

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 : SUR0000370968 OP-001

REPORT STATUS : Interim



Patient Name : Mr Deepak H Shiwal	/	Registered On : 07-Sep-2024 08:50 AM
Lab ID : 409900511		Collected On : 07-Sep-2024 08:53 AM
Gender/Age : Male / 30 Years	DOB : 19-Nov-1993	Received On : 07-Sep-2024 08:56 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	11.5	g/dL	13.0 - 17.0
RBC COUNT	Electrical Impedance	5.96	mill/cmm	4.5 - 5.5
HCT	Calculated	36.2	%	40 - 50
MCV	Calculated based on the RBC histogram	60.7	fL	83 - 101
MCH	Calculated	19.3	pg	27 - 32
MCHC	Calculated	31.8	g/dL	31.5 - 34.5
RDW	Calculated	15.1	%	13.3 - 18.3

TOTAL LEUCOCYTE COUNT

Total WBC Count	Electrical Impedance	7200	cells/cmm	4000 - 10000
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DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)

NEUTROPHILS	Flow Cytometry	60	%	40 - 80
LYMPHOCYTES	Flow Cytometry	30	%	20 - 40
EOSINOPHILS	Flow Cytometry	4	%	1 - 6
MONOCYTES	Flow Cytometry	6	%	2 - 10
BASOPHIL	Flow Cytometry	0	%	0 - 2

PLATELET INDICES

PLATELET COUNT	Electrical Impedance	294000	/cmm	150000 - 410000
MPV	Calculated based on PLT Histogram	8.8	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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Approved On : 07-Sep-2024 11:19 AM

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



Certificate No. : MC-5200



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Sample Type : EDTA Whole Blood

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BLOOD GROUP

(Tube agglutination: Forward & reverse)

ABO Type

"O"

RH Type

POSITIVE

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Parameter	Result	Unit	Biological Ref. Interval
ESR 1st hour <i>Modified Westergren Method</i>	1	mm in 1 hour	0 - 15
HBA1C			
HbA1c - Glycated Haemoglobin <i>Boronate Affinity Assay</i>	5.5	%	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>	111	mg/dL	

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 Lab ID : 409900511 Collected On : 07-Sep-2024 08:53 AM
 Gender/Age : Male / 30 Years DOB : 19-Nov-1993 Received On : 07-Sep-2024 11:16 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)	92	mg/dL	74 - 106
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GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

Urine Sugar (F)	ABSENT	mg/dL	Absent
------------------------	--------	-------	--------

Glucose-oxidase/oxidase reaction

POST PRANDIAL PLASMA GLUCOSE

Plasma Glucose (PP)	114	mg/dL	Normal: 100-140 Impaired: 140 -199 Diabetic :=>200
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GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

Urine Sugar (PP)	ABSENT	mg/dL	Absent
-------------------------	--------	-------	--------

Glucose-oxidase/oxidase reaction

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Gender/Age : Male / 30 Years	DOB : 19-Nov-1993	Received On : 07-Sep-2024 08:56 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>	143	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
SERUM TRIGLYCERIDE <i>Lipase/GK/GPO/POD</i>	156	mg/dL	Normal : <150 Borderline High : 150-199 High : 200-499 Very High : > 500
HDL CHOLESTEROL DIRECT <i>Phosphotungstic Acid/Mgcl2 - Enzymatic</i>	34	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : >= 60
Non HDL Cholesterol <i>Calculated</i>	109	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
LDL Cholesterol <i>Calculated</i>	78	mg/dL	Optimal: <100 Near to above Optimal: 100 - 129 Borderline High: 130 - 159 High: 160 - 189 Very High: > 190
VLDL <i>Calculated</i>	31	mg/dL	6 - 38
LDL/dHDL <i>Calculated</i>	2.3		2.5 - 3.5
Chol/dHDL <i>Calculated</i>	4.2	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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Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
THYROID PROFILE (TFT)			
Total T3 <i>Chemiluminescence immunoassay (CLIA)</i>	161	ng/dL	87 - 178
Total T4 <i>Chemiluminescence immunoassay (CLIA)</i>	12.14	µg/dL	99% Reference Interval (µg/dL) 4.82 - 15.65
TSH <i>Chemiluminescence immunoassay (CLIA)</i>	2.469	µIU/mL	0.38 - 5.33

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Sample Type : Serum

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

15

mg/dL

9 - 20

Urease, colorimetric

UREA

32

mg/dL

19 - 43

Calculated

Creatinine

0.92

mg/dL

0.66 - 1.25

Enzymatic - Creatinine amidohydrolase

S. URIC ACID

5.5

mg/dL

3.5 - 8.5

Uricase/Peroxidase, Colorimetric

Calcium

9.7

mg/dL

8.4 - 10.2

Arsenazo III dye

Sodium

142

mmol/L

137 - 145

Direct Ion Selective Electrode

S. POTASSIUM

4.4

mmol/L

3.5 - 5.1

Direct Ion Selective Electrode

Chloride

106

mmol/L

98 - 107

Phosphorus (Not in NABL Scope)

3.8

mg/dL

2.5 - 4.5

Phosphomolybdate reduction (PMA Phenol)

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Parameter	Result	Unit	Biological Ref. Interval
Liver Function Test			
Liver Function Test			
SGPT (ALTV) <i>Multi Point Rate with P-5-P</i>	79	U/L	21 - 72
SGOT (AST) <i>Multi Point Rate with P-5-P</i>	48	U/L	17 - 59
Alkaline Phosphatase <i>PNPP, AMP Buffer</i>	63	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>	24	U/L	15 - 73
S. PROTEIN <i>Biuret (Alkaline cupric sulfate), End Point</i>	7.2	g/dL	6.3 - 8.2
Albumin <i>Bromocresol Green (BCG), Colorimetric</i>	4.7	g/dL	3.5 - 5.0
S. GLOBULIN <i>Calculated</i>	2.5	g/dL	2.3 - 3.6
A/G Ratio <i>Calculated</i>	1.9	Ratio	1.0 - 2.3
Bilirubin Total <i>Azobilirubin/Dyphylline/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
Bilirubin Unconjugated <i>End-point Colorimetric (Dual wavelength spectrophotometric)</i>	0.9	mg/dL	Unconjugated bilirubin Adults: 0.0-1.1 Neonates: 0.6-10.5
Bilirubin Direct <i>Calculated</i>	0.0	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 : 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> Negative		Negative
Specific Gravity	<i>Refractometric Method - Bromthymol blue</i> >=1.030	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 AgrawalM.B., D.C.P
Consulting Pathologist

Patient ID:	SUR0000370968	Patient Name:	DEEPAK H SHIWAL
Age:	30 Years	Sex:	M
Accession Number:	9017 MHC	Modality:	DX
Referring Physician:	DR SHALBY	Study:	CHEST PA
Study Date:	7-Sep-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)

Patient Name: DEEPAK H SHIWA		UHID: 370968	
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. NITIN DESAI
(CONSULTANT RADIOLOGIST)

Patient's Name: Deepak H. Shiwali

UHID:370968

Age: 30 yrs / Male

Date: 07 / 09 / 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:21

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

DR. RUJUTA SHELAT

Consultant Ophthalmologists

Reg. No.:- G-48712

Name:-

Deepan H Shival

Date:-

7/09/2024

Chief Complaints:-

Routine Eye
check up
H/O Cat
H/O Covid-19

Pain Assessment:-

Past History:-

Family History:-

Allergy:-

NO drug Allergy

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

General Examination:-

BP:- Pulse:- Temp:-

69 N18

Visual Acuity:-

6/6

NCT

18
18

ON Examination

Ant. Segment

Systemic Examination:-

HT:- WT:-

PH Vision:-

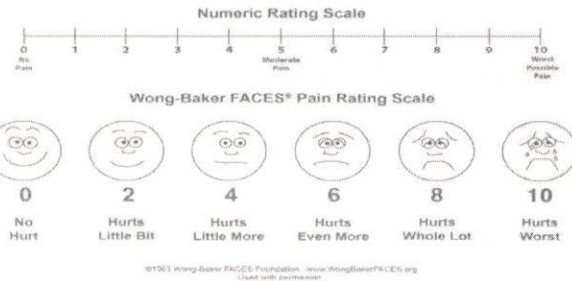
6/6
6/6

SR ±0.00 6/9
±0.00 -0.25

Add + 2.00 DS

Both Eye

[Signature]



ME
P 08 2023 11:31

SPH	CYL	AX
1.25	-2.25	38
1.00	-1.75	36
1.25	-2.00	35
1.25	-2.00	35

2 cm

Anterior Chamber

SPH	CYL	AX
0.50	-0.25	102
0.50	-0.50	94
0.75	-0.25	78
0.50	-0.25	102

Rt. EYE

Lt. EYE

61
and Seiko.com
3300K S/N: 76BE0963

Investigation:-

Blood Vessel:-

Background:-

Macula:-

Diagnosis:-

(R) pseudophacous prof

Treatment:-

(L)
(R) yag cap.

Nutritional Assessment:-

Preventive Care & Counselling:-

Follow Up ON:-

2 months / see

Signature of the Consultant

Dr. Lyntia Shelen



Pre - op

Post - op

Health Check-up

Date : 7/9/24

Patient Reg. No. : _____

Patient Name : Deepak H. Shivan Age / Sex : 30/M

Address : Surat

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 : 59/56 Class V Fillings : _____

RCT : _____ Extraction : _____

Dentures : _____ Partial Denture : _____

Implants : _____ Crown & Bridge Present : _____

Crown / Bridge Replacement :

Advised Crown / Bridge :

Advised X - Ray / O.P.G. :

53/	

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

Restoration 54/56

Crown 54/

Dr. Darshini V. Shah
(Consultant Dental Surgeon)

7-Sep-2024 AM8:39:26

1100 Sinus rhythm
9110 ** normal ECG **

DIPDIK SHIWAL

Unconfirmed Report
Reviewed by:

MD CONGERT NOT DONE

ID: _____ Name: _____

Sex: M Birth date: _____ / _____ / _____ years

Weight: _____ kg

Height: _____ mmHg

Heart rate: 86 bpm

PR interval: 156 ms

QRS duration: 80 ms

QT/QTc (E) interval: 340/383 ms

QT/QTc (T) interval: 51/54/23 ms

IV5/SV1 amplitude: 1.53/0.75 mV

IV5+SV1 amplitude: 2.28 mV

10 mm/mV 25 mm/s Filter: H50 d 100 Hz

10 mm/mV

