

Shalby MD Physician Clinic

OPR NO:

Patient Name:-

Kavita S. Yadav

Date: 27/9/24

Age / Sex :-

31 F

Weight:- 57 kg

Chief Complaints:-

Height:- 150 cm

Nods

Nutritional assessment:-

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

Drug / Food Allergy:-

Past History :-

NAD

Pulse:- 82/min

BP:- 100/60

SpO2:- 99%

Family History:-

Systemic Examination:-

RS
CVS
PA
CNS } NAD

Provisional Diagnosis:-

Investigation :-

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

Rx

clotrimazole skin oil
(L250m oil)

T-fole 200mg (u)
१ गोम २३५१२५५५
[Signature]

Follow Up:

अधी दवाओ डोक्टरने बतावीने लेवी.

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



Patient ID:	SUR0000372186	Patient Name:	KAVITA S YADAV
Age:	49 Years	Sex:	F
Accession Number:	9755 HC	Modality:	DX
Referring Physician:	DR SHALBY	Study:	CHEST PA
Study Date:	28-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. 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

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.



Certificate No.: MC-5200

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 : SUR0000372186 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Kavita Satish Yadav	/	Registered On : 28-Sep-2024 09:39 AM
Lab ID : 409902295		Collected On : 28-Sep-2024 09:34 AM
Gender/Age : Female / 31 Years	DOB : 10-Jul-1993	Received On : 28-Sep-2024 10:14 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	11.7	g/dL	12.0 - 15.0
RBC COUNT	Electrical Impedance	4.37	mill/cmm	3.8 - 4.8
HCT	Calculated	36.9	%	36 - 46
MCV	Calculated based on the RBC histogram	84.4	fL	83 - 101
MCH	Calculated	26.8	pg	27 - 32
MCHC	Calculated	31.7	g/dL	31.5 - 34.5
RDW	Calculated	12.7	%	11.6 - 14.0

TOTAL LEUCOCYTE COUNT

Total WBC Count	Electrical Impedance	6620	cells/cmm	4000 - 10000
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DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)

NEUTROPHILS	Flow Cytometry	66	%	40 - 80
LYMPHOCYTES	Flow Cytometry	29	%	20 - 40
EOSINOPHILS	Flow Cytometry	1	%	1 - 6
MONOCYTES	Flow Cytometry	3	%	2 - 10
BASOPHIL	Flow Cytometry	1	%	0 - 2

PLATELET INDICES

PLATELET COUNT	Electrical Impedance	186000	/cmm	150000 - 410000
MPV	Calculated based on PLT Histogram	9.8	fL	7.5 - 12.0

PERIPHERAL SMEAR EXAMINATION

RBCs	Normochromic and Normocytic.
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-5200

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Parameter	Result	Unit	Biological Ref. Interval
BLOOD GROUP			
(Tube agglutination: Forward & reverse)			
ABO Type	"O"		
RH Type	POSITIVE		

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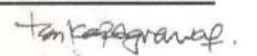
Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
ESR 1st hour <i>Modified Westergren Method</i>	20	mm in 1 hour	0 - 20
HBA1C HbA1c - Glycated Haemoglobin <i>Boronate Affinity Assay</i>	5.3	%	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>	105	mg/dL	

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Gender/Age : Female / 31 Years

DOB : 10-Jul-1993

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Ref. By : Health Check Up Shalby

Sample Type : Serum

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

175

mg/dL

Desirable: <200
Borderline High: 200 - 239
High >=240*Cholesterol Esterase, Oxidase, Peroxidase***SERUM TRIGLYCERIDE**

94

mg/dL

Normal : <150
Borderline High : 150-199
High : 200-499
Very High : > 500*Lipase/GK/GPO/POD***HDL CHOLESTEROL DIRECT**

46

mg/dL

Major risk factor for heart disease
: < 40
Negative risk factor for heart
disease : >= 60*Phosphotungstic Acid/Mgcl2 - Enzymatic***Non HDL Cholesterol**

129

mg/dL

Optimal : <130
Desirable : 130-159
Borderline high : 159-189
High : 189-220
Very High : >=220*Calculated***LDL Cholesterol**

110

mg/dL

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

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

19

mg/dL

6 - 38

*Calculated***LDL/dHDL**

2.4

2.5 - 3.5

*Calculated***Chol/dHDL**

3.8

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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DOB : 10-Jul-1993

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Ref. By : Health Check Up Shalby

Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
THYROID PROFILE (TFT)			
Total T3 <i>Chemiluminescence immunoassay (CLIA)</i>	98	ng/dL	87 - 178
Total T4 <i>Chemiluminescence immunoassay (CLIA)</i>	9.39	µg/dL	99% Reference Interval (µg/dL) 4.82 - 15.65
TSH <i>Chemiluminescence immunoassay (CLIA)</i>	4.711	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

TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm . The variation is of the order of 50% .hence

time of the day has influence on the measured serum TSH concentrations.

TSH levels During Pregnancy :

First Trimester :0.1 to 2.5 µIU/mL Second Trimester : 0.2 to 3.0 µIU/mL Third trimester : 0.3 to 3.0 µIU/mL

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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)**

8

mg/dL

7 - 17

*Urease, colorimetric***UREA**

17

mg/dL

15 - 36

*Calculated***Creatinine**

0.38

mg/dL

0.52 - 1.04

*Enzymatic - Creatinine amidohydrolase***S. URIC ACID**

2.2

mg/dL

2.5 - 6.2

*Uricase/Peroxidase, Colorimetric***Calcium**

9.2

mg/dL

8.4 - 10.2

*Arsenazo III dye***Sodium**

146

mmol/L

137 - 145

*Direct Ion Selective Electrode***S. POTASSIUM**

4.2

mmol/L

3.5 - 5.1

*Direct Ion Selective Electrode***Chloride**

106

mmol/L

98 - 107

Phosphorus (Not in NABL Scope)

3.6

mg/dL

2.5 - 4.5

Phosphomolybdate reduction (PMA Phenol)

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Gender/Age : Female / 31 Years

DOB : 10-Jul-1993

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Ref. By : Health Check Up Shalby

Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
Liver Function Test			
Liver Function Test			
SGPT (ALTV) <i>Multi Point Rate with P-5-P</i>	16	U/L	9 - 52
SGOT (AST) <i>Multi Point Rate with P-5-P</i>	22	U/L	14 - 36
Alkaline Phosphatase <i>PNPP, AMP Buffer</i>	91	U/L	20-50 yrs.: 42 - 98 4-19 yr : 54 - 369 >=51 yr : 56 - 119
GGT <i>L-gamma-glutamyl-4-nitroanalide/glycylglycine Kinetic</i>	9	U/L	12 - 43
S. PROTEIN <i>Biuret (Alkaline cupric sulfate), End Point</i>	6.4	g/dL	6.3 - 8.2
Albumin <i>Bromocresol Green (BCG), Colorimetric</i>	3.9	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>	1.6	Ratio	1.0 - 2.3
Bilirubin Total <i>Azobilirubin/Dyphylline/Diazonium Salt</i>	0.6	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>	0.6	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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REPORT STATUS : Interim



Patient Name : Mrs. Kavita Satish Yadav /

Registered On : 28-Sep-2024 09:39 AM

Lab ID : 409902295

Collected On : 28-Sep-2024 09:40 AM

Gender/Age : Female / 31 Years

DOB : 10-Jul-1993

Received On : 28-Sep-2024 10:15 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	<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> <=1.005	S.G. value	1.001 - 1.035
Blood	<i>Peroxidase like activity of hemoglobin</i> NIL		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	2-3/hpf	/hpf	0-5/hpf
Red blood cells	Nil	/hpf	NIL/hpf
Epithelial cells	20-25/hpf	/hpf	NA
Crystals	Nil		Nil
Cast	Nil		Nil
Bacteria	Nil		Nil
Amorphous	Nil		Nil
Yeast	Present		Nil
Others	Nil		Nil

----- End of Report -----

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

DR. HIMANI THAKER (VYAS)

M.S (Gynec)
Consultant Obstetrician & Gynecologist
Laparoscopic Surgeon
Infertility Specialist
Email-ID:- thaker.himani@gmail.com
Register No. G-31062

Shalby Women's Health Clinic

Name:- Kavita
Chief Complaints:-

Date: 28/9/24
Weight:-
Height:-
OPR NO:-

- Nutritional Assessment:-
- Obese
 - Well Nourished
 - Mild-Moderate Nourished
 - Severely Mal-Nourished

clo- nil

LMP:- 12/9/24

M/H:- Pain - 3-4 days bhon
30

O/H :-

P/H:- obst - Pres

F/H

Examination:-

2 FTND | 20¹⁵ | 6 yrs
10 months | 12

TC not done

Provisional Diagnosis:-

P/A - soft
P/S - Cp healthy

PAP taken

Patient Name: KAVITA SATISH YADAV	UHID: SUR0000372186
Age / Sex: 31 Yrs. / Female	Study: USG Abdomen + Pelvis
Referred By: Dr. at shalby hospital	Date: 28.09.2024

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 appears mild bulky in size, measures 73 X 44 X 58 mm. The uterine myometrial echotexture is inhomogeneous. 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.

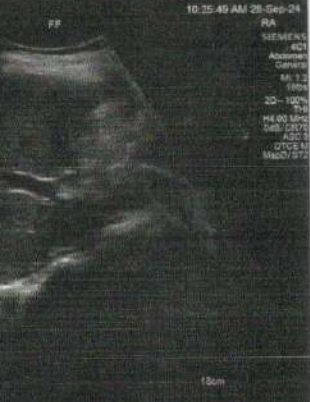
IMPRESSION:

- Mild bulky uterus with changes of adenomyosis.
- No any other significant abnormality detected.

Thanks for referrals.



DR. ASHUTOSH GANDHI
DMRD (Radiodiagnosis)
G-14916





Pre - op

Post-op

Health Check-up

Date : 28-09-21

Patient Reg. No. : _____

Patient Name : Kavitel S. Yedkar

Age / Sex : 32/F

Address : Sirelt

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 : Sittings 1 2 3 Deep Perio Surgery : _____

Restoration : 7/62 _____ 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. Retention $\frac{26}{A}$

Dr. Darshini V. Shah

Dr. Darshini V. Shah
(Consultant Dental Surgeon)

Patient's Name: Kavita Yadav

UHID:372186

Age:31 yrs / Female

Date:28 / 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:20

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:12 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

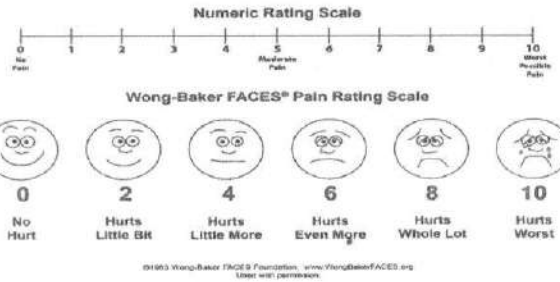
Note : Normal echo study does not rule out underlying Coronary artery disease

Name:- Kavita S. Yadav.

Date:- 28-9-23

Chief Complaints:-

- N/H/O recent complains.
- Case for regular eye examination.



Pain Assessment:-

Past History:-

Family History:-

Allergy:- No allergic of any drugs.

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

General Examination:-

BP: - Pulse: - Temp: -

Visual Acuity: - 6/6
6/6
N6 PG.

NCT < 11.6
12.7

ON Examination

Ant. Segment

PACD > ICT

Systemic Examination:-

HT: - Nil WT:-

PH Vision:-

Both Eye

ME
TE: 20247Sep/28 12:58
00384
VITZ HNT-1P
r 1.1.1

ONO-PACHY model		
P	<R>	<L>
	11.3	12.7
	11.6	12.8
	12.0	12.7
G	11.6	12.7
mHg)		
T	<R>	<L>
	507	491
	507	496
	508	496
G	507.3	494.3
n)		

clear

clear Anterior Chamber

Rt. EYE

Lt. EYE

WNL

Disc: -
Blood Vessel:-
Background:-
Macula:-
Diagnosis:-
- Entropic.

Investigation:-

Treatment:-
- Refractive BG. LTD.

Nutritional Assessment:-
Preventive Care & Counselling:-

Follow Up ON:-

Signature of the Consultant

DR R.S

ID:

Name:

Sex: M cm kg

Birth date: /

mmHg

year:

1100 Sinus r...
9110 ** normal ECG **

Medication:

Symptoms:

History:

Heart rate

PR int

QRS dur

QT/QTc(E) int

QT/QTc axis

RV5/SV1 amp

RV5+SV1 amp

71 bpm
152 ms
86 ms
362/385 ms
21/51/59 °
0.81/0.59 mV
1.40 mV

Kavitaaben
yelder

Unconfirmed Report
Reviewed by:

WNC

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

10 mm/mV

