



Dr. SHARMA VIDHE CONSULTANT, GENERAL MEDICINE MD MED 2018

Medical Registration No: 2022/05/1259

Hospital: RUBY HALL CLINIC - (HINJAWADI)

Address : Rajeev Gandhi Infotech Park, MIDC Phase No 1, Plot No. P-

33, Hinjawadi 411057, Pune, Maharashtra, India

Phone: 2066999999

Email: info@rubyhall.com

Patient ; Mr. SHIVANK JAT, 21 Yrs, Male

UHID: Pl0000072788 | Mobile: 7415572119 Consult Date / Time : Mon, 21 Jul 2025 | 3:00 PM Address: HINJAWADI, PUNE, Pune, Maharashtra, India

Height 170 cm Weight 72 kg BMI 24.9 kg/m2

. Temperature

re

BP

125/86 mmHg

SPO2

Pulse Rate 87 bpm

CHIEF COMPLAINTS & HPI

SEEN C/O NUMBNESS OVER RIGHT SIDE OF BODY WITH HEADACEH AND VOMITTING SINCE 1 HOUR

NO PMH NODA

PHYSICAL EXAMINATION

PT CONCIOUS ALERT

Instruction
REFER TO ER
NEUROLKOGIST OPINION
INJ PAN EMSET URGENT

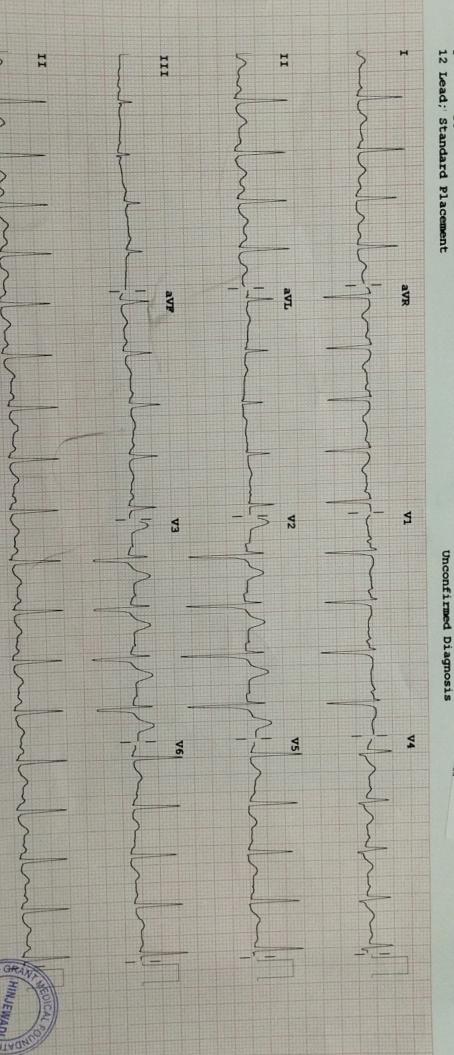
Sharry

Dr. SHARMA VIDHE GENERAL MEDICINE VIDHESHARMA@GMAIL.COM

7/21/2025 2:35:45 PM

Ruby Hall Clinic, Hinjawadi

QRS --AXIS--135 92 333 449 109 Baseline wander in lead(s) V3, V6 Sinus tachycardia..... Age not entered, assumed to be 50 years old for purpose of ECG interpretation - OTHERWISE NORMAL ECG -.....rate> 99 BP-140/90 mm. fy P-108 6/m



Device:

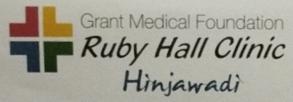
Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 60~ 0.15-100 Hz

100B



Rajeev Gandhi Infotech Park, MIDC, Phase No. 1, Plot No P-33, Hinjawadi, Pune - 411057.

• Ph: 020 66999999 • Email : hinjawadi@rubyhall.com • 24 hrs Helpline - 7757005773 • Website : www.rubyhall.com, www.hinjawadi.rubyhall.com

Patient Name : Mr.SHIVANK JAT

Age / Gender : 21Y(s) 6M(s) 20D(s)/Male

Lab Ref No/UHID : R03260PCS19254/PI0000072788

Lab No/Result No : 2500365085/2508514

Referred By Dr. : DR. EMERGENCY MEDICINE TEA

Registration Loc : RHC Hinjawadi

: 21-07-2025 03:33 PM **Bill Date**

: 21-07-2025 03:58 PM **Collected Date**

Report Date : 21-07-2025 04:28 PM

: 21-07-2025 06:09 PM

Specimen : SERUM

Release Date

Processing Loc : RHC Hinjawadi



DEPARTMENT OF LABORATORY MEDICINE-BIOCH

Investigation	Result	Units	Riological Potorona Tata	
CREATININE Creatinine Method: Enzymatic	: 0.6	mg/dL	Biological Reference Interval 0.72-1.18	

Verified By **DM25**

*** End Of The Report ***

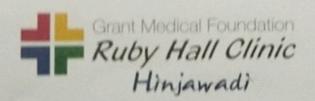
Dr.Amruta Ingale **Associate Consultant**

NOTE:

* Kindly Corelate clinically & discsuss if necessary.

* Results pertain to the specimen submitted.

* For 'Terms and Conditions of Reporting', kindly visit our website : www.Rubyhall.com



Dr. PATIL MAYURI CONSULTANT, OPTHALMOLOGY MBBS,MS (OPHTHALMOLOGY) FELLOWSHIP IN CATARACT **SURGERY (PHACO)**

Medical Registration No : 2015/05/2280

Hospital :RUBY HALL CLINIC - (HINJAWADI)

Address : Rajeev Gandhi Infotech Park, MIDC Phase No 1, Plot No, P-

33, Hinjawadi 411057, Pune, Maharashtra, India

Phone: 2066999999

Email: info@rubyhall.com

Patient : Mr. SHIVANK JAT, 21 Yrs, Male UHID: PI0000072788 | Mobile: 7415572119

Consult Date / Time : Tue, 22 Jul 2025 | 1:42 PM

Address: HINJAWADI, PUNE, Pune, Maharashtra, India

Prescription Updated On: Tue, 22 Jul 2025 | 1:43 PM

Height	Weight	BMI	Temperature	BP
170 cm	71 kg	24.6 kg/m2	97.7 F	128/73 mmHg

SPO2	Heart Rate	BSA		
98 %	67 bpm	1.8 m2		

CHIEF COMPLAINTS & HPI

Came for fundoscopy as advised by Dr Vikram sir h/o DOV, vomiting

REFRACTION	LEFT						
	D 6/6		N		РН		
UCVA							
	SPH	CYL	AXIS	DVA	ADD	NVA	
PGP							
MR							
CYCLO							
RE DCT							
AR							

		RIC	SHT			
D		N		PH		
6	/6					
SPH	CYL	AXIS	DVA	ADD	NVA	

SLIT LAMP EXAMINATION

Pupil Left: Nsrl Right: Nsrl

RETINAL EVALUATION

Optic Disk

Vitreous Left: Normal Right: Normal

Left: Slight blurry margins Right: Slight blurry margins

Macula Left: Normal Right: Normal

Periphery Left: Normal Right: Normal





Dr. AGLAVE VIKRAM CONSULTANT, NEUROLOGY MBBS, MD Medicine, DM Neurology

Medical Registration No: 2007/09/3344

Hospital : RUBY HALL CLINIC - (HINJAWADI)

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33, Hinjawadi 411057, Pune, Maharashtra, India

Phone: 2066999999 Email: info@rubyhall.com

Patient: Mr. SHIVANK JAT, 21 Yrs, Male UHID: PI0000072788 | Mobile: 7415572119

Consult Date / Time : Tue, 22 Jul 2025 | 12:28 PM

Address: HINJAWADI, PUNE, Pune, Maharashtra, India

CHIEF COMPLAINTS & HPI

Visual followed by unilateral Right sided sensory and language aura, 3-4 vomitings that lasted 30-45 min followed by mild to mod headache yday afternoon,

he had skipped Breakfast and later had his lunch after which symptoms started

lifestyle disturbed since last 1-2 weeks delayed sleep cycle, irregular meals, increased screentime

no past h/o mig/headache/aura/seizure

urgent ECG, CT Brain with angio-veno Normal bsl normal bp was 125/86

creat 0.6

PHYSICAL EXAMINATION

No fnd eom full, pupils BE RTL disc margins slightly blurred no cerebeblar signs/cranial nerve deifciits no neck stiffness

Instructions

2dEcho 🖈

TSH

HBA1c

CBC

Fasting Sugar Lipid Profile

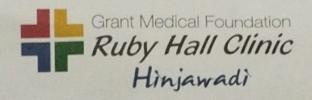
Homocysteine

Ophthalm ref : Fundoscopy 🛊

tab Sibelium 5 mg HS AT BEDTIME 0-0-1 for 20 days tab Naxdom 500 mg sos

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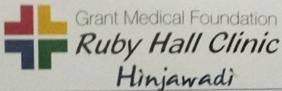




LIFESTYLE AS ADVSIED

Dr. AGLAVE VIKRAM NEUROLOGY

AVBHAS@GMAIL.COM



Name: SHIVANK JAT Age & Sex: 21 Years /M

CT SCAN OF BRAIN ANGIO & VENO

Physician: Dr. Emergency Medicine Team

Study Date: Accession:

OP

21-Jul-2025 R032068652

PID: P10000072788

CT SCAN OF BRAIN (ANGIOGRAPHY +VENOGRAPHY)

Clinical brief: C/o One episode of weakness in right UL/ LL

CT BRAIN:

The supratentorial brain parenchyma shows normal morphology. The gyral /sulcal pattern is normal. The deep cerebral structures including basal ganglia, thalami, internal capsule is normal. The CT attenuation of various parts is normal for the region. There is no evidence of any obvious intra cranial space occupying lesion or other focal lesion.

The lateral, third and fourth ventricles are of normal size, shape and position.

The supratentorial and basal cisterns and extracerebral CSF spaces are normal.

There is no mass effect, shift of midline structures or cerebral edema.

Posterior fossa contents including cerebellum and brainstem structures appear normal.

CT ANGIOGRAPHY:

Bilateral CCA, ECA and ICA appear normal in the neck.

Bilateral ICA is normal in the intracranial portion.

Left MCA and its branches are normal.

Left ACA is normal.

Right MCA and its branches are normal.

Right ACA is normal.

ACOM is normal.

Both the vertebral arteries and PCAs are normal.

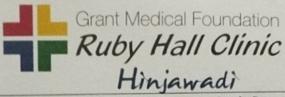
CT VENOGRAPHY:

The superior sagittal, straight, left transverse and left sigmoid sinuses display normal flow.

The right sigmoid and transverse sinuses are hypoplastic.

There is no evidence of sinus thrombosis.

The internal cerebral veins, basal vein of Rosenthal and proximal jugular veins are normal. Page 1 (2)



Name: SHIVANK JAT Age & Sex: 21 Years /M

Exam: CT SCAN OF BRAIN ANGIO & VENO
Physician: Dr. Emergency Medicine Team

Study Date: Accession: 21-Jul-2025 R032068652 PI0000072788

PID: OP

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IMPRESSION:

- No evidence of haemorrhage in the brain parenchyma. No obvious hypodensity in the brain parenchyma to suggest acute infarction. However, given the clincial scenario MRI brain study is suggested to rule out hyperacute infarction.
- CT angiography reveals no obvious abnormality.
- CT venography reveals no obvious abnormality.

Suggest: Clinical correlation and SOS further evaluation.

DR. GANESH SHINDE

CONSULTANT RADIOLOGIST

21-Jul-2025 06:31:52 PM

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