

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 : SUR0000336761 OP-001

REPORT STATUS : Final



Patient Name : Miss. Promila . Goyat	/	Registered On : 28-Feb-2023 09:17 AM
Lab ID : 302901996		Collected On : 28-Feb-2023 09:01 AM
Gender/Age : Female / 40 Years	DOB : 20-Feb-1983	Received On : 28-Feb-2023 09:44 AM
Ref. By : Dr. Health Check Up . Shalby		Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
BLOOD COUNT AND INDICIES			
HAEMOGLOBIN <i>Colorimetric Non Cyanide</i>	12.9	g/dL	12.0 - 15.0
RBC COUNT <i>Electrical Impedance</i>	4.73	mill/cmm	3.8 - 4.8
HCT <i>Calculated</i>	40.8	%	36 - 46
MCV <i>Calculated based on the RBC histogram</i>	86.2	fL	83 - 101
MCH <i>Calculated</i>	27.3	pg	27 - 32
MCHC <i>Calculated</i>	31.6	g/dL	31.5 - 34.5
RDW <i>Calculated</i>	12.5	%	11.6 - 14.0
TOTAL LEUCOCYTE COUNT			
Total WBC Count <i>Electrical Impedance</i>	7880	cells/cmm	4000 - 10000
DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)			
NEUTROPHILS <i>Flow Cytometry</i>	55	%	40 - 80
LYMPHOCYTES <i>Flow Cytometry</i>	38	%	20 - 40
EOSINOPHILS <i>Flow Cytometry</i>	2	%	1 - 6
MONOCYTES <i>Flow Cytometry</i>	5	%	2 - 10
BASOPHIL <i>Flow Cytometry</i>	0	%	0 - 2
PLATELET INDICES			
PLATELET COUNT <i>Electrical Impedance</i>	406000	/cmm	150000 - 410000
MPV <i>Calculated based on PLT Histogram</i>	8.5	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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Approved On : 28-Feb-2023 11:43 AM

Dr Pankaj Agrawal

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

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Parameter	Result	Unit	Biological Ref. Interval
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BLOOD GROUP

(Tube agglutination: Forward & reverse)

ABO Type	"A"		
RH Type	POSITIVE		
ESR 1st hour *	35	mm in 1 hour	0 - 20
<i>Modified Westergren Method</i>			
HBA1C			
HbA1c - Glycated Haemoglobin *	5.8	%	Non-diabetic: <= 5.6 Pre-diabetic: 5.7-6.4 Diabetic: >= 6.5 Therapeutic goals for glycemic 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) *	120	mg/dL
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Calculated

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Gender/Age : Female / 40 Years

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Ref. By : Dr. Health Check Up . Shalby

Sample Type : Serum, Urine (PP),
Urine

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

Plasma Glucose (F)

105

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)

97

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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Gender/Age : Female / 40 Years	DOB : 20-Feb-1983	Received On : 28-Feb-2023 09:44 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>	215	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
SERUM TRIGLYCERIDE <i>Lipase/GK/GPO/POD</i>	232	mg/dL	Normal : <150 Borderline High : 150-199 High : 200-499 Very High : > 500
HDL CHOLESTEROL DIRECT * <i>Phosphotungstic Acid/Mgcl2 - Enzymatic</i>	43	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : >= 60
Non HDL Cholesterol <i>Calculated</i>	172	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
S.LDL <i>Calculated</i>	126	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>	2.9		2.5 - 3.5
Chol/dHDL * <i>Calculated</i>	5.0	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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Parameter	Result	Unit	Biological Ref. Interval
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RENAL FUNCTION TEST**RENAL FUNCTION TEST****Urea Nitrogen (BUN)***Urease, colorimetric*

7

mg/dL

7 - 17

UREA*Calculated*

15

mg/dL

15 - 36

S. CREATININE*Enzymatic - Creatinine amidohydrolase*

0.85

mg/dL

0.52 - 1.04

S. URIC ACID*Uricase/Peroxidase, Colorimetric*

3.3

mg/dL

2.5 - 6.2

Calcium*Arsenazo III dye*

9.2

mg/dL

8.4 - 10.2

S. PHOSPHORUS **Phosphomolybdate reduction (PMA Phenol)*

4.0

mg/dL

2.5 - 4.5

Sodium*Direct Ion Selective Electrode*

139

mmol/L

137 - 145

S. POTASSIUM*Direct Ion Selective Electrode*

5.12

mmol/L

3.5 - 5.1

Chloride*Direct Ion Selective Electrode*

104

mmol/L

98 - 107

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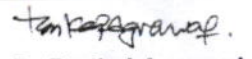
Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
Total T3 * <i>Chemiluminescence immunoassay (CLIA)</i>	107	ng/dL	87 - 178
Total T4 * <i>Chemiluminescence immunoassay (CLIA)</i>	10.06	µg/dL	6.09 - 12.23
TSH * <i>Chemiluminescence immunoassay (CLIA)</i>	5.95	µIU/mL	Non Pregnant Females: 0.38-5.33 µIU/mL Pregnant Females (1st trimester): 0.05-3.70 µIU/mL Pregnant Females (2nd trimester): 0.31-4.35 µIU/mL Pregnant Females (3rd trimester): 0.41-5.18 µIU/mL

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Sample Type : Urine

URINE EXAMINATION

Parameter	Result	Unit	Biological Ref. Interval	
Physical Examination				
Colour	PALE YELLOW		Pale yellow	
Transparency	Slightly Turbid		Clear	
Chemical Examination				
Blood	<i>Peroxidase like activity of hemoglobin</i>	Trace (+/-)	RBCs/ μ L	Absent
Bilirubin	<i>Azo coupling Reaction with diazonium</i>	NIL	mg/dL	Absent
Urobilinogen	<i>Modified Ehrlich reaction</i>	NORMAL	mg/dL	Absent
Ketone	<i>Sodium Nitroprusside reation</i>	NIL	mg/dL	Absent
Protein	<i>Protein Error of Indicator Principle</i>	NIL	mg/dL	Absent
Nitrite	<i>Diazotization reaction of nitrite with an aromatic amine</i>	NEGATIVE	mg/dL	Absent
Glucose	<i>Glucose-oxidase/oxidase reaction</i>	NIL	mg/dL	Absent
pH	<i>Double Indicator principle</i>	6.0	PH value	4.6 - 8.0
Specific Gravity	<i>Refractometric Method - Bromthymol blue</i>	1.030	S.G. value	1.003 - 1.035
Leucocyte	<i>Leucocyte Esterase Test</i>	NEGATIVE	WBCs/ μ L	Absent
Microscopic Examination				
Pus cells	4-5/hpf	/hpf		0-5/hpf
Red blood cells	3-4/hpf	/hpf		0-2/hpf
Epithelial cells	8-10/hpf	/hpf		NA
Crystals	Calcium oxalate			Nil
Cast	NIL/LPF			Nil/LPF
Bacteria	NIL			Nil
Amorphous	NIL			Nil
Yeast	NIL			Nil

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SHALBY
MULTI-SPECIALTY
HOSPITAL

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Sample Type : Serum

Parameter

Result

Unit

Biological Ref. Interval

Liver Function Test

SGPT (ALT)

Multi Point Rate with P-5-P

SGOT (AST)

Multi Point Rate with P-5-P

Alkaline Phosphatase

PNPP, AMP Buffer

GGT *

L-gamma-glutamyl-4-nitroanalide/glycylglycine Kinetic

S. PROTEIN

Biuret (Alkaline cupric sulfate), End Point

Albumin

Bromocresol Green (BCG), Colorimetric

S. GLOBULIN

Calculated

A/G Ratio

Calculated

Bilirubin Total

Azobilirubin/Dyphylline/Diazonium Salt

Bilirubin Unconjugated

End-point Colorimetric (Dual wavelength spectrophotometric)

BILIRUBIN DIRECT

Calculated

Liver Function Test

21

U/L

9 - 52

23

U/L

14 - 36

63

U/L

20-50 yrs.: 42 - 98
4-19 yr : 54 - 369
>=51 yr : 56 - 119

14

U/L

12 - 43

7.2

g/dL

6.3 - 8.2

4.1

g/dL

3.5 - 5.0

3.1

g/dL

2.3 - 3.6

1.3

Ratio

1.0 - 2.3

0.3

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

0.3

mg/dL

Unconjugated bilirubin
Adults: 0.0-1.1
Neonates: 0.6-10.5

0.0

mg/dL

Conjugated bilirubin and
Delta bilirubin (Bilirubin
covalently bound to albumin)
0.0-0.4

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Ref. By : Dr. Health Check Up . Shalby Sample Type : Stool

Parameter	Result	Unit	Biological Ref. Interval
STOOL EXAMINATION			
COLOUR *	BROWNISH		Brownish
CONSISTENCY *	SEMISOLID		Solid
BLOOD *	ABSENT		Absent
MUCOUS *	ABSENT		Absent
REACTION *	ACIDIC		7 - 7.5
PARASITES *	ABSENT		Absent
PUS *	ABSENT		Absent
STOOL (OCCULT BLOOD) *	NEGATIVE		Negative
<i>Peroxidase like activity of hemoglobin</i>			
MICROSCOPIC EXAMINATION			
TROPHOZITES *	NIL		Nil
OVA *	NIL		Nil
CYSTS *	NIL		Nil
PUS CELL *	NIL		Nil
RED CELL *	NIL		Nil
VEGETABLE CELL *	PRESENT		Present
MONILIA *	NIL		Nil

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

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Patient's Name: Mrs. Pramila Goyat

Age: 40 yrs/ Female

UHID: 336761

Date: 28 / 02 / 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 - Mumbai

Patient ID:	SUR0000336761	Patient Name:	PROMILA GOYAT
Age:	40 Years	Sex:	F
Accession Number:	2379	Modality:	DX
Referring Physician:		Study:	CHEST PA
Study Date:	28-Feb-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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Vapi - Indore - Jabalpur - Mohali - Naroda (Ahmedabad) - Surat - Jaipur - Mumbai

Pre - op

Post- op

Health Check-up

Date : 28/02/23

Patient Reg. No. : _____

Patient Name : Promila Goyel Age / Sex : 40 / F

Address : Narvazi

Complaints :

Pain : _____

Bleeding gums : _____

Sensitivity : _____

Swelling : _____

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 : 46, 47 Mobility : _____

Treatment Advised :

Scaling : Sitzings 1 2 3 Deep

Restoration : _____ Perio Surgery : _____

RCT : _____ Class V Fillings : _____

Dentures : _____ Extraction : 38

Implants : _____ Partial Denture : _____

Crown & Bridge Present : _____

Crown / Bridge Replacement :		
Advised Crown / Bridge :		
Advised X - Ray / O.P.G. :		
		Date: 22/02/23
		Patient Name: Darshini V. Shah
		Address: Mumbai

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
- Extraction of 38
- Implant on 46, 47

Dr. Darshini V. Shah
(Consultant Dental Surgeon)

DR. HIMANI THAKER (VYAS)

M.S (Gynec)
Consultant Obstetrician & Gynecologist
Laposcopic Surgeon
Infertility Specialist
Email-ID:- thaker.himani@gmail.com
Register No. G-31062

Shalby Women's Health Clinic

Name:- *Pronile koyal*
Chief Complaints:-

Age - 40yrs

Date: *28/2/23*
Weight:-
Height:-
OPR NO:-

Nutritional Assessment:-

- Obese
- Well Nourished
- Mild-Moderate Nourished
- Severely Mal-Nourished

cl - nil

LMP:- *22/2/23*

M/H:- *period - 3-4 days RCM*
25

O/H :-
OH - unmarried.

P/H:-
F/H
Examination:-

Provisional Diagnosis:- *PIA - soft*

PAP smear not taken as pt. is unmarried

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

Patient Name: Promila Goyat	
Age / Sex: 40 Yrs / Female	Study: USG Abdomen + Pelvis
Referred By: Dr. at shalby hospital	Date: 28/02/2023

ULTRASOUND OF ABDOMEN AND PELVIS (TAS)

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 well 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. **MPD** appears in size. No mass lesion or calcification seen.

Spleen appears normal in size and appearance. No focal lesion seen.

Right kidney appears normal. It shows normal echotexture and corticomedullary differentiation. There is no evidence of scarring, hydronephrosis or calculi.

Left kidney appears normal. It shows normal echotexture and corticomedullary differentiation. There is no evidence of scarring, hydronephrosis or calculi.

Ureters are not dilated.

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

Uterus appears normal in size. The uterine myometrial echotexture is homogenous. No focal lesion is seen.

Both ovaries are well visualized and appear normal in size and reflectivity. There is no evidence of any ovarian or adnexal mass lesion.

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

IMPRESSION:

- **No significant abnormality detected.**

Thanks for referrals.


Dr. Nimit R Desai
Consultant Radiologist

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

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

Name :- *Promila Goyat*

Date:- *28/2/23*

Chief Complaints:-

N/C

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*
0 glasses

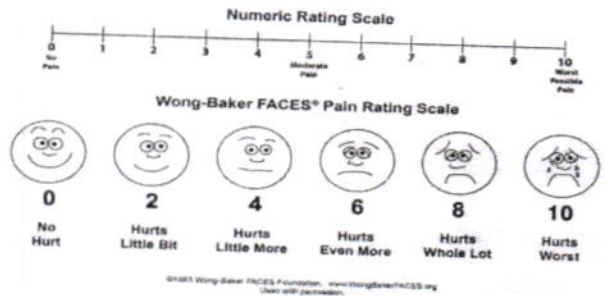
PH Vision:-

NCT *< 13 mm of Hg*

ON Examination Ant. Segmenet

Both Eye

- WNL -



RX-850K

2016-02-25 18:13

SHOP: SHELAT GEN HOSP

NAME:

REF. DATA			
<R>	S	C	A
	-2.75	+0.00	
	-2.75	+0.00	
*	-2.75	+0.00	
<L>	S	C	A
	-2.75	+0.00	
	-2.75	+0.00	
*	-2.75	+0.00	

Anterior Chamber

Rt. EYE

Lt. EYE

Disc:-

Blood Vessel:-

Background:-

Macula:-

Diagnosis:-

*BE
WNL*

Investigation:-

Treatment:-

Nutritional Assessment:-

Preventive Care & Counsellings:-

Follow Up ON:- *After 6 month*

Rana

Signature of the Consultant

SHELBY HOSPITAL

ID:

Name: *poornika*

Sex: M Birth date: / /

kg

mmHg

cm

years

28-Feb-2023 AM8:53:41

1100 Sinus *thm*
9110 ** normal ECG **

Medication:

Symptoms:

History:

fent. rate 61 bpm

PR int 160 ms

QRS dur 74 ms

QT/QTc(E) int 400/404 ms

P/QRS/T axis 26/ 51/ 49 °

RV5/SV1 amp 1.23/ 0.73 mV

RV5+SV1 amp 1.96 mV

Unconfirmed Report
Reviewed by:

10 mm/mV 25 mm/s Filter: H50 d 35 Hz

10 mm/mV

