



HEALTH CHECK-UP SUMMARY

Race Course Road, Vadodara

Name: JAGDISH R RABARI	
SH No: 300297	Date:26/10/2024
Age: 32	Gender: MALE

ASSESSMENT:

- o UNDER WEIGHT(BMI:18.22)
- o K/C/O : ANTISEIZURE MEDICATIONS & LEFT CERVICAL BRACHIALGEA
- o C/O:- WEIGHTLOSS SINCE LAST 3-4 MONTHS , REDUCED HEARING , YELLOW PRODUCTIVE COUGH , BACKPAIN , OCCASIONAL CONSTIPATION
- o P/H/O: SEIZURES (1ST EPISODE ON 5TH JAN , REGULAR MEDICATION SINCE THEN) , RENAL STONE , HEMATURIA AT INCIDENCE OF RENAL STONE
- o P/H/O HOSPITALIZATION : SEIZURE (2024)(6 DAYS)
- o F/H/O: HYPERTESNION (MOTHER) , DIABETES (MOTHER) , STROKE (FATHER)
- o ENT ASSESSMENT: B/L WAX PRESENT
- o LOW VLDL(11.80)
- o ECG: RIGHT AXIS

ADVISED:

- o PLENTY OF LIQUIDS
- o AVOID OUT SIDE FOOD AND WATER
- o REGULAR EXERCISE
- o AVOID NOISE POLLUTION
- o ENT ADVICE: FOLLOW ADVICE
- o ORTHOPEDIC CONSULTATION
- o PHYSICIAN CONSULTATION

Sterling Addlife India Limited
Unit-Sterling Hospital Vadodara
Race Course Circle, (West)
VADODARA - 390 007.

DR.JAY S PANDIT

Prevention & Rehabilitation Dept

Hospital Address: Sterling Hospitals, Race Course Road, Opp. Inox Cinema Hari Nagar, Circle West, Vadodara – 390007, Gujarat, India | Call: 0265-6144111, 0265-2354455, 98 98 98 78 78
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Sterling Hospital, Sterling Hospital Road, Memnagar, Ahmedabad-380052, Gujarat, India



left Cervical Brachialgia



**HEALTH CHECK UP
MEDICAL EXAMINATION**

Name : Jagdish Rabari Employee ID : _____
 Company Name : _____ Age : 32 Sex : M/F
 Height : 184 cms. Weight : 61.7 Kgs BMI : 18.22 Blood Group : _____
 Name of HO / Registrar taking History : Dr - Jay - S - Pandit

Allergies : None Yes (If Yes, describe)

Drugs/Food/Latex/Dyes/Contrast/Other	Reaction
1.	(
2.	
3.	

Chief Complaints : KT10 - cervical spondylolysis
with loss since 6 months (last 3-4 months)
PH10 - seizure 5th Jan (2020) / Stipirod

Physical Examination :

Vital Signs :
 Temp 98 ° F SPO₂ 98 Pulse : 88 /min R/R : 18 /min B.P. : 100/70 mm Hg

Past History :

If Hypertension, since	If Diabetes, since
On Medication 1)	On Medication 1)
2)	2)
3)	3)
If Ischaemic Heart Disease since	Under Treatment Dr.
On Medication 1)	If Tuberculosis, When
2)	Any Other P/H <u>partial seizure</u>
3)	Any Other Medication <u>Brevepit</u>
Under Treatment of Dr.	Any Other Medication
Any Intervention done	P/H of Hospitalization
P/H of Operation	Diagnosis : <u>stroke</u>
Diagnosis :	Year : <u>2020</u>
Name of Operation :	Duration : <u>6 days</u>
Year of Operation :	Blood Transfusion History : Yes / No <input checked="" type="checkbox"/>
Others	Year :

Family History : (Specify : F-Father, M-Mother, B-Brother, S-Sister)

(Pl. Circle whichever is applicable e.g. If Father has h/o 10 yrs then, Yes / No F/10 yrs)

Hypertension	Yes/No <u>m</u>	Asthma	Yes/No <u>o</u>
Heart Disease	Yes/No <u>o</u>	Stroke	Yes/No <u>F-father</u>
Diabetes	Yes/No <u>m</u>	Arthritis/Gout	Yes/No <u>o</u>
Tuberculosis	Yes/No <u>o</u>	Cancer	Yes/No <u>o</u>
Epilepsy	Yes/No <u>o</u>	Other Chronic disease	Yes/No <u>o</u>

Personal History :

Diet	<u>veg</u>	Smoking	Yes/No <u>o</u>	since...../..... per day
Appetite	<u>3 NAD</u>	Alcohol	Yes/No <u>o</u>	since...../..... (freq.)
Sleep		Drugs	Yes/No <u>o</u>	since...../..... (freq.)
Micturition		Tobacco	Yes/No <u>o</u>	since...../..... (freq.)
Bowel Habits		Any other habit		

FOR FEMALES :

 Obstetric History : L.D.....
 Abortion :
 Others :

General Examination :
 Anemia
 Cyanosis
 Jaundice
 Generalized Lymphadenopathy
 Pedal oedema

General Examination :

Head : NSF

Injuries (Specify if any) :

Eyes : NSF

- Vision : Normal Blurred Double Colour Blind
- Pupils : Normal Abnormal
- Other : Inflammation Pain Itching Discharge No complaint

Remarks (if any) :

Ears : NSF

- Deaf Yes No • Pain Yes No • Discharge Yes No
- Dizziness Yes No

Nose : NSF

- Nosebleed Yes No • Congestion Yes No • Sinus problem Yes No

Mouth : NSF

- Lesion Yes No
- Dental Hygiene Good Poor Bleeding gums Yes No
- Sense of taste Yes No

Reduced Hearing

Throat/Neck: NSF

- Swollen glands Yes No
- Stiffness Yes No
- Dysphagia Yes No

SYSTEMIC EXAMINATION

Neurological : NSF

- Headache Yes No
- Syncope Yes No
- Cooperative Yes No
- Suicidal attempt Yes No
- Oriented Yes No
- Reaction: Brisk Sluggish No response
- LOC : Alert Confused Sedated
- Speech : Clear Slurred
- Memory changes Yes No
- Seizures Yes No
- Anxiety Yes No
- Any psychiatric illness No
- Dizziness Yes No
- Paralysis Yes No if yes R L
- Depression Yes No
- if disoriented, to Person Place Time

Respiratory : NSF

- Lung sounds : ad E B E clear
- Dyspnoea : None With activity At rest Lying down Retractions
- Cough : None Non-productive Productive - colour yellow
- Hemoptysis: Yes No
- Night Sweats : Yes No
- Cyanosis : Yes No Where

Cardiovascular : NSF

- Chest discomfort Yes No
- Oedema Yes No Location : Pitting Non-pitting

Extremities-Musculoskeletal : NSF

- Skin : Warm Cool Dry Firm Flaccid Colour
- Extremities : Tingling Yes No • Weakness Yes No Deformity Yes No
- Joints : Pain Yes No • Stiffness Yes No
- Uses : Walker Wheelchair None (Back pain)

Gastrointestinal : NSF

- Appetite Good Poor
- Distension Yes No
- Pain Yes No
- Colostomy Yes No
- Nausea Yes No
- Heartburn Yes No
- Rectal Bleeding Yes No
- Ileostomy Yes No
- Vomiting Yes No
- Flatus Yes No

Bowel

- Diarrhoea Constipation Incontinence Blood in stool None
- Pain Yes No Place Hemorrhoids Yes No
- Frequency of stool Hard day
- Interventions : None • Laxatives Yes No Type Frequency

Genitorurinary : NSF

 Colour of Urine white. Frequency 3 time/day

 Pain Yes No Burning Yes No Itching Yes No

 Urgency Yes No Incontinence Yes No

 Nocturia Yes No Urostomy Yes No

 History of calculi Yes No History of UTI Yes No

 Foley's Catheter Yes No Date of Insertion _____

Handwritten notes:
 P/H/O - Hematuria on stool.

Reproductive : NA NSF

LMP _____ Regular / Irregular _____

 Dysmenorrhea Yes No Amenorrhea Yes No if yes, Duration _____

 Menopausal Yes No if yes, Duration _____

 Vaginal discharge Yes No Itching Yes No

Breasts NA NSF

 Breast Feeding Yes No Lumps Yes No

Positive Finding & Advice

.....

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Unit-Sterling Hospital Vadodara

Racecourse Circle, (West)

VADODARA - 390 007.

Handwritten signature

Sign and Stamp of Medical Officer

Sterling Hospital
 Racecourse Road

EMERGENCY HELPLINE

 992 444 9972
 0265 - 61 44 111

Sterling Hospital
 Bhayli

EMERGENCY HELPLINE

 908 1000 557
 0265 - 61 23 333



OPHTHALMIC CHECK-UP

SIGNIFICANT HISTORY:

PAST HISTORY:

Refractive Error:

Any Surgery:

Color Blind:

Diabetes:

Hypertension:

Any Treatment:

EXAMINATION OF EYES:

Right Eye:

Left Eye:

Distant Vision without Glasses:

Distant Vision with Glasses:

Near Vision without Glasses:

Near Vision with Glasses:

Intraocular Pressure:

Anterior Segment:

Fundus:

PRESCRIPTION OF GLASSES:

	RIGHT			LEFT		
	Sphere	Cylinder	Axis	Sphere	Cylinder	Axis
Distant	-	-	-	-	-	---
Near	-	--	-	-	--	--

Type of glass:

ADVICE:

DR MAYA PATEL
(OPHTHALMOLOGIST)

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Jagdish



Race Course Road, Vadodara

EAR, NOSE & THROAT CHECK-UP

COMPLAINTS:

do perane kung

EXAMINATION OF EARS:

Local Examination:

Tympanic Membrane:

FDL (R) / S/L max (R)

EXAMINATION OF NOSE:

Local Examination:

info

THROAT & LARYNX:

info

LARYNGOSCOPIC EXAMINATION:

info

Adh
Solisux (ndrop)
303030

Sterling Addlife India Limited
Sterling Hospital, Vadodara
Race Course Circle, (West)
DR ANAVNIT MAKWANA

ENT SURGEON

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Passport No :

LABORATORY TEST REPORT


Patient Information		Sample Information		Location Information	
Name	: Mr. Jagdishbhai R Rabari	Lab Id	: 102407502645	Pt. Type	: Sterling Hospital Vadodara Health Checkup
Sex/Age	: Male / 32 Y 24-Feb-1992	Registration on	: 26-Oct-2024 10:44	Location	: Main BNo./
Ref. Id	: 300297 / 2815905	Collected at	: SAWPL	Approved on	: 26-Oct-2024 14:33 Status : Revised
Ref. By	: Dr. RMO . STERLING...	Collected on	: 26-Oct-2024 11:20	Printed On	: 29-Oct-2024 13:36
		Sample Type	: EDTA blood	Process At	: 75 - Sterling Hospital, Race course (Vadoda)

MEDI WHEEL FULL BODY ANNUAL PLUS
Complete Blood Count

Test	Method	Result	Unit	Biological Ref. Interval
Hemoglobin	Colorimetric	13.9	g/dL	13.0 - 16.5
RBC Count	Electrical impedance	4.74	million/cmm	4.5 - 5.5
Hematocrit	Calculated	42.3	%	40 - 49
MCV	Derived	89.2	fL	83 - 101
MCH	Calculated	29.3	pg	27.1 - 32.5
MCHC	Calculated	32.8	g/dL	32.5 - 36.7
RDW CV	Calculated	12.60	%	11.6 - 14

Total WBC and Differential Count

WBC count	Method	Result	Unit	Biological Ref. Interval
WBC count	SF Cube cell analysis	5000	/cmm	4000 - 10000

Differential Count	Method	Result	Unit	Biological Ref. Interval	Absolute Count	Unit	Biological Ref. Interval
Neutrophils	Microscopic	68	%	40 - 80	3400	/cmm	2000 - 6700
Lymphocytes	Microscopic	25	%	20 - 40	1250	/cmm	1000 - 3000
Eosinophils	Microscopic	02	%	1 - 6	100	/cmm	20 - 500
Monocytes	Microscopic	05	%	2 - 10	250	/cmm	200 - 1000
Basophils	Microscopic	00	%	0 - 2	0	/cmm	0 - 100

Platelet Count

Platelet Count	Method	Result	Unit	Biological Ref. Interval
Platelet Count	Electrical impedance	221000	/cmm	150000 - 410000
MPV	Calculated	10.80	fL	7.5 - 10.3

Platelets Morphology Platelets are adequate on Smear



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MD

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MEDI WHEEL FULL BODY ANNUAL PLUS
Complete Blood Count

Test	Result	Unit	Biological Ref. Interval
Erythrocytes Sedimentation Rate			
ESR <small>Capillary photometry</small>	3	mm/1hr	0 - 14
Differential Count			Absolute Count


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	Sample Type : EDTA blood	Process At : 75 – Sterling Hospital, Race course (Vadoda

MEDI WHEEL FULL BODY ANNUAL PLUS
Blood Group

Test	Result	Unit	Biological Ref. Interval
ABO Type <i>Tube Agglutination</i>	"B"		
Rh (D) Type	Positive		


 Dr. C. Shrinivasan..

 M.D (Pathology) [G-18341]
 Consultant Pathologist

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Sex/Age	: Male / 32 Y 24-Feb-1992	Registration on	: 26-Oct-2024 10:44	Location	: Main BNo./
Ref. Id	: 300297 , 2815905	Collected at	: SAWPL	Approved on	: 26-Oct-2024 12:50 Status : Revised
Ref. By	: Dr. RMO . STERLING...	Collected on	: 26-Oct-2024 11:20	Printed On	: 29-Oct-2024 13:36
		Sample Type	: Serum, Urine	Process At	: 75 – Sterling Hospital, Race course (Vadoda)

MEDI WHEEL FULL BODY ANNUAL PLUS

Test	Result	Unit	Biological Ref. Interval
Fasting Blood Glucose <small>GOD-POD</small>	82.0	mg/dL	74 - 100
Fasting Urine Glucose <small>GOD-POD</small>	Absent		Absent
Fasting Urine Ketone <small>Nitroprusside</small>	Absent		Absent

	Fasting Blood Glucose*	Postprandial Blood Glucose #	Random Blood Glucose
Normal	< 100 mg/dL	< 140 mg/dL	< 140 mg/dL
Prediabetic	100 – 125 mg/dL	140 – 199 mg/dL	140 – 199 mg/dL
Diabetic	>/=126 mg/dL	>/= 200 mg/dl	>/= 200 mg/dl

* Fasting is defined as no caloric intake for more than 8 hours

The test should be performed as described by the WHO, using a glucose load containing the equivalent of 75 g anhydrous glucose dissolved in water.

Criteria for Diagnosis of Diabetes:

1. Fasting blood glucose (FPG) \geq 126 mg/dL
2. Two-hour blood glucose (2-h OGTT) = 200 mg/dL
3. HbA1c values (A1c) \geq 6.5%
4. Random plasma glucose \geq 200 mg/dL

(With symptoms of hyperglycemia or hyperglycemic crisis)

In the absence of unequivocal hyperglycemia, diagnosis of DM using A1C, FPG or 2-h OGTT requires two abnormal test results from the same sample or in two separate samples.

References:

1. American diabetes association. Standards of medical care in diabetes 2024
2. National Library of Medicine – National Institute of Health (USA) – Diabetes Mellitus
3. World Health Organization – Factsheet on Diabetes – Prevention and treatment


Dr. C. Shrinivasan..

 M.D (Pathology) [G-18341]
Consultant Pathologist

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Ref. By : Dr. RMO . STERLING...	Collected on : 26-Oct-2024 13:35	Printed On : 29-Oct-2024 13:36
	Sample Type : Fluoride	Process At : 75 - Sterling Hospital, Race course (Vadoda)

MEDI WHEEL FULL BODY ANNUAL PLUS

Test	Result	Unit	Biological Ref. Interval
Post-breakfast Blood Glucose <i>GOD-POD</i>	94	mg/dL	70 - 140
Post-breakfast Urine Glucose <i>GOD-POD</i>	Absent		Absent
Post Breakfast Urine Ketone <i>Nitroprusside</i>	Absent		Absent



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	Sample Type : EDTA blood	Process At : 75 – Sterling Hospital, Race course (Vadoda

MEDI WHEEL FULL BODY ANNUAL PLUS
HbA1c (Glycosylated Hemoglobin) by HPLC

Test	Result	Unit	Biological Ref. Interval
HbA1c	4.60	%	For Screening: Diabetes: $\geq 6.5\%$; Pre-Diabetes: 5.7 - 6.4%; Non-Diabetes: $< 5.7\%$
Mean Blood Glucose	85.32	mg/dL	For Diabetic Patient: Poor Control : $> 7.0\%$; Good Control : 6.0-7.0%

Description:

- Total haemoglobin A1 c is continuously synthesized in the red blood cell through its 120 days life span. The concentration of HbA1c in the cell reflects the average blood glucose concentration it encounters.
- The level of HbA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose concentration over an extended time period and remains unaffected by short-term fluctuations in blood glucose levels.
- The measurement of HbA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half life of a red blood cell is sixty days, HbA1c has been accepted as a measurement which reflects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months.
- It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures.

HbA1c assay Interferences:

Erroneous values might be obtained from samples with abnormally elevated quantities of other Haemoglobins as a result of either their simultaneous elution with HbA1c (HbF) or differences in their glycation from that of HbA (HbS).

Reference: American diabetes association. Standards of medical care in diabetes 2024


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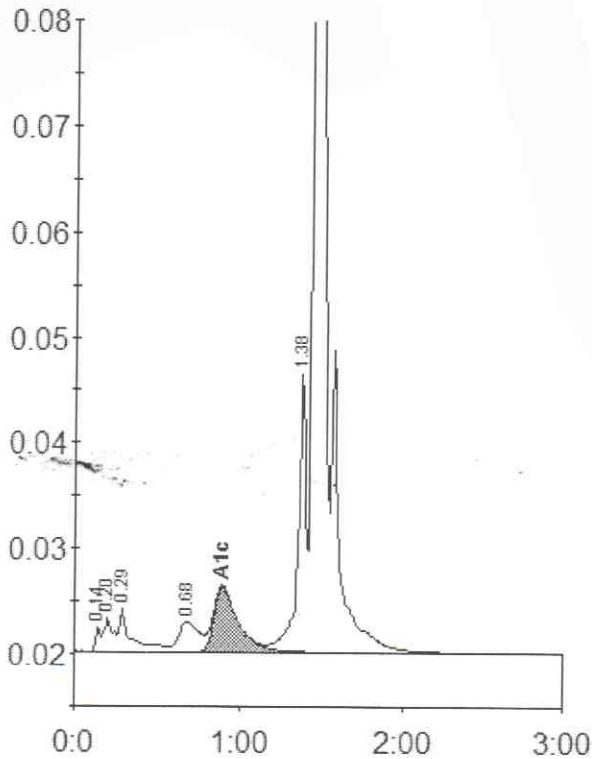


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Bio-Rad DATE: 26/10/2024
D-10 TIME: 01:48 PM
S/N: #DJ8G550303 Software version: 4.30-2
Sample ID: 102407502645
Injection date: 26/10/2024 01:48 PM
Injection #: 16 Method: HbA1c
Rack #: --- Rack position: 6



Peak table - ID: 102407502645

Peak	R.time	Height	Area	Area %
Unknown	0.14	2266	5188	0.3
A1a	0.20	3184	11639	0.7
A1b	0.29	4131	21017	1.2
LA1c/CHb-1	0.68	2861	24466	1.4
A1c	0.90	6214	62794	4.6
P3	1.38	26322	96219	5.6
A0	1.44	603886	1505353	87.2
Total Area:			1726675	

Concentration:	%
A1c	4.6





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	Sample Type : Serum	Process At : 75 – Sterling Hospital, Race course (Vadoda)

MEDI WHEEL FULL BODY ANNUAL PLUS
Lipid Profile

Test	Result	Unit	Biological Ref. Interval
Cholesterol <i>Cholesterol oxidase – Peroxidase</i>	127.0	mg/dL	Desirable : <200 Borderline High : 200-239 High : >240
Triglyceride <i>Ezymatic (Lipase/GK/GPa/POD)</i>	59.0	mg/dL	Normal : <150 Borderline : 150-199 High : 200-499 Very High : >500
HDL Cholesterol <i>PTA/MgCl2</i>	44.0	mg/dL	Low: <40.0 High: >60.0
Direct LDL <i>Direct measured</i>	66.00	mg/dL	Optimal: <100 Near to above Optimal: 100–129 Borderline High: 130-159 High: 160–189 Very High: =190
VLDL <i>Calculated</i>	L 11.80	mg/dL	15 - 35
CHOL/HDL Ratio <i>Calculated</i>	2.9		Up to 5.0
dLDL/HDL Ratio <i>Calculated</i>	1.5		Up to 3.5

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MEDI WHEEL FULL BODY ANNUAL PLUS

Test	Result	Unit	Biological Ref. Interval
Uric Acid <i>Uricase</i>	5.80	mg/dL	3.5 - 8.5
Blood Urea Nitrogen <i>Calculated</i>	12.15	mg/dL	9.0 - 20.0
Urea <i>Urease, Colorimetric</i>	26.0	mg/dL	19.3 - 43.0
Creatinine, serum <i>Creatinine Amidohydrolase</i>	0.70	mg/dL	0.66 - 1.25
BUN Creatinine Ratio <i>Calculated</i>	17.36		
Urea Creatinine Ratio <i>Calculated</i>	37.14		


 Dr. C. Shrinivasan..

 M.D (Pathology) [G-18341]
 Consultant Pathologist

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Sterling Accuris Pathology Laboratory

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pathlab@sterlinghospitals.com | Website: www.sterlinghospitals.com / www.sterlingaccuris.com



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Passport No :

LABORATORY TEST REPORT


Patient Information	Sample Information	Location Information
Name : Mr. Jagdishbhai R Rabari	Lab Id : 102407502645	Pt. Type : Sterling Hospital Vadodara Health Checkup
Sex/Age : Male / 32 Y 24-Feb-1992	Registration on : 26-Oct-2024 10:44	Location : Main BNo./
Ref. Id : 300297 , 2815905	Collected at : SAWPL	Approved on : 26-Oct-2024 14:33 Status : Revised
Ref. By : Dr. RMO . STERLING...	Collected on : 26-Oct-2024 11:20	Printed On : 29-Oct-2024 13:36
	Sample Type : Serum	Process At : 75 - Sterling Hospital, Race course (Vadoda)

MEDI WHEEL FULL BODY ANNUAL PLUS
Liver Function Test

Test	Result	Unit	Biological Ref. Interval
ALT (SGPT) <i>UV with P5P, IFCC</i>	44.0	U/L	0 - 50
AST (SGOT) <i>UV with P5P</i>	34.0	U/L	17 - 59
GGT (Gamma Glutamyl Transferase) <i>L-y-Glytamyl-p-nitroanilide</i>	23.0	U/L	15 - 73
Alkaline Phosphatase <i>PNPP, AMP Buffer, IFCC</i>	58.0	U/L	38 - 126
Total Bilirubin <i>Azobilirubin chromophores</i>	0.70	mg/dL	0.2 - 1.3
Conjugated Bilirubin <i>Cationic Mordant Binding</i>	0.10	mg/dL	0.0 - 0.3
Unconjugated Bilirubin <i>Cationic Mordant Binding</i>	0.50	mg/dL	0.0 - 1.1
Delta Bilirubin <i>Calculated</i>	0.10	mg/dL	0.0 - 0.2
Total Protein <i>Copper tartrate to colour complex</i>	7.30	g/dL	6.3 - 8.2
Albumin <i>Bromocresol Green Method</i>	4.50	g/dL	3.5 - 5.0
Globulin <i>Calculated</i>	2.80	g/dL	2.3 - 3.5
A/G Ratio <i>Calculated</i>	1.61		1.3 - 1.7


Dr. Kajal Parmar

MD

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LABORATORY TEST REPORT


Patient Information		Sample Information		Location Information	
Name	: Mr. Jagdishbhai R Rabari	Lab Id	: 102407502645	Pt. Type	: Sterling Hospital Vadodara Health Checkup
Sex/Age	: Male / 32 Y 24-Feb-1992	Registration on	: 26-Oct-2024 10:44	Location	: Main BNO./
Ref. Id	: 300297 , 2815905	Collected at	: SAWPL	Approved on	: 26-Oct-2024 14:32 Status : Revised
Ref. By	: Dr. RMO . STERLING...	Collected on	: 26-Oct-2024 11:20	Printed On	: 29-Oct-2024 13:36
		Sample Type	: Serum	Process At	: 75 – Sterling Hospital, Race course (Vadoda)

MEDI WHEEL FULL BODY ANNUAL PLUS
Thyroid Function Tests

Test	Result	Unit	Biological Ref. Interval
T3, total (Triiodothyronine) <small>CLIA</small>	1.36	ng/mL	0.58 - 1.59
T4, total (Thyroxine) <small>CLIA</small>	7.71	µg/dl	4.87 - 11.72
TSH (3rd Gen.) <small>Chemiluminescence</small>	1.0400	µIU/mL	0.4001 - 4.049

TSH	T3/FT3	T4/FT4	Suggested interpretation of Thyroid function tests pattern
Within range	Decreased	Within range	Isolated low T3 often seen in elderly & associated Non-Thyroid illness. In elderly the drop in T3 level can be up to 25%.
Raised	Within Range	Within Range	Isolated High TSH Especially in the range of 4.7 to 15 mIU/ml is commonly associated with physiological & Biological TSH Variability; Subclinical Autoimmune Hypothyroidism; Intermediate T4 therapy for hypothyroidism; Recovery phase after Non-Thyroidal illness.
Raised	Decreased	Decreased	Chronic Autoimmune Thyroiditis; Post thyroidectomy, post radioiodine; Hypothyroid phase of transient thyroiditis.
Raised or within range	Raised	Raised or within range	Interfering antibodies to thyroid hormones (anti-TPO antibodies); Intermediate T4 therapy of T4 overdose; Drug Interference-Amiodarone, Heparin, Beta blocker, steroids, anti-epileptics.
Decreased	Raised or within range	Raised or within range	Isolated Low TSH – Especially in the range of 0.1 to 0.4 often seen in elderly & associated with Non-Thyroidal illness; Subclinical Hyperthyroidism; Thyroxine ingestion.
Decreased	Decreased	Decreased	Central Hypothyroidism; Non-Thyroidal illness; Recent treatment for Hypothyroidism (TSH remains suppressed).
Decreased	Raised	Raised	Primary Hyperthyroidism (Graves' disease), Multinodular goitre Toxic nodule; Transient thyroiditis: postpartum, Silent (lymphocytic), Post viral (granulomatous, subacute, DeQuervain'a) Gestational thyrotoxicosis hyperemesis gravidarum.
Decreased or within range	Raised	Within range	T3 toxicosis; Non-Thyroidal illness.

Reference: Wallach's Interpretation of Diagnostic by Mary Williamson, 10th edition, 2015.


Dr. Kajal Parmar

MD

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Patient Information	Sample Information	Location Information
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Sex/Age : Male / 32 Y 24-Feb-1992	Registration on : 26-Oct-2024 10:44	Location : Main BNO./
Ref. Id : 300297 / 2815905	Collected at : SAWPL	Approved on : 26-Oct-2024 12:54 Status : Revised
Ref. By : Dr. RMO . STERLING...	Collected on : 26-Oct-2024 11:20	Printed On : 29-Oct-2024 13:36
	Sample Type : Urine	Process At : 75 - Sterling Hospital, Race course (Vadoda)

MEDI WHEEL FULL BODY ANNUAL PLUS
URINE ROUTINE EXAMINATION

Test	Result	Unit	Biological Ref. Interval
Physical & Chemical (Dip strip) examination			
Colour	Pale Yellow		Pale Yellow
pH <i>Double indicator</i>	6.0		5.5 - 7.0
Specific Gravity <i>Polyelectrolyte based reaction</i>	1.025		1.015 - 1.025
Protein <i>Protein error of indicators</i>	Absent		Absent
Glucose <i>GOD-POD</i>	Absent		Absent
Ketone <i>Nitroprusside</i>	Absent		Absent
Blood <i>Peroxidase like reaction</i>	Absent		Absent
Bilirubin <i>Diazo reaction</i>	Absent		Absent
Leucocytes <i>Esterase reaction</i>	Absent		Absent
Nitrite <i>p-arsanilic acid to diazonium compound</i>	Absent		Absent
Microscopic Examination			
Erythrocytes (RBCs)	Absent	/hpf	0 - 2
Pus Cells	Occasional	/hpf	0 - 5
Epithelial Cells	Occasional	/hpf	
Crystals	Absent		Absent
Casts	Absent		Absent
Bacteria	Absent		Absent
Amorphous Material	Absent		Absent
Yeast	Absent		Absent

----- End Of Report -----


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Report Date: 26 Oct 2024 - 12:08 PM

Patient Id	: RCR-300297	Patient Name	: RABARI JAGDISHBHAI R
Age	: 32Y 8M 2D	Sex	: Male
Ref. Doctor	: DR. RMO . STERLING	Study Date	: 26 Oct 2024 - 11:54 AM

RADIOGRAPH CHEST PA

Both lungs and CP angles appear clear.
Mediastinal shadow and hilar region appear normal.
Cardiac shadow appears normal.
Both domes of diaphragm show normal position and contour.
Any thorax under vision appears normal.

IMPRESSION

No significant abnormality detected.

Dr. Palak Nandolia
Consultant Radiologist

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Sterling Hospital, Sterling Hospital Road, Memnagar, Ahmedabad-380052, Gujarat, India



ID:
Name:
Age:
Gender:

2024102612064524
MR JAGDISH R , RABARI
32 Years
Male

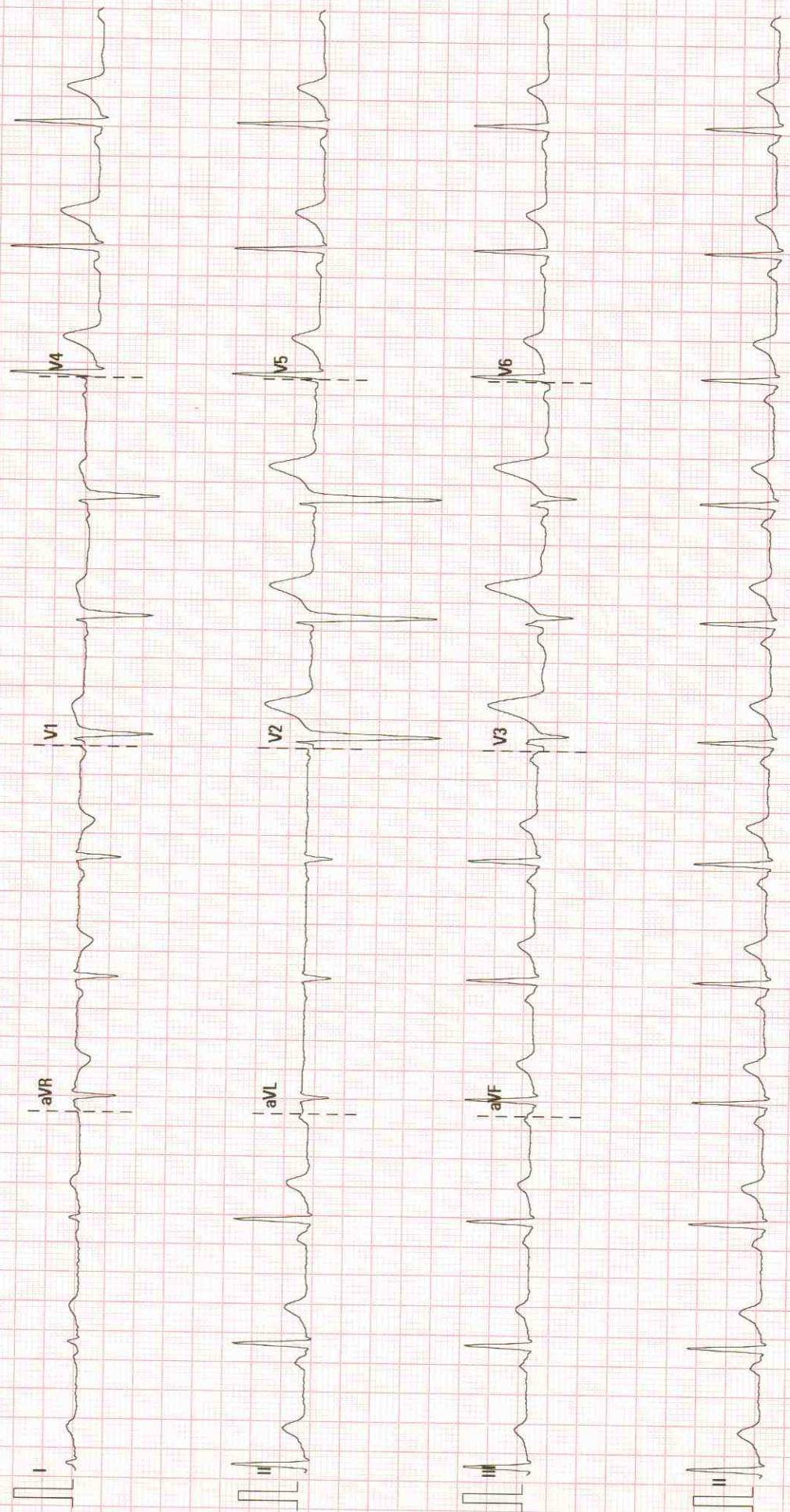
26-10-2024 12:06:35 PM

Vent. Rate 72 bpm
PR Interval 136 ms
QRS Duration 92 ms
QT/QTc Interval 384/405 ms
P/QRS/T Axes 71/82/65 deg
QTc:Hodges

Sinus rhythm
Normal ECG

Unconfirmed Diagnosis

Normal



25 mm/s

10 mm/mV

50 Hz

8DR 20 Hz

02.06.00/V28.4.1
SN FN-74007522

mindray



2D ECHOCARDIOGRAPHY REPORT



Race Course Road, Vadodara

Name: Mr. JAGDISH R RABARI
Age: 32 Years
Sex: M
Date: 26-Oct-2024

Ref By: HCP
Study: 2D Echo

M-MODE:

LVS	10mm	LVDD	46mm
PW	10mm	LVDS	26mm
LA	32mm	LV EF	60 %

DOPPLER STUDY:

MITRAL	E 1.01 A 0.55
AORTIC	0.79
TRICUSPID	N
PULMONARY	0.86

CONCLUSION :

- NORMAL SIZED CHAMBERS
- NORMAL LV SYSTOLIC FUNCTION LVEF 60 %
- NO RWMA AT REST
- NO DIASTOLIC DYSFUNCTION
- NO MR, NO AR, NO TR.
- ALL VALVES ARE NORMAL
- NO CLOT OR VEGETATION
- NO PERICARDIAL EFFUSION
- IVC NORMAL


Dr. KAUSHIK TRIVEDI MD,DM
Consultant interventional Cardiologist

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MAR 2025 - MAR 2025
INDIA



Race Course Road, Vadodara

Report Date: 04 Nov 2024 - 02:03 PM

Patient Id	: RCR-300297	Patient Name	: RABARI JAGDISHBHAI R
Age	: 32Y 8M 2D	Sex	: Male
Ref. Doctor	: DR. RMO . STERLING	Study Date	: 26 Oct 2024 - 11:11 AM

SONOGRAPHY OF WHOLE ABDOMEN: -

LIVER: Liver appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen. No evidence of dilated IHBR is seen. Intrahepatic portal radicals appear normal. Portal vein is normal in caliber at porta & shows hepatopetal blood flow.

GALL BLADDER: Gall bladder is distended and appears normal. No evidence of calculus or changes of cholecystitis are seen. CBD appears normal.

PANCREAS: Pancreas is partially visualized and visualized portion is normal in size and echotexture.

SPLEEN: Spleen is normal in size (9.9 cm) & echotexture. No focal or diffuse lesion is seen.

BOTH KIDNEYS: Both kidneys are normal in size, shape, position and contour. Cortical thickness & echo appear normal. No evidence of renal calculus, hydronephrosis or mass lesion is seen on either side.

Right kidney measures 11.0 x 4.0 cm

Left kidney measures 9.9 x 4.8 cm

No evidence of suprarenal mass lesion is seen on either side.

URINARY BLADDER: Bladder is partially distended. No bladder calculus, diverticulum or mass lesion is seen.

PROSTATE: Prostate appears normal in size and shows normal echotexture. No evidence of solid or cystic lesion.

No ascites or significant lymphadenopathy is seen.

Mild gaseous distention of bowel loops is seen.

CONCLUSION:

No significant abdominal abnormality detected.

Dr. Shilpi Gupta MD
Sr. Consultant Radiologist

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