

Shalby MD Physician Clinic

Patient Name:-

Srisant Mali

Age / Sex :-

43M

Chief Complaints:-

No clo

Drug / Food Allergy:-

Past History :-

NAD

Family History:-

Systemic Examination:-

RS }  
CVS }  
PA } NAD  
CNS }

OPR NO:

Date: 28/9/24

Weight:- 75 kg

Height:- 173 cm

Nutritional assessment:-

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

Pulse:- 68

BP:- 110/60

SpO2:- 92%

Provisional Diagnosis:-

Investigation :-

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

Rx

Lifestyle modification

Tab. Rosuvas 10mg (50)

- 1 -

after 1 month.

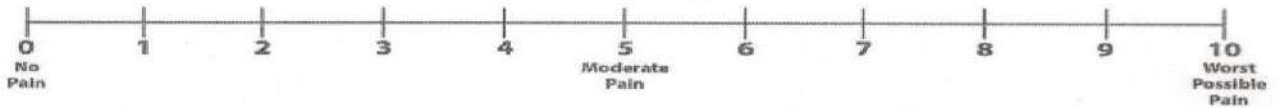
Follow Up:

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**









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 : SUR0000372195 OP-001

REPORT STATUS : Interim



Patient Name : Mr Sushant P Mali	/	Registered On : 28-Sep-2024 09:49 AM
Lab ID : 409902302		Collected On : 28-Sep-2024 09:57 AM
Gender/Age : Male / 42 Years	DOB : 24-Oct-1981	Received On : 28-Sep-2024 10:22 AM
Ref. By : Health Check Up Shalby		Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
<b>ESR 1st hour</b> <i>Modified Westergren Method</i>	4	mm in 1 hour	0 - 15
<b>HBA1C</b> <b>HbA1c - Glycated Haemoglobin</b> <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
<b>Estimated Average Glucose (eAG) (mg/dL)</b> <i>Calculated</i>	123	mg/dL	

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



Certificate No. : MC-5200

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PID : SUR0000372195 OP-001

REPORT STATUS : Interim



Patient Name : **Mr Sushant P Mali** / Registered On : 28-Sep-2024 09:49 AM  
 Lab ID : 409902302 Collected On : 28-Sep-2024 09:57 AM  
 Gender/Age : Male / 42 Years DOB : 24-Oct-1981 Received On : 28-Sep-2024 10:31 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**

<b>Plasma Glucose (F)</b>	87	mg/dL	74 - 106
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GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

<b>Urine Sugar (F)</b>	ABSENT	mg/dL	Absent
------------------------	--------	-------	--------

Glucose-oxidase/oxidase reaction

**POST PRANDIAL PLASMA GLUCOSE**

<b>Plasma Glucose (PP)</b>	72	mg/dL	Normal: 100-140 Impaired: 140-199 Diabetic :=>200
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GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

<b>Urine Sugar (PP)</b>	ABSENT	mg/dL	Absent
-------------------------	--------	-------	--------

Glucose-oxidase/oxidase reaction

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REPORT STATUS : Interim



Patient Name : Mr Sushant P Mali /

Registered On : 28-Sep-2024 09:49 AM

Lab ID : 409902302

Collected On : 28-Sep-2024 09:57 AM

Gender/Age : Male / 42 Years

DOB : 24-Oct-1981

Received On : 28-Sep-2024 12:51 PM

Ref. By : Health Check Up Shalby

Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
<b>LIPID PROFILE</b>			
<b>LIPID PROFILE</b>			
<b>Cholesterol</b> <i>Cholesterol Esterase, Oxidase, Peroxidase</i>	200	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
<b>SERUM TRIGLYCERIDE</b> <i>Lipase/GK/GPO/POD</i>	129	mg/dL	Normal : <150 Borderline High : 150-199 High : 200-499 Very High : > 500
<b>HDL CHOLESTEROL DIRECT</b> <i>Phosphotungstic Acid/Mgcl2 - Enzymatic</i>	50	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : >= 60
<b>Non HDL Cholesterol</b> <i>Calculated</i>	150	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
<b>LDL Cholesterol</b> <i>Calculated</i>	124	mg/dL	Optimal: <100 Near to above Optimal: 100 - 129  Borderline High: 130 - 159 High: 160 - 189 Very High: > 190
<b>VLDL</b> <i>Calculated</i>	26	mg/dL	6 - 38
<b>LDL/dHDL</b> <i>Calculated</i>	2.5		2.5 - 3.5
<b>Chol/dHDL</b> <i>Calculated</i>	4.0	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
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## IMMUNOLOGY

## THYROID PROFILE (TFT)

<b>Total T3</b>	116	ng/dL	87 - 178
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Chemiluminescence immunoassay (CLIA)

T3 Total in ng/mL	0-3 days	1.00-7.40
	4-30 days	Not Established
	1-11 months	1.05-2.45
	1-5 years	1.05 - 2.69
	6-10 years	0.94-2.41
	11-15 years	0.82-2.13
	16-20 years	0.80-2.10

<b>Total T4</b>	11.39	µg/dL	99% Reference Interval
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			(µg/dL)
			4.82 - 15.65

Chemiluminescence immunoassay (CLIA)

T4 Total in µg/dL	1-3 days	11.80-22.60
	4-7 days	Not Established
	1-2 weeks	9.80-16.60
	15-30 days	Not Established
	1-4 months	7.20-14.40
	4-12 months	7.80-16.50
	1-5 years	7.30-15.00
	5-10 years	6.40-13.30
	10-15 years	5.60-11.70

<b>TSH</b>	1.980	µIU/mL	0.38 - 5.33
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Chemiluminescence immunoassay (CLIA)

## INTERPRETATION:

- The principal clinical use for hTSH measurement is for the assessment of thyroid status.
- In patients with intact hypothalamic-pituitary function, hTSH is measured to:
  - exclude hypothyroidism (elevated levels of hTSH) or hyperthyroidism (depressed or nondetectable levels of hTSH);
  - monitor T4 replacement treatment in primary hypothyroidism or antithyroid treatment in hyperthyroidism;
  - follow T4 suppression of the trophic influence of hTSH in "cold nodules" and non-toxic goiter; and
  - assess the response to TRH stimulation testing.
- As more sensitive and precise methods become available, hTSH measurements are also increasingly used to identify subclinical or latent hypothyroidism or hyperthyroidism.

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Ref. By : Health Check Up Shalby

Sample Type : Serum

**PROSTATE SPECIFIC ANTIGEN**

1.4

ng/mL

0.0 - 4.0

Chemiluminescence immunoassay (CLIA)

**Clinical Use:**

1. An aid in the early detection of Prostate cancer when used in conjunction with Digital rectal examination in males more than 50 years of age and in those with two or more affected first degree relatives.
2. Followup and management of Prostate cancer patients.
3. Detect metastatic or persistent disease in patients following surgical or medical treatment of Prostate cancer.

**Note:**

1. PSA levels may appear consistently elevated / depressed due to the interference by heterophilic antibodies & nonspecific protein binding.
2. Immediate PSA testing following digital rectal examination, ejaculation, prostatic massage, indwelling catheterization, ultrasonography and needle biopsy of prostate is not recommended as they falsely elevate levels.
3. Sites of Non-prostatic PSA production are breast epithelium, salivary glands, periurethral & anal glands, cells of male urethra & breast milk.
4. Physiological decrease in PSA level by 18% has been observed in hospitalized / sedentary patients either due to supine position or suspended sexual activity.

**Recommended Testing Intervals:**

- Pre-operatively ( Baseline)
- 2-4 days post-operatively
- Prior to discharge from hospital
- Monthly followup if levels are high or show a rising trend

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  $\mu$ U/mL Second Trimester : 0.2 to 3.0  $\mu$ U/mL Third trimester : 0.3 to 3.0  $\mu$ U/mL

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Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
<b>BIOCHEMISTRY</b>			
<b>RENAL FUNCTION TEST</b>			
<b>NABL Accredited Parameters</b>			
<b>Urea Nitrogen (BUN)</b>	11	mg/dL	9 - 20
<i>Urease, colorimetric</i>			
<b>UREA</b>	24	mg/dL	19 - 43
<i>Calculated</i>			
<b>Creatinine</b>	0.94	mg/dL	0.66 - 1.25
<i>Enzymatic - Creatinine amidohydrolase</i>			
<b>S. URIC ACID</b>	6.0	mg/dL	3.5 - 8.5
<i>Uricase/Peroxidase, Colorimetric</i>			
<b>Calcium</b>	9.8	mg/dL	8.4 - 10.2
<i>Arsenazo III dye</i>			
<b>Sodium</b>	143	mmol/L	137 - 145
<i>Direct Ion Selective Electrode</i>			
<b>S. POTASSIUM</b>	4.1	mmol/L	3.5 - 5.1
<i>Direct Ion Selective Electrode</i>			
<b>Chloride</b>	105	mmol/L	98 - 107
<b>Phosphorus (Not in NABL Scope)</b>	3.5	mg/dL	2.5 - 4.5
<i>Phosphomolybdate reduction (PMA Phenol)</i>			

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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)**

19

U/L

21 - 72

*Multi Point Rate with P-5-P***SGOT (AST)**

22

U/L

17 - 59

*Multi Point Rate with P-5-P***Alkaline Phosphatase**

56

U/L

20-50 yrs : 53 - 128  
4-19 yr : 54 - 369  
>=51 yr : 56 - 119*PNPP, AMP Buffer***GGT**

16

U/L

15 - 73

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

7.5

g/dL

6.3 - 8.2

*Biuret (Alkaline cupric sulfate), End Point***Albumin**

4.0

g/dL

3.5 - 5.0

*Bromocresol Green (BCG), Colorimetric***S. GLOBULIN**

3.5

g/dL

2.3 - 3.6

*Calculated***A/G Ratio**

1.1

Ratio

1.0 - 2.3

*Calculated***Bilirubin Total**

0.5

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*Azobilirubin/Dyphylline/Diazonium Salt*

Adult : 0.2 - 1.3

**Bilirubin Unconjugated**

0.5

mg/dL

Unconjugated bilirubin  
Adults: 0.0-1.1  
Neonates: 0.6-10.5*End-point Colorimetric (Dual wavelength spectrophotometric)***Bilirubin Direct**

0.0

mg/dL

Conjugated bilirubin and  
Delta bilirubin (Bilirubin  
covalently bound to albumin)  
0.0-0.4*Calculated*

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Gender/Age : Male / 42 Years

DOB : 24-Oct-1981

Received On : 28-Sep-2024 10:19 AM

Ref. By : Health Check Up Shalby

Sample Type : Urine

## URINE EXAMINATION

Parameter	Result	Unit	Biological Ref. Interval
<b>Physical Examination</b>			
Colour	Pale Yellow		Pale yellow
Transparency	Clear		Clear
<b>Chemical Examination</b>			
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> Negative		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
<b>Microscopic Examination</b>			
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. RUJUTA SHELAT**

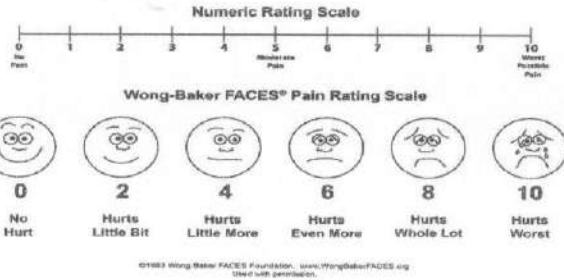
Consultant Ophthalmologis

Reg. No.:- G-48712

Name :- *Sushant mal*

Date:- *28/05/24*

Chief Complaints:- *Longtime eye  
shock up*



Pain Assessment:- *Nil*

Past History:- *Nil*

Family History:- *Nil*

Allergy:- *Nil*

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*

Systemic Examination:-

HT:- *Nil* WT:-

PH Vision:-

NCT *< 12  
12*

*No BG.*

ON Examination

Ant. Segmenet

Both Eye

*PACD > ICT*

DATE  
SEP 29 2023 11:27

D=10  
R>

SPH	CYL	AX
0.00	-0.75	83
0.00	-1.00	87
0.00	-1.00	85
0.00	-1.00	85

Clear

Clear

Anterior Chamber

L>

SPH	CYL	AX
0.00	-0.75	80
0.00	-0.75	73
0.00	-0.75	74
0.00	-0.75	74

Rt. EYE

Lt. EYE

D= 67  
 irandseiko.com  
 IR-3300K S/N:76BB0963

→ CUM

Investigation:-

- Blood Vessel:-
- Background:-
- Macula:-
- Diagnosis:-

Treatment:-  
 - Refresh tears

- Nutritional Assessment:-
- Preventive Care & Counsellings:-

Follow Up ON:-  
 - After 2 year

Signature of the Consultant  
 DR. RS

Patient Name: SUSHANT P MALI		UHID: SUR0000372195	
Age / Sex: 43 Yrs. / Male		Study:	USG Abdomen + Pelvis
Referred By:	Dr. at shalby Hospital		Date: 28.09.2024

**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 and measures 26 x 37 x 29 mm (Approx. vol- 15 cc). 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. 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



SUSHANT MALI  
24.09.28-11:04:38-DST-1.3.12.2.1107...



11:04:43 AM 28-Sep-24 SUSHANT MALI  
RA 24.09.28-11:04:38-DST-1.3.12.2.1107  
SIEMENS AC1  
Abdomen General  
MR 1.2  
18cm  
2D-100%  
TH  
H4.00 MHz  
DBF-DFT3  
ASC 3  
DTCE M  
MapO-DT2



11:04:46 AM 28-Sep-24 SUSHANT MALI  
RA 24.09.28-11:04:38-DST-1.3.12.2.1107  
SIEMENS AC1  
Abdomen General  
MR 1.2  
18cm  
2D-100%  
TH  
H4.00 MHz  
DBF-DFT3  
ASC 3  
DTCE M  
MapO-DT2



11:04:49 AM 28-Sep-24 SUSHANT MALI  
RA 24.09.28-11:04:38-DST-1.3.12.2.1107  
SIEMENS AC1  
Abdomen General  
MR 1.2  
18cm  
2D-100%  
TH  
H4.00 MHz  
DBF-DFT3  
ASC 3  
DTCE M  
MapO-DT2

SUSHANT MALI  
24.09.28-11:04:38-DST-1.3.12.2.1107...



11:04:53 AM 28-Sep-24 SUSHANT MALI  
RA 24.09.28-11:04:38-DST-1.3.12.2.1107  
SIEMENS AC1  
Abdomen General  
MR 1.2  
18cm  
2D-100%  
TH  
H4.00 MHz  
DBF-DFT3  
ASC 3  
DTCE M  
MapO-DT2



11:05:02 AM 28-Sep-24 SUSHANT MALI  
RA 24.09.28-11:04:38-DST-1.3.12.2.1107  
SIEMENS AC1  
Abdomen General  
MR 1.2  
18cm  
2D-100%  
TH  
H4.00 MHz  
DBF-DFT3  
ASC 3  
DTCE M  
MapO-DT2



11:05:06 AM 28-Sep-24 SUSHANT MALI  
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SIEMENS AC1  
Abdomen General  
MR 1.2  
18cm  
2D-100%  
TH  
H4.00 MHz  
DBF-DFT3  
ASC 3  
DTCE M  
MapO-DT2  
C-100%  
2.50cm  
PRF 977  
MagA-F2

SUSHANT MALI  
24.09.28-11:04:38-DST-1.3.12.2.1107...



11:05:10 AM 28-Sep-24 SUSHANT MALI  
RA 24.09.28-11:04:38-DST-1.3.12.2.1107  
SIEMENS AC1  
Abdomen General  
MR 1.2  
18cm  
2D-100%  
TH  
H4.00 MHz  
DBF-DFT3  
ASC 3  
DTCE M  
MapO-DT2



11:05:14 AM 28-Sep-24 SUSHANT MALI  
RA 24.09.28-11:04:38-DST-1.3.12.2.1107  
SIEMENS AC1  
Abdomen General  
MR 1.2  
18cm  
2D-100%  
TH  
H4.00 MHz  
DBF-DFT3  
ASC 3  
DTCE M  
MapO-DT2



11:05:19 AM 28-Sep-24 SUSHANT MALI  
RA 24.09.28-11:04:38-DST-1.3.12.2.1107  
SIEMENS AC1  
Abdomen General  
MR 1.2  
18cm  
2D-100%  
TH  
H4.00 MHz  
DBF-DFT3  
ASC 3  
DTCE M  
MapO-DT2

SUSHANT MALI  
24.09.28-11:04:38-DST-1.3.12.2.1107...



11:05:27 AM 28-Sep-24 SUSHANT MALI  
RA 24.09.28-11:04:38-DST-1.3.12.2.1107  
SIEMENS AC1  
Abdomen General  
MR 1.2  
18cm  
2D-100%  
TH  
H4.00 MHz  
DBF-DFT3  
ASC 3  
DTCE M  
MapO-DT2  
C-100%  
2.50cm  
PRF 977  
MagA-F2



11:05:37 AM 28-Sep-24 SUSHANT MALI  
RA 24.09.28-11:04:38-DST-1.3.12.2.1107  
SIEMENS AC1  
Abdomen General  
MR 1.2  
18cm  
2D-100%  
TH  
H4.00 MHz  
DBF-DFT3  
ASC 3  
DTCE M  
MapO-DT2



11:05:56 AM 28-Sep-24 SUSHANT MALI  
RA 24.09.28-11:04:38-DST-1.3.12.2.1107  
SIEMENS AC1  
Abdomen General  
MR 1.2  
18cm  
2D-100%  
TH  
H4.00 MHz  
DBF-DFT3  
ASC 3  
DTCE M  
MapO-DT2

V=15.4 cm/s  
+D=2.85 cm  
-D=3.72 cm  
S D=2.97 cm





Pre - op

Post-op

Health Check-up

Date : 28-09-24

Patient Reg. No. : \_\_\_\_\_

Patient Name : Sushant Meeli Age / Sex : 42/17

Address : Savitri

**Complaints :**

Pain : \_\_\_\_\_

Bleeding gums : \_\_\_\_\_

Sensitivity : \_\_\_\_\_

Swelling : \_\_\_\_\_

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 : \_\_\_\_\_

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 per formed 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*

*Jada 7.11.11*

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

Patient's Name: Sushant Mali

UHID: 372195

Age: 43 yrs / male

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: 11 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



Sex: M      cm      kg      Birth date:      /      mmHg      years

Medication:

Symptoms:

History:

Vent. rate      bpm  
 PR int      ms  
 QRS dur      ms  
 QT/QTc(E) int      ms  
 P/ORS/T axis      °  
 RV5/SV1 amp      mV  
 RV5+SV1 amp      mV

*Surgen Hblew*

Unconfirmed Report  
Reviewed by:

*WNC*

10 mm/mV

Filter: H50 d 35 Hz

10 mm/mV 25 mm/s

