

Shalby MD Physician Clinic

OPR NO:

Patient Name:-

Amin Iqbal Motiwala
37 M.

Date: 14/9/24

Age / Sex :-

Weight:- 79.7 kg

Chief Complaints:-

Height:- 170 cm

Nods

Nutritional assessment:-

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

Drug / Food Allergy:-

NA 2

Pulse:- 77/min

Past History :-

BP:- 120/80

SpO2:- 99%

Family History:-

RS }
CVS }
PA }
CNS } NA 2

Systemic Examination:-

Provisional Diagnosis:-

Investigation :-

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

Rx

medication Health
checkup
and

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



Patient ID:	SUR0000371376	Patient Name:	AMIN IQBAL MOTIWALA
Age:	37 Years	Sex:	M
Accession Number:	9248 MHC	Modality:	DX
Referring Physician:	DR. SHALBY	Study:	CHEST PA
Study Date:	14-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



Certificate No.: MC-5209



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: SUR0000371376 OP-001

REPORT STATUS : Interim



Patient Name : **Mr Amin Motiwala** / Registered On : 14-Sep-2024 09:30 AM
 Lab ID : 409901115 Collected On : 14-Sep-2024 09:35 AM
 Gender/Age : Male / 37 Years DOB : 31-Aug-1987 Received On : 14-Sep-2024 09:50 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	16.0	g/dL	13.0 - 17.0
RBC COUNT	Electrical Impedance	5.71	mill/cmm	4.5 - 5.5
HCT	Calculated	49.2	%	40 - 50
MCV	Calculated based on the RBC histogram	86.1	fL	83 - 101
MCH	Calculated	28.0	pg	27 - 32
MCHC	Calculated	32.5	g/dL	31.5 - 34.5
RDW	Calculated	12.2	%	13.3 - 18.3

TOTAL LEUCOCYTE COUNT

Total WBC Count	Electrical Impedance	7590	cells/cmm	4000 - 10000
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DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)

NEUTROPHILS	Flow Cytometry	55	%	40 - 80
LYMPHOCYTES	Flow Cytometry	36	%	20 - 40
EOSINOPHILS	Flow Cytometry	5	%	1 - 6
MONOCYTES	Flow Cytometry	4	%	2 - 10
BASOPHIL	Flow Cytometry	0	%	0 - 2

PLATELET INDICES

PLATELET COUNT	Electrical Impedance	280000	/cmm	150000 - 410000
MPV	Calculated based on PLT Histogram	8.6	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 AgrawalM.B., D.C.P
Consulting Pathologist



Certificate No.: NC-5200



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Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
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BLOOD GROUP

(Tube agglutination: Forward & reverse)

ABO Type

"A"

RH Type

POSITIVE

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Ref. By : Health Check Up Shalby

Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
ESR 1st hour <i>Modified Westergren Method</i>	10	mm in 1 hour	0 - 15
HBA1C HbA1c - Glycated Haemoglobin <i>Boronate Affinity Assay</i>	5.6	%	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>	114	mg/dL	

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Lab ID : 409901115		Collected On : 14-Sep-2024 09:35 AM
Gender/Age : Male / 37 Years	DOB : 31-Aug-1987	Received On : 14-Sep-2024 09:53 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)	97	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)	99	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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Patient Name : Mr Amin Motiwala	/	Registered On : 14-Sep-2024 09:30 AM
Lab ID : 409901113		Collected On : 14-Sep-2024 09:35 AM
Gender/Age : Male / 37 Years	DOB : 31-Aug-1987	Received On : 14-Sep-2024 09:50 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>	175	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
SERUM TRIGLYCERIDE <i>Lipase/GK/GPO/POD</i>	112	mg/dL	Normal : <150 Borderline High : 150-199 High : 200-499 Very High : > 500
HDL CHOLESTEROL DIRECT <i>Phosphotungstic Acid/Mgc12 - Enzymatic</i>	39	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : >= 60
Non HDL Cholesterol <i>Calculated</i>	136	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
LDL Cholesterol <i>Calculated</i>	114	mg/dL	Optimal: <100 Near to above Optimal: 100 - 129 Borderline High: 130 - 159 High: 160 - 189 Very High: > 190
VLDL <i>Calculated</i>	22	mg/dL	6 - 38
LDL/dHDL <i>Calculated</i>	2.9		2.5 - 3.5
Chol/dHDL <i>Calculated</i>	4.5	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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DOB : 31-Aug-1987

Received On : 14-Sep-2024 09:50 AM

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>	157	ng/dL	87 - 178
Total T4 <i>Chemiluminescence immunoassay (CLIA)</i>	13.40	µg/dL	99% Reference Interval (µg/dL) 4.82 - 15.65
TSH <i>Chemiluminescence immunoassay (CLIA)</i>	2.180	µIU/mL	0.38 - 5.33

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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Gender/Age : Male / 37 Years

DOB : 31-Aug-1987

Received On : 14-Sep-2024 09:50 AM

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) <i>Urease, colorimetric</i>	14	mg/dL	9 - 20
UREA <i>Calculated</i>	30	mg/dL	19 - 43
Creatinine <i>Enzymatic - Creatinine amidohydrolase</i>	0.98	mg/dL	0.66 - 1.25
S. URIC ACID <i>Uricase/Peroxidase, Colorimetric</i>	6.5	mg/dL	3.5 - 8.5
Calcium <i>Arsenazo III dye</i>	10.3	mg/dL	8.4 - 10.2
Sodium <i>Direct Ion Selective Electrode</i>	144	mmol/L	137 - 145
S. POTASSIUM <i>Direct Ion Selective Electrode</i>	4.8	mmol/L	3.5 - 5.1
Chloride	104	mmol/L	98 - 107
Phosphorus (Not in NABL Scope) <i>Phosphomolybdate reduction (PMA Phenol)</i>	3.7	mg/dL	2.5 - 4.5

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Lab ID : 409901115

Collected On : 14-Sep-2024 09:35 AM

Gender/Age : Male / 37 Years

DOB : 31-Aug-1987

Received On : 14-Sep-2024 09:50 AM

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>	25	U/L	21 - 72
SGOT (AST) <i>Multi Point Rate with P-5-P</i>	26	U/L	17 - 59
Alkaline Phosphatase <i>PNPP, AMP Buffer</i>	151	U/L	20-50 yrs : 53 - 128 4-19 yr : 54 - 369 >=51 yr : 56 - 119
GGT <i>L-gamma-glutamyl-4-nitroanilide/glycylglycine Kinetic</i>	23	U/L	15 - 73
S. PROTEIN <i>Biuret (Alkaline cupric sulfate), End Point</i>	8.3	g/dL	6.3 - 8.2
Albumin <i>Bromocresol Green (BCG), Colorimetric</i>	4.9	g/dL	3.5 - 5.0
S. GLOBULIN <i>Calculated</i>	3.4	g/dL	2.3 - 3.6
A/G Ratio <i>Calculated</i>	1.4	Ratio	1.0 - 2.3
Bilirubin Total <i>Azobilirubin/Dyphylline/Diazonium Salt</i>	0.8	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>	0.7	mg/dL	Unconjugated bilirubin Adults: 0.0-1.1 Neonates: 0.6-10.5
Bilirubin Direct <i>Calculated</i>	0.1	mg/dL	Conjugated bilirubin and Delta bilirubin (Bilirubin covalently bound to albumin) 0.0-0.4

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Patient Name : Mr Amin Motiwala	/	Registered On : 14-Sep-2024 09:30 AM
Lab ID : 409901135		Collected On : 14-Sep-2024 09:35 AM
Gender/Age : Male, / 37 Years	DOB : 31-Aug-1987	Received On : 14-Sep-2024 09:50 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/peroxidase 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
Microscopic Examination			
Pus cells	4-5/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 Agrawal

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

Patient Name: AMIN MOTIWALA		UHID: SUR0000371376	
Age / Sex: 37 Yrs. / Male		Study:	USG Abdomen + Pelvis
Referred By:	Dr. at shalby Hospital	Date: 14.09.2024	

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 29 x 36 x 35 mm (Approx. vol- 20 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

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SHALBY LIMITED

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



Patient's Name: Amin Motiwala

UHID:371376

Age: 37 yrs / male

Date: 14/ 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: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

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Pre - op

Post - op

Health Check-up

Date : 11/11/17

Patient Reg. No. : _____

Patient Name : Amin Jafar Mohiwalal

Age / Sex : 87 / M

Address : Amkleshwar

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	: 765/6	
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 a well maintained.

hygienic setup using "autoclaved" instruments & "sterilized pouch" facility.

After knee replacement any treatment should be done under "Antibiotic Coverage"

Adv: Scaling

Crown / Bridge Replacement 765/6

Jadav

Dr. Darshini V. Shah
(Consultant Dental Surgeon)

DR. RUJUTA SHELAT
 Consultant Ophthalmologists
 Reg. No.: - G-48712

Name:- *Amin, Jabal Motiwala* Date:- *14/07/20*

Chief Complaints:- *Routine Eye check up*



Pain Assessment:-

Past History:-

Family History:-

Allergy:- *no drugs allergy*

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

General Examination:-

BP:- Pulse:- *66* Temp:-

Visual Acuity:- *6/6*
6/9P

NCT *16.2*
16.8

ON Examination

Ant. Segment

WMM

Systemic Examination:-

HT:- WT:-

PH Vision:- *6/6*

plane 6/6

-0.75 X 180 6/6

Both Eye

ME:		
TE:	2024/Sep/14 13:14	
	00292	
VITZ HNT-1p		
r 1.1.1		
ONO-PACHY model		
P	<R>	<L>
	15.2	15.7
	16.3	16.7
	17.0	17.9
G	16.2	16.8
nHg)		
P	<R>	<L>
	548	545
	548	552
	549	549
G	548.3	548.7
n)		
vitz Co., Ltd.		
2-31 428-9100		

Anterior Chamber

Rt. EYE

Lt. EYE

Media:-

Disc: -

Blood Vessel:-

Background:-

Macula:-

Diagnosis:-

Investigation:-

PA will come

① Refractive ERROR

Treatment:-

Glasses

Nutritional Assessment:-

Preventive Care & Counselling:-

Follow Up ON:-

2 months/eyes

Signature of the Consultant

Dr. Rishabh Shukla

ID: Name: Birth date: / / mmHg
Sex: M cm kg
Medication: 57 bpm
Symptoms: 150 ms
History: 112 ms
Heart rate: 426/ 420 ms
PR int: 37/ 57/ 28 °
QRS/T axis: 1.60/ 0.57 mV
V5/SV1 amp: 2.17 mV

Amin Iqbal
Motiwala

Unconfirmed Report
Reviewed by:

WZ

