

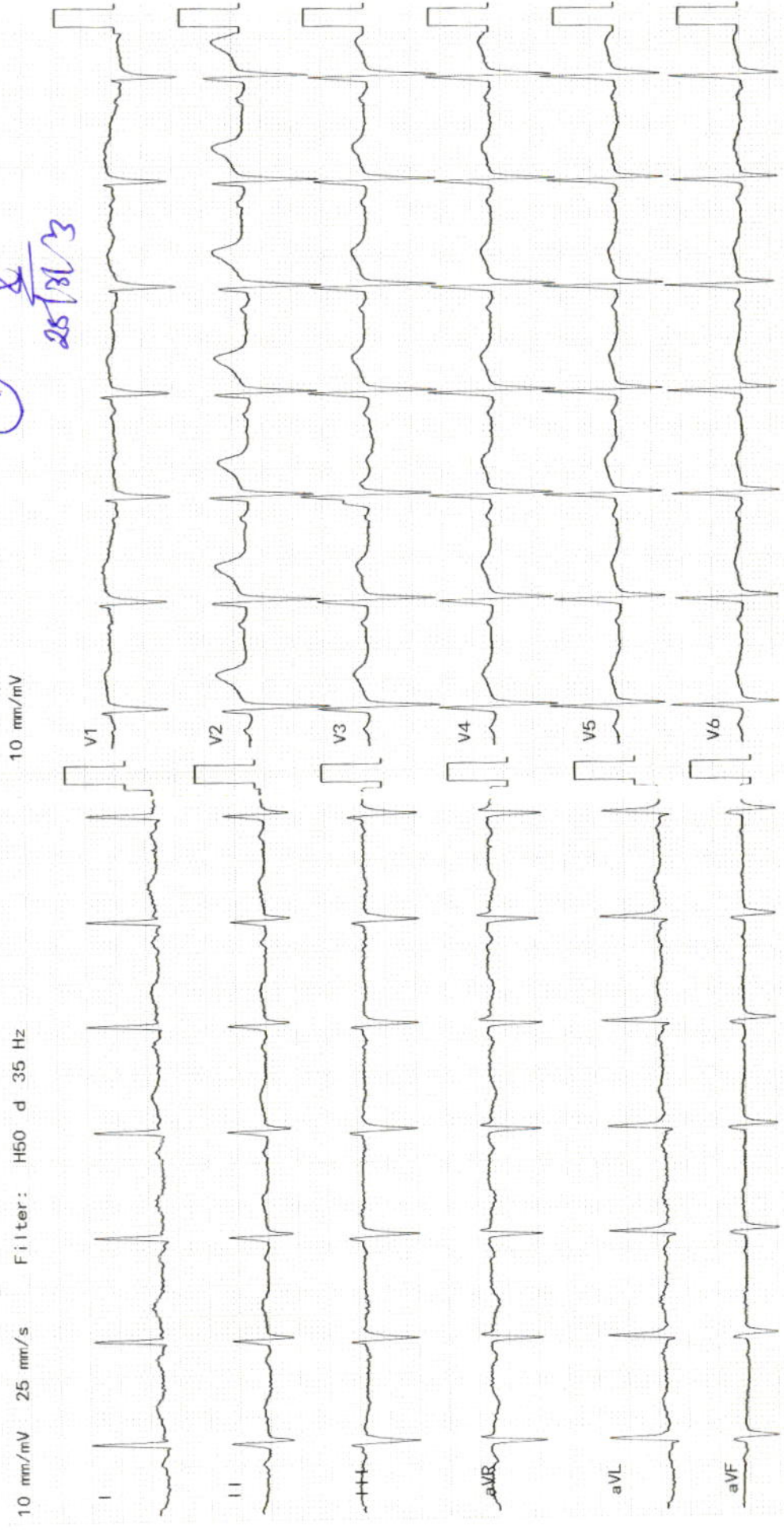
ID: _____ years
 Sex: M Birth date: / mmHg
 cm kg
 Medication: _____
 Symptoms: _____
 History: _____
 fent. rate 86 bpm
 PR int 148 ms
 PRS dur 86 ms
 QT/QTc(E) int 388/431 ms
 P/QRS/T axis 22/ -18/ 13 °
 RV5/SV1 amp 1.31/ 1.02 mV
 RV5+SV1 amp 2.34 mV

1100 Sinus rhythm
 4068 Nonspecific Twave abnormality
 0104 ELECTRODE(S) DETACHED ... Repeat ECG is requested
 9130 ** borderline ECG **

Sundeep.

Unconfirmed Report
 Reviewed by:

(Signature)
25/3/23





Patient's Name: Mr. Sandeep Gada

Age: 33 yrs/ male

Date: 25 / 03 / 2023

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:19

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:14 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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Vapi - Indore - Jabalpur - Mohali - Naroda (Ahmedabad) - Surat - Jaipur **Upcoming Hospitals : Mumbai - Nasik**

Patient Name: SANDEEP GADA	
Age / Sex: 33Yrs. / Male	Study: USG Abdomen + Pelvis
Referred By: Dr. at shalby Hospital	Date: 25/03/2023

ULTRASOUND OF ABDOMEN AND PELVIS

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 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 shows normal echotexture and corticomedullary differentiation. There is no evidence of scarring, hydronephrosis. 2.5 mm calculus in mid calyx

Left kidney shows normal echotexture and corticomedullary differentiation. There is no evidence of scarring, hydronephrosis. 2.8 mm calculus in lower calyx.

Urinary bladder well distended and appears normal. No evidence of any intraluminal mass or calculi.

Prostate is normal in size. It has smooth outlines and normal reflectivity.

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

IMPRESSION:

- **Bilateral small renal calculi.**
- **No any other significant abnormality is seen.**

Thanks for referral.


Dr. Nimit R Desai
Consultant Radiologist

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PID : SUR0000338602 OP-001

REPORT STATUS : Interim



Patient Name : Mr Sandeep Gada	/	Registered On : 25-Mar-2023 09:55 AM
Lab ID : 303901983		Collected On : 25-Mar-2023 12:00 AM
Gender/Age : Male / 33 Years	DOB : 02-Jan-1990	Received On : 25-Mar-2023 10:26 AM
Ref. By : Dr. Health Check Up . Shalby		Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
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Liver Function Test**Liver Function Test**

SGPT (ALTV) <i>Multi Point Rate with P-5-P</i>	51	U/L	21 - 72
SGOT (AST) <i>Multi Point Rate with P-5-P</i>	28	U/L	17 - 59
Alkaline Phosphatase <i>PNPP, AMP Buffer</i>	82	U/L	20-50 yrs : 53 - 128 4-19 yr : 54 - 369 >=51 yr : 56 - 119
GGT * <i>L-gamma-glutamyl-4-nitroanalide/glycylglycine Kinetic</i>	60	U/L	15 - 73
S. PROTEIN <i>Biuret (Alkaline cupric sulfate), End Point</i>	7.8	g/dL	6.3 - 8.2
Albumin <i>Bromocresol Green (BCG), Colorimetric</i>	4.5	g/dL	3.5 - 5.0
S. GLOBULIN <i>Calculated</i>	3.3	g/dL	2.3 - 3.6
A/G Ratio <i>Calculated</i>	1.4	Ratio	1.0 - 2.3
Bilirubin Total <i>Azobilirubin/Dyphylline/Diazonium Salt</i>	0.4	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 <i>End-point Colorimetric (Dual wavelength spectrophotometric)</i>	0.4	mg/dL	Unconjugated bilirubin Adults: 0.0-1.1 Neonates: 0.6-10.5
BILIRUBIN DIRECT <i>Calculated</i>	0.0	mg/dL	Conjugated bilirubin and Delta bilirubin (Bilirubin covalently bound to albumin) 0.0-0.4

----- End of Report -----

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Dr Pankaj AgrawalM.B., D.C.P
Consulting Pathologist



Certificate No. : MC-5290


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PID : SUR0000338602 OP-001

REPORT STATUS : Interim



Patient Name : Mr Sandeep Gada /

Registered On : 25-Mar-2023 09:55 AM

Lab ID : 303901983

Collected On : 25-Mar-2023 12:00 AM

Gender/Age : Male / 33 Years

DOB : 02-Jan-1990

Received On : 25-Mar-2023 10:30 AM

Ref. By : Dr. Health Check Up . Shalby

Sample Type : Urine

URINE EXAMINATION

Parameter	Result	Unit	Biological Ref. Interval
Physical Examination			
Colour	PALE YELLOW		Pale yellow
Transparency	Clear		Clear
Chemical Examination			
Blood	<i>Peroxidase like activity of hemoglobin</i>	NIL	RBCs/ μ L
Bilirubin	<i>Azo coupling Reaction with diazonium</i>	NIL	mg/dL
Urobilinogen	<i>Modified Ehrlich reaction</i>	NORMAL	mg/dL
Ketone	<i>Sodium Nitroprusside reaction</i>	NIL	mg/dL
Protein	<i>Protein Error of Indicator Principle</i>	Trace (+/-)	mg/dL
Nitrite	<i>Diazotization reaction of nitrite with an aromatic amine</i>	NEGATIVE	mg/dL
Glucose	<i>Glucose-oxidase/oxidase reaction</i>	NIL	mg/dL
pH	<i>Double Indicator principle</i>	6.0	PH value
Specific Gravity	<i>Refractometric Method - Bromthymol blue</i>	1.030	S.G. value
Leucocyte	<i>Leucocyte Esterase Test</i>	NEGATIVE	WBCs/ μ L
Microscopic Examination			
Pus cells	2-5/hpf	/hpf	0-5/hpf
Red blood cells	NIL	/hpf	0-2/hpf
Epithelial cells	0-2/hpf	/hpf	NA
Crystals	NIL		Nil
Cast	NIL/LPF		Nil/LPF
Bacteria	NIL		Nil
Amorphous	NIL		Nil
Yeast	NIL		Nil

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Consulting Pathologist

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Gender/Age : Male / 33 Years

DOB : 02-Jan-1990

Received On : 25-Mar-2023 10:26 AM

Ref. By : Dr. Health Check Up . Shalby

Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
Total T3 * <i>Chemiluminescence immunoassay (CLIA)</i>	123	ng/dL	87 - 178
Total T4 * <i>Chemiluminescence immunoassay (CLIA)</i>	8.52	µg/dL	6.09 - 12.23
TSH * <i>Chemiluminescence immunoassay (CLIA)</i>	2.11	µIU/mL	0.38 - 5.33

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DOB : 02-Jan-1990

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Ref. By : Dr. Health Check Up . Shalby

Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
-----------	--------	------	--------------------------

RENAL FUNCTION TEST**RENAL FUNCTION TEST****Urea Nitrogen (BUN)**

8

mg/dL

9 - 20

*Urease, colorimetric***UREA**

17

mg/dL

19 - 43

*Calculated***S. CREATININE**

0.57

mg/dL

0.66 - 1.25

*Enzymatic - Creatinine amidohydrolase***S. URIC ACID**

8.2

mg/dL

3.5 - 8.5

*Uricase/Peroxidase, Colorimetric***Calcium**

9.4

mg/dL

8.4 - 10.2

*Arsenazo III dye***Sodium**

143

mmol/L

137 - 145

*Direct Ion Selective Electrode***S. POTASSIUM**

4.58

mmol/L

3.5 - 5.1

*Direct Ion Selective Electrode***Chloride**

106

mmol/L

98 - 107

Direct Ion Selective Electrode

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Gender/Age : Male / 33 Years	DOB : 02-Jan-1990	Received On : 25-Mar-2023 10:26 AM
Ref. By : Dr. Health Check Up . Shalby		Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
LIPID PROFILE			
LIPID PROFILE			
Cholesterol <i>Cholesterol Esterase, Oxidase, Peroxidase</i>	150	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
SERUM TRIGLYCERIDE <i>Lipase/GK/GPO/POD</i>	228	mg/dL	Normal : <150 Borderline High : 150-199 High : 200-499 Very High : > 500
HDL CHOLESTEROL DIRECT * <i>Phosphotungstic Acid/Mgcl2 - Enzymatic</i>	29	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : >= 60
Non HDL Cholesterol <i>Calculated</i>	121	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
S.LDL <i>Calculated</i>	75	mg/dL	Optimal: <100 Near to above Optimal: 100 - 129 Borderline High: 130 - 159 High: 160 - 189 Very High: > 190
VLDL <i>Calculated</i>	46	mg/dL	6 - 38
LDL/dHDL * <i>Calculated</i>	2.6		2.5 - 3.5
Chol/dHDL * <i>Calculated</i>	5.2	Ratio	3.5 - 5.0

Note: Reference interval as per National Cholesterol Education Programme (NCEP) Adult Treatment Panel III Report. VLDL, CHOL/dHDL RATIO, LDL/dHDL RATIO, LDL Cholesterol, Non HDL Cholesterol are calculated parameters. Estimation of LDL by direct method is recommended when TG>400 mg/dL.

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PID : SUR0000338602 OP-001

REPORT STATUS : Interim



Patient Name : Mr Sandeep Gada	/	Registered On : 25-Mar-2023 09:55 AM
Lab ID : 303901983		Collected On : 25-Mar-2023 12:00 AM
Gender/Age : Male / 33 Years	DOB : 02-Jan-1990	Received On : 25-Mar-2023 10:26 AM
Ref. By : Dr. Health Check Up . Shalby		Sample Type : Serum, Urine (PP), Fluoride P, Urine

Parameter	Result	Unit	Biological Ref. Interval
-----------	--------	------	--------------------------

PLASMA GLUCOSE LEVEL

FASTING PLASMA GLUCOSE

Plasma Glucose (F)	118	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)	147	mg/dL	Normal: 100-140 Impaired: 140 -199 Diabetic :=>200
----------------------------	------------	-------	---

GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

Urine Sugar (PP)	ABSENT	mg/dL	ABSENT
-------------------------	---------------	-------	--------

Glucose-oxidase/oxidase reaction

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PID : SUR0000338602 OP-001

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Patient Name : Mr Sandeep Gada	/	Registered On : 25-Mar-2023 09:55 AM
Lab ID : 303901983		Collected On : 25-Mar-2023 12:00 AM
Gender/Age : Male / 33 Years	DOB : 02-Jan-1990	Received On : 25-Mar-2023 10:13 AM
Ref. By : Dr. Health Check Up . Shalby		Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
-----------	--------	------	--------------------------

BLOOD GROUP

(Tube agglutination: Forward & reverse) ·

ABO Type	"A"		
RH Type	POSITIVE		
ESR 1st hour *	2	mm in 1 hour	0 - 15
<i>Modified Westergren Method</i>			
HBA1C			
HbA1c - Glycated Haemoglobin *	6.1	%	Non-diabetic: <= 5.6 Pre-diabetic: 5.7-6.4 Diabetic: >= 6.5 Therapeutic goals for glycemc control Age > 19 years Goal of therapy: < 7.0 Action suggested: > 8.0 Age < 19 years Goal of therapy: <7.5
<i>Boronate Affinity Assay</i>			

Estimated Average Glucose (eAG) (mg/dL) *	128	mg/dL
---	-----	-------

Calculated

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Ref. By : Dr. Health Check Up . Shalby		Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
-----------	--------	------	--------------------------

BLOOD COUNT AND INDICIES

HAEMOGLOBIN	Colorimetric Non Cyanide	14.8	g/dL	13.0 - 17.0
RBC COUNT	Electrical Impedance	5.79	mill/cmm	4.5 - 5.5
HCT	Calculated	48.1	%	40 - 50
MCV	Calculated based on the RBC histogram	83.1	fL	83 - 101
MCH	Calculated	25.6	pg	27 - 32
MCHC	Calculated	30.8	g/dL	31.5 - 34.5
RDW	Calculated	12.9	%	13.3 - 18.3

TOTAL LEUCOCYTE COUNT

Total WBC Count	Electrical Impedance	6460	cells/cmm	4000 - 10000
-----------------	----------------------	------	-----------	--------------

DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)

NEUTROPHILS	Flow Cytometry	46	%	40 - 80
LYMPHOCYTES	Flow Cytometry	43	%	20 - 40
EOSINOPHILS	Flow Cytometry	6	%	1 - 6
MONOCYTES	Flow Cytometry	5	%	2 - 10
BASOPHIL	Flow Cytometry	0	%	0 - 2

PLATELET INDICES

PLATELET COUNT	Electrical Impedance	295000	/cmm	150000 - 410000
MPV	Calculated based on PLT Histogram	8.2	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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Dr Pankaj Agrawal

M.B., D.C.P
Consulting Pathologist

Generated On : 25-Mar-2023 12:49 PM

Approved On : 25-Mar-2023 12:44 PM

Patient ID:	SUR00003824	Patient Name:	SANDEEP GADA
Age:	33 Years	Sex:	M
Accession Number:	3824	Modality:	DX
Referring Physician:		Study:	CHEST PA
Study Date:	25-Mar-2023		

CHEST X-RAY (PA)

Both lung fields appear normal.

No evidence of consolidation or cavitation is seen.

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:

- No significant abnormality seen.

Thanks for referral.



Dr. Nimit R Desai
Consultant Radiologist

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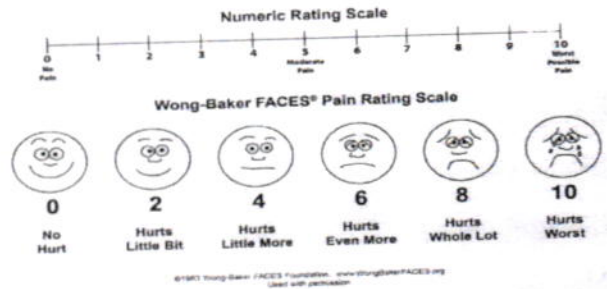
DR. RUJUTA SHELAT
Consultant Ophthalmologist
Reg. No.:- G-48712

Name :- Syndeep Gudu

Date:- 25/3/23

Chief Complaints:-

NLC



Pain Assessment:-

Past History:-

- NAD -

Family History:-

Allergy:-

Personal History:- **Habits**:- Alcohol:- Y/N Tobacco: Y/N Smoking: Y/N Regular Exercise: Y/N

General Examination:-

BP:- Pulse:- Temp:-

Systemic Examination:-

HT:- WT:-

Visual Acuity:- < 6/6

PH Vision:-

NCT 14 mm OA ky

ON Examination Ant. Segmenet

Both Eye

- WNL -

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Cornea

Anterior Chamber

Lens

Fundus

Rt. EYE

Lt. EYE

Media:-

Disc:-

Blood Vessel:-

Background:-

Macula:-

Diagnosis:-

} BE
WNL

Investigation:-

Treatment:-

Nutritional Assessment:-

Preventive Care & Counsellings:-

Follow Up ON:- After 6 month

RNS

Signature of the Consultant

Pre - op Post - op Health Check-up

Date : 25/08/23 Patient Reg. No. : _____

Patient Name : Sandeep Gada Age / Sex : 33/M

Address : Palanpur Jankinaka

Complaints :

Pain : _____
Bleeding gums : _____
Sensitivity : _____
Swelling : _____
Pus Discharge : _____

Medical History :

Hypertension : _____ DM _____ Acidity _____ Pregnancy : _____
Bleeding Disorders : _____ Asthma : _____ Allergy : _____
Past Surgical Intervention : _____

Any Medication : sterion , celcelest

On Examination :

Abscess : _____ Food Impingement : _____
Periodontitis : _____ Gingivitis : _____
Missing Teeth : _____ Mobility : _____

Treatment Advised :

Scaling : Sitzings 1 2 3 Deep
Restoration : _____
RCT : _____
Dentures : _____
Implants : _____
Periodontal Surgery : _____
Class II Fillings : _____
Extraction : _____
Partial Denture : _____
Crowns Bridge : FC 2 37
Prosthodontics : _____

Crown / Bridge Replacement

Advised Crown / Bridge

Advised X - Ray / O.P.G.

Some Golden Rules :

1. Brush your teeth twice a day.
2. Floss your teeth daily.
3. Gargle forcefully after each meal.
4. Visit your dentist twice a year.
5. Any dental treatment should be performed in an well maintained.

hygienic setup using "autoclaved" instruments & "sterilized pouch" facility.

After knee replacement any treatment should be done under "Antibiotic Coverage"

Adv.

scaling

- FC @ 37



Dr. Darshini V. S
(Consultant Dental Su

DR. HARIN VADODARIA MD

M.D. (Internal Medicine)
Consultant Physician
Reg No: G 3394,
Mo: 9898053714
OPD Days:

OPR NO:

Shalby MD Physician Clinic

Patient Name:-

Sandeep Gale

Date:

25/3/23

Age / Sex :-

Weight:-

Chief Complaints:-

Height:-

Nutritional assessment:-

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

Drug / Food Allergy:-

Past History :-

4/5 renal for renal calculi

Pulse:- *95/min*

BP:- *120/80*

SpO2:- *97%*

Family History:-

Systemic Examination:-

Provisional Diagnosis:-

SHALBY HOSPITAL, SURAT

Near Navyug College, Rander Road, Adajan, Surat. Gujarat, India. | Ph. : 0261-7190000 | Email : info.surat@shalby.org.

SHALBY LIMITED

Regd. Office : Opp. Karnavati Club, S.G. Road, Ahmedabad - 380 015. Gujarat, India
Tel: 079 40203000 | Fax : 079 40203109 | info.sg@shalby.org | www.shalby.org | CIN : L85110GJ2004PLC044667

Vapi - Indore - Jabalpur - Mohali - Naroda (Ahmedabad) - Surat - Jaipur - Mumbai

Investigation :-

બચાવે 311 કાલ કાલે
R 118 / R 142 / H611C G.1

Treatment and further advices:-
(Write in Capital Letters)

ગત
— Lifestyle Measures
no sugar diet
low fat / High fiber diet
Regular Exercise

Rx

ગત
Repeat H611C after 3 mo.

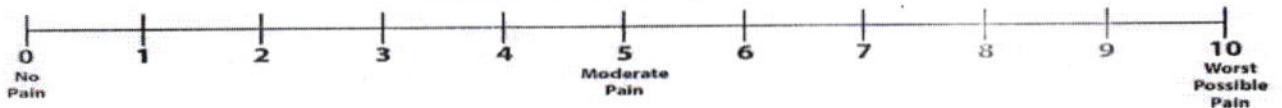
Follow Up:

બધી દવાઓ ડોક્ટરને બતાવીને લેવી.

Date:- _____

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

Numeric Rating Scale



Wong-Baker FACES® Pain Rating Scale

