

Dr. Smita Ranveer's



CLINICAL DIAGNOSTIC CENTRE  
COMPLETE PATHOLOGICAL SOLUTION



\* 2 1 1 8 3 5 \*

Name : Mr. VISHAL GUPTA

Lab ID. : 211835

Age/Sex : 32Years / Male

Ref By : JINKUSHAL CARDIAC CARE & SUPER SPECIALITY HOS

Consulting Dr. : DR. MAYUR JAIN

Collected On : 26/10/2024 11:45 am

Received On : 26/10/2024 11:55 am

Reported On : 26/10/2024 6:56 pm

Report Status : FINAL

**\*LIPID PROFILE**

| TEST NAME  | RESULTS | UNIT  | REFERENCE RANGE  |
|--|---------|-------|--|
| <b>TOTAL CHOLESTEROL (CHOLESTEROL OXIDASE, ESTERASE, PEROXIDASE)</b> | 154.0   | mg/dL | Desirable blood cholesterol: <200 mg/dl.<br>Borderline high blood cholesterol: 200 - 239 mg/dl.<br>High blood cholesterol: >239 mg/dl.             |
| <b>S.HDL CHOLESTEROL (DIRECT MEASURE - PEG)</b>                      | 32.3    | mg/dL | Major risk factor for heart : <30 mg/dl.<br>Negative risk factor for heart disease: >=80 mg/dl.  |
| <b>S. TRIGLYCERIDE (ENZYMATIC, END POINT)</b>                        | 74.2    | mg/dL | Desirable level : <161 mg/dl.<br>High : >= 161 - 199 mg/dl.<br>Borderline High : 200 - 499 mg/dl.<br>Very high : >499mg/dl.                        |
| <b>VLDL CHOLESTEROL (CALCULATED VALUE)</b>                           | 15      | mg/dL | UPTO 40  |
| <b>S.LDL CHOLESTEROL (CALCULATED VALUE)</b>                          | 107     | mg/dL | Optimal: <100 mg/dl.<br>Near Optimal: 100 - 129 mg/dl.<br>Borderline High: 130 - 159 mg/dl.<br>High : 160 - 189mg/dl.<br>Very high : >= 190 mg/dl. |
| <b>LDL CHOL/HDL RATIO (CALCULATED VALUE)</b>                         | 3.31    |       | UPTO 3.5   |
| <b>CHOL/HDL CHQL RATIO (CALCULATED VALUE)</b>                        | 4.77    |       | <5.0   |

Above reference ranges are as per ADULT TREATMENT PANEL III recommendation by NCEP (May 2015).

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

Checked By  
SHAISTA Q

DR. SMITA RANVEER.  
M.B.B.S.M.D. Pathology(Mum)  
Consultant Histocytopathologist  
Regd.No.: 3401/09/2007





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**COMPLETE BLOOD COUNT**

| TEST NAME                    | RESULTS                 | UNIT                 | REFERENCE RANGE |
|------------------------------|-------------------------|----------------------|-----------------|
| <b>HEMOGLOBIN</b>            | 13.1                    | gm/dl                | 13 - 18         |
| HEMATOCRIT (PCV)             | <b>39.3</b>             | %                    | 42 - 52         |
| RBC COUNT                    | <b>4.26</b>             | x10 <sup>6</sup> /uL | 4.70 - 6.50     |
| MCV                          | 92                      | fl                   | 80 - 96         |
| MCH                          | 30.8                    | pg                   | 27 - 33         |
| MCHC                         | 33                      | g/dl                 | 33 - 36         |
| RDW-CV                       | 13.4                    | %                    | 11.5 - 14.5     |
| <b>TOTAL LEUCOCYTE COUNT</b> | 6390                    | /cumm                | 4000 - 11000    |
| <b>DIFFERENTIAL COUNT</b>    |                         |                      |                 |
| NEUTROPHILS                  | 64                      | %                    | 40 - 80         |
| LYMPHOCYTES                  | 28                      | %                    | 20 - 40         |
| EOSINOPHILS                  | 02                      | %                    | 0 - 6           |
| MONOCYTES                    | 06                      | %                    | 2 - 10          |
| BASOPHILS                    | 00                      | %                    | 0 - 1           |
| <b>PLATELET COUNT</b>        | 224000                  | /cumm                | 150 to 410      |
| MPV                          | <b>13.1</b>             | fl                   | 6.5 - 11.5      |
| PDW                          | 16.1                    | %                    | 9.0 - 17.0      |
| PCT                          | 0.290                   | %                    | 0.200 - 0.500   |
| RBC MORPHOLOGY               | Normocytic Normochromic |                      |                 |
| WBC MORPHOLOGY               | Normal                  |                      |                 |
| PLATELETS ON SMEAR           | Adequate                |                      |                 |

Method : EDTA Whole Blood- Tests done on Automated Six Part Cell Counter.RBC and Platelet count by Electric Impedance ,WBC by SF Cube method and Differential by flow cytometry . Hemoglobin by Cyanide free reagent for hemoglobin test (Colorimetric Method).Rest are calculated parameters.

**Result relates to sample tested, Kindly correlate with clinical findings.**

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## IMMUNO ASSAY

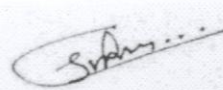
| TEST NAME                                    | RESULTS | UNIT           | REFERENCE RANGE |
|--|---------|----------------|-----------------|
| <b>TFT (THYROID FUNCTION TEST )</b>          |         |                |                 |
| SPECIMEN                                     | Serum   |                |                 |
| T3   | 134.0   | ng/dl          | 84.63 - 201.8   |
| T4   | 7.45    | µg/dl          | 5.13 - 14.06    |
| TSH  | 2.62    | µIU/ml         | 0.35 - 4.94     |
| DONE ON FULLY AUTOMATED ANALYSER COBAS e411. |         |                |                 |
| T3 (Triiodo Thyronine)                       |         | T4 (Thyroxine) |                 |
| AGE  | RANGE   | AGE            | RANGES          |
| 1-30 days                                    | 100-740 | 1-14 Days      | 11.8-22.6       |
| 1-11 months                                  | 105-245 | 1-2 weeks      | 9.9-16.6        |
| 1-5 years                                    | 105-269 | 1-4 months     | 7.2-14.4        |
| 6-10 years                                   | 94-241  | 4-12months     | 7.8-16.5        |
| 11-15 years                                  | 82-213  | 1-5 years      | 7.3-15.0        |
| 15-20 years                                  | 80-210  | 5-10 years     | 6.4-13.3        |
|  |         | 11-15 years    | 5.6-11.7        |

TSH(Thyroid stimulating hormone)

| AGE               | RANGES   |
|-------------------|----------|
| 0-14 Days         | 1.0-39   |
| 2 weeks -5 months | 1.7-9.1  |
| 6 months-20 years | 0.7-6.4  |
| Pregnancy         |          |
| 1st Trimester     | 0.1-2.5  |
| 2nd Trimester     | 0.20-3.0 |
| 3rd Trimester     | 0.30-3.0 |

**INTERPRETATION :**

TSH stimulates the production and secretion of the metabolically active thyroid hormones, thyroxine (T4) and triiodothyronine (T3), by interacting with a specific receptor on the thyroid cell surface. The synthesis and secretion of TSH is stimulated by Thyrotropin releasing hormone (TRH), in response to low levels of circulating thyroid hormones. Elevated levels of T3 and T4 suppress the production of TSH via a classic negative feedback mechanism. Failure at any level of regulation of the hypothalamic-pituitary-thyroid axis will result in either underproduction (hypothyroidism) or overproduction (hyperthyroidism) of T4 and/or T3.

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Page 3 of 9



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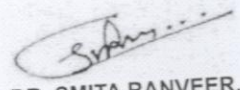


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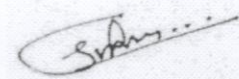
## \*RENAL FUNCTION TEST

| TEST NAME                                     | RESULTS | UNIT  | REFERENCE RANGE |
|---|---------|-------|-----------------|
| <b>BLOOD UREA</b><br>(Urease UV GLDH Kinetic) | 19.6    | mg/dL | 19 - 45         |
| <b>BLOOD UREA NITROGEN</b><br>(Calculated)    | 9.16    | mg/dL | 5 - 20          |
| <b>S. CREATININE</b><br>(Enzymatic)           | 0.75    | mg/dL | 0.6 - 1.4       |
| <b>S. URIC ACID</b><br>(Uricase)              | 5.6     | mg/dL | 3.5 - 7.2       |
| <b>S. SODIUM</b><br>(ISE Direct Method)       | 139.1   | mEq/L | 137 - 145       |
| <b>S. POTASSIUM</b><br>(ISE Direct Method)    | 3.98    | mEq/L | 3.5 - 5.1       |
| <b>S. CHLORIDE</b><br>(ISE Direct Method)     | 101.3   | mEq/L | 98 - 110        |
| <b>S. PHOSPHORUS</b><br>(Ammonium Molybdate)  | 3.86    | mg/dL | 2.5 - 4.5       |
| <b>S. CALCIUM</b><br>(Arsenazo III)           | 8.62    | mg/dL | 8.6 - 10.2      |
| <b>PROTEIN</b><br>(Biuret)                    | 7.01    | g/dl  | 6.4 - 8.3       |
| <b>S. ALBUMIN</b><br>(BGC)                    | 4.03    | g/dl  | 3.2 - 4.6       |
| <b>S.GLOBULIN</b><br>(Calculated)             | 2.98    | g/dl  | 1.9 - 3.5       |
| <b>A/G RATIO</b><br>calculated                | 1.35    |       | 0 - 2           |

BIOCHEMISTRY TEST DONE ON FULLY AUTOMATED ( EM 200) ANALYZER.

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

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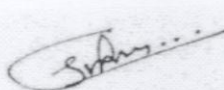
**LIVER FUNCTION TEST**

| TEST NAME  | RESULTS | UNIT  | REFERENCE RANGE |
|--|---------|-------|-----------------|
| <b>TOTAL BILLIRUBIN</b><br>(Method-Diazo)          | 0.53    | mg/dL | 0.1 - 1.2       |
| <b>DIRECT BILLIRUBIN</b><br>(Method-Diazo)         | 0.26    | mg/dL | 0.0 - 0.4       |
| <b>INDIRECT BILLIRUBIN</b><br>Calculated           | 0.27    | mg/dL | 0 - 0.8         |
| <b>SGOT(AST)</b><br>(UV without PSP)               | 20.4    | U/L   | 0 - 37          |
| <b>SGPT(ALT)</b><br>UV Kinetic Without PLP (P-L-P) | 22.6    | U/L   | UP to 40        |
| <b>ALKALINE PHOSPHATASE</b><br>(Method-ALP-AMP)    | 66.0    | U/L   | 53 - 128        |
| <b>S. PROTIEN</b><br>(Method-Biuret)               | 7.01    | g/dl  | 6.4 - 8.3       |
| <b>S. ALBUMIN</b><br>(Method-BCG)                  | 4.03    | g/dl  | 3.5 - 5.2       |
| <b>S. GLOBULIN</b><br>Calculated                   | 2.98    | g/dl  | 1.90 - 3.50     |
| <b>A/G RATIO</b><br>Calculated                     | 1.35    |       | 0 - 2           |

Result relates to sample tested, Kindly correlate with clinical findings.

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HAEMATOLOGY

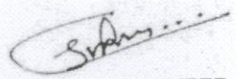
| TEST NAME  | RESULTS   | UNIT    | REFERENCE RANGE |
|------------|-----------|---------|-----------------|
| <b>ESR</b> |           |         |                 |
| <b>ESR</b> | <b>50</b> | mm/1hr. | 0 - 20          |

METHOD - WESTERGREN

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Page 7 of 9



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## BIOCHEMISTRY

| TEST NAME                              | RESULTS | UNIT  | REFERENCE RANGE   |
|--|---------|-------|---|
| <b>GLYCOCELATED HEMOGLOBIN (HBA1C)</b> |         |       |   |
| HBA1C (GLYCOSALATED HAEMOGLOBIN)       | 5.3     | %     | Hb A1c<br>> 8 Action suggested<br>< 7 Goal<br>< 6 Non - diabetic level  |
| AVERAGE BLOOD GLUCOSE (A. B. G. )      | 105.4   | mg/dL | NON - DIABETIC : <=5.6<br>PRE - DIABETIC : 5.7 - 6.4<br>DIABETIC : >6.5 |

## METHOD

Particle Enhanced Immunoturbidimetry

HbA1c : Glycosylated hemoglobin concentration is dependent on the average blood glucose concentration which is formed progressively and irreversibly over a period of time and is stable till the life of the RBC/erythrocytes. Average Blood Glucose (A.B.G) is calculated value from HbA1c : Glycosylated hemoglobin concentration in whole Blood. It indicates average blood sugar level over past three months.

**BLOOD GLUCOSE FASTING & PP**

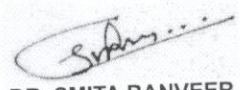
|                       |        |       |          |
|-----------------------|--------|-------|----------|
| BLOOD GLUCOSE FASTING | 96.2   | mg/dL | 70 - 110 |
| URINE GLUCOSE FASTING | Absent |       |          |
| URINE KETONE FASTING  | Absent |       |          |
| BLOOD GLUCOSE PP      | 86.8   | mg/dL | 70 - 140 |
| URINE GLUCOSE PP      | Absent |       |          |
| URINE KETONE PP       | Absent |       |          |

Method (GOD-POD). DONE ON FULLY AUTOMATED ANALYSER (EM200).

1. Fasting is required (Except for water ) for 8-10 hours before collection for fasting specimen. Last dinner should consist of bland diet.

2. Don't take insulin or oral hypoglycemic agent until after fasting blood sample has been drawn

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### BIOCHEMISTRY

| TEST NAME | RESULTS | UNIT | REFERENCE RANGE |
|-----------|---------|------|-----------------|
|-----------|---------|------|-----------------|

**INTERPRETATION**

- Normal glucose tolerance : 70-110 mg/dl
- Impaired Fasting glucose (IFG) : 110-125 mg/dl
- Diabetes mellitus :  $\geq 126$  mg/dl

**POSTPRANDIAL/POST GLUCOSE (75 grams)**

- Normal glucose tolerance : 70-139 mg/dl
- Impaired glucose tolerance : 140-199 mg/dl
- Diabetes mellitus :  $\geq 200$  mg/dl

**CRITERIA FOR DIAGNOSIS OF DIABETES MELLITUS**

- Fasting plasma glucose  $\geq 126$  mg/dl
- Classical symptoms + Random plasma glucose  $\geq 200$  mg/dl
- Plasma glucose  $\geq 200$  mg/dl (2 hrs after 75 grams of glucose)
- Glycosylated haemoglobin  $> 6.5\%$

\*\*\*Any positive criteria should be tested on subsequent day with same or other criteria.  
Result relates to sample tested, Kindly correlate with clinical findings.

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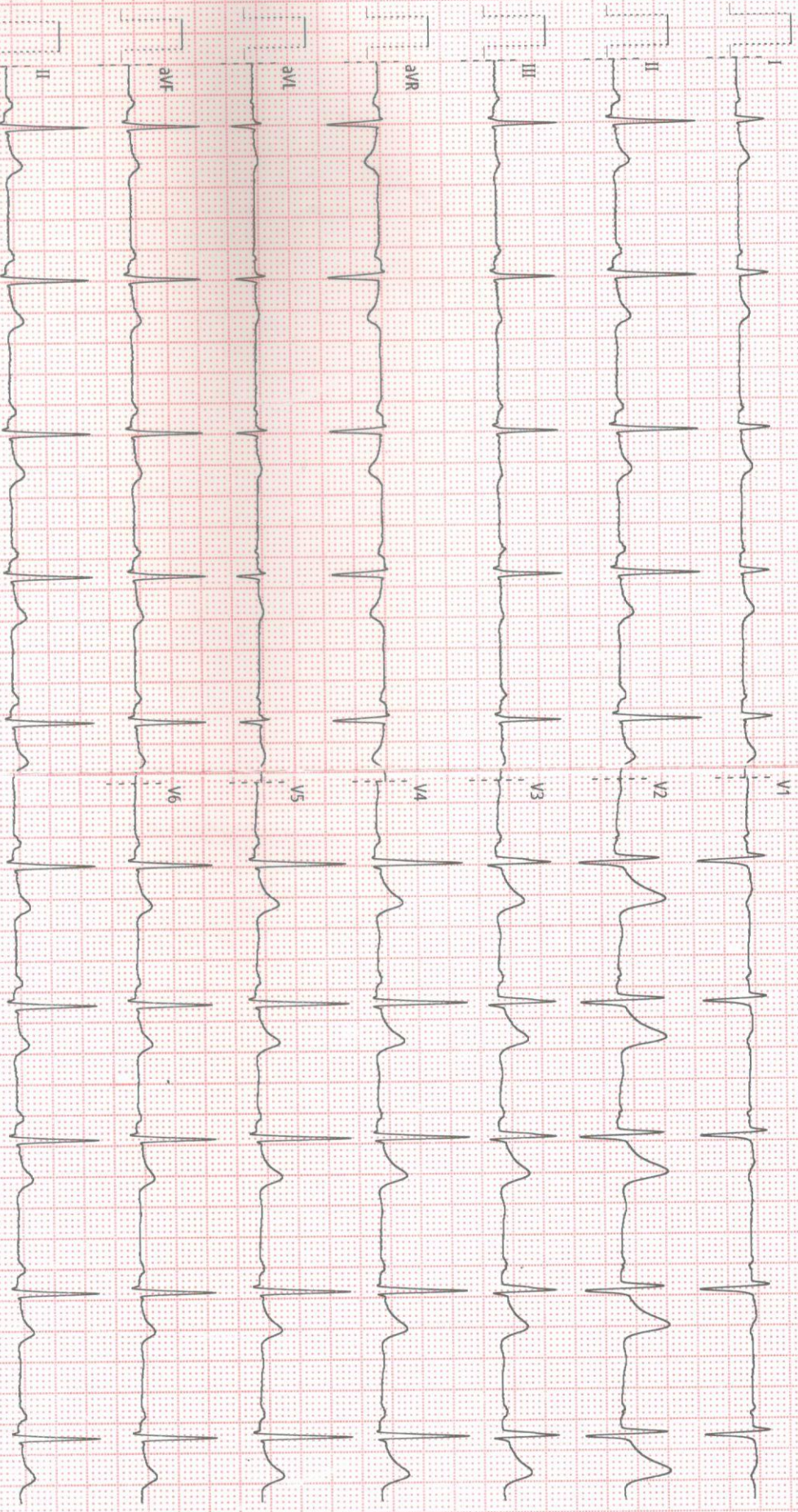
# ECG report

Confirm and sign:

ID : 20241026094959  
Name : gupta,vishal  
Gender : M  
Age : 32 Years  
Dept :  
Bed No.:

HR : 63 bpm  
PR : 160 ms  
QRS : 78 ms  
QT/QTc : 402/407 ms  
P/QRS/T : 65/71/45°  
RV5/SV1 : 1.496/0.764 mv  
RV5-SV1 : 2.260 mv

<<Interpretations>>  
Sinus rhythm  
Normal ECG



0.3Hz - 33Hz - AC 50Hz 25mm/s 10mm/mV V1 0.26 Sequential

Examination time: 2024-10-26 09:50:34

## 2D ECHOCARDIOGRAPHY & COLOR DOPPLER REPORT

|                |  |
|----------------|--|
| <b>NAME</b>    | MR VISHAL GUPTA                        |
| <b>DATE</b>    | 26/10/2024                             |
| <b>REF BY</b>  | SELF                                   |
| <b>DONE BY</b> | DR MAYUR JAIN (9867280303/ 9222888070) |

### 2D

- All cardiac chambers are normal in size.
- No concentric left ventricular hypertrophy.
- No regional wall motion abnormality.
- Normal LV systolic function. LVEF is approximately 65% visually.
- Normal RV systolic function.
- All valves are normal in structure.
- IAS and IVS are intact.
- Aortic arch normal.
- No e/o clot/ vegetation/ effusion.

### M-MODE

|               |     |    |           |    |    |
|---------------|-----|----|-----------|----|----|
| <b>LVIDd</b>  | 40  | mm | <b>Ao</b> | 28 | mm |
| <b>LVIDs</b>  | 22  | mm | <b>LA</b> | 38 | mm |
| <b>EDV</b>    | 104 | ml |           |    |    |
| <b>ESV</b>    | 60  | ml |           |    |    |
| <b>EF</b>     | 65  | %  |           |    |    |
| <b>IVS(d)</b> | 9   | mm |           |    |    |
| <b>PW(d)</b>  | 10  | mm |           |    |    |

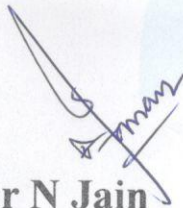
## COLOR DOPPLER

- No stenotic or regurgitant lesion at any valve
- No significant gradient across aortic valve.
- No LV diastolic dysfunction.
- No significant pulmonary hypertension.

## IMPRESSION

- Essentially normal study.

Many thanks for reference



**Dr, Mayur N Jain**  
**MD DM cardiology- gold medalist**  
**FACC, FSCAI, ICOB- USA ; AFESC -UK.**  
**Consultant interventional cardiologist**

|                                       |                          |
|---------------------------------------|--------------------------|
| <b>NAME : MR. VISHAL GUPTA</b>        | <b>AGE : 32YRS/MALE</b>  |
| <b>REF BY: C/O JINKUSHAL HOSPITAL</b> | <b>DATE : 26.10.2024</b> |

**FULL ABDOMEN USG**

**LIVER:** Normal in size and shows homogenous echotexture. No focal lesion is seen. Hepatic vasculature appears normal. No e/o IHBR dilatation seen.

**PORTAL VEIN / SPLENIC VEIN / CBD:** are normal in caliber.

**GALL BLADDER:** Is well distended. No calculi/wall thickening / sludge.

**SPLEEN:** Is normal in size, shape, position and shows normal homogeneous echotexture. No focal lesion seen.

**PANCREAS:** visualized head is normal in size and shows normal homogeneous echotexture. Rest is obscured by bowel gas.

**KIDNEYS:** Right kidney: 10.4 x 5.1 cm                      Left kidney: 11.0 x 4.7 cm.

Both kidneys are normal in size, shape, position, and echotexture. Both kidneys show normal cortico-medullary differentiation. No calculi/ HN/HU seen.

**URINARY BLADDER:** Is well distended and appears normal. No SOL /wall thickening.

**PROSTATE:** Is normal in size and echotexture. No focal lesion is seen. No e/o median lobe hypertrophy.

**PERITONEAL CAVITY:** No ascites or enlarged lymph nodes. **Bowel gas ++**

**OPINION:**

- **NO SIGNIFICANT ABNORMALITY IS DETECTED.**

**DR. DEVENDRA PATIL (M.D.Radiology)**  
**CONSULTANT RADIOLOGIST**

Please co-relate the findings with clinical examination, history & blood investigations.

# SEFRA DIGITAL X-RAY

JINKUSHAL HOSPITAL, Rosa Vista, Opp. Suraj Water Park, Waghbill, G.B. Road, Thane (W)  
Mob.: 7678031047 / 9833520607 | Time : 9 am. to 9 pm. | SUNDAY ON CALL)

PORTABLE X-RAY AVAILABLE

|                                 |                      |
|---------------------------------|----------------------|
| PATIENT NAME : MR. VISHAL GUPTA | AGE / SEX 32 YRS / M |
| REF BY DR: JINKUSHAL HOSPITAL   | DATE : 26/10/2024    |

## X-ray Chest PA

Bilateral lung fields appear clear. No obvious pleural/parenchymal lesion noted.

Bilateral hila are normal.

Both costo-phrenic and cardio-phrenic angles appear clear.

Cardiac silhouette is within normal limits.

Both domes of diaphragm appear normal.

Bony thoracic cage & soft tissues appear normal.

**Impression: No significant abnormality detected.**

Suggest Clinical correlation and further evaluation.

Thanks for referral

*Dr. Patil*

**Dr. Devendra Patil**  
**MD Radiology**

Disclaimer: report is done by teleradiology after the images acquired by PACS ( picture archiving and communication system) and this report is not meant for medicolegal purpose Investigations have their limitations. Solitary pathological/Radiological and other investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly. Patient's identification in online reporting is not established, so in no way patient identification is possible for medico-legal cases.

## MEDICAL EXAMINATION REPORT

|                                      |  |            |
|--------------------------------------|--|------------|
| Name Mr./Mrs./ Miss                  | Mr. Vishal Gupta   |            |
| Sex                                  | Male <input checked="" type="checkbox"/> Female  |            |
| Age (yrs.)                           | UHID :   | Bill No. : |
| Date                                 | 26 / 10 / 20 24 .  |            |
| Marital Status                       | Married / No. of Children / Unmarried / Widow :  |            |
| Present Complaints                   | NO any new do.   |            |
| Past Medical :<br>History Surgical : | NO any medical illness.  |            |
| Personal History                     | Diet : Veg <input checked="" type="checkbox"/> / Mixed <input type="checkbox"/> :<br>Addiction : Smoking <input type="checkbox"/> / Tobacco Chewing <input type="checkbox"/> / Alcohol <input type="checkbox"/> /<br>Any Other |            |
| Family History                       | Father = HT / DM / IHD / Stroke / Any Other<br>Mother = HT / DM / IHD / Stroke / Any Other<br>Siblings = HT / DM / IHD / Stroke / Any Other NO.  |            |
| History of Allergies                 | Drug Allergy NO any allergy .<br>Any Other   |            |
| History of Medication                | For HT / DM / IHD / Hypothyroidism<br>Any Other NO   |            |
| On Examination (O/E)                 | G. E. :<br>R. S. : clear<br>C. V. S. : S. & @<br>C. N. S. : lesions<br>P/A : syst-<br>Any Other Positive Findings :  |            |

Blood reports awaited.

|   |           |                           |                 |
|---|-----------|---------------------------|-----------------|
| Height  | 185 cms   | Weight                    | 87.8 Kg         |
| BMI   | 25.7      | Blood Pressure (mm of Hg) | 120/70 mm of Hg |
| Pulse (per min.)  | 78/min.   | Gynaecology               |                 |
| Examined by   | Dr.       |                           |                 |
| Complaint & Duration  |           |                           |                 |
| Other symptoms (Mict, bowels etc)   |           |                           |                 |
| Menstrual History   | Menarche  | Cycle                     | Loss            |
|   | Pain      | I.M.B.                    | P.C.B.          |
|   | L.M.P.    | Vaginal Discharge         |                 |
|   | Cx. Smear | Contraception             |                 |
| Obstetric History   |           |                           |                 |
| Examination :   |           |                           |                 |
|   | Breast    |                           |                 |
|   | Abdomen   |                           |                 |
|   | P.S.      |                           |                 |
|   | P.V.      |                           |                 |
| Gynaecology Impression & Recommendation   |           |                           |                 |
| Recommendation  |           |                           |                 |
| Physician Impression  |           |                           |                 |
| <p>Generally he is fit. He can resume his normal duties.</p> <p>- Overweight = To Reduce Weight</p> <p>- Underweight = To Increase Weight</p> |           |                           |                 |
| Examined by :   |           |                           |                 |

BMI - 25.7