

Health Check up Booking Request(22E38154)

From Mediwheel <wellness@mediwheel.in>

Date Thu 11/7/2024 3:17 PM

To PHC [MH-Ghaziabad] <phc.ghaziabad@manipalhospitals.com>

Cc customercare@mediwheel.in <customercare@mediwheel.in>

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Mediwheel  
...Your wellness partner

011-41195959

Dear **Manipal Hospital**

We have received a booking request with the following details. Provide your confirmation by clicking on the Yes button.

**You confirm this booking?**      Yes                  No

**Name** : MR. KAIM JAI PRAKASH

**Contact Details** : 9711049063

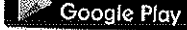
**Hospital Package Name** : Mediwheel Full Body Health Checkup Male Above 40

**Location** : NH-24,Hapur Road,Oppo. Bahmeta Village,Near Lancraft Golf Links Aparment

**Appointment Date** : 23-11-2024

Member Information		
Booked Member Name	Age	Gender
MR. KAIM JAI PRAKASH	43 year	Male

Thanks,  
Mediwheel Team  
Please Download Mediwheel App



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भारत सरकार  
Government of India

जय प्रकाश कैम  
Jai Prakash Kaim  
जन्म तिथि / DOB : 01/01/1981  
पुरुष / Male

आधार पहचान का प्रमाण है, नागरिकता का नहीं।  
Aadhaar is a proof of identity, not of citizenship.

6682 7180 3515

मेरा आधार, मेरी पहचान

Issue Date: 15/01/2014

6682 7180 3515

6682 7180 3515

*Handwritten signature in blue ink*

भारतीय विशिष्ट पहचान प्राधिकरण  
Unique Identification Authority of India

पता: S/O: मूल चंद, 494, चौधरी चंदर गली,  
कैथवाडा, गढ़ी मेंडू, उत्तर पूर्वी दिल्ली, दिल्ली,  
110053  
Address: S/O: Mool Chand, 494,  
CHAUDHARY CHANDER GALI,  
KAITHWARA, Garhi Mendu, North East  
Delhi, Delhi, 110053

Print Date: 23/08/2023

6682 7180 3515

1947 help@uidai.gov.in www.uidai.gov.in



LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,  
MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.)

Dear Sir / Madam,

**Sub: Annual Health Checkup for the employees of Bank of Baroda**

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MR. KAIM JAI PRAKASH
EC NO.	97054
DESIGNATION	BRANCH HEAD
PLACE OF WORK	BILASPUR_RAMPUR
BIRTHDATE	01-01-1981
PROPOSED DATE OF HEALTH CHECKUP	09-11-2024
BOOKING REFERENCE NO.	24D97054100120500E

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **07-11-2024** till **31-03-2025**. The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

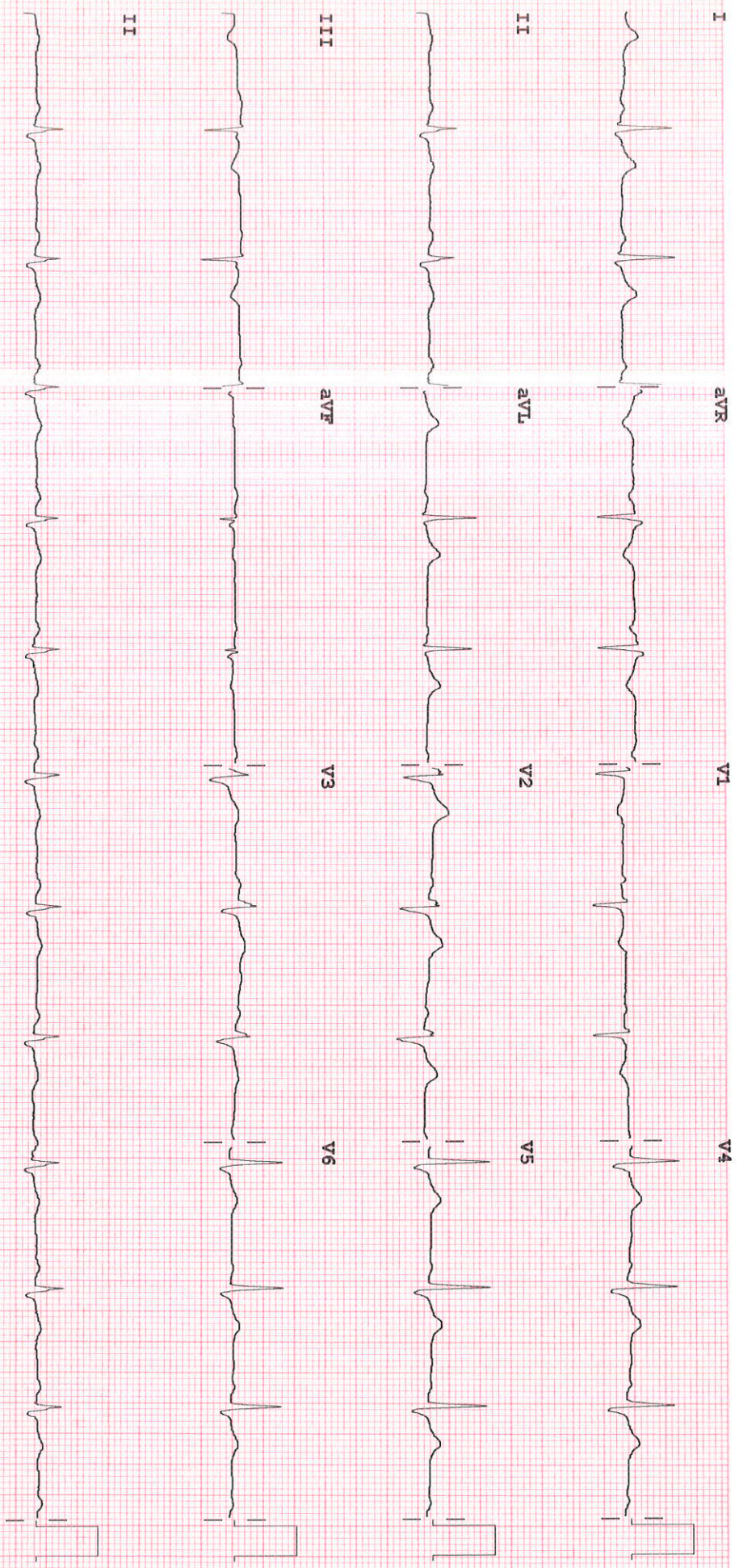
**Chief General Manager**  
**HRM & Marketing Department**  
**Bank of Baroda**

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.))

41c

- BORDERLINE ECG -

Unconfirmed Diagnosis



Dev:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 60~0.15-100 Hz

PH100B CL P?



## INVESTIGATION REPORT

Patient Name	MR JAI PRAKASH KAIM	Location	Ghaziabad
Age/Sex	43 Year(s)/male	Visit No	: V0000000001-GHZZ
MRN No	MH014254819	Order Date	:09/11/2024
Ref. Doctor	H/C	Report Date	:09/11/2024

### Echocardiography

#### Final Interpretation

1. No RWMA, LVEF=60%.
2. Normal CCD.
3. Normal MIP.
4. No MR, No AR.
5. No TR, Normal PASP.
6. No intracardiac clot/vegetation/pericardial pathology.
7. IVC normal

#### Chambers & valves:

- **Left Ventricle:** It is normal sized.
- **Left Atrium:** It is normal sized.
- **Right Atrium:** It is normal sized.
- **Right Ventricle:** It is normal sized.
- **Aortic Valve:** It appears normal.
- **Mitral Valve:** Opens normally. Subvalvular apparatus appear normal.
- **Tricuspid Valve:** It appears normal.
- **Pulmonic Valve:** It appears normal.
- **Main Pulmonary artery & its branches:** Appear normal.
- **Pericardium:** There is no pericardial effusion.

#### Description:

- LV is normal size with normal contractility.

Manipal Hospital, Ghaziabad

NH - 24, Hapur Road, Ghaziabad, Uttar Pradesh - 201 002

P: 0120-3535353

Manipal Health Enterprises Private Limited

CIN: U85110KA2003PTC033055

Regd. Off. The Annexe, #98/2, Rustom Bagh, Off. HAL Airport Road, Bengaluru - 560 017

P +91 80 4936 0300 Einfo@manipalhospitals.com www.manipalhospitals.com



## INVESTIGATION REPORT

Patient Name	MR JAI PRAKASH KAIM	Location	Ghaziabad
Age/Sex	43 Year(s)/male	Visit No	: V000000001-GHZZ
	<b>MH014254819</b>	Order Date	09/11/2024
Ref. Doctor	: H/C	Report Date	09/11/2024

### Echocardiography

#### Measurements (mm):

	Observed values	Normal values
Aortic root diameter	25	20-36 (22mm/M <sup>2</sup> )
Aortic valve opening	19	15-26
Left atrium size	28	19-40

	End Diastole	End Systole	Normal Values
Left ventricle size	45	28	(ED=37-53:Es=22-40)
Interventricular septum	10	12	(ED=6-12)
Posterior wall thickness	09	11	(ED=5-10)

LV Ejection Fraction (%)	60%	55%-80%
HR		

#### Color & Doppler evaluation

Valve	Velocity(cm/s)	Regurgitation
Mitral	E/A-85/66 DT-	Nil
Aortic	111	Nil
Tricuspid	28	Nil
Pulmonary	66	Nil

  
**Dr. Bhupendra Singh**  
 MD, DM (CARDIOLOGY), FACC  
 Sr. Consultant Cardiology

**Dr. Sudhanshu Mishra**  
 Cardiology Registrar

Manipal Hospital, Ghaziabad

NH - 24, Hapur Road, Ghaziabad, Uttar Pradesh - 201 002  
 P: 0120-3535353

**Dr. Abhishek Singh**  
 MD, DNB (CARDIOLOGY), MNAMS  
 Sr. Consultant Cardiology

**Dr. Geetesh Govil**  
 MD, D.Card, PGDCC, MAAC, M.Med, MIMA, FAGE  
 Jr. Consultant Cardiology

Page 2 of 2

Manipal Health Enterprises Private Limited

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P +91 80 4936 0300 [Info@manipalhospitals.com](mailto:Info@manipalhospitals.com) [www.manipalhospitals.com](http://www.manipalhospitals.com)







**LABORATORY REPORT**

<b>Name</b>	: MR JAI PRAKASH KAIM	<b>Age</b>	: 43 Yr(s) Sex :Male
<b>Registration No</b>	: MH014254819	<b>Lab No</b>	: 202411001728
<b>Patient Episode</b>	: H18000003195	<b>Collection Date</b>	: 09 Nov 2024 09:48
<b>Referred By</b>	: HEALTH CHECK MGD	<b>Reporting Date</b>	: 09 Nov 2024 16:08
<b>Receiving Date</b>	: 09 Nov 2024 09:48		

**CLINICAL PATHOLOGY**

**ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine**

**MACROSCOPIC DESCRIPTION**

Colour	PALE YELLOW	(Pale Yellow - Yellow)
Appearance	CLEAR	
Reaction[pH]	5.0	(4.6-8.0)
Specific Gravity	1.015	(1.003-1.035)

**CHEMICAL EXAMINATION**

Protein/Albumin	NEGATIVE	(NEGATIVE)
Glucose	NIL	(NIL)
Ketone Bodies	Negative	(NEGATIVE)
Urobilinogen	Normal	(NORMAL)

**MICROSCOPIC EXAMINATION (Automated/Manual)**

Pus Cells	1-2 /hpf	(0-5/hpf)
RBC	NIL	(0-2/hpf)
Epithelial Cells	NIL /hpf	
CASTS	NIL	
Crystals	NIL	
Bacteria	NIL	
OTHERS	NIL	



**LABORATORY REPORT**

**Name** : MR JAI PRAKASH KAIM  
**Registration No** : MH014254819  
**Patient Episode** : H18000003195  
**Referred By** : HEALTH CHECK MGD  
**Receiving Date** : 09 Nov 2024 09:01

**Age** : 43 Yr(s) Sex : Male  
**Lab No** : 202411001728  
**Collection Date** : 09 Nov 2024 09:01  
**Reporting Date** : 09 Nov 2024 14:02

**BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>Glycosylated Hemoglobin</b> Specimen: EDTA HbA1c (Glycosylated Hemoglobin) Method: HPLC	5.3	%	[0.0-5.6]
As per American Diabetes Association (ADA) HbA1c in % Non diabetic adults >= 18years <5.7 Prediabetes (At Risk ) 5.7-6.4 Diagnosing Diabetes >= 6.5			
Estimated Average Glucose (eAG)	105	mg/dl	

Comments : HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long term glycemic control.

**Serum LIPID PROFILE**

<b>Serum TOTAL CHOLESTEROL</b> Method:Oxidase,esterase, peroxide	248 #	mg/dl	[<200] Moderate risk:200-239 High risk:>240
TRIGLYCERIDES (GPO/POD)	140	mg/dl	[<150] Borderline high:151-199 High: 200 - 499 Very high:>500
HDL- CHOLESTEROL Method : Enzymatic Immunoimhibition	48	mg/dl	[35-65]
VLDL- CHOLESTEROL (Calculated)	28	mg/dl	[0-35]
<b>CHOLESTEROL, LDL, CALCULATED</b>	172.0 #	mg/dl	[<120.0] Near/ Borderline High:130-159 High Risk:160-189

Above optimal-100-129



**LABORATORY REPORT**

Name : MR JAI PRAKASH KAIM  
Registration No : MH014254819  
Patient Episode : H18000003195  
Referred By : HEALTH CHECK MGD  
Receiving Date : 09 Nov 2024 09:01

Age : 43 Yr(s) Sex : Male  
Lab No : 202411001728  
Collection Date : 09 Nov 2024 09:01  
Reporting Date : 09 Nov 2024 13:54

**BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
T.Chol/HDL.Chol ratio(Calculated)	5.2		<4.0 Optimal 4.0-5.0 Borderline >6 High Risk
LDL.CHOL/HDL.CHOL Ratio(Calculated)	3.6		<3 Optimal 3-4 Borderline >6 High Risk

Note:  
Reference ranges based on ATP III Classifications.

Lipid profile is a panel of blood tests that serves as initial broad medical screening tool for abnormalities in lipids, the results of this tests can identify certain genetic diseases and determine approximate risks for cardiovascular disease, certain forms of pancreatitis and other diseases

**KIDNEY PROFILE**

Specimen: Serum			
<b>UREA</b>	44.8 #	mg/dl	[15.0-40.0]
Method: GLDH, Kinatic assay			
<b>BUN, BLOOD UREA NITROGEN</b>	20.9 #	mg/dl	[8.0-20.0]
Method: Calculated			
<b>CREATININE, SERUM</b>	1.18	mg/dl	[0.70-1.20]
Method: Jaffe rate-IDMS Standardization			
<b>URIC ACID</b>	7.0	mg/dl	[4.0-8.5]
Method:uricase PAP			
<b>SODIUM, SERUM</b>	132.70 #	mmol/L	[136.00-144.00]
<b>POTASSIUM, SERUM</b>	4.48	mmol/L	[3.60-5.10]
<b>SERUM CHLORIDE</b>	100.8 #	mmol/L	[101.0-111.0]
Method: ISE Indirect			



**LABORATORY REPORT**

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**Referred By** : HEALTH CHECK MGD  
**Receiving Date** : 09 Nov 2024 09:01

**Age** : 43 Yr(s) Sex :Male  
**Lab No** : 202411001728  
**Collection Date** : 09 Nov 2024 09:01  
**Reporting Date** : 09 Nov 2024 13:54

**BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
eGFR (calculated)	75.1	ml/min/1.73sq.m	[>60.0]
<p>Technical Note eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to 1.73 sq.m BSA and is not applicable to individuals below 18 years. eGFR tends to be less accurate when Serum Creatinine estimation is indeterminate e.g. patients at extremes of muscle mass, on unusual diets etc, and samples with severe Hemolysis Icterus / Lipemia.</p>			

**LIVER FUNCTION TEST**

BILIRUBIN - TOTAL Method: D P D	0.59	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT Method: DPD	0.10	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN (SERUM) Method: Calculation	0.49	mg/dl	[0.10-0.90]
TOTAL PROTEINS (SERUM) Method: BIURET	6.80	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) Method: BCG	4.09	g/dl	[3.50-5.20]
GLOBULINS (SERUM) Method: Calculation	2.70	gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO Method: Calculation	1.51		[1.00-2.50]
AST (SGOT) (SERUM) Method: IFCC W/O P5P	41.00 #	U/L	[0.00-40.00]



**LABORATORY REPORT**

Name : MR JAI PRAKASH KAIM  
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Patient Episode : H18000003195  
Referred By : HEALTH CHECK MGD  
Receiving Date : 09 Nov 2024 09:01

Age : 43 Yr(s) Sex : Male  
Lab No : 202411001728  
Collection Date : 09 Nov 2024 09:01  
Reporting Date : 09 Nov 2024 13:55

**BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
ALT(SGPT) (SERUM) Method: IFCC W/O P5P	54.50	U/L	[17.00-63.00]
Serum Alkaline Phosphatase Method: AMP BUFFER IFCC)	110.0 #	IU/L	[32.0-91.0]
GGT	47.0	U/L	[7.0-50.0]

Liver function test aids in diagnosis of various pre hepatic, hepatic and post hepatic causes of dysfunction like hemolytic anemia's, viral and alcoholic hepatitis and cholestasis of obstructive causes.

The test encompasses hepatic excretory, synthetic function and also hepatic parenchymal cell damage. LFT helps in evaluating severity, monitoring therapy and assessing prognosis of liver disease and dysfunction.

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

*Alka*

**Dr. Alka Dixit Vats**  
Consultant Pathologist



**LABORATORY REPORT**

Name : MR JAI PRAKASH KAIM  
Registration No : MH014254819  
Patient Episode : H18000003195  
Referred By : HEALTH CHECK MGD  
Receiving Date : 09 Nov 2024 09:01

Age : 43 Yr(s) Sex : Male  
Lab No : 202411001729  
Collection Date : 09 Nov 2024 09:01  
Reporting Date : 09 Nov 2024 14:02

**BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>GLUCOSE-Fasting</b> Specimen: Plasma GLUCOSE, FASTING (F) Method: Hexokinase	96.0	mg/dl	[70.0-110.0]

Normally, the glucose concentration in extracellular fluid is closely regulated so that a source of energy is readily available to tissues and so that no glucose is excreted in the urine.

Increased in Diabetes mellitus, Cushing's syndrome (10-15%), chronic pancreatitis (30%).  
Drugs corticosteroids, phenytoin, estrogen, thiazides

Decreased in Pancreatic islet cell disease with increased insulin, insulinoma, adrenocortical insufficiency, hypopituitarism, diffuse liver disease, malignancy(adrenocortical, stomach, fibro sarcoma), infant of a diabetic mother enzyme deficiency diseases(e.g.galactosemia),  
Drugs-  
insulin, ethanol, propranolol, sulfonyleureas, tobutamide, and other oral hypoglycemic agents.

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

**Dr. Alka Dixit Vats**  
Consultant Pathologist



**LABORATORY REPORT**

Name : MR JAI PRAKASH KAIM  
Registration No : MH014254819  
Patient Episode : H18000003195  
Referred By : HEALTH CHECK MGD  
Receiving Date : 09 Nov 2024 12:42

Age : 43 Yr(s) Sex : Male  
Lab No : 202411001730  
Collection Date : 09 Nov 2024 12:42  
Reporting Date : 09 Nov 2024 15:33

**BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>PLASMA GLUCOSE</b> Specimen: Plasma GLUCOSE, POST PRANDIAL (PP), 2 HOURS Method: Hexokinase	107.0	mg/dl	[80.0-140.0]

Note:  
Conditions which can lead to lower postprandial glucose levels as compared to fasting glucose are excessive insulin release, rapid gastric emptying, brisk glucose absorption, post exercise

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

**Dr. Alka Dixit Vats**  
Consultant Pathologist



**LABORATORY REPORT**

Name : MR JAI PRAKASH KAIM  
Registration No : MH014254819  
Patient Episode : H18000003195  
Referred By : HEALTH CHECK MGD  
Receiving Date : 09 Nov 2024 09:01

Age : 43 Yr(s) Sex : Male  
Lab No : 202411001728  
Collection Date : 09 Nov 2024 09:01  
Reporting Date : 09 Nov 2024 13:55

**BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
			Specimen Type : Serum
THYROID PROFILE, Serum			
T3 - Triiodothyronine (ELFA)	1.130	ng/ml	[0.610-1.630]
T4 - Thyroxine (ELFA)	7.380	ug/ dl	[4.680-9.360]
Thyroid Stimulating Hormone	4.870	μIU/mL	[0.250-5.000]

**NOTE:**

TSH stimulates the thyroid gland to produce the main thyroid hormones T3 and T4. In cases of hyperthyroidism TSH level is severely inhibited and may even be undetectable. In rare forms of high-origin hyperthyroidism, the TSH level is not reduced, since the negative-feedback control of the thyroid hormones has no effect.

In cases of primary hypothyroidism, TSH levels are always much higher than normal and thyroid hormone levels are low.

The TSH assay aids in diagnosing thyroid or hypophysial disorders.

The T4 assay aids in assessing thyroid function, which is characterized by a decrease in thyroxine levels in patients with hypothyroidism and an increase in patients with hyperthyroidism.

The test has been carried out in Fully Automated Immunoassay System VIDAS using ELFA (Enzyme Linked Fluorescence Assay) technology.



Name : MR JAI PRAKASH KAIM  
Registration No : MH014254819  
Patient Episode : H1800003195  
Referred By : HEALTH CHECK MGD  
Receiving Date : 09 Nov 2024 09:01

Age : 43 Yr(s) Sex : Male  
Lab No : 202411001728  
Collection Date : 09 Nov 2024 09:01  
Reporting Date : 09 Nov 2024 16:18

**BLOOD BANK**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
------	--------	------	-------------------------------

Blood Group & Rh Typing (Agglutination by gel/tube technique) Specimen-Blood  
Blood Group & Rh typing O Rh(D) Positive

**Technical note:**

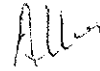
ABO grouping and Rh typing is done by cell and serum grouping by microplate / gel technique.

Page 3 of 3

**NOTE:**

# - Abnormal Values

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



**Dr. Alka Dixit Vats**  
Consultant Pathologist

**RADIOLOGY REPORT**

NAME	Jai prakash KAIM	STUDY DATE	09/11/2024 9:37AM
AGE / SEX	43 y / M	HOSPITAL NO.	MH014254819
ACCESSION NO.	R8548204	MODALITY	US
REPORTED ON	09/11/2024 9:58AM	REFERRED BY	HEALTH CHECK MGD

**USG ABDOMEN & PELVIS FINDINGS**

LIVER: appears enlarged in size (measures 160 mm) but normal in shape and shows diffuse increase in liver echotexture, in keeping with diffuse grade I fatty infiltration. Rest normal.

SPLEEN: Spleen is normal in size (measures 106 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 9.3 mm.

COMMON BILE DUCT: Appears normal in size and measures 3.5 mm.

IVC, HEPATIC VEINS: Normal.

BILIARY SYSTEM: Normal.

GALL BLADDER: Gall bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.

PANCREAS: Pancreas is normal in size, shape and echotexture. Rest normal.

KIDNEYS: Bilateral kidneys are normal in size, shape and echotexture. Cortico-medullary differentiation is maintained. Rest normal.

Right Kidney: measures 94 x 42 mm.

Left Kidney: measures 96 x 53 mm.

PELVI-CALYCEAL SYSTEMS: Compact.

NODES: Not enlarged.

FLUID: Nil significant.

URINARY BLADDER: Urinary bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.

PROSTATE: Prostate is normal in size, shape and echotexture. It measures 33 x 32 x 29 mm with volume 11 cc.

Prostatic parenchymal calcification is seen. Rest normal.

SEMINAL VESICLES: Normal.

BOWEL: Visualized bowel loops appear normal.

**IMPRESSION**

- **Hepatomegaly with diffuse grade I fatty infiltration in liver.**

Recommend clinical correlation.



Dr. Monica Shekhawat

MBBS, DNB, CCFRG, ACFRG (Reg No MCI 11-10887)

CONSULTANT RADIOLOGIST

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

**RADIOLOGY REPORT**

NAME	Jai prakash KAIM	STUDY DATE	09/11/2024 9:17AM
AGE / SEX	43 y / M	HOSPITAL NO.	MH014254819
ACCESSION NO.	R8548202	MODALITY	CR
REPORTED ON	09/11/2024 10:19AM	REFERRED BY	HEALTH CHECK MGD

**X-RAY CHEST – PA VIEW****FINDINGS:**

Lung fields appear normal on both sides.  
Cardia appears normal.  
Both costophrenic angles appear normal.  
Both domes of the diaphragm appear normal.  
Bony cage appear normal.

**IMPRESSION:**

No significant abnormality noted.



Dr. Rahul Suhas Whatkar  
MBBS,DMRD,DNB Radiology Reg No. MMC 2009/04/1858  
CONSULTANT RADIOLOGIST

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



**HEALTH CHECK RECORD**

Hospital No: MH014254819	Visit No: H18000003195
Name: MR JAI PRAKASH KAIM	Age/Sex: 43 Yrs/Male
Doctor Name: DR.SHISHIR NARAIN	Specialty: HC SERVICE MGD
Date: 09/11/2024 01:35PM	

OPD Notes :

PRESENT OPHTHALMIC COMPLAINS - ROUTINE EYE CHECK UP  
SYSTEMIC/ OPHTHALMIC HISTORY - N/C  
NO FAMILY H/O GLAUCOMA

EXAMINATION DETAILS	RIGHT EYE	LEFT EYE
VISION	6/6	6/6
CONJ	NORMAL	NORMAL
CORNEA	CLEAR	CLEAR
ANTERIOR CHAMBER/ IRIS	N	N
LENS		
OCULAR MOVEMENTS	FULL	FULL
NCT	16	15
FUNDUS EXAMINATION		
A) VITREOUS		
B) OPTIC DISC	C:D 0.2	C:D 0.3
C) MACULAR AREA	FOVEAL REFLEX PRESENT FOVEAL REFLEX PRESENT	

**POWER OF GLASS**  
Right eye: -2.75 Dsp -6/6  
Left eye: -2.50 Dsp -6/6  
NEAR ADD BE +1.25 DSPH N/6

DIAGNOSIS: DRY EYES

ADVISE / TREATMENT  
E/D AQUALINA 4 TIMES DAILY BE  
REVIEW AFTER 6 MONTHS OR SOS

DR.SHISHIR NARAIN  
Reg. No.: 9538