

Hinjewadi, Pune-411057

Full Address : Hinjewadi Rajiv Gandhi Infotech Park,,

Contacts: [9827066482] . drjyshah@gmail.com

Timing: Mon to Friday: 4:00 - 7:00 P.M

Patient's Phone Number: 9860111505

Sex : Male Age : 28 Years Weight : 57.6 kgs

## DR. JAVED SHAH

Degree : MBBS, MD (Gen Medicine)

Ext Website

Date/Time: 16/03/2019,05:52:52 pm

Prescription Number : 1

Patient's MRN: H00000048167

Patient's Address : SONAI NAGAR, KESHAV NAGAR,

MUNDHWA PUNE.

CONSULTATION DETAILS

Patient has visited for

**ASYM** 

**General Examination** 

BMI : 20.17 kg/m2 | Weight : 57.6 kgs | Height : 169 cm | Pain Score : 1 /10 | RR : 18 BPM | BP (Sys/Dia) : 118/

62 mmHg | Pulse : 80 bpm | Temp : 98 F

**Investigation Review Notes** 

HB 11.80.

**Diagnosis** 

health checkup

PATIENT INSTRUCTIONS

Recommendation

DIET PLANNING | REGULAR EXERCISE

Follow up on

follow up in medicine opd sos



Dr. Javed Shah

MBBS, MD (Gen Medicine)

Consultant

Physician

2016/09/3926



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# **DEPARTMENT OF BIOCHEMISTRY**

**Patient Name** 

Bill No/ UHID No :OH011944 / H00000048167

**Received Date** 

:16-Mar-2019 09:35 am

Lab No/Result No: 190300975 / RES113738

Referred By

:Dr. HOSPITAL CASE

Age /Gender :28 Y(s)/Male

Report Date

:16-Mar-201912:02 pm

**Specimen** 

:SERUM

Investigation	Result	Reference Range	Method GOD-POD	
GLUCOSE (FASTING)	: 88.0	Normal: < 100.0 mg/dL Prediabetic: 100 - 125		

mg/dL

Diabetic: >= 126 mg/dL

REFERENCE: ADA 2015 GUIDELINES

GLUCOSE (POST PRANDIAL) : 101 Normal

: < 140 mg/dl GOD-POD

Prediabetic: 140 - 199

mg/dl

Diabetic : >= 200 mg/dl

ADA 2015 guidelines

CREATININE	: 0.8	0.6 - 1.3 mg/dL	Enzymatic
URIC ACID	: 4.9	3.5-7.2 mg/dL	Uricase
ALANINE TRANSAMINASE	<b>:</b> 25.0	10 - 40 U/L	Kinetic
ASPARTATE TRANSAMINASE	: 19.0	10.0 - 40.0 U/L	Kinetic
GAMMA-GT (GGT)	: 12.0	7.0 - 50.0 U/L	Kinetic
LIPID PROFILE			
CHOLESTEROL	: 116.0	130.0 - 220.0 mg/dL	Enzymatic
TRIGLYCERIDES	: 71.0	35.0 - 180.0 mg/dL	Enzymatic
HDL CHOLESTEROL	: 41.0	35 - 65 mg/dL	Enzymatic
LDL CHOLESTEROL	: 61.0	10.0 - 130.0 mg/dL	Calculated
VLDL CHOLESTEROL	: 14.0	5.0 - 36.0 mg/dL	Calculated
CHOL/HDL RATIO	: 2.9	2.0 - 6.2	Calculated

ATP III NCEP GUIDELINES FOR INTERPRETATION OF LIPID PROFILE

PARAMETER	DESIRABLE	BORDERLINE	REQUIRES TREATMENT		
Total Cholesterol HDL Cholesterol	Below 200 Above 60	200 - 240 40 - 59	Above 240 Below 40		
LDL Cholesterol\tab	Below 130	130-160	Above 160		

Note: This test is performed on automated BIO CHEMISTRY analyzer - Vitros250

\*\*\* End Of Report \*\*\*

Verified By

ANAND

NOTE:

'Clinically correlate, Kindly discuss if necessary.

\* This report relates only to the item received.

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Dr. SAYALI DESHMUKH **Consultant Pathologist** 

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Printed On: 17-Mar-2019 07:15:19 AM System Name: RUBY



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# **DEPARTMENT OF CLINICAL PATHOLOGY**

**Patient Name** 

Age /Gender :28 Y(s)/Male

Bill No/ UHID No :OH011944 / H00000048167 **Received Date** 

Report Date :16-Mar-2019 1:25 pm

:16-Mar-2019 09:35 am

Specimen :URINE

Lab No/Result No:190300975 / RES113829

Result

Sec/Cup/Rep : No. 0088

Referred By

:Dr. HOSPITAL CASE

**Investigation** 

Reference Range

**URINE ROUTINE** 

PHYSICAL EXAMINATION

: Pale Yellow COLOUR

**APPEARANCE** 

**CHEMICAL TEST** pH

: 5.5

: Clear

5.0-7.0

SPECIFIC GRAVITY ALBUMIN

: 1.015 : Absent

1.015-1.030

**SUGAR** KETONE BODIES : Absent : Absent

Absent Absent Absent

**BILE PIGMENTS UROBILINOGEN** 

: Absent : Normal Absent Normal

**NITRITES** 

: Absent : Absent

Absent Absent

LEUCOCYTES ESTERASE MICROSCOPIC TEST

PUS CELLS.

: 1-2

0-5 /hpf

RED BLOOD CELLS. EPITHELIAL CELLS.

: Absent : 1-2

0 - 2 /hpf 0 - 5 /hpf

**BACTERIA** CAST

: Absent : Absent Absent

YEAST CELLS

: Absent

Absent Absent

**CRYSTALS OTHERS** 

: Absent : Absent Absent

\*\*\* End Of Report \*\*\*

Absent Note: This test is performed on automated CLINICAL PATHOLOGY analyzer - URI PLUS200

Verified By

ASM

NOTE:

Clinically correlate, Kindly discuss if necessary.

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Dr. SAYALI DESHMUKH **Consultant Pathologist** 

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Age /Gender :28 Y(s)/Male

# **DEPARTMENT OF HAEMATOLOGY**

Patient Name

 Bill No/ UHID No
 :OH011944 / H00000048167
 Report Date
 :16-Mar-201910:37 am

 Received Date
 :16-Mar-2019 09:35 am
 Specimen
 :EDTA WHOLE BLOOD

**Lab No/Result No:**190300975 / RES113667

Referred By :Dr. HOSPITAL CASE

Investigation	Result	Reference Range	Method
HAEMOGRAM REPORT			
W.B.C.COUNT	: 4500	4000 - 11000 /ul	Coulter Principle
<b>Differential Count</b>			
NEUTROPHILS	<b>:</b> 52.8	40 - 75 %	Derived from WBC Histogram
LYMPHOCYTES	: 30.0	20 - 40 %	
MONOCYTES	: 10.2	2-10 %	
EOSINOPHILS	: 7.0	1.0 - 6.0 %	
BASOPHILS	: 0.0	0.0 - 1.0 %	
ABSOLUTE NEUTROPHIL COUNT	: 2.37	2 - 7 x103cells/ul	
ABSOLUTE LYMPHOCYTE COUNT	: 1.35	1 - 3 x10 <sup>3</sup> cells/ul	
ABSOLUTE MONOCYTE COUNT	: 0.46	0.2-1.0 x103cells/ul	
ABSOLUTE EOSINOPHIL COUNT	: 0.31	0.02-0.5 x103cells/ul	
ABSOLUTE BASOPHIL COUNT	: 0.00	0.02-0.1 x103cells/ul	
R.B.C COUNT	: 4.25	4.5 - 6.5 million/ul	Coulter Principle
HAEMOGLOBIN	: 11.8	13 - 17 g/dl	Cynmethhaemoglobin, Photometry
HAEMATOCRIT	; 35.9	40-50 %	Calculated Parameter
MCV	: 84	83-99 fL	Coulter Principle
MCH	: 27.7	27 - 32 pg	Calculated parameter
MCHC	: 32.8	31.5 - 34.5 g/dL	Calculated Parameter
RDW	; 16.1	11.6-14.0 %	Calculated from RBC Histogram
PLATELET COUNT	: 391	150 - 450 ×10³/ul	Coulter principle
MPV	: 7.7	7.8-11 fl	Coulter Principle
WBC MORPHOLOGY	: Mild eosinophilia		

Note: This test is performed on automated HAEMATOLOGY analyzer - Abxpentra80XL

\*\*\* End Of Report \*\*\*

Verified By

SAINATH

NOTE:

\* Clinically correlate, Kindly discuss if necessary.

\* This report relates only to the item received.

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Dr. APARNA S.MANDVEKAR, MBBS MD DNB(PATHOLOGY) Consultant Pathologist

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# **DEPARTMENT OF HAEMATOLOGY**

**Patient Name** 

Age /Gender :28 Y(s)/Male

Bill No/ UHID No :OH011944 / H00000048167

Report Date

:16-Mar-2019 5:33 pm

**Received Date** 

:16-Mar-2019 09:35 am

Specimen

: WHOLE BLOOD

Lab No/Result No:190300975 / RES113978

Referred By

:Dr. HOSPITAL CASE

Reference Range

<u>Method</u>

**Investigation** ESR at 1 Hour

Result : 10.0

0 - 15 mm/hr

Modified Westergren Method

INTERPRETATION:

ESR is a screening test to detect presence of systemic disease; however a normal result does not rule out a systemic disease.

ESR is also used to monitor course of disease or response to therapy if initially elevated.

\*\*\* End Of Report \*\*\*

Verified By

ANAND

NOTE:

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\* This report relates only to the item received.

Dr. SAYALI DESHMUKH **Consultant Pathologist** 

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PS-35-1023



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# **DEPARTMENT OF SEROLOGY**

**Patient Name** 

Bill No/ UHID No :OH011944 / H00000048167

**Received Date** 

:16-Mar-2019 09:35 am

Lab No/Result No: 190300975 / RES113966

Referred By

:Dr. HOSPITAL CASE

Age / Gender : 28 Y(s)/Male

Report Date

:16-Mar-2019 5:06 pm

Specimen

**Method Investigation** Result

**DRUG OF ABUSE - (PANEL OF 6)** 

URINE CREATININE. : 68.1 Normal human urine

: >20 mg/dL ?Diluted urine sample

6-20 mg/dL

?Substituted urine sample :

< 6 mg/dL

: Negative

**NEGATIVE NEGATIVE**  Greater than 1000 ng/mL Greater than 200 ng/mL

**BARBITURATE** BENZODIAZEPINE COCAINE

**AMPHETAMINE** 

: Negative : Negative : Negative

**NEGATIVE NEGATIVE** 

Greater than 300 ng/mL Greater than 300 ng/mL Greater than 300 ng/mL

MORPHINE/OPIATES TCA - Tricuclic Antidepressants

: Negative : Negative NEGATIVE **NEGATIVE** 

Greater than 1000

Urine Drugs: Rapid Immunochromatography

Specificity

Presence of interfering substances may lead to decreased specificity.

\*\*\* End Of Report \*\*\*

\*\*\* End Of Report \*\*\*

Verified By

ANAND

NOTE:

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\* This report relates only to the item received.

Printed By: FIRST FLOOR

Dr. SAYALI DESHMUKH **Consultant Pathologist** 

Technuly

Printed On: 17-Mar-2019 07:15:19 AM System Name: RUBY



Name:

Age:

028 Years

Gender:

M

PID:

H00000048167

OPD:

Exam:

Accession: 28133100107 CHEST X RAY

Exam Date: 16-Mar-2019

Physician: HOSPITAL CASE^^^

Health Check

# Radiograph Chest PA View:

Both lung fields normal.

Both costo-phrenic angles are clear.

Cardiac silhouette and aortic knuckle are normal.

Both hilar shadows and the diaphragmatic contours are normal.

Thoracic soft tissues and the rib cage normal.

Impression: No significant abnormality noted.

DR NILOFER SHAH

MD RADIOLOGY, SR CONSULTANT RADIOLOGIST

REG NO 68923/1991

Date: 16-Mar-2019 10:49:02



			AUDI	OGRAM				
Patient Name:					Sex:		\ge:	
Complaint	:	Ref: O	H011944 - OPH00011327.			Date:	16.03.0	2019.
Occupatio	n:	20.4./1/	-NH - 019-H00000048167		D.O.B.:			
Registration	n No.:				Refe	rence:		
Test	Right Ear (Red)	Left Ear (Blue)	VALUES 125	250 500	750 1k 1.5k	2k 3k 4k	6k 8k	10k HZ
AIR	0-0	X-X	0	Xa . ,	NORMAL 1	× ×		
AIR OPP EAR MASKED	$\triangle$ - $\triangle$	0-0	20		SLIGHT	20	•	
NO RESPONSE	Ō	Ϋ́	30		MILD			
BONE	<	>	50		MODERATE			
BONE OPP EAR MASKED	]	]	70	N	ODERATELY SEVE	RE		
Test	Right Ea (Red)	r Left Ear (Blue)	80		SEVERE			
RINNE	-tw	e tue	100		PROFOUND			
WEBER	(	$\rightarrow$	110					
BING			120	HEARING TH	RESHOLD L	EVEL IN dBH	L	
Daignosis:	B	1	normal	lien	ing	Sersil	-27.	
Test Result:	Rel	iable	Fair Poor				18	,
SRT:				4	_	Audiologis	St Signature	ıre
SDS:						, tudiologic	or Orginati	

3/16/2019



# **OUT-PATIENT RECORD**

Patient Name

Hospital No.

Age/Sex

: 28 Years / Male

Date/Time

: 16/03/2019,11:55:30 am

Consultant Name

: Dr. Sapna Kotwaliwale

Episode No

: PAN190376946

HISTORY, EXAMINATION, INVESTIGATIONS, TREATMENT AND PROGRESS

#### **CONSULTATION DETAILS**

## **General Examination**

# **Physical Examination**

EYE:

Vision - 676 (Batheyes), 6/9 (Both eyes) Intraocular pressure - Normal (Both eyes)

Cornea - clear, bright, smooth surface (Both eyes)

Colour Vision - Normal

#### **Diagnosis**

Preventive Health Check

## PATIENT INSTRUCTIONS

Follow Up on

REFRACTION mon Whather

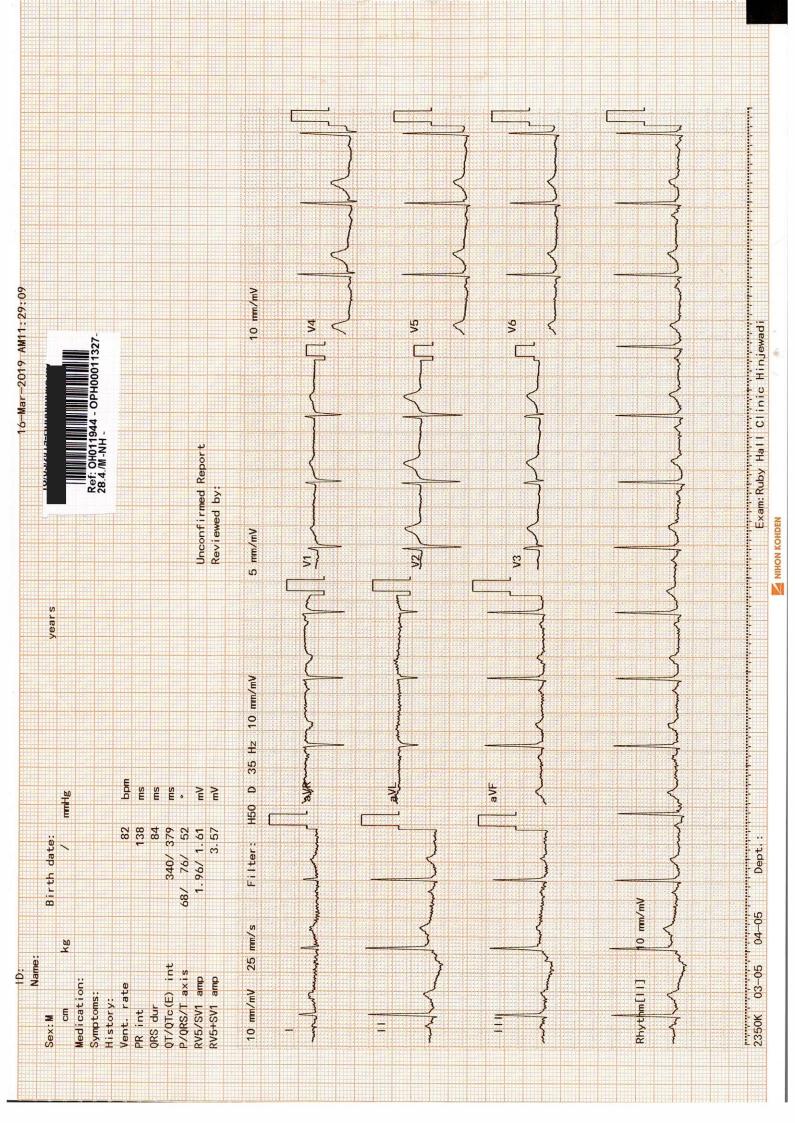
Dr. Sapna Kotwaliwale

MBBS, DOMS

Consultant

Ophthalmology

88564



Ref: OH011944 - OPH00011327-28.4/M-NH -Name :-

Date:-

Age / Sex :-

HR Rate :-

Rhythm :-

Voltage :-

Axis:-

P Wave :-

PR Interval :-

QRS :-

Others :-

ST:-

Final Impression :-

2. Clinical Co-relation is needed.

Signature Car<del>diologis</del>t / Physician

Note: - 1. This impression is based on ECG.

3. Please Take a Photocopy of this ECG.