



OPD ASSESSMENT FORM



Name Mr. Rajesh Chaudhari Age.Sex 42 M MR.No. 5150996
 Doctor Dr. Krunal Gajjar Date 13/03/24
 Ht : 158cm Wt. : 55.6 kg Temp : 98 Pulse : 84 B/min BP : 118/77 mmHg
 SPO2 : 98 Post of walk SPO2 : _____

Chief Complaints :

NOT - Any.

Drug / Food Allergy :

NO

Prior Medication Reviewed : Yes No

On examination :

Rg
CVS | NAD.

Past History :

— N.S. —

Provisional Diagnosis :

Nutritional Assessment :

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

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

Rx
→ Tab. Atorvast (10) 0-0-1 x (03) monthly.

Investigation advised :

Follow Up : _____ Date : _____

Krunal
Dr. Krunal Gajjar
 M.B.B.S., MD (MEDICINE)
 CONSULTANT PHYSICIAN
 Reg. No. G-20422
 Signature

**SUNSHINE GLOBAL HOSPITAL
SURAT.**



PAT. NAME : Rakesh Chaudhari	Date : 13/03/2024
REF. DOCTOR : Hosp. Dr.	AGE : 42 Yrs / M
INV. : USG Whole Abdomen	MR NO. : S150996

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 distended and appears normal. No e/o calculus, sludge or mass lesion is seen. CBD and Portal Vein appears normal is size and calibre.


Pancreas appears normal in size and shows normal echopattern to the extent assessed. 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 abdomen.

IMPRESSION:

- **Mild hepatomegaly.**


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

Transcribed By: Asha

Page: 1 out of 1
Date & Time of report: 03/13/2024 – 11:57 AM

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PAT. NAME : Rakesh Chaudhari	Date : 13/03/2024
REF. DOCTOR : Hosp. Dr.	AGE : 42 Yrs / M
INV. : Radiograph of Chest PA	MR NO. : S150996

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: Asha

Page: 1 out of 1
Date & Time of report: 13/03/2024 – 11:53 AM

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MR No. : S150996
Patient Name : Mr. Rakesh F Chaudhari
Ref By : Dr. Hospital A Doctor
Collection Date : 13/03/2024 9:25AM
Age : 42 Y Sex : Male
Report Date : 13/03/2024 11:33AM

HAEMATOLOGY

Parameter	Result	Units	Normal Range
CBC with ESR			
HAEMOGLOBIN	13.1	gm/dl	13.0 - 17.0
PCV	42.7	%	40 - 50
RBC COUNT	6.04	mill/cmm	4.5 - 5.5
MCV	70.7	fl	76 - 96
MCH	21.7	pg	26 - 32
MCHC	30.7	%	32 - 36
RDW	16.0	%	11 - 15
PLATELET COUNT	2.94	lacs/cmm	1.5 - 4.5
WBC COUNT	6490	/cmm	4000 - 11000
ESR	04	mm/hr	0 - 10
DIFFERENTIAL WBC COUNT			
NEUTROPHIL	62	%	40 - 70
LYMPHOCYTES	30	%	20 - 40
EOSINOPHILS	02	%	1 - 6
MONOCYTES	06	%	2 - 11
BASOPHILS	00	%	0 - 2
PERIPHERAL SMEAR			
RBC MORPHOLOGY	Hypochromasia(+), Microcytosis(+), Anisocytosis(+)		
WBC MORPHOLOGY	Within Normal Range		
PLATELET ON SMEAR	Adequate		
HEMOPARASITES	Not Seen		

SYSMEX XN-550

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

Dr. Shobha Choksi
MD, DCP (Pathology)

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MR No. : S150996	Collection Date : 13/03/2024 9:25AM
Patient Name : Mr. Rakesh F Chaudhari	Age : 42 Y Sex : Male
Ref By : Dr. Hospital A Doctor	Report Date : 13/03/2024 11:28AM

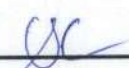
HAEMATOLOGY

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

BIOCHEMISTRY

SERUM URIC ACID			
SERUM URIC ACID (Uricase)	7.7	mg/dl	3.4 - 7.0
FASTING BLOOD SUGAR (FBS)			
FASTING BLOOD GLUCOSE (Hexokinase)	99	mg/dl	74 - 110
FASTING URINE GLUCOSE	Absent		
FASTING URINE KETONE	Absent		

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


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Patient Name : Mr. Rakesh F Chaudhari	Age : 42 Y Sex : Male
Ref By : Dr. Hospital A Doctor	Report Date : 13/03/2024 11:29AM

BIOCHEMISTRY


<u>Parameter</u>	<u>Result</u>	<u>Units</u>	<u>Normal Range</u>
HBA1C [GLYCOSYLATED HEAMOGLOBIN]			
HbA1C	5.1	%	Non-Diabetic level: <6 Good Control: 6 - 7 Poor Control: 7 - 8 Action Suggested > 8
MEAN BLOOD GLUCOSE	99.67	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.

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


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Patient Name : Mr. Rakesh F Chaudhari	Age : 42 Y Sex : Male
Ref By : Dr. Hospital A Doctor	Report Date : 13/03/2024 11:30AM

BIOCHEMISTRY

<u>Parameter</u>	<u>Result</u>	<u>Units</u>	<u>Normal Range</u>
LIPID PROFILE			
SERUM CHOLESTEROL CHOD PAP	268	mg/dl	50 - 200
HDL CHOLESTEROL Direct	31	mg/dl	40 - 60
LDL CHOLESTEROL Direct	215.7	mg/dl	0 - 100
SERUM TRIGLYCERIDE GPO PAP	107	mg/dl	50 - 150
VLDL Calc	21.4	mg/dl	0 - 30
CHOLESTEROL / HDL RATIO	8.65		0 - 5
LDL / HDL RATIO	6.96		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 *****

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Ref By : Dr. Hospital A Doctor
Collection Date : 13/03/2024 9:25AM
Age : 42 Y Sex : Male
Report Date : 13/03/2024 11:31AM

BIOCHEMISTRY

<u>Parameter</u>	<u>Result</u>	<u>Units</u>	<u>Normal Range</u>
LIVER FUNCTION TEST			
ALKALINE PHOSPHATASE (IFCC)	86	U/L	35 - 130
BILIRUBIN TOTAL Diazo	0.3	mg/dl	0.0 - 1.2
BILIRUBIN DIRECT Diazo	0.2	mg/dl	0.0 - 0.4
BILIRUBIN INDIRECT (Calc)	0.1	mg/dl	0.0 - 0.8
SGPT (IFCC)	19	U/L	5 - 41
SGOT (IFCC)	16	U/L	5 - 40
SERUM TOTAL PROTEIN Biuret	7.3	gm/dl	6.6 - 8.7
SERUM ALBUMIN BCG	5.3	gm/dl	3.5 - 5.2
SERUM GLOBULIN Calc	2	gm/dl	1.5 - 3.5
SERUM A/G RATIO Calc	2.65	gm/dl	1.5 - 2.5
SERUM CREATININE			
SERUM CREATININE (JAFPE)	0.8	mg/dl	0.5 - 1.2
BUN [BLOOD UREA NITROGEN]			
BUN	11.4	mg/dl	8 - 23
ALBUMIN-CREATININE RATIO			
URINE ALBUMIN/MICROALBUMIN (Immunoturbidimetry)	5.5	mg/L	
URINE CREATININE (JAFPE)	132.8	mg/dl	
ALBUMIN-CREATININE RATIO (Calculated)	4.1	mg/gm	Normal: <30; Microalbuminuria: 30-299; Clinical Albuminuria: >300

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

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MR No. : S150996
Patient Name : Mr. Rakesh F Chaudhari
Ref By : Dr. Hospital A Doctor
Collection Date : 13/03/2024 9:25AM
Age : 42 Y Sex : Male
Report Date : 13/03/2024 11:32AM

CLINICAL CHEMISTRY


<u>Parameter</u>	<u>Result</u>	<u>Units</u>	<u>Normal Range</u>
THYROID FUNCTION TEST [TFT]			
TOTAL T3 (CLIA)	1.27	ng/ml	0.846 - 2.02
TOTAL T4 (CLIA)	6.83	ug/dl	5.1 - 14.0
TSH (CLIA)	1.55	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
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Ref By : Dr. Hospital A Doctor	Report Date : 13/03/2024 11:32AM

CLINICAL CHEMISTRY

Parameter	Result	Units	Normal Range
PSA [PROSTATE SPECIFIC ANTIGEN]			
PSA (CLIA)	1.09	ng/ml	0 - 4.0

CHEMILUMINESCENCE

Measurement of total PSA alone may not clearly distinguish between benign prostatic hyperplasia (BPH) and prostate cancer, this is especially true for the total PSA values between 4-8 ng/ml.

Percentage of Free PSA = Free PSA / Total PSA x 100 = Percent free PSA.

Patient with prostate cancer generally have a lower percentage of free PSA compared to benign prostatic hyperplasia.

Percentage free PSA of less than 25% is a high likelihood of prostatic cancer.

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

Dr. Shobha Choksi
MD, DCP (Pathology)

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MR No. : S150996	Collection Date : 13/03/2024 9:25AM
Patient Name : Mr. Rakesh F Chaudhari	Age : 42 Y Sex : Male
Ref By : Dr. Hospital A Doctor	Report Date : 13/03/2024 11:34AM

CLINICAL PATHOLOGY

<u>Parameter</u>	<u>Result</u>	<u>Normal Range</u>
URINE ROUTINE & MICROSCOPIC EXAMINATION		
TYPE OF SPECIMEN - URINE	Random	
PHYSICAL EXAMINATION		
QUANTITY	20	ml
COLOUR	Pale Yellow	
APPEARANCE	Clear	
REACTION (pH)	6.0	
SPECIFIC GRAVITY	1.010	
CHEMICAL EXAMINATION		
PROTEIN	Absent	
GLUCOSE	Absent	
KETONE	Absent	
BILE SALT	Absent	
BILE PIGMENT	Absent	
OCCULT BLOOD	Absent	
NITRITE	Absent	
MICROSCOPIC EXAMINATION		
PUS CELLS	1-2	/hpf
EPITHELIAL CELLS	1-2	/hpf
RBC	Absent	/hpf
CASTS	Absent	
CRYSTALS	Absent	
BACTERIA	Absent	
YEAST CELLS	Absent	

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

(Signature)
Dr. Shobha Choksi
MD, DCP (Pathology)

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Reg. No.: G-9074



OPD ASSESSMENT FORM



Name Mr. Rakesh Chaudhary Age.Sex 42/m MR.No. 5150996
 Doctor Dr. Shailaja Desai Date 13/3/24
 Ht : _____ Wt. : _____ Temp : _____ Pulse : _____ BP : _____
 SPO2 : _____ Post of walk SPO2 : _____

Chief Complaints :

Drug / Food Allergy :

Routine dental check up

Prior Medication Reviewed : Yes No

On examination :

Past History :

++ stain teeth

Provisional Diagnosis :

Nutritional Assessment :

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

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

Investigation advised :

Rx

1) scaling

Dr. Shailaja Desai

Dr. Shailaja Desai

B.D.S. (Dental Surgeon)

A-9793

Dental Surgeon

Sunshine Global Hospital, Surat

Signature

Follow Up : _____ Date : _____



OPD ASSESSMENT FORM



Name Mr. Rakesh F. Choudhury Age.Sex 42/m MR.No. S150996

Doctor Dr Hardik Shroff Date 13/03/24

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

SPO2 : _____ Post of walk SPO2 : _____

Chief Complaints :

Drug / Food Allergy :

Go here vision

LE in childhood.

Prior Medication Reviewed : Yes No

On examination :

BE Ant seg MAD

Past History :

Mr Gub
3MFA

NIG 2 1 1 V (LE & RII)

Provisional Diagnosis :

Fundii (central) BE MAD

Nutritional Assessment :

LE Hyperopia with

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

Treatment and further Advices :
(Write in Capital Letters)

Amlyopia

Rx

Investigation advised :

Reading gl.

Dr. Hardik Shroff

DOMS, DNB (Ophthalmology)

Regd. No. G-28902

Follow Up : 203 Date : _____

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DOC. No. SGHS/FMT/OPD0015 DOI 17 2014 Rev. No. 0.0

Date: 13/3/20 24



SPECTACLE CARD

Name: Mr. Rakesh Chandrai

LEFT

RIGHT

Sph.	Cyl.	Axis	V.A.
+1.0			3 mpc
			NiG

Sph.	Cyl.	Axis	V.A.
+1.0			6/6
			NiG

Reading glasses

Remarks:

INSTRUCTIONS:

- Verify your new glasses before using them.
- Bring this prescription on every visit.
- Bring your glasses checked every six months to one year if necessary.
- Get your glasses checked every six months to one year if necessary.
- Don't wear glasses, Help Blind.
- Request to optician. Please prepare the glasses according to this prescription only.
- Request to optician. Please prepare the glasses according to this prescription only.

Time : 09:00 am to 11:00 am, Monday to Saturday
Please obtain reporting time in advance & always bring OPD File

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Consulting Eye Surgeon

TABULAR SUMMARY REPORT

Rakesh F, Chaudhari

25.0 mm/s
10.0 mm/mV
100hz

BRUCE
Max HR: 160bpm 89% of max predicted 178bpm
Max BP: 150/90
Maximum workload: 10.4METS

42years
Caucasian
Male

ID: S150996
Visit:
13-Mar-2024
12:45:22

Reason for Termination:
Comments:

Referred by:
Test indi:

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	WorkLoad (METS)	HR (bpm)	BP (mmHg)	RPP (x100)
PRETEST	SUPINE	3:48	0.0	0.0	1.0	72	118/77	85
EXERCISE	STAGE 1	3:00	1.6	10.0	4.4	114	118/77	135
	STAGE 2	3:00	2.5	12.0	7.0	136	130/80	177
	STAGE 3	2:59	3.4	14.0	10.1	160	140/90	224
RECOVERY	RECOVERY	4:16	***	***	1.0	102	150/90	153

TTT no negative for inducible ischemia

Technician:

Unconfirmed

MAC55 010B

Rakesh F, Chaudhari

LINKED MEDIANS REPORT

ID: S150996

Visit:

13-Mar-2024

12:49:00

PRETEST
SUPINE

3:38

BRUCE

**.*mph

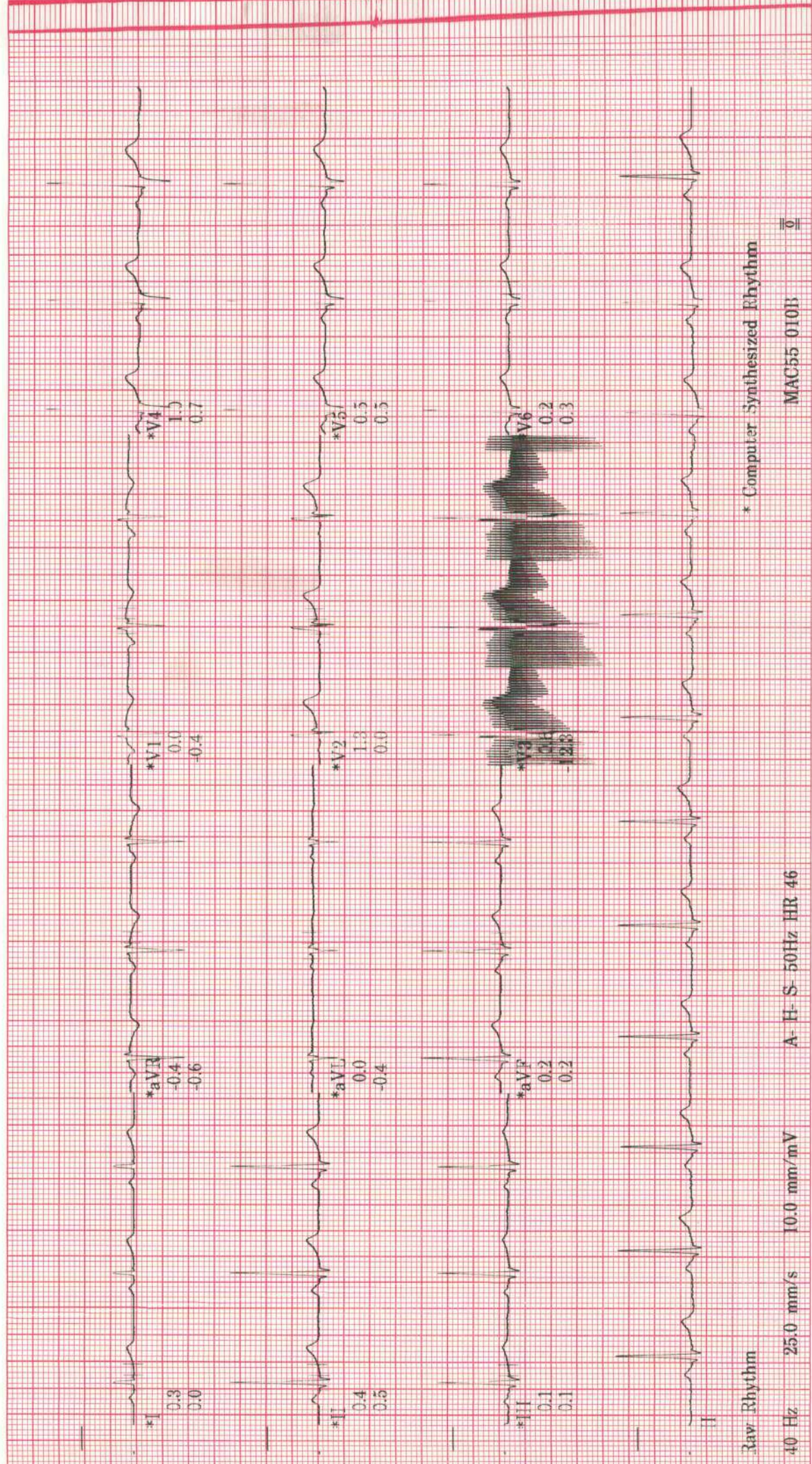
**.*%

Lead
ST(mm)
Slope(mV/s)

73bpm

BP: 118/77

ST @ 10mm/mV
80ms postJ



Raw Rhythm

40 Hz 25.0 mm/s 10.0 mm/mV

A-H-S-50Hz HR 46

* Computer Synthesized Rhythm

MAC55 010B

0

Rakesh F, Chaudhari

ID: S150996

Visit:

13-Mar-2024

12:52:10

114bpm

BP: 118/77

ST @ 10mm/mV
80ms postJ

EXERCISE

STAGE 1

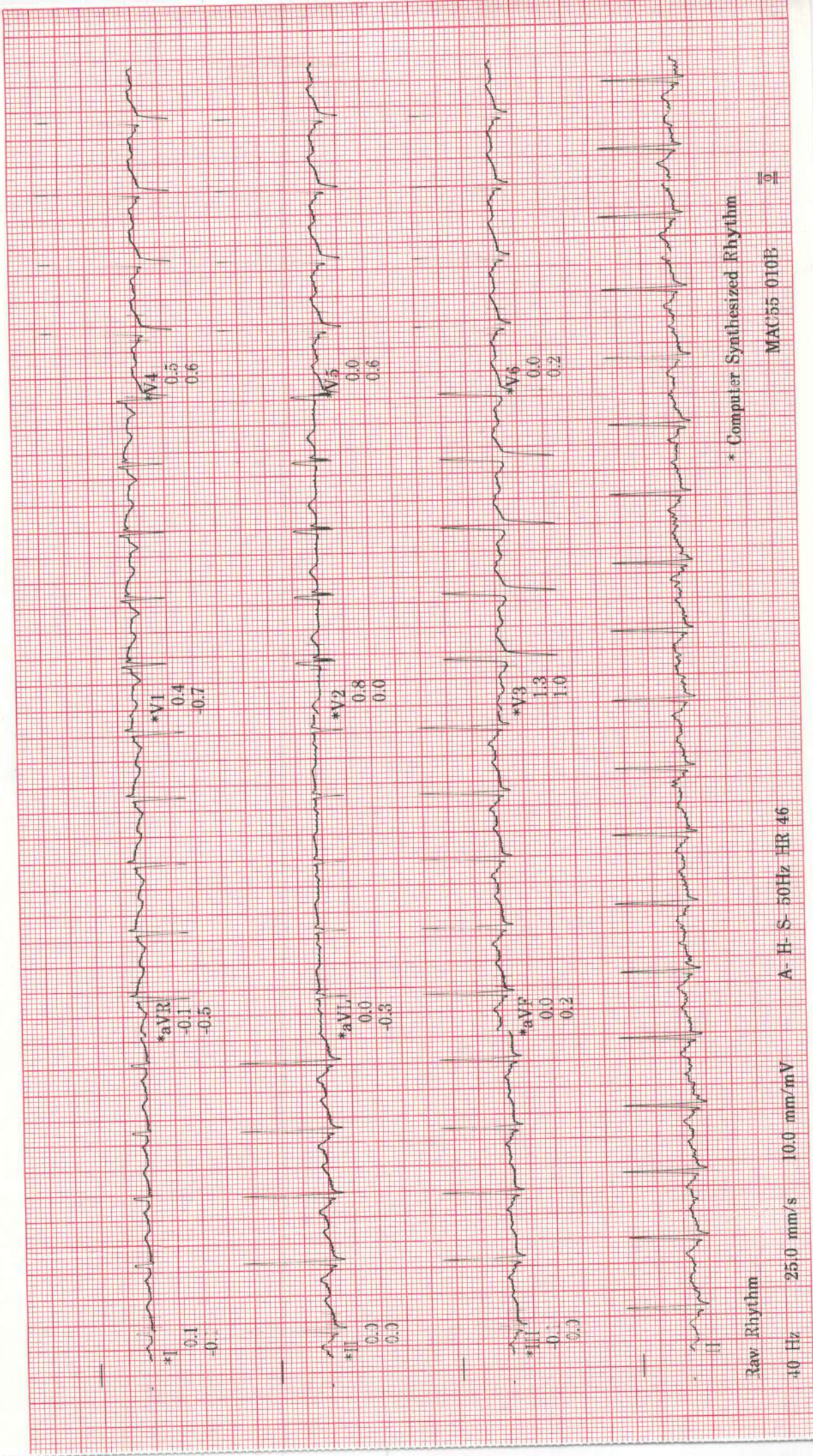
3:00

BRUCE

1.6mph

10.0%

Lead
ST(mm)
Slope(mV/s)



Raw Rhythm

40 Hz 25.0 mm/s 10.0 mm/mV

A-H-S-50Hz HR 46

* Computer Synthesized Rhythm

MAC55 010E

11

Rakesh F, Chaudhari
 ID: S150996
 Visit:
 13-Mar-2024
 12:55:10

LINKED MEDIANS REPORT

EXERCISE
 STAGE 2
 6:00
 1:55bpm
 BP: 130/80

ST @ 10mm/mV
 80ms postJ

BRUCE
 2.5mph
 12.0%

Lead
 ST(mm)
 Slope(mV/s)



Raw Rhythm
 40 Hz 25.0 mm/s
 10.0 mm/mV

A-H-S-50Hz HR 46

* Computer Synthesized Rhythm

MAC55 010B

LINKED MEDIANS REPORT

Rakesh F, Chaudhari
ID: S150996
Visit:
13-Mar-2024
12:58:09

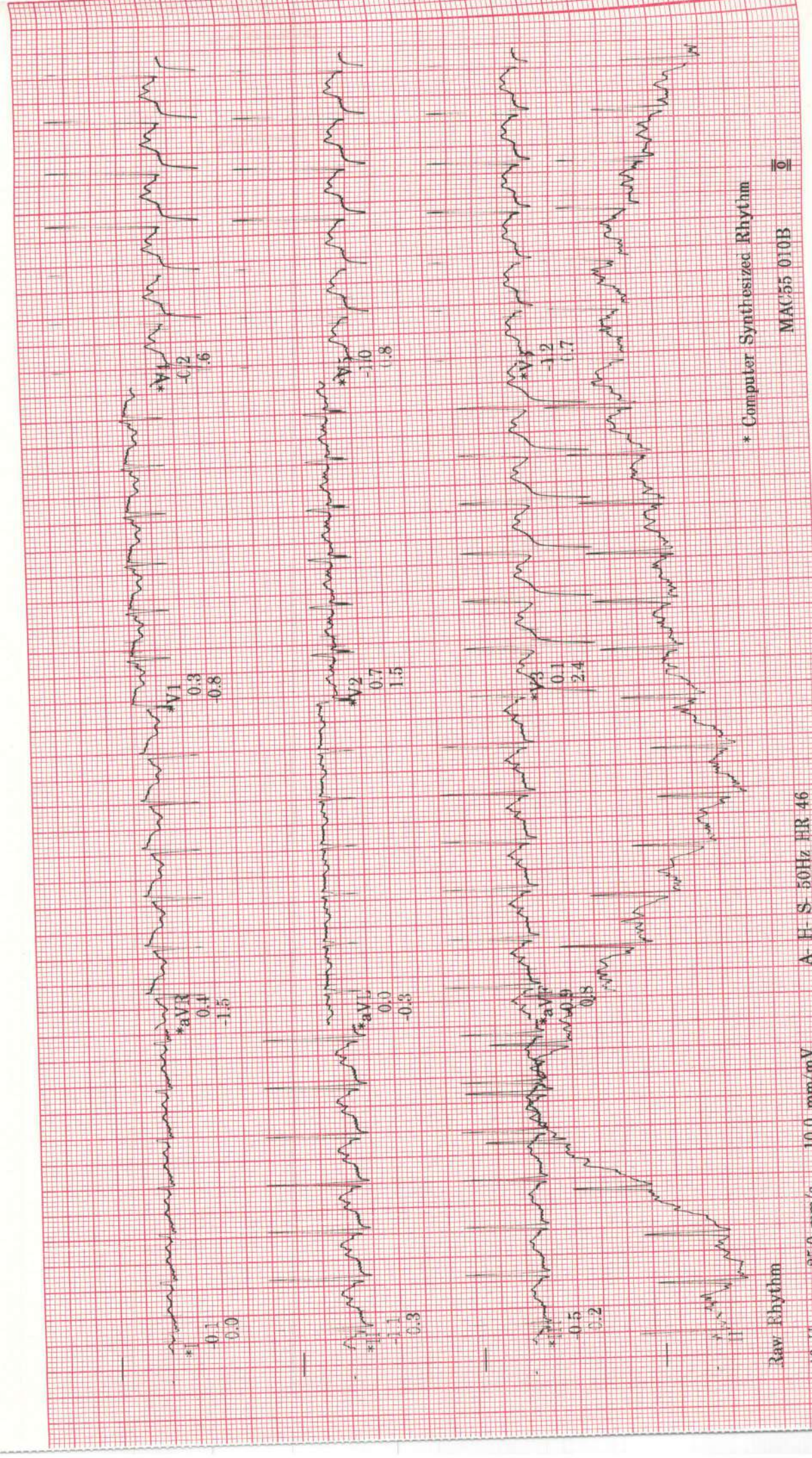
BRUCE
3.4mph
14.0%

EXERCISE
STAGE 3
9:00

160bpm
BP: 140/90

ST @ 10mm/mV
80ms postL

Lead
ST(mm)
Slope(mV/s)



* Computer Synthesized Rhythm

MAC55 0T0B

Raw Rhythm
40 Hz 25.0 mm/s
10.0 mm/mV
A-F-S-50Hz FR 46

Rakesh F, Chaudhari

ID: S150996
Vist:
13-Mar-2024
13:00:09

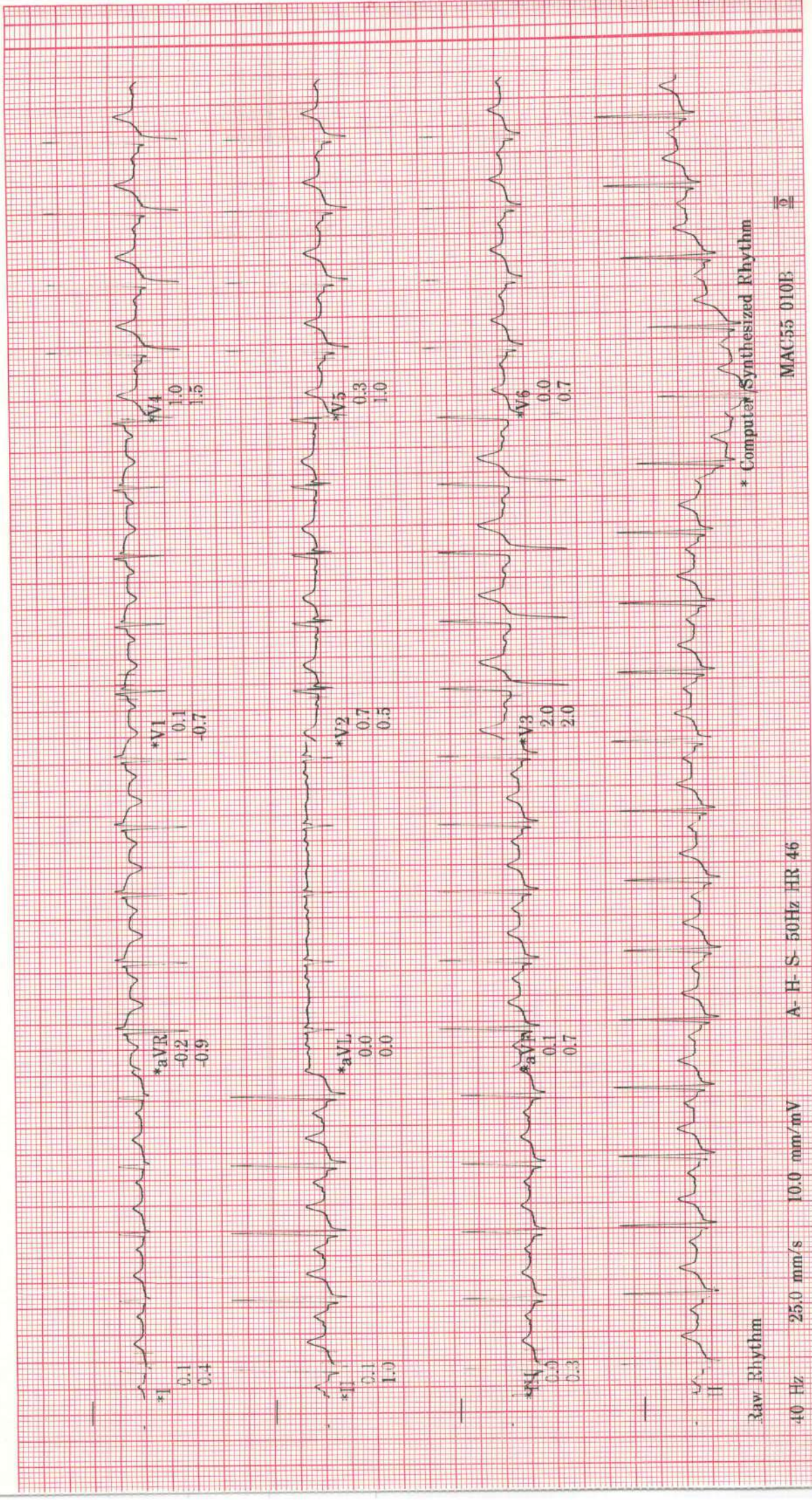
115bpm
BP: 145/85
ST @ 10mm/mV
80ms postJ

BRUCE
**.*mph
**.*%

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

LINKED MEDIANS REPORT

RECOVERY
RECOVERY
2:00



* Computer Synthesized Rhythm

A-H-S 50Hz HR 46

10.0 mm/mV

40 Hz 25.0 mm/s

MAC55 010E

Rakesh F, Chaudhari

ID: S150996

Visit:

13-Mar-2024

13:02:09

LINKED MEDIAN REPORT

BRUCE

**.*mph

**.*%

RECOVERY

RECOVERY

4:00

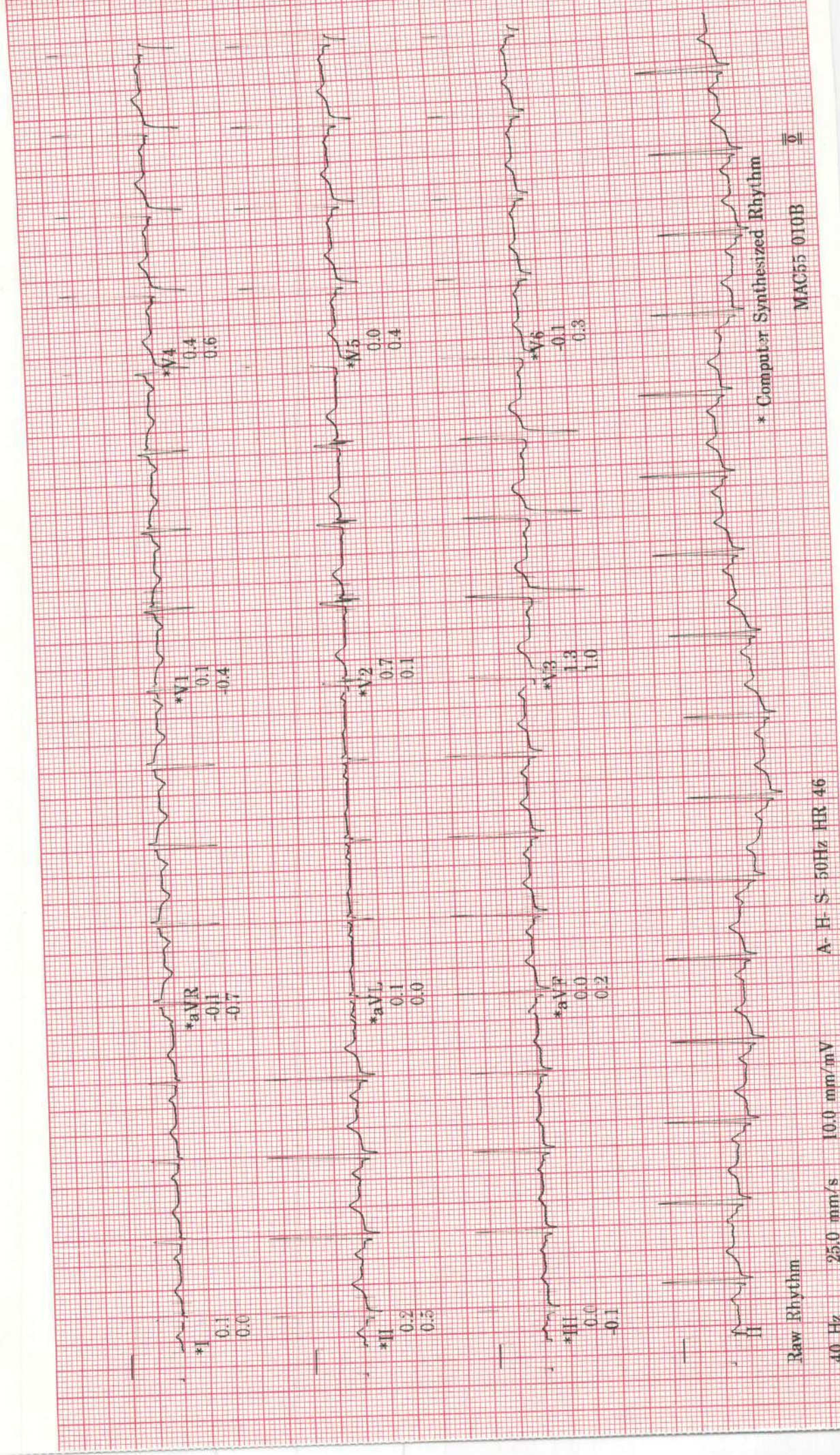
99bpm

BP: 150/90

ST @ 10mm/mV

80ms post

Lead
ST(mm)
Slope(mV/s)



Raw Rhythm

40 Hz

25.0 mm/s

10.0 mm/mV

A-H-S 50Hz HR 46

MAC55 010B

* Computer Synthesized Rhythm

2

SELECTED MEDIAN REPORT

Rakesh F, Chaudhari

ID: S150996

Visit:

42years

Caucasian

Male

13-Mar-2024

12:45:22

Referred by:
Test end:

25.0 mm/s
0.0 mm/mV
00hz

Exercise time: 8:59

Max HR: 160bpm 89% of max predicted 178bpm

Maximum workload: 10.4METS

TEST END RECOVERY
4:16
102bpm
BP: 150/90

PEAK EXERCISE
9:00
160bpm
BP: 140/90

MAX ST EXERCISE
8:47
160bpm
BP: 140/90

BASELINE EXERCISE
0:00
72bpm
BP: 118/77

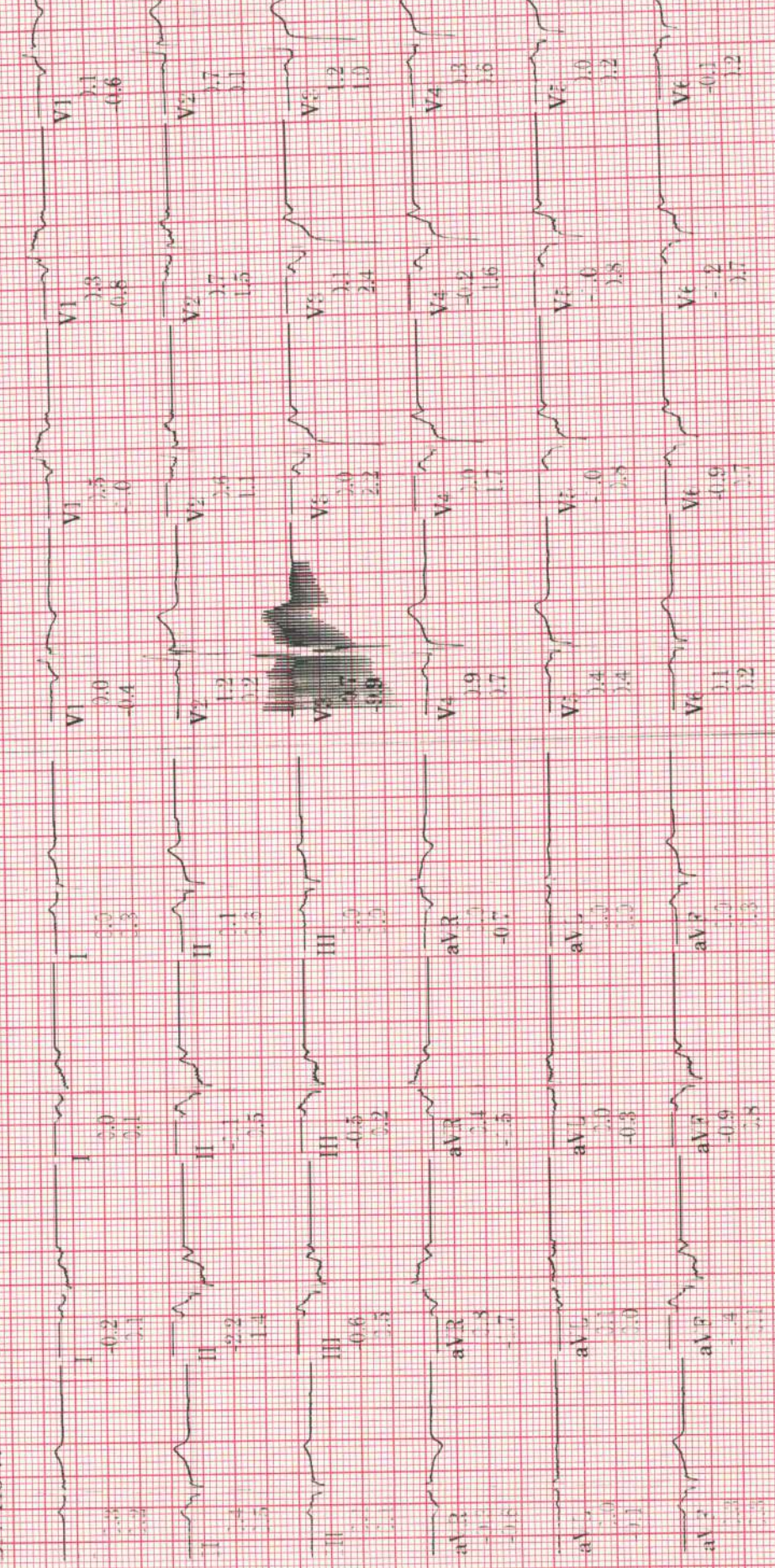
MAX ST EXERCISE
8:47
160bpm
BP: 140/90

BASELINE EXERCISE
0:00
72bpm
BP: 118/77

PEAK EXERCISE
9:00
160bpm
BP: 140/90

TEST END RECOVERY
4:16
102bpm
BP: 150/90

TEST END RECOVERY
4:16
102bpm
BP: 150/90



Unconfirmed

MAC55 010B

Technician:

Lead ST(mm) Slope(mV/s)

GRADED EXERCISE SUMMARY

Rakesh F, Chaudhari

ID: S150996

Visit:

42years

Caucasian

Male

Referred by:
Test ind:

13-Mar-2024
12:45:22

1 | Exercise time: 8:59

BRUCE
Max HR: 160bpm 89% of max predicted 178bpm

Max BP: 150/90

Reason for Termination:

Comments:

25.0 mm/s
10.0 mm/mV
100hz

Maximum workload: 10.4METS



Unconfirmed

Technician:

MAC55 010B

SAMPLE CARDIAC CYCLES

EXERCISE STAGE 1

0:00
72bpr
BP: 118/77
1.0METS

EXERCISE STAGE 1

1:00
115bpr
BP: 118/77
2.8METS

EXERCISE STAGE 1

2:00
115bpr
4.6METS

EXERCISE STAGE 1

3:00
114bpr
BP: 118/77
4.4METS

EXERCISE STAGE 2

4:00
126bpr
BP: 130/80
5.8METS

EXERCISE STAGE 2

5:00
129bpr
BP: 130/80
7.0METS

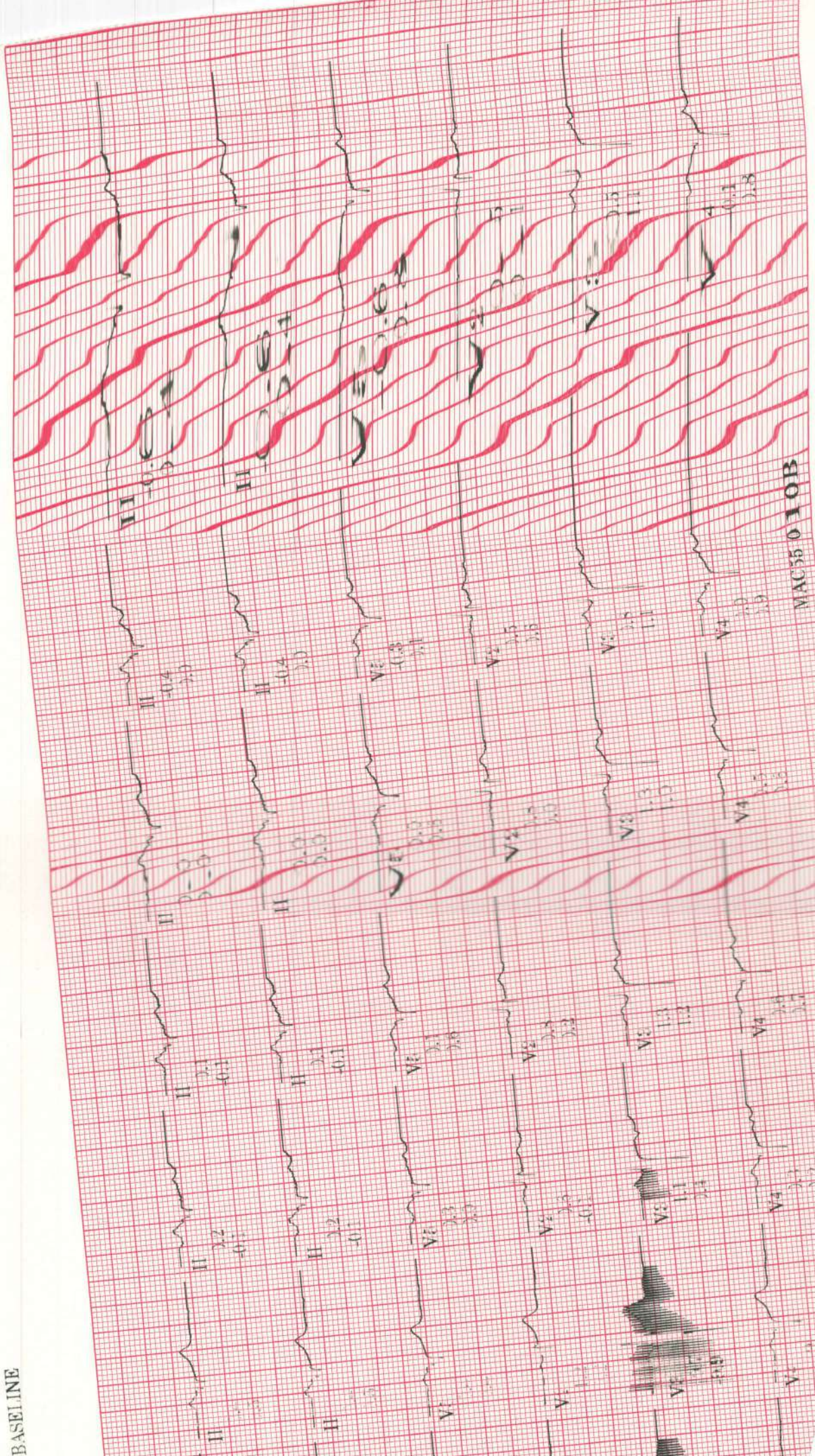
Visit:

EXERCISE STAGE 2

129bpr
BP: 130/80
7.0METS

EXERCISE STAGE 2

129bpr
BP: 130/80
7.0METS



MAC55 010B

Rakesh F, Chaudhari

ID: S150996

Visit:

13-Mar-2024

12:45:22

BRUCE

Heart Rate (bpm)

BP (mmHg)

250 ---

250 ---

PVC's/m

200 ---

200 ---

ST @ 10mm/mV 40 ---

80ms postJ

EXERCISE

0:00

150 ---

100 ---

50 ---

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Mr. Parikesh Chandharian

13-Mar-2024 9:56:39

Vent rate: 76 BPM
PR int: 150 ms
QRS dur: 92 ms
QT/QTc: 355/386 ms
p-R-T axes: 42 64 40

DOB:
yr, MALE

SINUS RHYTHM
NONSPECIFIC T-WAVE ABNORMALITY
BORDERLINE ECG
INTERPRETATION BASED ON A DEFAULT AGE OF 40 YEARS
Reviewed by -----

