

Shalby MD Physician Clinic

Patient Name:-

Avinash Arand

Age / Sex :-

35/ M

Chief Complaints:-

No clo
HT+

Drug / Food Allergy:-

Past History :-

HTD

Family History:-

Systemic Examination:-

RS }
CVS } clinically HTD
PA }
CNS }

OPR NO:

Date: 12/10/24

Weight:- 84.1 kg

Height:- 171 cm

Nutritional assessment:-

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

Pulse:- 64/min

BP:- 120/80 mmHg

SpO2:- 100%

Provisional Diagnosis:-

F. Thyronorm (50)

25 µg

1 - 1

and

normal health checkup

Patient ID:	SUR0000373001	Patient Name:	AVINASH ANAND
Age:	35 Years	Sex:	M
Accession Number:	10217 OP	Modality:	DX
Referring Physician:	DR SHALBY	Study:	CHEST PA
Study Date:	12-Oct-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. NITIN DESAI
CONSULTANT RADIOLOGIST

SHALBY HOSPITAL, SURAT

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

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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 : SUR0000373001 OP-001

REPORT STATUS : Interim



Patient Name : Mr Avinash Anand	/	Registered On : 12-Oct-2024 10:05 AM
Lab ID : 410900940		Collected On : 12-Oct-2024 10:05 AM
Gender/Age : Male / 37 Years	DOB : 27-Oct-1986	Received On : 12-Oct-2024 10:12 AM
Ref. By : 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>	14.6	g/dL	13.0 - 17.0
RBC COUNT <i>Electrical Impedance</i>	5.33	mill/cmm	4.5 - 5.5
HCT <i>Calculated</i>	44.9	%	40 - 50
MCV <i>Calculated based on the RBC histogram</i>	84.2	fL	83 - 101
MCH <i>Calculated</i>	27.4	pg	27 - 32
MCHC <i>Calculated</i>	32.5	g/dL	31.5 - 34.5
RDW <i>Calculated</i>	13.7	%	13.3 - 18.3
TOTAL LEUCOCYTE COUNT			
Total WBC Count <i>Electrical Impedance</i>	8280	cells/cmm	4000 - 10000
DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)			
NEUTROPHILS <i>Flow Cytometry</i>	63	%	40 - 80
LYMPHOCYTES <i>Flow Cytometry</i>	30	%	20 - 40
EOSINOPHILS <i>Flow Cytometry</i>	4	%	1 - 6
MONOCYTES <i>Flow Cytometry</i>	3	%	2 - 10
BASOPHIL <i>Flow Cytometry</i>	0	%	0 - 2
PLATELET INDICES			
PLATELET COUNT <i>Electrical Impedance</i>	186000	/cmm	150000 - 410000
MPV <i>Calculated based on PLT Histogram</i>	12.4	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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Approved On : 12-Oct-2024 10:40 AM

Dr Pankaj Agrawal

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

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Ref. By : Health Check Up Shalby		Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
ESR 1st hour <i>Modified Westergren Method</i>	4	mm in 1 hour	0 - 15
HBA1C HbA1c - Glycated Haemoglobin <i>Boronate Affinity Assay</i>	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
Estimated Average Glucose (eAG) (mg/dL) <i>Calculated</i>	108	mg/dL	

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Certificate No. : MC-5200

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REPORT STATUS : Interim



Patient Name : Mr Avinash Anand /

Registered On : 12-Oct-2024 10:05 AM

Lab ID : 410900940

Collected On : 12-Oct-2024 10:00 AM

Gender/Age : Male / 37 Years

DOB : 27-Oct-1986

Received On : 12-Oct-2024 10:13 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)**

97

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)**

108

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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Lab ID : 410900940		Collected On : 12-Oct-2024 10:05 AM
Gender/Age : Male / 37 Years	DOB : 27-Oct-1986	Received On : 12-Oct-2024 10:11 AM
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>	163	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
SERUM TRIGLYCERIDE <i>Lipase/GK/GPO/POD</i>	132	mg/dL	Normal : <150 Borderline High : 150-199 High : 200-499 Very High : > 500
HDL CHOLESTEROL DIRECT <i>Phosphotungstic Acid/Mgcl2 - Enzymatic</i>	46	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : >= 60
Non HDL Cholesterol <i>Calculated</i>	117	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
LDL Cholesterol <i>Calculated</i>	91	mg/dL	Optimal: <100 Near to above Optimal: 100 - 129 Borderline High: 130 - 159 High: 160 - 189 Very High: > 190
VLDL <i>Calculated</i>	26	mg/dL	6 - 38
LDL/dHDL <i>Calculated</i>	2.0		2.5 - 3.5
Chol/dHDL <i>Calculated</i>	3.5	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		Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
THYROID PROFILE (TFT)			
Total T3 <i>Chemiluminescence immunoassay (CLIA)</i>	118	ng/dL	87 - 178
Total T4 <i>Chemiluminescence immunoassay (CLIA)</i>	13.07	µg/dL	99% Reference Interval (µg/dL) 4.82 - 15.65
TSH <i>Chemiluminescence immunoassay (CLIA)</i>	6.621	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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 Gender/Age : Male / 37 Years DOB : 27-Oct-1986 Received On : 12-Oct-2024 10:11 AM
 Ref. By : Health Check Up Shalby Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
Liver Function Test			
SGPT (ALTV) <i>Multi Point Rate with P-5-P</i>	53	U/L	21 - 72
SGOT (AST) <i>Multi Point Rate with P-5-P</i>	38	U/L	17 - 59
Alkaline Phosphatase <i>PNPP, AMP Buffer</i>	144	U/L	20-50 yrs : 53 - 128 4-19 yr : 54 - 369 >=51 yr : 56 - 119
GGT <i>L-gamma-glutamyl-4-nitroanalide/glycylglycine Kinetic</i>	20	U/L	15 - 73
S. PROTEIN <i>Biuret (Alkaline cupric sulfate), End Point</i>	7.7	g/dL	6.3 - 8.2
Albumin <i>Bromocresol Green (BCG), Colorimetric</i>	4.0	g/dL	3.5 - 5.0
S. GLOBULIN <i>Calculated</i>	3.7	g/dL	2.3 - 3.6
A/G Ratio <i>Calculated</i>	1.1	Ratio	1.0 - 2.3
Bilirubin Total <i>Azobilirubin/Dyphylline/Diazonium Salt</i>	0.7	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>	0.7	mg/dL	Unconjugated bilirubin Adults: 0.0-1.1 Neonates: 0.6-10.5
Bilirubin Direct <i>Calculated</i>	0	mg/dL	Conjugated bilirubin and Delta bilirubin (Bilirubin covalently bound to albumin) 0.0-0.4

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

Parameter	Result	Unit	Biological Ref. Interval
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BIOCHEMISTRY**RENAL FUNCTION TEST****NABL Accredited Parameters****Urea Nitrogen (BUN)**

Urease, colorimetric

13

mg/dL

9 - 20

UREA

Calculated

28

mg/dL

19 - 43

Creatinine

Enzymatic - Creatinine amidohydrolase

0.82

mg/dL

0.66 - 1.25

S. URIC ACID

Uricase/Peroxidase, Colorimetric

7.6

mg/dL

3.5 - 8.5

Calcium

Arsenazo III dye

9.6

mg/dL

8.4 - 10.2

Sodium

Direct Ion Selective Electrode

143

mmol/L

137 - 145

S. POTASSIUM

Direct Ion Selective Electrode

4.2

mmol/L

3.5 - 5.1

Chloride

106

mmol/L

98 - 107

Phosphorus (Not in NABL Scope)

Phosphomolybdate reduction (PMA Phenol)

4.1

mg/dL

2.5 - 4.5

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Gender/Age : Male / 37 Years	DOB : 27-Oct-1986	Received On : 12-Oct-2024 10:12 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> Nil		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> 5.5	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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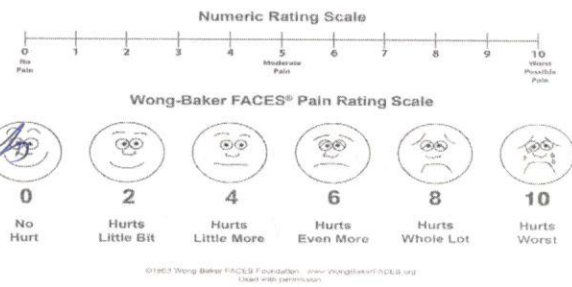
Dr Pankaj Agrawal

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

Name:- Avinash Anand.

Date:- 12/10/24

Chief Complaints:-
Longtime eye
ache
Go (O) No
Visual complaint



Pain Assessment:-

Past History:-

Family History:-

Allergy:- NO DRUGS

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

General Examination:-

BP:- Pulse:- Temp:-

Systemic Examination:-

HT:- 5'7" WT:- 65 kg

Visual Acuity:- 6/6

PH Vision:- 6/6

NCT 13.7
13.8

ON Examination

Ant. Segment

Both Eye

WMM

NAME:
DATE: 2024/Oct/12 16:1
No. 00496
HUVITZ HNT-1P
Ver 1.1.1

ITONO-PACHY mode I		
LOP	<R>	<L>
	13.6	13.5
	13.6	14.1
	13.8	13.9
AVG	13.7	13.8
(mmHg)		
CCT	<R>	<L>
	534	540
	536	543
	533	541
AVG	534.3	541.3
(µm)		
Huvitz Co. Ltd		
+82-31-428-9100		

Anterior Chamber

Rt. EYE

Lt. EYE

Investigation:-

Background:-

Macula:-

Diagnosis:-

Emmetropia

Treatment:-

Nutritional Assessment:-

Preventive Care & Counselling:-

Follow Up ON:-

2 months / 4w

Signature of the Consultant

Dr. Rujuta Shilal

Patient's Name: Avinash Anand
UHID:373001

Age: 35 yrs / male
Date:12 / 10 / 2024

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:13 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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Patient Name: AVINASH ANAND		UHID: SUR0000373001	
Age / Sex: 37 Yrs. / Male		Study:	USG Abdomen + Pelvis
Referred By:	Dr. at shalby Hospital	Date: 12.10.2024	

ULTRASOUND OF ABDOMEN AND PELVIS (TAS)

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 32 x 28 x 31 mm (Approx. vol- 15 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. NITIN DESAI
CONSULTANT RADIOLOGIST





Pre - op

Post-op

Health Check-up

Date : 12-10-24

Patient Reg. No. : _____

Patient Name : Avinesh Ham. Amend Age / Sex : 35/M

Address : Street

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 : Intentional

Periodontitis : _____ Gingivitis : FTC

Missing Teeth : 7⁶ Mobility : rebind

Treatment Advised :

Scaling : Sittings 1 2 3 Deep

Perio Surgery : _____

Restoration : _____

Class V Fillings : _____

RCT : to be

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

Intentional RCT $\frac{1}{6}$

Bridge $\frac{1}{17A}$

Dr. Darshini V. Shah

Dr. Darshini V. Shah
(Consultant Dental Surgeon)

12-Oct-2024 AM9:18:47

Avimush Anand

ID: _____ Name: _____ Birth date: _____ / _____ / _____ years

1100 Sinus \checkmark thm
9110 ** normal ECG **

Sex: M cm kg
Medication:
Symptoms:
History:
fent. rate 67 bpm
PR int 166 ms
QRS dur 74 ms
QT/QTc(E) int 384/ 399 ms
P/QRS/T axis 47/ 24/ 22 °
RV5/SV1 amp 0.65/ 0.79 mV
RV5+SV1 amp 1.44 mV

Unconfirmed Report
Reviewed by:

