

ચારુસેટ હોસ્પિટલ, ચાંગા

વર્લ્ડ ક્લાસ મલ્ટી સ્પેશિયાલિટી હોસ્પિટલ

Medi Wheel

તારીખ / Date

01/10/2024

રજીસ્ટ્રેશન નંબર / Registration Number

દર્દીનું નામ / Patient's Name

Aakash S. Veland

સંપર્ક નંબર / Contact Number

હેલ્પ લાઇન

એમ્બ્યુલન્સ માટે સંપર્ક

+91-2697-265502/504

+91-95379 27873

૨૪ કલાક ઈમરજન્સી સંપર્ક

+91-2697-265500

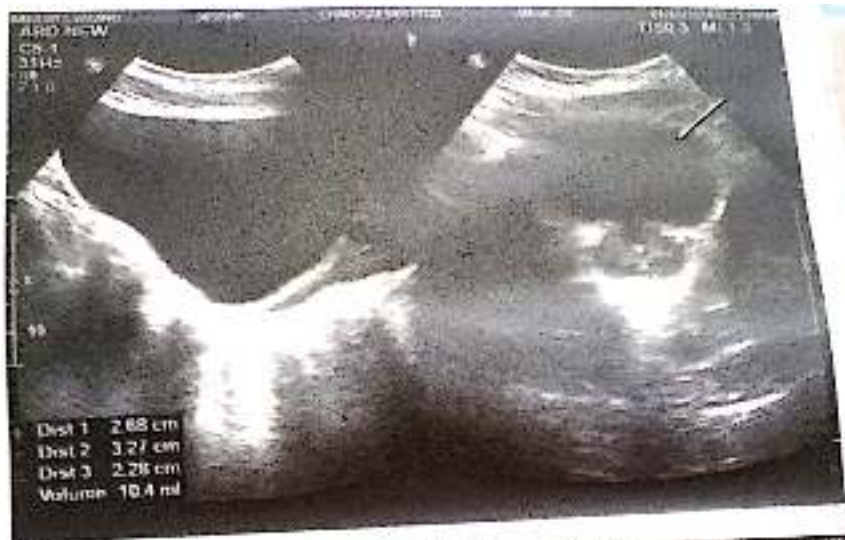
+91-75748 38111

નોંધ : ફરી ખતાવવા આવો ત્યારે આ ફાર્મ અચુક સાથે લાવવી.

SEX REFERRED BY D
 ND M BODY PROFILE
 USG AB

of normal size, paren
 Normal hepatic
 logically distended
 normal with no evider
 venic vein size are 1
 ymel echotexture i
 ce of normal size &
 lliber & no evidenc
 evidence of norma
 ure. No evidence of
 olid or cystic mass l
 evidence of norma
 ure. No evidence of
 olid or cystic mass l
 normal & no evidenc
 ce of normal size &
 s or abnormal bowel

Prostate
 Vol/Wt
 cc/gms.
 1.93 10.4



थे
 २२

i.

कुं

DATE	PATIENT NAME	SEX	REFERRED BY DR	INVESTIGATION
01-10-2024	AAKASH S VALAND	M	BODY PROFILE	UM-TOTAL ABDOMEN USG

USG ABDOMEN report.

Liver: show evidence of normal size, parenchymal echotexture & no evidence of focal solid or cystic mass lesion seen. Normal hepatic vasculature seen with no evidence of intrahepatic biliary dilatation seen.

Gall bladder: is physiologically distended with no evidence of calculus or sludge. Thickness of gall bladder wall is normal with no evidence of pericholecystic fluid collection. CBD, portal vein & splenic vein size are normal.

Spleen: size & parenchymal echotexture is normal with no focal mass lesion seen.

Pancreas: show evidence of normal size & parenchymal echotexture with no evidence of focal mass lesion.

Aorta: show normal caliber & no evidence of paraaortic mass lesion seen.

Right kidney: show evidence of normal size, position, corticomedullary differentiation & parenchymal echotexture. No evidence of obvious calcification or hydronephrosis seen. No evidence of focal solid or cystic mass lesion seen.

Left kidney: show evidence of normal size, position, corticomedullary differentiation & parenchymal echotexture. No evidence of obvious calcification or hydronephrosis seen. No evidence of focal solid or cystic mass lesion seen.

Bladder: walls are normal & no evidence of stone or mass seen.

Prostate: show evidence of normal size & parenchymal echotexture. No evidence of ascitis or abnormal bowel loops seen.

Size cm app

Right Kidney	Left Kidney	Prostate Vol/Wt cc/gms.
9.92x3.28	10.4x4.93	10.4

COMMENTS:

No abnormality detected.

Thanks for reference
DR KIRTI C THAKKAR
M.B.B.S, D.M.R.D

DATE	PATIENT NAME	SEX	REFERRED BY DR	INVESTIGATION
2-08-2024	HIREN D MEHTA	M	SELF	UM-TOTAL ABDOMEN USG

USG ABDOMEN report.

Liver: show evidence of normal size, parenchymal echotexture & no evidence of focal solid or cystic mass lesion seen. Normal hepatic vasculature seen with no evidence of intrahepatic biliary dilatation seen.

Gall bladder is physiologically distended with echogenic shadow of app 0.68 cm suggest possibility of calculus, no sludge. Thickness of gall bladder wall is normal with no evidence of pericholecystic fluid collection.
SD, portal vein & splenic vein size are normal.

Spleen size & parenchymal echotexture is normal with no focal mass lesion seen.
Pancreas show evidence of normal size & parenchymal echotexture with no evidence of focal mass lesion.

Arteries show normal caliber & no evidence of paraaortic mass lesion seen.

Right kidney show evidence of normal size, position, corticomedullary differentiation & parenchymal echotexture. No evidence of obvious calcification or hydronephrosis seen. **Benign cortical cyst of app 1.1 cm in upper pole, 1.68 cm size in mid pole region.**

No evidence of focal solid mass lesion seen.

Left kidney show evidence of normal size, position, corticomedullary differentiation & parenchymal echotexture. No evidence of obvious calcification or hydronephrosis seen. **Fullness of left renal pelvis seen.**
 No evidence of focal solid or cystic mass lesion seen.

Bladder walls are normal & no evidence of stone or mass seen.
Prostate show evidence of normal size & parenchymal echotexture.
 No evidence of ascitis or abnormal bowel loops seen.

size cm app			
Right Kidney	Left Kidney	Prostate	
11.3X4.93	11.0X4.46	Vol/Wt	
		cc/gms	
		12.1	

COMMENTS:

Fullness of left renal pelvis seen.?back pressure changes due to ureter obstruction

Benign cortical cyst of app 1.1 cm in upper pole, 1.68 cm size in mid pole region.

Suggest possibility of gall bladder calculus.

Adv clinical correlation/further evaluation.

Thanks for reference
 DR. KIRIT C THAKAR
 A.S.U.S.D.M.R.D

DATE	PATIENT NAME	SEX	REFERRED BY DR	INVESTIGATION
01-10-2024	AAKASH S VALAND	M	BODY PROFILE	X-RAY

X-ray CHEST PA view.

No evidence of consolidation or infiltration seen involving both lungs.

Costophrenic sinuses are clear.

Vascular shadows are normal on both sides.

Hilar shadows show evidence of normal size, position & opacity.

Heart & aortic shadows show evidence of normal position & size.

Position of domes of diaphragm is normal.

Scoliosis of lower thoracic spine seen.

COMMENTS:

NO EVIDENCE OF ABNORMALITY DETECTED.



For reference
DR NITISH THAKKAR
M.B.B.S.D.M.D

Patient's Name: Aakash Sureshbhai Valand
 Referred by Dr.: Self
 Date: 01/10/2024

Address:

Age: 27 Years Sex: Male

Ref. No.: 372 Case No. 58445


HAEMOGRAM REPORT

TESTS	RESULT	UNITS	REFERENCE RANGE
BLOOD COUNTS:			
Haemoglobin	: 14.8	gm%	[M:14-18,F:12-16]
R.B.C. Count	: 4.58	mill./c.mm	[M:4.5-5.5,F:3.8-5.2]
W.B.C. Count	: 5370	/c.mm	4000-10000
Platelet Count	: 2.72	Lakh/cmm	1.5-4.5
DIFFERENTIAL COUNT:			
Polymorphs	: 54	%	40 - 70
Lymphocytes	: 40	%	20 - 40
Eosinophils	: 01	%	1 - 6
Monocytes	: 05	%	2 - 10
Basophils	: 00	%	0 - 1
E.S.R. (Westergren's Method)			
After 1 Hour	: 06	mm	M-3 to 5; F-4 to 7
Blood Group	: "B" POSITIVE		

BLOOD SUGAR LEVEL (DONE BY MINDRAY BS-240, FULLY AUTOMATED BIOCHEMISTRY ANALYZER)

Test	Result	Unit	Normal Range
Blood Sugar			
Fasting Blood Sugar :	91.1	mg/dl	70 - 110 mg/dl

Pathologist
 Dr NAITIK BHATIA
 (M.B.B.S,D.C.P)


 Pathologist
 Dr.KETAN KAPADIA
 (M.B.B.S,M.D.)

Patient's Name: Aakash Sureshbhai Valand
 Referred by Dr.: Self
 Date: 01/10/2024

Address:

Age: 27 Years Sex: Male

Ref. No.: 372 Case No. 58445

Haemoglobin A1C Estimation (HbA1C)

Sample:	Collected On :	Received On :
HbA1c	: 5.3 %	> 8 : Action Suggested 7 - 8 : Good Control < 7 : Goal 6 - 7 : Near Normal Glycemia < 6 : Non-diabetic Level
Random Blood Glucose	: 105.4 mg/dl	

Comments :-

Hb A1C , also known as Glycosylated Haemoglobin is the most important test for the assessment of long term blood glucose control (also called glycemic control). Hb A1C reflects mean glucose concentration over past 6 - 8 week and provides a much better indication of long term glycemic control than blood glucose determination. Hb A1C is formed by non-enzymatic reaction between glucose & Haemoglobin. This reaction is irreversible & therefore remains unaffected by short term fluctuations in blood glucose levels. Long term complications of diabetes such as Retinopathy (Eye-complications), nephropathy (kidney-complications) & neuropathy (nerve complications) are potentially serious and can lead to blindness, kidney failure, etc. Glycemic control as monitored by Hb A1C measurement is considered most important.

Pathologist
 Dr. NAITIK BHATIA
 (M.B.B.S, D.C.P)


 Pathologist
 Dr. KETAN KAPADIA
 (M.B.B.S, M.D.)



Patient's Name: Aakash Sureshbhai Valand
 Referred by Dr.: Self
 Date: 01/10/2024

Address:

Age: 27 Years Sex: Male

Ref. No.: 372 Case No. 58445

LIPID PROFILE
 (DONE BY MINDRAY BS-240, FULLY AUTOMATED BIOCHEMISTRY ANALYZER)

Test	Result	Unit	Normal Range
Serum Cholesterol	: 165.9	mg/dl	< 200 mg/dL Desirable 200 - 239 mg/dL Boderline High > 240 mg/dL High.
Serum Triglyceride	: 76.3	mg/dl	< 150 mg/dL Normal 150 - 199 mg/dL Boderline High 200 - 499 mg/dL High
S. HDL Cholesterol	: 52.1	mg/dl	Men : >55 Wo : >65 Standred Risk Level Men : 35 - 55 wo : 45-65 Risk Men : <35 wo : <45
S. LDL Cholesterol (calculated)	: 98.54	mg/dl	Optimal < 100 Near optimal 100-129 Border line high 130-159 High 160-189 Very high > 190
S. VLDL Cholesterol	: 15.26	mg/dl	10 to 30
TC/HDL Ratio	: 3.2		4.0 to 6.0 :1.0
LDL/ HDL RATIO	: 1.9		< 3.5
S. LDL Cholesterol (Direct)	: 102.8		Optimal < 100 Near optimal 100-129 Border line high 130-159 High 160-189 Very high > 190

Pathologist
 Dr. NAVTIK BHATIA
 (M.B.B.S, D.C.P)


 Pathologist
 Dr. KETAN KAPADIA
 (M.B.B.S, M.D.)



Age: 27 Years Sex: Male

Patient's Name: Aakash Sureshbhai Valand
Referred by Dr.: Self
Date: 01/10/2024

Address: _____
Ref. No.: 372 Case No. 56445

LIVER FUNCTION TEST

(DONE BY MINDRAY BS-240, FULLY AUTOMATED BIOCHEMISTRY ANALYZER)

TEST	RESULT	UNITS	NORMAL VALUES
Bilirubin:	Total	0.96	mg/dl
	Direct	0.30	mg/dl
	Indirect	0.66	mg/dl
G.P.T. (ALT)		37.3	IU/L
		97.7	IU/L
Alkaline Phosphatase			[0.0 to 40]
		40.0	IU/L
Serum Proteins:	Total	7.5	gm/dl
	Albumin	4.4	gm/dl
	Globulins	3.1	gm/dl
	A/G Ratio	1.4	

Pathologist
Dr. KETAN KAPADIA
(M.B.B.S, M.D.)

Pathologist
Dr. NAIK BHAZIA
(M.B.B.S, D.C.P)

Patient's Name: Aakash Sureshbhai Valand
 Referred by Dr.: Self
 Date: 01/10/2024

Address:

Age: 27 Years Sex: Male

Ref. No.: 372 Case No. 58445

Renal Function Tests

(DONE BY MINDRAY BS-240, FULLY AUTOMATED BIOCHEMISTRY ANALYZER)

Test	Result	Units	Normal Value
Blood Urea Method: Fix Time Kinetic	: 19.4	mg/dl	15 to 40 mg/dl
Blood Urea Nitrogen Method: Fix Time Kinetic	: 9.1	mg/dl	08 to 23 mg/dl
Serum Creatinine Method: Alkaline Picrate	: 0.87	mg/dl	M : 0.9 to 1.5 mg/dl F : 0.8 to 1.2 mg/dl
Serum Uric Acid Method: Mod. Folin & Wu	: 4.97	mg/dl	Men : 2.5 to 7.0 Women: 1.5 to 6.0

Thyroid Function Tests

Test	Result	Unit	Normal Range
Serum T3	: 1.96	ng/ml	[0.69 - 2.15]
Serum T4	: 59.6	ng/ml	[52 - 127]
Serum TSH	: 1.86	MicroIU/ml	[0.30 - 4.5]

Pathologist
 Dr. NAITIK BHATIA
 (M.B.B.S., D.C.P.)


 Pathologist
 Dr. KETAN KAPADIA
 (M.B.B.S., M.D.)

Patient's Name: Aakash Sureshbhai Valand
Referred by Dr.: Self
Date: 01/10/2024

Address:

Age: 27 Years Sex: Male

Ref. No.: 372 Case No. 58445

URINE ANALYSIS

Physical Examination :

Quantity: 20 ml
Colour: Pale Yellow
Appearance: Clear
Odour: Urinoid
Reaction: Acidic
Specific Gravity: 1.020


Chemical Examination :

Albumin: Absent
Sugar: Absent
Bile Salts: Absent
Bile Pigments: Absent
Acetone: Absent
Urobilinogen: Absent

Microscopic Examination :

Pus Cells: 2-3
RBCs: Absent
Epithelial cells: 1-2
Casts: Absent/HPF
Crystals: Absent

Pathologist
Dr. NAITIK BHATIA
(M.B.B.S., D.C.P.)

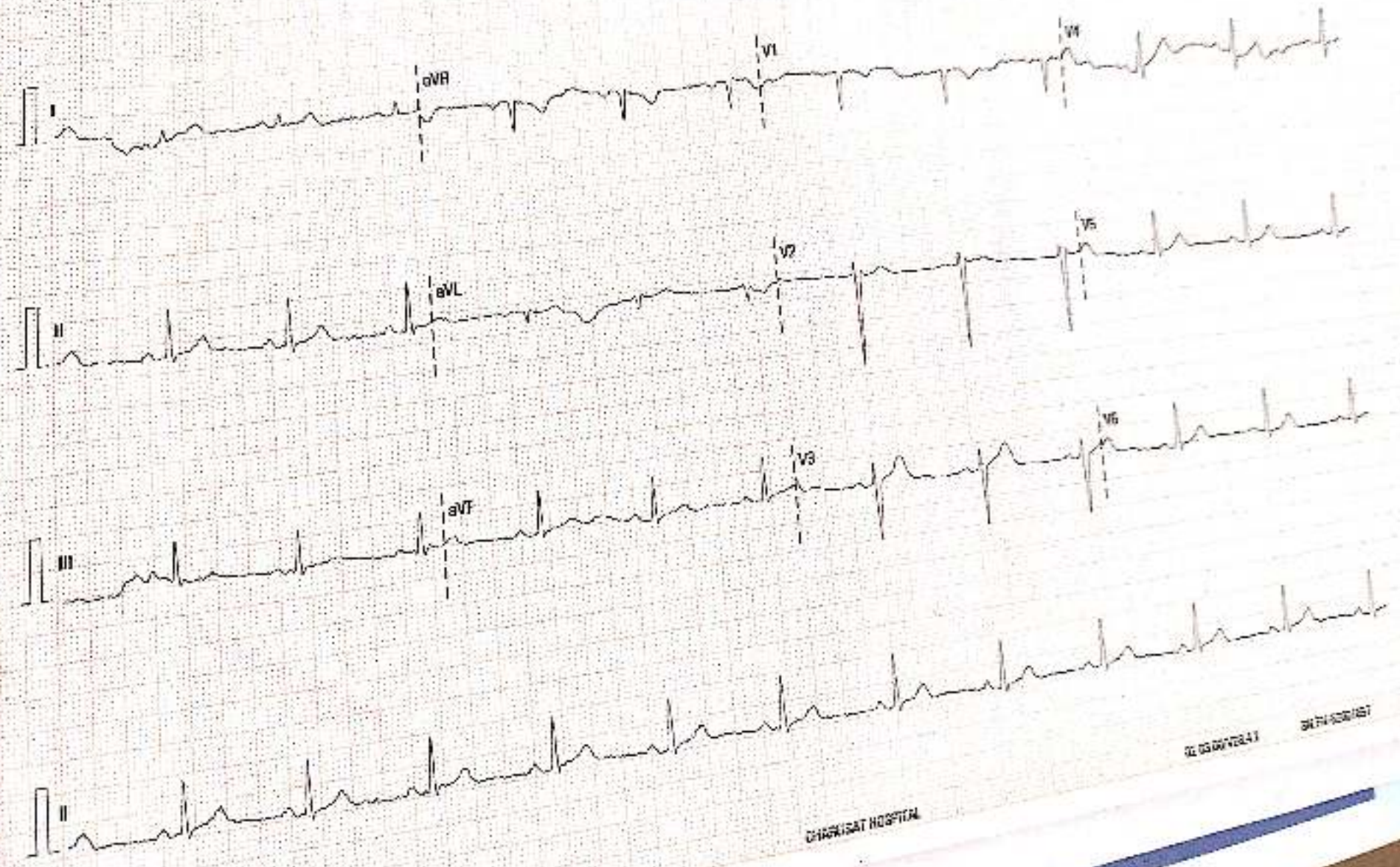

Pathologist
Dr. KETAN KAPADIA
(M.B.B.S., M.D.)

ID: 2024100110015467
Name: Valend, Askash/S
Age: 27 Years
Gender: Male

Heart Rate: 77 bpm
PR Interval: 146 ms
QRS Duration: 81 ms
QT/QTc Interval: 336/351 ms
QTc/ST Axis: 74/67/38 deg
QTc/ST Axis: 74/67/38 deg

Sinus rhythm
Lead(s) unsuitable for analysis: V4

Unsupervised ECG device



60/20 Hz

CHARKISAT HOSPITAL

02 05 00/2024.1
01/24/2024



LALITABEN P. D. PATEL OPD SERVICES

REGISTRATION FORM (OPD)



Dr. Alpesh

Date & Time : 01-10-24

Registration No. : _____

Name : Alpesh S. Valand Contact No. : (M) _____

Age : 27 Sex : M (O) _____

Address : _____

B.P. : 120/80 Pulse : 80/min SpO₂ : 98% on NA

BMI : _____ Height : _____ Weight : _____

OPD-INITIAL ASSESSMENT FORM

Chief Complaints : Can't handle cholesterol

CASE ANALYSIS

Past History : _____

Present History : _____

G/E Vitals : _____

Systemic Examination : _____

FAMILY HISTORY :

- Diabetes
- IHD
- Hypertension
- Others (Specify) : _____

PATIENT'S MEDICAL/OTHER HISTORY :

- Hypertension
- Epilepsy
- Food Allergy
- Drug Allergy
- IHD
- Asthma
- AIDS/HIV
- Pregnancy
- T.B.
- Hepatitis B
- Bleeding Disorder
- Jaundice
- Hepatitis C

HABBITS :

- Smoking
- Alcohol
- Tobacco
- Others (Specify) : _____

Investigation/s Advised : _____

Provisional Diagnosis : _____

Allergy : _____

Nutritional Advice : _____

TREATMENT ADVISED

DATE	DOCTOR'S NOTE	REMARKS
	<p><u>for di Panay</u> Revised NAD No any complaints.</p>	



DENTAL REGISTRATION FORM



Date & Time : 01-10-24

Registration No. : _____

Name : Arushi G. Vaidya
Age : 27
Sex : F

Contact No. : _____

Emergency Contact No. : _____

Address : _____

OPD-INITIAL ASSESSMENT FORM

Chief Complaint : checkup

Family History :

- Diabetes
- Hypertension
- Others (Specify) :
- Habits : Tobacco

- Hypertension
- Diabetes
- Epilepsy
- Bleeding Disorder
- Smoking

Medical/Other History :

- IHD
- Asthma
- AIDS/HIV
- Pregnancy
- Other (Specify) :
- T.B.
- Hepatitis B
- Food Allergy
- Others (Specify) :

- Jaundice
- Hepatitis C
- Drug Allergy

संमति पत्र

..... डॉक्टरने माझे सार्वजनिक स्थानावरील संपूर्ण आणु पुं. या सार्वजनिक स्थानावरील पूर्णपणे मर्यादा, इत्यादी-गेरजावटा, दवाणी के उपदेशावली आड खरार आले सार्वजनिक स्थानावरील संपूर्णपणे मर्यादा विषे मले तका माझे संबंधीचोने समजूती आपेल छे. में डॉक्टरने माझे शारीरिक स्थिति तथा तेने लगती दवा विसे संपूर्ण माहिती घेतले छे. जो कोरपण संयोगोमां सार्वजनिक स्थानावरील अचूरी छेडीश के अनियमित रहींश तो तेनी निष्पत्ता माडे डॉक्टर के याउसेट होस्पिटल जायनदार नही. तथा सार्वजनिक स्थानावरील डिपोजिट घेते अपायेत रकम मेणववा माडे दडदार रहींश नही. या संमति छे स्वच्छाणे कोरपण दवाले कर आणु पुं.

.....
दही / सगानी सही

CONSENT

..... hereby request and authorize Doctor to perform the required dental treatment. Doctor has informed me and my relatives about the treatment plan in details with success and failure of the treatment with all expenditure, possible complications from medicines or local anesthesia. I have informed the Doctor about my medical history and drug history in details. If in any circumstances, I am irregular or leave the treatment in between, the doctor and CHARUSAT Hospital will not be responsible for the same and treatment charges will not be returned back. I give my consent to proceed with my dental treatment.

.....
Patient's / Relative's Sign.

Investigation Advised : _____

Final Diagnosis : Calculus & Caries

Treatment Plan : _____

Date : 01/10/24

Name of Doctor : Dr. Anushree

Time : _____
Signature : [Signature]

CONFIDENTIAL

આડમેટ માર્શી

OPHTHALMIC REGISTRATION FORM



Reg. No. : _____
Date: 01-10-21

Age: 27/M

Patient's Name: Arvind S. Valand

Mobile No.: _____

Address: _____
Telephone No.: _____

Occupation: Working Professional
Type of work in daily routine: Driving / Watching TV / Computer / Reading / Nil
History / Complaints of: Diminution of Vision / Pain / Watering / Redness / Eyeache / Headache / Itching / Stickiness / Swelling / Irritation / Burning / F. B. Sensation / Photophobia / Diplopia / Squinting / Blackout / Floaters / Flashes / Injury / Nil

Duration: _____
Eye involve: RE / LE / BE
Ophthalmic History: Surgery / Laser / FFA / Oct / Glaucoma / RP / Corneal Opacity / Injury / Amblyopia / Treatment: _____ / RE / LE / BE Nil

Family History: Cataract / Glaucoma / _____ / RE / LE / BE Nil
Systemic: DM / HT / IHU / COPD / PROSTATE / WROID / ALLERGY / SMOKING / ALCOHOL

EYE DETAILS:
I/A with PH: 6/6 RE, 6/6 LE
IOP: 13 mmHg — Nil
OWN GLASS: Plano — Nil
AR: Plano — -0.50 DS

GLASS PRESCRIPTION: Refraction & fogging BE Plano 6/6; etc

Dis	R. E. V/A			L. E. V/A		
	SPH.	CYL.	AXIS	SPH.	CYL.	AXIS
	Plano	—	—	Plano	—	—
Nr.						
Comp						

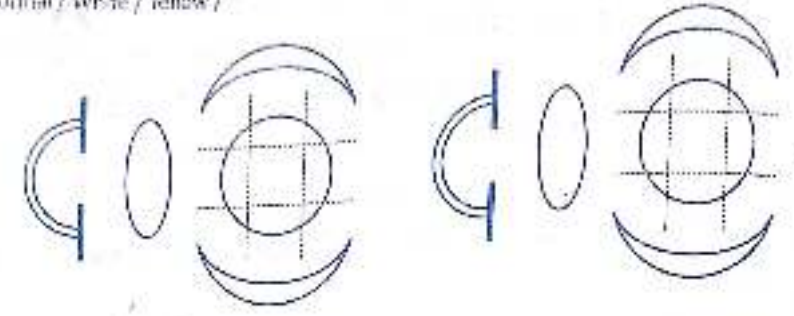
RE 6/6
LE 6/6

Bifocal / Distant / Near only / Constant / Progressive / Photocromatic

Remark: _____
Signature: [Signature]

- Lid: (N) Swelling / Stylo / Chalazion / Entropion / Ectropion / Blepharitis / Meibomitis
- Lacrimat: (N) Swelling / Patent / Partially Patent / Block / Punctal Stenosis
- Conjunctiva: (N) Chemosis / Congestion / Pterygium / Pingecula
- Cornea: (N) Clear / Vascular / Arcus Opacity / Adh. Leucoma / Epi Defect / Ulcer / Keratitis / Scl.
- A/C: (N) Shallow / Deep / Hypopyon / Hyphaema
- Pupil: (N) Non / Semi Full / Dilated / Synchia / Ecto Pbi / B / Irregular / Synchia / Atrophy / Membrane
- Cataract: (N) Cortical / Post Polar / Post subcapsular / Nuclear : Grey / Yellow / Brown / Black / Mature / Pseudophakia / Aphakia
- Ant Vit: (N) Cells Tobacco Dusting /
- Glow: (N) Normal / White / Yellow /

- (N) Swelling / Style / Chalazion / Entropion / Ectropion / Blepharitis / Meibomitis
- (N) Swelling / Patent / Partially Patent / Punctal Stenosis
- (N) Chemosis / Congestion / Pterygium / Pingecula
- (N) Clear / Vascular / Arcus Opacity / Adh. Leucoma / Epi Defect / Ulcer / Keratitis / Scl.
- (N) Shallow / Deep / Hypopyon / Hyphaema
- (N) Non / Semi Full / Dilated / Synchia / Ecto Pbi / B / Irregular / Synchia / Atrophy / Membrane
- (N) Cortical / Post Polar / Post subcapsular / Nuclear : Grey / Yellow / Brown / Black / Mature / Pseudophakia / Aphakia
- (N) Cells Tobacco Dusting /
- (N) Normal / White / Yellow /



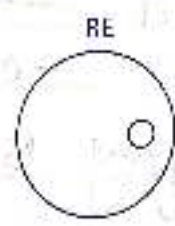
SPECIAL NOTE

FUNDS

- Media: (N) Clear / VH / Vitritis / Asteroid / Synechia
- Disc: (N) WH / Pallor / Edema / Cupping / NVD
- R/V: (N) NAI / BRVO / BRAO / CRVO / CRAI
- (N) Hemi CRVO / CSCR / ERN / CME / CSME
- Macula: (N) FRN / DULL / CSCR / ERN / CME / CSME
- (N) MH / LCH / CNV / DRUSEN / GA / PME / HGE / ATROPHY / PIGMENT / I/T / ESL DAIFS
- Cataract: (N) N / MYOPIA / TEES / PIGMENT / HGE / CWS / EXUDATES / HGE / VH / SUBHYALOID / IERA / RD / CD / COLOBOMA / BUCKLE / LASER / CRYO / MARKS

OS

- Clear / VH / Vitritis / Asteroid / Synechia
- (N) WH / Pallor / Edema / Cupping
- (N) NAD / BRVO / BRAO / CRVO / CRAI
- (N) Hemi CRVO / CSCR / ERN / CME / CSME
- FRN / DULL / CSCR / ERN / CME / CSME
- (N) MH / LCH / CNV / DRUSEN / GA / PME / HGE / ATROPHY / PIGMENT / I/T / ESL DAIFS
- (N) N / MYOPIA / TEES / PIGMENT / HGE / EXUDATES / HGE / VH / SUBHYALOID / IERA / RD / CD / COLOBOMA / BUCKLE / LASER / CRYO / MARKS



REMARK / INVESTIGATION :

GONIO / DM

COLOR VISION
FIELD OF VISION
FFA / OCT
BSCAN / ASCAN

Normal X
Normal

Normal X
Normal

K READING K1 _____ @ _____
K2 _____ @ _____

K1 _____ @ _____
K2 _____ @ _____

IDL POWER