



OPD ASSESSMENT FORM



Name Mr. Varun Dixit Age.Sex 29/m MR.No. S150396
 Doctor Dr. Shailaja Desai Date 2/3/24
 Ht : _____ Wt. : _____ Temp : _____ Pulse : _____ BP : _____
 SPO2 : _____ Post of walk SPO2 : _____

Chief Complaints :

Drug / Food Allergy :

- Routine dental checkup

Prior Medication Reviewed : Yes No

On examination :

Past History :

- Astain

Provisional Diagnosis :

Nutritional Assessment :

**Treatment and further Advices :
(Write in Capital Letters)**

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

Rx

Investigation advised :

1) scaling

Dr. Shailaja Desai
Dr. Shailaja Desai
 B.D.S. (Dental Surgeon)
 A-9783
 Dental Surgeon
 Sunshine Global Hospital, Surat
 Signature

Follow Up : _____ Date : _____



OPD ASSESSMENT FORM



Name Mr. Vyasam Dixit Age.Sex 29/m MR.No. 5150396

Doctor Dr Hardik Shroff Date 2/3/24

Ht : _____ Wt. : _____ Temp : _____ Pulse : _____ BP : _____

SPO2 : _____ Post of walk SPO2 : _____

Chief Complaints :

Drug / Food Allergy :

no complaint

Prior Medication Reviewed : Yes No

On examination : BE RW. Seg NAD

Past History :

Vr (6/6 D. 6)

Emetia (Central)

BE NAD

Provisional Diagnosis :

Nutritional Assessment :

Nit ophthalmic

Treatment and further Advices :
(Write in Capital Letters)

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

Rx

Investigation advised :

Dr. Hardik Shroff
DOMS, DNB (Ophthalmology)
Regd. No. G-28902

SUNSHINE GLOBAL HOSPITAL
Piplod, SURAT
Signature

Follow Up : Soe Date : _____



OPD ASSESSMENT FORM



Name Mr Vaasam Dixit Age.Sex 29/M MR.No. 5150396
 Doctor Dr Purnav Shukh Date 02/03/2024
 Ht : 174 cm Wt. : 83.5 kg Temp : _____ Pulse : 94 b/m BP : 133/77 mm/Hg
 SPO2 : 97% Post of walk SPO2 : _____

Chief Complaints :

no complaint.

Drug / Food Allergy :

Prior Medication Reviewed : Yes No

On examination :

Past History :

Provisional Diagnosis :

Eg. Digestif. 1-1-1

Nutritional Assessment :

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

Treatment and further Advices :
(Write in Capital Letters)

R_x

Investigation advised :



Follow Up : _____ Date : _____

Signature



MR No.	: S150396	Collection Date	: 02/03/2024 9:16AM
Patient Name	: Mr. Varun Dixit	Age	: 29 Y Sex : Male
Ref By	: Dr. Hospital A Doctor	Report Date	: 02/03/2024 9:34AM

HAEMATOLOGY

Parameter	Result	Units	Normal Range
CBC with ESR			
HAEMOGLOBIN	14.9	gm/dl	13.0 - 17.0
PCV	46.3	%	40 - 50
RBC COUNT	5.02	mill/cmm	4.5 - 5.5
MCV	92.2	fl	76 - 96
MCH	29.7	pg	26 - 32
MCHC	32.2	%	32 - 36
RDW	11.5	%	11 - 15
WBC COUNT	8120	/cmm	4000 - 11000
ESR	08	mm/hr	0 - 10
DIFFERENTIAL WBC COUNT			
NEUTROPHIL	57	%	40 - 70
LYMPHOCYTES	32	%	20 - 40
EOSINOPHILS	04	%	1 - 6
MONOCYTES	07	%	2 - 11
BASOPHILS	00	%	0 - 2
PERIPHERAL SMEAR			
RBC MORPHOLOGY	Normochromic		
WBC MORPHOLOGY	Normocytic		
PLATELET ON SMEAR	Within Normal Range		
HEMOPARASITES	Adequate		
	Not Seen		

SYSMEX XN-550

***** End Report *****

Dr. Shobha Choksi
MD, DCP (Pathology)
Reg. No.: G-9074



MR No.	: S150396	Collection Date	: 02/03/2024 9:16AM
Patient Name	: Mr. Varun Dixit	Age	: 29 Y Sex : Male
Ref By	: Dr. Hospital A Doctor	Report Date	: 02/03/2024 9:35AM

HAEMATOLOGY

<u>Parameter</u>	<u>Result</u>	<u>Normal Range</u>
BLOOD GROUP & RH FACTOR		
BLOOD GROUP	"O"	
RH FACTOR	POSITIVE	

***** End Report *****

Dr. Shobha Choksi
MD, DCP (Pathology)

Reg. No.: G-9074

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MR No. : S150396	Collection Date : 02/03/2024 9:16AM
Patient Name : Mr. Varun Dixit	Age : 29 Y Sex : Male
Ref By : Dr. Hospital A Doctor	Report Date : 02/03/2024 9:29AM

BIOCHEMISTRY

Parameter	Result	Units	Normal Range
HBA1C [GLYCOSYLATED HEAMOGLOBIN]			
HbA1C	4.4	%	Non-Diabetic level: <6 Good Control: 6 - 7 Poor Control: 7 - 8 Action Suggested > 8
MEAN BLOOD GLUCOSE	79.58	mg/dl	

The test is done on Cobas Integra 400plus-Turbidimetric Inhibition ImmunoAssay

Note:- Criteria for the diagnosis of diabetes HbA1c $\geq 6.5\%$

- HbA1c is important test for the assessment of long term blood glucose control (also called glycemic control).
- HbA1C reflects mean glucose concentration over past 6-8 weeks and provides a much better indication of long term glycemic control than blood glucose determination.
- HbA1C is formed by non-enzymatic reaction between glucose and Hb. This reaction is irreversible and therefore remains unaffected by short term fluctuations in blood glucose levels.
- Long term complications of diabetes such as retinopathy, nephropathy, and neuropathy are potentially serious and can lead to blindness kidney failure etc.
- Genetic Variants (Hb-S trait, Hb-C trait) elevated fetal haemoglobin & chemically modified derivatives of haemoglobin (eg carbamylated Hb in patients with renal failure) can affect the accuracy of HbA1C measurement.

FASTING BLOOD SUGAR (FBS)

FASTING BLOOD GLUCOSE (Hexokinase)	98	mg/dl	74 - 110
FASTING URINE GLUCOSE	Absent		
FASTING URINE KETONE	Absent		

***** End Report *****

Dr. Shobha Choksi
MD, DCP (Pathology)

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MR No. : S150396	Collection Date :
Patient Name : Mr. Varun Dixit	Age : 29 Y Sex : Male
Ref By : Dr. Hospital A Doctor	Report Date : 02/03/2024 9:30AM

BIOCHEMISTRY

Parameter	Result	Units	Normal Range
LIPID PROFILE			
SERUM CHOLESTEROL CHOD PAP	214 ✓	mg/dl	50 - 200
HDL CHOLESTEROL Direct	46	mg/dl	40 - 60
LDL CHOLESTEROL Direct	141.1 ✓	mg/dl	0 - 100
SERUM TRIGLYCERIDE GPO PAP	136	mg/dl	50 - 150
VLDL Calc	27.2	mg/dl	0 - 30
CHOLESTEROL / HDL RATIO	4.65		0 - 5
LDL / HDL RATIO	3.07		0 - 3

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment.
- Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.
- Details on test interpretation available from the lab.

TEST	NEAR OPTIMAL (Moderate Risk)	BORDER LINE (Risk)	HIGH (Risk)	VERY HIGH
CHOLESTROL	160-199	200-239	240-279	280
HDL	50-59	40-49	< 40	
LDL	100-129	130-159	160-190	>190
TRIGLYCERIDES	150-169	170-199	240-499	>500
CHO/HDL RATIO	3.3-4.4	4.4-11.0	>11.0	
LDL/HDL RATIO	0.5-3.0	3.0-6.0	>6.0	

***** End Report *****

BC
Dr. Shobha Choksi
MD, DCP (Pathology)

Reg. No.: G-9074

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MR No. : S150396 Collection Date : 02/03/2024 9:16AM
Patient Name : Mr. Varun Dixit Age : 29 Y Sex : Male
Ref By : Dr. Hospital A Doctor Report Date : 02/03/2024 9:32AM

BIOCHEMISTRY

<u>Parameter</u>	<u>Result</u>	<u>Units</u>	<u>Normal Range</u>
LIVER FUNCTION TEST			
ALKALINE PHOSPHATASE (IFCC)	72	U/L	35 - 130
BILIRUBIN TOTAL Diazo	1.5	mg/dl	0.0 - 1.2
BILIRUBIN DIRECT Diazo	0.5	mg/dl	0.0 - 0.4
BILIRUBIN INDIRECT (Calc)	1	mg/dl	0.0 - 0.8
SGPT (IFCC)	25	U/L	5 - 41
SGOT (IFCC)	23	U/L	5 - 40
SERUM TOTAL PROTEIN Biuret	7.8	gm/dl	6.6 - 8.7
SERUM ALBUMIN BCG	5.2	gm/dl	3.5 - 5.2
SERUM GLOBULIN Calc	2.6	gm/dl	1.5 - 3.5
SERUM A/G RATIO Calc	2	gm/dl	1.5 - 2.5
SERUM CREATININE			
SERUM CREATININE (JAFPE)	0.9	mg/dl	0.5 - 1.2
SERUM URIC ACID			
SERUM URIC ACID (Uricase)	6.6	mg/dl	3.4 - 7.0
BUN [BLOOD UREA NITROGEN]			
BUN	11.0	mg/dl	8 - 23
ALBUMIN-CREATININE RATIO			
URINE ALBUMIN/MICROALBUMIN (Immunoturbidimetry)	7.4	mg/L	
URINE CREATININE (JAFPE)	83.3	mg/dl	
ALBUMIN-CREATININE RATIO (Calculated)	8.88	mg/gm	Normal: <30; Microalbuminuria: 30-299; Clinical Albuminuria: >300

***** End Report *****

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Dr. Shobha Choksi
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MR No.	: S150396	Collection Date	: 02/03/2024 9:16AM
Patient Name	: Mr. Varun Dixit	Age	: 29 Y Sex : Male
Ref By	: Dr. Hospital A Doctor	Report Date	: 02/03/2024 9:29AM

CLINICAL CHEMISTRY

Parameter	Result	Units	Normal Range
THYROID FUNCTION TEST [TFT]			
TOTAL T3 (CLIA)	1.62	ng/ml	0.846 - 2.02
TOTAL T4 (CLIA)	10.95	ug/dl	5.1 - 14.0
TSH (CLIA)	3.71	uIU/ml	0.2 - 4.5

Note:-

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 (freeT4). Additionally the hypothalamic tripeptide, thyrotropin releasing hormone (TSH) 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 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.

***** End Report *****

Dr. Shobha Choksi
MD, DCP (Pathology)

Reg. No.: G-9074

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MR No. : S150396	Collection Date : 02/03/2024 9:16AM
Patient Name : Mr. Varun Dixit	Age : 29 Y Sex : Male
Ref By : Dr. Hospital A Doctor	Report Date : 02/03/2024 9:35AM

CLINICAL PATHOLOGY

Parameter	Result	Normal Range
URINE ROUTINE & MICROSCOPIC EXAMINATION		
TYPE OF SPECIMEN - URINE	Random	
PHYSICAL EXAMINATION		
QUANTITY	15	ml
COLOUR	Pale Yellow	
APPEARANCE	Sl.Turbid	
REACTION (pH)	6.0	
SPECIFIC GRAVITY	1.030	
CHEMICAL EXAMINATION		
PROTEIN	Absent	
GLUCOSE	Absent	
KETONE	Absent	
BILE SALT	Absent	
BILE PIGMENT	Absent	
OCULT BLOOD	Present(+)	
NITRITE	Absent	
MICROSCOPIC EXAMINATION		
PUS CELLS	1-2	/hpf
EPITHELIAL CELLS	1-2	/hpf
RBC	5-6	/hpf
CASTS	Absent	
CRYSTALS	Absent	
BACTERIA	Absent	
YEAST CELLS	Absent	

***** End Report *****

Dr. Shobha Choksi
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MR No. : S150396

Patient Name : Mr. Varun Dixit

Ref By : Dr. Hospital A Doctor

Collection Date : 02/03/2024 9:16AM

Age : 29 Y Sex : Male

Report Date : 02/03/2024 11:34AM

BIOCHEMISTRY

<u>Parameter</u>	<u>Result</u>	<u>Units</u>	<u>Normal Range</u>
POST PRANDIAL BLOOD GLUCOSE [PPBS]			
POST. PRANDIAL BLOOD GLUCOSE (Hexokinase)	101	mg/dl	100 - 140
POST PRANDIAL URINE GLUCOSE	SNR		
POST PRANDIAL URINE KETONE	SNR		

***** End Report *****

Dr. Shobha Choksi
MD, DCP (Pathology)

Reg. No.: G-9074

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PAT. NAME: Varun Dixit	Date : 02/03/2024
REF. DOCTOR : Hosp Dr.	AGE : 29 Yrs / M
INV. : Radiograph of Chest PA	MR NO. : S150396

Clinical Details: HC.

Observation:

- Both the lung fields appears normal.
- Both costophrenic angles appear clear.
- Both the hila appears normal.
- Trachea appears in midline.
- Cardiac size and other mediastinal shadows appears normal.
- Both domes of diaphragm appear normal.
- Bony thorax appears normal.


Dr. Sneha Dumaswala
MBBS, DNB-Radiodiagnosis
Consultant Radiologist
G-21796

Transcribed By: Fenali

Page: 1 out of 1
Date & Time of report: 02/03/2024 - 11:17 AM

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PAT. NAME : Varun Dixit	Date : 02/03/2024
REF. DOCTOR : Hosp. Dr.	AGE : 29 Yrs / M
INV. : USG Whole Abdomen	MR NO. : S150396

Findings:

Liver is mildly enlarge in size (15.9 cm), shape and shows normal echopattern. No e/o any focal or diffuse lesion noted. Intrahepatic biliary radicals are normal.

Gall bladder is contracted.

CBD and Portal Vein appears normal is size and calibre.

Pancreas is not visualized, obscured by bowel gas.

Spleen appears normal in size, shape and homogenous echopattern.

Both kidneys appear normal in size, shape and echopattern. The corticomedullary differentiation is well maintained. No e/o any calculus or hydronephrosis is seen.


Aorta and para-aortic regions appears normal. No e/o any lymphadenopathy.

Urinary bladder appears well distended and normal.

No e/o free fluid in pelvis.

IMPRESSION:

- Mild hepatomegaly.


Dr. Sneha Dumaswala
MBBS, DNB-Radiodiagnosis
Consultant Radiologist
G-21796

Transcribed By: Asha

Date & Time of report: 03/02/2024 - 11:18 AM

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LABULAR SUMMARY REPORT

ID: S150396
 Visit:
 2-Mar-2024
 9:00:29

29years Caucasian Male

BRUCE
 Max HR: 194bpm 101% of max predicted 191bpm
 Max BP: 170/92
 Reason for Termination: 10.4METS
 Comments:

25.0 mm/s
 10.0 mm/mV
 100hz

Referred by:
 Test ind:

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	Workload (METS)	HR (bpm)	BP (mmHg)	RPP (x100)
PRETEST	SUPINE	2:08	0.0	0.0	1.0	70	133/77	144
EXERCISE	STAGE 1	3:00	1.7	10.0	4.6	139	133/77	185
	STAGE 2	3:00	2.5	12.0	7.0	161		
	STAGE 3	3:00	3.4	14.0	10.1	188	140/80	263
	STAGE 4	0:14	4.2	16.0	10.4	194	140/80	272
RECOVERY	RECOVERY	4:48	**.*	**.*	1.0	78	170/92	218

TRT is negative for inducible tachycardia

Technician:

Unconfirmed

MAC55 010B

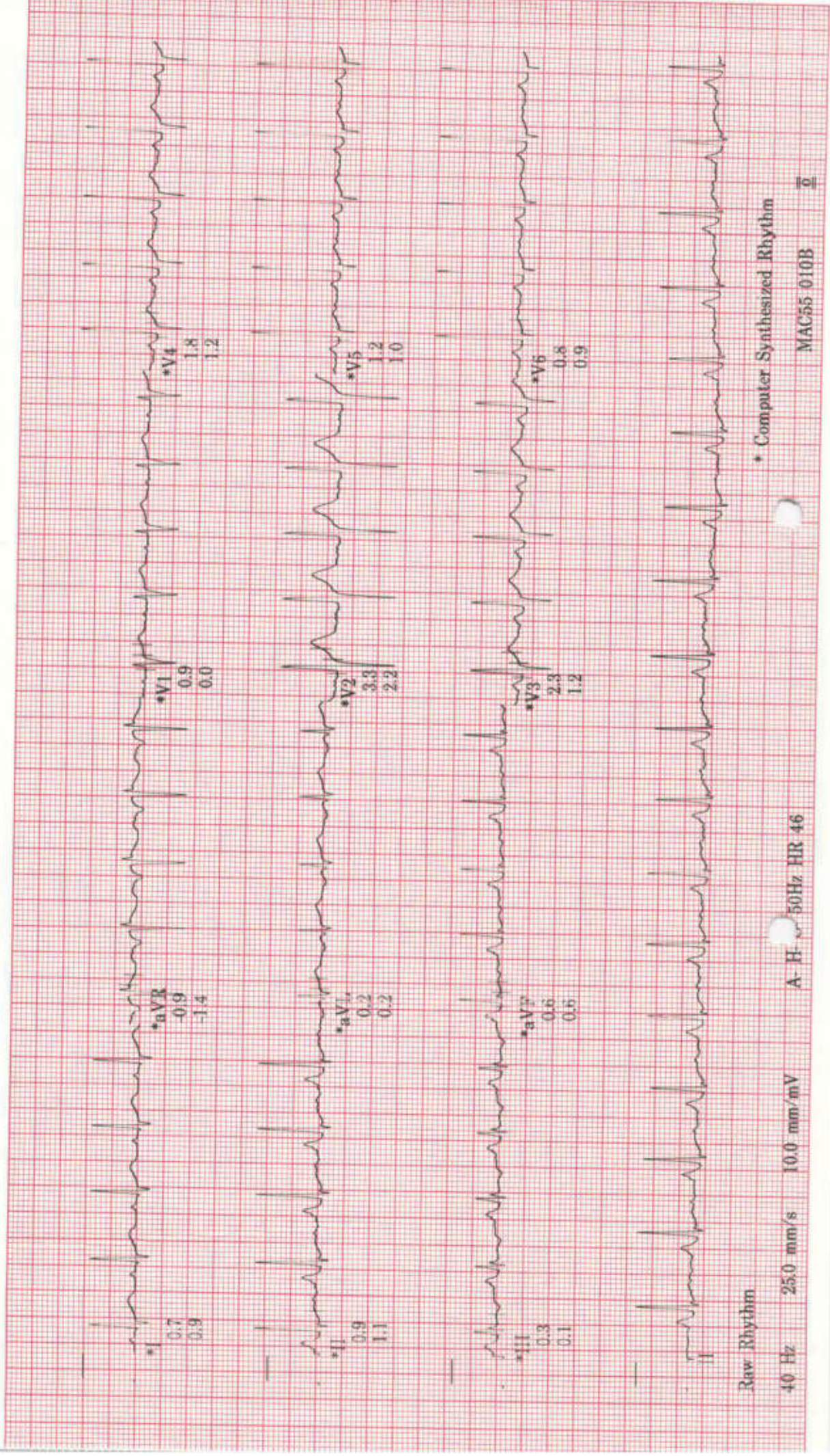
ID: S150396
Vis't:
2-Mar-2024
9:02:08

PRETEST
SUPINE
1:40
108bpm
BP: 133/77

ST @ 10mm/mV
80ms postJ

Lead
ST(mm)
Slope(mV/s)

BRUCE
** *mph
** *%



Raw Rhythm
40 Hz 25.0 mm/s 10.0 mm/mV A-F 50Hz HR 46
* Computer Synthesized Rhythm
MAC55 010B

Mr. Varun Dixit

ID: S150396

Visit:

2-Mar-2024

9:02:33

109bpm

BP: 133/77

ST @ 10mm/mV

80ms postJ

PRETEST

SUPINE

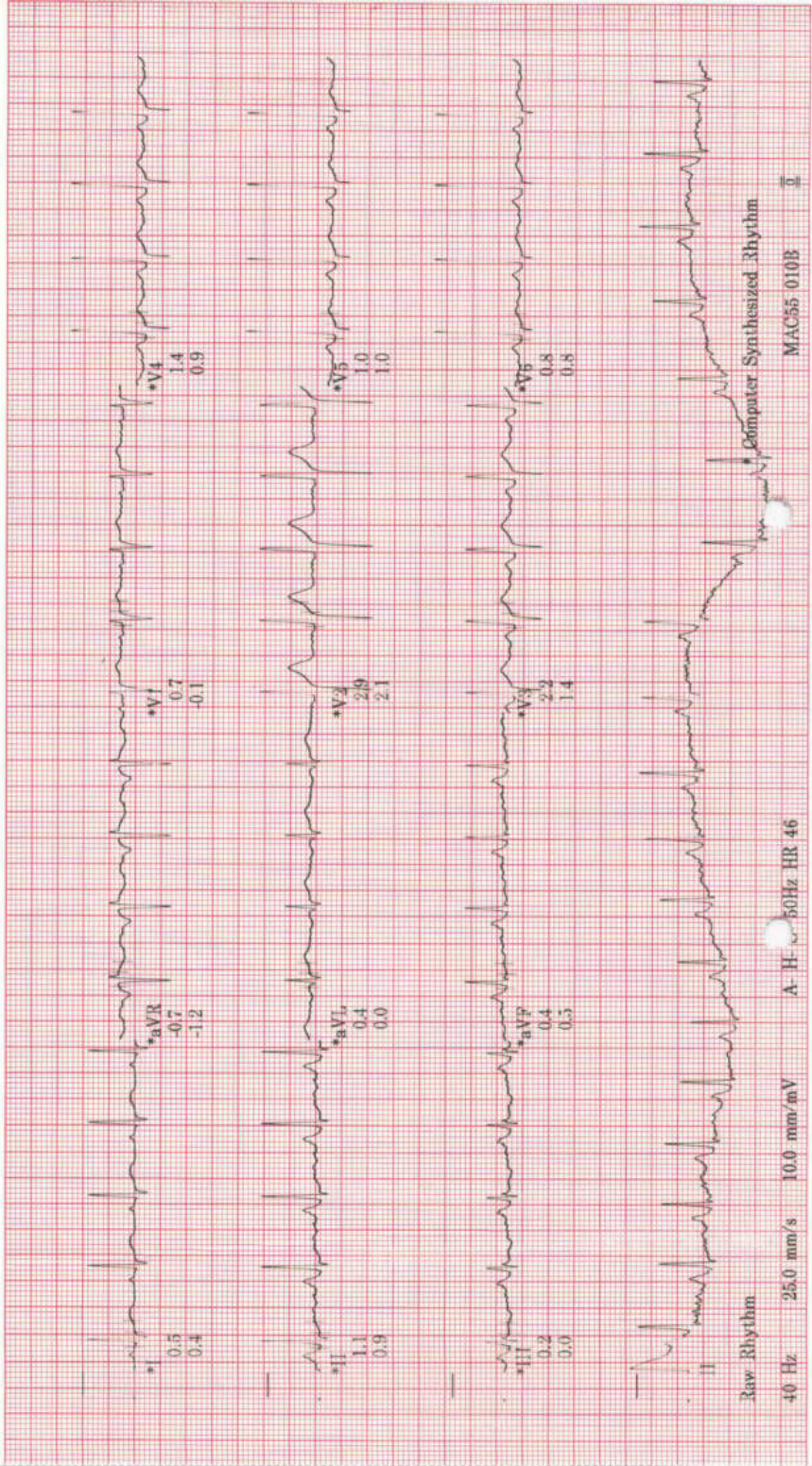
2:05

BRUCE

** *mph

** *%

Lead
ST(mm)
Slope(mV/s)



ST @ 10mm/mV

80ms postJ

Lead
ST(mm)
Slope(mV/s)



Raw Rhythm

40 Hz 25.0 mm/s 10.0 mm/mV

A-H 50Hz HR 46

* Computer Synthesized Rhythm

MAC55 010B

II

Mr. Varun Dixit

ID: S150396

Visit:

2-Mar-2024

9:08:36

161bpm

EXERCISE

STAGE 2

6:00

BRUCE

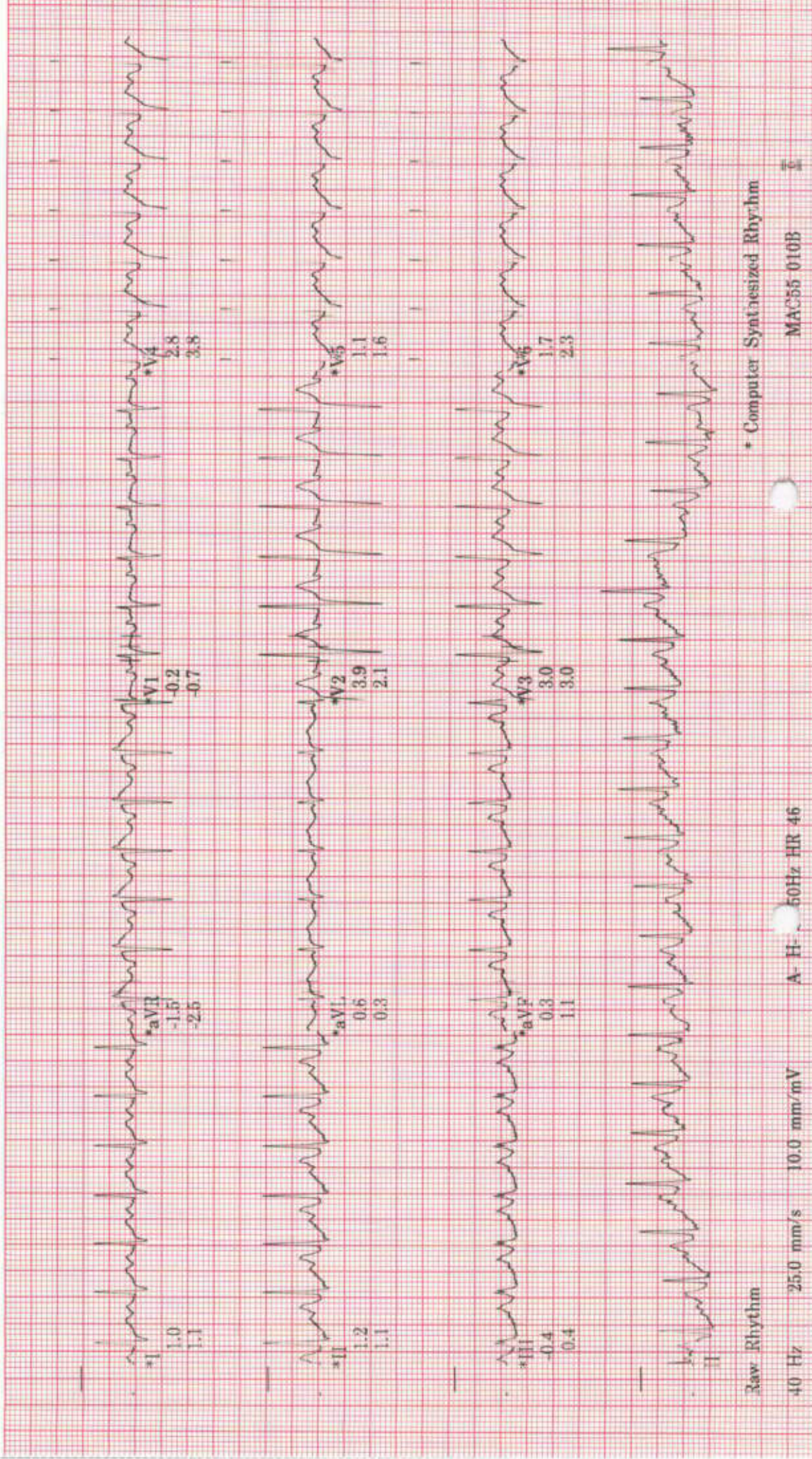
2.5mph

12.0%

ST @ 10mm/mV

80ms postJ

Lead
ST(mm)
Slope(m V/s)



Raw Rhythm

40 Hz 25.0 mm/s 10.0 mm/mV

A-H 50Hz HR 46

Computer Synthesized Rhythm

MAC55-010B

Mr. Varun Dixit

ID: S150396

Visit:

2-Mar-2024

9:11:36

LINKED MEDANS REPORT

EXERCISE

STAGE 3

9:00

BRUCE

3.4mph

14.0%

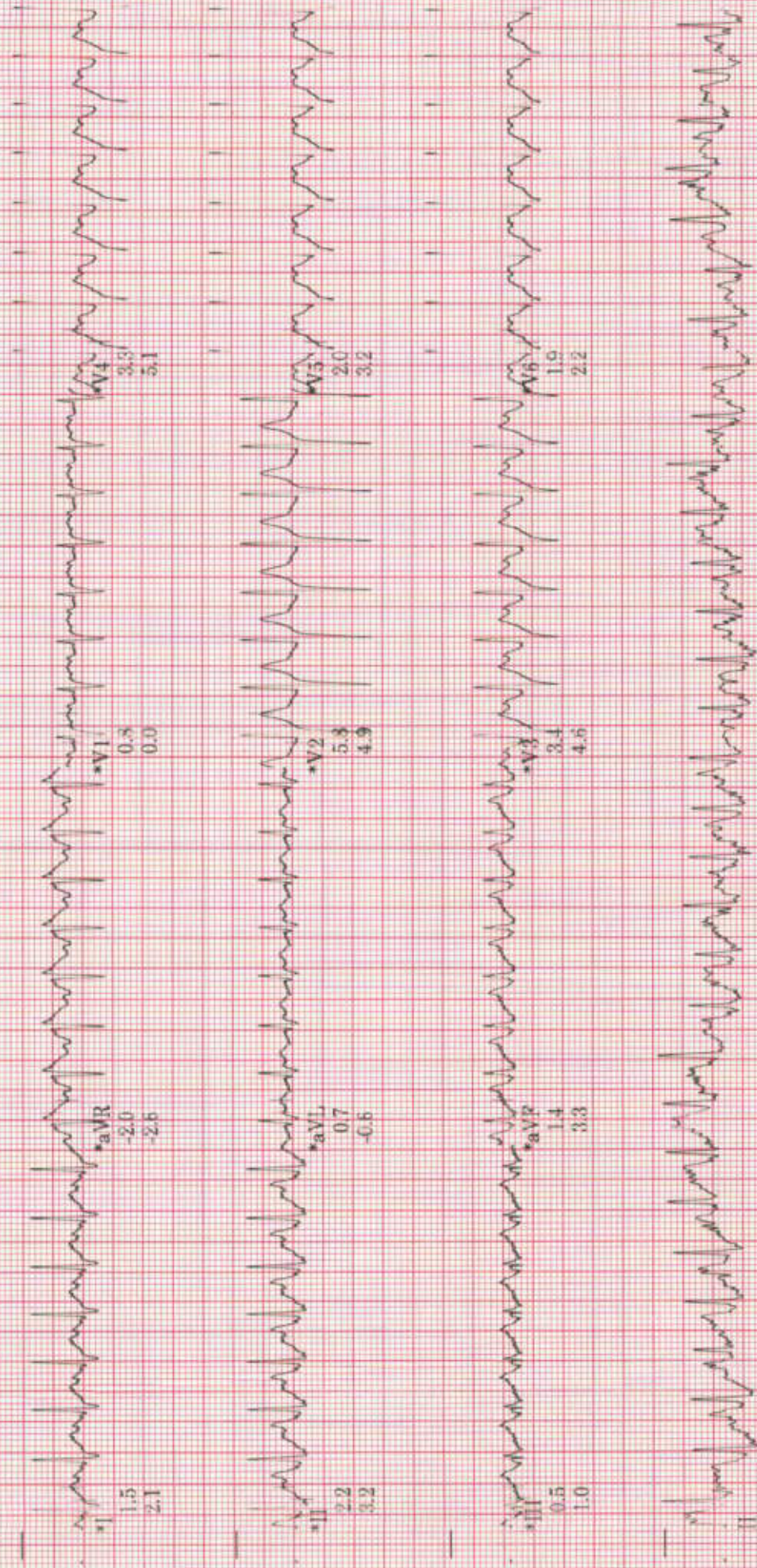
188bpm

BP: 140/80

ST @ 10mm/mV

80ms postJ

Lead
ST(mm)
Slope(mV/s)



Raw Rhythm

40 Hz 25.0 mm/s 10.0 mm/mV A-H 50Hz HR 46

* Computer Synthesized Rhythm

MAC55 010B 2

Mr. Varun Dixit

ID: S150396

Visit:

2-Mar-2024

9:11:50

194bpm

BP: 140/80

ST @ 10mm/mV

80ms postJ

EXERCISE

STAGE 4

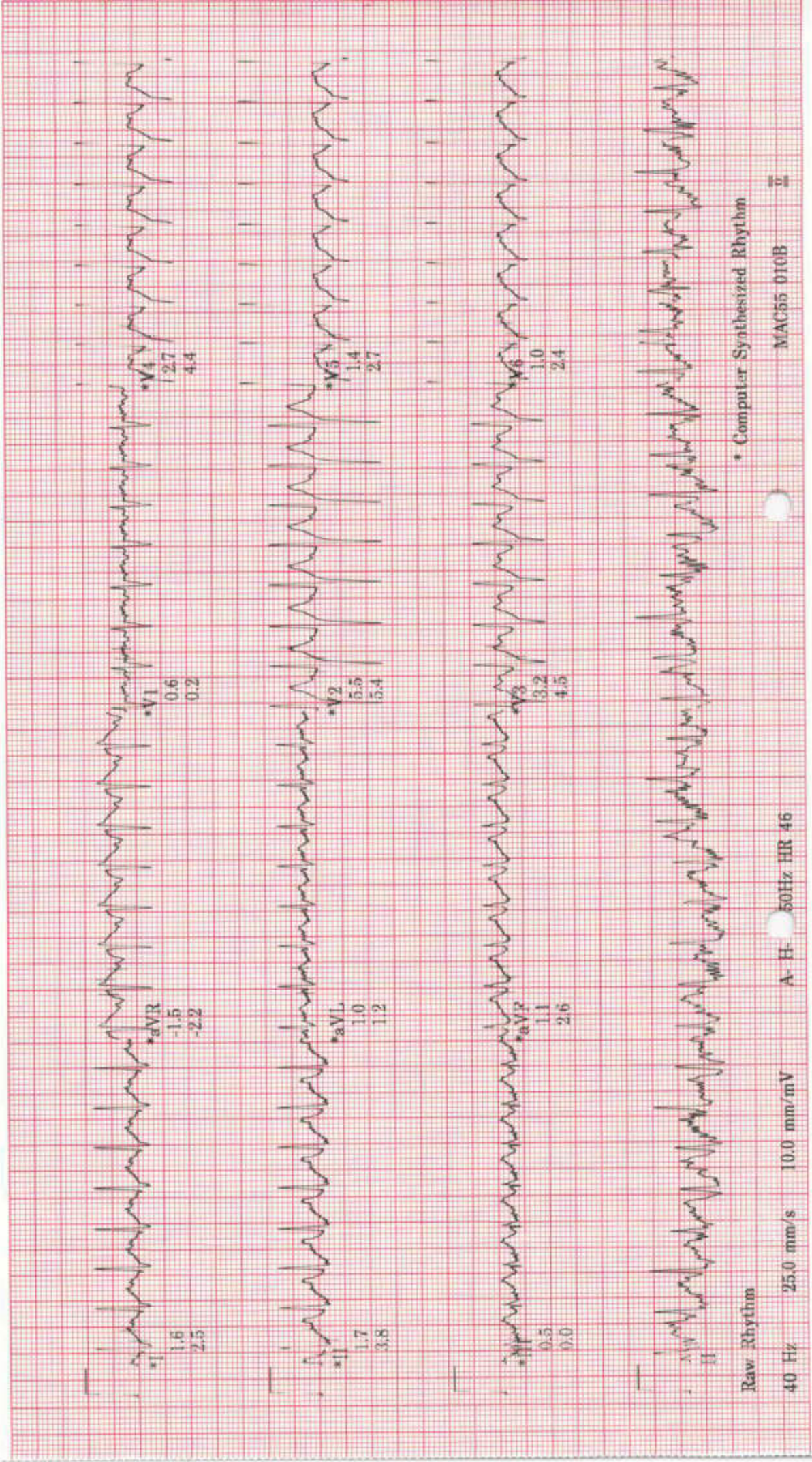
9:14

BRUCE

4.2mph

16.0%

Lead
ST(mm)
Slope(mV/s)



Raw Rhythm

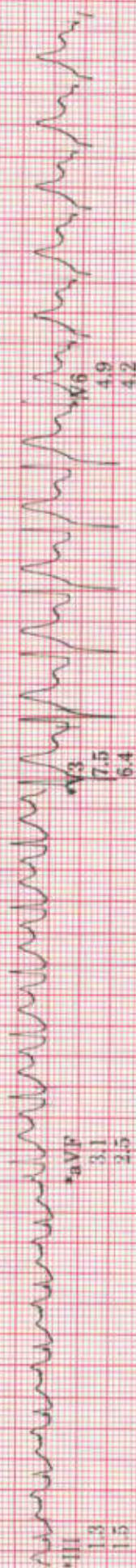
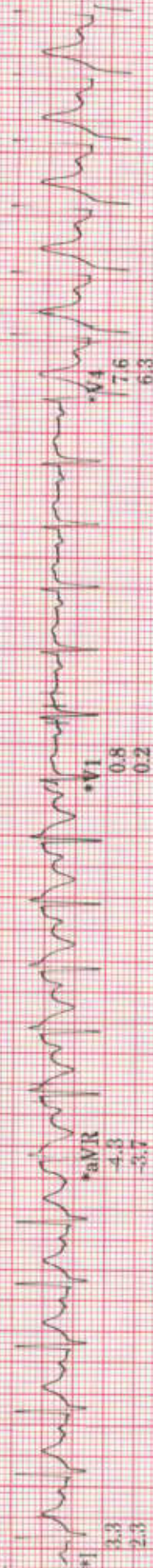
40 Hz 25.0 mm/s 10.0 mm/mV

A-H 50Hz HR 46

* Computer Synthesized Rhythm

MAC:55 010B

5



ID: S150396

Visit:

2-Mar-2024

9:15:50

RECOVERY
RECOVERY

132bpm

BP: 170/92

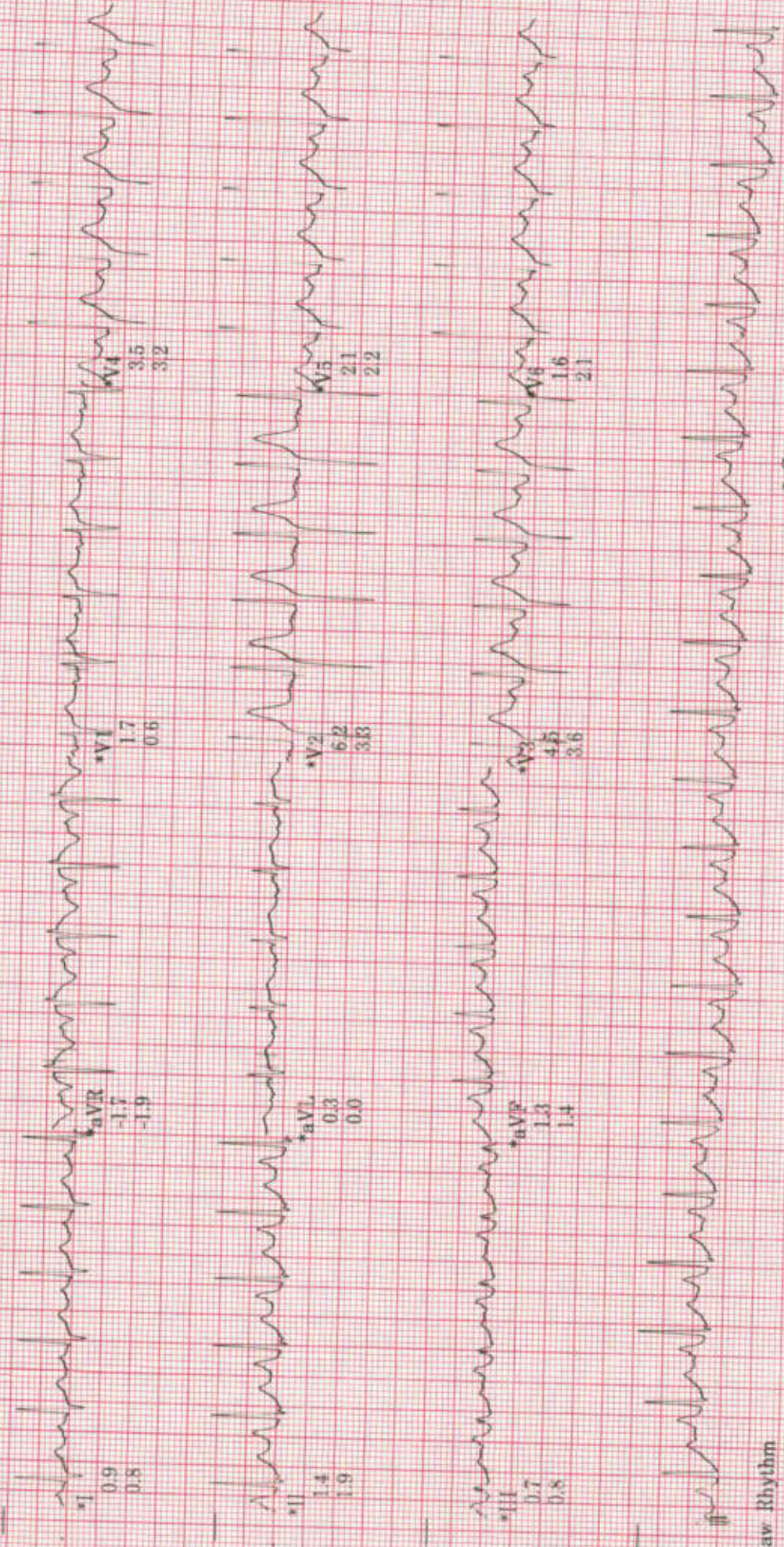
ST @ 10mm/mV
80ms postJ

BRUCE

***mph

***%

Lead
ST(mm)
Slope(mV/s)



Raw Rhythm

40 Hz

25.0 mm/s

10.0 mm/mV

A-H-S 10Hz HR 46

* Computer Synthesized Rhythm

MAC55 0.0B

5

ID: S150396

Visit:

2-Mar-2024

9:00:29

29 years

Caucasian

Male

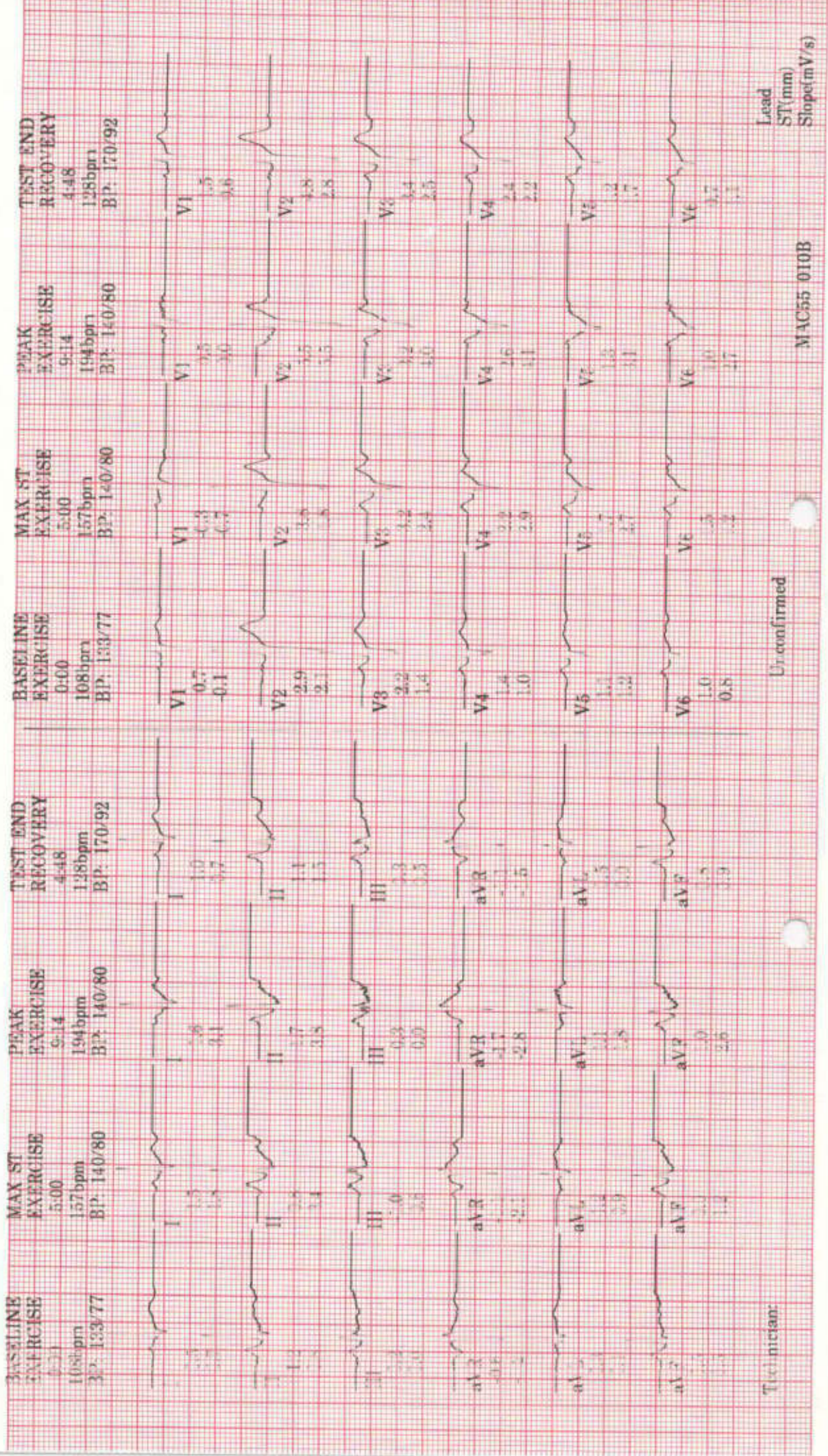
Referred by:
Test ind:

Exercise time: 9:14

Max HR: 194bpm 101% of max predicted 191bpm

Maximum workload: 10.4 METS

25.0 mm/s
10.0 mm/mV
100hz



Technician:

U_r confirmed

MAC55 010B

Lead
ST(mm)
Slope(mV/s)

ID: S150396

Visit:

2-Mar-2024

9:00:29

29years

Caucasian

Male

BRUCE

Exercise time: 9:14

Max HR: 194bpm 101% of max predicted 191bpm

Max BP: 170/92

Maximum workload: 10.4METS

Referred by:

Test ind:

25.0 mm/s
10.0 mm/mV
100hz

BASELINE

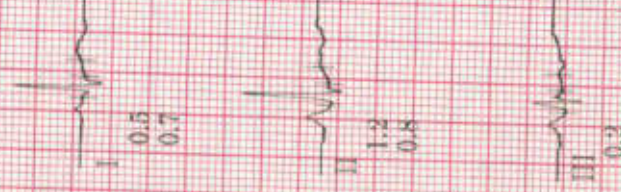
EXERCISE STAGE 1
0-00 1.0METS

108bpm
BP: 133/77 ST @ 10mm/mV
80ms postJ

EXERCISE STAGE 2
5:00 6.9METS

157bpm
BP: 140/80 ST @ 10mm/mV
80ms postJ

MAX ST
Lead ST(mm) Slope(mV/s)



Technician:

Unconfirmed

MAC55 010B

Mr. Varun Dixit
 ID: S150396

2-Mar-2024
 9:00:29

PRETEST
 SUPINE 2:05
 109bpm
 BP: 133/77
 1.0METS

EXERCISE STAGE 1
 C:00
 108bpm
 BP: 133/77
 1.0METS
 BASELINE

EXERCISE STAGE 1
 1:00
 127bpm
 BP: 133/77
 2.8METS

EXERCISE STAGE 1
 2:00
 139bpm
 BP: 133/77
 4.6METS

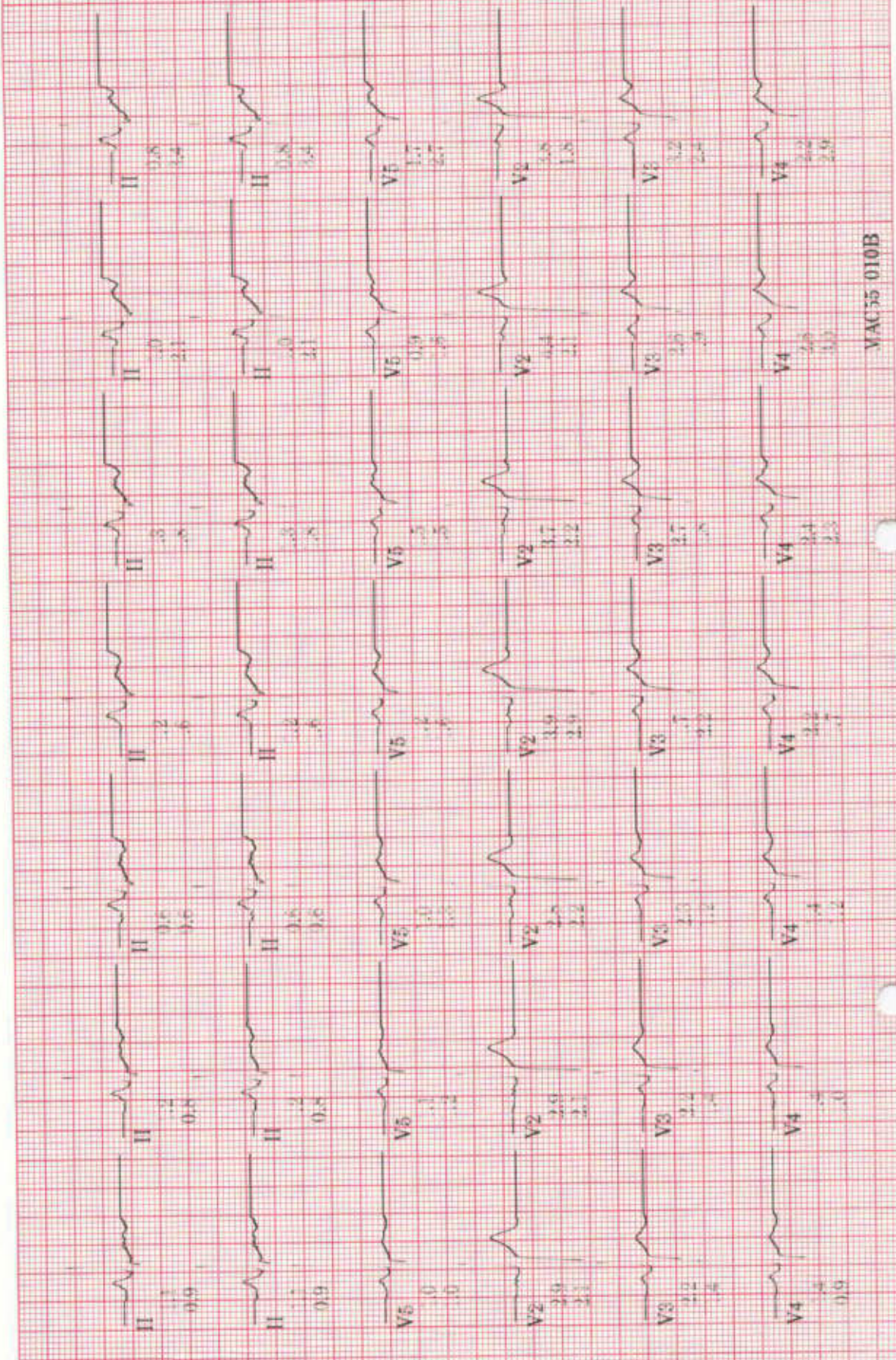
EXERCISE STAGE 1
 3:00
 139bpm
 BP: 133/77
 4.6METS

EXERCISE STAGE 2
 4:00
 150bpm
 BP: 140/80
 5.8METS

EXERCISE STAGE 2
 5:00
 157bpm
 BP: 140/80
 6.9METS
 MAX ST

BRUCE

ST @ 10mm/mV
 80ms postJ
 25.0 mm/s
 10.0 mm/mV
 100hz



Lead
 ST (mm)
 Slope (mV/s)

VAC 55 010B

Mr. Varun Dixit
ID: S150396

2-Mar-2024
9:00:29

EXERCISE STAGE 2
5:00
157bpm
BP: 140/80
7.0METS

EXERCISE STAGE 2
6:00
161bpm
7.0METS

EXERCISE STAGE 3
7:00
173bpm
BP: 140/80
8.4METS

EXERCISE STAGE 3
8:00
181bpm
BP: 140/80
10.1METS

EXERCISE STAGE 3
9:00
188bpm
BP: 140/80
10.1METS

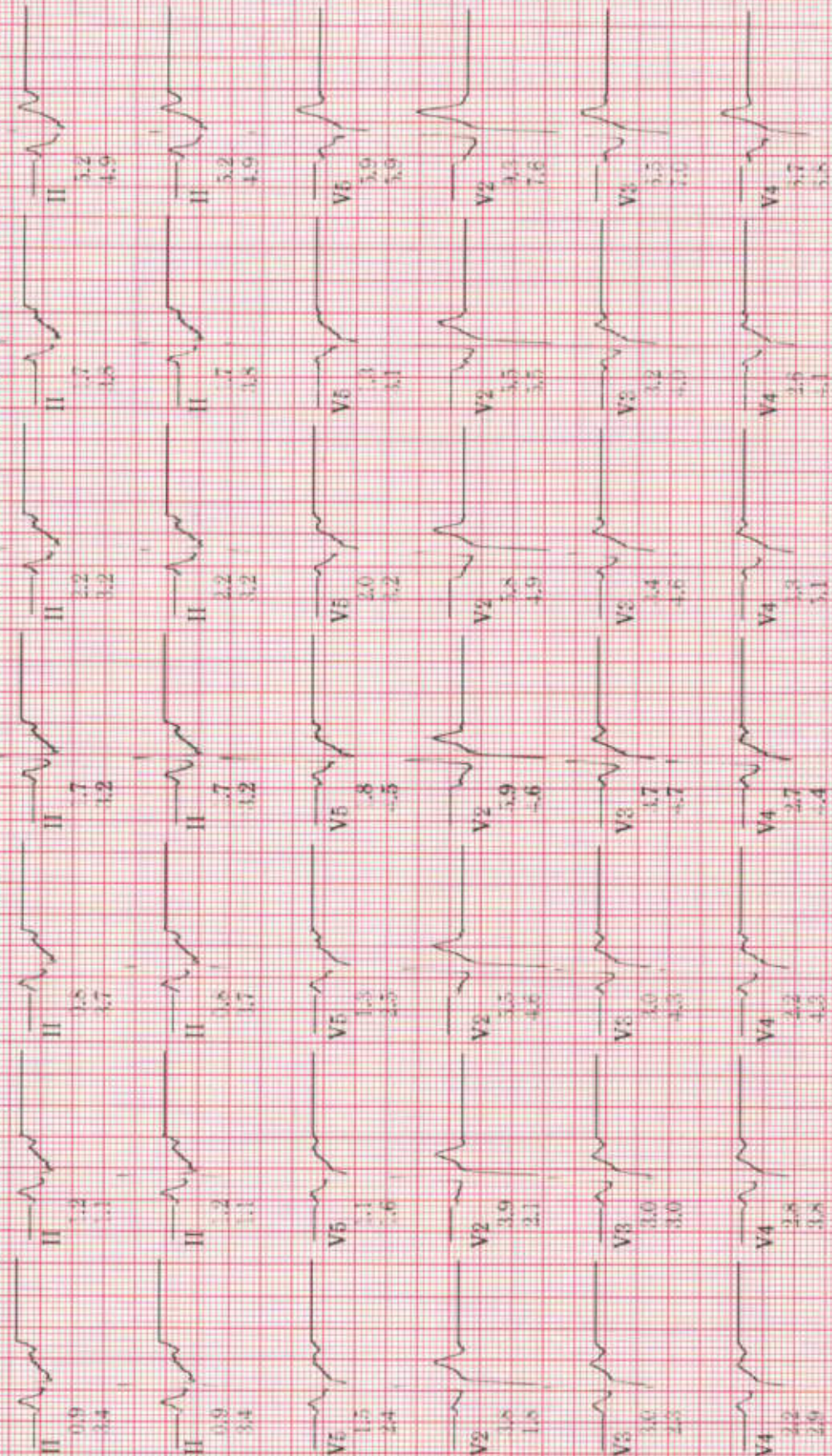
EXERCISE STAGE 4
9:14
194bpm
BP: 140/80
10.4METS

RECOVERY
1:00
167bpm
5.7METS

PEAK

BRUCE

SF @ 10mm/mV
80ms postJ
25.0 mm/s
10.0 mm/mV
100hz



Lead
ST(mm)
Slope(mV/s)

MAC55 010B

ID: S150396
Visit:

BRUCE

2-Mar-2024
9:00:29

Heart Rate (bpm)
250
200

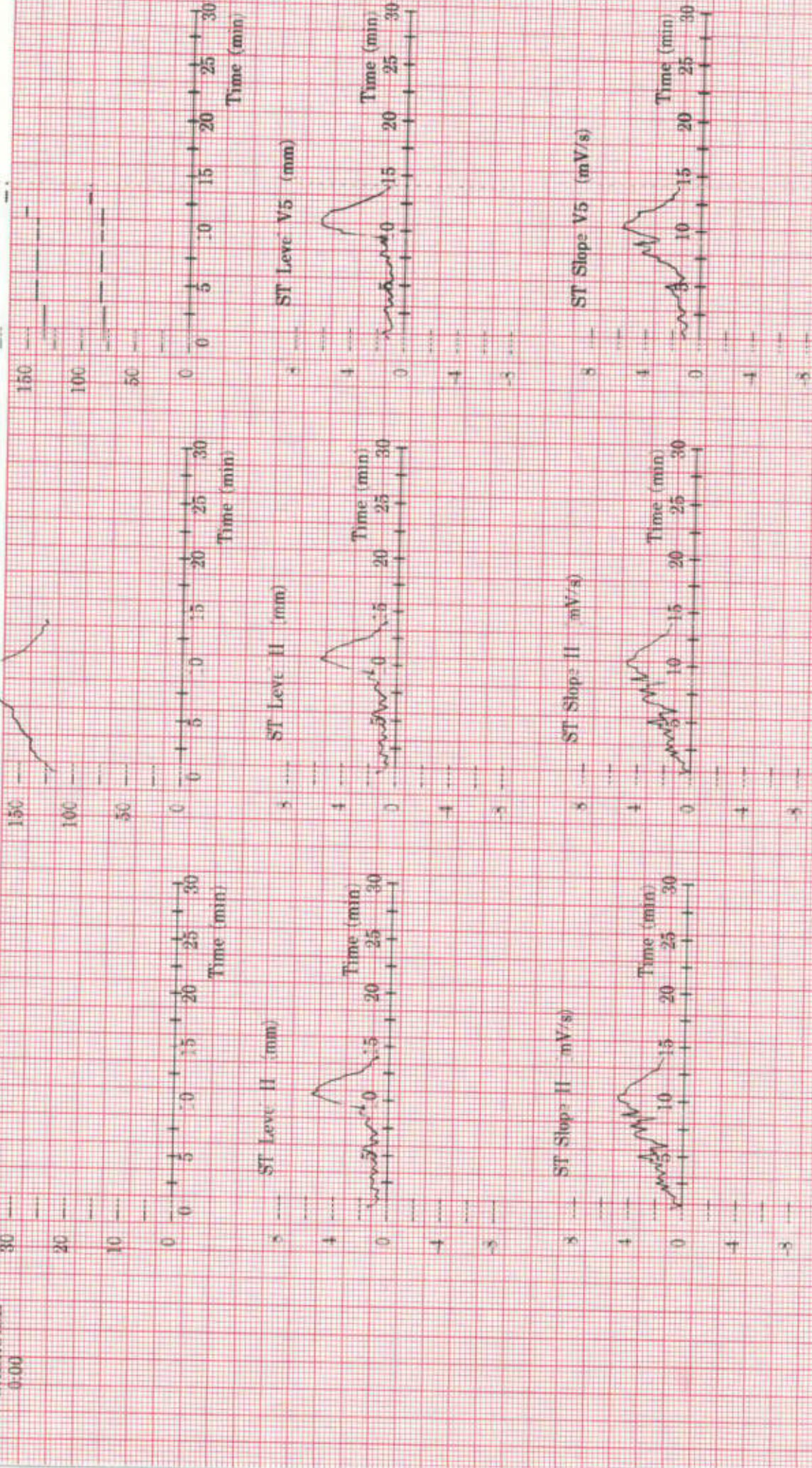
BP (mmHg)
250
200

PVC's/m

ST @ 10mm/mV 40
80ms post J

EXERCISE

0:00



DOB: _____
YR, MALE

Vent rat: 84 BPM
PR int: 149 ms
QRS dur: 84 ms
QT/QTc: 340/381 ms
P-R-T axes: 68 14 24

SINUS RHYTHM
NORMAL ECG
INTERPRETATION BASED ON A FAULT AGE OF 40 YEARS

Reviewed by _____

Mr. Varun Dixit 29/11

