

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:- Ashaben V. chandhri
Age / Sex :- 59F
Weight:-
Chief Complaints:-

Date: 20/10/20

Wt:- 52.8 kg
Height:- 157 cm

Noco

Nutritional assessment:-

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

Pulse:- 73 min
BP:- 130/80
SpO2:- 100%

Drug / Food Allergy:-
Past History :- NAD

Family History:-
Systemic Examination:-
RS
CVS
PA
GI | NAD

Provisional Diagnosis:-

Investigation :-

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

Rx T. Losiwad 10mg \pm 50%
1 tab. after dinner
gund

Follow Up:

બધી દવાઓ ડોક્ટરને બતાવીને લેવી.

Date: _____

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

Numeric Rating Scale



Wong-Baker FACES® Pain Rating Scale



Patient ID:	SUR0000370181	Patient Name:	ASHABEN V CHAUDHARI
Age:	54 Years	Sex:	F
Accession Number:	8599 MHC	Modality:	DX
Referring Physician:	DR SHALBY	Study:	CHEST PA
Study Date:	24-Aug-2024		

CHEST X-RAY (PA)

Prominent bronchovascular markings bilaterally.

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:

- Prominent bronchovascular markings bilaterally.

Thanks for referral.


DR. ASHUTOSH GANDHI

DMRD (Radiodiagnosis)

G-14916

DR. RUJUTA SHELAT

Consultant Ophthalmologist

Reg. No.:- G-48712

Name :-

Date:-

24/8/26

Chief Complaints:-



Pain Assessment:-

low (6)

Past History:-

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:- 6/12

PH Vision:-

NCT 12
14

ON Examination

Ant. Segment

Both Eye

MS 2-3

NAME:
DATE: 2024/Aug/24 16:26
No. 00187
HUVITZ HNT-1P
Ver 1.1.1

ITONO-PACHY mode
IOP <R> <L>
13.6 14.4

AVG (mmHg) 13.6 14.4

CCT <R> <L>
506 503

AVG (um) 506.0 503.0

Huvitz Co., Ltd.
+82-31-428-9100

Anterior Chamber

EYE

Lt. EYE

Media:-

Disc:-

Blood Vessel:-

Background:-

Macula:-

Diagnosis:-

Treatment:-

Nutritional Assessment:-

Preventive Care & Counsellings:-

Follow Up ON:-

(2 months)

Signature of the Consultant

[Handwritten Signature]

Investigation:-

[Handwritten mark]

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 : SUR0000370181 OP-001

REPORT STATUS : Interim



Patient Name : **Mrs. Ashaben Vinodbhai Chaudhari** / Registered On : 24-Aug-2024 09:34 AM
 Lab ID : 408901862 Collected On : 24-Aug-2024 09:40 AM
 Gender/Age : Female / 59 Years DOB : 19-Sep-1964 Received On : 24-Aug-2024 09:47 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	Colorimetric Non Cyanide	12.7	g/dL	12.0 - 15.0
RBC COUNT	Electrical Impedance	5.80	mill/cmm	3.8 - 4.8
HCT	Calculated	40.8	%	36 - 46
MCV	Calculated based on the RBC histogram	70.4	fL	83 - 101
MCH	Calculated	21.9	pg	27 - 32
MCHC	Calculated	31.1	g/dL	31.5 - 34.5
RDW	Calculated	14.1	%	11.6 - 14.0

TOTAL LEUCOCYTE COUNT

Total WBC Count	Electrical Impedance	8900	cells/cmm	4000 - 10000
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DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)

NEUTROPHILS	Flow Cytometry	53	%	40 - 80
LYMPHOCYTES	Flow Cytometry	40	%	20 - 40
EOSINOPHILS	Flow Cytometry	5	%	1 - 6
MONOCYTES	Flow Cytometry	2	%	2 - 10
BASOPHIL	Flow Cytometry	0	%	0 - 2

PLATELET INDICES

PLATELET COUNT	Electrical Impedance	383000	/cmm	150000 - 410000
MPV	Calculated based on PLT Histogram	8.7	fL	7.5 - 12.0

PERIPHERAL SMEAR EXAMINATION

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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Generated On : 24-Aug-2024 12:59 PM

Approved On : 24-Aug-2024 12:01 PM

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

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Chaudhari

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DOB : 19-Sep-1964

Received On : 24-Aug-2024 09:47 AM

Ref. By : Health Check Up Shalby

Sample Type : EDTA Whole Blood

Parameter

Result

Unit

Biological Ref. Interval

BLOOD GROUP

(Tube agglutination: Forward & reverse)

ABO Type

"O"

RH Type

POSITIVE

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ESR 1st hour

56

mm in 1 hour

0 - 30

Modified Westergren Method

HBA1C

HbA1c - Glycated Haemoglobin

5.7

%

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) 117

mg/dL

Calculated

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Lab ID : 408901862

Collected On : 24-Aug-2024 09:40 AM

Gender/Age : Female / 59 Years

DOB : 19-Sep-1964

Received On : 24-Aug-2024 09:50 AM

Ref. By : Health Check Up Shalby

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

Parameter

Result

Unit

Biological Ref. Interval

PLASMA GLUCOSE LEVEL

FASTING PLASMA GLUCOSE

Plasma Glucose (F)

97

mg/dL

74 - 106

SOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

Urine Sugar (F)

ABSENT

mg/dL

Absent

Glucose-oxidase/oxidase reaction

POST PRANDIAL PLASMA GLUCOSE

Plasma Glucose (PP)

123

mg/dL

Normal: 100-140 Impaired: 140-199 Diabetic :=>200

SOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

Urine Sugar (PP)

ABSENT

mg/dL

Absent

Glucose-oxidase/oxidase reaction

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Collected On : 24-Aug-2024 09:40 AM

Gender/Age : Female / 59 Years

DOB : 19-Sep-1964

Received On : 24-Aug-2024 09:45 AM

Ref. By : Health Check Up Shalby

Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
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LIPID PROFILE**LIPID PROFILE****Cholesterol**

231

mg/dL

Desirable: <200
Borderline High: 200 - 239
High >=240

Cholesterol Esterase, Oxidase, Peroxidase

SERUM TRIGLYCERIDE

205

mg/dL

Normal : <150
Borderline High : 150-199
High : 200-499
Very High : > 500

Lipase/GK/GPO/POD

HDL CHOLESTEROL DIRECT

55

mg/dL

Major risk factor for heart disease : < 40
Negative risk factor for heart disease : >= 60

Phosphatungstic Acid/MycD - Enzymatic

Non HDL Cholesterol

176

mg/dL

Optimal : <130
Desirable : 130-159
Borderline high : 159-189
High : 189-220
Very High : >=220

Calculated

LDL Cholesterol

135

mg/dL

Optimal: <100
Near to above Optimal: 100 - 129

Calculated

Borderline High: 130 - 159
High: 160 - 189
Very High: > 190**VLDL**

41

mg/dL

6 - 38

Calculated

LDL/dHDL

2.5

2.5 - 3.5

Calculated

Chol/dHDL

4.2

Ratio

3.5 - 5.0

Calculated

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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Sample Type : Serum

Parameter

Result

Unit

Biological Ref. Interval

THYROID PROFILE (TFT)

Total T3

104

ng/dL

87 - 178

Chemiluminescence immunoassay (CLIA)

Total T4

13.26

µg/dL

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

Chemiluminescence immunoassay (CLIA)

TSH

6.646

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

BIOCHEMISTRY

RENAL FUNCTION TEST

NABL Accredited Parameters

Urea Nitrogen (BUN)	6	mg/dL	7 - 17
<i>Urease, colorimetric</i>			
UREA	13	mg/dL	15 - 36
<i>Calculated</i>			
Creatinine	0.42	mg/dL	0.52 - 1.04
<i>Enzymatic - Creatinine amidohydrolase</i>			
S. URIC ACID	5.9	mg/dL	2.5 - 6.2
<i>Uricase/Peroxidase, Colorimetric</i>			
Calcium	9.9	mg/dL	8.4 - 10.2
<i>Arsenazo III dye</i>			
Sodium	142	mmol/L	137 - 145
<i>Direct Ion Selective Electrode</i>			
S. POTASSIUM	4.5	mmol/L	3.5 - 5.1
<i>Direct Ion Selective Electrode</i>			
Chloride	106	mmol/L	98 - 107
Phosphorus (Not in NABL Scope)	5.4	mg/dL	2.5 - 4.5
<i>Phosphomolybdate reduction (PMA Phenol)</i>			

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Liver Function Test**Liver Function Test**

SGPT (ALTV) <i>Multi Point Rate with P-S-P</i>	18	U/L	9 - 52
SGOT (AST) <i>Multi Point Rate with P-S-P</i>	27	U/L	14 - 36
Alkaline Phosphatase <i>PhPP, AMP Buffer</i>	132	U/L	20-50 yrs : 42 - 98 4-19 yr : 54 - 369 >=51 yr : 58 - 119
GGT <i>L-gamma-glutamyl-L-norbornaldehydylglycine Kinase</i>	18	U/L	12 - 43
S. PROTEIN <i>Buret (Alkaline cupric sulfate), End Point</i>	8.1	g/dL	6.3 - 8.2
Albumin <i>Bromocresol Green (BCG), Colorimetric</i>	4.1	g/dL	3.5 - 5.0
S. GLOBULIN <i>Calculated</i>	4.0	g/dL	2.3 - 3.6
A/G Ratio <i>Calculated</i>	1.0	Ratio	1.0 - 2.3
Bilirubin Total <i>Azobilirubin/Diphenylpicazolum 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
Bilirubin Unconjugated <i>End-point Colorimetric (Dual wavelength spectrophotometric)</i>	0.5	mg/dL	Adult : 0.2 - 1.3 Unconjugated bilirubin Adults: 0.0-1.1 Neonates: 0.6-10.5
Bilirubin Direct <i>Calculated</i>	0.2	mg/dL	Conjugated bilirubin and Delta bilirubin (Bilirubin covalently bound to albumin) 0.0-0.4

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

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 Lab ID : 408901862 Collected On : 24-Aug-2024 09:40 AM
 Gender/Age : Female / 59 Years DOB : 19-Sep-1964 Received On : 24-Aug-2024 09:49 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	Glucose-oxidase/oxidase reaction	Negative	Negative
Bilirubin	Azo coupling Reaction with diazonium	Negative	Negative
Ketone	Sodium Nitroprusside reaction	Negative	Negative
Specific Gravity	Refractometric Method - Bromthymol blue	1.010	S.G. value 1.001 - 1.035
Blood	Peroxidase like activity of hemoglobin	Negative	Negative
pH	Double Indicator principle	7.0	PH value 4.6 - 8.0
Protein	Protein Error of Indicator Principle	Negative	Negative
Urobilinogen	Modified Ehrlich reaction	0.2	EU/dL Upto 1.0 mg/dL (EU/dL)
Nitrite	Diazotization reaction of nitrite with an aromatic amine	Negative	Negative
Leucocyte	Leucocyte Esterase Test	Negative	Negative
Microscopic Examination			
Pus cells	2-3/hpf	/hpf	0-5/hpf
Red blood cells	Nil	/hpf	NIL/hpf
Epithelial cells	5-6/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.

Generated On : 24-Aug-2024 12:59 PM

Approved On : 24-Aug-2024 12:00 PM

DR. HIMANI THAKER (VYAS)

M.S (Gynec)

Consultant Obstetrician & Gynecologist

Laposcopic Surgeon

Infertility Specialist

Email-ID:- thaker.himani@gmail.com

Register No. G-31062

Shalby Women's Health Clinic

Name:- Ashaben

Chief Complaints:-

Date: 24/8/24

Weight:-

Height:-

OPR NO:-

Nutritional Assessment:-

Obese

Well Nourished

Mild-Moderate Nourished

Severely Mal-Nourished

LMP:-

anvil

M/H:-

1/4 - 2/4

O/H:-

2fmo) ♂ / 38yrs
♀ / 35yrs

IC not done

P/H:-

F/H

Examination:-

P/H -

Abdo hysterectomy before 10yrs
(IC - fibroid)

PLA - egg

Provisional Diagnosis:-

PAP Not taken as
hysterectomy done

Patient Name: ASHABEN V CHAUDHARI		UHID: 370181	
Age / Sex: 59 Yrs. / Female		Study:	USG Abdomen + Pelvis
Referred By:	Dr. AT SHALBY HOSPITAL	Date: 24.08.2024	

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.

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

IMPRESSION:

- No significant abnormality detected.

Thanks for referrals.


DR. ASHUTOSH GANDHI
DMRD (Radiodiagnosis)
G-14916

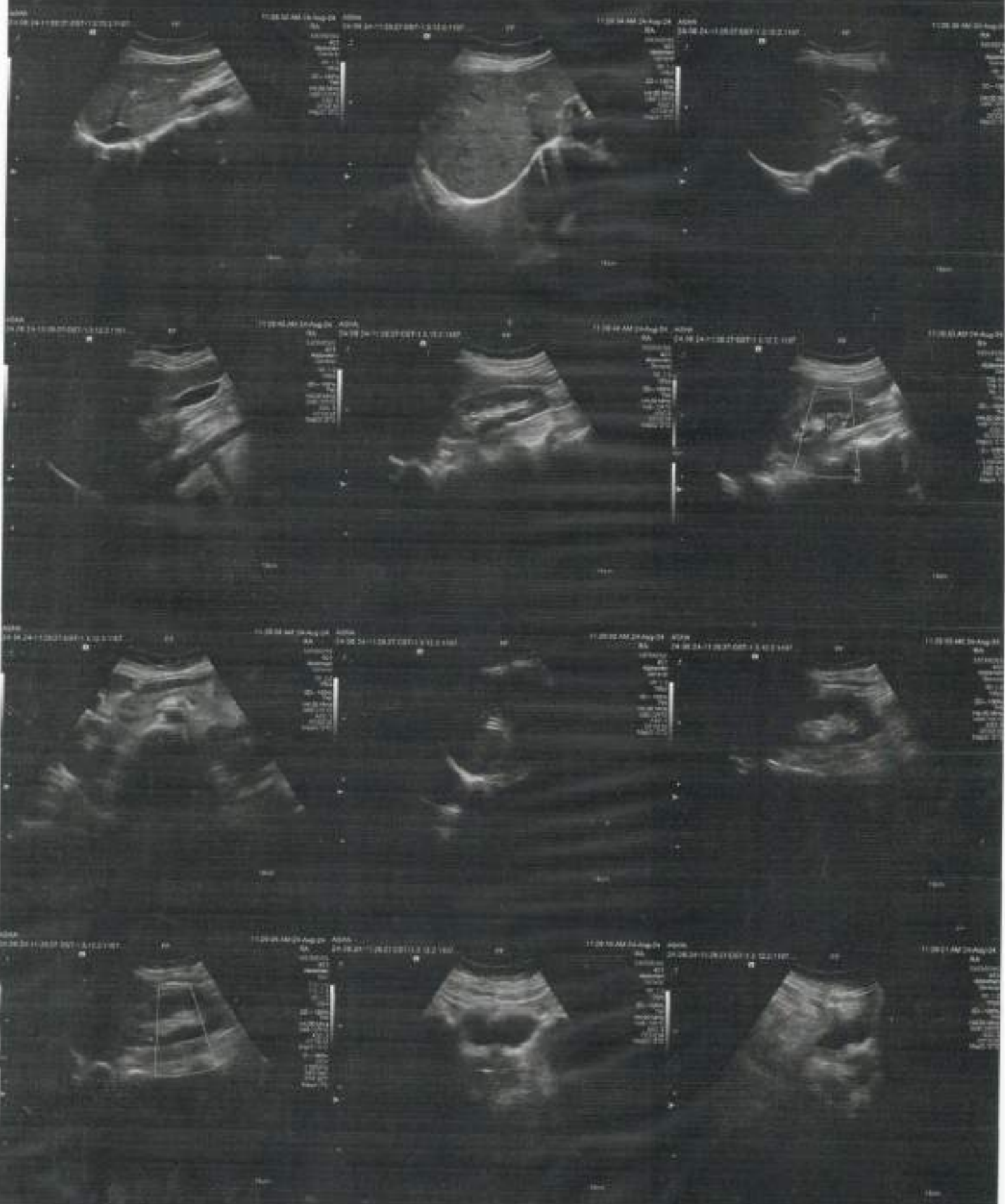
SHALBY HOSPITAL, SURAT

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

SHALBY LIMITED

Regd. Office: Opp. Karnavati Club, S. G. Road, Ahmedabad - 380 015, Gujarat, India.

Corp. Office: B-301 & 302, Mondeal Heights, Opp. Karnavati Club, S. G. Road, Ahmedabad - 380 015, Gujarat, India.



SHALBY HOSPITAL
NR. NAVYUG COLLAGE, RANER ROAD
SURAT

Station
Telephone:

EXERCISE STRESS TEST REPORT

Patient Name: ASHABEN CHAUDHARY ,
Patient ID: 370181
Height:
Weight:

DOB: 19.09.1964
Age: 59yrs
Gender: Female
Race: Asian

Study Date: 24.08.2024
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	01:13	0.00	0.00	92	130/80	
	STANDING	00:04	0.00	0.00	93		
	WARM-UP	00:07	1.60	0.00	100		
EXERCISE	STAGE 1	03:00	2.70	10.00	137		
	STAGE 2	03:00	4.00	12.00	166	150/80	
	STAGE 3	00:01	4.00	12.00	166		
RECOVERY		03:31	0.00	0.00	104	120/80	

The patient exercised according to the BRUCE for 6:00 min:s, achieving a work level of Max. METS: 7.00. The resting heart rate of 91 bpm rose to a maximal heart rate of 166 bpm. This value represents 103 % of the maximal, age-predicted heart rate. The resting blood pressure of 130/80 mmHg, rose to a maximum blood pressure of 150/80 mmHg. The exercise test was stopped due to Target heart rate achieved.

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 IS NEGATIVE FOR INDUCIBLE ISCHEMIA

ASHABEN CHAUDHARY,

Patient ID: 370181

24.08.2024

10:43:52

Female

59yrs Asian

Meds:

Test Reason:

Medical History:

Ref. MD: Ordering MD:

Technician: Test Type:

Comment:

BRUCE Total Exercise Time: 06:00
 Max HR: 166 bpm 103% of max predicted 161 bpm HR at rest: 91
 Max BP: 150/80 mmHg BP at rest: 130/80 Max RPP: 24600 mmHg*bpm
 Maximum Workload: 7.00 METS
 Max ST: -1.60 mm, 0.00 mV/s in V4; EXERCISE STAGE 3 (06/01)
 Arrhythmia: A:66, PVC2, PSVC7
 ST/HR index: 2.06 $\mu\text{V}/\text{bpm}$
Reasons for Termination: Target heart rate achieved
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 IS NEGATIVE FOR INDUCIBLE ISCHEMIA
 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 (V4 mm)	Comment
PRETEST	SUPINE	01:13	0.00	0.00	1.0	92	130/80	11960	0	-0.05	
	STANDING	00:04	0.00	0.00	1.0	93			0	-0.10	
	WARM-UP	00:07	1.60	0.00	1.0	100			0	0.00	
EXERCISE	STAGE 1	03:00	2.70	10.00	4.6	137	150/80	24900	1	-1.45	
	STAGE 2	03:00	4.00	12.00	7.0	166			1	-1.60	
	STAGE 3	00:01	4.00	12.00	7.0	166			1	-1.60	
RECOVERY		03:21	0.00	0.00	1.0	104	120/80	12480	0	-0.25	

Lead	ST(mm)	Lead	ST(mm)
I	-0.05	V1	-0.65
II	-0.20	V2	0.20
III	-0.25	V3	0.10
aVR	0.05	V4	-0.10
aVL	0.15	V5	-0.10
		V6	-0.00



139 bpm

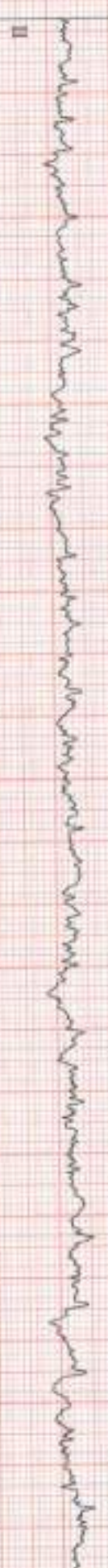
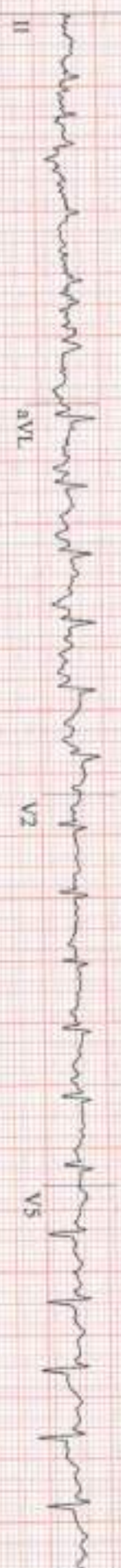
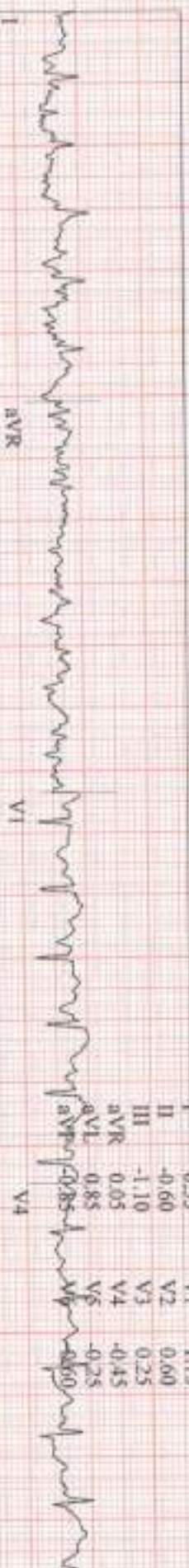
EXERCISE
STAGE 1

02:50

BRUCE
2.7 km/h
10.0 %

Measured at 6cms Post J (10mm/mV)
Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	-0.55	V1	1.15
II	-0.60	V2	0.60
III	-1.10	V3	0.25
aVR	0.05	V4	-0.45
aVL	0.85	V5	-0.25



JUPITER

12-Lead Report

EXERCISE

STAGE 2

05:50

BRUCE

4.0 km/h

12.0 %

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

166 bpm
150/80 mmHg



Lead	ST(mm)	Lead	ST(mm)
I	-0.55	V1	-0.60
II	-0.60	V2	-0.20
III	-1.25	V3	-0.05
aVR	0.00	V4	-1.55
aVL	0.85	V5	-1.05
aVF	2.95	V6	

JUPITER



12-Lead Report (PEAK EXERCISE)

166 bpm
150/80 mmHg

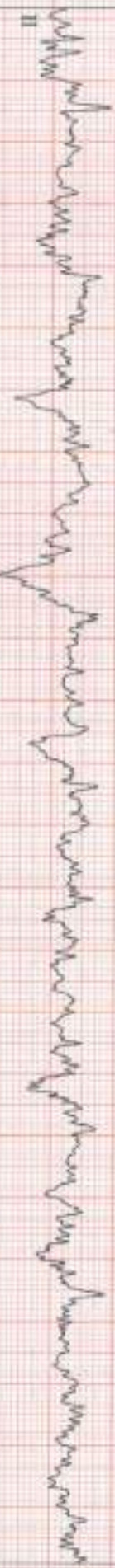
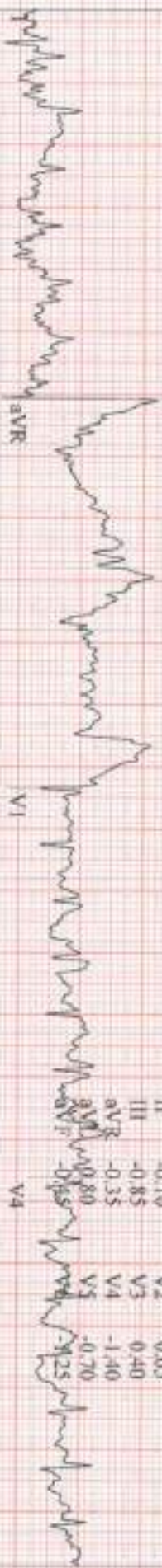
EXERCISE
STAGE 3
06:01

BRUCE
4.0 km/h
12.0 %

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

Lead ST(mm) Lead ST(mm)

I	-0.80	V1	+1.45
II	-0.10	V2	0.05
III	-0.85	V3	0.40
aVR	-0.35	V4	-1.40
aVL	+0.80	V5	-0.70
aVF	+0.80	V6	-0.25



JUPITER

136 bpm

RECOVERY

#1

00:50

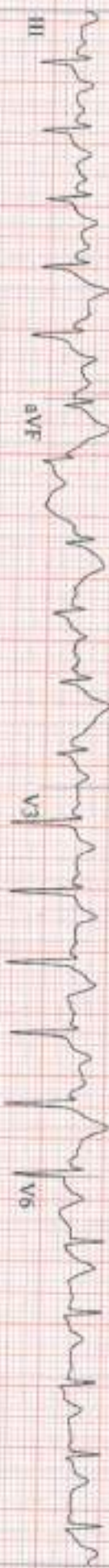
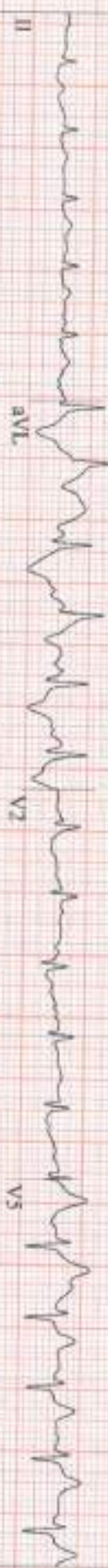
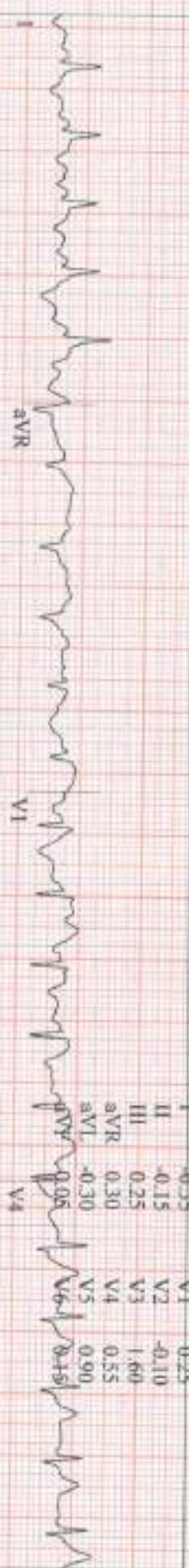
BRUCE

0.0 km/h

0.0 %

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

Lead	ST(mm)	Lead	ST(mm)
I	-0.35	V1	0.25
II	-0.15	V2	-0.10
III	0.25	V3	1.60
aVR	0.30	V4	0.55
aVL	-0.30	V5	0.90
		V6	0.85



JUPITER

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

Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	-0.20	V1	0.20
II	-0.10	V2	0.05
III	0.10	V3	0.55
aVR	0.10	V4	0.05
aVL	-0.15	V5	0.30
aVF	0.00	V6	-0.10



JUPITER



Lead ST(mm) Lead ST(mm)

I	0.15	V1	0.45
II	-0.20	V2	0.15
III	-0.35	V3	0.35
aVR	0.00	V4	-0.20
aVL	0.25	V5	0.05
aVF	0.20	V6	0.25



JUPITER





Pre - op

Post-op

Health Check-up

Date : 21-08-21

Patient Reg. No. : _____

Patient Name : Ashubon V. Choudhary Age / Sex : 59 / F

Address : Berdoni

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"

Dr. Darshini V. Shah
(Consultant Dental Surgeon)

