

### Shalby MD Physician Clinic

Patient Name:-

Satish S. Yadav  
31 M

Age / Sex :-

Chief Complaints:-

Nodo

Drug / Food Allergy:-

Past History :-

MA2

Family History:-

Systemic Examination:-

AS }  
CS }  
PA }  
MS }  
MA2

Provisional Diagnosis:-

OPR NO:

Date: 27/9/24  
Weight: 59.5 kg  
Height: 164 cm

Nutritional assessment:-

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

Pulse: 86/min  
BP: 110/80  
SpO2: 99%

Investigation :-

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

Rx

lifestyl modification  
I-Torvasan 10mg (30)  
gunt

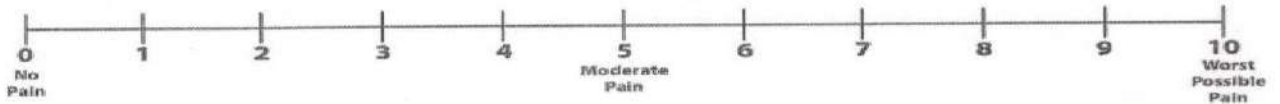
Follow Up: after 1 month

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



<b>Patient ID:</b>	<b>SUR0000372185</b>	<b>Patient Name:</b>	<b>SATISH S YADAV</b>
<b>Age:</b>	<b>31 Years</b>	<b>Sex:</b>	<b>M</b>
<b>Accession Number:</b>	<b>9756 OP</b>	<b>Modality:</b>	<b>DX</b>
<b>Referring Physician:</b>	<b>DR SHALBY</b>	<b>Study:</b>	<b>CHEST PA</b>
<b>Study Date:</b>	<b>28-Sep-2024</b>		

**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. ASHUTOSH GANDHI**

DMRD (Radiodiagnosis)

G-14916

**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.

Corp. Office: B-301 & 302, Mondeal Heights, Opp. Karnavati Club, S. G. Road, Ahmedabad - 380 015, Gujarat, India



Certificate No. : MC-5200

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

PID : SUR0000372185 OP-001

REPORT STATUS : Interim



Patient Name : <b>Mr Satish Samarbahadur Yadav</b> /	Registered On : 28-Sep-2024 09:40 AM
Lab ID : 409902296	Collected On : 28-Sep-2024 09:49 AM
Gender/Age : Male / 33 Years	DOB : 15-Oct-1990
Received On : 28-Sep-2024 10:21 AM	Sample Type : EDTA Whole Blood
Ref. By : Health Check Up Shalby	

Parameter	Result	Unit	Biological Ref. Interval
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**BLOOD COUNT AND INDICIES**

HAEMOGLOBIN	Colorimetric Non Cyanide	16.5	g/dL	13.0 - 17.0
RBC COUNT	Electrical Impedance	5.35	mill/cmm	4.5 - 5.5
HCT	Calculated	49.3	%	40 - 50
MCV	Calculated based on the RBC histogram	92.2	fL	83 - 101
MCH	Calculated	30.8	pg	27 - 32
MCHC	Calculated	33.5	g/dL	31.5 - 34.5
RDW	Calculated	11.5	%	13.3 - 18.3

**TOTAL LEUCOCYTE COUNT**

Total WBC Count	Electrical Impedance	7130	cells/cmm	4000 - 10000
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**DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)**

NEUTROPHILS	Flow Cytometry	59	%	40 - 80
LYMPHOCYTES	Flow Cytometry	31	%	20 - 40
EOSINOPHILS	Flow Cytometry	4	%	1 - 6
MONOCYTES	Flow Cytometry	5	%	2 - 10
BASOPHIL	Flow Cytometry	1	%	0 - 2

**PLATELET INDICES**

PLATELET COUNT	Electrical Impedance	275000	/cmm	150000 - 410000
MPV	Calculated based on PLT Histogram	9.3	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





Certificate No.: MC-5290

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Gender/Age	: Male / 33 Years	DOB	: 15-Oct-1990
Ref. By	: Health Check Up Shalby	Received On	: 28-Sep-2024 10:21 AM
		Sample Type	: EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
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**BLOOD GROUP**

(Tube agglutination: Forward &amp; reverse)

ABO Type	"A"
RH Type	POSITIVE

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REPORT STATUS : Interim



Patient Name : **Mr Satish Samarbahadur Yadav** / Registered On : 28-Sep-2024 09:40 AM  
 Lab ID : 409902290 Collected On : 28-Sep-2024 09:49 AM  
 Gender/Age : Male / 33 Years DOB : 15-Oct-1990 Received On : 28-Sep-2024 10:21 AM  
 Ref. By : Health Check Up Shalby Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
<b>ESR 1st hour</b> <i>Modified Westergren Method</i>	3	mm in 1 hour	0 - 15
<b>HBA1C</b> <b>HbA1c - Glycated Haemoglobin</b> <i>Boronate Affinity Assay</i>	5.4	%	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
<b>Estimated Average Glucose (eAG) (mg/dL)</b> <i>Calculated</i>	108	mg/dL	

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Consulting Pathologist



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 Lab ID : 409902296 Collected On : 28-Sep-2024 09:49 AM  
 Gender/Age : Male / 33 Years DOB : 15-Oct-1990 Received On : 28-Sep-2024 10:29 AM  
 Ref. By : Health Check Up Shalby Sample Type : Fluoride F, Urine (PP),  
 Fluoride PP, Urine (F)

Parameter	Result	Unit	Biological Ref. Interval
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**PLASMA GLUCOSE LEVEL****FASTING PLASMA GLUCOSE**

<b>Plasma Glucose (F)</b>	93	mg/dL	74 - 106
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GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

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

**POST PRANDIAL PLASMA GLUCOSE**

<b>Plasma Glucose (PP)</b>	101	mg/dL	Normal: 100-140 Impaired: 140-199 Diabetic : =>200
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GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

<b>Urine Sugar (PP)</b>	ABSENT	mg/dL	Absent
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Glucose-oxidase/oxidase reaction

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Lab ID : 409902296	Collected On : 28-Sep-2024 09:49 AM
Gender/Age : Male, / 33 Years	DOB : 15-Oct-1990
Received On : 28-Sep-2024 10:21 AM	Sample Type : Serum
Ref. By : Health Check Up Shalby	

Parameter	Result	Unit	Biological Ref. Interval
<b>LIPID PROFILE</b>			
<b>LIPID PROFILE</b>			
<b>Cholesterol</b> <i>Cholesterol Esterase, Oxidase, Peroxidase</i>	190	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
<b>SERUM TRIGLYCERIDE</b> <i>Lipase/GK/GPO/POD</i>	639	mg/dL	Normal : <150 Borderline High : 150-199 High : 200-499 Very High : > 500
<b>HDL CHOLESTEROL DIRECT</b> <i>Phosphotungstic Acid/Mgcl2 - Enzymatic</i>	32	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : >= 60
<b>Non HDL Cholesterol</b> <i>Calculated</i>	158	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
<b>VLDL</b> <i>Calculated</i>	128	mg/dL	6 - 38
<b>Chol/dHDL</b> <i>Calculated</i>	5.9	Ratio	3.5 - 5.0

**Remarks:** Estimation of LDL by direct method is recommended as TG is >400 mg/dl.

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&gt;400 mg/dL.

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Gender/Age : Male / 33 Years DOB : 15-Oct-1990 Received On : 28-Sep-2024 10:21 AM  
Ref. By : Health Check Up Shalby Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
<b>THYROID PROFILE (TFT)</b>			
<b>Total T3</b> <i>Chemiluminescence immunoassay (CLIA)</i>	109	ng/dL	87 - 178
<b>Total T4</b> <i>Chemiluminescence immunoassay (CLIA)</i>	12.34	µg/dL	99% Reference Interval (µg/dL) 4.82 - 15.65
<b>TSH</b> <i>Chemiluminescence immunoassay (CLIA)</i>	3.559	µIU/mL	0.38 - 5.33

TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm . The variation is of the order of 50% .hence time of the day has influence on the measured serum TSH concentrations.

TSH levels During Pregnancy :

First Trimester :0.1 to 2.5 µIU/mL Second Trimester : 0.2 to 3.0 µIU/mL Third trimester : 0.3 to 3.0 µIU/mL

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*Dr Pankaj Agrawal*

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 Ref. By : Health Check Up Shalby Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
<b>Liver Function Test</b>			
<b>Liver Function Test</b>			
<b>SGPT (ALTV)</b> <i>Multi Point Rate with P-5-P</i>	33	U/L	21 - 72
<b>SGOT (AST)</b> <i>Multi Point Rate with P-5-P</i>	36	U/L	17 - 59
<b>Alkaline Phosphatase</b> <i>PNPP, AMP Buffer</i>	54	U/L	20-50 yrs : 53 - 128 4-19 yr : 54 - 369 >=51 yr : 56 - 119
<b>GGT</b> <i>L-gamma-glutamyl-4-nitroanilide/glycylglycine Kinetic</i>	18	U/L	15 - 73
<b>S. PROTEIN</b> <i>Biuret (Alkaline cupric sulfate), End Point</i>	7.4	g/dL	6.3 - 8.2
<b>Albumin</b> <i>Bromocresol Green (BCG), Colorimetric</i>	4.0	g/dL	3.5 - 5.0
<b>S. GLOBULIN</b> <i>Calculated</i>	3.4	g/dL	2.3 - 3.6
<b>A/G Ratio</b> <i>Calculated</i>	1.2	Ratio	1.0 - 2.3
<b>Bilirubin Total</b> <i>Azobilirubin/Dyphylline/Diazonium Salt</i>	1.0	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
<b>Bilirubin Unconjugated</b> <i>End-point Colorimetric (Dual wavelength spectrophotometric)</i>	1.0	mg/dL	Unconjugated bilirubin Adults: 0.0-1.1 Neonates: 0.6-10.5
<b>Bilirubin Direct</b> <i>Calculated</i>	0.0	mg/dL	Conjugated bilirubin and Delta bilirubin (Bilirubin covalently bound to albumin) 0.0-0.4

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Ref. By : Health Check Up Shalby	Received On : 28-Sep-2024 10:21 AM
	Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
<b>BIOCHEMISTRY</b>			
<b>RENAL FUNCTION TEST</b>			
<b>NABL Accredited Parameters</b>			
<b>Urea Nitrogen (BUN)</b> <i>Urease, colorimetric</i>	8	mg/dL	9 - 20
<b>UREA</b> <i>Calculated</i>	17	mg/dL	19 - 43
<b>Creatinine</b> <i>Enzymatic - Creatinine amidohydrolase</i>	0.72	mg/dL	0.66 - 1.25
<b>S. URIC ACID</b> <i>Uricase/Peroxidase, Colorimetric</i>	6.2	mg/dL	3.5 - 8.5
<b>Calcium</b> <i>Arsenazo III dye</i>	9.6	mg/dL	8.4 - 10.2
<b>Sodium</b> <i>Direct Ion Selective Electrode</i>	147	mmol/L	137 - 145
<b>S. POTASSIUM</b> <i>Direct Ion Selective Electrode</i>	4.3	mmol/L	3.5 - 5.1
<b>Chloride</b>	106	mmol/L	98 - 107
<b>Phosphorus (Not in NABL Scope)</b> <i>Phosphomolybdate reduction (PMA Phenol)</i>	3.3	mg/dL	2.5 - 4.5

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Ref. By : Health Check Up Shalby	Received On : 28-Sep-2024 10:21 AM
	Sample Type : Urine

**URINE EXAMINATION**

Parameter	Result	Unit	Biological Ref. Interval
<b>Physical Examination</b>			
Colour	Pale Yellow		Pale yellow
Transparency	Clear		Clear
<b>Chemical Examination</b>			
Glucose	<i>Glucose-oxidase/peroxidase reaction</i>	Negative	Negative
Bilirubin	<i>Azo coupling Reaction with diazonium</i>	Negative	Negative
Ketone	<i>Sodium Nitroprusside reaction</i>	Negative	Negative
Specific Gravity	<i>Refractometric Method - Bromthymol blue</i>	1.010	S.G. value 1.001 - 1.035
Blood	<i>Peroxidase like activity of hemoglobin</i>	NIL	Negative
pH	<i>Double Indicator principle</i>	6.0	PH value 4.6 - 8.0
Protein	<i>Protein Error of Indicator Principle</i>	Negative	Negative
Urobilinogen	<i>Modified Ehrlich reaction</i>	0.2	EU/dL Upto 1.0 mg/dL (EU/dL)
Nitrite	<i>Diazotization reaction of nitrite with an aromatic amine</i>	Negative	Negative
Leucocyte	<i>Leucocyte Esterase Test</i>	Negative	Negative
<b>Microscopic Examination</b>			
Pus cells	0-2/hpf	/hpf	0-5/hpf
Red blood cells	Nil	/hpf	NIL/hpf
Epithelial cells	0-2/hpf	/hpf	NA
Crystals	Nil		Nil
Cast	Nil		Nil
Bacteria	Nil		Nil
Amorphous	Nil		Nil
Yeast	Nil		Nil
Others	Nil		Nil

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Consulting Pathologist



Patient Name: SATISH SAMARBAHADUR YADAV		UHID: SUR0000372185	
Age / Sex: 31 Yrs. / Male		Study:	USG Abdomen + Pelvis
Referred By:	Dr. at shalby Hospital	Date: 28.09.2024	

**ULTRASOUND OF ABDOMEN AND PELVIS**

**Liver** is normal in size shows grade I fatty changes. No focal lesion seen. The Hepatic veins appear normal. No evidence of dilated I.H.B.R. **Portal vein** appears normal.

**Gall bladder** is not seen. H/o surgery. **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.

**Prostate** is normal in size and measures 30 x 40 x 31 mm (Approx. vol- 20 cc). It has smooth outlines and normal reflectivity.

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

**IMPRESSION:**

- **Grade I fatty liver.**

*Thanks for referral.*

**DR. ASHUTOSH GANDHI**  
DMRD (Radiodiagnosis)  
G-14916









Pre - op

Post-op

Health Check-up

Date : 28-09-24

Patient Reg. No. : \_\_\_\_\_

Patient Name : Satish S. Yeldav

Age / Sex : 37 / M

Address : Surend

**Complaints :**

Pain : \_\_\_\_\_

Bleeding gums : \_\_\_\_\_

Swelling : \_\_\_\_\_

Sensitivity : \_\_\_\_\_

Pus Discharge : \_\_\_\_\_

**Medical History :**

Hypertension : \_\_\_\_\_ DM \_\_\_\_\_ Acidity \_\_\_\_\_ Pregnancy : \_\_\_\_\_

Bleeding Disorders : \_\_\_\_\_ Asthma : \_\_\_\_\_ Allergy : \_\_\_\_\_

Past Surgical Intervention : \_\_\_\_\_

**Any Medication :**

**On Examination :**

Abscess : \_\_\_\_\_ Food lodgement : \_\_\_\_\_

Periodontitis : \_\_\_\_\_ Gingivitis : \_\_\_\_\_

Missing Teeth : 75 Mobility : \_\_\_\_\_

**Treatment Advised :**

Scaling : Sittings 1  2  3  Deep  Perio Surgery : \_\_\_\_\_

Restoration : \_\_\_\_\_ Class V Fillings : \_\_\_\_\_

RCT : \_\_\_\_\_ Extraction : \_\_\_\_\_

Dentures : \_\_\_\_\_ Partial Denture : \_\_\_\_\_

Implants : \_\_\_\_\_ Crown & Bridge Present : \_\_\_\_\_

Crown / Bridge Replacement :		
Advised Crown / Bridge :	4/2	
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 a well maintained.

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

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

Adv: Scaling

Crown & Bridge

4/2

*Dr. Darshini V. Shah*

**Dr. Darshini V. Shah**  
(Consultant Dental Surgeon)



Patient's Name: Satish Yadav

UHID:372185

Age:31 yrs / male

Date:28 / 09 / 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:11 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

Name:-

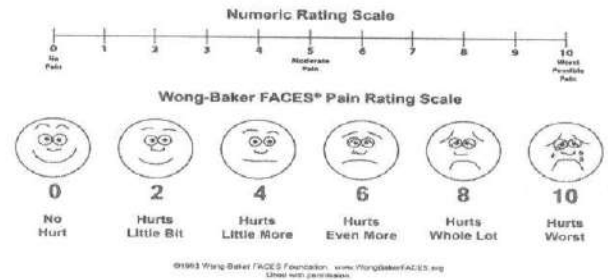
Satish Yadav

Date:-

28-9-24

Chief Complaints:-

- N/H/O present complaining.
- Came for routine eye checkup.



Pain Assessment:-

Past History:-

} Nil

Family History:-

Allergy:-

Nil

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

General Examination:-

BP: -

Pulse: -

Temp: -

Systemic Examination:-

HT: - Nil WT:-

Visual Acuity: -

2/30

6/6  
6/6

NG DE

PH Vision:-

NCT

13  
12.5

ON Examination

Ant. Segment

Both Eye

PACD > ICT

ME: 2024/Sep/28 12:57  
00383  
/ITZ HNT-1P  
- 1-1-1

NO-PACHY model

	<R>	<L>
	12.5	11.4
	12.9	13.9*
	13.7	13.1
		12.9
Hgt	13.0	12.5
	<R>	<L>
	518	526
	518	520
	515	518
Hgt	517.0	521.3

itz Co., Ltd.  
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cler

cler

Anterior Chamber

Rt. EYE

Lt. EYE

ML

Investigation:-

DISC:-  
Blood Vessel:-  
Background:-  
Macula:-

Diagnosis:-  
- Mixed Astigmatism

Treatment:-

Nutritional Assessment:-

Preventive Care & Counselling:-

Follow Up ON:-

After 1 year

Signature of the Consultant

DR. R. S.



ID:   
 Name:   
 Sex: M   
 Birth date: / / years   
 Weight: kg   
 Height: mmHg

Shish Yudeen

1100 Sinus rhyt  
9110 \*\* normal ECG \*\*

Indication:   
 Symptoms:   
 History:   
 Heart rate: 78 bpm   
 PR int: 146 ms   
 PRS dur: 90 ms   
 QT/QTc(E) int: 386/420 ms   
 P/QRS/T axis: 33/ 19/ 20 °   
 RV5/SV1 amp: 0.48/ 0.58 mV   
 RV5+SV1 amp: 1.06 mV

WNL

Unconfirmed Report  
Reviewed by:

