apr-2024 11:32 AM

Dr Pankaj Agrawal
Dr Pankaj Agrawal
M.B., D.C.P
Consulting Pathologist



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Sample Type : EDTA Whole Blood

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

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Parameter	Result	Unit	Biological Ref. Interval
ESR 1st hour * <i>Modified Westergren Method</i>	14	mm in 1 hour	0 - 20
HBA1C HbA1c - Glycated Haemoglobin * <i>Boronate Affinity Assay</i>	9.4	%	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) * 223 mg/dL
Calculated

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Gender/Age : Female / 50 Years DOB : 26-Jan-1974 Received On : 11-Apr-2024 10:27 AM
Ref. By : Dr. Health Check Up . Shalby Sample Type : Fluoride F, Urine (PP),
Fluoride PP, Urine (F),S

Parameter	Result	Unit	Biological Ref. Interval
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PLASMA GLUCOSE LEVEL

FASTING PLASMA GLUCOSE

Plasma Glucose (F) 151 mg/dL 74 - 106
GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

Urine Sugar (F) ABSENT mg/dL Absent
Glucose-oxidase/oxidase reaction

POST PRANDIAL PLASMA GLUCOSE

Plasma Glucose (PP) 301 mg/dL Normal: 100-140 Impaired: 140
-199 Diabetic :=>200
GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

Urine Sugar (PP) PRESENT[++++] mg/dL Absent
Glucose-oxidase/oxidase reaction

Liver Function Test

Liver Function Test

SGPT (ALT) 18 U/L 9 - 52
Multi Point Rate with P-5-P

SGOT (AST) 17 U/L 14 - 36
Multi Point Rate with P-5-P

Alkaline Phosphatase 107 U/L 20-50 yrs.: 42 - 98
4-19 yr : 54 - 369
>/=51 yr : 56 - 119
PNPP, AMP Buffer

GGT * 15 U/L 12 - 43
L-gamma-glutamyl-4-nitroanalide/glycylglycine Kinetic

S. PROTEIN 8.0 g/dL 6.3 - 8.2
Biuret (Alkaline cupric sulfate), End Point

Albumin 4.4 g/dL 3.5 - 5.0
Bromocresol Green (BCG), Colorimetric

S. GLOBULIN 3.6 g/dL 2.3 - 3.6
Calculated

A/G Ratio 1.2 Ratio 1.0 - 2.3
Calculated

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Sample Type : Fluoride F, Urine (PP),
Fluoride PP, Urine (F),S**Liver Function Test****Bilirubin Total**

Azobilirubin/Dyphylline/Diazonium Salt

0.6 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

End-point Colorimetric (Dual wavelength spectrophotometric)

0.4 mg/dL

Unconjugated bilirubin
 Adults: 0.0-1.1
 Neonates: 0.6-10.5

Bilirubin Direct

Calculated

0.2 mg/dL

Conjugated bilirubin and
 Delta bilirubin (Bilirubin
 covalently bound to albumin)
 0.0-0.4

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Pankaj Agrawal
Dr Pankaj Agrawal
 M.B., D.C.P
 Consulting Pathologist

Patient ID:	SUR0000362950	Patient Name:	GITABEN AHIR
Age:	50 Years	Sex:	F
Accession Number:	4002 MHC	Modality:	DX
Referring Physician:	DR. SHALBY	Study:	CHEST PA
Study Date:	11-Apr-2024		

CHEST X-RAY (PA)

Prominent bronchovascular markings bilaterally.

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:

- Prominent bronchovascular markings bilaterally.

Thanks for referral.



DR. ASHUTOSH GANDHI

DMRD (Radiodiagnosis)

G-14916

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Tel: 079 40203000 | Fax: 079 40203109 | info.sg@shalby.org | www.shalby.org
CIN: L85110GJ2004PLC044667

Patient's Name: Gitaben Ahir

UHID: 362950

Age: 50 yrs / Female

Date: 11 / 04 / 2024

ECHOCARDIOGRAPHY REPORT

Valves:-

Mitral valve :Normal, No MR

Aortic valve :Normal, No AR

Tricuspid valve :Normal, No TR

Pulmonary valve:Normal, No PR

Chambers:-

Left Atrium:Normal

Right Atrium:Normal

Right Ventricle:Normal size cavity, Good RV systolic function With TAPSE:20

Left Ventricle: Normal size cardiac chambers, No Regional wall Motion abnormality.

Normal LV systolic function
with Ejection Fraction 60 %.

Normal Diastolic Flow Pattern.

Septae:-

IVS: Intact. No residual VSD.

IAS :Intact.

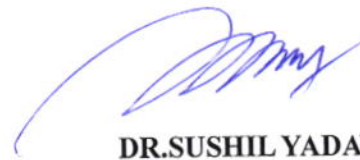
Pericardium:Normal.

IVC:13 mm with more than 50% collapsibility.

OTHER FINDINGS :- Bilateral lung angle clear

CONCLUSION:-

- Normal LV Systolic function
- No RWMA
- EF 60 %



DR.SUSHIL YADAV
Consultant Clinical cardiologist

Note : Normal echo study does not rule out underlying Coronary artery disease

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Tel: 079 40203000 | Fax: 079 40203109 | info.sg@shalby.org | www.shalby.org
CIN: L85110GJ2004PLC044667

Patient Name: GITABEN G. AHIR		UHID: 362950
Age / Sex: 50 Yrs. / Female	Study: USG Abdomen + Pelvis	
Referred By: Dr. at shalby hospital	Date: 11/04/2024	

ULTRASOUND OF ABDOMEN AND PELVIS (TAS)

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 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.

Uterus is not seen, h/o Hysterectomy.

No ascites is seen. No abnormal bowel wall thickening and dilatation seen.

IMPRESSION:

- No significant abnormality detected.

Thanks for referrals.

**DR. ASHUTOSH GANDHI**DMRD (Radiodiagnosis)
G-14916**SHALBY HOSPITAL, SURAT**

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CIN: L85110GJ2004PLC044667

ID:

Name:

11-Apr-2024 AM9:05:42

Sex: M

cm

kg

Birth date:

mmHg

years

Medication:

Symptoms:

History:

Heart rate

HR int

HR dur

IT/QTc(E) int

I/QRS/T axis

IV5/SV1 amp

IV5+SV1 amp

78

bpm

154

ms

78

ms

338/ 371

ms

45/ 15/ 223

°

1.78/ 1.00

mV

2.78

mV

1100 Sinus rhythm

4068 Nonspecific Twave abnormality

9130 ** borderline ECG **

Gretebor

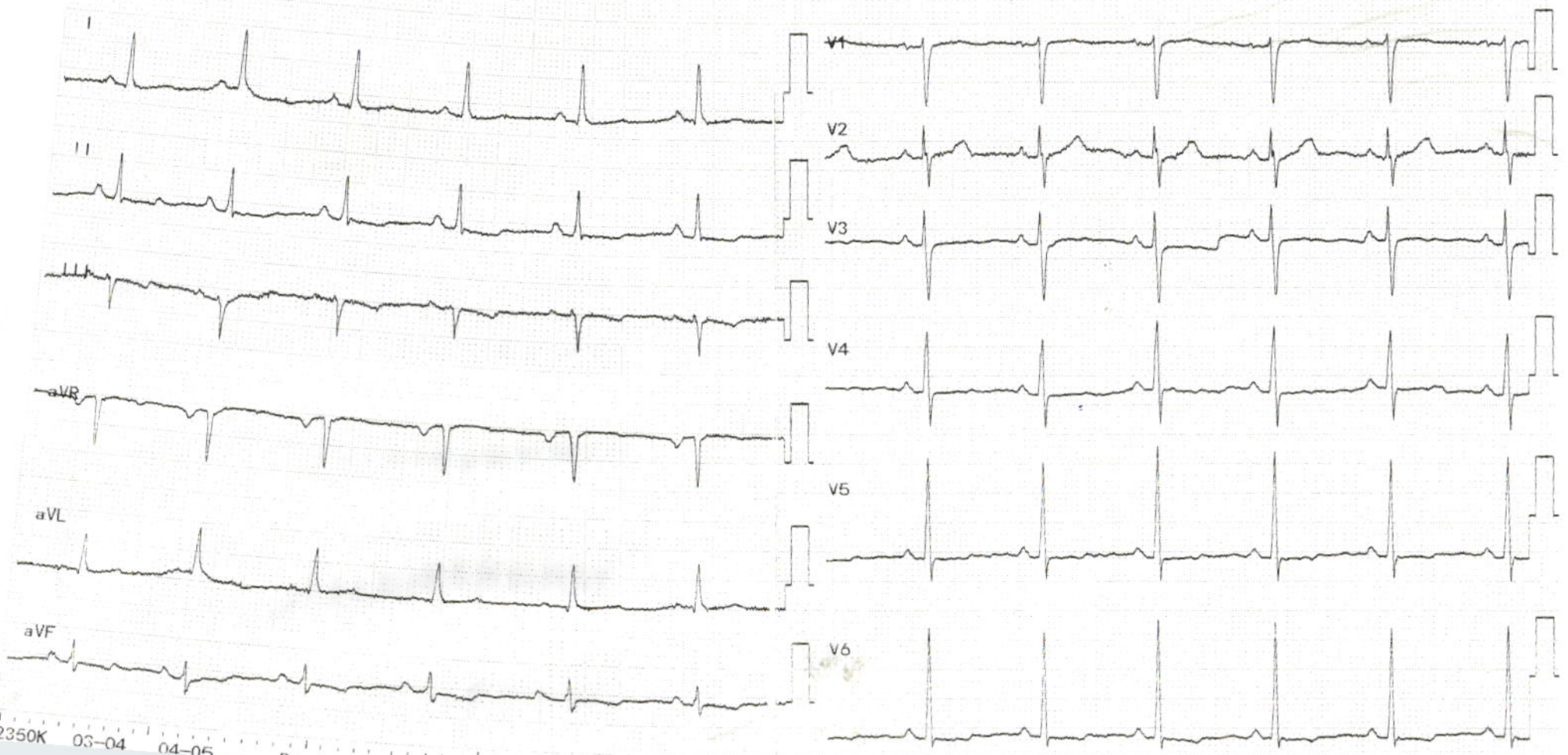
Unconfirmed Report

Reviewed by:

10 mm/mV 25 mm/s

Filter: H50 d 100 Hz

10 mm/mV



2350K 03-04 04-05

Exam:

DR. HIMANI THAKER (VYAS)

M.S (Gynec)
Consultant Obstetrician & Gynecologist
Laposcopic Surgeon
Infertility Specialist
Email-ID:- thaker.himani@gmail.com
Register No. G-31062

Shalby Women's Health Clinic

Name:- *Aishwarya*
Chief Complaints:-

Mi

clo-dig pain.

Age-*50yrs*
Date: *11/4/24*
Weight:-
Height:-
OPR NO:-

- Nutritional Assessment:-
- Obese
 - Well Nourished
 - Mild-Moderate Nourished
 - Severely Mal-Nourished

LMP:-

M/H:-

PH - 14/4

O/H :-

4 AMN / 3 F / 1 M | LD before 24yrs / 4u done

P/H:-

F/H

Examination:-

PH - P/AH done. for 10-12yrs (rec-D US)

P/A - soft

Provisional Diagnosis:-

PAP smear not taken

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CIN: L85110GJ2004PLC044667

Treatment & Further Advices:-
(Write in Capital Letters)

Investigaion Advised:-

Rx

Adv

-TAB. CALOLON - (30)
1-0-0.

flup after

1 month

-TAB UPRISE - D₃ - (30)
one wky

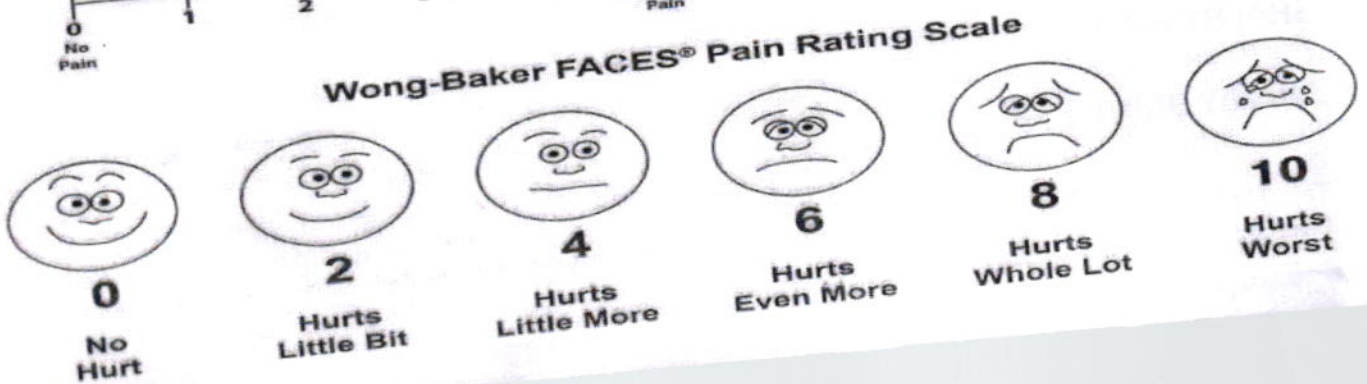
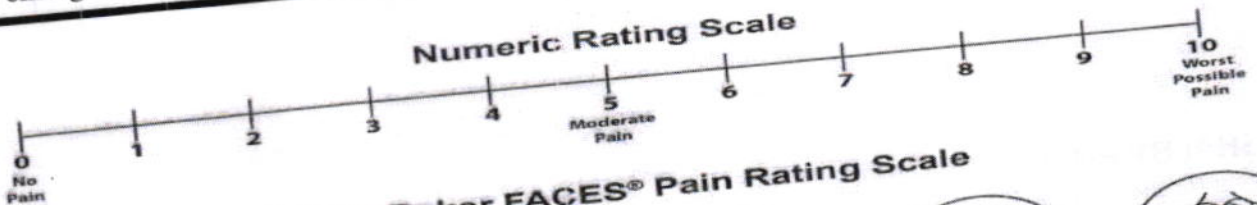
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1 crony - (30)
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Star

Follow Up:

Date:- _____

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



DR. RUJUTA SHELAT

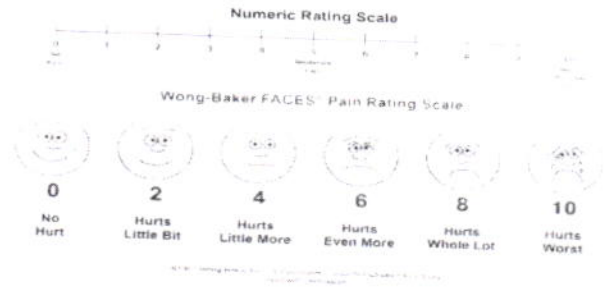
Consultant Ophthalmologist

Reg. No.:- G-48712

Name :- *Getaben G AHIR*

Date:- *11/04/2024*

Chief Complaints:- *Routine Eye Check up*



Pain Assessment:-

Past History:-

Family History:-

Allergy:- *No drug 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*

NCT *18*
18

ON Examination

Ant. Segmenet

Systemic Examination:-

HT:- WT:-

PH Vision:- *6/6*

+ 0.5D - 0.5D plano

Both Eye

ADD + 2.00m.

www.

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CIN: L85110GJ2004PLC044667

NAME
 APR 12 2023 11:32
 D=10
 RX

SPH	CYL	AX
+ 0.50	0.00	
+ 0.25	+0.25	111
+ 0.25	+0.75	111

+ 0.25	+0.25	111

SPH	CYL	AX
+ 0.25	+0.25	12
+ 0.25	+0.50	40
+ 0.25	+0.50	20

- 0.25	+0.25	12

 = 64
 andSeiko.com
 3300K S/N: 76BB0963

Anterior Chamber

Rt. EYE

Lt. EYE

Investigation:-

Background:-

Macula:-

Diagnosis:-

Refractive Error

Treatment:-

Cells

Nutritional Assessment:-

Preventive Care & Counsellings:-

Follow Up ON:-

2 months/see

Signature of the Consultant

[Handwritten Signature]

M.D. (Medicine)
Reg No: G 17770.
Mo: 9825338408
Consultant Physician & Ex. Professor Of Medicine
OPD Days: Monday, Saturday

Shalby MD Physician Clinic

OPR NO:

Patient Name:-

Cr. Itaben Cr. Ahir

Date: 11/11/24

Age / Sex :-

50

Weight:- 57 kg

Chief Complaints:-

Height:- 151 cm

Muscle pain

Nutritional assessment:-

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

Pulse:- 80 bpm

Drug / Food Allergy:-

NAD

BP:- 130/80

Past History :-

SpO2:- 100%

Family History:-

AS }
CVS }
PA } NAD
CNS }

Systemic Examination:-

Provisional Diagnosis:-

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Rx

Tab. Sitason M (30)
50:500

- 2 - ବାକାମୂତ୍ରି

Tab. glimison M, (60)

୧ — ୧
ଗୁଣିତ ୧୫୦ ଗୁଣିତ

Tab. Pregasone M (30)

- ୧ - ୧୫୦ ଗୁଣିତ

Tab. Cardiosol 10mg (30)

- ୧ - ୧୫୦ ଗୁଣିତ

