

Shalby MD Physician Clinic

Patient Name:-

Age / Sex :-

Chief Complaints:-

Arun Kumar B. Patel
35 M
No clw

Drug / Food Allergy:-

Past History :-

NAD

Family History:-

Systemic Examination:-

RS
CVS
PA
CNS | NAD

Provisional Diagnosis:-

OPR NO:

Date: 28/9/24

Weight:- 69.

Height:- 167cm

Nutritional assessment:-

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

Pulse:- 72

BP:- 120/80

SpO2:- 100%

Investigation :-

Investigation :-

Treatment and further advices:-

(Write in Capital Letters)

Treatment and further advices:-

(Write in Capital Letters)

Rx
Rx

*Ey witnewin 6 op
1 op 11 on
alt. day
T. on 30/05/21 (34)
- 1 -*

[Signature]

Follow Up: *after 1 month.*

Follow Up:

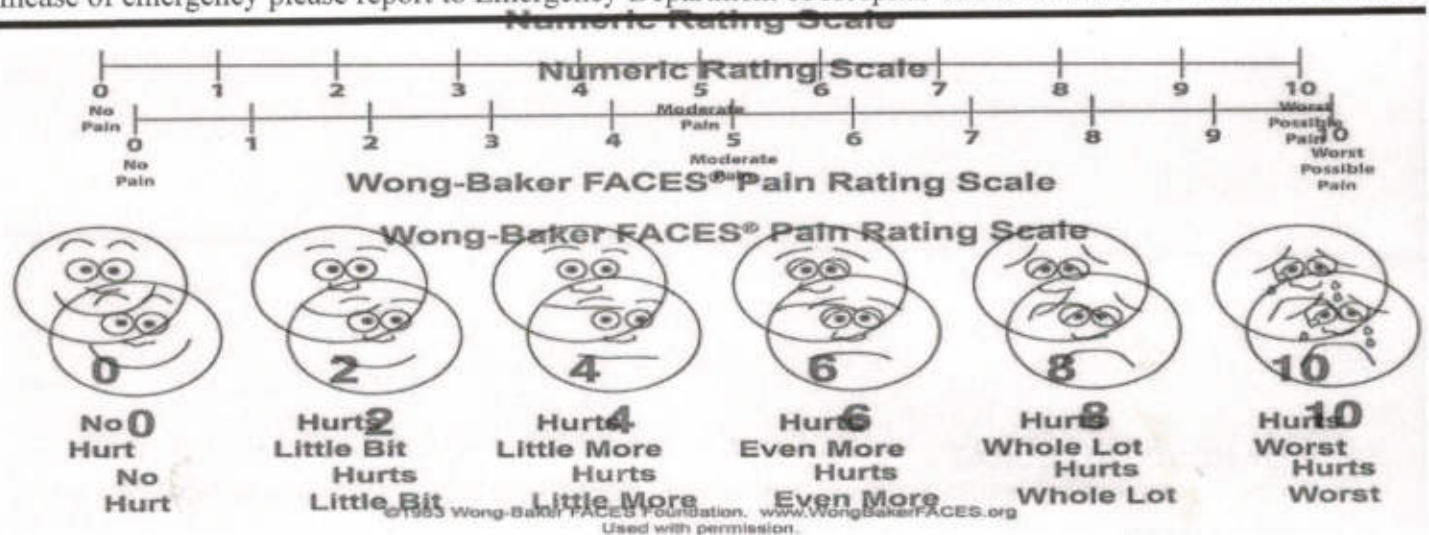
બધી દવાઓ ડોક્ટરને બતાવીને લેવી.

બધી દવાઓ ડોક્ટરને બતાવીને લેવી.

Date:- _____

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

In case of emergency please report to Emergency Department of Hospital OR Call:- 0261-7190000 / 951266009



Patient Name: ARUNBHAI BHARATBHAI PATEL	UHID: SUR0000357084
Age / Sex: 35 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 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.
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 27 X 35 X 31 mm (Approx. vol- 16 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

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



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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 : SUR0000357084 OP-003

REPORT STATUS : Interim



Patient Name : **Mr Arunbhai Bharatbhai Patel** / Registered On : 28-Sep-2024 09:08 AM
 Lab ID : 409902289 Collected On : 28-Sep-2024 09:22 AM
 Gender/Age : Male, / 35 Years DOB : 21-Aug-1989 Received On : 28-Sep-2024 09:33 AM
 Ref. By : Health Check Up Shalby Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
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BLOOD COUNT AND INDICIES

HAEMOGLOBIN	Colorimetric Non Cyanide	16.4	g/dL	13.0 - 17.0
RBC COUNT	Electrical Impedance	5.66	mill/cmm	4.5 - 5.5
HCT	Calculated	50.1	%	40 - 50
MCV	Calculated based on the RBC histogram	88.5	fL	83 - 101
MCH	Calculated	29.0	pg	27 - 32
MCHC	Calculated	32.7	g/dL	31.5 - 34.5
RDW	Calculated	12.2	%	13.3 - 18.3

TOTAL LEUCOCYTE COUNT

Total WBC Count	Electrical Impedance	6780	cells/cmm	4000 - 10000
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DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)

NEUTROPHILS	Flow Cytometry	61	%	40 - 80
LYMPHOCYTES	Flow Cytometry	28	%	20 - 40
EOSINOPHILS	Flow Cytometry	6	%	1 - 6
MONOCYTES	Flow Cytometry	4	%	2 - 10
BASOPHIL	Flow Cytometry	1	%	0 - 2

PLATELET INDICES

PLATELET COUNT	Electrical Impedance	230000	/cmm	150000 - 410000
MPV	Calculated based on PLT Histogram	9.8	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 AgrawalM.B., D.C.P
Consulting Pathologist



Certificate No.: MC-5200

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DOB : 21-Aug-1989

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Ref. By : Health Check Up Shalby

Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
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BLOOD GROUP

(Tube agglutination: Forward & reverse)

ABO Type

"B"

RH Type

POSITIVE

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Parameter	Result	Unit	Biological Ref. Interval
ESR 1st hour <i>Modified Westergren Method</i>	6	mm in 1 hour	0 - 15
HBA1C			
HbA1c - Glycated Haemoglobin <i>Boronate Affinity Assay</i>	5.9	%	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
Estimated Average Glucose (eAG) (mg/dL) <i>Calculated</i>	123	mg/dL	

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Certificate No.: MC-520

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 Gender/Age : Male / 35 Years DOB : 21-Aug-1989 Received On : 28-Sep-2024 09:34 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**

Plasma Glucose (F)	95	mg/dL	74 - 106
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GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

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

POST PRANDIAL PLASMA GLUCOSE

Plasma Glucose (PP)	96	mg/dL	Normal: 100-140 Impaired: 140-199 Diabetic :=>200
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GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

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

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

Parameter	Result	Unit	Biological Ref. Interval
LIPID PROFILE			
LIPID PROFILE			
Cholesterol <i>Cholesterol Esterase, Oxidase, Peroxidase</i>	185	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
SERUM TRIGLYCERIDE <i>Lipase/GK/GPO/POD</i>	164	mg/dL	Normal : <150 Borderline High : 150-199 High : 200-499 Very High : > 500
HDL CHOLESTEROL DIRECT <i>Phosphotungstic Acid/MgCl2 - Enzymatic</i>	38	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : >= 60
Non HDL Cholesterol <i>Calculated</i>	147	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
LDL Cholesterol <i>Calculated</i>	114	mg/dL	Optimal: <100 Near to above Optimal: 100 - 129 Borderline High: 130 - 159 High: 160 - 189 Very High: > 190
VDL <i>Calculated</i>	33	mg/dL	6 - 38
LDL/dHDL <i>Calculated</i>	3.0		2.5 - 3.5
Chol/dHDL <i>Calculated</i>	4.9	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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Ref. By : Health Check Up Shalby	Received On : 28-Sep-2024 09:34 AM
	Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
THYROID PROFILE (TFT)			
Total T3 <i>Chemiluminescence immunoassay (CLIA)</i>	104	ng/dL	87 - 178
Total T4 <i>Chemiluminescence immunoassay (CLIA)</i>	10.74	µg/dL	99% Reference Interval (µg/dL) 4.82 - 15.65
TSH <i>Chemiluminescence immunoassay (CLIA)</i>	1.774	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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Ref. By : Health Check Up Shalby	

Parameter	Result	Unit	Biological Ref. Interval
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BIOCHEMISTRY**RENAL FUNCTION TEST****NABL Accredited Parameters**

Urea Nitrogen (BUN) <i>Urease, colorimetric</i>	11	mg/dL	9 - 20
UREA <i>Calculated</i>	24	mg/dL	19 - 43
Creatinine <i>Enzymatic - Creatinine amidohydrolase</i>	0.70	mg/dL	0.66 - 1.25
S. URIC ACID <i>Uricase/Peroxidase, Colorimetric</i>	7.3	mg/dL	3.5 - 8.5
Calcium <i>Arsenazo III dye</i>	9.7	mg/dL	8.4 - 10.2
Sodium <i>Direct Ion Selective Electrode</i>	148	mmol/L	137 - 145
S. POTASSIUM <i>Direct Ion Selective Electrode</i>	4.4	mmol/L	3.5 - 5.1
Chloride	105	mmol/L	98 - 107
Phosphorus (Not in NABL Scope) <i>Phosphomolybdate reduction (PMA Phenol)</i>	3.8	mg/dL	2.5 - 4.5

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Parameter	Result	Unit	Biological Ref. Interval
Liver Function Test			
Liver Function Test			
SGPT (ALTV) <i>Multi Point Rate with P-5-P</i>	33	U/L	21 - 72
SGOT (AST) <i>Multi Point Rate with P-5-P</i>	27	U/L	17 - 59
Alkaline Phosphatase <i>PNPP, AMP Buffer</i>	74	U/L	20-50 yrs : 53 - 128 4-19 yr : 54 - 369 >=51 yr : 56 - 119
GGT <i>L-gamma-glutamyl-4-nitroanilide/glycylglycine Kinetic</i>	40	U/L	15 - 73
S. PROTEIN <i>Biuret (Alkaline cupric sulfate), End Point</i>	7.0	g/dL	6.3 - 8.2
Albumin <i>Bromocresol Green (BCG), Colorimetric</i>	4.3	g/dL	3.5 - 5.0
S. GLOBULIN <i>Calculated</i>	2.7	g/dL	2.3 - 3.6
A/G Ratio <i>Calculated</i>	1.6	Ratio	1.0 - 2.3
Bilirubin Total <i>Azobilirubin/Dyphylline/Diazonium Salt</i>	1.1	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
Bilirubin Unconjugated <i>End-point Colorimetric (Dual wavelength spectrophotometric)</i>	1.1	mg/dL	Adult : 0.2 - 1.3 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

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Gender/Age : Male / 35 Years	DOB : 21-Aug-1989	Received On : 28-Sep-2024 09:33 AM
Ref. By : 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			
Glucose	<i>Glucose-oxidase/oxidase 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> 1.025	S.G. value	1.001 - 1.035
Blood	<i>Peroxidase like activity of hemoglobin</i> Negative		Negative
pH	<i>Double Indicator principle</i> 6.5	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
Microscopic Examination			
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

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

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Consulting Pathologist



Pre - op

Post-op

Health Check-up

Date : 28.09.24

Patient Reg. No. : _____

Patient Name : Ankur Kumar B Patel

Age / Sex : 35/M

Address : Olped

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 : _____ Mobility : _____

Treatment Advised :

Scaling : Sitzings 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 :

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

Jadav

Dr. Darshini V. Shah
(Consultant Dental Surgeon)

SHALBY HOSPITAL
NR. NAVYUG COLLAGE, RANDEK ROAD
SURAT

Station
Telephone:

EXERCISE STRESS TEST REPORT

Patient Name: ARUNKUMAR PATEL,
Patient ID: 357084
Height:
Weight:

DOB: 21.08.1989
Age: 35yrs
Gender: Male
Race: Asian

Study Date: 28.09.2024
Test Type: --
Protocol: BRUCE

Referring Physician: --
Attending Physician: --
Technician: --

Medications:
--

Medical History:
--

Reason for Exercise Test:
--

Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (km/h)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	00:06	0.00	0.00		120/80	
	STANDING	00:12	0.00	0.00	79		
EXERCISE	STAGE 1	03:00	2.70	0.00	101		
	STAGE 2	03:00	4.00	12.00	136	130/80	
	STAGE 3	02:21	5.40	14.00	157	150/80	
RECOVERY		04:03	0.00	0.00	110	120/80	

The patient exercised according to the BRUCE for 8:20 min:s, achieving a work level of Max. METS: 10.00. The resting heart rate of 78 bpm rose to a maximal heart rate of 157 bpm. This value represents 84 % of the maximal, age-predicted heart rate. The resting blood pressure of 120/80 mmHg, rose to a maximum blood pressure of 150/80 mmHg. The exercise test was stopped due to Target heart rate achieved.

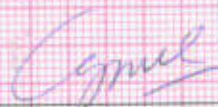
Interpretation

Summary: Resting ECG: normal.
Functional Capacity: normal.
HR Response to Exercise: appropriate.
BP Response to Exercise: normal resting BP - appropriate response.
Chest Pain: none.
Arrhythmias: none.
ST Changes: none.
Overall impression: Normal stress test.

Conclusions

TMT IS NEGATIVE FOR INDUCIBLE ISCHEMIA

Physician



Technician

ARUNKUMAR PATEL,

Patient ID: 357084

28.09.2024

Male

35yrs Asian

Meds:

Test Reason:

Medical History:

Ref. MD: Ordering MD:

Technician: Test Type:

Comment:

BRUCE: Total Exercise Time 08:20
 Max HR: 157 bpm 84% of max predicted 185 bpm HR at rest: 78
 Max BP: 150/80 mmHg BP at rest: 120/80 Max RPP: 23250 mmHg*bpm
 Maximum Workload: 10.00 METS
 Max. ST: -3.30 mm, 0.00 mV/s in II; EXERCISE STAGE 3 08:21
 Arrhythmia: A:15, VBIQ:5, PVC:18, PSVC:4
 ST/HR index: 4.28 μ V/bpm
Reasons for Termination: Target heart rate achieved
Summary: Resting ECG: normal. Functional Capacity: normal. HR Response to Exercise: appropriate. BP Response to Exercise: normal resting BP - appropriate response. Chest Pain: none. Arrhythmias: none. ST Changes: none. Overall impression: Normal stress test.
Conclusion: TMT IS NEGATIVE FOR INDUCIBLE ISCHEMIA
 Location Number: * 0 *

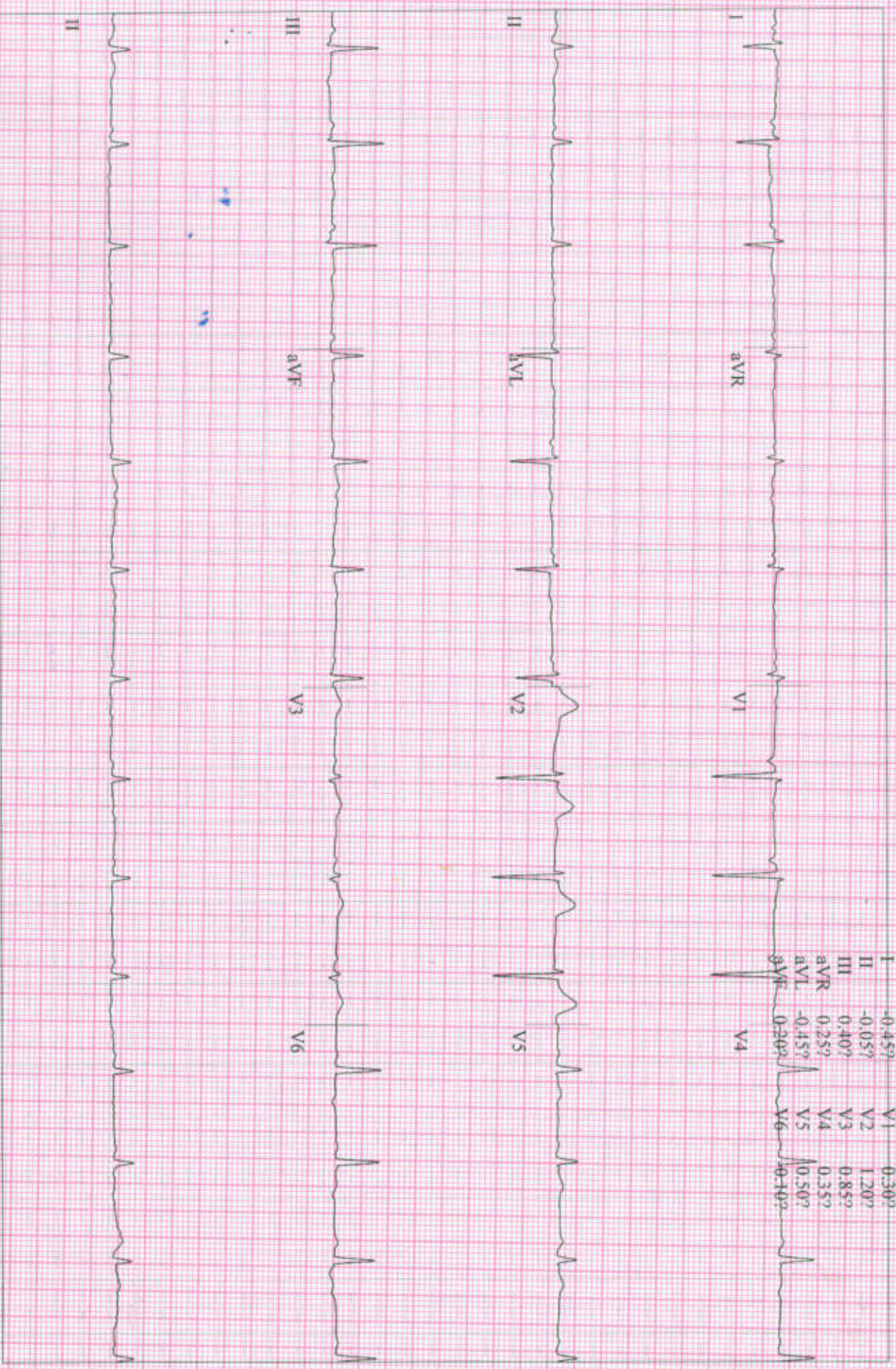
Phase Name	Stage Name	Time in Stage	Speed (km/h)	Grade (%)	Workload (METs)	HR (bpm)	BP (mmHg)	RPP (mmHg*bpm)	VE (l/min)	ST Level (II mm)	Comment
PRETEST	SUPINE	00:06	0.00	0.00	1.0	79	120/80		0	-	
	STANDING	00:12	0.00	0.00	1.0	79			0	-0.05	
	STAGE 1	03:00	2.70	0.00	2.2	101			0	0.50	
	STAGE 2	03:00	4.00	12.00	7.0	136	130/80	17680	9	-1.45	
	STAGE 3	02:21	5.40	14.00	10.0	157	150/80	23550	2	-3.30	
RECOVERY		04:03	0.00	0.00	1.0	110	120/80	13200	0	-0.50	

78 bpm
120/80 mmHg

12-Lead Report
PRETEST
STANDING
00:14

BRUCE
0.0 km/h
0.0 %

Measured at 60ms Post J (10mm/mV)
Auto Points



ARUNKUMAR PATEL,

Patient ID 357084

28.09.2024

9:42:52

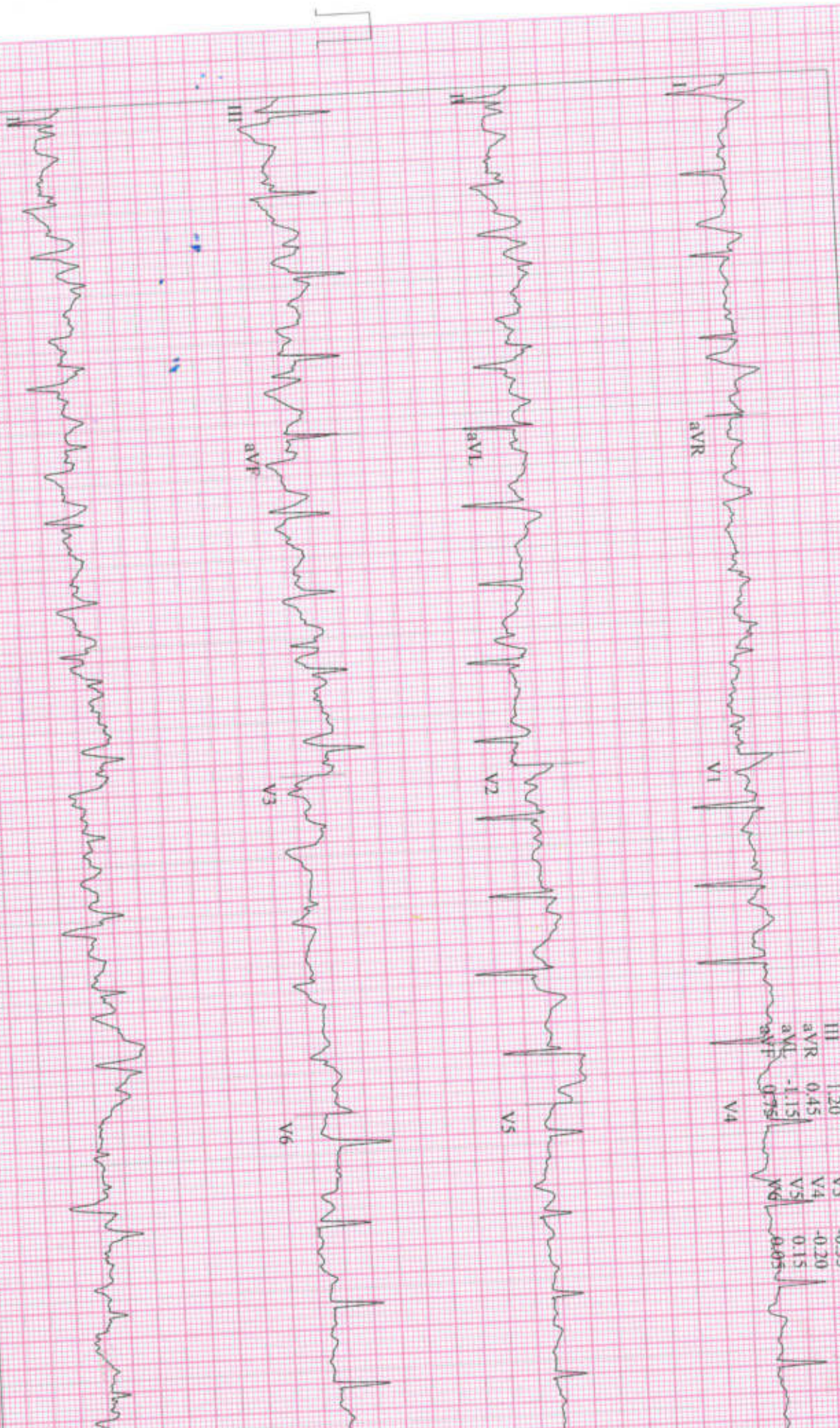
100 bpm

12-Lead Report
EXERCISE
STAGE 1
02:50

BRUCE
2.7 km/h
0.0 %

Measured at 60ms Post J (10mm/mV)
Auto Points

Lead	ST(mV)	Lead	ST(mV)
I	+0.05	V1	-0.60
II	0.20	V2	-0.45
III	1.20	V3	-0.35
aVR	0.45	V4	-0.20
aVL	-1.15	V5	0.15
aVF	0.75	V6	0.05



Start of Test: 9:33:40

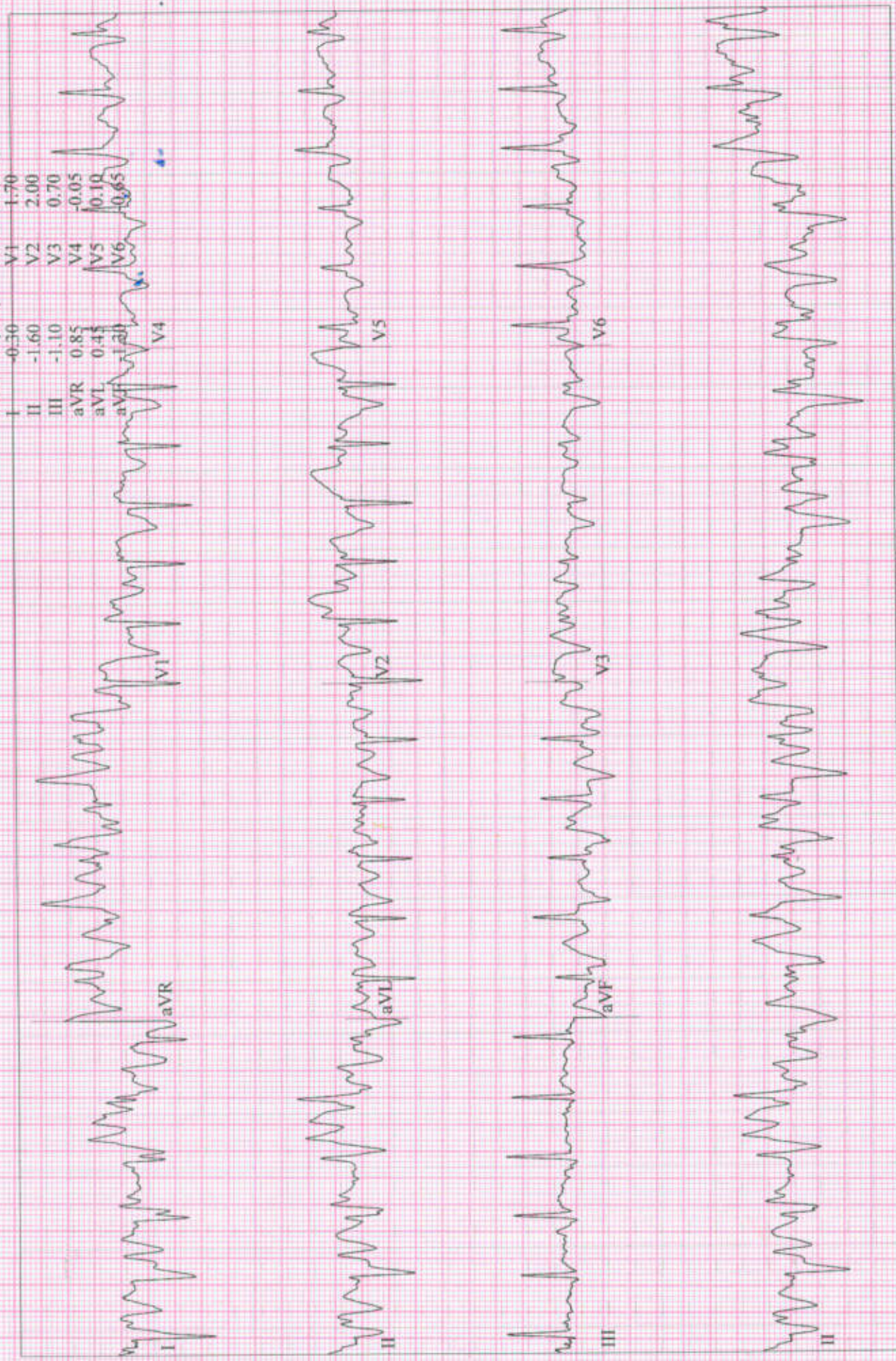
Page

136 bpm

BRUCE
4.0 km/h
12.0 %

Measured at 60ms Post J (10mm/mV)
Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	-0.30	V1	1.70
II	-1.60	V2	2.00
III	-1.10	V3	0.70
aVR	0.85	V4	-0.05
aVL	0.43	V5	0.10
aVF	-1.30	V6	0.65



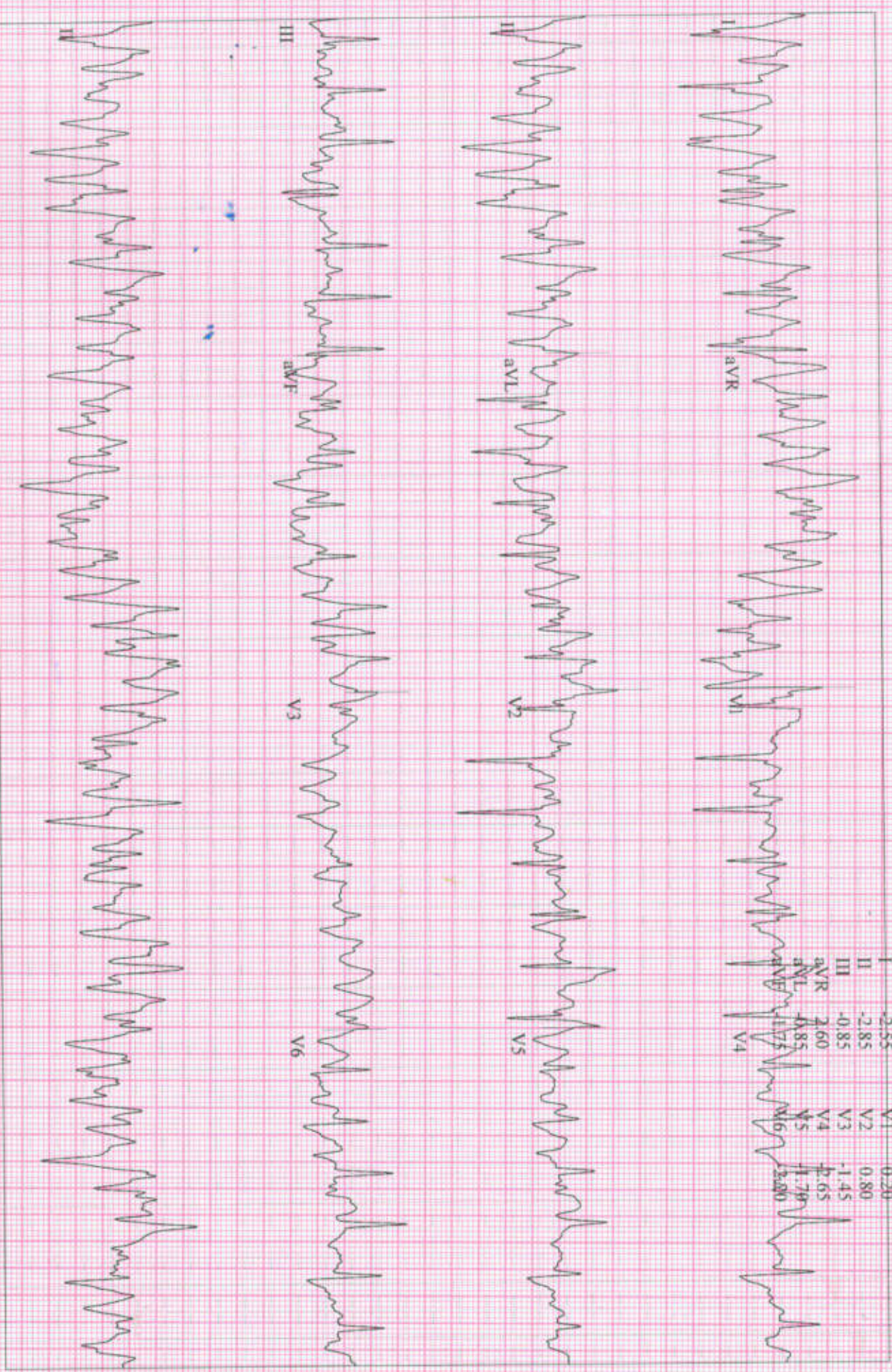
ARUNKUMAR PATEL,
 Patient ID: 357084
 28.09.2024
 9:48:23

157 bpm
 150/80 mmHg

12-Lead Report (PEAK EXERCISE)
 EXERCISE BRUCE
 STAGE 3 5.4 km/h
 08:21 14.0 %

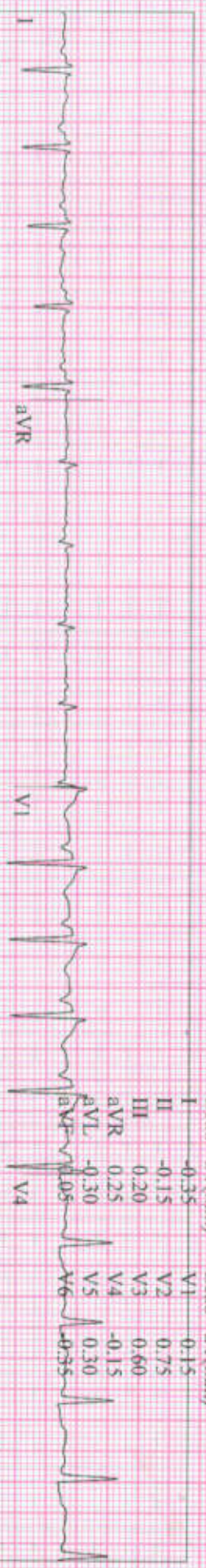
Measured at 60ms Post J (10mm/mV)
 Auto Points

SHALBY HOSPITAL

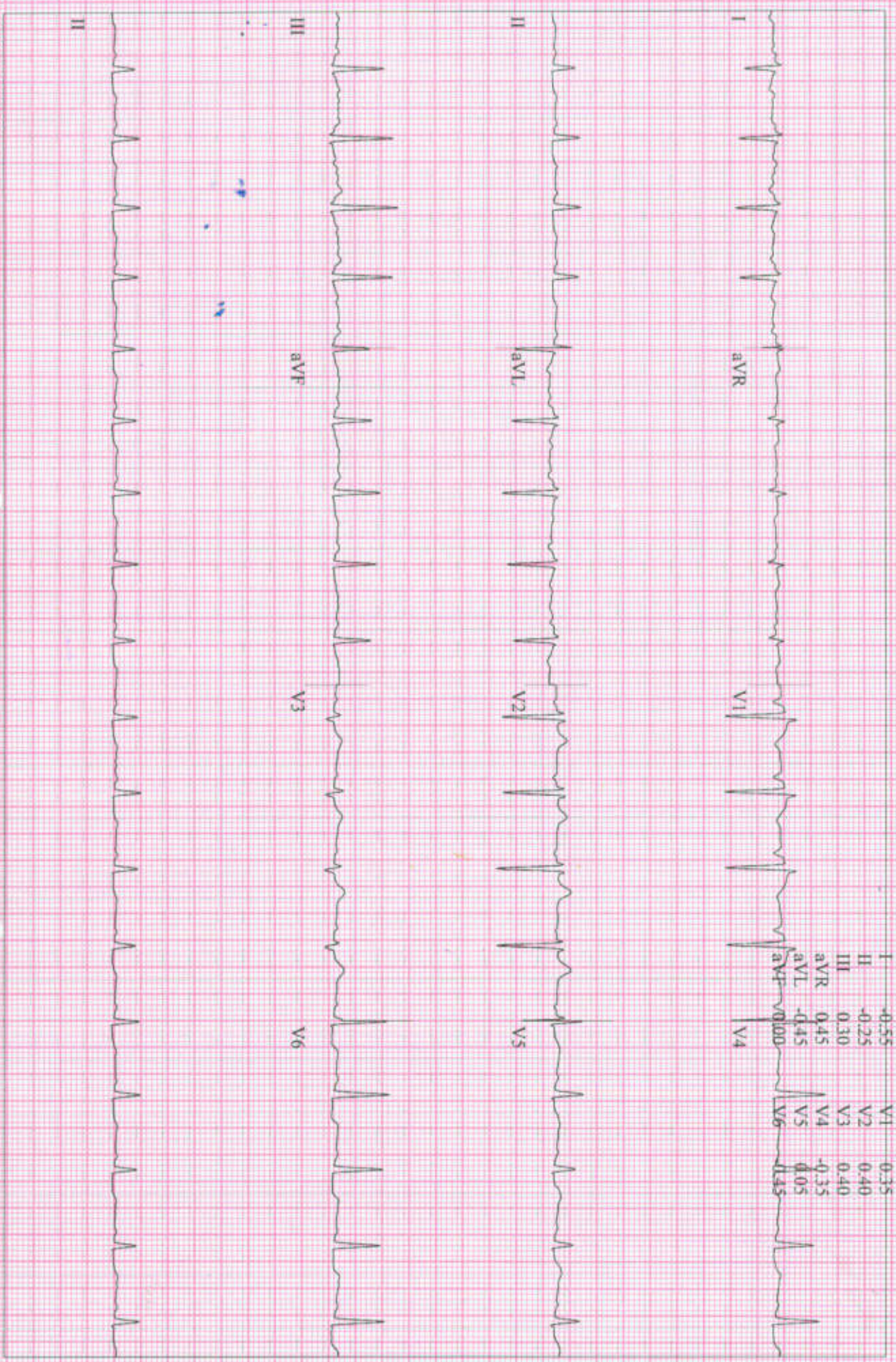


GE CardioSoft V6.73 (2)
 25 mm/s 10 mm/mV 50Hz 0.01 - 20Hz S+ HR(V2,V1)

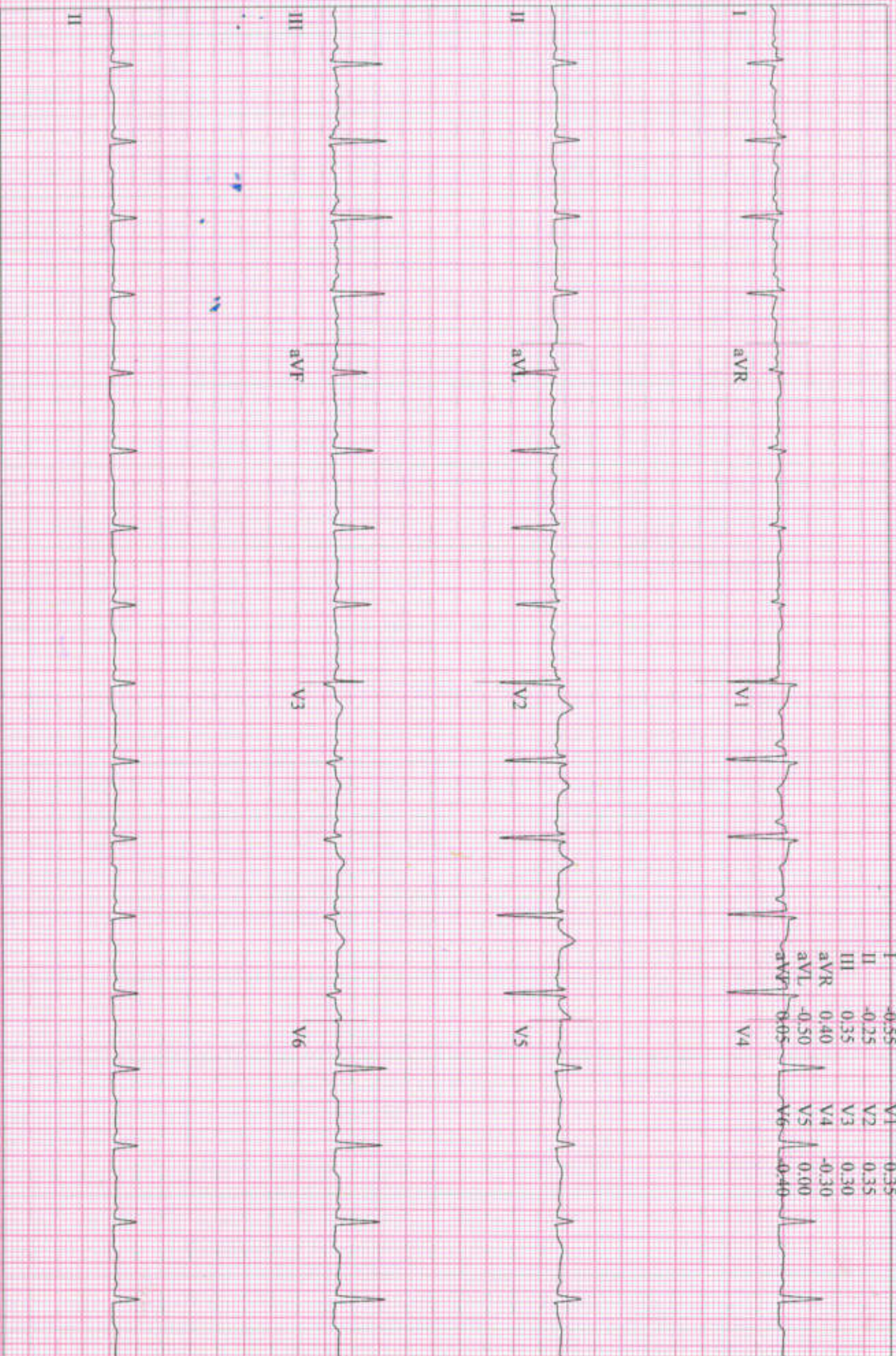
Start of Test: 9. /40



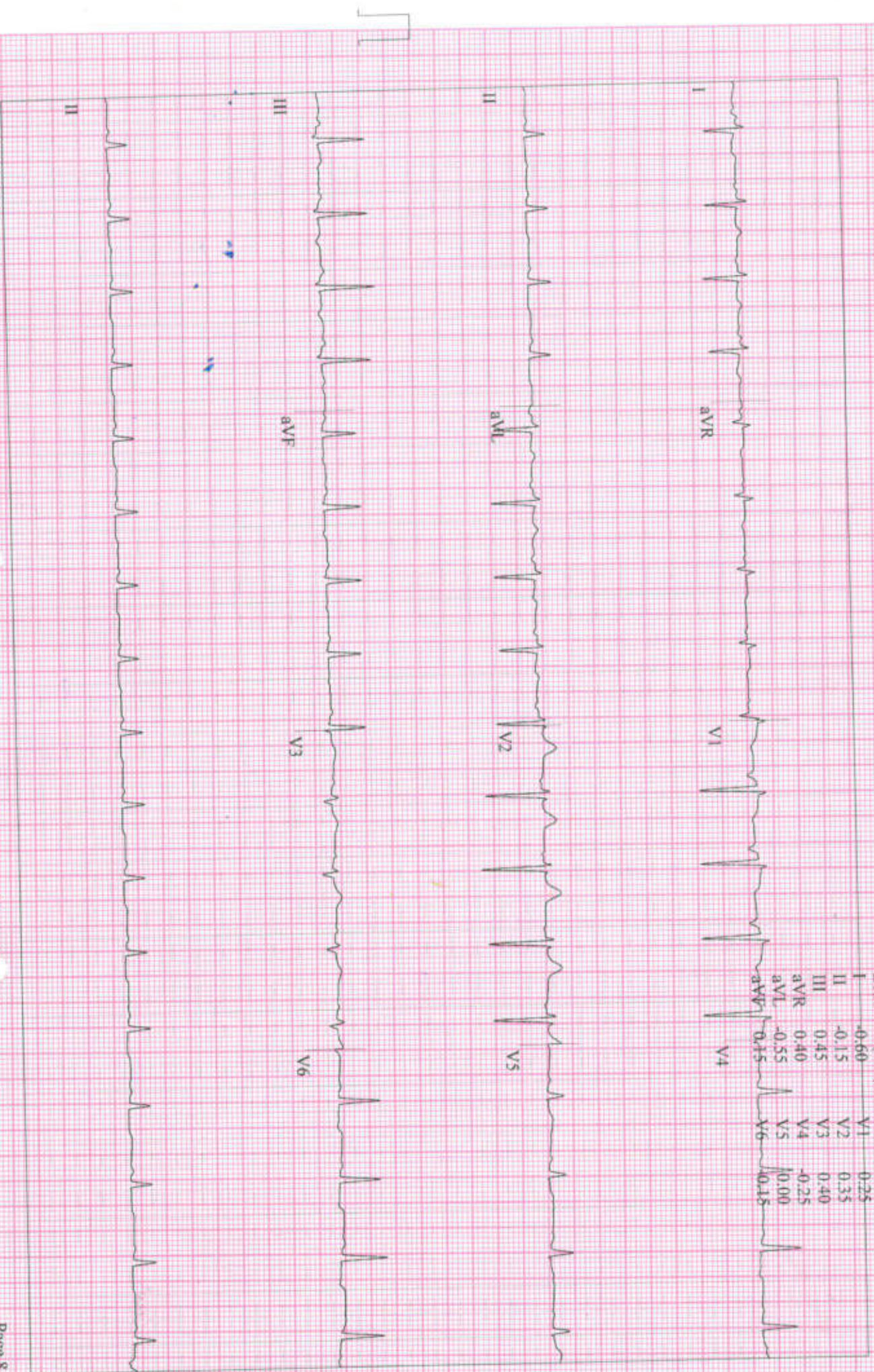
Lead	ST(mmt)	Lead	ST(mmt)
I	-0.35	V1	-0.15
II	-0.15	V2	0.75
III	0.20	V3	-0.60
aVR	0.25	V4	-0.15
aVL	-0.30	V5	0.30
aVF	0.05	V6	-0.55



Lead	ST(mm)	Lead	ST(mm)
I	-0.55	V1	0.35
II	-0.25	V2	0.35
III	0.35	V3	0.30
aVR	0.40	V4	-0.30
aVL	-0.50	V5	0.00
aVF	0.05	V6	-0.40



Lead	ST(mm)	Lead	ST(mm)
I	-0.60	V1	0.25
II	-0.15	V2	0.35
III	0.45	V3	0.40
aVR	0.40	V4	-0.25
aVL	-0.55	V5	10.00
aVF	0.15	V6	-0.15



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

Name:-

Arun Kumar B PATER

Date:- 28/09/22

Chief Complaints:-

Lenture Eye check up



Pain Assessment:-

Past History:-

Family History:-

Allergy:- No drug allergy

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

General Examination:-

BP: - Pulse: - Temp: -
 Bp 120/80, PR 70, HR 98

Visual Acuity: -
 22.1
 18.4

NCT

ON Examination

Ant. Segment

ST ±
 -2.00 / -0.50 x 100 / 120

PCLO

Systemic Examination:-

HT: - WT: -
 PH Vision: -
 6/6

Both Eye

CLM

ME: 2024/Sep/28 12:12
 00382
 VITZ HNT-1P
 R 1.1.1

ONO-PACHY model	
<R>	<L>
21.7	17.1
22.4	16.9
29.2*	18.4

G (mmHg)	
<R>	<L>
22.1	17.5
523	520
524	518
521	520

G (mm)	
<R>	<L>
522.7	519.3

VITZ Co. Ltd.
 Iran 2-31-428-9100

Anterior Chamber

Rt. EYE

Lt. EYE

①

Investigation:-

PT will come

Background:-

Macula:-

Diagnosis:-

① pseudophakia

② Star degenerative lesion

Treatment:-

Adv ① ② continue same glass

Nutritional Assessment:-

Preventive Care & Counselling:-

Follow Up ON:-

~~Dr~~ Dr

Signature of the Consultant

Dr Ryma Shekhat
 Dr Mantho/Son

ID:
 Name:
 Sex: M
 Birth date: / /
 kg
 mmHg

Medication:

Symptoms:

History:

Heart rate 68 bpm
 PR int 128 ms
 QRS dur 70 ms
 QT/QTc(E) int 344/ 361 ms
 P/QRS/T axis 25/ 50/ 46 °
 RV5/SV1 amp 1.48/ 0.66 mV
 RV5+SV1 amp 2.14 mV

Arunkumar Patel

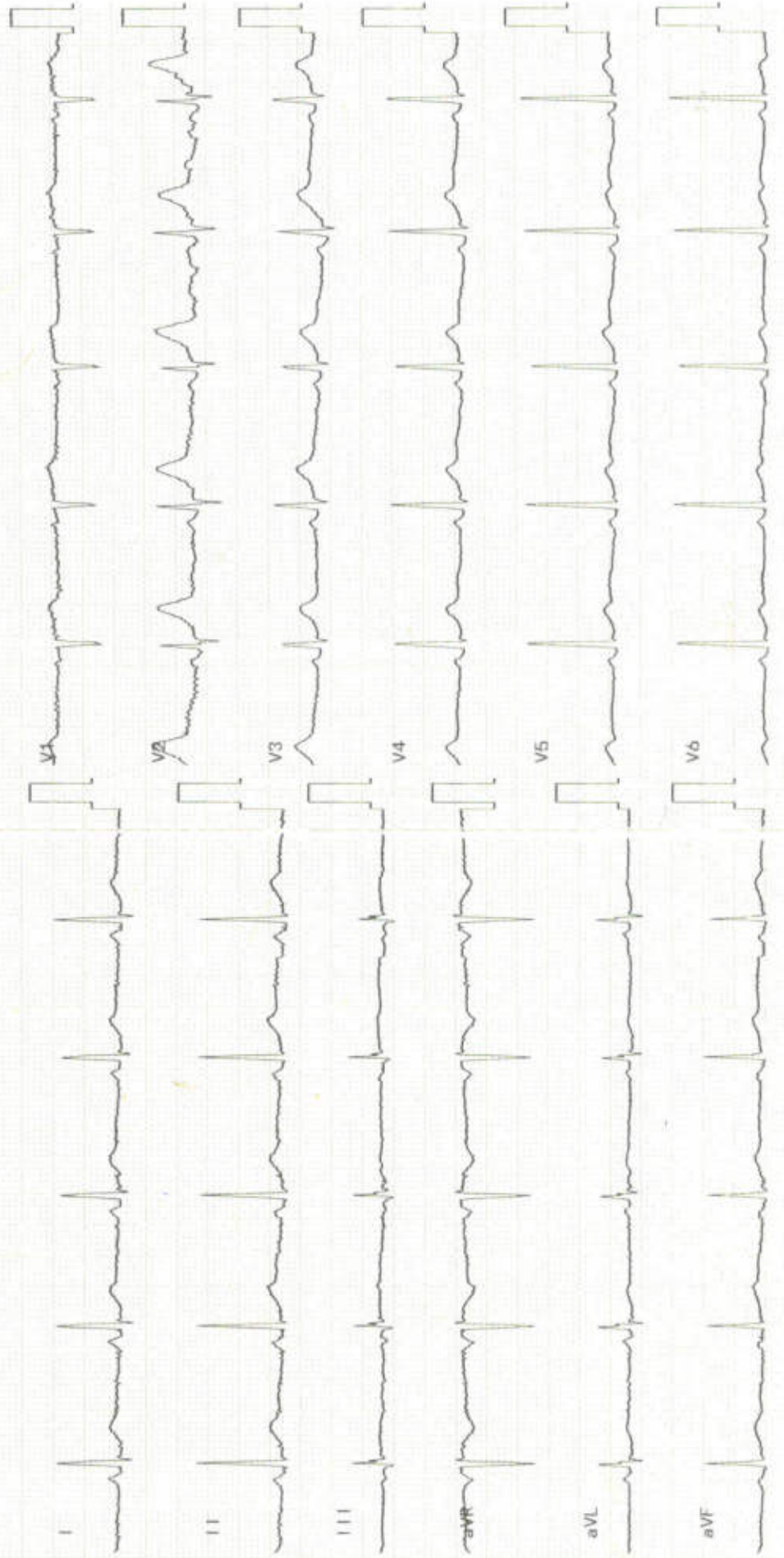
Unconfirmed Report

Reviewed by:

EW

10 mm/mV 25 mm/s Filter: H50 d 100 Hz

10 mm/mV



Patient ID:	SUR0000357084	Patient Name:	ARUNBHAI B. PATEL
Age:	35 Years	Sex:	M
Accession Number:	9753 MHC	Modality:	DX
Referring Physician:	DR SHALBY	Study:	CHEST PA
Study Date:	28-Sep-2024		

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

Tel: 079-40202000 | Fax: 079-40202100 | info@shalby.com | www.shalby.com