

**TO WHOM SO EVER IT MAY CONCERN**

THIS IS TO DECLARE THAT MR. LAL KUMAR SINHA AGE 43 YEAR/MALE HAS UNDERGONE MEDICAL EXAMINATION ON 07.09.2024 DURING HIS GENERAL EXAMINATION NO ABNORMALITIES WERE DETECTED.

HE WAS FULLY ORIENTED , NO DISABILITY WITH NORMAL GAIT.

NO SIGNS OF PALPABLE OR ENLARGED LYMPH NODES.

NO GROWTH / SWELLING OBSERVED.

HIS VITALS PARAMETERS ARE HEIGHT: 170 cms,WEIGHT: 70 kg, BP: 130/80 mmhg, HR: 61 bpm, BMI: 24.2

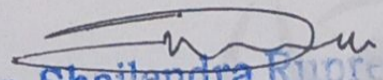
HIS BOWEL HABITS ARE REGULAR. NO BURNING DURING MICTURITION.

ALL REFLEXES WERE NORMAL.

NO ABNORMALITIES WERE DETECTED DURING PALPATION, PERCUSSION AND AUSCULTATION OF VISCERA.

HE DOES NOT CARRY ANY COMMUNICABLE/TRANSFERRABLE DISEASE.

HE APPEARS TO BE **PHYSICALLY FIT** AND WE WISH HIM ALL THE BEST.

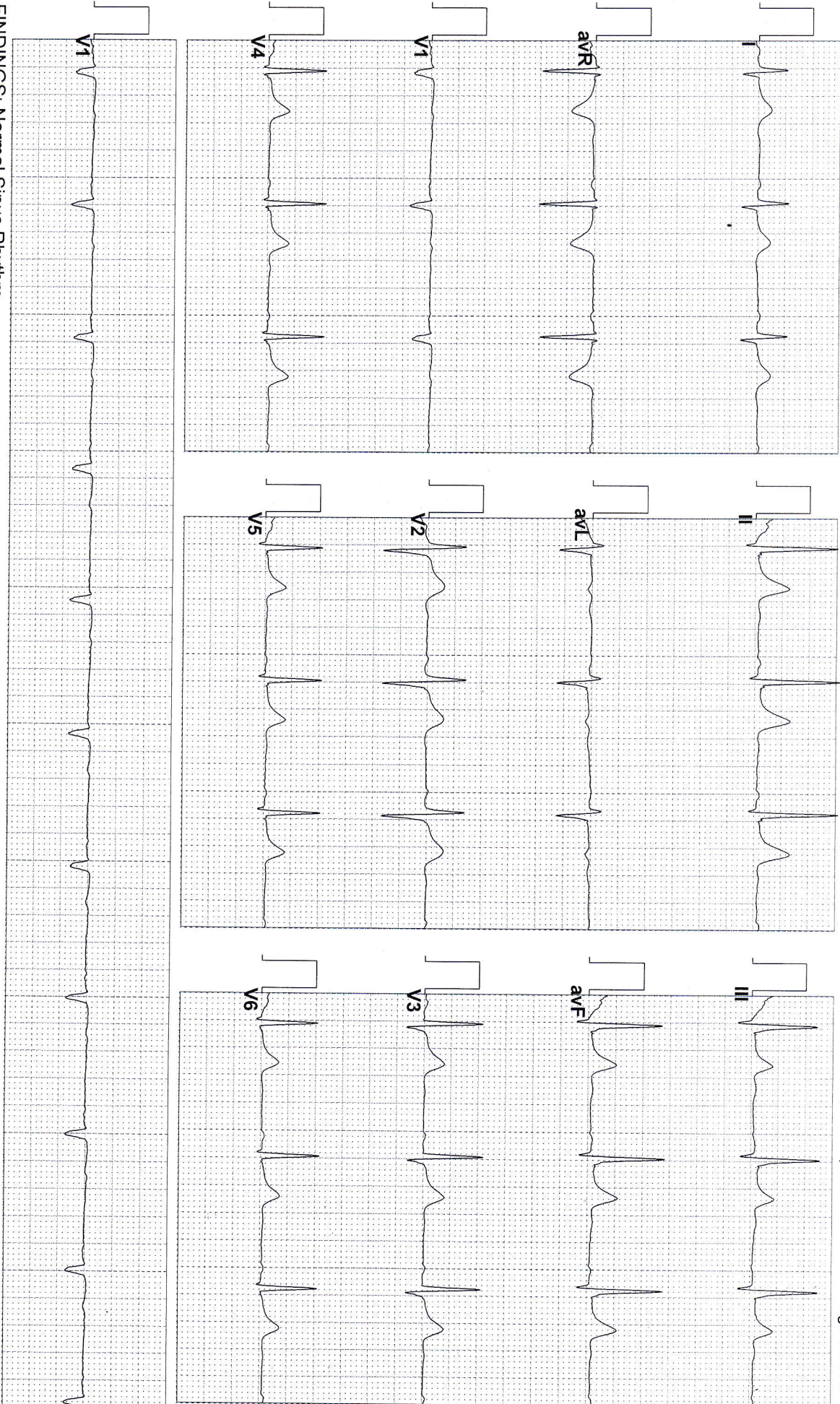
  
Dr. Shailendra Ruprela  
MD , Medicine  
Reg. No.: CGMC-511230



**DR. RUPRELA NMS DIAGNOSTICS AND IMAGING FAFADIH BILASPUR ROAD RAIPUR**

5476551499: MR LAL KUMAR SINHA; Male; 43 Yrs 00 Mths  
Ref.: ACROFEMI HEALTH; Date : 07-09-2024; Time : 10:30:29

Ht : 170 Cms; Wt: 70 Kgs ; BP : 130/80 ; HR : 61 bpm  
Notch : 50 Hz ; Filter: 0.05Hz - 100 Hz ; Gain: 10.0 mm/mV ; Sweep : 25 mm/s



**FINDINGS: Normal Sinus Rhythm**  
Vent Rate : 61 bpm PR Interval : 132 ms QRS Duration: 94 ms QT/QTc Int : 399/405  
P-QRS-T axis: 29.77.61 (Deg)  
Comments :

**Dr. Shailendra Ruprela**  
MD, Medicine  
Reg. No.: CGMC-511/2006



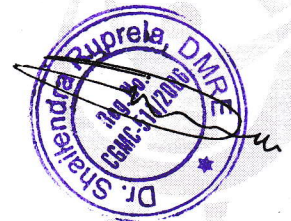


**NAME : MR.LAL KUMAR SINHA**  
**REF: BY: ACROFEMI**

**AGE :43 Y/M**  
**DATE : 07.09.2024**

**X-RAY CHEST PA VIEW**

- The lungs on the either side show equal translucency.
- The peripheral pulmonary vasculature is normal.
- No focal lung lesion is seen.
- The pleural spaces are normal.
- Both hila are normal in size, have equal density and bear normal relationship.
- The heart and trachea are central in position and no mediastinal abnormality is visible.
- The cardiac size is normal.
- The domes of the diaphragms are normal in position, and show smooth outline.
- **IMPRESSION** : No evidence of pulmonary, pleural or cardiac pathology is noted.
- radiograph of chest is within normal limits.





**NAME : MR .LAL KUMAR SINHA**

**AGE : 43Y/SEX/M**

**Ref. By : ACROFEMI HEALTH**

**DATE : 07.09.2024**

Complain Of: No Complaints

Ocular H/O: Nil

Family Ocular H/O: Nil

Drug Allergy (If Any): Not Aware

**DISTANCE VISION:** RE 6/9 LE 6/9  
(With / without PGP)

**NEAR VISION:** RE N/6 LE N/6  
(With / without PGP)

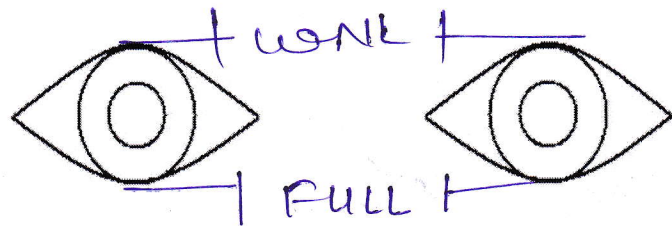
**REFRACTION:**

EYE	SPH	CYL	AXIS	ADD	VISION
RE	-0.75	_____	_____	6/6	N/6
LE	-0.75	_____	_____	6/6	N/6

**EXTERNAL EYE EXAMINATION:**

RE

LE




**EOM:** NAD

**SQUINT EVALUATION:** ABSENT

**NYSTAGMUS:** ABSENT

**COLOR VISION TEST:** NORMAL

**NYCTALOPIA (Night Blindness):** ABSENT

  
**Dr. Vaibhav Sharma**  
**Ophthalmologist**  
**Reg. No. MCI/1037782**



VID :- E/14512

PID No. :- 20247917129981

Name :- Mr. Lal Kumar Sinha

Age/Sex :- 43 Y / M

Ref. By. :- ARCOFEMI HEALTHCARE LTD

Sample Received on/at :

07/09/2024 9:34AM

Reported on/at

07/09/2024 1:17PM

### BIOCHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Range
<b>Bilirubin Total, Direct &amp; Indirect</b>			
<b>Bilirubin (Total)</b> (Serum, Diazo)	0.69	mg/dL	<1.0
<b>Bilirubin (Direct)</b> (Serum, Diazo)	0.15	mg/dL	0 - 0.3
<b>Bilirubin (Indirect)</b> (Serum, Calculated)	0.54	mg/dL	UPTO 1.0
<b>BLOOD SUGAR F</b>			
Glucose Fasting	93	mg/dl	60 - 110
<b>BLOOD SUGAR PP</b>			
Glucose PP	95	mg/dl	70 - 140
<b>Creatinine</b>			
<b>Creatinine</b> (Serum, Jaffe)	0.92	mg/dL	0.57 - 1.4
<b>SGPT</b>			
<b>SGPT (ALT)</b> (Serum, Enzymatic)	26	U/L	10 - 40
<b>Bun Creatinine Ratio</b>			
<b>BUN-Blood Urea Nitrogen</b> (Serum, Urease)	11.3	mg/dL	9 - 20.0
<b>Creatinine</b> (Serum, Jaffe)	0.92	mg/dL	0.57 - 1.4
Ratio	12.8		

*The performance of the Roche cobas c 111 was evaluated using sigma metrics. The calculations were performed using James O. Westgard methodology.[2] This approach uses an assays total allowable error (TEa), accuracy (bias), and precision (SD) to calculate a Sigma metric to characterize the performance of that assay.*

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

**Dr. Avishesh Kumar Singh**  
M.D. (Pathologist)



VID :- E/14512

PID No. :- 20247917129981

Name :- Mr. Lal Kumar Sinha

Age/Sex :- 43 Y / M

Ref. By. :- ARCOFEMI HEALTHCARE LTD

Sample Received on/at :

07/09/2024 9:34AM

Reported on/at

07/09/2024 1:17PM

### CLINICAL PATHOLOGY

Investigation	Observed Value	Unit	Biological Reference Range
<b>URINE R/M</b>			
<b><u>Physical Examination</u></b>			
Specific Gravity	1.020		1.003-1.030
Appearance	Clear		Clear
Colour	Pale Yellow		Pale Yellow
pH (Reaction)	Acidic		Acidic
Glucose	NIL		NIL
<b><u>Microscopic Examination</u></b>			
PUS CELLS	1-2	/hpf	0-5
Epithelial Cells	1-2	/hpf	0-5
RBC	Absent	/hpf	Absent
Bacteria	Absent		Absent
Crystals	Absent		Absent
Casts	Absent		Absent
<b><u>Chemical Examination</u></b>			
Protein	NIL		NIL

Test Done by Urisys 1100 (ROCHE) Fully Automatic.

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

Dr. Avishesh Kumar Singh  
M.D. (Pathologist)



VID :- E/14512

PID No. :- 20247917129981

Name :- Mr. Lal Kumar Sinha

Age/Sex :- 43 Y / M

Ref. By. :- ARCOFEMI HEALTHCARE LTD

Sample Received on/at :

07/09/2024 9:34AM

Reported on/at

07/09/2024 1:17PM

### Complete Blood Count (Haemogram)

Investigation	Observed Value	Unit	Biological Reference Range
<b>CBC</b>			
<b><u>Erythrocytes</u></b>			
Haemoglobin (Hb)	13.2	gm/dL	12.5 - 16.5
Erythrocyte (RBC) Count	4.73	mill/cu.mm	4.2 - 5.6
PCV (Packed Cell Volume)	42.7	%	36 - 47
MCV (Mean Corpuscular Volume)	90	fl	78 - 95
MCH (Mean Corpuscular Hb)	27.9	pg	26 - 32
MCHC (Mean Corpuscular Hb Concn.)	<b>30.9</b>	g/dL	32 - 36
RDW (Red Cell Distribution Width)	<b>15.2</b>	%	11.5 - 14
<b><u>Leucocytes</u></b>			
Total Leucocytes (WBC) Count	5600	cells/cu.mm	4000 - 11000
Neutrophils	50	%	40 - 75
Lymphocytes.	<b>43</b>	%	20 - 40
Monocytes	05	%	2-10
Eosinophils	02	%	1-6
Basophils	00	%	0 - 1
<b><u>Platelets-</u></b>			
Platelet count	<b>123</b>	x10 <sup>9</sup> /L	150 - 450
MPV (Mean Platelet Volume)	6.8	fL.	6 - 9.5
PCT ( Platelet Haematocrit)	0.083	%	0.15 - 0500
PDW (Platelet Distribution Width)	16.4	%	11 - 18

EDTA Whole Blood - Tests done on Automated ABX Micros ES60(HORIBA) Cell Counter. WBC, RBC & Platelet count by impedance method, WBC differential by VCS technology & other parameters calculated) All abnormal Haemograms are reviewed & confirmed microscopically. Differential count is based on approximately 10,000 cells.

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

**Dr. Avishesh Kumar Singh**  
M.D. (Pathologist)





VID :- E/14512

PID No. :- 20247917129981

Name :- Mr. Lal Kumar Sinha

Age/Sex :- 43 Y / M

Ref. By. :- ARCOFEMI HEALTHCARE LTD

Sample Received on/at :

07/09/2024 9:34AM

Reported on/at

07/09/2024 1:17PM

### Hematology

Investigation	Observed Value	Unit	Biological Reference Range
<b>Blood Group &amp; RH Type Screening</b>			
ABO Group	"O"		
Rh Type	"POSITIVE"		

Method: Column agglutination technology (CAT) is an automated. System for blood grouping which is superior in sensitivity to conventional tube method.

### **ESR**

ESR - Erythrocyte Sedimentation Rate (Citrate Blood) Method: Westergren	15	mm at 1hr	0 - 15
---	----	-----------	--------

#### Interpretation:

1. It indicates presence and intensity of an inflammatory process, never diagnostic of a specific disease. Changes are more significant than a single abnormal test.
2. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis, polymyalgia rheumatica.
3. It is also increased in pregnancy, multiple myeloma.

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

**Dr. Avishesh Kumar Singh**  
M.D. (Pathologist)