

Investigation :-

HB A1c 5.7

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

and

lifestyle measure as explained

!

Rx

Follow Up:

x 3 mo.

with - HB A1c Report બધી દવાઓ ડોક્ટરને બતાવીને લેવી.

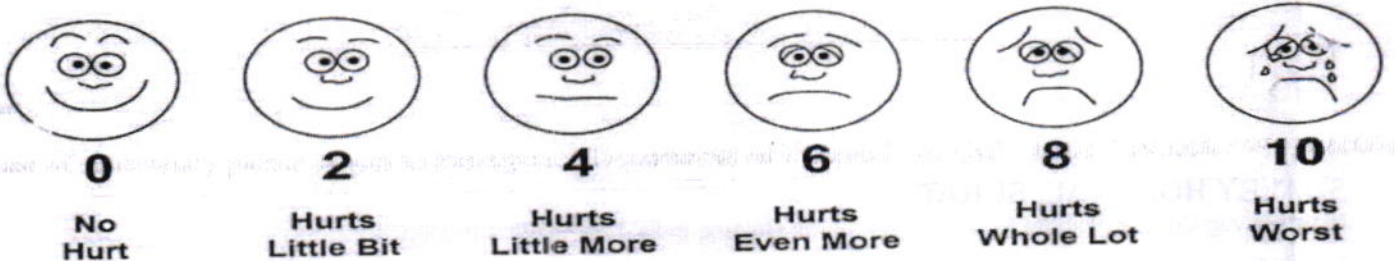
Date:-

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

Numeric Rating Scale



Wong-Baker FACES® Pain Rating Scale





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 : SUR0000349714 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Jignasha Pragnesh Patel /	Registered On : 09-Sep-2023 10:22 AM
Lab ID : 309900722	Collected On : 09-Sep-2023 10:23 AM
Gender/Age : Female / 32 Years	DOB : 29-Sep-1990
Received On : 09-Sep-2023 10:59 AM	Sample Type : EDTA Whole Blood
Ref. By : Dr. Health Check Up . Shalby	

Parameter	Result	Unit	Biological Ref. Interval
BLOOD COUNT AND INDICIES			
HAEMOGLOBIN <i>Colorimetric Non Cyanide</i>	12.8	g/dL	12.0 - 15.0
RBC COUNT <i>Electrical Impedance</i>	4.80	mill/cmm	3.8 - 4.8
HCT <i>Calculated</i>	39.8	%	36 - 46
MCV <i>Calculated based on the RBC histogram</i>	83.0	fL	83 - 101
MCH <i>Calculated</i>	26.7	pg	27 - 32
MCHC <i>Calculated</i>	32.1	g/dL	31.5 - 34.5
RDW <i>Calculated</i>	12.1	%	11.6 - 14.0

TOTAL LEUCOCYTE COUNT

Total WBC Count <i>Electrical Impedance</i>	9150	cells/cmm	4000 - 10000
---	------	-----------	--------------

DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)

NEUTROPHILS <i>Flow Cytometry</i>	58	%	40 - 80
LYMPHOCYTES <i>Flow Cytometry</i>	36	%	20 - 40
EOSINOPHILS <i>Flow Cytometry</i>	4	%	1 - 6
MONOCYTES <i>Flow Cytometry</i>	2	%	2 - 10
BASOPHIL <i>Flow Cytometry</i>	0	%	0 - 2

PLATELET INDICES

PLATELET COUNT <i>Electrical Impedance</i>	284000	/cmm	150000 - 410000
MPV <i>Calculated based on PLT Histogram</i>	8.6	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

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PID : SUR0000349714 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Jignasha Pragnesh Patel /

Registered On : 09-Sep-2023 10:22 AM

Lab ID : 309900722

Collected On : 09-Sep-2023 10:23 AM

Gender/Age : Female / 32 Years DOB : 29-Sep-1990

Received On : 09-Sep-2023 10:59 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	"O"		
RH Type	POSITIVE		

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


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 Gender/Age : Female / 32 Years DOB : 29-Sep-1990 Received On : 09-Sep-2023 10:59 AM
 Ref. By : Dr. Health Check Up . Shalby Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
ESR 1st hour * <i>Modified Westergren Method</i>	31	mm in 1 hour	0 - 20
HBA1C HbA1c - Glycated Haemoglobin * <i>Boronate Affinity Assay</i>	5.7	%	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

Estimated Average Glucose (eAG) (mg/dL) * 117 mg/dL
Calculated

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REPORT STATUS : Interim



Patient Name : Mrs. Jignasha Pragnesh Patel /	Registered On : 09-Sep-2023 10:22 AM
Lab ID : 309900722	Collected On : 09-Sep-2023 10:23 AM
Gender/Age : Female / 32 Years	DOB : 29-Sep-1990
Received On : 09-Sep-2023 10:59 AM	Sample Type : Serum
Ref. By : Dr. Health Check Up . Shalby	

Parameter	Result	Unit	Biological Ref. Interval
LIPID PROFILE			
LIPID PROFILE			
Cholesterol <i>Cholesterol Esterase, Oxidase, Peroxidase</i>	171	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
SERUM TRIGLYCERIDE <i>Lipase/GK/GPO/POD</i>	96	mg/dL	Normal : <150 Borderline High : 150-199 High : 200-499 Very High : > 500
HDL CHOLESTEROL DIRECT * <i>Phosphotungstic Acid/Mgcl2 - Enzymatic</i>	35	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : >= 60
Non HDL Cholesterol <i>Calculated</i>	136	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
S.LDL <i>Calculated</i>	117	mg/dL	Optimal: <100 Near to above Optimal: 100 - 129 Borderline High: 130 - 159 High: 160 - 189 Very High: > 190
VLDL <i>Calculated</i>	19	mg/dL	6 - 38
LDL/dHDL * <i>Calculated</i>	3.3		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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Dr Pankaj Agrawal

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

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Received On : 09-Sep-2023 10:59 AM	Sample Type : Serum
Ref. By : Dr. Health Check Up . Shalby	

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

RENAL FUNCTION TEST**RENAL FUNCTION TEST**

Urea Nitrogen (BUN) <i>Urease, colorimetric</i>	6	mg/dL	7 - 17
UREA <i>Calculated</i>	13	mg/dL	15 - 36
S. CREATININE <i>Enzymatic - Creatinine amidohydrolase</i>	0.44	mg/dL	0.52 - 1.04
S. URIC ACID <i>Uricase/Peroxidase, Colorimetric</i>	4.5	mg/dL	2.5 - 6.2
Calcium <i>Arsenazo III dye</i>	8.8	mg/dL	8.4 - 10.2
S. PHOSPHORUS * <i>Phosphomolybdate reduction (PMA Phenol)</i>	3.5	mg/dL	2.5 - 4.5
Sodium <i>Direct Ion Selective Electrode</i>	139	mmol/L	137 - 145
S. POTASSIUM <i>Direct Ion Selective Electrode</i>	4.62	mmol/L	3.5 - 5.1
Chloride <i>Direct Ion Selective Electrode</i>	107	mmol/L	98 - 107

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Consulting Pathologist

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 Lab ID : 309900722 Collected On : 09-Sep-2023 10:23 AM
 Gender/Age : Female / 32 Years DOB : 29-Sep-1990 Received On : 09-Sep-2023 10:59 AM
 Ref. By : Dr. Health Check Up . Shalby Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
THYROID PROFILE (TFT)			
Total T3 * <i>Chemiluminescence immunoassay (CLIA)</i>	107	ng/dL	87 - 178
Total T4 * <i>Chemiluminescence immunoassay (CLIA)</i>	10.32	µg/dL	99% Reference Interval (µg/dL) 4.82 - 15.65
TSH * <i>Chemiluminescence immunoassay (CLIA)</i>	2.007	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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Gender/Age : Female / 32 Years	DOB : 29-Sep-1990
Received On : 09-Sep-2023 10:59 AM	Sample Type : Urine
Ref. By : Dr. Health Check Up . Shalby	

URINE EXAMINATION

Parameter	Result	Unit	Biological Ref. Interval
Physical Examination			
Colour *	Pale yellow		Pale yellow
Transparency	Slightly Turbid		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>	Trace (+/-)	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>	Present (++)	Negative
Microscopic Examination			
Pus cells	20-25/hpf	/hpf	0-5/hpf
Red blood cells	2-3/hpf	/hpf	0-2/hpf
Epithelial cells	15-20/hpf	/hpf	NA
Crystals	NIL		Nil
Cast *	Nil		Nil
Bacteria	PRESENT		Nil
Amorphous	NIL		Nil
Yeast	NIL		Nil

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Dr Pankaj Agrawal

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

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 Lab ID : 309900722 Collected On : 09-Sep-2023 10:23 AM
 Gender/Age : Female / 32 Years DOB : 29-Sep-1990 Received On : 09-Sep-2023 10:59 AM
 Ref. By : Dr. Health Check Up . Shalby Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
Liver Function Test			
Liver Function Test			
SGPT (ALT) <i>Multi Point Rate with P-5-P</i>	23	U/L	9 - 52
SGOT (AST) <i>Multi Point Rate with P-5-P</i>	18	U/L	14 - 36
Alkaline Phosphatase <i>PNPP, AMP Buffer</i>	65	U/L	20-50 yrs.: 42 - 98 4-19 yr : 54 - 369 >/=51 yr : 56 - 119
GGT * <i>L-gamma-glutamyl-4-nitroanalide/glycylglycine Kinetic</i>	25	U/L	12 - 43
S. PROTEIN <i>Biuret (Alkaline cupric sulfate), End Point</i>	6.7	g/dL	6.3 - 8.2
Albumin <i>Bromocresol Green (BCG), Colorimetric</i>	3.9	g/dL	3.5 - 5.0
S. GLOBULIN <i>Calculated</i>	2.8	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>	0.5	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>	0.1	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

Generated On : 09-Sep-2023 01:50 PM

Approved On : 09-Sep-2023 01:45 PM

Patient ID:	SUR0000349714	Patient Name:	JIGNASHA PATEL
Age:	33 Years	Sex:	F
Accession Number:	11003	Modality:	DX
Referring Physician:	DR SHALBY	Study:	CHEST PA
Study Date:	9-Sep-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. ASHUTOSH GANDHI

DMRD (Radiodiagnosis)

G-14916

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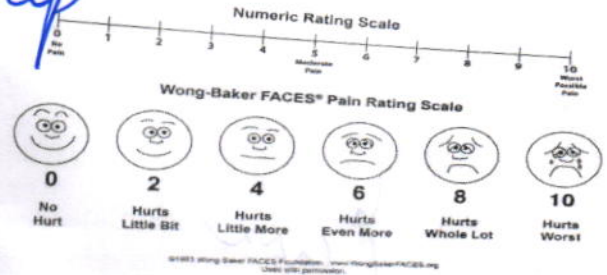
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Tel: 079 40203000 | Fax: 079 40203109 | info.sg@shalby.org | www.shalby.org
CIN: L85110GJ2004PLC044667

Name :-

Jignasha patel.

Date:- *09/09/2023*

Chief Complaints:- *Medical check up*



Pain Assessment:-

Past History:-

Family History:-

Allergy:- *NO DRUGS ALLERGY*

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

General Examination:-

BP:- Pulse:- Temp:-

Visual Acuity:-

*6/9
6/6*

Systemic Examination:-

HT:- *NR* WT:-

PH Vision:-

*6/6
6/6
6/6
6/6*

NCT

*12
12*

ON Examination

Ant. Segmenet

Both Eye

W.M.

RX-850K

2016-02-25 22:29

SHOP: SHELAT GEN HOSP

NAME:

REF. DATA	S	C	A
<R>			
	-1.00	-0.50	167
	-0.75	-0.25	129
	-0.75	+0.00	
*	-0.75	-0.25	120
<L>			
	-1.00	-0.25	164
	-1.00	-1.50	125
	-1.25	-1.00	69
*	-1.00	-0.25	164

VD=0
PD=65

Anterior Chamber

Rt. EYE

Lt. EYE

Investigation:-

Macula:-

Diagnosis:-

Treatment:-

Nutritional Assessment:-

Preventive Care & Counsellings:-

Follow Up ON:-

2 monthly

Signature of the Consultant

Ru

DR. HIMANI THAKER (VYAS)

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

Age - 33 yrs

Shalby Women's Health Clinic

Name:- *Jignashaben Patel*
Chief Complaints:-

Date: *9/9/23*

Weight:-

Height:-

OPR NO:-

Nutritional Assessment:-

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

*40 - delayed menses
+
oligomenorrhoe*

LMP:- *14/1/23*

M/H:- *Pain - 1-2 days
35-45*

irregular

O/H:-

OH - B/L

P/H:-
F/H
Examination:-

FMV 1♀ | gynlly

*PH -
pla-sof*

Provisional Diagnosis:-

*Pls - Opresion ⊕
discharge ⊕*

PAP takes

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CIN: L85110GJ2004PLC044667

Treatment & Further Advices:-
(Write in Capital Letters)

Investigaion Adviced:-

Ro

flup. yes

-TAB B-FOLICIN PLUS - (30)
100

1 month

↓
501

cauterization

-TAB VIBACT - (30)
100

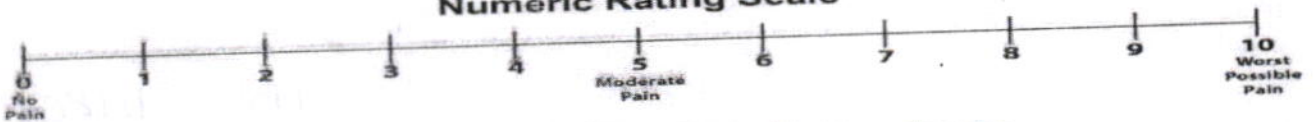
-BETADINE PESSARY - (1) PK
6-07 PM

Follow Up:

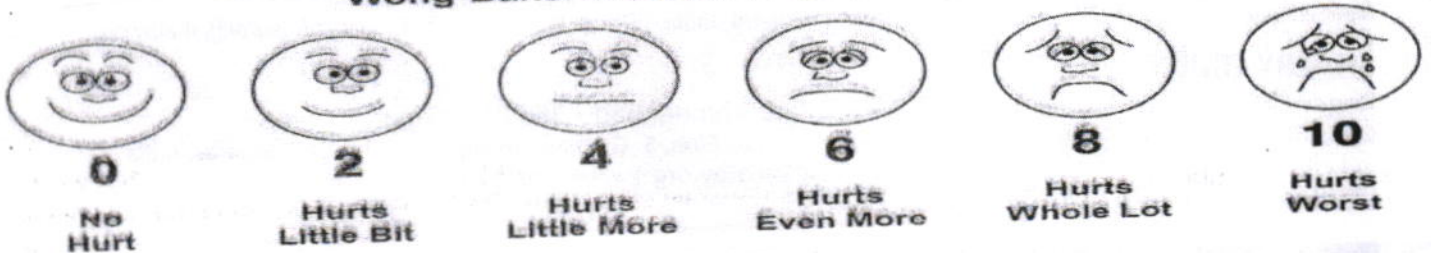
Date: _____

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

Numeric Rating Scale



Wong-Baker FACES® Pain Rating Scale



Patient's Name: Jignasha Patel
UHID : 349714

Age: 33 yrs/ Female
Date: 09 / 09 / 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: 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: 12 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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Tel: 079 40203000 | Fax: 079 40203109 | info.sg@shalby.org | www.shalby.org
CIN: L85110GJ2004PLC044667

Patient Name: JIGNASHA PATEL		UHID:349714	
Age / Sex: 33 Yrs. / Female		Study:	USG Abdomen + Pelvis
Referred By:	DR. at shalby hospital	Date: 09/09/2023	

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.

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.

Uterus appears normal in size 64 x 36 x 42 mm, Et: 9 mm. The uterine myometrial echotexture is homogenous. No focal lesion is seen. 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. ASHUTOSH GANDHI
DMRD (Radiodiagnosis)
G-14916

SHALBY HOSPITAL, SURAT

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SHALBY LIMITED

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Tel: 079 40203000 | Fax: 079 40203109 | info.sg@shalby.org | www.shalby.org
CIN: L85110GJ2004PLC044667

1100 Sinus rhythm
9110 ** normal ECG **

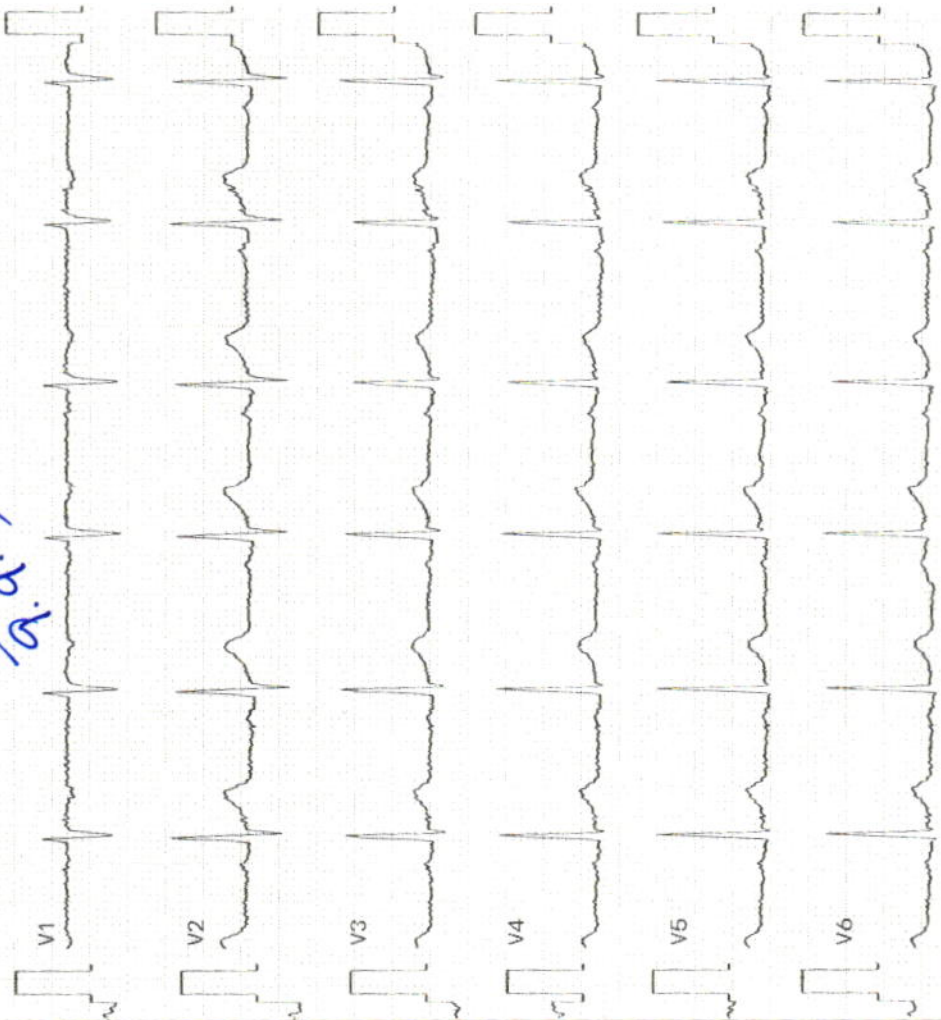
Jigneshben Patel

Ⓡ

Unconfirmed Report
Reviewed by:

1/a.a.23

10 mm/mV



years

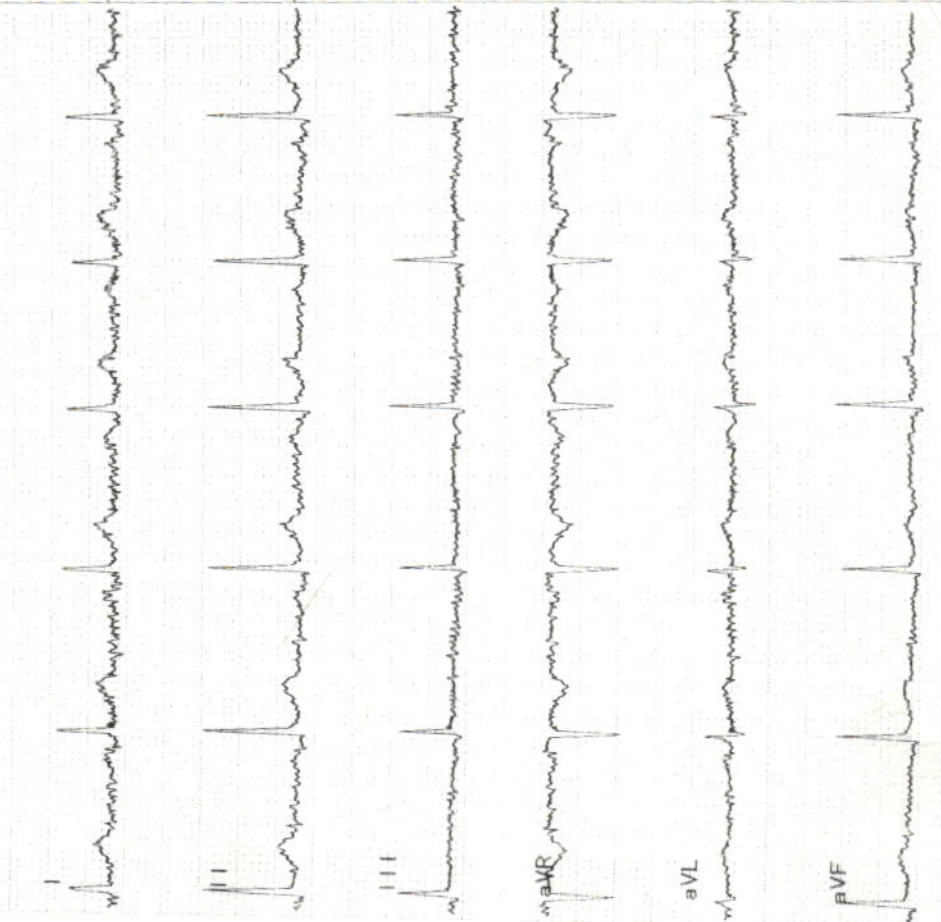
mmHg

Birth date: /

kg

76 bpm
 156 ms
 74 ms
 356/386 ms
 16/51/30 °
 1.42/0.65 mV
 2.07 mV

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





Pre - op

Post- op

Health Check-up

Date : 9/9/23

Patient Reg. No. : _____

Patient Name : Reinder Surat

Age / Sex : 33 / F

Address : Rander, Surat

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 : _____ Mobility : _____

Treatment Advised :

Scaling : Sitzings 1 2 3 Deep Perio Surgery : _____

Restoration : _____ Class V Fillings : _____

RCT : _____ Extraction : _____

Dentures : _____ Partial Denture : _____

Implants : _____ Crown & Bridge Present : 5

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"

Dr. Darshini V. Shah
 (Consultant Dental Surgeon)