

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:-

Jagdish Patel  
28/11

Age / Sex :-

Chief Complaints:-

90  
Dyspnea

Date: 30/11/23

Weight:- 52 kg

Height:- 167 cm

Nutritional assessment:-

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

Pulse:- 82 bpm

BP:- 180/90 mmHg

SpO2:- 100%

Drug / Food Allergy:-

Past History :-

nil

Family History:-

Systemic Examination:-

ck  
L  
C  
S  
A

Provisional Diagnosis:-

**SHALBY HOSPITAL, SURAT**

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

Investigation :-

Ram

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

a

Regals Equome

Low fast low calwer det.  
High fiber det.

Rx

8

43324

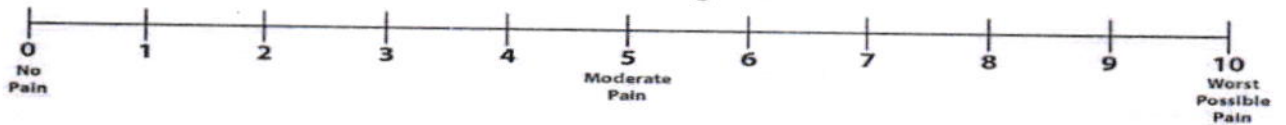
Follow Up:

બધી દવાઓ ડોક્ટરને બતાવીને લેવી.

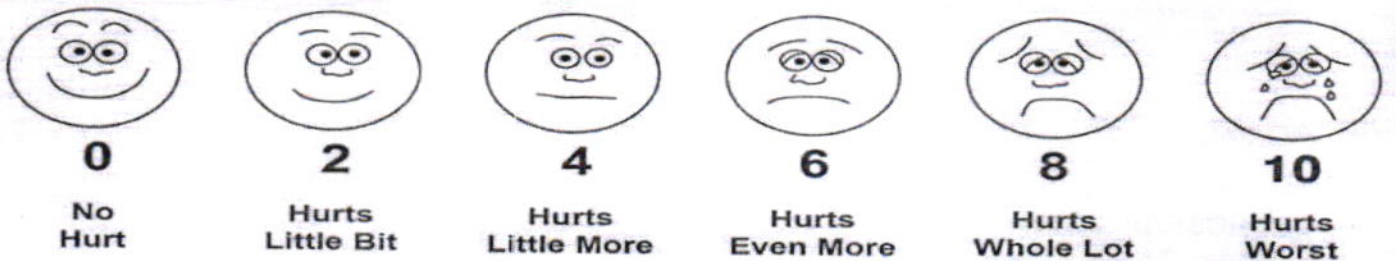
Date:- \_\_\_\_\_

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

### Numeric Rating Scale



### Wong-Baker FACES® Pain Rating Scale



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Tel.: 0261 7190000 | Ext.: 851 | Mo.: 9512036046 | Email : pathology.surat@shalby.in | Web : www.shalby.org

PID : SUR0000338880 OP-001

REPORT STATUS : Interim



Patient Name : Mr Jagdish Vijaybhai Patil	/	Registered On : 30-Mar-2023 09:51 AM
Lab ID : 303902337		Collected On : 30-Mar-2023 09:48 AM
Gender/Age : Male / 28 Years	DOB : 20-Aug-1994	Received On : 30-Mar-2023 10:01 AM
Ref. By : Dr. Health Check Up . Shalby		Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
<b>BLOOD COUNT AND INDICIES</b>			
HAEMOGLOBIN <i>Colorimetric Non Cyanide</i>	16.0	g/dL	13.0 - 17.0
RBC COUNT <i>Electrical Impedance</i>	5.29	mill/cmm	4.5 - 5.5
HCT <i>Calculated</i>	48.1	%	40 - 50
MCV <i>Calculated based on the RBC histogram</i>	90.9	fL	83 - 101
MCH <i>Calculated</i>	30.2	pg	27 - 32
MCHC <i>Calculated</i>	33.3	g/dL	31.5 - 34.5
RDW <i>Calculated</i>	11.9	%	13.3 - 18.3

**TOTAL LEUCOCYTE COUNT**

Total WBC Count <i>Electrical Impedance</i>	5050	cells/cmm	4000 - 10000
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**DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)**

NEUTROPHILS <i>Flow Cytometry</i>	58	%	40 - 80
LYMPHOCYTES <i>Flow Cytometry</i>	34	%	20 - 40
EOSINOPHILS <i>Flow Cytometry</i>	4	%	1 - 6
MONOCYTES <i>Flow Cytometry</i>	4	%	2 - 10
BASOPHIL <i>Flow Cytometry</i>	0	%	0 - 2

**PLATELET INDICES**

PLATELET COUNT <i>Electrical Impedance</i>	381000	/cmm	150000 - 410000
MPV <i>Calculated based on PLT Histogram</i>	7.3	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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*Pankaj Agrawal*  
Dr Pankaj Agrawal  
M.B., D.C.P  
Consulting Pathologist

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**BLOOD GROUP**

(Tube agglutination: Forward &amp; reverse)

ABO Type	"B"		
RH Type	POSITIVE		
ESR 1st hour *	8	mm in 1 hour	0 - 15
<i>Modified Westergren Method</i>			
<b>HBA1C</b>			
HbA1c - Glycated Haemoglobin *	5.4	%	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) *	108	mg/dL
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*Calculated*

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Gender/Age : Male / 28 Years

DOB : 20-Aug-1994

Received On : 30-Mar-2023 10:03 AM

Ref. By : Dr. Health Check Up . Shalby

Sample Type : Serum, Urine (PP),  
Fluoride P, Urine

Parameter	Result	Unit	Biological Ref. Interval
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**PLASMA GLUCOSE LEVEL****FASTING PLASMA GLUCOSE****Plasma Glucose (F)**

94

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)**

124

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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Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
<b>LIPID PROFILE</b>			
<b>LIPID PROFILE</b>			
<b>Cholesterol</b> <i>Cholesterol Esterase, Oxidase, Peroxidase</i>	211	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
<b>SERUM TRIGLYCERIDE</b> <i>Lipase/GK/GPO/POD</i>	104	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>	43	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : >= 60
<b>Non HDL Cholesterol</b> <i>Calculated</i>	168	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
<b>S.LDL</b> <i>Calculated</i>	147	mg/dL	Optimal: <100 Near to above Optimal: 100 - 129  Borderline High: 130 - 159 High: 160 - 189 Very High: > 190
<b>VLDL</b> <i>Calculated</i>	21	mg/dL	6 - 38
<b>LDL/dHDL *</b> <i>Calculated</i>	3.4		2.5 - 3.5
<b>Chol/dHDL *</b> <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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Parameter	Result	Unit	Biological Ref. Interval
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**RENAL FUNCTION TEST**

**RENAL FUNCTION TEST**

<b>Urea Nitrogen (BUN)</b> <i>Urease, colorimetric</i>	9	mg/dL	9 - 20
<b>UREA</b> <i>Calculated</i>	19	mg/dL	19 - 43
<b>S. CREATININE</b> <i>Enzymatic - Creatinine amidohydrolase</i>	0.67	mg/dL	0.66 - 1.25
<b>S. URIC ACID</b> <i>Uricase/Peroxidase, Colorimetric</i>	5.8	mg/dL	3.5 - 8.5
<b>Calcium</b> <i>Arsenazo III dye</i>	9.8	mg/dL	8.4 - 10.2
<b>Sodium</b> <i>Direct Ion Selective Electrode</i>	142	mmol/L	137 - 145
<b>S. POTASSIUM</b> <i>Direct Ion Selective Electrode</i>	5.0	mmol/L	3.5 - 5.1
<b>Chloride</b> <i>Direct Ion Selective Electrode</i>	102	mmol/L	98 - 107

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Parameter	Result	Unit	Biological Ref. Interval
<b>Total T3 *</b> <i>Chemiluminescence immunoassay (CLIA)</i>	133	ng/dL	87 - 178
<b>Total T4 *</b> <i>Chemiluminescence immunoassay (CLIA)</i>	12.32	µg/dL	6.09 - 12.23
<b>TSH *</b> <i>Chemiluminescence immunoassay (CLIA)</i>	2.41	µIU/mL	0.38 - 5.33

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Gender/Age : Male / 28 Years

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Ref. By : Dr. Health Check Up . Shalby

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>			
Blood	<i>Peroxidase like activity of hemoglobin</i>	NIL	RBCs/ $\mu$ 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 reation</i>	Trace (+/-)	mg/dL
Protein	<i>Protein Error of Indicator Principle</i>	NIL	mg/dL
Nitrite	<i>Diazotization reaction of nitrite with an aromatic amine</i>	NEGATIVE	mg/dL
Glucose	<i>Glucose-oxidase/peroxidase reaction</i>	NIL	mg/dL
pH	<i>Double Indicator principle</i>	6.5	PH value
Specific Gravity	<i>Refractometric Method - Bromthymol blue</i>	1.025	S.G. value
Leucocyte	<i>Leucocyte Esterase Test</i>	NEGATIVE	WBCs/ $\mu$ L
<b>Microscopic Examination</b>			
Pus cells	4-5/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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Parameter	Result	Unit	Biological Ref. Interval
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**Liver Function Test****Liver Function Test**

<b>SGPT (ALTV)</b> <i>Multi Point Rate with P-5-P</i>	28	U/L	21 - 72
<b>SGOT (AST)</b> <i>Multi Point Rate with P-5-P</i>	19	U/L	17 - 59
<b>Alkaline Phosphatase</b> <i>PNPP, AMP Buffer</i>	81	U/L	20-50 yrs : 53 - 128 4-19 yr : 54 - 369 >=51 yr : 56 - 119
<b>GGT *</b> <i>L-gamma-glutamyl-4-nitroanalide/glycylglycine Kinetic</i>	28	U/L	15 - 73
<b>S. PROTEIN</b> <i>Biuret (Alkaline cupric sulfate), End Point</i>	7.7	g/dL	6.3 - 8.2
<b>Albumin</b> <i>Bromocresol Green (BCG), Colorimetric</i>	5.0	g/dL	3.5 - 5.0
<b>S. GLOBULIN</b> <i>Calculated</i>	2.7	g/dL	2.3 - 3.6
<b>A/G Ratio</b> <i>Calculated</i>	1.9	Ratio	1.0 - 2.3
<b>Bilirubin Total</b> <i>Azobilirubin/Dyphylline/Diazonium Salt</i>	0.9	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>	0.9	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

End of Report

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<b>Patient ID:</b>	<b>SUR00004025</b>	<b>Patient Name:</b>	<b>JAGDISH V PATIL</b>
<b>Age:</b>	<b>28 Years</b>	<b>Sex:</b>	<b>M</b>
<b>Accession Number:</b>	<b>4025</b>	<b>Modality:</b>	<b>DX</b>
<b>Referring Physician:</b>		<b>Study:</b>	<b>CHEST PA</b>
<b>Study Date:</b>	<b>30-Mar-2023</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.*



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

Patient Name: JAGDISH PATIL	
Age / Sex: 28Yrs. / Male	Study: USG Abdomen + Pelvis
Referred By: Dr. at shalby Hospital	Date: 30/03/2023

**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 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** shows normal echotexture and corticomedullary differentiation. There is no evidence of scarring, hydronephrosis or calculi.

**Left kidney** 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. It has smooth outlines and normal reflectivity.

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

**IMPRESSION:**

- **No any significant abnormality is seen.**

*Thanks for referral.*

  
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**Patient's Name: Mr. Jagdish Patil**

**Age: 28 yrs/ Male**

**Date: 30 / 03 / 2023**

**ECHOCARDIOGRAPHY REPORT**

**Valves**

**Mitral valve :Normal, Trivial 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:21**

**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
- Trivial MR.
- EF 60 %

**DR.SUSHIL YADAV**  
Consultant Clinical cardiologist

**Note : Normal echo study does not rule out underlying Coronary artery disease**

**SHALBY HOSPITAL, SURAT**

(A Unit of Shalby Limited)

Near Navyug College, Rander Road, Adajan, Surat. Gujarat, India.

Ph. : 0261-7190000 | Email : info.surat@shalby.org.

**SHALBY LIMITED**

Regd. Office : Shalby Limited, Opp. Karnavati Club, S.G. Road, Ahmedabad - 380 015. Gujarat, India

Tel: 079 40203000 | Fax : 079 40203109 | info.sg@shalby.org | www.shalby.org

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

Pre - op

Post- op

Health Check-up

Date : 30/3/23

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

Patient Name : Jagdish v. Patel

Age / Sex : 28

Address : Surat

**Complaints :**

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

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

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

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

**Medical History :**

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

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

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

Any Medication : sterim+r, cefceclor +

**On Examination :**

Abscess : \_\_\_\_\_

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

Missing Teeth : \_\_\_\_\_

Food Impaction : \_\_\_\_\_  
Gingivitis : \_\_\_\_\_  
Mobility : \_\_\_\_\_

**Treatment Advised :**

Scaling : Sitzings  1  2  3  Deep

Restoration : 37, 47

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

Dentures : \_\_\_\_\_

Implants : \_\_\_\_\_

Perio Surgery : \_\_\_\_\_  
Class V Fillings : \_\_\_\_\_  
Extraction : 48  
Partial denture : \_\_\_\_\_  
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"

Adw.

- Scaling
- ~~Rest~~ Restoration of 37, 47
- Extraction of 48

**Dr. Darshini V. Sha**  
(Consultant Dental Surge)

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

Name :-

Jaydish Patil

Date:-

30/3/23

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  
w/ glass

PH Vision:-

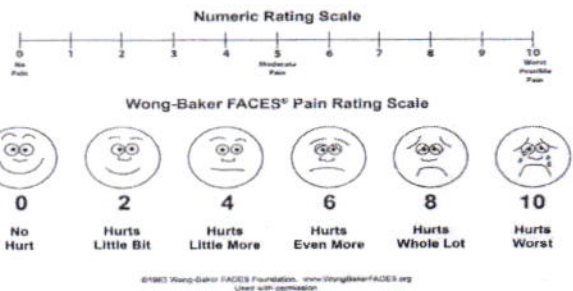
NCT T 11 mm of hg

ON Examination

Ant. Segmenet

Both Eye

N/C



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CIN: L85110GJ2004PLC044667



Cornea

Anterior Chamber

Lens

Fundus

Rt. EYE

Lt. EYE

Media:-

Disc:-

Blood Vessel:-

Background:-

Macula:-

Diagnosis:-

2 BE  
WNL

Investigation:-

Treatment:-

Nutritional Assessment:-

Preventive Care & Counsellings:-

Follow Up ON:- After 6 months

RPM

Signature of the Consultant

Jewish

ID: \_\_\_\_\_ Name: \_\_\_\_\_ Birth date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ years

Sex: M cm kg

Medication: \_\_\_\_\_

Symptoms: \_\_\_\_\_

History: \_\_\_\_\_

Heart rate: 78 bpm

PR int: 146 ms

QRS dur: 80 ms

QT/QTc(E) int: 342/ 376 ms

P/QRS/T axis: 72/ 82/ 42 °

RV5/SV1 amp: 1.90/ 0.71 mV

RV5+SV1 amp: 2.61 mV

1100 Sinus rhy  
 1102 Sinus arrhythmia  
 0102 ARTIFACT PRESENT  
 0104 ELECTRODE (S) DETACHED ... Repeat ECG is requested  
 9110 \*\* normal ECG \*\*

Unconfirmed Report  
 Reviewed by: \_\_\_\_\_

*(Handwritten signature)*

