

DR. DILIP B GHEEWALA

M.D. (Medicine)

Reg No: G 17770,

Mo: 9825338408

Consultant Physician & Ex. Professor Of Medicine

OPD Days: Monday, Saturday

OPR NO:

Shalby MD Physician Clinic

Patient Name:- *Chamuben N. Rahod*

Age / Sex :-

54 F.

Chief Complaints:-

Nocto

Drug / Food Allergy:-

Past History :-

NAD

Family History:-

Systemic Examination:-

*RE
CVS
PA
CNS* / *NAD*

Provisional Diagnosis:-

Date: *10/8/24*

Weight:- *60 kg*

Height:- *156 cm*

Nutritional assessment:-

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

Pulse:- *80/min*

BP:- *120/80 mmHg*

SpO2:- *98%*

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

Rx

M B S on SL = 30
1 - daily
cup Myuni max 30
- 1 - sing
gand

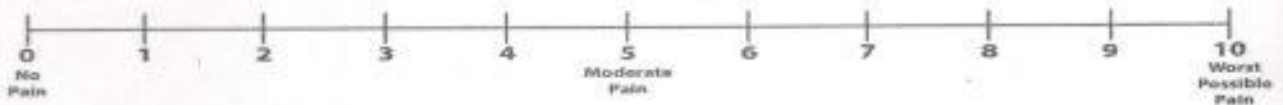
Follow Up:

બધી દવાઓ ડોક્ટરને બતાવીને લેવી.

Date:- _____

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

Numeric Rating Scale



Wong-Baker FACES® Pain Rating Scale





Pre - op

Post- op

Health Check-up

Date : 10/08/17

Patient Reg. No. : _____

Patient Name : Dhanubem N Rathod

Age / Sex : 51/F

Address : Salsit

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 an well maintained.

hygienic setup using "autoclaved" instruments & "sterilized pouch" facility.

After knee replacement any treatment should be done under "Antibiotic Coverage"

Adv.: Scaling

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

Dr. Jagdish Jadev
 8868 87897


 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 : SUR0000369535 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Dhanuben N Rathod	/	Registered On : 10-Aug-2024 09:27 AM
Lab ID : 408900777		Collected On : 10-Aug-2024 08:45 AM
Gender/Age : Female / 57 Years	DOB : 01-Jan-1967	Received On : 10-Aug-2024 09:52 AM
Ref. By : Health Check Up Shalby		Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
BLOOD COUNT AND INDICIES			
HAEMOGLOBIN <small>Colorimetric Non Cyanide</small>	11.3	g/dL	12.0 - 15.0
RBC COUNT <small>Electrical Impedance</small>	4.35	mill/cmm	3.8 - 4.8
HCT <small>Calculated</small>	36.1	%	36 - 46
MCV <small>Calculated based on the RBC histogram</small>	82.9	fL	83 - 101
MCH <small>Calculated</small>	26.0	pg	27 - 32
MCHC <small>Calculated</small>	31.3	g/dL	31.5 - 34.5
RDW <small>Calculated</small>	12.2	%	11.6 - 14.0

TOTAL LEUCOCYTE COUNT

Total WBC Count <small>Electrical Impedance</small>	6080	cells/cmm	4000 - 10000
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DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)

NEUTROPHILS <small>Flow Cytometry</small>	59	%	40 - 80
LYMPHOCYTES <small>Flow Cytometry</small>	35	%	20 - 40
EOSINOPHILS <small>Flow Cytometry</small>	1	%	1 - 6
MONOCYTES <small>Flow Cytometry</small>	5	%	2 - 10
BASOPHIL <small>Flow Cytometry</small>	0	%	0 - 2

PLATELET INDICES

PLATELET COUNT <small>Electrical Impedance</small>	332000	/cmm	150000 - 410000
MPV <small>Calculated based on PLT Histogram</small>	8.5	fL	7.5 - 12.0

PERIPHERAL SMEAR EXAMINATION

RBCs	Mild hypochromic and microcytic.
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

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



Certificate No. - MC-298

Shalby Hospital (A Unit of Shalby Limited) Near Navyug College, Rander Road, Adajan, Surat, Gujarat, India
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Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
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BLOOD GROUP

(Tube agglutination: Forward & reverse)

ABO Type

"O"

RH Type

POSITIVE

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Consulting Pathologist

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Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
ESR 1st hour <i>Modified Westergren Method</i>	68	mm in 1 hour	0 - 30
HBA1C HbA1c - Glycated Haemoglobin <i>Boronate Affinity Assay</i>	5.9	%	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>	123	mg/dL	

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Gender/Age : Female / 57 Years

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Received On : 10-Aug-2024 09:51 AM

Ref. By : Health Check Up Shalby

 Sample Type : Fluoride F, Urine (PP),
 Fluoride PP, Urine (F),S

Parameter	Result	Unit	Biological Ref. Interval
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PLASMA GLUCOSE LEVEL
FASTING PLASMA GLUCOSE
Plasma Glucose (F)

89

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)

97

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
Liver Function Test
Liver Function Test
SGPT (ALT)

12

U/L

9 - 52

Multi Point Rate with P-S-P
SGOT (AST)

20

U/L

14 - 36

Multi Point Rate with P-S-P
Alkaline Phosphatase

109

U/L

 20-50 yrs.: 42 - 98
 4-19 yr : 54 - 369
 >=51 yr : 56 - 119

PNPP, AMP Buffer
GGT

17

U/L

12 - 43

L-gamma-glutamyl-4-nitroanilide/glycylglycine Kinetic
S. PROTEIN

7.7

g/dL

6.3 - 8.2

Buret (Alkaline cupric sulfate) End Point
Albumin

4.4

g/dL

3.5 - 5.0

Bromocresol Green (BCG), Colorimetric
S. GLOBULIN

3.3

g/dL

2.3 - 3.6

Calculated
A/G Ratio

1.3

Ratio

1.0 - 2.3

Calculated

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Ref. By : Health Check Up Shalby

Sample Type : Fluoride F, Urine (PP),
Fluoride PP, Urine (F), S**Liver Function Test****Bilirubin Total**

0.6 mg/dL

Azobilirubin/Dyphylline/Diazonium Salt

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

Bilirubin Unconjugated

0.6 mg/dL

End-point Colorimetric (Dual wavelength spectrophotometric)

Adult : 0.2 - 1.3

Unconjugated bilirubin

Adults: 0.0-1.1

Neonates: 0.6-10.5

Bilirubin Direct

0.0 mg/dL

Calculated

Conjugated bilirubin and

Delta bilirubin (Bilirubin

covalently bound to albumin)

0.0-0.4

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 Gender/Age : Female / 57 Years DOB : 01-Jan-1967 Received On : 10-Aug-2024 09:51 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>	157	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
SERUM TRIGLYCERIDE <i>Lipase/GK/GPO/POD</i>	59	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>	111	mg/dL	Optimal: <130 Desirable: 130-159 Borderline high: 159-189 High: 189-220 Very High: >=220
LDL Cholesterol <i>Calculated</i>	99	mg/dL	Optimal: <100 Near to above Optimal: 100 - 129 Borderline High: 130 - 159 High: 160 - 189 Very High: > 190
VLDL <i>Calculated</i>	12	mg/dL	6 - 38
LDL/dHDL <i>Calculated</i>	2.2		2.5 - 3.5
Chol/dHDL <i>Calculated</i>	3.4	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
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THYROID PROFILE (TFT)**Total T3**

122

ng/dL

87 - 178

Chemiluminescence immunoassay (CLIA)

Total T4

14.96

µg/dL

99% Reference Interval (µg/dL)
4.82 - 15.65

Chemiluminescence immunoassay (CLIA)

TSH

2.952

µIU/mL

Non Pregnant Females: 0.38-
5.33 µIU/mL
Pregnant Females (1st trimester):
0.05-3.70 µIU/mL
Pregnant Females (2nd
trimester): 0.31-4.35 µIU/mL
Pregnant Females (3rd
trimester): 0.41-5.18 µIU/mL

Chemiluminescence immunoassay (CLIA)

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Ref. By : Health Check Up Shalby

Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
RENAL FUNCTION TEST			
NABL Accredited Parameters			
Urea Nitrogen (BUN) <small>Urease, colorimetric</small>	12	mg/dL	7 - 17
UREA <small>Calculated</small>	26	mg/dL	15 - 36
Creatinine <small>Enzymatic - Creatinine amidohydrolase</small>	0.54	mg/dL	0.52 - 1.04
S. URIC ACID <small>Uricase/Peroxidase, Colorimetric</small>	4.1	mg/dL	2.5 - 6.2
Calcium <small>Arsenate III dye</small>	9.4	mg/dL	8.4 - 10.2
Sodium <small>Direct Ion Selective Electrode</small>	141	mmol/L	137 - 145
S. POTASSIUM <small>Direct Ion Selective Electrode</small>	4.4	mmol/L	3.5 - 5.1
Chloride	103	mmol/L	98 - 107

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BIOCHEMISTRY

Phosphorus (Not in NABL Scope)	4.4	mg/dL	2.5 - 4.5
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Phosphomolybdate reduction (PMA-Phenol)

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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/peroxidase reaction</i> Negative		Negative
Bilirubin	<i>Azo coupling Reaction with diazonium</i> Negative		Negative
Ketone	<i>Sodium Nitroprusside reaction</i> Negative		Negative
Specific Gravity	<i>Refractometric Method - Bromthymol blue</i> 1.020	S.G. value	1.001 - 1.035
Blood	<i>Peroxidase like activity of hemoglobin</i> Trace (+/-)		Negative
pH	<i>Double Indicator principle</i> 6.0	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	4-5/hpf	/hpf	0-5/hpf
Red blood cells	2-3/hpf	/hpf	NIL/hpf
Epithelial cells	6-8/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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Consulting Pathologist

Patient ID:	SUR0000369535	Patient Name:	DHANUBEN RATHOD
Age:	80 Years	Sex:	F
Accession Number:	8168 MHC	Modality:	DX
Referring Physician:	DR. SHALBY	Study:	CHEST PA
Study Date:	10-Aug-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. ASHUTOSH GANDHI

DMRD (Radiodiagnosis)

G-14916

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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DR. RUJUTA SHELAT

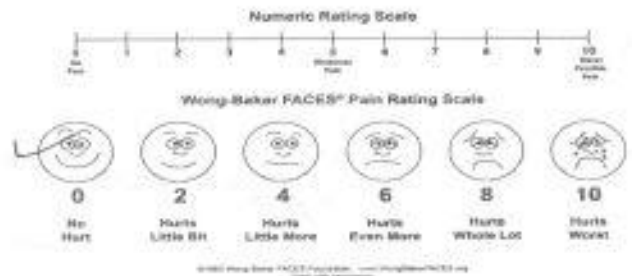
Consultant Ophthalmologist

Reg. No.:- G-48712

Name :- Dhanuben N. Rathod.

Date:- 10/08/2024

Chief Complaints:- Division of vision
BE eye.



Pain Assessment:- Back pain

Past History:-

Family History:-

Allergy:- NO Allergy food & drug

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

General Examination:-

BP:- Pulse:- Temp:-

Systemic Examination:- NO

HT:- WT:-

Visual Acuity:- $\left\{ \begin{array}{l} R \text{ f.c.s.m} \\ L \text{ f.c.s.m} \end{array} \right.$

PH Vision:- $\left\{ \begin{array}{l} R \text{ 6/60 f.c. 29} \\ L \text{ 6/24} \end{array} \right.$

NCT $\left\{ \begin{array}{l} 21.2 \rightarrow 594 \\ 22.6 \rightarrow 596 \end{array} \right.$

ON Examination

Ant. Segment

Both Eye

BE = Cataract

Cornea] Normal BE
Lens]

Anterior Chamber

Fundus

Rt. EYE

Lt. EYE

Media:-

Disc:-

Blood Vessel:-

Background:-

Macula:-

Diagnosis:-

Investigation:-

(OU) CATARACT \rightarrow

(LE) (RE) cataract surgery \downarrow LIA

Treatment:-

Rx

Eid Vigamox x (RE) x 1w x QID
○ ○ ○ ○

Nutritional Assessment:-

Preventive Care & Counsellings:-

Follow Up ON:-

(BE) cataract surgery | LIA

Signature of the Consultant

Dr. Rijetu

10/05/2024

Dhamben Rathod
54 F

- P/O Case of hysterectomy → 12 yrs back.

- S/H → 2 FND

- no complaints.

Vault check - NAD.



Patient Name: DHANUBEN N RATHOD		UHID:369535	
Age / Sex: 54 Yrs. / Female		Study:	USG Abdomen + Pelvis
Referred By:	Dr. at shalby Hospital	Date: 10.08.24	

ULTRASOUND OF ABDOMEN AND PELVIS (TAS)

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.

Uterus Not seen h/o hysterectomy. The uterine myometrial echotexture is homogenous. No focal lesion is seen. There is no evidence of any ovarian or adnexal mass lesion.

No ascites is seen. No abnormal bowel wall thickening and dilatation seen.

IMPRESSION:

- Not seen h/o hysterectomy.

Thanks for referral.



DR. ASHUTOSH GANDHI
CONSULTANT RADIOLOGIST

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Dhamez ben Raithod

ID:
 Name:
 Sex: M
 Birth date: / /
 Weight: kg
 Height: mmHg

- 1100 Sinus rhythm
- 4068 Nonspecific T wave abnormality
- 8101 Low QRS voltage in limb leads
- 8305 Short QTc interval
- 9150 ** abnormal ECG **

Heart rate: 75 bpm
 PR interval: 120 ms
 QRS duration: 64 ms
 QT/QTc(E) interval: 322/351 ms
 P/QRS/T axis: 90/ 21/ 222 °
 RV5/SV1 amp: 0.81/ 0.56 mV
 RV5+SV1 amp: 1.37 mV

Unconfirmed Report
Reviewed by:

