





TMT INVESTIGATION REPORT

Patient Name : Mr Abhishek KUMAR

Location

: Ghaziabad

Age/Sex

: 39Year(s)/male

Visit No

: V0000000001-GHZB

MRN No

MH010911685

Order Date

: 12/04/2023

Ref. Doctor : Dr. ABHISHEK SINGH

Report Date

: 12/04/2023

Protocol

: Bruce

MPHR

: 181BPM

Duration of exercise

: 7min 48sec

85% of MPHR

: 153BPM

Reason for termination : THR achieved

Peak HR Achieved : 179BPM

Blood Pressure (mmHg) : Baseline BP : 134/84mmHg

Peak BP

% Target HR

: 98%

: 148/90mmHg

METS : 9.7METS

STAGE	TIME (min)	H.R (bpm)	BP (mmHg)	SYMPTOMS	ECG CHANGES	ARRHYTHMIA
PRE- EXC.	0:00	67	134/84	Nil	No ST changes seen	Nil
STAGE 1	3:00	138	140/84	Nil	No ST changes seen	Nil
STAGE 2	3:00	166	148/90	Nil	No ST changes seen	Nil
STAGE 3	1:48	179	148/90	Nil	No ST changes seen	Nil
RECOVERY	3:02	104	140/90	Nil	No ST changes seen	Nil

COMMENTS:

- No ST changes in base line ECG.
- No ST changes during exercise and recovery.
- Normal chronotropic response.
- Normal blood pressure response.
- Good effort tolerance.

IMPRESSION:

Treadmill test is negative for exercise induced reversible myocardial ischemia.

Dr. Bhupendra Singh

MD, DM (CARDIOLOGY), FACC MD, DNB (CARDIOLOGY), MNAMS MD Sr. Consultant Cardiology

Dr. Abhishek Singh

Dr. Sudhanshu Mishra

Sr.Consultant Cardiology

Cardiology Registrar

Manipal Hospital, Ghaziabad

NH - 24, Hapur Road, Opp. Bahmeta Village, Ghaziabad, Uttar Pradesh - 201 002 P: 0120-616 5666

Page 1 of 2

Manipal Health Enterprises Private Limited

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LIFE'S ON

RADIOLOGY REPORT

Name	Abhishek KUMAR	Modality	DX
Patient ID	MH010911685	Accession No	R5404861
Gender/Age	M / 39Y 9M 14D	Scan Date	12-04-2023 10:48:50
Ref. Phys	Dr. HEALTH CHECK MGD	Report Date	12-04-2023 12:17:27

XR- CHEST PA VIEW

FINDINGS:

LUNGS: Normal. TRACHEA: Normal. CARINA: Normal.

RIGHT AND LEFT MAIN BRONCHI: Normal.

PLEURA: Normal. HEART: Normal.

RIGHT HEART BORDER: Normal. LEFT HEART BORDER: Normal. PULMONARY BAY: Normal. PULMONARY HILA: Normal.

AORTA: Normal.

THORACIC SPINE: Normal.

OTHER VISUALIZED BONES: Normal. VISUALIZED SOFT TISSUES: Normal.

DIAPHRAGM: Normal.

VISUALIZED ABDOMEN: Normal. VISUALIZED NECK: Normal.

IMPRESSION:

-No significant abnormality noted.

Recommend clinical correlation.

Dr. Prabhat Prakash Gupta,

MBBS, DNB, MNAMS, FRCR(I)

Consultant Radiologist, Reg no DMC/R/14242

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LIFE'S ON

RADIOLOGY REPORT

Name	Abhishek KUMAR	Modality	US
Patient ID	MH010911685	Accession No	R5404863
Gender/Age	M / 39Y 9M 14D	Scan Date	12-04-2023 10:56:35
Ref. Phys	Dr. HEALTH CHECK MGD	Report Date	12-04-2023 11:40:47

USG ABDOMEN & PELVIS FINDINGS

LIVER: appears normal in size (measures 119 mm) and shape but shows minimal increase in liver echotexture, in keeping with early grade I fatty infiltration. Rest normal.

SPLEEN: Spleen is normal in size (measures 84 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 8.3 mm.

COMMON BILE DUCT: Appears normal in size and measures 3.8 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 97 x 51 mm. Left Kidney: measures 92 x 48 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 28 x 26 x 25 mm with volume 9.4 cc. Rest

normal.
SEMINAL VESICLES: Normal.

BOWEL: Visualized bowel loops appear normal.

IMPRESSION

-Early grade I fatty infiltration in liver.

Recommend clinical correlation.

Dr. Prabhat Prakash Gupta,

MBBS, DNB, MNAMS, FRCR(I)

Consultant Radiologist, Reg no DMC/R/14242

MANIPAL HOSPITALS

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This report is subject to the terms and conditions mentioned overleaf

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LIFE'S ON

RADIOLOGY REPORT

	Modality	US	
Abhishek KUMAR	-	- 1050	
	Accession No	R5404863	
MH010911685		12-04-2023 10:56:35	
110	Scan Date		
	Peport Date	12-04-2023 11:40:47	
Dr. HEALTH CHECK MGD	Report Bute	12 "	
	Abhishek KUMAR MH010911685 M / 39Y 9M 14D Dr. HEALTH CHECK MGD	MH010911685 Accession No M / 39Y 9M 14D Scan Date Report Date	



LABORATORY REPORT

Name

MR ABHISHEK KUMAR

Age.

39 Yr(s) Sex :Male

Registration No

MH010911685

Lab No

202304001360

Patient Episode

H18000000440

Collection Date:

12 Apr 2023 10:36

Referred By

HEALTH CHECK MGD

Reporting Date:

12 Apr 2023 11:55

Receiving Date

ESR

12 Apr 2023 11:18

HAEMATOLOGY

	TEST	RESULT	UNIT	BIOLOGIC	AL REFERENCE INTERVAL
	COMPLETE BLOOD COUNT (AUTOMATE	D)	SPECIM	EN-EDTA Whole	Blood
	RBC COUNT (IMPEDENCE)	4.90	millio	ns/cu mm	[4.50-5.50]
	HEMOGLOBIN	12.0	g/dl		[12.0-16.0]
1	Method: cyanide free SLS-colori	metry			
1	HEMATOCRIT (CALCULATED)	39.1 #	%		[40.0-50.0]
	MCV (DERIVED)	79.8 #	fL		[83.0-101.0]
	MCH (CALCULATED)	24.5 #	pg		[27.0-32.0]
	MCHC (CALCULATED)	30.7 #	g/dl		[31.5-34.5]
	RDW CV% (DERIVED)	14.9 #	%		[11.6-14.0]
	Platelet count	173	x 10 ³	cells/cumm	[150-400]
	MPV(DERIVED)	11.2			
	WBC COUNT(TC) (IMPEDENCE)	6.69	x 10 ³	cells/cumm	[4.00-10.00]
	DIFFERENTIAL COUNT				
	(VCS TECHNOLOGY/MICROSCOPY)				[40 0 00 0]
	Neutrophils	48.0	96		[40.0-80.0]
	Lymphocytes	40.0	96		[17.0-45.0]
	Monocytes	8.0	90		[2.0-10.0]
	Eosinophils	4.0	%		[2.0-7.0]
	Basophils	0.0	96		[0.0-2.0]

20.0 #

/1sthour

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[0.0-



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39 Yr(s) Sex :Male

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MH010911685

Lab No

202304001360

Patient Episode

H18000000440

Collection Date:

12 Apr 2023 10:36

Referred By

HEALTH CHECK MGD

Reporting Date:

12 Apr 2023 17:07

Receiving Date

12 Apr 2023 11:18

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

Glycosylated Hemoglobin

Specimen: EDTA

HbAlc (Glycosylated Hemoglobin)

6.1 #

[0.0-5.6]

Method: HPLC

As per American Diabetes Association (ADA

HbAlc in %

Non diabetic adults >= 18years <5.7

Prediabetes (At Risk) 5.7-6.4 Diagnosing Diabetes >= 6.5

Estimated Average Glucose (eAG)

128

mg/dl

Comments : HbAlc 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.

ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

MACROSCOPIC DESCRIPTION

Colour

PALE YELLOW

(Pale Yellow - Yellow)

Appearance

CLEAR 7.0

(4.6 - 8.0)

Reaction[pH] Specific Gravity

1.010

(1.003 - 1.035)

CHEMICAL EXAMINATION

Protein/Albumin

(NEGATIVE)

Glucose

NIL

(NIL)

Ketone Bodies

Negative

(NEGATIVE)

Urobilinogen

Normal

(NORMAL)

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LABORATORY REPORT

Name

: MR ABHISHEK KUMAR

Age

39 Yr(s) Sex: Male

Registration No

MH010911685

Lab No

202304001360

Patient Episode

H18000000440

Collection Date:

12 Apr 2023 11:18

Referred By

HEALTH CHECK MGD

Reporting Date:

12 Apr 2023 11:58

Receiving Date

12 Apr 2023 11:18

CLINICAL PATHOLOGY

/hpf

MICROSCOPIC	EXAMINATION (Automated	/Manual)

Pus Cells

0-1 /hpf

(0-5/hpf)

RBC Epithelial Cells NIL

(0-2/hpf)

CASTS

NIL NIL

Crystals OTHERS

NIL NIL

Serum LIPID PROFILE

Serum TOTAL CHOLESTEROL

182

mg/dl

[<200]

Moderate risk:200-239

High risk:>240

TRIGLYCERIDES (GPO/POD)

237 #

mg/dl

[<150] Borderline high: 151-199

High: 200 - 499 Very high:>500

HDL- CHOLESTEROL Method: Enzymatic Immunoimhibition

42.0

mg/dl

[35.0-65.0]

VLDL- CHOLESTEROL (Calculated) CHOLESTEROL, LDL, CALCULATED

47 #

93.0

mg/dl

mg/dl

[0 - 35]

[<120.0] Near/

Above optimal-100-129

T.Chol/HDL.Chol ratio(Calculated)

Borderline High: 130-159 High Risk: 160-189

<4.0 Optimal

4.0-5.0 Borderline

>6 High Risk

LDL.CHOL/HDL.CHOL Ratio(Calculated)

2.2

<3 Optimal

3-4 Borderline

>6 High Risk

Note:

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12 Apr 2023 10:36

Referred By

HEALTH CHECK MGD

Reporting Date: 12 Apr 2023 11:55

Receiving Date

12 Apr 2023 11:18

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

Reference ranges based on ATP III Classifications.

KIDNEY PROFILE

Specimen: Serum			
UREA	23.0	mg/dl	[15.0-40.0]
Method: GLDH, Kinatic assay			
BUN, BLOOD UREA NITROGEN	10.7	mg/dl	[8.0-20.0]
Method: Calculated			
CREATININE, SERUM	0.82	mg/dl	[0.70-1.20]
Method: Jaffe rate-IDMS Standardization	7		
URIC ACID	6.5	mg/dl	[4.0-8.5]
Method:uricase PAP			

SODIUM, SERUM	138.80	mmol/L	[136.00-144.00]
POTASSIUM, SERUM	4.56	mmol/L	[3.60-5.10]
SERUM CHLORIDE	104.6	mmol/1	[101.0-111.0]
Method: ISE Indirect			

eGFR (calculated)

111.4

ml/min/1.73sq.m

[>60.0]

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.

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Collection Date:

12 Apr 2023 10:36

Referred By

: HEALTH CHECK MGD

Reporting Date:

12 Apr 2023 11:55

Receiving Date

: 12 Apr 2023 11:18

BIOCHEMISTRY

	TEST	RESULT	UNIT	BIOLO	OGICAL REFERENCE INTERVAL	
	LIVER FUNCTION TEST					
	BILIRUBIN - TOTAL Method: D P D	0.51	mg	/dl	[0.30-1.20]	
	BILIRUBIN - DIRECT Method: DPD	0.09	m	g/dl	[0.00-0.30]	
	INDIRECT BILIRUBIN (SERUM) Method: Calculation	0.42	m	ıg/dl	[0.10-0.90]	
	TOTAL PROTEINS (SERUM) Method: BIURET	7.40	g	m/dl	[6.60-8.70]	
	ALBUMIN (SERUM) Method: BCG	4.48	g	/dl	[3.50-5.20]	
	GLOBULINS (SERUM) Method: Calculation	2.90	g	m/dl	[1.80-3.40]	
	PROTEIN SERUM (A-G) RATIO Method: Calculation	1.53			[1.00-2.50]	
)	AST(SGOT) (SERUM) Method: IFCC W/O P5P	18.00	υ	I/L	[0.00-40.00]	
	ALT(SGPT) (SERUM) Method: IFCC W/O P5P	14.00 #	υ	I/L	[17.00-63.00]	
	Serum Alkaline Phosphatase Method: AMP BUFFER IFCC)	91.0	I	U/L	[32.0-91.0]	
	GGT	21.0			[7.0-50.0]	
					D F - C 0	

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MH010911685

Lab No

202304001360

Patient Episode

H18000000440

Collection Date:

12 Apr 2023 10:36

Referred By

HEALTH CHECK MGD

Reporting Date:

12 Apr 2023 17:09

Receiving Date

12 Apr 2023 11:18

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.

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-----END OF REPORT---

Dr. Charu Agarwal Consultant Pathologist



Name

MR ABHISHEK KUMAR

Age

39 Yr(s) Sex :Male

Registration No

MH010911685

Lab No

202304001361

Patient Episode

: H18000000440

Collection Date :

12 Apr 2023 10:36

Referred By

HEALTH CHECK MGD

Reporting Date:

12 Apr 2023 11:56

Receiving Date

: 12 Apr 2023 10:36

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

GLUCOSE-Fasting

Specimen: Plasma

GLUCOSE, FASTING (F)
Method: Hexokinase

90.0

mg/dl

[70.0-110.0]

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-----END OF REPORT-

Dr. Charu Agarwal
Consultant Pathologist



LABORATORY REPORT

Name

MR ABHISHEK KUMAR

Age

39 Yr(s) Sex : Male

Registration No.

MH010911685

Lab No

202304001362

Patient Episode

H18000000440

Collection Date:

12 Apr 2023 13:51

Referred By

: HEALTH CHECK MGD

Receiving Date

12 Apr 2023 13:51

Reporting Date: 12 Apr 2023 15:02

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

PLASMA GLUCOSE

Specimen: Plasma

GLUCOSE, POST PRANDIAL (PP), 2 HOURS

114.0

mg/dl

[80.0-140.0]

Method: Hexokinase

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

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

Dr. Alka Dixit Vats Consultant Pathologist