


 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: SUR0000370974 OP-001

REPORT STATUS : Interim



Patient Name : Mr Dharmendra Singh Pal	/	Registered On : 07-Sep-2024 10:08 AM
Lab ID : 409900518		Collected On : 07-Sep-2024 10:09 AM
Gender/Age : Male / 30 Years	DOB : 15-Jan-1994	Received On : 07-Sep-2024 11:22 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)	88	mg/dL	74 - 106
<small>GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric</small>			

Urine Sugar (F)	ABSENT	mg/dL	Absent
<small>Glucose-oxidase/oxidase reaction</small>			

#### POST PRANDIAL PLASMA GLUCOSE

Plasma Glucose (PP)	104	mg/dL	Normal: 100-140 Impaired: 140 -199 Diabetic: =>200
<small>GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric</small>			

Urine Sugar (PP)	ABSENT	mg/dL	Absent
<small>Glucose-oxidase/oxidase reaction</small>			

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*Dr Pankaj Agrawal*  
**Dr Pankaj Agrawal**  
 M.B., D.C.P.  
 Consulting Pathologist



Shalby Hospital (A Unit of Shalby Limited) Near Navyug College, Rander Road, Adajan, Surat, Gujarat, India.  
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**REPORT STATUS : Interim**



Patient Name : Mr Dharmendra Singh Pal /	Registered On : 07-Sep-2024 10:08 AM
Lab ID : 409900518	Collected On : 07-Sep-2024 03:13 PM
Gender/Age : Male / 30 Years	DOB : 15-Jan-1994
Received On : 07-Sep-2024 03:16 PM	Sample Type : Stool
Ref. By : Health Check Up Shalby	

Parameter	Result	Unit	Biological Ref. Interval
<b>STOOL EXAMINATION</b>			
COLOUR	BROWNISH		Brownish
CONSISTENCY	SOLID		Solid
BLOOD	ABSENT		Absent
MUCOUS	ABSENT		Absent
REACTION	ACIDIC		7 - 7.5
PARASITES	ABSENT		Absent
PUS	ABSENT		Absent
STOOL (OCCULT BLOOD)	NEGATIVE		Negative
<small>Peroxidase like activity of hemoglobin</small>			
<b>MICROSCOPIC EXAMINATION</b>			
TROPHOZITES	NIL		Nil
OVA	NIL		Nil
CYSTS	NIL		Nil
PUS CELL	NIL		Nil
RED CELL	NIL		Nil
VEGETABLE CELL	PRESENT		Present
Yeast	NIL		Nil

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

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*Dr Pankaj Agrawal*  
**Dr Pankaj Agrawal**  
M.B., D.C.P  
Consulting Pathologist

DR. DILIP B GHEEWALA

M.D. (Medicine)

Reg No: G 17770,

Mo: 9825338408

Consultant Physician & Ex. Professor Of Medicine

OPD Days: Monday, Saturday

### Shalby MD Physician Clinic

OPR NO:

Patient Name:- Dharmendra Singh Patel

Age / Sex :- 20y / m

Chief Complaints:-

Date: 7/9/24

Weight:- 68 kg

Height:- 165 cm

No clo

Nutritional assessment:-

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

Pulse:- 64 b/min

BP:- 110/80 mmHg

SpO2:- 97%

Drug / Food Allergy:-

Past History :-

MAD

Family History:-

Systemic Examination:-

RS }  
WS }  
PA }  
CNS }  
MAD

Provisional Diagnosis:-

### SHALBY HOSPITAL, SURAT

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CIN: L85110GJ2004PLC044667

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

Investigation Advised:-

Rx

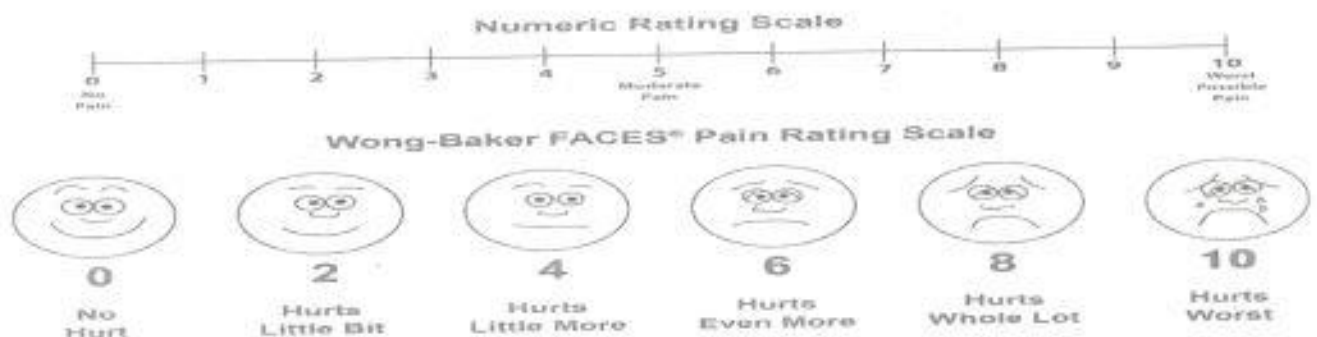
Job. Resusons, ong X(30)  
1 - health  
Normal check up  
guelway

Follow Up:

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

બધી દવાઓ ડોક્ટરને બતાવીને લેવી.

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




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Gender/Age : Male / 30 Years	DOB : 15-Jan-1994	Received On : 07-Sep-2024 10:09 AM
Ref. By : Health Check Up Shalby		Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
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**BLOOD COUNT AND INDICIES**

HAEMOGLOBIN	Colometric Non Cyanide	16.1	g/dL	13.0 - 17.0
RBC COUNT	Electrical Impedance	5.32	mill/cmm	4.5 - 5.5
HCT	Calculated	48.3	%	40 - 50
MCV	Calculated based on the RBC histogram	90.7	fL	83 - 101
MCH	Calculated	30.3	pg	27 - 32
MCHC	Calculated	33.4	g/dL	31.5 - 34.5
RDW	Calculated	11.9	%	13.3 - 18.3

**TOTAL LEUCOCYTE COUNT**

Total WBC Count	Electrical Impedance	6280	cells/cmm	4000 - 10000
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**DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)**

NEUTROPHILS	Flow Cytometry	62	%	40 - 80
LYMPHOCYTES	Flow Cytometry	29	%	20 - 40
EOSINOPHILS	Flow Cytometry	3	%	1 - 6
MONOCYTES	Flow Cytometry	5	%	2 - 10
BASOPHIL	Flow Cytometry	1	%	0 - 2

**PLATELET INDICES**

PLATELET COUNT	Electrical Impedance	282000	/cmm	150000 - 410000
MPV	Calculated based on PLT Histogram	9.8	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 Agrawal

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Consulting Pathologist

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	Sample Type : EDTA Whole Blood

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**BLOOD GROUP**

(Tube agglutination: Forward &amp; reverse)

ABO Type	"O"
RH Type	POSITIVE

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Gender/Age : Male / 30 Years	DOB : 15-Jan-1994
Received On : 07-Sep-2024 10:09 AM	Sample Type : EDTA Whole Blood
Ref. By : Health Check Up Shalby	

Parameter	Result	Unit	Biological Ref. Interval
<b>ESR 1st hour</b> <i>Modified Westergren Method</i>	8	mm in 1 hour	0 - 15
<b>HBA1C</b> <b>HbA1c - Glycated Haemoglobin</b> <i>Boronate Affinity Assay</i>	5.5	%	Non-diabetic: $\leq 5.6$ Pre-diabetic: 5.7-6.4 Diabetic: $\geq 6.5$ 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
<b>Estimated Average Glucose (eAG) (mg/dL)</b> <i>Calculated</i>	111	mg/dL	

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Gender/Age : Male / 30 Years

DOB : 15-Jan-1994

Received On : 07-Sep-2024 10:10 AM

Ref. By : Health Check Up Shalby

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>	<b>238</b>	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
<b>SERUM TRIGLYCERIDE</b> <i>Lipase/GK/GPO/POD</i>	<b>225</b>	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>	<b>40</b>	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : >= 60
<b>Non HDL Cholesterol</b> <i>Calculated</i>	<b>198</b>	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
<b>LDL Cholesterol</b> <i>Calculated</i>	<b>153</b>	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>	<b>45</b>	mg/dL	6 - 38
<b>LDL/dHDL</b> <i>Calculated</i>	<b>3.8</b>		2.5 - 3.5
<b>Chol/dHDL</b> <i>Calculated</i>	<b>6.0</b>	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
<b>THYROID PROFILE (TFT)</b>			
<b>Total T3</b> <small>Chemiluminescence immunoassay (CLIA)</small>	160	ng/dL	87 - 178
<b>Total T4</b> <small>Chemiluminescence immunoassay (CLIA)</small>	18.21	µg/dL	99% Reference Interval (µg/dL) 4.82 - 15.65
<b>TSH</b> <small>Chemiluminescence immunoassay (CLIA)</small>	3.200	µIU/mL	0.38 - 5.33

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Received On : 07-Sep-2024 10:10 AM	Sample Type : Serum
Ref. By : Health Check Up Shalby	

Parameter	Result	Unit	Biological Ref. Interval
<b>RENAL FUNCTION TEST</b>			
<b>NABL Accredited Parameters</b>			
<b>Urea Nitrogen (BUN)</b> <small>Urease, colorimetric</small>	14	mg/dL	9 - 20
<b>UREA</b> <small>Calculated</small>	30	mg/dL	19 - 43
<b>Creatinine</b> <small>Enzymatic - Creatinine amidohydrolase</small>	0.77	mg/dL	0.66 - 1.25
<b>S. URIC ACID</b> <small>Uricase/Peroxidase, Colorimetric</small>	6.8	mg/dL	3.5 - 8.5
<b>Calcium</b> <small>Arsenazo III dye</small>	10.0	mg/dL	8.4 - 10.2
<b>Sodium</b> <small>Direct ion Selective Electrode</small>	143	mmol/L	137 - 145
<b>S. POTASSIUM</b> <small>Direct ion Selective Electrode</small>	4.1	mmol/L	3.5 - 5.1
<b>Chloride</b>	104	mmol/L	98 - 107

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## BIOCHEMISTRY

Phosphorus (Not in NABL Scope)	4.0	mg/dL	2.5 - 4.5
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*Phosphomolybdate reduction (PMA Phenol)*

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	Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
<b>Liver Function Test</b>			
<b>Liver Function Test</b>			
<b>SGPT (ALTV)</b> <i>Multi-Point Rate with P-5-P</i>	26	U/L	21 - 72
<b>SGOT (AST)</b> <i>Multi-Point Rate with P-5-P</i>	26	U/L	17 - 59
<b>Alkaline Phosphatase</b> <i>PNPP, AMP Buffer</i>	100	U/L	20-50 yrs : 53 - 128 4-19 yr : 54 - 369 >=51 yr : 56 - 119
<b>GGT</b> <i>L-gamma-glutamyl-4-nitroanilideglycylglycose Kinetic</i>	23	U/L	15 - 73
<b>S. PROTEIN</b> <i>Buret (Alkaline cupric sulfate), End Point</i>	8.0	g/dL	6.3 - 8.2
<b>Albumin</b> <i>Bromocresol Green (BCG), Colorimetric</i>	4.6	g/dL	3.5 - 5.0
<b>S. GLOBULIN</b> <i>Calculated</i>	3.4	g/dL	2.3 - 3.6
<b>A/G Ratio</b> <i>Calculated</i>	1.4	Ratio	1.0 - 2.3
<b>Bilirubin Total</b> <i>Azobilirubin/Diaphyline-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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**Dr Pankaj Agrawal**  
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 Consulting Pathologist

<b>Patient ID:</b>	<b>SUR0000370974</b>	<b>Patient Name:</b>	<b>DHARMENDRA S PAL</b>
<b>Age:</b>	<b>30 Years</b>	<b>Sex:</b>	<b>M</b>
<b>Accession Number:</b>	<b>9019 MHC</b>	<b>Modality:</b>	<b>DX</b>
<b>Referring Physician:</b>	<b>DR SHALBY</b>	<b>Study:</b>	<b>CHEST PA</b>
<b>Study Date:</b>	<b>7-Sep-2024</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.*

  
DR. NITIN DESAI  
(CONSULTANT RADIOLOGIST)

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CIN: L85110GJ2004PLC044667

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

Name:-

*Dharmendra Singh PATEL*

Date:- *27/05/2024*

Chief Complaints:-

*Routine Eye check up*

Numeric Rating Scale

Wong-Baker FACES® Pain Rating Scale



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:- WT:-

Visual Acuity:- *6/6*  
*6/6*

PH Vision:- *6/6*  
*6/6*

NCT *13*  
*158*

*RT IO - 6/6*

ON Examination

Ant. Segment

Both Eye

*WOM*

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CIN: L85110GJ2004PLC044667

ME: 202473ep/07 16:50  
 00254  
 VITZ HNT-1P  
 r 1.1.1

ONC-PACHY model

P	<R>	<L>
	12.6	13.5
	13.9	14.0
	14.8	13.8
Q	13.8	13.8

mHg)

T	<R>	<L>
	525	542
	525	539
	526	538
G	525.3	539.7

vitz Co. Ltd.  
 31-428-9100

H2  
 STAIN  
 ON

Anterior Chamber

Rt. EYE

Lt. EYE

Investigation:-

Blood vessel:-  
 Background:-  
 Macula:-  
 Diagnosis:-

*pt dull  
 cone latw*

Treatment:-

Nutritional Assessment:-

Preventive Care & Counselling:-

Follow Up ON:-

*2 months/102*

Signature of the Consultant

*Dr. Sujata Shetty*

SHALBY HOSPITAL  
NR. NAVYUG COLLAGE, RANER ROAD  
SURAT

Station  
Telephone:

## EXERCISE STRESS TEST REPORT

Patient Name: DHARMENDRA SINGH, PAL  
Patient ID: 66942  
Height: \*  
Weight:

DOB: 15.01.1994  
Age: 30yrs  
Gender: Male  
Race: Indian

Study Date: 07.09.2024  
Test Type: --  
Protocol: BRUCE

Referring Physician: --  
Attending Physician: --  
Technician: --

Medications:  
--

Medical History:  
--

Reason for Exercise Test:  
--

### Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (km/h)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	01:18	0.80	0.00	84	110/70	
EXERCISE	STAGE 1	03:00	2.70	10.00	129	120/70	
	STAGE 2	03:00	4.00	12.00	164	130/70	
	STAGE 3	01:09	5.40	14.00	173	140/80	
RECOVERY		02:54	0.00	0.00	105	120/70	

The patient exercised according to the BRUCE for 7:08 mins, achieving a work level of Max. METS: 10.00. The resting heart rate of 96 bpm rose to a maximal heart rate of 173 bpm. This value represents 91 % of the maximal, age-predicted heart rate. The resting blood pressure of 110/70 mmHg, rose to a maximum blood pressure of 140/80 mmHg. The exercise test was stopped due to Fatigue.

### Interpretation

Summary: Resting ECG: normal.  
Functional Capacity: normal.  
HR Response to Exercise: appropriate.  
BP Response to Exercise: normal resting BP - appropriate response.  
Chest Pain: none.  
Arrhythmias: none.  
ST Changes: none.  
Overall impression: Normal stress test.

### Conclusions

TMT NEGATIVE FOR EXERCISE INDUCED REVERSIBLE ISCHEMIA AT GIVEN WORKLOAD

*C. Patel*





Patient ID 66942  
07/09/2024  
12:39:34

Male  
30yrs Indian  
Meds:

Test Reason:  
Medical History:

Ref MD: Ordering MD:  
Technician: Test Type:  
Comment:

BRUCE: Total Exercise Time 07:08  
Max HR: 173 bpm 91% of max predicted 190 bpm HR at rest: 96  
Max BP: 140/80 mmHg BP at rest: 110/70 Max RPP: 24220 mmHg\* bpm  
Maximum Workload: 10.00 METS  
Max. ST: +1.05 mm, 0.00 mV/s in III-EXERCISE STAGE 2 05:00  
Arrhythmia: A:252, PVC:1  
STHR index: 0.89  $\mu$ V/bpm  
**Reasons for Termination: Fatigue**  
**Summary:** Resting ECG: normal. Functional Capacity: normal. HR Response to Exercise: appropriate. BP Response to Exercise: normal resting BP - appropriate response. Chest Pain: none. Arrhythmias: none. ST Changes: none. Overall Impression: Normal stress test.  
**Conclusion: TMT NEGATIVE FOR EXERCISE INDUCED REVERSIBLE ISCHEMIA AT GIVEN WORKLOAD**  
Location Number: \* 0 \*

Phase Name	Stage Name	Time In Stage	Speed (km/h)	Grade (%)	Workload (METs)	HR (bpm)	BP (mmHg)	RPP (mmHg* bpm)	VE (l/min)	ST Level (mV)	Comment
PRETEST	SUPINE	01:18	0.80	0.00	1.3	84	110/70	9240	0	0.50	
EXERCISE	STAGE 1	03:00	2.70	10.00	4.6	129	120/70	15480	0	0.05	
	STAGE 2	03:00	4.00	12.00	7.0	164	130/70	21320	0	-0.50	
	STAGE 3	01:09	5.40	14.00	10.0	173	140/80	24220	1	-0.80	
RECOVERY		02:54	0.00	0.00	1.0	105	120/70	12600	0	0.15	

DHARMENDRA SINGH, PAL  
Patient ID 66942  
07.09.2024  
12:40:30

12-lead Report  
PRETEST  
SUPINE  
00:49

80 bpm  
110/70 mmHg

BRUCE  
0.0 km/h  
0.0 %

SHALBY HOSPITAL

Measured at 60ms Post J (10mm/mV)  
Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	-0.20	V1	0.30
II	-0.05	V2	1.10
III	0.20	V3	0.85
aVR	0.10	V4	0.50
aVL	-0.20	V5	0.70
aVF	0.30	V6	0.35



DHARMENDRA SINGH, PAL

Patient ID: 66942

07.09.2024

12:41:13

12-Lead Report

EXERCISE

STAGE I

00:15

110 bpm

BRUCE

2.7 km/h

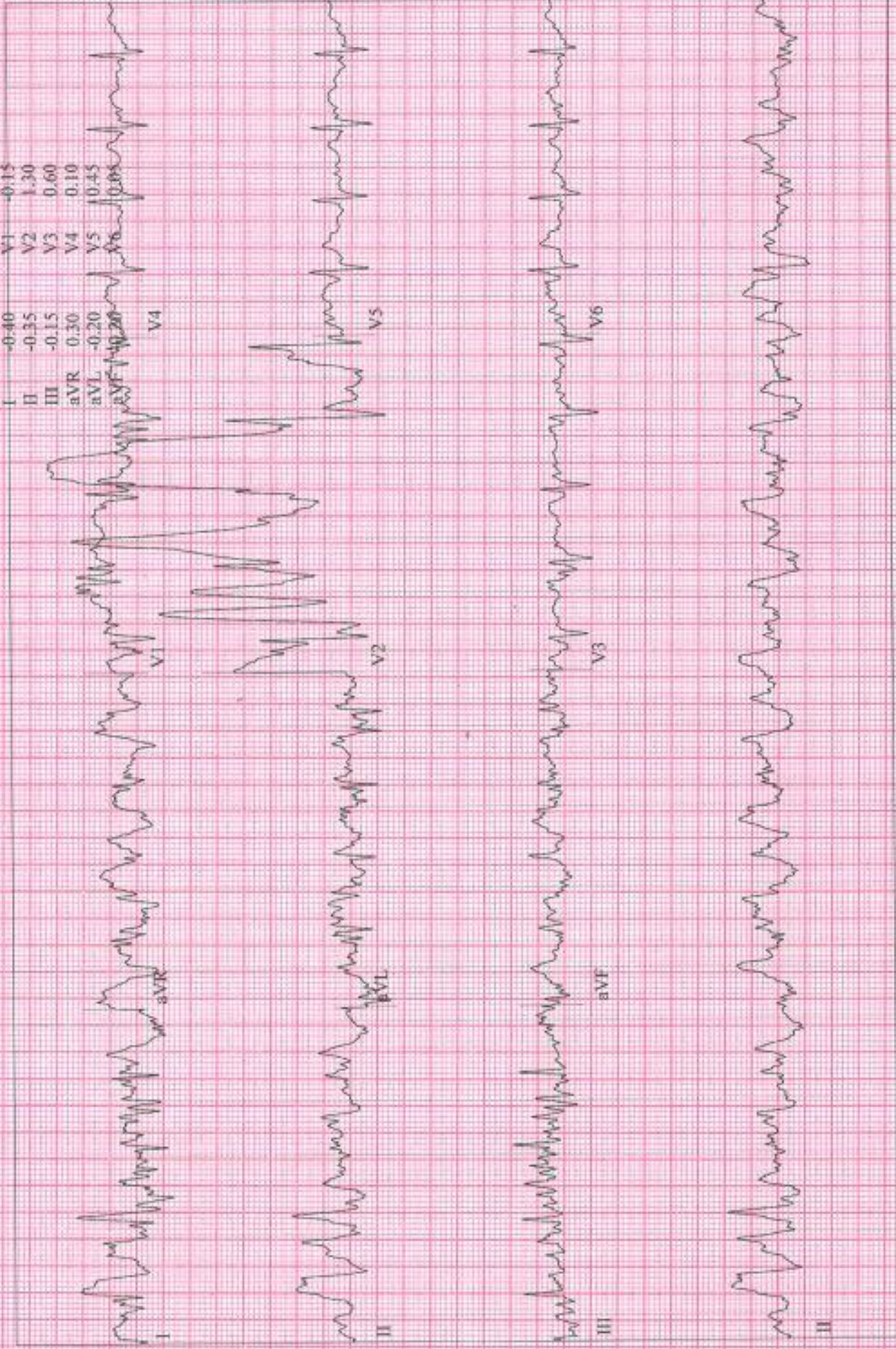
10.0%

SHALBY HOSPITAL

Measured at 60ms Post J (10mm/mV)

Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	-0.40	V1	-0.15
II	-0.35	V2	1.30
III	-0.15	V3	0.60
aVR	0.30	V4	0.10
aVL	-0.20	V5	0.45



DHARMENDRA SINGH, PAL  
Patient ID 66942  
07.09.2024  
12:43:47

12-Lead Report  
EXERCISE  
STAGE 1  
02:50

127 bpm  
120/70 mmHg

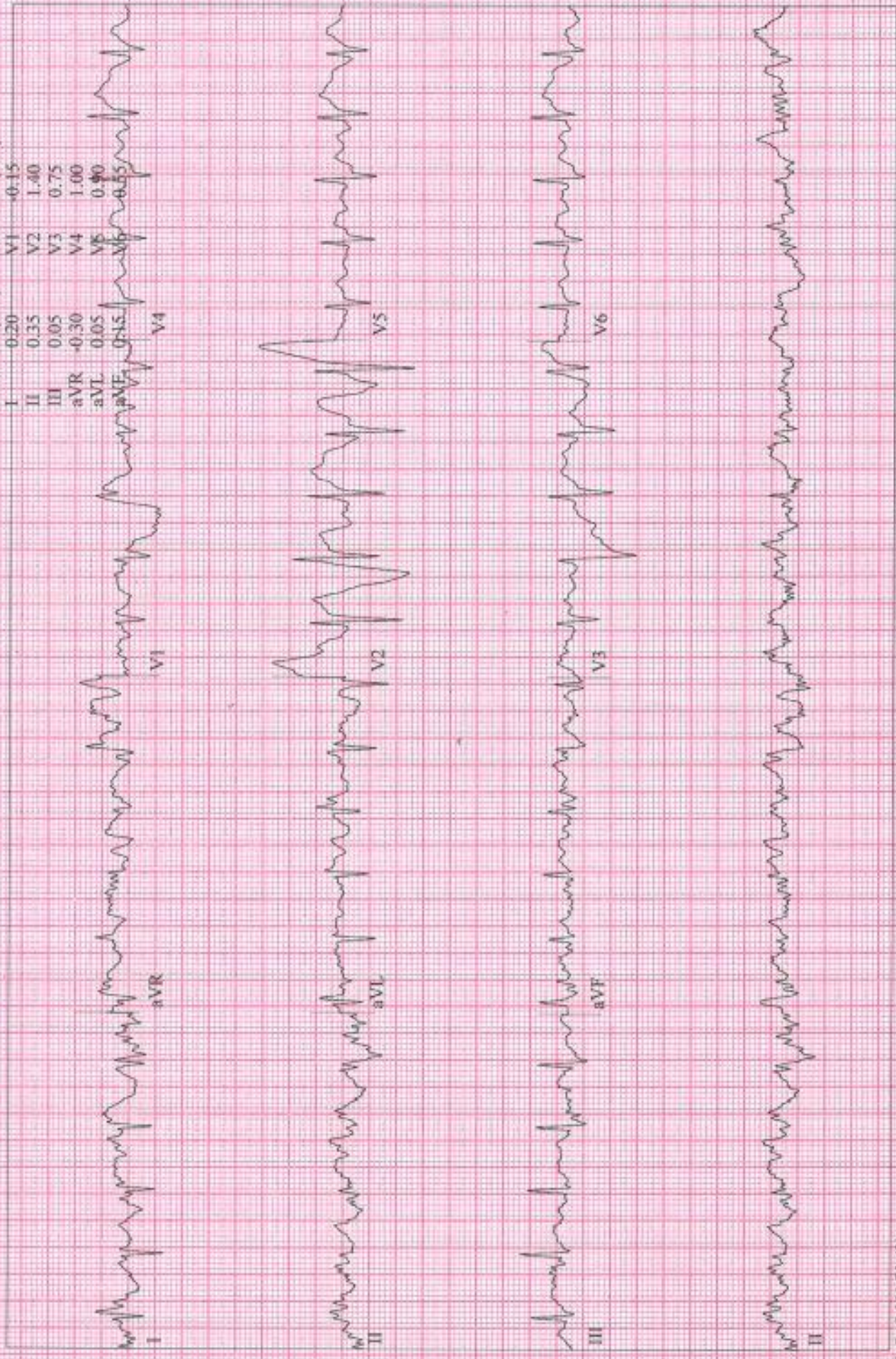
BRUCE  
2.7 km/h  
10.0 %

SHALBY HOSPITAL

Measured at 60ms Post J (10mm/mV)  
Auto Points

Lead	ST(mm)	Lead	ST(mm)
------	--------	------	--------

I	-0.20	V1	-0.15
II	0.35	V2	1.40
III	0.05	V3	0.75
aVR	-0.30	V4	1.00
aVL	0.05	V5	0.90
aVF	0.15	V6	0.55



DHARMENDRA SINGH, PAL  
Patient ID: 66942  
07.09.2024  
12:46:47

12-Lead Report  
EXERCISE  
STAGE 2  
05:50

162 bpm  
130/70 mmHg

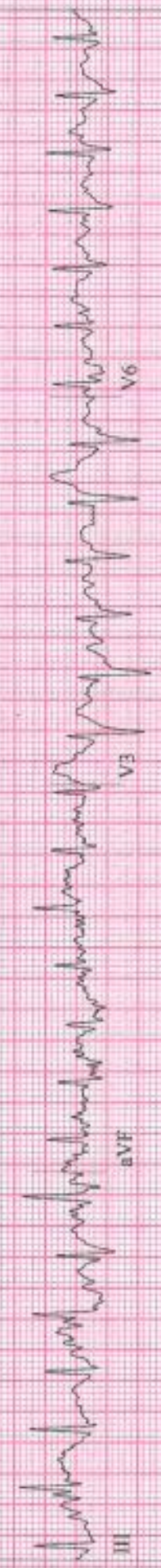
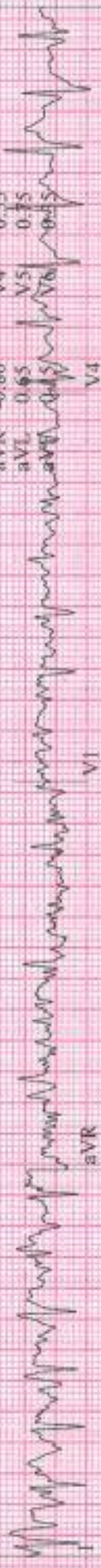
BRUCE  
4.0 km/h  
12.0 %

SHALBY HOSPITAL

Measured at 60ms Post J (10mm/mV)  
Auto Points

Lead ST(mm) Lead ST(mm) \*

Lead	ST(mm)	Lead	ST(mm) *
I	0.90	V1	-0.46
II	0.60	V2	1.60
III	-0.30	V3	0.90
aVR	-0.80	V4	0.55
aVL	0.65	V5	0.75



DHARMENDRA SINGH, PAL  
Patient ID: 66942  
07.09.2024  
12:48:06

12-Lead Report ( PEAK EXERCISE )  
EXERCISE  
STAGE 3  
07:09

BRUCE  
5.4 km/h  
14.0 %

173 bpm  
140-80 mmHg

SHALBY HOSPITAL

Measured at 60ms Post J (10mm/mV)  
Auto Points

Lead ST(mm) Lead ST(mm)

I -0.60 V1 -0.65

II 0.00 V2 1.70

III -0.70 V3 1.30

aVR -0.30 V4 0.70

aVL 0.70 V5 0.95

aVF 0.35 V6 0.35



DHARMENDRA SINGH, PAL  
Patient ID 66942  
07.09.2024  
12:48:55

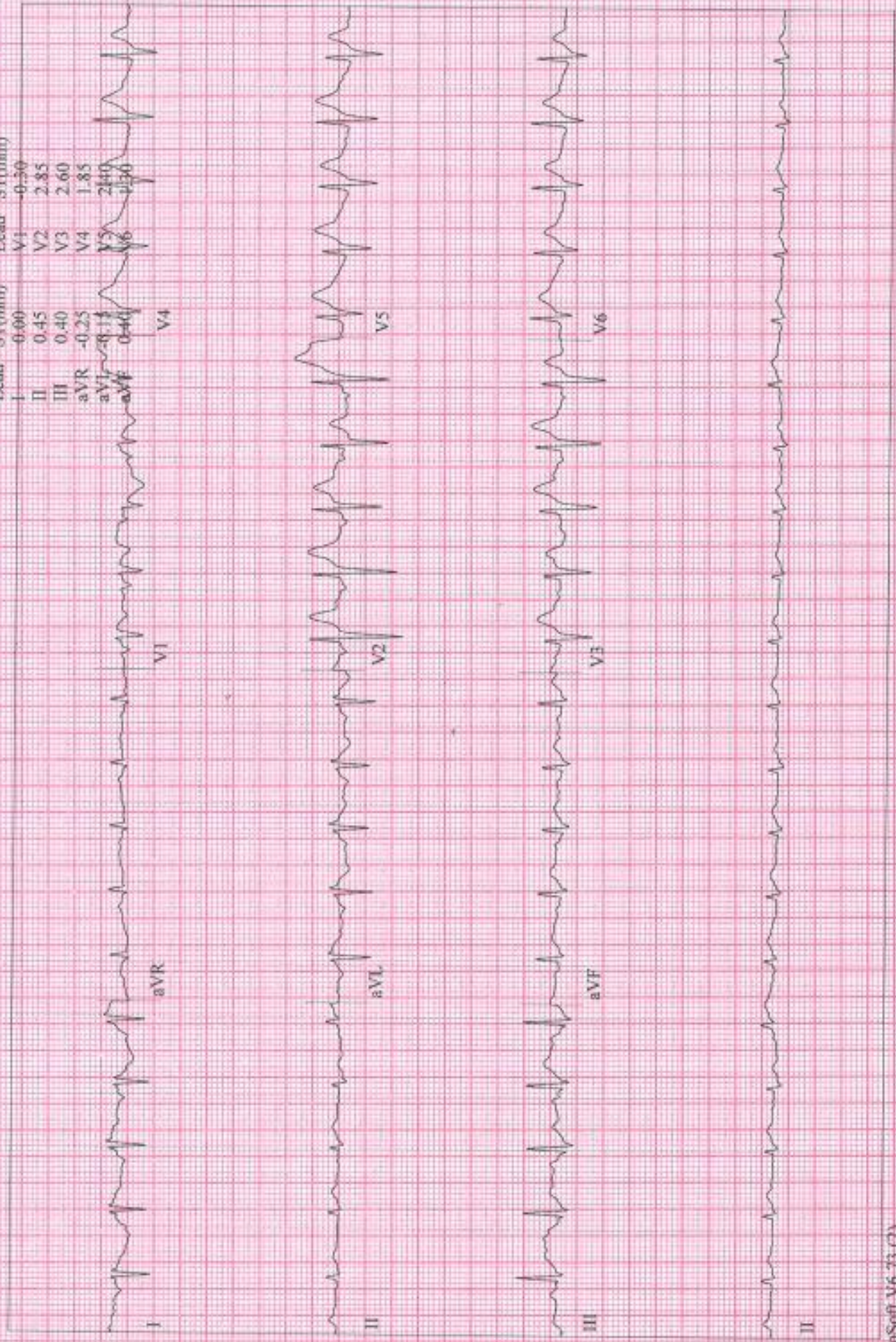
12-Lead Report  
RECOVERY  
#1  
00:50  
129 bpm  
140/80 mmHg

BRUCE  
0.0 km/h  
0.0 %

SHALBY HOSPITAL

Measured at 60ms Post J (10mm/mV)  
Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	0.00	V1	-0.50
II	0.45	V2	2.85
III	0.40	V3	2.60
aVR	-0.25	V4	1.85
aVL	-0.15	V5	2.40
aVF	0.40	V6	1.50



DHARMENDRA SINGH, PAL

Patient ID 66942  
07.09.2024  
12:49:55

12-Lead Report  
RECOVERY  
#1  
01:50

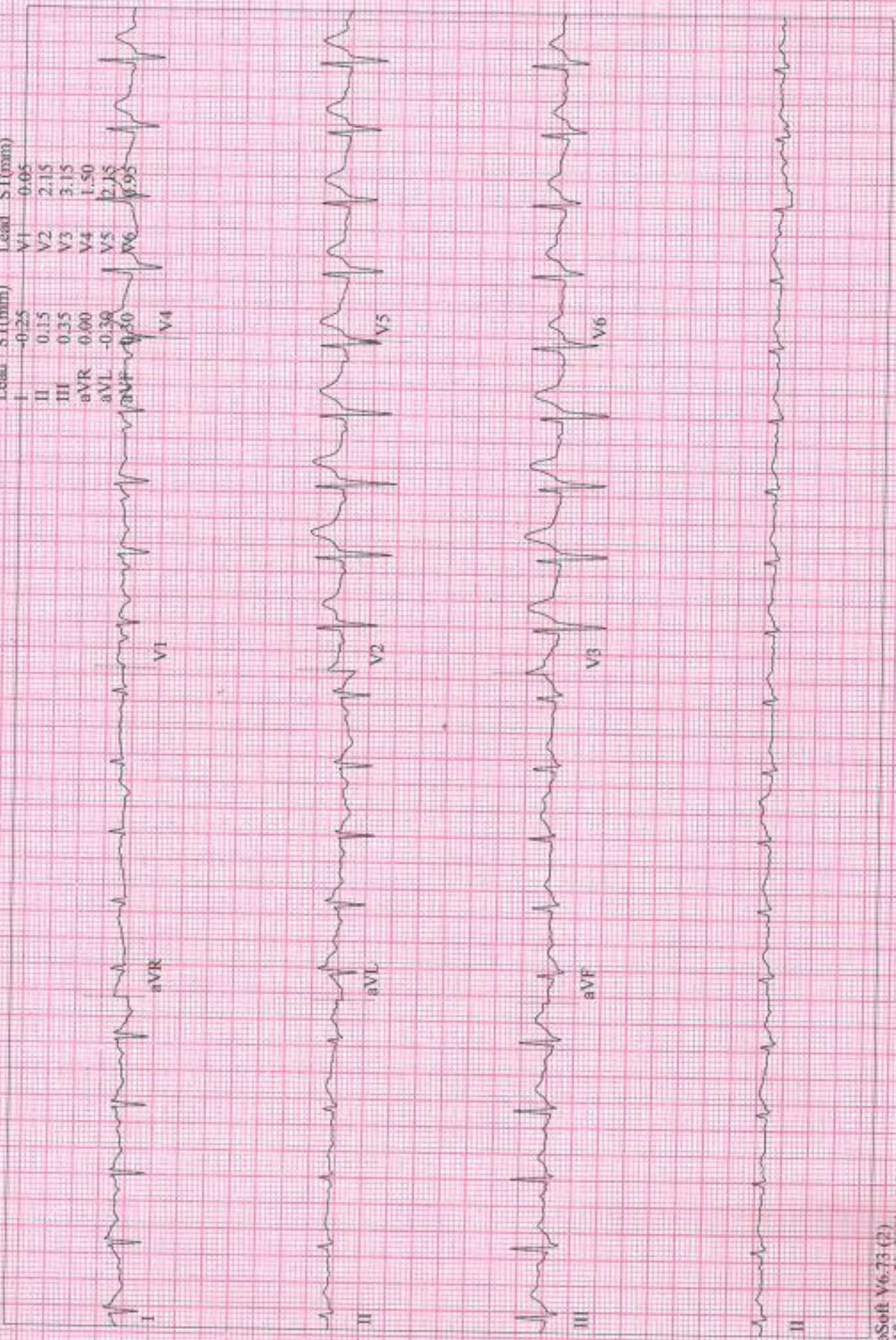
115 bpm  
140/80 mmHg

BRUCE  
0.0 km/h  
0.0 %

SHALBY HOSPITAL

Measured at 60ms Post J (10mm/mV)  
Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	-0.25	V1	0.05
II	0.15	V2	2.15
III	0.35	V3	3.15
aVR	0.00	V4	1.50
aVL	-0.30	V5	2.15
aVF	0.80	V6	0.95





DHARMENDRA SINGH, PAL

Patient ID: 66942

07.09.2024

12:50:55

12-Lead Report

RECOVERY

#1

02:50

106 bpm

120/70 mmHg

BRUCE

0.0 km/h

0.0 %

SHALBY HOSPITAL

Measured at 60ms Post J (10mm/mV)

Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	-0.05	V1	0.00
II	0.15	V2	1.70
III	0.20	V3	1.70
aVR	0.00	V4	0.85
aVL	-0.10	V5	1.30
aVF	0.75	V6	0.60

ID: \_\_\_\_\_ Name: \_\_\_\_\_ Birth date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ years  
Sex: M cm kg mmHg

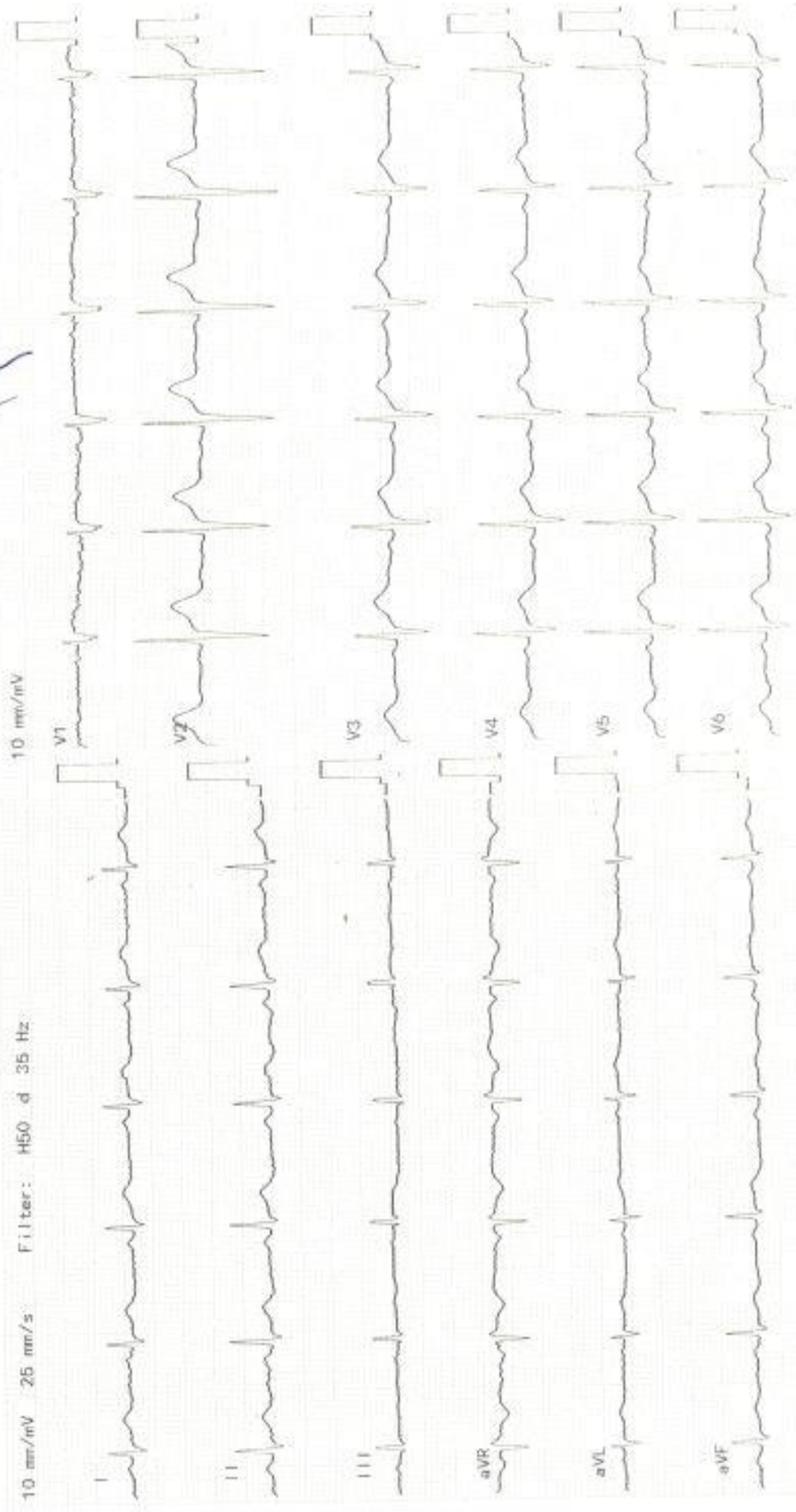
Medication:  
Symptoms:  
History:  
fent. rate  
PR int  
QRS dur  
QT/QTc(E) int  
1/2QRS/T axis  
V5/SV1 amp  
V5+SV1 amp

77 bpm  
142 ms  
92 ms  
360/392 ms  
26/68/22 ms  
1.22/0.46 mV  
1.68 mV

1100 Sinus rhythm  
9110 \*\* normal ECG \*\*

*Thrombolytic study*  
*ENT*  
*PAI*

Unconfirmed Report  
Reviewed by:



Patient Name: DHARMENDRA SINGH PAL		UHID: 370974	
Age / Sex: 30 Yrs. / Male		Study:	USG Abdomen + Pelvis
Referred By:	Dr. at shalby Hospital	Date: 07.09.2024	

**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** 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. 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.*

DR. NITHY DESAI  
(CONSULTANT RADIOLOGIST)

**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: I 85110G I2004PLC044667





Pre - op

Post - op

Health Check-up

Date : 7/9/24

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

Patient Name : Dharamendra Singh Patel Age / Sex : 80/7

Address : Godadray

**Complaints :**

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

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

Swelling : \_\_\_\_\_

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

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 : \_\_\_\_\_

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. Scaling*

*Jadev t<sup>m</sup>*

**Dr. Darshini V. Shah**  
(Consultant Dental Surgeon)