

25mm/s 0.5mV

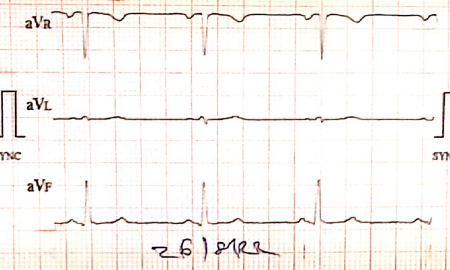
10mm/mV

10mm/mV

10mm/mV

5mm/mV

Vadasiya Rashtra



HR : 71 bpm  
 P-R : 842 ms  
 P-QRS : 135 ms  
 QRS : 112 ms  
 QT/QTc : 371/404 ms  
 P/QRST : 61/54/43 ms  
 RV5/SV1 : 3.060/1.240 mV  
 RV5+SV1 : 4.300 mV



--- Sinus Arrhythmia  
 --- LVH(?)  
 --- T Abnormal

Dr. Kishan A Vaidya  
 MD, PGDCC  
 Associate Consultant-Cardiology  
 Reg. No. G-50510

Unconfirmed report Verified by:

# Heart & General Clinic

iCure Heart & Diet Clinic, 402, Epsilon tower, opp Pasha bhai park, Race course, Vadodara

## :: PERSONAL HEALTH REPORT ::

NAME <u>Vadesinh Rathva</u>		DATE
		SR. NO.
		SEX. <u>Male</u>
		AGE <u>56/M</u>
		HEIGHT <u>161cm</u>
		WEIGHT <u>53k.g.</u>

### HISTORY

Present History :  
 Past Illness History : Diabetes/Hypertension/Tuberculosis/Asthma/Epilepsy  
 Past Occupational History : no  
 Family History : no  
 Personal History : no  
 Addiction : Tobacco/Gutkha/Smoking/Alcohol no

### GENERAL EXAMINATION

T.P.R. : B.P. : 122/90 mm Hg :  
 Pallor/Icterus/Cyanosis/Varicosity/Lymph Nodes/Thyroid/Oedema/NVE/Other :

### SYSTEMIC EXAMINATION

R.S. : normal  
 C.V.S : normal  
 C.N.S : normal  
 A.S. : normal  
 Musculo-skelet System : normal

E.N.T. Ex. <u>normal</u>	ACUITY OF VISION		RT EYE	LT EYE
	Without Glass	DISTANT	6/	6/
Dental Ex. <u>normal</u>		Near	6/	6/
Skin Ex. <u>normal</u>	With <u>2.5</u> Glass <u>2.5</u>	DISTANT	6/ <u>6</u>	6/ <u>6</u>
		Near	6/ <u>6</u>	6/ <u>6</u>
Psychic Ex. <u>normal</u>	COLOUR BLINDNESS <u>NAD</u>			

### REMARK


#### ADVICE

The Worker is FIT UNFIT for the assigned job.




**Dr. Krish P. Vaidya**  
 MD, PGCC  
 Associate **DR. KRISH VAIIDYA** Cardiology  
 Reg.No. G-50510


MD G-50510, CIH

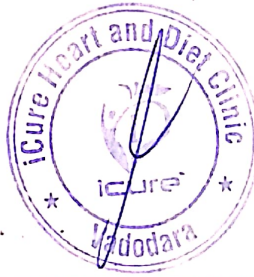

**बैंक ऑफ़ बड़ोदा**  
**Bank of Baroda**  
India's International Bank

नाम **वदेसिंह राठवा**  
 Name **VADESINH SOPARSINH RATHVA**

कर्मचारी क्र. **49895**  
 E.C. No. **49895**

  
 जारीकर्ता प्राधिकारी  
 Issuing Authority

  
 धारक के हस्ताक्षर  
 Signature Holder's

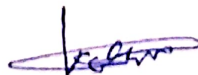


  
**भारत सरकार**  
**Government of India**


**राठवा वदेसिंह**  
**Rathva Vadesinh**  
 जन्म तारीख/DOB: 01/01/1966  
 पुरुष/ MALE

**4831 0239 9419**  
 VID: 9117 6792 9156 7329

**भारी आधार, भारी ओजष**



**2D Echocardiography & Color Doppler Report**

iCure Hear care, 402, Epsilon tower, opp Pasha bhai park, Race course, Vadodara

**Patient Name: Mr Vadedsinh Rathva      Date: 26 / 08 / 2022**

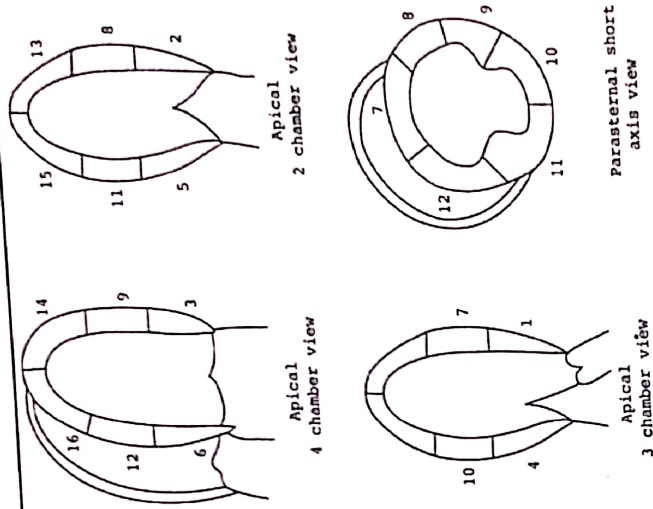
**Age, Gender: male - 56 Years**

**M. Mode Study:**

LA	26	IVS	09	PWD	10
AO	24	LVDS	26	LVDD	47

**Doppler Study:**

Mitral Valve	E: 0.86 A: 0.75
Aortic Valve	Normal
Tricuspid Valve	Normal
Pulmonary Valve	Normal



**Conclusion:**

- Normal LV Systolic function
- LVEF: 60 % ,No RWMA
- Cardiac Chambers: Normal
- Diastolic function: No LVDD
- TR: No PAH: No , RVSP:20 mmhg
- No Ms , No MR
- No AR , No AS
- ASD/VSD/PDA/Co-A : No
- No Clots or vegetations found
- IVC: Normal

Note:

Normal 2D echo report does not rule out cardiac diseases  
 this report shall not be used for Medico legal purposes,  
 Clinical Correlation advisable.



**Dr. Krish P. Vaidya**  
 MD, PG DCC  
 Associate Consultant-Cardiology  
 Reg. No. G-50510  
**Dr. Krish P Vaidya**  
 Consultant Cardiologist, Diabetologist  
 & General Physician



# JKV LABORATORY



Name : VADESINH RATHVA  
Ref By : ICURE HEART & DIET CLINIC

Age/Sex : 56 Yrs./M  
Date : 26/08/2022  
Report ID. : 10

## HAEMOGRAM PROFILE

<u>TEST</u>	<u>RESULT</u>
Blood Group	: * O *
Rh Factor (Anti D.)	: * POSITIVE *

## BIOCHEMISTRY

### FASTING (FBS)

Blood Glucose : 104.0 mg/dL 70 - 110 mg/dL

### POST-PRANDIAL

Blood Glucose : 170.0 mg/dL 80 - 140 mg/dL

Done By Fully Auto Analyzer MIURA, A-1004

END OF REPORT



DR JIGAR SHAH (G23327)  
M.D. Pathologist

Time : 7 a.m. to 9.00 p.m. ● Emergency 24 Hrs.

FF-5, Pancham Elite, Khodiyat Nagar, New V.I.P. Road, Vadodra-390 022  
☎ 8320343731 / 9601969303 ✉ jkvlaboratory2021@gmail.com

Test Report are subject to technical limitations & should be clinically correlated. Laboratory may be contacted whenever required.



# JKV LABORATORY



Name : VADESINH RATHVA  
Ref By : ICURE HEART & DIET CLINIC

Age/Sex : 56 Yrs./M  
Date : 26/08/2022  
Report ID. : 10

## EXAMINATION OF URINE

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>
Sample	: FASTING	
<b><u>PHYSICAL EXAMINATION</u></b>		
Quantity	: 20	mL
Colour	: YELLOW	
Transperancy	: CLEAR	
Specific Gravity	: 1.003	
Reaction	: ACIDIC	
Deposits	: ABSENT	
<b><u>CHEMICAL EXAMINATION</u></b>		
Albumin	: NIL	
Sugar	: NIL	
Acetone	: ABSENT	
Bile Salts	: ABSENT	
Bile Pigments	: ABSENT	
Urobilinogen	: NORMAL : ~ < 1.0 mg/dL	
Occult Blood	: ABSENT	
Nitrate	: ABSENT	
<b><u>MICROSCOPIC EXAMINATION</u></b>		
Pus Cells	: 0-1 / hpf	
RBC	: NIL	
Epithelial Cells	: NIL	
Crystals	: NIL	
Amorphous Phosphate	: NIL	
Cast	: NIL	

## IMMUNOLOGY REPORT

Material	: SERUM
<b><u>S. AUSTRALIA ANTIGEN TEST (HbsAg)</u></b>	
Result	: TEST IS NEGATIVE
Kit Used	: ELISA
<b><u>H.I.V.</u></b>	
Result	: TEST IS NEGATIVE
Kit Used	: ELISA



**DR JIGAR SHAH (G23327)**  
**M.D. Pathologist**

Time : 7 a.m. to 9.00 p.m. ● Emergency 24 Hrs.

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Test Report are subject to technical limitations & should be clinically correlated. Laboratory may be contacted whenever required.

Free Home Service

# PARAMOUNT DIAGNOSTIC & RESEARCH CENTRE

(A Unit of Paramount Charity Trust)

Radiology ■ Pathology ■ Histopathology ■ Molecular Biology

NAME : VADESINH RATHVA	AGE : 56 Y/M	DATE : 26/08/2022
------------------------	--------------	-------------------

## X RAY CHEST (PA)

### OBSERVATIONS:

Both the lung fields and apices appear clear.

Both the hilar shadow appears normal.

Cardiac silhouette appears normal.

Both the costophrenic sinuses are clear.

Mediastinal and tracheal shadows are normal.

Both the domes of diaphragm are normal.

Visualized rib cage and clavicle are normal.

### COMMENTS:

- No significant abnormality is seen.



*Henry Gandhi*  
**DR. HENY GANDHI**  
**CONSULTANT RADIOLOGIST**

24 hours Emergency Service Available for CT Scan / MRI / Pathology AMBULANCE SERVICE AVAILABLE  
Main Branch : Paramount Complex, Gotri Road, Race Course, Vadodara. Ph.: 0265 - 2395772, 2397438, 6647222, +91 - 6352731483,  
Path. Lab : 0265 - 6603900/901/902/903, +91 - 8160225911, +91 - 9099066029  
City Branch: Opp. Brahman Sabha Hall, Pratap Road, Dandiabazar, Vadodara. Ph.: 0265 - 2423233, +91 - 6352734810

# PARAMOUNT DIAGNOSTIC & RESEARCH CENTRE

(A Unit of Paramount Charity Trust)

Radiology ■ Pathology ■ Histopathology ■ Molecular Biology

NAME : VADESINH RATHVA

AGE: 56Y/M

DATE : 26/08/2022

## ULTRASOUND WHOLE ABDOMEN

Liver is normal in size and shows normal parenchymal reflectivity. No focal lesion is seen. Hepatic veins appear normal. There is no evidence of any dilated intra hepatic biliary radicals.

Portal Vein appears normal in diameter. Common Bile Duct is of normal diameter.

Gallbladder is distended with normal wall thickness. There is no evidence of gallstones. No evidence of peri-cholecystic fluid or probe tenderness.

Pancreas is normal in size and shows homogenous reflectivity. There is no evidence of any calcification or ductal dilatation.

Spleen is normal size and shows a homogenous echotexture. There is no evidence of any focal lesion.

Both Kidneys are normal in position and size. They show normal cortical reflectivity and cortico-medullary distinction. Right kidney measures 88x37mm. Left kidney measures 92x49mm. There is no evidence of renal calculi, hydronephrosis or mass seen.

Bladder is well distended and shows normal wall thickness. No evidence of intra luminal mass or calculi.

Prostate gland is normal in size. It has smooth outlines and normal reflectivity. Estimated volume is around 26gm.

There is no evidence of ascites.

No evidence of any gross bowel dilatation seen.

No evidence of any aorto-caval or mesenteric root lymphadenopathy.

Appendix cannot be imaged. No mass or collection in right iliac fossa.

**CONCLUSION:** No sonographic abnormality is seen.

  
**DR. HANY GANDHI**  
**CONSULTANT RADIOLOGIST**



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# J K V LABORATORY



FF-5, Pancham Elite, Khodiyar Nagar, New V.I.P. Road, Vadodara-390 022.  
8320343731 / 9601969303M jkvlaboratory2021@gmail.com

Patient's Name : VADESINH RATHWA  
Referred by : I Cure Heart & Diet Clinic  
Date : 26/08/2022 09:35

Ref. No. : 6621  
Age : 56 Years  
Sex : Male

## HEMOGRAM

Test Name	Result	Units	Biological Reference Interval
Hemoglobin :	13.2	g/dl	[13.0-18.0]
Total RBC Count :	6.19	mill/cmm	[4.7-6.0]
<u>Blood Indices</u>			
P.C.V :	44.4	%	[42-52]
M.C.V. :	<u>71.73</u>	femtolitre	[78-100]
M.C.H. :	<u>21.32</u>	pg	[27-31]
M.C.H.C. :	<u>29.7</u>	g/dl	[32-36]
R.D.W. :	14.3	%	[11.5-14.0]
Total WBC Count :	5730	/cmm	[4000-10000]
Platelet Count :	253000	/cmm	150000-450000
<u>Differential WBC Count</u>			
Polymorphs :	70	%	[60 - 70]
Lymphocytes :	22	%	[20 - 40]
Eosinophils :	03	%	[1 - 4]
Monocytes :	05	%	[2 - 6]
Basophils :	00	%	[0 - 1]
MPV :	9.6		
PDW-CV :	12.2		
PDW-SD :	15.7		
PCT :	0.24		
P-LCR :	25.4		
<u>Erythrocyte Sedimentation Rate</u> [Modified Westergren] After 1 hour :	06	mm	[M: 1 - 7 / F: 3 - 12]

## BIOCHEMICAL TESTS

Test Name	Result	Units	Biological Reference Interval
Blood Urea :	29.8	mg/dl	10 - 50
Creatinine :	1.14	mg/dl	0.4 - 1.5
Blood Urea Nitrogen :	13.9	mg/dl	0 - 18
Uric Acid :	5.88	mg/dl	3.4 - 7.0





# J K V LABORATORY

FF-5, Pancham Elite, Khodiyar Nagar, New V.I.P. Road, Vadodara-390 022.

8320343731 / 9601969303M jkvlaboratory2021@gmail.com



Patient's Name : VADESINH RATHWA Ref. No. : 6621  
Referred by : I Cure Heart & Diet Clinic Age : 56 Years  
Date : 26/08/2022 09:35 Sex : Male

## LIPID PROFILE

Test Name	Result	Units	Biological Reference Interval
Cholesterol :	168.4	mg/dl	Desirable level/low risk : < 200 Borderline level/moderate risk : 200-250 Elevated level/ high risk : > 250
Triglyceride :	127.0	mg/dl	Normal : <150 Borderline high :150-200 High : > 200
HDL Cholesterol :	47.5	mg/dl	Desirable level/low risk : >60 Borderline level/moderate risk : 35-60 Elevated level/ high risk : <35
LDL Cholesterol :	95.5	mg/dl	Desirable level/low risk : <130 Borderline level/moderate risk : 130-159 Elevated level/ high risk : >159
VLDL :	25.4	mg/dl	Upto 34
Chol./HDL Ratio :	3.5		
LDL/HDL Ratio :	2		Desirable level/low risk : 0.5-3.0 Borderline level/moderate risk : 3.0-6.0 Elevated level/ high risk : >6.0
Total Lipids :	663.8	mg/dl	400 - 1000

## LIVER FUNCTION TEST

Test Name	Result	Units	Biological Reference Interval
S.G.P.T. (ALT) :	34.5	U/L	30- 65
S.G.O.T. (AST) :	31.2	IU/L	[Female: 0 - 31] [Male: 0 - 35]
S. Alkaline Phosphatase :	89	IU/L	[upto 15 yrs Female 50-162] [>20 yrs Female 42 - 141] [>20 yrs Male 53 - 119]
S. Bilirubin (Total) :	0.86	mg/dl	[0.1 to 1.2]
S. Bilirubin (Direct) :	0.33	mg/dl	[0.0 to 0.3]





# J K V LABORATORY



FF-5, Pancham Elite, Khodiyar Nagar, New V.I.P. Road, Vadodara-390 022.

8320343731 / 9601969303M jkvlaboratory2021@gmail.com

Patient's Name : VADESINH RATHWA Ref. No. : 6621  
 Referred by : I Cure Heart & Diet Clinic Age : 56 Years  
 Date : 26/08/2022 09:35 Sex : Male

S. Bilirubin (Indirect) :	0.53	mg/dl	[0.0 to 0.9]
S. Proteins: (Total) :	6.97	gm/dl	[6.6 to 8.8]
S. Albumin :	4.20	gm/dl	[3.5 to 5.2]
S. Globulin :	2.77	gm/dl	[2.5 to 3.0]
A/G Ratio :	1.5		
G.G.T. : (Gamma-Glutamyl Transferase)	55.4	IU/L	[8 to 78]

## THYROID FUNCTION TEST

Test Name	Result	Units	Biological Reference Interval
Serum T3 :	1.13	ng/ml	[0.60 - 1.81]
Serum T4 :	6.39	µg/dl	[4.50 - 12.6]
Serum TSH : (CHEMILUMINESCENCE)	2.441	µIU/ml	[0.55 - 4.78]

Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulate the thyroid gland to synthesize and secrete T3 and T4. Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

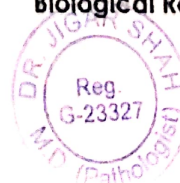
TSH levels During Pregnancy :

- 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

Reference : Carl A. Burtis, Edward R. Ashwood, David E. Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Edition. Philadelphia: WB Saunders, 2012:2170

## Prostate specific antigen - PSA

Test Name	Result	Units	Biological Reference Interval
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# JKV LABORATORY



FF-5, Pancham Elite, Khodiyar Nagar, New V.I.P. Road, Vadodara-390 022.  
8320343731 / 9601969303M jkvlaboratory2021@gmail.com

Patient's Name : VADESINH RATHWA  
Referred by : I Cure Heart & Diet Clinic  
Date : 26/08/2022 09:35

Ref. No. : 6621  
Age : 56 Years  
Sex : Male

values are free of day to day glucose fluctuations and are unaffected by exercise or recent food intake

DR K K PATEL  
MD (G-20476)  
CONSULTANT PATHOLOGIST





# JKV LABORATORY



FF-5, Pancham Elite, Khodiyar Nagar, New V.I.P. Road, Vadodara-390 022.  
8320343731 / 9601969303M jkvlaboratory2021@gmail.com

Patient's Name : VADESINH RATHWA Ref. No. : 6621  
Referred by : I Cure Heart & Diet Clinic Age : 56 Years  
Date : 26/08/2022 09:35 Sex : Male

Prostate Specific Antigen (PSA): 3.04 ng/ml [0.0 - 4.0]

- Generally recommended in : prostatic malignancy
- Schedule for tumour marker determination  
Pre-operatively  
Post operatively - At regular intervals until the values have shown a marked decrease.
- Potential clinical applications of tumour markers are :

Prognosis - The level of tumour marker is corresponds to the mass of tumour. Moderate elevations are suggestive of better prognosis than persistent high levels.

Monitoring - The profile of tumour marker concentration against time can mirror the condition of patients diagnosed to have cancer.

- Tumour marker profile usually reflects one of the following classical patterns :

A rapid decline in the concentration following surgery or therapy indicates successful treatment. The lack of a decline to basal level following first line therapy indicates partial success in the treatment.

Continue low level of the tumour marker indicates that remission has been maintain.

A subsequent rise in the concentration of the tumour marker suggests a recurrence of the disease.

If tumour marker concentration remain elevated after treatment, the tumour may be resistant to the therapeutic method and prognosis is poor.

## HBA1C [Glycosylated Haemoglobin]

Test Name	Result	Units	Biological Reference Interval
Glycosylated Haemoglobin : (HBA1C)	5.8	%	Excellent control: 4.2-6.2 Good Control : 6.3-7.2 Fair Control : 7.3-8.2 Poor Control : >8.3

Estimated Average glucose : 119.76 mg/dl

Comment : \*As per the new 2009 update of American Diabetes Association regarding HbA1C & Mean Blood Glucose relationship.

NOTE: This test is used to monitor diabetic patients compliance with the therapeutic regimen and long term blood glucose control. Its level is proportional to both the average blood glucose concentration and the life span of the red blood cells (RBC) in circulation. HbA1c

