

Patient ID:	SUR0000339424	Patient Name:	ARVIND RATHOD
Age:	56 Years	Sex:	M
Accession Number:	4427	Modality:	DX
Referring Physician:		Study:	CHEST PA
Study Date:	8-Apr-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. NEEL RAITHATHA
Consultant Radiologist

SHALBY HOSPITAL, SURAT

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CIN: L85110GJ2004PLC044667



Patient's Name: Mr. Arvind B Rathod

Age: 56 yrs/ male

UHID: 339424

Date: 08 / 04 / 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 %.**

Grade I Diastolic Flow Pattern.

Septae

IVS: Intact. No residual VSD.

IAS :Intact.

Pericardium:Normal.

IVC:13 mm with more than 50% collapsibility.

OTHER FINDINGS : Bilateral lung angle clear

CONCLUSION:

- Normal LV Systolic function
- No RWMA
- Grade I LVDD
- 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 **Upcoming Hospitals : Mumbai - Nasik**

ID:

Name:

Sex: M Birth date: / / mmHg

years

1100 S sinus rhythm
9110 ** normal ECG **

Kidai Arifind

Medication:

Symptoms:

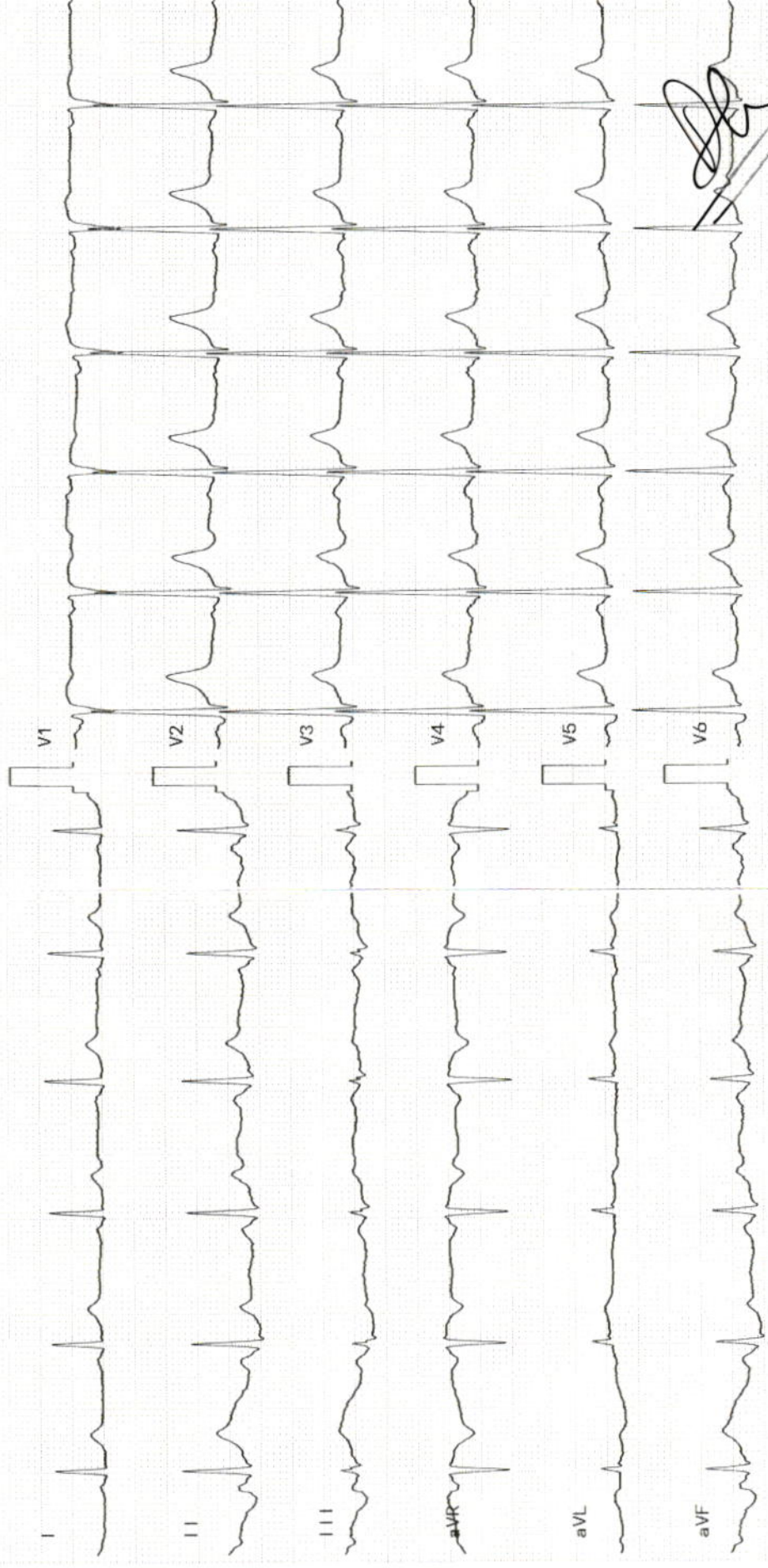
History:

Heart rate 76 bpm
 PR int 132 ms
 QRS dur 92 ms
 QT/QTc(E) int 362/ 393 ms
 P/QRS/T axis 71/ 44/ 50 °
 RV5/SV1 amp 2.32/ 0.83 mV
 RV5+SV1 amp 3.15 mV

Unconfirmed Report
Reviewed by:

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

10 mm/mV



[Signature]

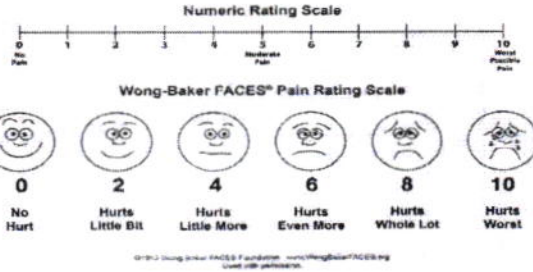
DR. RUJUTA SHELAT
Consultant Ophthalmologist
Reg. No.:- G-48712

Name :- Arvind Rathod

Date:- 8/3/23

Chief Complaints:-

nlc



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
e glass

PH Vision:-

NCT

12
13 mm of hg

ON Examination

Ant. Segment

Both Eye

- WNL -

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CIN: L85110GJ2004PLC044667

Cornea

Lens

Fundus

- Early cat -

Anterior Chamber

Rt. EYE

Lt. EYE

Media:-

Disc:-

Blood Vessel:-

Background:-

Macula:-

Diagnosis:-

} BE
WNL

Investigation:-

Treatment:-

Nutritional Assessment:-

Preventive Care & Counsellings:-

Follow Up ON:- After 61 month

Rras

Signature of the Consultant



DENTAL CHECK UP

Pre - op

Post-op

Health Check-up

Date : 08/04/23

Patient Name : Arvind B. Rathod

Patient Reg. No. : _____

Address : Surat

Age / Sex : 56/M

Complaints :

Pain : _____

Bleeding gums : _____

Sensitivity : _____

Swelling : _____

Pus Discharge : _____

Medical History :

Hypertension : DM Acidity Pregnancy : _____

Bleeding Disorders : _____ Asthma : _____ Allergy : _____

Past Surgical Intervention : _____

Any Medication : sterim ++, Calceles +

*ultra
 good looking*

On Examination :

Abscess : _____ Food lodgement : _____

Periodontitis : _____ Gingivitis : _____

Missing Teeth : _____ Mobility : _____

Treatment Advised :

Scaling : Sitings 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 a well maintained.

hygienic setup using "autoclaved" instruments & "sterilized pouch" facility.
 After knee replacement any treatment should be done under "Antibiotic Coverage"

Adv.
 - Deep scaling


Dr. Darshini V. Shah
 (Consultant Dental Surgeon)

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PID : SUR0000339424 OP-001

REPORT STATUS : Interim



Patient Name : Mr Arvind B Rathod	/	Registered On : 08-Apr-2023 08:44 AM
Lab ID : 304900559		Collected On : 08-Apr-2023 08:46 AM
Gender/Age : Male / 55 Years	DOB : 01-Jun-1967	Received On : 08-Apr-2023 09:04 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>	15.4	g/dL	13.0 - 17.0
RBC COUNT <i>Electrical Impedance</i>	6.31	mill/cmm	4.5 - 5.5
HCT <i>Calculated</i>	51.0	%	40 - 50
MCV <i>Calculated based on the RBC histogram</i>	80.9	fL	83 - 101
MCH <i>Calculated</i>	24.4	pg	27 - 32
MCHC <i>Calculated</i>	30.2	g/dL	31.5 - 34.5
RDW <i>Calculated</i>	14.5	%	13.3 - 18.3

TOTAL LEUCOCYTE COUNT

Total WBC Count <i>Electrical Impedance</i>	6290	cells/cmm	4000 - 10000
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DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)

NEUTROPHILS <i>Flow Cytometry</i>	63	%	40 - 80
LYMPHOCYTES <i>Flow Cytometry</i>	31	%	20 - 40
EOSINOPHILS <i>Flow Cytometry</i>	2	%	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>	230000	/cmm	150000 - 410000
MPV <i>Calculated based on PLT Histogram</i>	7.2	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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 Consulting Pathologist

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Gender/Age : Male / 55 Years DOB : 01-Jun-1967 Received On : 08-Apr-2023 09:04 AM
Ref. By : Dr. 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	"AB"		
RH Type	POSITIVE		
ESR 1st hour * <i>Modified Westergren Method</i>	2	mm in 1 hour	0 - 20
HBA1C HbA1c - Glycated Haemoglobin * <i>Boronate Affinity Assay</i>	6.2	%	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) * 131 mg/dL
Calculated

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

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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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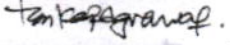
PLASMA GLUCOSE LEVEL**FASTING PLASMA GLUCOSE**

Plasma Glucose (F)	121	mg/dL	74 - 106
<i>GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric</i>			
Urine Sugar (F)	ABSENT	mg/dL	ABSENT
<i>Glucose-oxidase/peroxidase reaction</i>			

POST PRANDIAL PLASMA GLUCOSE

Plasma Glucose (PP)	83	mg/dL	Normal: 100-140 Impaired: 140 -199 Diabetic :=>200
<i>GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric</i>			
Urine Sugar (PP)	ABSENT	mg/dL	ABSENT
<i>Glucose-oxidase/peroxidase reaction</i>			

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Gender/Age : Male / 55 Years

DOB : 01-Jun-1967

Received On : 08-Apr-2023 09:04 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>	197	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
SERUM TRIGLYCERIDE <i>Lipase/GK/GPO/POD</i>	134	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>	159	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
S.LDL <i>Calculated</i>	132	mg/dL	Optimal: <100 Near to above Optimal: 100 - 129 Borderline High: 130 - 159 High: 160 - 189 Very High: > 190
VLDL <i>Calculated</i>	27	mg/dL	6 - 38
LDL/dHDL * <i>Calculated</i>	3.5		2.5 - 3.5
Chol/dHDL * <i>Calculated</i>	5.2	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) <i>Urease, colorimetric</i>	5	mg/dL	9 - 20
UREA <i>Calculated</i>	11	mg/dL	19 - 43
S. CREATININE <i>Enzymatic - Creatinine amidohydrolase</i>	0.75	mg/dL	0.66 - 1.25
S. URIC ACID <i>Uricase/Peroxidase, Colorimetric</i>	7.9	mg/dL	3.5 - 8.5
Calcium <i>Arsenazo III dye</i>	9.1	mg/dL	8.4 - 10.2
S. PHOSPHORUS * <i>Phosphomolybdate reduction (PMA Phenol)</i>	4.1	mg/dL	2.5 - 4.5
Sodium <i>Direct Ion Selective Electrode</i>	141	mmol/L	137 - 145
S. POTASSIUM <i>Direct Ion Selective Electrode</i>	4.14	mmol/L	3.5 - 5.1
Chloride <i>Direct Ion Selective Electrode</i>	103	mmol/L	98 - 107

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

Parameter	Result	Unit	Biological Ref. Interval
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IMMUNOLOGY

Total T3 * <i>Chemiluminescence immunoassay (CLIA)</i>	114	ng/dL	87 - 178
Total T4 * <i>Chemiluminescence immunoassay (CLIA)</i>	8.87	µg/dL	6.09 - 12.23
TSH * <i>Chemiluminescence immunoassay (CLIA)</i>	1.83	µIU/mL	0.38 - 5.33

INTERPRETATION:

- The principal clinical use for hTSH measurement is for the assessment of thyroid status.
- In patients with intact hypothalamic-pituitary function, hTSH is measured to:
 - exclude hypothyroidism (elevated levels of hTSH) or hyperthyroidism (depressed or nondetectable levels of hTSH);
 - monitor T4 replacement treatment in primary hypothyroidism or antithyroid treatment in hyperthyroidism;
 - follow T4 suppression of the trophic influence of hTSH in "cold nodules" and non-toxic goiter; and
 - assess the response to TRH stimulation testing.
- As more sensitive and precise methods become available, hTSH measurements are also increasingly used to identify subclinical or latent hypothyroidism or hyperthyroidism.

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Ref. By : Dr. Health Check Up . Shalby

Sample Type : Serum

PROSTATE SPECIFIC ANTIGEN *

1.1

ng/mL

0.0 - 4.0

Chemiluminescence immunoassay (CLIA)

Clinical Use:

- 1.An aid in the early detection of Prostate cancer when used in conjunction with Digital rectal examination in males more than 50 years of age and in those with two or more affected first degree relatives.
- 2.Followup and management of Prostate cancer patients.
- 3.Detect metastatic or persistent disease in patients following surgical or medical treatment of Prostate cancer.

Note:

- 1.PSA levels may appear consistently elevated / depressed due to the interference by heterophilic antibodies & nonspecific protein binding.
2. Immediate PSA testing following digital rectal examination, ejaculation, prostatic massage, indwelling catheterization, ultrasonography and needle biopsy of prostate is not recommended as they falsely elevate levels .
3. Sites of Non-prostatic PSA production are breast epithelium, salivary glands, periurethral & anal glands, cells of male urethra & breast milk.
4. Physiological decrease in PSA level by 18% has been observed in hospitalized / sedentary patients either due to supine position or suspended sexual activity.

Recommended Testing Intervals:

Pre-operatively (Baseline)

2-4 days post-operatively

Prior to discharge from hospital

Monthly followup if levels are high or show a rising trend

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Gender/Age : Male / 55 Years

DOB : 01-Jun-1967

Received On : 08-Apr-2023 09:46 AM

Ref. By : Dr. 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			
Blood	<i>Peroxidase like activity of hemoglobin</i>	NIL	RBCs/ μ 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>	NIL	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/ μ L
Microscopic Examination			
Pus cells	2-3/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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REPORT STATUS : Interim



Patient Name : Mr Arvind B Rathod	/	Registered On : 08-Apr-2023 08:44 AM
Lab ID : 304900559		Collected On : 08-Apr-2023 08:46 AM
Gender/Age : Male / 55 Years	DOB : 01-Jun-1967	Received On : 08-Apr-2023 09:04 AM
Ref. By : Dr. Health Check Up . Shalby		Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
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Liver Function Test**Liver Function Test**

SGPT (ALT) <i>Multi Point Rate with P-5-P</i>	16	U/L	21 - 72
SGOT (AST) <i>Multi Point Rate with P-5-P</i>	14	U/L	17 - 59
Alkaline Phosphatase <i>PNPP, AMP Buffer</i>	48	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>	22	U/L	15 - 73
S. PROTEIN <i>Biuret (Alkaline cupric sulfate), End Point</i>	7.9	g/dL	6.3 - 8.2
Albumin <i>Bromocresol Green (BCG), Colorimetric</i>	4.6	g/dL	3.5 - 5.0
S. GLOBULIN <i>Calculated</i>	3.3	g/dL	2.3 - 3.6
A/G Ratio <i>Calculated</i>	1.4	Ratio	1.0 - 2.3
Bilirubin Total <i>Azobillirubin/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>	0.5	mg/dL	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

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

This is an Electronically Authenticated Report.

Generated On : 08-Apr-2023 12:13 PM

Approved On : 08-Apr-2023 11:19 AM

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

Passion**Compassion**Innovation
M.B.B.S. D.N.B. (Family Medicine)
C.I.H (Industrial Health)
C.C.P.P.M (Pain & Palliative Medicine)
MNAMS, Marine medical Examiner
C.C.E.B.D.M. [Diabetes]
Phone. No. : 9998480543
OPD Days :

OPR NO:

Patient Name:- Arvind B. Rathod
Age / Sex :- 56 yrs/m
Chief Complaints:-

Date: 8/04/23
Weight:- 62.1 kg
Height:- 166 cm
BMI:- 22.5

Go Nil

Nutritional assessment:-

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

Drug / Food Allergy:- NKDA

Pulse:- 76/min
BP:- 130/90 mmHg
SpO2:- 96%

Past History :-

Nil

Family History:- Nil

Systemic Examination:-

NAD.

Provisional Diagnosis:

P. diabetes

SHALBY HOSPITAL, SURAT

Near Navyug College, Rander Road, Adajan, Surat. Gujarat, India. | Ph. : 0261-7190000 | Email : info.surat@shalby.org.

SHALBY LIMITED

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

Investigation :-

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

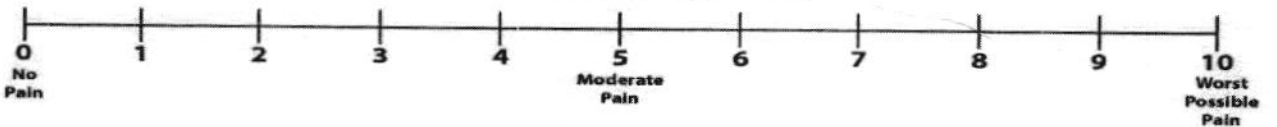
Rx
- Diet / Exercise

Follow Up Date:- 805

બધી દવાઓ ડોક્ટરને બતાવીને લેવી.

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

Numeric Rating Scale



Wong-Baker FACES® Pain Rating Scale

