



ભારત સરકાર
GOVERNMENT OF INDIA



પ્રજાપતિ મધુબેન અમૃતબાઈ

Prajapati Madhuben Amrutbhai

જન્મજુ વર્ષ / Year of Birth : 1970

સ્ત્રી / Female

8501 3270 2877



અધિકાર - સામાજ્ય આણસનો અધિકાર



Ahmedabad, Gujarat, India

10-N, Kashiwala Complex, Opposite Mukтажivan X-Ray Lab,
Bhairavnath Rd, near Old Railway Crossing, Maninagar,
Ahmedabad, Gujarat 380008, India

Lat N 22° 59' 42.3204"

Long E 72° 36' 49.3524"

10/07/21 10:21 AM



PRAMUKH
MULTI SPECIALITY
HOSPITAL

Above Punjab National Bank,
Nr. Railway Crossing, Maninagar (E)
Ahmedabad - 380 008.

MEDICAL EXAMINATION

DATE :- 10 July 2021.

NAME :- Madhuben A. Prajapati

AGE /SEX :- 50 YRS / Female.

O/E :

T: (N)

BP: 100/80 mmHg.

P: 74/min.

RS: BNE ⊕

SPO2: 98% on R.A.

CNS: Conlon

CVS: S1 ⊕ S2 ⊕

P/A: Soft.

ADV:

Height: 148 cms

Weight: 61 kgs

BMI: 27.8

Eye Exam.: Vision Normal.

Ear Exam.: Hearing Normal.

B.A. Panchal



મહાત્મા ગાંધી

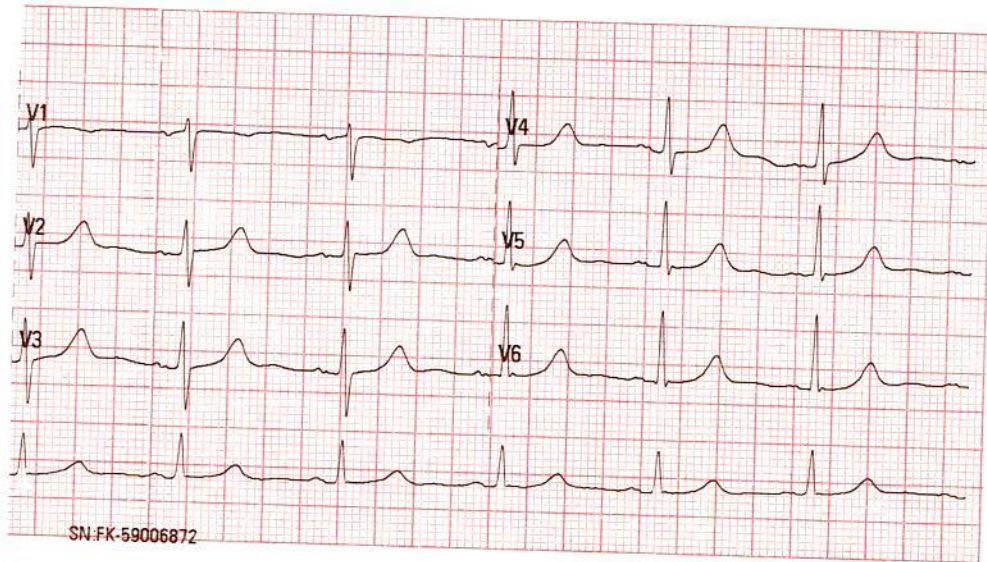
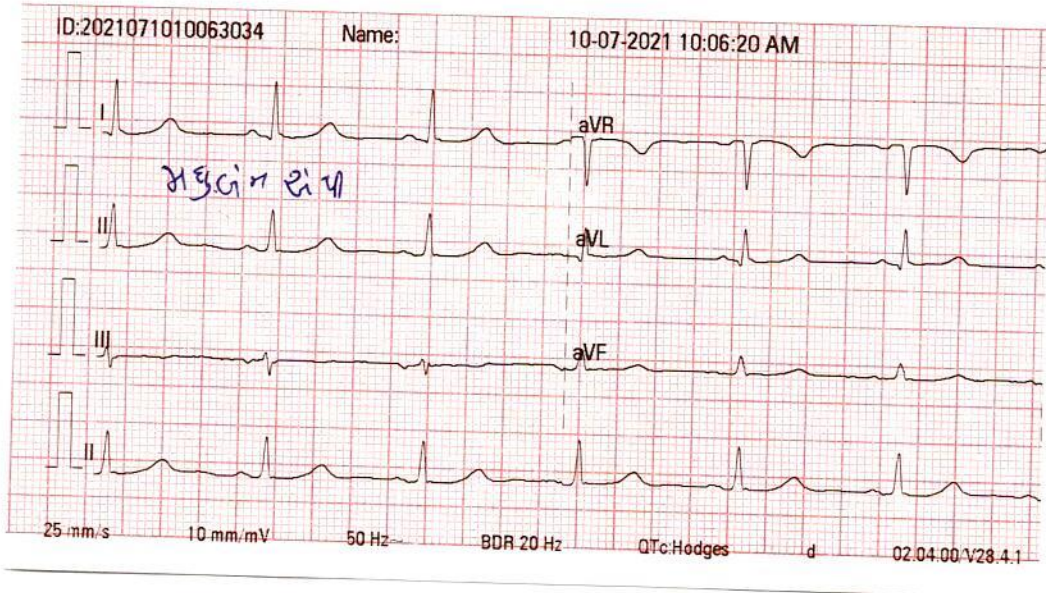


MADHUBGN A. PRAJAPATI

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10 July 2021.



NSR WNL

DR. KAMLESH N. SHAH
M.D. (FICA-USA)
Reg. No. G-1345
PRAMUKH MULTISPECIALITY HOSPITAL
MANINAGAR, AHMEDABAD.

HELP LINE No. 722791927



Facility :

- ECG
- 2D ECHO
- TMT
- Holter Monitoring
- 24 Hours Ambulatory BP Monitoring (ABPM)
- Health Checkup

2D-ECHO WITH COLOUR DOPPLER

PATIENT NAME: MADHUBEN PRAJAPATI
REF. BY : PRAMUKH HOSPITAL

AGE: Y/F
DATE: 10-Jul-21

Observation:

01. NORMAL LV SIZE ,NORMAL LV FUNCTION,LVEF :60%
02. NO RWMA AT REST,
03. NO LVH
04. RA , RV NORMAL.NORMAL RV FUNCTION
05. ALL VALVES ARE STRUCTURALLY NORMAL.
06. NO AR,NO MR,TRIVIAL TR. NO PAH
07. REDUCED LV COMPLIANCE.GRADE I DIA. DYSFUNCTION
08. IVS AND IAS ARE INTACT. IVC REACTIVE
09. NO EVIDENCE OF PE / VEGETATION/THROMBUS/EFFUSION

➤ Measurements:

AO: 29 MM	LV DIASTOLE: 45 MM
LA : 34 MM	LV SYSTOLE: 31 MM
RVSP: 20 MMHG	IVS/PW: 11.5/11.1 MM
AOVP : 1.5 M/S	PVP :1.2 M/S
MVIS : 0.6/0.9 M/S	

➤ **Conclusion**

- NORMAL LV SIZE & NORMAL LV FUNCTION ,LVEF:60%
- NO RWMA AT REST,
- NO AR.NO MR.TRIVIAL TR NO PAH RVSP:20MMHG
- REDUCED LV COMPLIANCE.GRADE I DIA. DYSFUNCTION
- NO E/O PE/EFFUSION

NORMAL 2D ECHO DOES NOT RULE OUT CAD. CORRELATE CLINICALLY

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M.B.B.S., PGDCC
Clinical Cardiologist
8866551708

Dr. Niraj Koradia
M.B.B.S., PGDCC
Clinical Cardiologist
8734935368

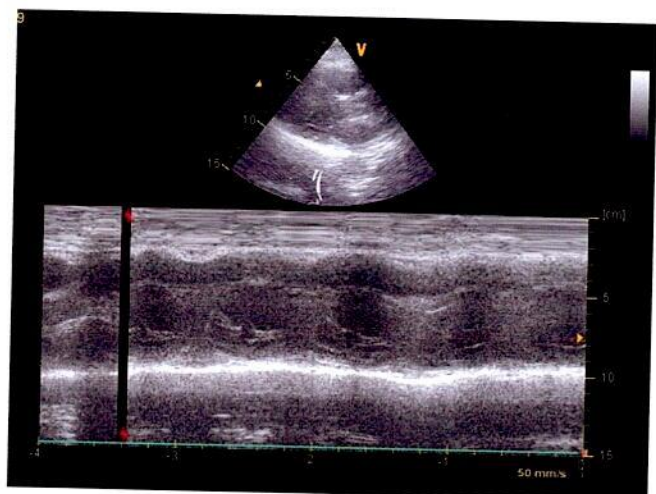
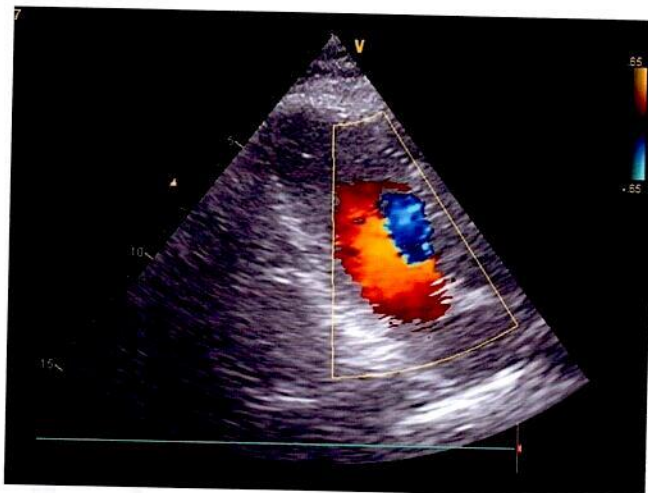
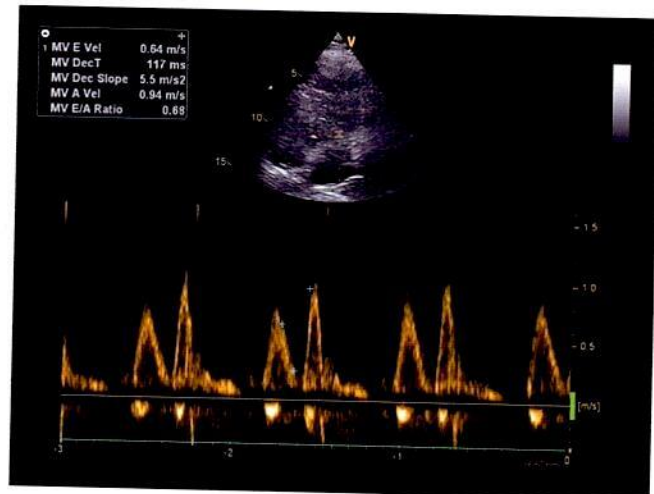
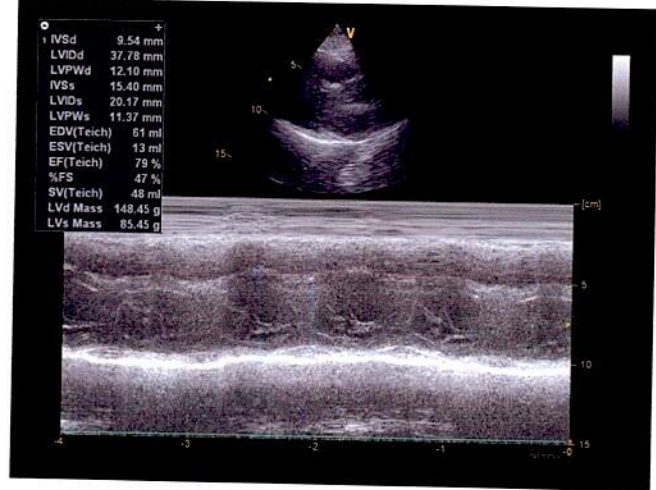
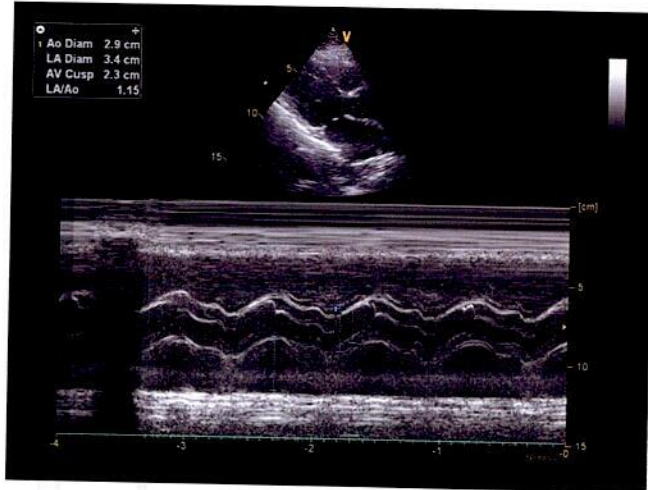
Dr. Ankit Katariya
M.D., PGDCC
Clinical Cardiologist
8905956146



Name: madhuben

Id: MADHU06_06845

Date: 10/07/2021





Sanya
DIAGNOSTICS

■ MRI ■ CT Scan ■ Sonography ■ Colour Doppler ■ Digital X-Ray ■ 2D - Echo ■ Mammography

NAME: MADHUBEN PRAJAPATI

F/ .YRS

DATE: 10/07/2021

REF BY: PRAMUKH HOSPITAL

X RAY CHEST PA VIEW

Both lung fields under vision appears normal.

No evidence of koch's lesion or consolidation is seen.

Both CP angles are clear.

Cardiac size is within normal limits.

Bony thoracic cage and both domes of diaphragm appears normal.

DR. SANDIP MEVADA
M.D.

DR. ANIRUDDHSINH RAHEVAR
DMRD DNB

DR. RUCHIT SHAH
M.D.

DR. AMISHA PATEL
M.D.



NAME: MADHUBEN PRAJAPATI
REF BY: PRAMUKH HOSPITAL

AGE: 58 YRS
DATE: 10/07/2021

U.S.G. OF ABDOMEN WITH KUB

Liver: appears normal in size & shows normal echopattern. No focal lesion is seen. No dilated IHBR is seen. Portal vein and CBD appear normal in course and caliber.

Gall bladder: is moderately distended & appears normal. No calculus, sludge or mass is seen. Gall bladder wall thickness appears normal.

Pancreas: appears normal in size & echopattern. No focal lesion is seen.

Spleen: appears normal in size and shows normal echotexture. No focal lesion is seen. Splenic vein appears normal.

Both Kidneys appear normal in size, position and echopattern.
C-M differentiation is well preserved on either side.
No calculus or hydronephrosis on either side.
Cortical thickness appears normal on both sides.
No focal lesion is seen on either side.

Urinary bladder is moderately distended & appears normal. No calculus, internal echoes or mass is seen. Urinary bladder wall thickness appears normal.

No adnexal mass is seen on either side.

Para-aortic region appears normal.

No abdominal lymphadenopathy is seen.

Bowel loops appear normal in caliber & show normal peristalsis.

No abnormal dilatation of bowel loops or wall thickening is seen.

No fluid collection or lump formation is seen in RIF.

No ascites is seen.

IMPRESSION:

NO SIGNIFICANT ABNORMALITY IDENTIFIED.

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Ahmedabad - 380 008.

Patient Name : Madhuben A Prajapati
Sample No.. : 6580
Reffered : C/o. Bank Of Baroda

Age/Sex : 50 Years/Female
Registration On:10/07/2021/11:06
Approved On :10/07/2021 14:36

BLOOD GROUP

<u>Test</u>	<u>Result</u>
BLOOD GROUP	: " B "
RH GROUP	: POSITIVE.

PATHOLOGIST
Dr.Sathishkumar Patel
M.D.,Patho
Reg No :G-6486



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Approved On :10/07/2021 15:39

LIPID PROFILE

Sample :- SERUM

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Normal Range</u>
S. Cholesterol:	199.69	mg/dl	Desirable : < 200 Borderline High : 200 - 239 High : > 240
Serum Triglycerides:	133.05	mg/dl	Normal : Normal < 150 Borderline : 150 - 199 High : > 200
HDL Cholesterol:	55.79	mg/dl	40 - 60 mg/dl
Serum LDL Cholesterol: (Calculated)	117.29	mg/dl	Up to 150
Serum VLDL Cholesterol: (Calculated)	26.61	mg/dl	Up to 35
LDLC/HDLC Ratio: (Calculated)	2.1	mg/dl	Up to 3.4
Cholesterol/HDLC Ratio: (Calculated)	3.58	mg/dl	Up to 5.0
Total Lipid: (Calculated)	655.82	mg/dl	400 - 1000 mg/dl



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BLOOD SUGAR LEVEL

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Normal Range</u>
Fasting Blood Sugar:	71.1	mg/dl	70-110

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Glycosylated HB (HBA1C)

<u>Test</u>	<u>Result</u>	<u>Normal Range</u>
HBA1C:	5.74 %	Normal: <= 5.6 Prediabetes: 5.7-6.4 Diabetes: >= 6.5 <i>Diabetes Control Criteria :</i> 6 -7 : Near Normal Glycemia < 7 : Goal 7 - 8 : Good Control > 8 : Action Suggested

Mean Blood Glucose: 118.03 mg/dl

Criteria for the diagnosis of diabetes

1. HbA1c \geq 6.5 *
Or
2. Fasting plasma glucose >126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.
Or
3. Two hour plasma glucose \geq 200mg/dL during an oral glucose tolerance test by using a glucose load containing equivalent of 75 gm anhydrous glucose dissolved in water.
Or.
4. In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose \geq 200 mg/dL. *In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by retesting. American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34;S11.

Limitation of HbA1c

- 1) In patients with Hb variants even analytically correct results do not reflect the same level of glycemic control that would be expected in patients with normal population. 2) Any cause of shortened erythrocyte survival or decreased mean erythrocyte survival or decreased mean erythrocyte age eg. hemolytic diseases, pregnancy, significant recent/chronic blood loss etc. will reduce exposure of RBC to glucose with consequent decrease in HbA1c values. 3) Glycated HbF is not detected by this assay and hence specimens containing high HbF ($>10\%$) may result in lower HbA1c values than expected.

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URINE EXAMINATION

PHYSICAL :

Colour - **Pale Yellow**
Deposits - **Absent**
Transparency - **Clear**
Reaction - **Acidic**
Sp. Gravity - **1.002**

CHEMICAL :

Albumin - **Absent**
Sugar - **Absent**
Bile Salts - **Absent**
Bile Pigments - **Absent**

MICROSCOPIC: (After centrifugation at 2000 r.p.m. for 5 minutes)

Pus Cells - **0 - 1 /h.p.f.**
Red Cells - **Not seen /h.p.f.**
Epithelial Cells - **2 - 3 /h.p.f.**
Casts - **Not seen/l.p.f.**
Crystals - **Not seen**
Amorphous - **Not seen**

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LIVER FUNCTION TESTS

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Normal Range</u>
S. Bilirubin (Total):	0.95	mg/dl	upto 1.2 mg/dl
S. Bilirubin (Direct):	0.18	mg/dl	upto 0.2 mg/dl
S. Bilirubin (Indirect):	0.77	mg/dl	up to 1.0 mg/dl
SGPT:	27.40	U/L	up to 42 IU/L
SGOT:	25.71	U/L	up to 40 U/L
GGT:	18.10	U/L	09 - 36 U/L
Total Proteins:	7.54	g/dl	6.0 - 8.3 g/dl
Albumin:	4.62	g/dl	3.5 - 5.2 g/dl
Globulins:	2.92	g/dl	2.4 - 3.7 g/dl
AGRATIO:	1.582		
S.Alkaline Phosphatase:	101	U/L	35 - 104 U/L

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RENAL FUNCTION

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Normal Range</u>
Sr. Creatinine:	0.65	mg/dl	0.6 - 1.4 mg/dl
Urea:	25.1	mg/dl	10 - 50 mg/dl
S. Uric Acid:	3.79	mg/dl	2.4 - 6.2 mg/dl
Blood Urea Nitrogen: (Calculated)	11.73	mg/dl	08 - 23 mg/dl
Bun/Creat Ratio: (Calculated)	18.04		

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HAEMOGRAM REPORT

Sample Type :-EDTA

<u>TESTS</u>	<u>RESULT</u>	<u>UNITS</u>	<u>REFERENCE RANGE</u>
BLOOD COUNTS:			
Haemoglobin	11.2	g/dL	11 to 16 g/dL
R.B.C. Count	3.25	mill./c.mm	4.5-6.5 mill./cmm
W.B.C. Count	5600	/c.mm	4,000 - 11,000/cmm
Platelet Count	358000		1,40,000 - 4,50,000 /cmm
DIFFERENTIAL COUNT:			
Polymorphs	59	%	60 - 70
Lymphocytes	37	%	20 - 40
Eosoniphils	02	%	1 - 4
Monocytes	02	%	2 - 6
Basophils	00	%	0 - 1
BLOOD INDICES:			
P.C.V.	34.5	%	38 - 44
M.C.V.	106	fl	80 - 96
M.C.H.	34.5	pg	27 - 31
M.C.H.C.	32.5	g/dl	32 - 36

SMEAR STUDY:

RBC **Normochromic normocytic red cells.**
Platelet **Adequate**

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E.S.R. (Western Grain Method)

At 1Hour **05 mm**

01 to 12 mm/Hour

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Thyroid Functions

<u>Test</u>	<u>Result</u>	<u>Normal Range</u>
T3-Triodothyronine	: 1.23 ng/ml	0.6 - 1.80 ng/ml
T4-Thyroxine	: 8.4 mcg/dl	4.5 - 10.9 mcg/dl
TSH Thyroid Stimulating Hormone	: 2.02 microIU/ml	0.35 - 5.55 microIU/ml

Comments :

COMMENTS :

TSH levels may be affected by acute illness and drugs like doapamine and gluco corticoids.

Low or undetectable TSH is suggestive of Grave~s disease

TSH between 5.5 to 15.0 with normal T3 T4 indicates impaired thyroid hormone or subclinical hypothyroidism or normal T3 T4 with slightly low TSH suggests subclinical Hyperthyroidism.

TSH suppression does not reflect severity of hyperthyroidism therefore , measurement of FT3 ,FT4 is important.

FreeT3 is first hormone to increase in early Hyperthyroidism.

Only TSH level can prove to be misleading in patients on treatment. Therefore FreeT3 , FreeT4 along with TSH should be checked.

During pregnancy clinically T3 T4 can be high and TSH can be slightly low