



OPD ASSESSMENT FORM

sunshine
GLOBAL HOSPITALS
health & happiness... always!

Name Mr. Ambik Age Sex 32/m MR.No. 5127727

Doctor Dr. Hardik Shroff Date 23-09-23

Ht : _____ Wt : _____ Temp : _____ Pulse : _____ BP : _____

SPO2 : _____ Post of walk SPO2 : _____

Chief Complaints :

Drug / Food Allergy :

No complaints

Prior Medication Reviewed : Yes No

On examination : BE - Ant. seg NAD Past History :

R G 6
L G 6
dig Fundus (centered) R-NAD

Provisional Diagnosis :

Nil opthalmic

Treatment and further Advices :
(Write in Capital Letters)

Rx

Nutritional Assessment :

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

Investigation advised :

Dr. Hardik Shroff

DOMS, DNB (Ophthalmology)
Regd. No. G-28902

SUNSHINE GLOBAL HOSPITAL

Piplod, SURAT.
Signature

Follow Up : Call Date : _____

In case of emergency Please report to Emergency Department of Hospital OR
Call : 75748 49465, 0261-4111000




MR No. : S127727
Patient Name : Mr. Ankit Jagdishbhai Prajapati
Ref By : Dr. Hospital A Doctor
Collection Date : 23/09/2023 9:16AM
Age : 32 Y Sex : Male
Report Date : 23/09/2023 11:35AM

HAEMATOLOGY

Parameter	Result	Units	Normal Range
CBC with ESR			
HAEMOGLOBIN	14.9	gm/dl	13.0 - 17.0
PCV	44.9	%	40 - 50
RBC COUNT	5.47	mill/cmm	4.5 - 5.5
HCT	82.1	fl	76 - 96
MCH	27.2	pg	26 - 32
MCHC	33.2	%	32 - 36
RDW	12.1	%	11 - 15
PLATELET COUNT	3.13	lacs/cmm	1.5 - 4.5
WBC COUNT	6170	/cmm	4000 - 11000
ESR	07	mm/hr	0 - 10
DIFFERENTIAL WBC COUNT			
NEUTROPHIL	50	%	40 - 70
LYMPHOCYTES	39	%	20 - 40
EOSINOPHILS	02	%	1 - 6
MONOCYTES	09	%	2 - 11
BASOPHILS	00	%	0 - 2
PERIPHERAL SMEAR			
RBC MORPHOLOGY	Normochromic		
	Normocytic		
WBC MORPHOLOGY	Within Normal Range		
PLATELET ON SMEAR	Adequate		
HEMOPARASITES	Not Seen		

SYSMEX XN-550

***** End Report *****


Dr. Shobha Choksi
MD, DCP (Pathology)

Reg. No.: G-9074

Surat:
23/09/2023 11:35AM
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MR No. : S127727	Collection Date : 23/09/2023 9:16AM
Patient Name : Mr. Ankit Jagdishbhai Prajapati	Age : 32 Y Sex : Male
Ref By : Dr. Hospital A Doctor	Report Date : 23/09/2023 11:29AM

HAEMATOLOGY

Parameter	Result	Normal Range
BLOOD GROUP & RH FACTOR		
BLOOD GROUP	"A"	
RH FACTOR	POSITIVE	

CLINICAL CHEMISTRY

THYROID FUNCTION TEST [TFT]


TOTAL T3 (CLIA)	1.44	ng/ml	0.846 - 2.02
TOTAL T4 (CLIA)	8.39	ug/dl	5.1 - 14.0
TSH (CLIA)	3.45	uIU/ml	0.2 - 4.5

Note:-

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 (freeT4). Additionally the hypothalamic tripeptide, thyrotropin releasing hormone (TSH) 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 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.

***** End Report *****


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Patient Name : Mr. Ankit Jagdishbhai Prajapati	Age : 32 Y Sex : Male
Ref By : Dr. Hospital A Doctor	Report Date : 23/09/2023 11:30AM

BIOCHEMISTRY

Parameter	Result	Units	Normal Range
HbA1C [GLYCOSYLATED HEAMOGLOBIN]			
HbA1C	11.0 ✓	%	Non-Diabetic level: <6 Good Control: 6 - 7 Poor Control: 7 - 8 Action Suggested > 8
MEAN BLOOD GLUCOSE	269	mg/dl	

The test is done on Cobas Integra 400plus-Turbidimetric Inhibition ImmunoAssay

Note:- Criteria for the diagnosis of diabetes HbA1c $\geq 6.5\%$

- HbA1c is important test for the assessment of long term blood glucose control (also called glycemcic control).
- HbA1C reflects mean glucose concentration over pas 6-8 weeks and provides a much better indication of long term glycemcic control than blood glucose determination.
- HbA1C is formed by non-enzymatic reaction between glucose and Hb. This reaction is irreversible and therefor remains unaffected by short term fluctuations in blood glucose levels.
- Long term complications of diabetes such as retinopathy,nephropathy, and neuropathy are potentially serious and can lead to blindness kidney failure etc.
- Genetic Variants (Hb-S trait,Hb-C trait) elevated fetal haemoglobin & chemically modified derivatives of haemoglobin (eg carbamylated Hb in patients with renal failure) can affect the accuracy of HbA1C measurement.

FASTING BLOOD SUGAR (FBS)

FASTING BLOOD GLUCOSE (Hexokinase)	234	mg/dl	74 - 110
FASTING URINE GLUCOSE	Present(++++)		
FASTING URINE KETONE	Absent		

***** End Report *****

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Patient Name : Mr. Ankit Jagdishbhai Prajapati	Age : 32 Y Sex : Male
Ref By : Dr. Hospital A Doctor	Report Date : 23/09/2023 11:31AM

BIOCHEMISTRY

Parameter	Result	Units	Normal Range
LIPID PROFILE			
SERUM CHOLESTEROL CHOD PAP	196	mg/dl	50 - 200
HDL CHOLESTEROL Direct	27	mg/dl	40 - 60
LDL CHOLESTEROL Direct	83.2	mg/dl	0 - 100
SERUM TRIGLYCERIDE GPO PAP	432	mg/dl	50 - 150
LDL Calc	86.4	mg/dl	0 - 30
CHOLESTEROL / HDL RATIO	7.26		0 - 5
LDL / HDL RATIO	3.08		0 - 3

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment.
- Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.
- Details on test interpretation available from the lab.

TEST	NEAR OPTIMAL (Moderate Risk)	BORDER LINE (Risk)	HIGH (Risk)	VERY HIGH
CHOLESTROL	160-199	200-239	240-279	280
HDL	50-59	40-49	< 40	
LDL	100-129	130-159	160-190	>190
TRIGLYCERIDES	150-169	170-199	240-499	>500
CHO/HDL RATIO	3.3-4.4	4.4-11.0	>11.0	
LDL/HDL RATIO	0.5-3.0	3.0-6.0	>6.0	

***** End Report *****

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Ref By	: Dr. Hospital A Doctor	Report Date	: 23/09/2023 11:32AM

BIOCHEMISTRY

Parameter	Result	Units	Normal Range
LIVER FUNCTION TEST			
ALKALINE PHOSPHATASE (IFCC)	85	U/L	35 - 130
BILIRUBIN TOTAL Diazo	0.6	mg/dl	0.0 - 1.2
BILIRUBIN DIRECT Diazo	0.3	mg/dl	0.0 - 0.4
BILIRUBIN INDIRECT (Calc)	0.3	mg/dl	0.0 - 0.8
ALT (IFCC)	100	U/L	5 - 41
SGOT (IFCC)	55	U/L	5 - 40
SERUM TOTAL PROTEIN Biuret	7.1	gm/dl	6.6 - 8.7
SERUM ALBUMIN BCG	4.8	gm/dl	3.5 - 5.2
SERUM GLOBULIN Calc	2.3	gm/dl	1.5 - 3.5
SERUM A/G RATIO Calc	2.09	gm/dl	1.5 - 2.5
SERUM CREATININE			
SERUM CREATININE (JAFEE)	0.8	mg/dl	0.5 - 1.2
SERUM URIC ACID			
SERUM URIC ACID (Uricase)	3.5	mg/dl	3.4 - 7.0
BUN [BLOOD UREA NITROGEN]			
BUN	11.6	mg/dl	8 - 23

***** End Report *****

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Ref By	: Dr. Hospital A Doctor	Report Date	: 23/09/2023 11:33AM

BIOCHEMISTRY

Parameter	Result	Units	Normal Range
ALBUMIN-CREATININE RATIO			
URINE ALBUMIN/MICROALBUMIN (Immunoturbidimetry)	54.1	mg/L	
URINE CREATININE (JAFFE)	254.7	mg/dl	
ALBUMIN-CREATININE RATIO (Calculated)	21.2	mg/gm	Normal: <30; Microalbuminuria: 30-299; Clinical Albuminuria: >300

***** End Report *****


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CLINICAL PATHOLOGY

Parameter	Result	Normal Range
URINE ROUTINE & MICROSCOPIC EXAMINATION		
TYPE OF SPECIMEN - URINE	Random	
PHYSICAL EXAMINATION		
QUANTITY	40	ml
COLOUR	Pale Yellow	
APPEARANCE	Sl. Turbid	
REACTION (pH)	6.0	
SPECIFIC GRAVITY	1.030	
CHEMICAL EXAMINATION		
PROTEIN	Absent	
GLUCOSE	Absent	
KETONE	Absent	
BILE SALT	Absent	
BILE PIGMENT	Absent	
OCCULT BLOOD	Absent	
NITRITE	Absent	
MICROSCOPIC EXAMINATION		
WBC	5-6	/hpf
EPITHELIAL CELLS	1-2	/hpf
BC	Absent	/hpf
CASTS	Absent	
CRYSTALS	Absent	
BACTERIA	Absent	
YEAST CELLS	Absent	

***** End Report *****

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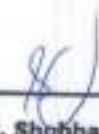


MR No.	: S127727	Collection Date	: 23/09/2023 9:16AM
Patient Name	: Mr. Ankit Jagdishbhai Prajapati	Age	: 32 Y Sex : Male
Ref By	: Dr. Hospital A Doctor	Report Date	: 23/09/2023 12:56 PM

BIOCHEMISTRY

Parameter	Result	Units	Normal Range
POST PRANDIAL BLOOD GLUCOSE [PPBS]			
POST PRANDIAL BLOOD GLUCOSE (Hexokinase)	307	mg/dl	100 - 140
POST PRANDIAL URINE GLUCOSE	SNR		
POST PRANDIAL URINE KETONE	SNR		

***** End Report *****


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PAT. NAME : Ankit Prajapati	Date : 23/09/2023
REF. DOCTOR : Hosp. Dr.	AGE : 32 Yrs / M
INV. : USG Abdomen & Pelvis	MR NO. : S127727

Findings:

Liver is normal in size, shape and shows mild increase in parenchymal echopattern. No e/o any focal or diffuse lesion noted. Intrahepatic biliary radicals are normal.

Gall bladder is distended and appears normal. No e/o calculus, sludge or mass lesion is seen. CBD and Portal Vein appears normal in size and calibre.

Pancreas appears normal in size and shows normal echopattern to the extent assessed. Spleen appears normal in size, shape and homogenous echopattern.

Both kidneys appear normal in size, shape and echopattern. The corticomedullary differentiation is well maintained. No e/o any calculus or hydronephrosis is seen.

Aorta and para-aortic regions appears normal. No e/o any lymphadenopathy. Urinary bladder appears well distended and normal. Prostate appears normal in size, shape and echopattern. No e/o free fluid in abdomen / pelvis.

IMPRESSION:

- **Grade I fatty liver.**

Dr. Pratik R
Consultant Radiologist

Transcribed By: Asha

Page: 1 out of 1
Date & Time of report: 23/09/2023 - 02:29 PM

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PAT. NAME : Ankit Prajapati	Date : 23/09/2023
REF. DOCTOR : Hosp. Dr.	AGE : 32 Yrs / M
INV. : Radiograph of Chest PA	MR NO. : S127727

Clinical Details: HC

Observation:

- Both the lung fields appears normal.
- Both costophrenic angles appear clear.
- Both the hila appears normal.
- Trachea appears in midline.
- Cardiac size and other mediastinal shadows appears normal.
- Both domes of diaphragm appear normal.
- Bony thorax appears normal.


Dr. Pratik R
Consultant Radiologist

Transcribed By: Asha

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Date & Time of report: 23/09/2023 – 02:26 PM

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TABULAR SUMMARY REPORT

32 years

32 years

32 years

Caucasian

Male

BRUCE

Max HR 171bpm

90% of max predicted 183bpm

Maximum workload: 10.4 METS

Reason for Termination:

Comments:

Referred by:
Test ind:

Phase Name

Stage Name

Time in Stage

Speed (mph)

Grade (%)

Workload (METS)

HR (bpm)

BP (mmHg)

RPP (x100)

PRETEST
EXERCISE

SUPINE
STAGE 1
STAGE 2
STAGE 3
STAGE 4

1:55
3:00
3:00
3:00
0:14
4:10

0.6
1.7
2.5
3.4
4.2
**

0.0
10.0
12.0
14.0
16.0
17.0

1.3
4.6
7.0
10.1
10.4
1.0

85
128
144
169
171
110

118
202
254
251
198

RECOVERY

RECOVERY

TMT is negative for inducible ischemia

Technician:

Unconfirmed

MAC55 010B

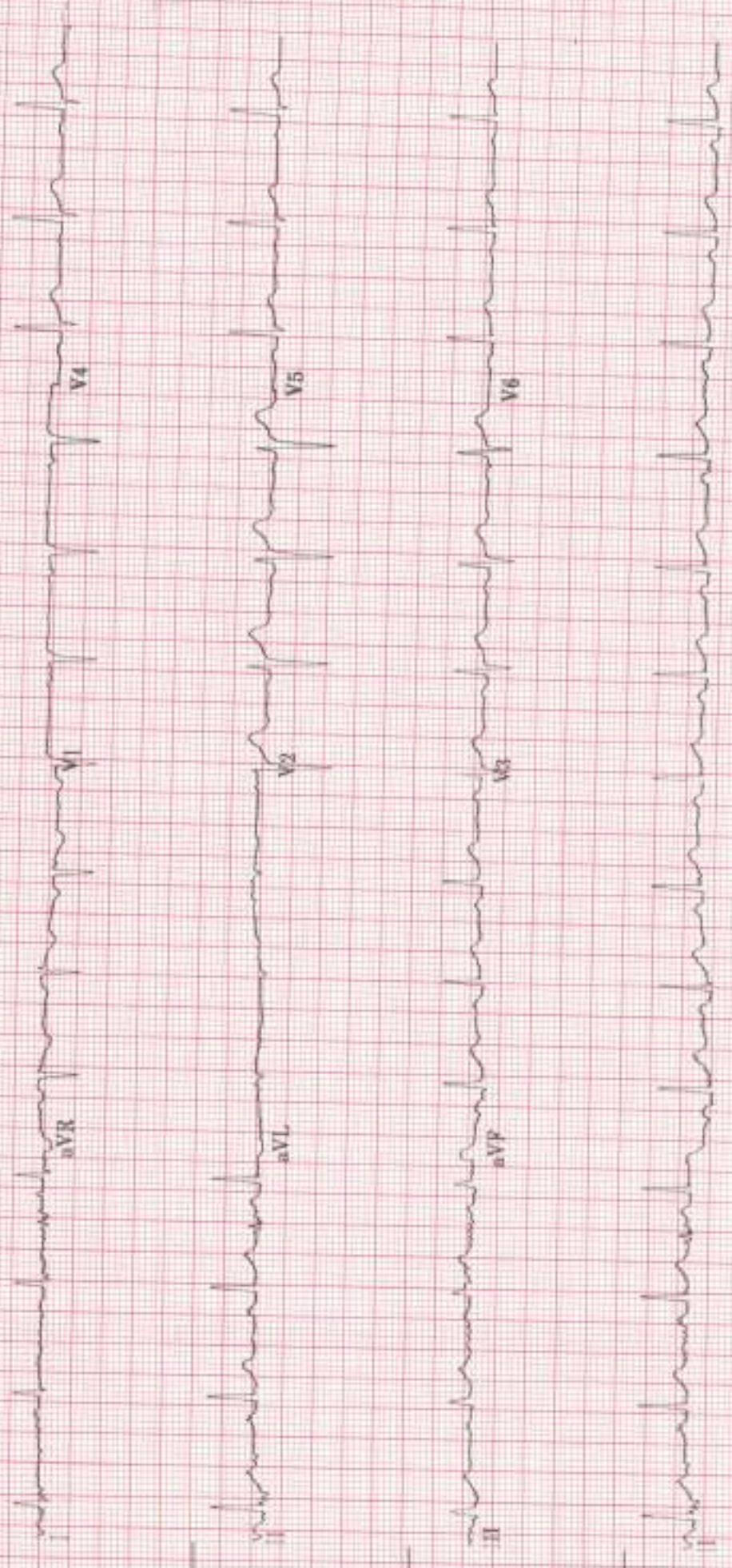
0004

ID: S127727
Visit
23-Sep-2023
10:38:04

85bpm
BP: 139/88

PRETEST
SUPINE
1:35

BRUCK
**mph
**g



40 Hz 25.0 mm/s 10.0 mm/mV

A-H-S-50Hz HR 46

4 by 2.5s + 1 rhythm lead

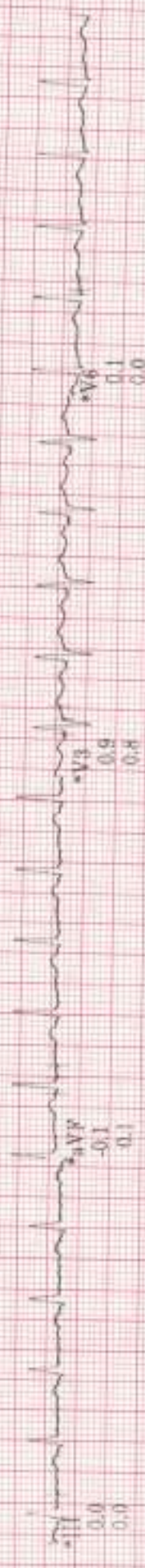
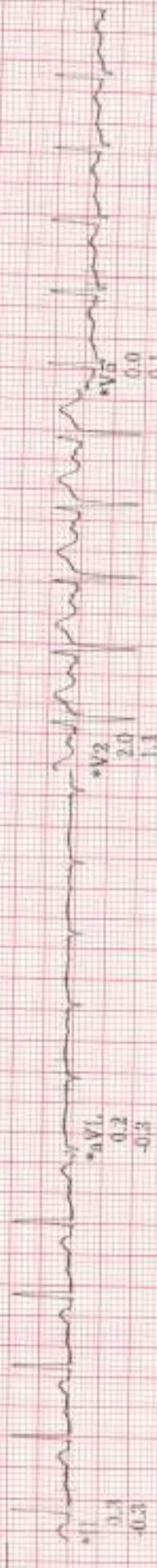
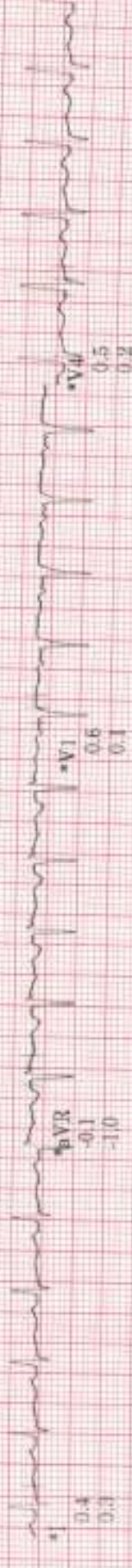
MAC55 010B

ID: S127727
Misc
23-Sep-2023
10:41:23

EXERCISE
STAGE 1
3:00
128bpm
BRUCE
1.7mph
10.0%

ST @ 10mm/mV
80ms postd

Lead
ST(mm)
Slope(mV/s)



Raw Rhythm

40 Hz 25.0 mm/s 10.0 mm/mV A-H-S 50Hz HR 46

* Computer Synthesized Rhythm

MAC55 D10B

II

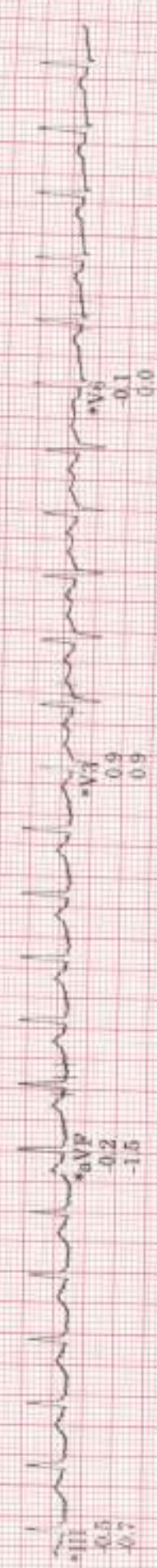
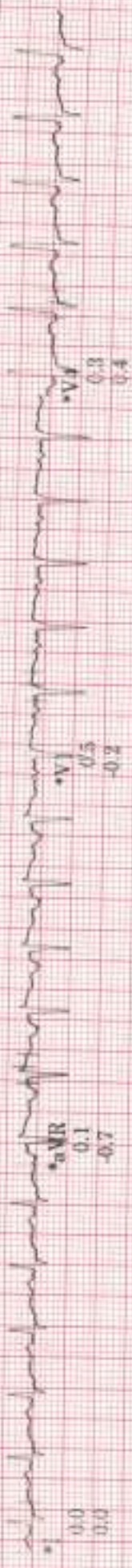
ID: S127727
Visit:
23-Sep-2023
10:44:23

144bpm
BP: 140/90
ST @ 10mm/mV
80ms post

BRUCE
2.5mph
12.0%

EXERCISE
STAGE 2
6:00

Lead
ST(mm)
Slope(mV/s)



Raw Rhythm

40 Hz 25.0 mm/s 10.0 mm/mV

A-H-S 50Hz HR 46

* Computer Synthesized Rhythm

MAC55 010B

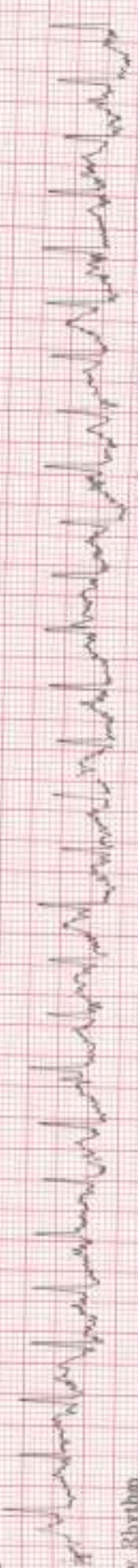
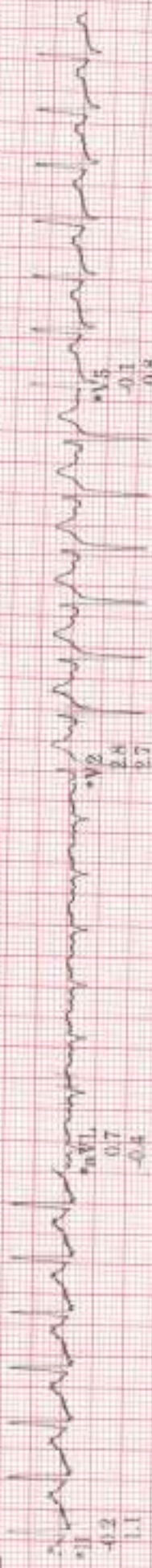
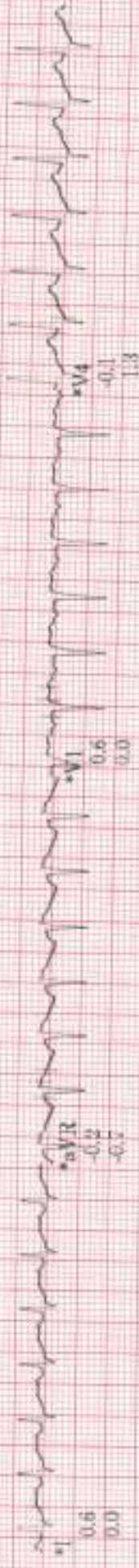
5

ID: 8127727
Visit:
23-Sep-2023
10:47:25

168bpm
BP: 150/90
ST @ 10mm/mV
80ms postJ

BRUCE
3.4mph
14.0%

Lead
ST (mm)
Slope (mV/s)



Raw Rhythm

40 Hz 25.0 mm/s 10.0 mm/mV A-H-S-50Hz HR 46

Computer Synthesized Rhythm

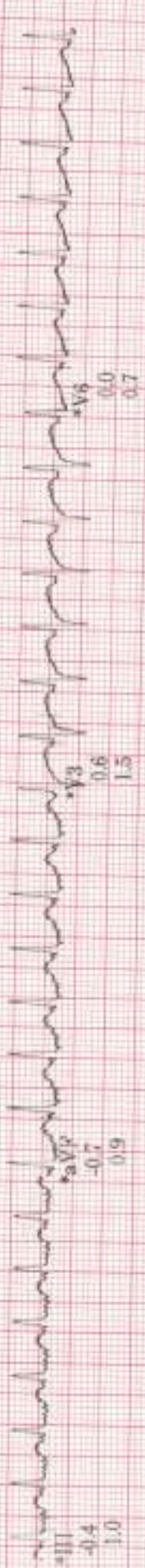
MAC35 010B 5

ID: 8127727
Visit
23 Sep 2023
10:57:40

EXERCISE STAGE 4
9:14
BRUCE
4.2mph
15.0%

171bpm
BP: 150/90
ST @ 10mm/mV
80ms postJ

Lead
ST (mm)
Slope (mV/s)



Raw Rhythm

40 Hz 25.0 mm/s 10.0 mm/mV A-B-S-50Hz HR 46

MAC65 010B

Computer Synthesized Rhythm

ID: S127720
Visit
23 Sep 2023
10:59:39

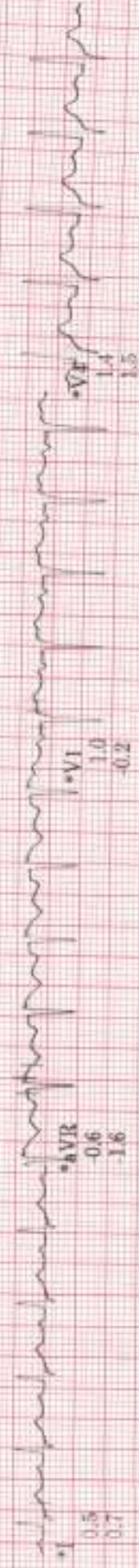
BRUCE
** *mph
** *%

RECOVERY
RECOVERY
2:00

127bpm
BP: 187/98

ST @ 10mm/mV
80ms post

Lead
ST (mm)
Slope (mV/s)



*aVR
-0.6
-1.6

*aVL
1.0
-0.2

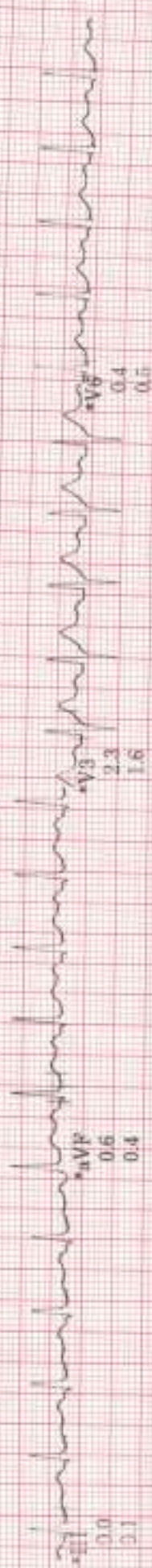
*aVF
1.4
1.5



*aVL
0.2
0.2

*aV3
4.4
2.6

*aV3
0.7
0.9



*aVF
0.6
0.4

*aV3
2.3
1.6

*aV3
0.4
0.5



Low Rhythm

40 Hz 25.0 mm/s 10.0 mm/mV A-H-S-50Hz HR 46

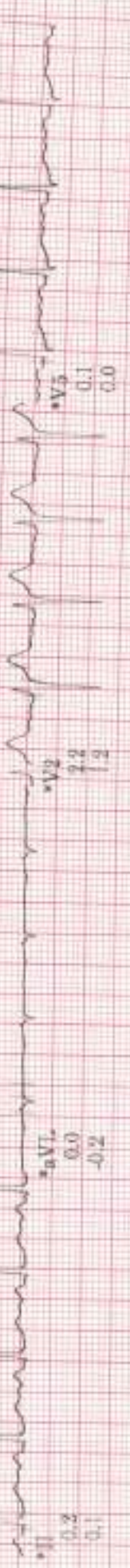
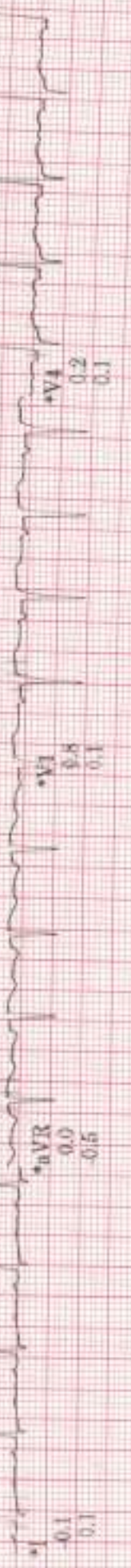
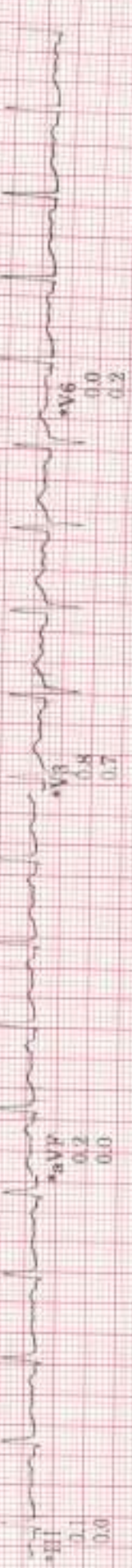
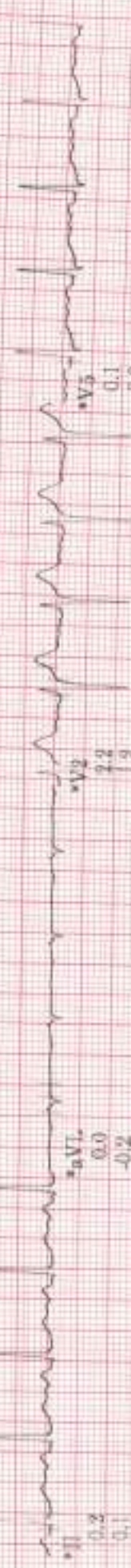
* Computer Synthesized Rhythm

D: 8127727
Visit
23-Sep-2023
10:51:39

RECOVERY
RECOVERY
110bpm
BP: 180/98
4:00
** *mph
** *%

ST @ 10mm/mV
80ms postd

Lead
ST (mm)
Slope (mV/s)



Raw Rhythm

40 Hz 25.0 mm/s 10.0 mm/mV A-H-S 50Hz HR 46

* Computer Synthesized Rhythm

MAC55 010B

2

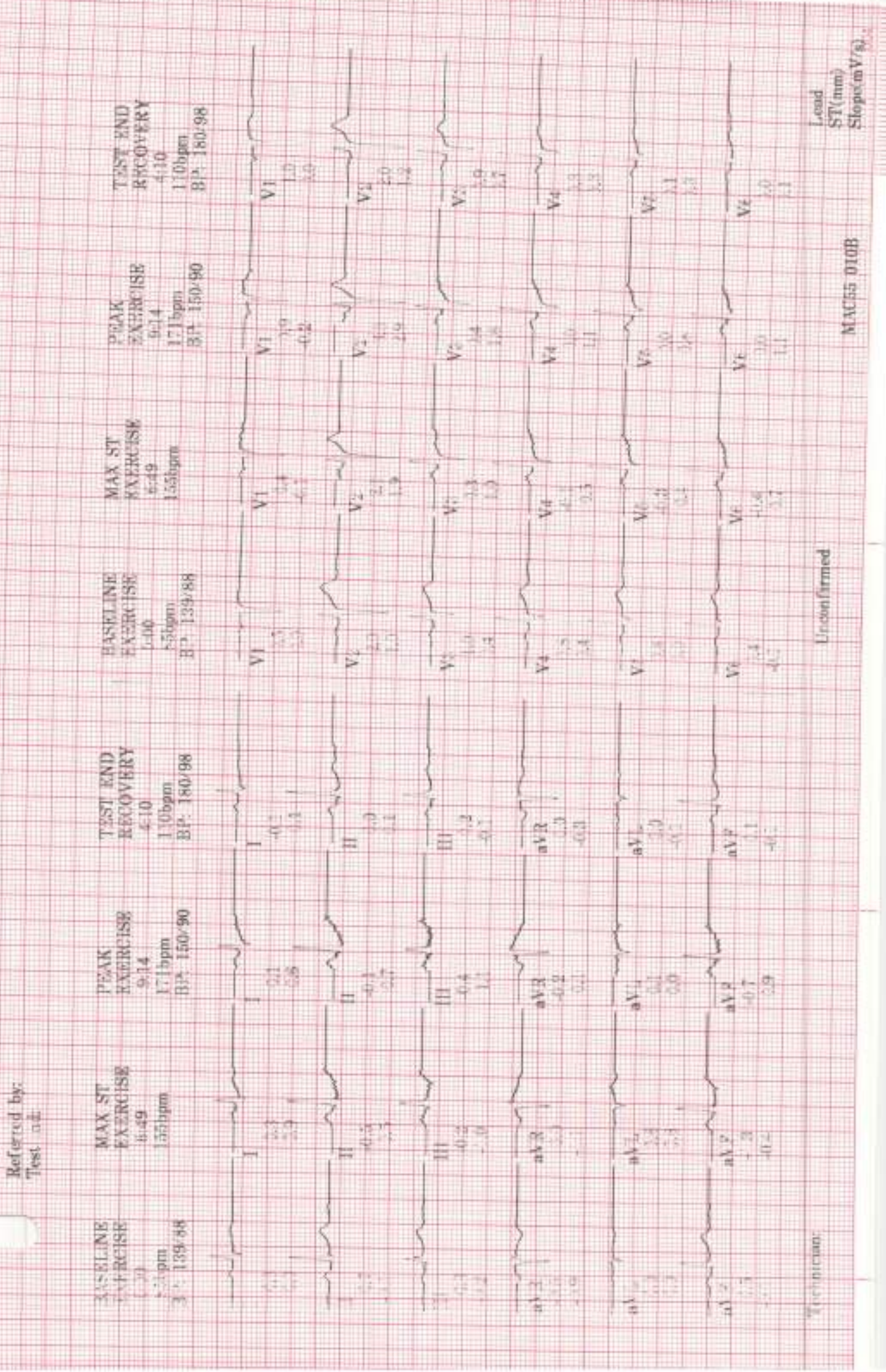
SELECTED MEDIAN REPORT

ID: S127727
 Age: 35 years
 Race: Caucasian
 Sex: Male
 Date: 21 Sep 2023
 Time: 08:30
 Referred by: [Redacted]
 Test n.t.

BRUC-3
 Max HR: 171bpm 90% of max predicted 188bpm
 Max EP: 157%
 Reasor for Termination:
 Comments:

at Exercise time: 9:14
 Max ST EXERCISE: 171bpm
 Maximum workload: 10.4 METS
 TEST END RECOVERY: 4:10
 BP: 180/98

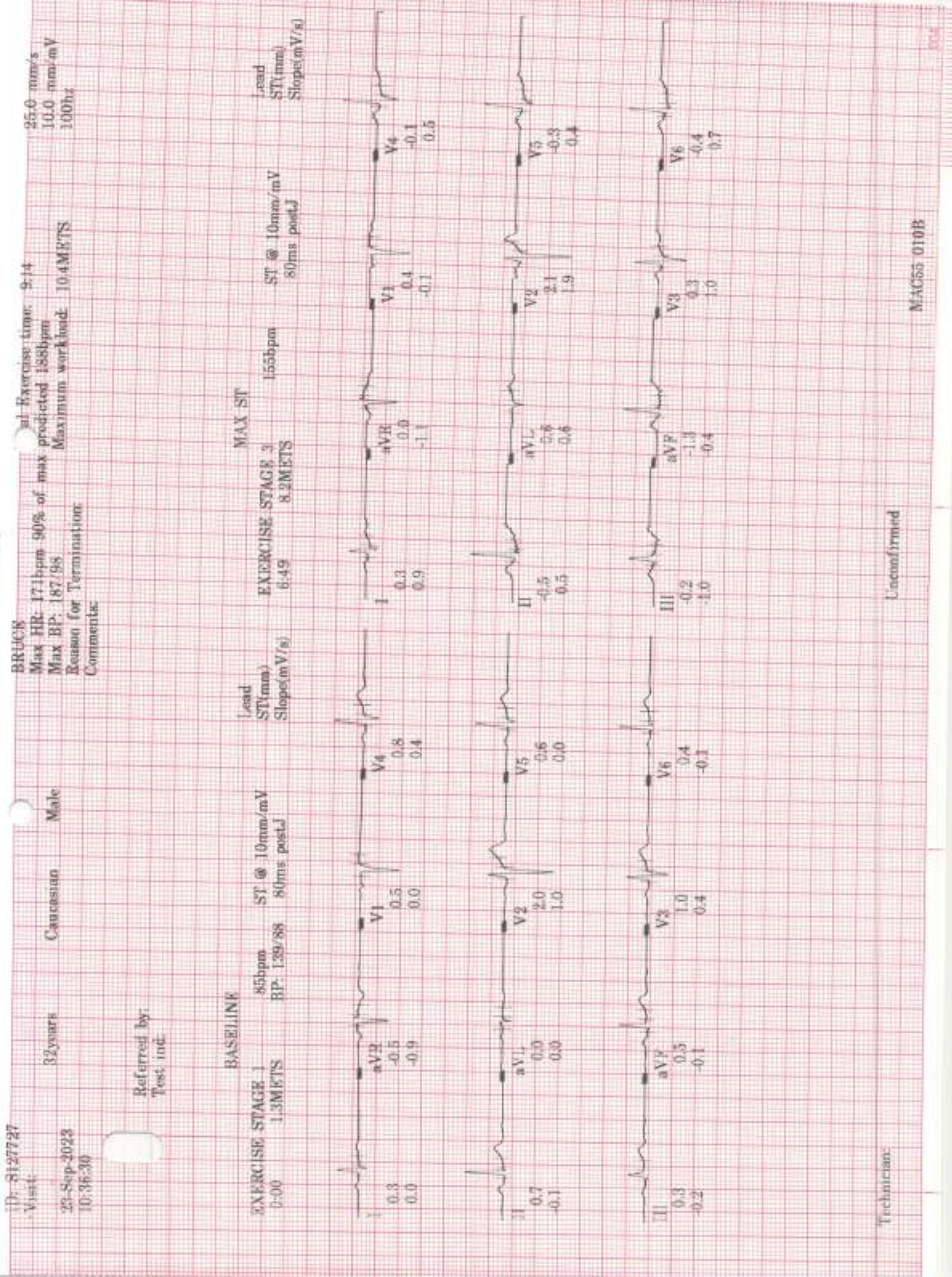
15.0 mm/s
 50.0 mm/mV
 100hz



BASELINE EXERCISE: 6:49, 155bpm, BP: 139/88
 PEAK EXERCISE: 9:14, 171bpm, BP: 150/90
 TEST END RECOVERY: 4:10, 110bpm, BP: 180/98
 MAX ST EXERCISE: 6:49, 155bpm, BP: 139/88
 PEAK EXERCISE: 9:14, 171bpm, BP: 150/90
 TEST END RECOVERY: 4:10, 110bpm, BP: 180/98

Technician: [Redacted] Unconfirmed
 MAC55 010B Lead ST(mm) Slope(mV/s)

GRADED EXERCISE SUMMARY



BRUCE
 Max HR: 171bpm 90% of max predicted 188bpm
 Max BP: 187/98
 Reason for Termination:
 Comments:

32 years
 Caucasian
 Male
 Referred by:
 Test ind:

ID: 8127727
 Visit:
 25-Sep-2023
 10:36:30

25.0 mm/s
 10.0 mm/mV
 100Hz

Exercise time: 9:14
 Maximum workload: 10.4 METS

MAC55 010B
 Unconfirmed
 Technician:

ID: S12727

SAMPLE CARDIAC CYCLES

Visit:

23-Sep-2023
 10:36:30

PRETEST
 SUPINE
 1:56
 85bpm
 BP: 139/88
 1.0METS

EXERCISE
 STAGE 1
 6:00
 85bpm
 BP: 139/88
 1.3METS

EXERCISE
 STAGE 1
 8:00
 121bpm
 BP: 139/88
 4.6METS

EXERCISE
 STAGE 1
 9:00
 128bpm
 4.6METS

EXERCISE
 STAGE 2
 4:00
 127bpm
 BP: 140/90
 5.8METS

EXERCISE
 STAGE 2
 5:00
 140bpm
 BP: 140/90
 7.0METS

BRUCE

ST @ 10mm/mV

50ms postd

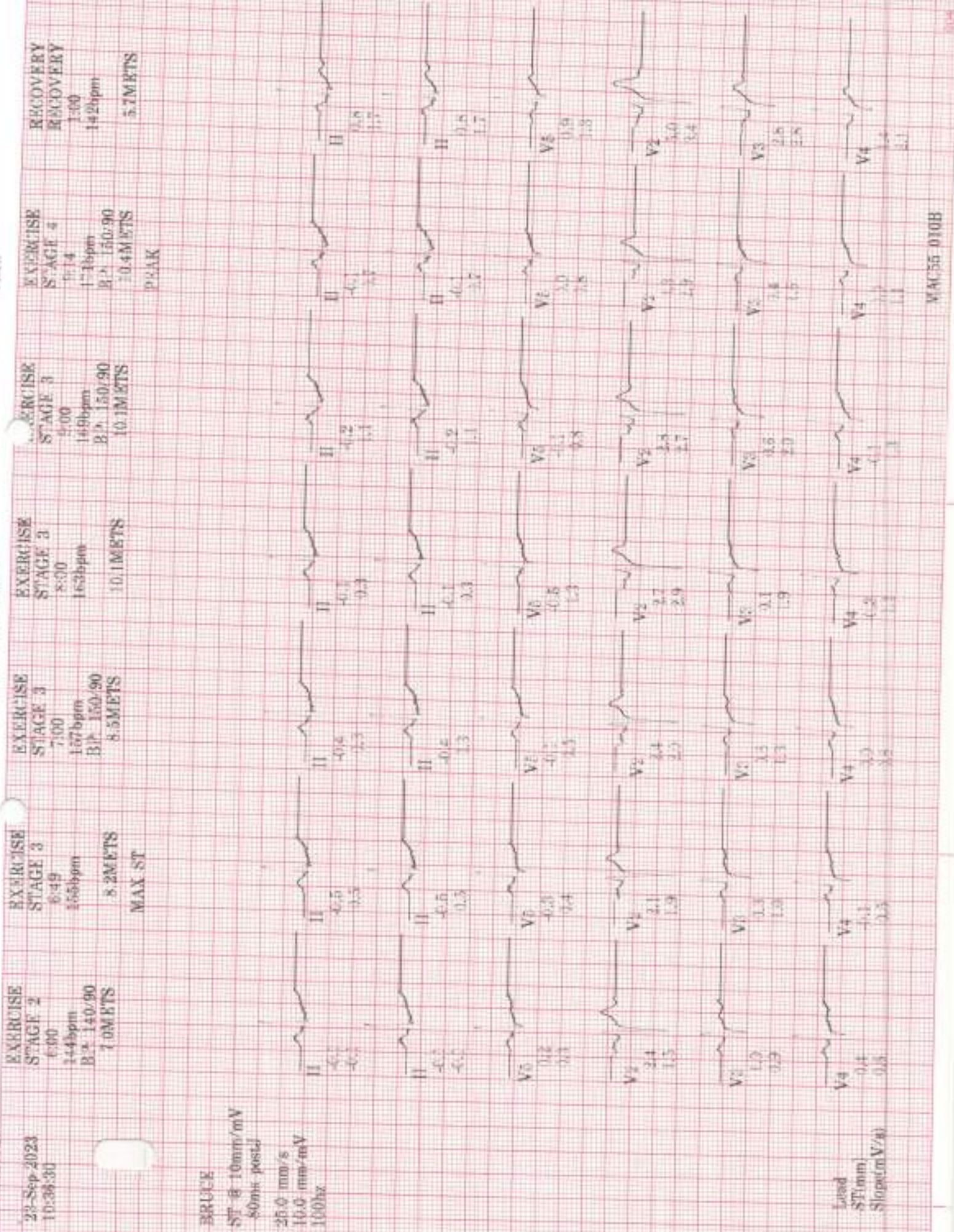
25.0 mm/s

10.0 mm/mV

100hz



Lead
 ST (mm)
 Slope (mV/s)



ID: 8127727
Client

BRUCE

23-Sep-2023
16:36:30

Heart Rate (bpm)



BP (mm-Hg)



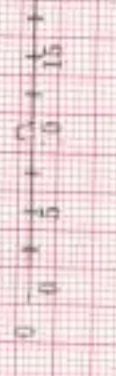
PVC's/min



ST @ 10mm/mV 40
50ms post J

EXERCISE
0:00

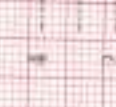
ST Lev: II (mm)



ST Lev: V5 (mm)



ST Slope: II (mV/s)



ST Slope: V5 (mV/s)



DOB: 33yr, MALE

23-Sep-2023 10:18:01

Vent rate: 83 BPM
PR int: 161 ms
QRS dur: 90 ms
QT/QTc: 343/383 ms
P-R-T axes: 46 46 52

SINUS RHYTHM
NORMAL ECG

Reviewed by _____

Mr. Ankit J. Prajapati
32/M

