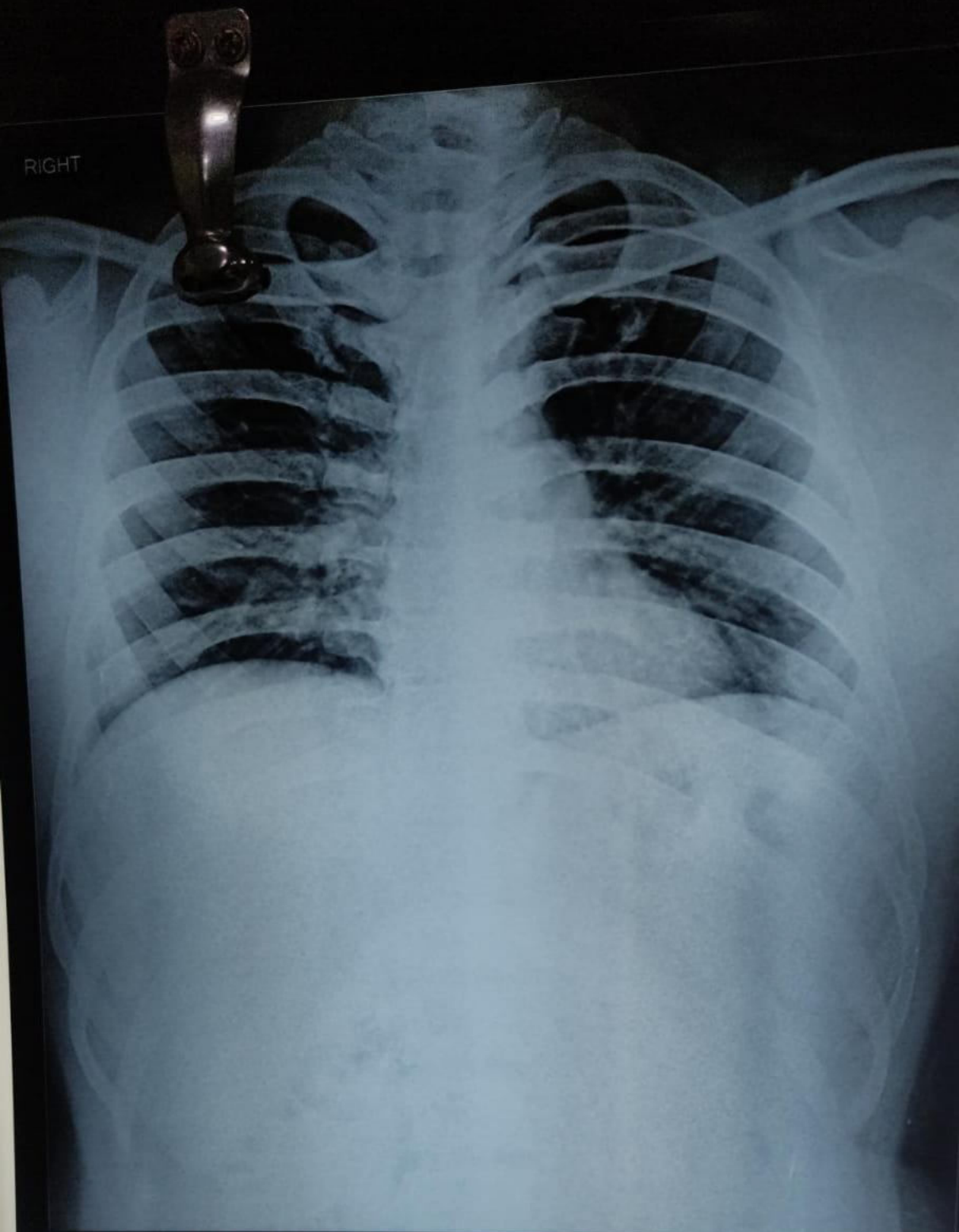


RIGHT



VIKAS KHANDELWAL 32 Y BY DR M.N.THAREJA 2201.2 M CHEST, PA 9/10/2022  
THAREJA NURSING HOME. COMPANY BAGH ROAD, ALWAR






भारत सरकार  
 Government of India

शिवम खंडेलवाल  
 Vikas Khandewal  
 जन्म तिथि (DOB): 05/05/1988  
 लिंग: MALE

6941 0170 1457  
 VID: 9108 7766 8368 0290

मेरा आधार, मेरी पहचान

*Mudra*

Dr. M. N. Thareja  
 MBBS  
 7233 RMC




भारत सरकार  
 Government of India

पता:  
 S/O श्याम लाल, 16, मुजरे वाली गली, वार्ड-29, डीप,  
 राजस्थान - 321203

Address:  
 S/O Shyam Lal, 16, mujre wali gali, ward-  
 29, Deeg, Bharatpur  
 Rajasthan - 321203

6941 0170 1457  
 VID: 9108 7766 8368 0290

1947 | [data@uidai.gov.in](http://data.uidai.gov.in) | [www.uidai.gov.in](http://www.uidai.gov.in)



# THAREJA NURSING HOME



DIGITAL X-RAY, OPG, COMPUTERISED ECG & EEG, DIAGNOSTIC  
LABORATORY EQUIPED WITH COMPUTERISED AUTO ANALYZER & CBC

1, Ram Kuteer, Company Bagh Road, ALWAR - 301001 (Raj.) Ph: 0144-2700184, 2331842

PROPOSAL NO: PKG-1000227

Patient Name **VIKAS KHANDELWAL**  
Ref. By Dr. **M. N. THAREJA**

Date **10-09-2022**  
Age **32 Yrs.**  
Sex **M**

Details of packages		Patients report	Units	Normal value
	HB	14.0	gm%	M-11.5-18, F-11.5-16.5
	TRBC	4.57	million /cu mm	M-4.0-5.5, F-3.9-5.6
	TWBC	6900	cu mm	4000-11000
DLC	Polymorphs	50	%	42-75
	Lymphocytes	45	%	20-50
	Eosinophil	05	%	1-6
	ESR	02	mm 1 <sup>st</sup> Hr.	M-0-9, F-0-20
	Platelets	333000	Lack / cu mm	1.5-4
	PCV	39.9	%	37-54
	MCV	87.3	Cubicmicrons	86-98
	MCH	30.6	Picograms	26-34
	MCHC	35.1	%	32-36
Blood Grouping & Rh Factor		<b>O Rh+Ve(Positive)</b>		
	BUN	13.0		04-20
	S.Creatinine	0.82	Mg/100ml	0.9-1.4 mg /100 ml
	HBsAg	-		
	HIV I & II	-	Elisa Method	
	HbA1C	5.2	%	4-6%
	PSA	-	Ng/ml	Less Then 4.0 Ng/ml

Details of packages		Patients report	Units	Normal value	
LFT	GGTP	21	U/L	5-60	
	SGOT	17	Units / ml	Upto 40	
	SGPT	20	Units / ml	Upto 40	
	S. Bilirubin	Total	0.6	mg%	Upto 1.2
		Direct	0.4	mg%	0-0.25
		Indirect	0.2	mg%	
		T. Protein	7.8	Gm%	6.2-8.3
		S. Albumin	4.3	Gm%	3.2-5.3
		Globulin	3.5	Gm%	
		Alkaline phosphate	102	IU/L	60 - 170
		S. Calcium	-	Gm%	8.5-10.5
		Uric Acid	-	Mg%	2.5-7 mg%
		Blood Sugar Fasting	74.0	Mg%	60-110/ mg %
		Blood Sugar PP		Mg%	Upto 160
Lipid Profile	S. Cholesterol	174.0	mg%	120-220	
	S. Triglycerides	110.0	mg/ml	Upto 170	
	HDL Cholesterol	52.0	IU/L	30 to 70	
	LDL cholesterol	100.0	IU/L	450 at 37° C	
	VLDL	22.0	mg %	Upto 35	

### Routine Urine Analysis

Physical/Chemical	Microscopic:	
Appearance	Clear	RBCs
Specific Gravity	1010	WBCs
Ph	ACIDIC	Epith. Cells
Albumin	Nil	Casts
Glucose	NIL	Crystals
Ketones	----	Bacteria
Blood	Nil	Urine for Nicotine

Signature of Technician

Signature of Doctor

This Report is not Valid for Medical Legal Purpose



# THAREJA NURSING HOME



DIGITAL X-RAY, OPG, COMPUTERISED ECG & EEG, DIAGNOSTIC  
LABORATORY EQUIPED WITH COMPUTERISED AUTO ANALYZER & CBC

1, Ram Kuteer, Company Bagh Road, ALWAR - 301001 (Raj.) Ph: 0144-2700184, 2331842

PROPOSAL NO. PKG10000227

Patient Name VIKAS KHANDELWAL

Date 10/09/2022

Age 32 Yrs.

Ref. By Dr. M. N. THAREJA

Sex M

PART - X-RAYED : X-RAY CHEST PA VIEW  
REPORT : X-RAY CHEST P.A. VIEW  
:- Chest is bilaterally symmetrical.  
:- C.P. Angles are clear.

**CONCLUSION: Normal Study**

*Vijaya*  
Signature of Technician

*M.N. Thareja*  
Signature of Doctor

Patient Name: **Nikes Khondajiwad**

Age: **38** H / F

HR: **59/min**

SINUS RHYTHM  
OTHERWISE NORMAL ECG

UNCONFIRMED REPORT

Interval: **PR 126 ms** P (11) **0.88 mV**  
**QR 1019 ms** QRS **84 ms** S (U1) **-0.51 mV**  
**QT 352 ms** QTc **352 ms** R (U5) **1.21 mV**  
**QTd 352 ms** STd **1.92 mV**

5.78

*Handwritten signature*

10/19/22

12 mm/mV

12 mm/mV



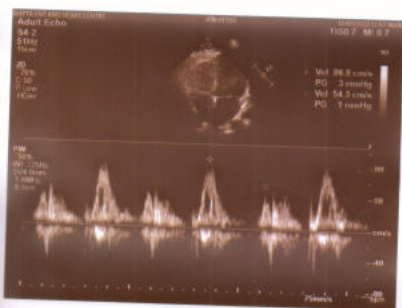
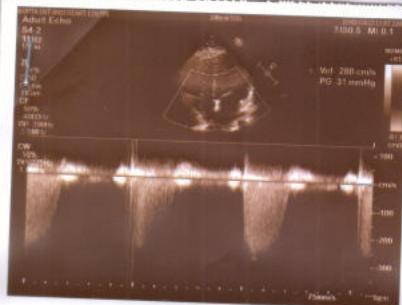
25 mm/s SCHILLER

0.05-35 Hz F5R

5a 1b 5c 2d 1f 1d 4d

RT-2.5.1.83

5A





# GUPTA ENT AND HEART CENTRE

Dayanand Marg, Nangli Circle, Alwar (Raj.) Ph. 0144-3591336 | M. 7378184427

## Echocardiography Report

Name : Mr. Vikash Khandelwal Ref by: Dr. M. N. Thareja  
Age / Sex : 32yrs./male Date : 10 September 2022

Clinical Diagnosis : For Cardiac Evaluation  
2D Echocardiography Findings :  
Mitral Valve : Normal  
Aortic Valve : Normal  
Tricuspid Valve : Normal  
Pulmonary Valve : Normal  
Left Atrium : 3.7cm: Normal  
Left Ventricle : Normal LV size with normal LV systolic function. No RWMA

LVIDd	4.7cm.	IVSd	1.0cm.	EF	60%	Visual
LVIDs	2.6cm.	PWd	0.9cm.	EF	%	F.S.

Right Atrium : Normal  
Right Ventricle : Normal  
Aorta : 2.6cm: Normal  
Pulmonary Artery : Normal  
Pulmonary Veins : Normal  
Superior Venacava : Normal  
Inferior Venacava : Normal  
Pericardium : Normal  
Intracardiac Masses : No Intracardiac masses seen  
IAS/IVS : Intact

### Doppler Findings:

Valve	Peak Velocity (cm/s)	Peak Gradient (mmHg)	Mean Gradient (mmHg)	Regurgitation Grade	others/comments
Mitral Valve	E-/A-86/64			Mild MR	
Aortic Valve	115				
Tricuspid Valve				Mild TR	RVSP-31mmHg+RAP
Pulmonary Valve	79				

**Diagnosis :** Transthoracic echo done in supine position at resting heart rate of 70bpm, shows **Normal LV size with normal LV systolic function. LVEF~60% (Visual). No RWMA.**  
Other cardiac chambers are normal in Size.  
**Mild MR, Mild TR, RVSP-31mmHg+RAP.**  
Normal MIP.  
No pericardial effusion /Vegetation /Clot Intracardiac masses seen.  
Normal left sided arch of aorta, No Coarctation.

Dr. Prachi Gupta  
MBBS, DNBCC  
(Non-invasive cardiologist)  
Gupta ENT and Heart Centre  
Nangli Circle, Alwar

Please correlate clinically

This report is not valid for medico legal purpose.





# THAREJA NURSING HOME

1, Ram Kuteer Company Bagh Road, ALWAR - 301001 (Raj.)  
Mob. 9982111801, Ph. 0144-2700184, 2331842, Telefax: 0144-2342339  
E-mail: drmnthareja@yahoo.com



Name Mr. Vikas Khandelwal Age \_\_\_\_\_ Yr OPD/UHID \_\_\_\_\_ Date 10/9/22

Address \_\_\_\_\_ Mobile No. \_\_\_\_\_

VITALS	B.P.	Pulse	Temp.	Wt.	Ht.	Allergies
--------	------	-------	-------	-----	-----	-----------

### Complaints

*routine eye check up*

### Findings

*VA - 6/6  
6/6*

*S/L  
Cornea clear B/E*

### Investigation

*Color vision - WNL  
- WNL*

### Treatment

*Adv  
Both eyes within normal limit*

#### DR. M.N. THAREJA

7233 (RMC)  
Male Infertility Specialist

#### DR. SAVITA THAREJA

7600 (RMC)  
Female Infertility Specialist

#### DR. JAYANT THAREJA

A-0824 (RSDC)  
M.D.S.  
Oral & Maxillo - Facial Surgery  
Ex Resident Trauma Centre,  
AIIMS, Delhi

#### DR. SHIVANI THAREJA

10807 / 31220 (RMC)  
Ophthalmologist  
Cornea Specialist

#### DR. PRERNA THAREJA

A-3574  
MDS (Endodontics)  
Root Canal Specialist  
Ex Resident  
AIIMS, Jodhpur

#### DR. H.R. GUPTA

1744 (RMC)  
Senior Consultant  
M.S. Gen Surgeon

#### DR. VARUN SAPRA

Reg. No. 70990 (DMC)  
MBBS DNB ORTHO, D.ORTHO  
Joint Replacement &  
Arthroscopy Surgeon

*Shivani*  
Dr. Shivani Thareja  
M.S. (OPHTHAL)  
Fellow (CORNEA)  
L.V. Prasad Eye Institute  
CORNEA CONSULTANT

### Pain Scale

0



No Pain

2



Mild Pain

4



Distressing

6



Disressing

8



Intense

10



Excruciating

*medical Im.*





# THAREJA SONOGRAPHY CENTRE

1, Ram Kuteer, Company Bagh Road, ALWAR - 📞 (0144) 2700184



This report is not valid for MLC Purpose

Ref. No.

Date.....

10/09/2022

Name of Patient: MR. VIKASH KHANDALWAL Age : 32 Yrs. Sex: M  
Ref.by : SELF

## Sonography Report – abdomen

**LIVER:** Size: RL: 15.6 cm L. L.: 6.8 cm  
Margins: Round L.H.B.R: ND  
Parenchyma : Echo , Bright  
C. B. D. Size: 3.4 mm LUMEN: Clear  
P.V. Size: mm LUMEN: Clear  
GALL BLADDER : Size 2.3 X 1.6cm Lumen : Clear  
Wall thickness N  
PANCREAS: N  
SPLEEN: 10.3 cc  
KIDNEYS: Right: 9.8 X 5.0 cm Left: 11.0 X 5.2 cm

PELVICALYCAL SYSTEM:  
CORTICO – MEDU. DIFF: N

RETROPERITONEUM :  
LYMPH – NCJES : Not Seen  
PLEURAL EFFUSION :  
ASCITES :  
URINARY BLADDER:  
Prevoiding Volume 176 cc  
Wall Thickness N  
PROSTATE: N  
Size: cc  
Parenchyma:Echo


Residual Urine C.C.  
Lumen: Clear

Capsule: Intact

SEMINAL – VASCLES: Normal

**Conclusion:- Fatty Liver**

Thanks,

  
Dr. Savita Thareja  
Reg. No. 7600  
Rajasthan Medical Council

Enclosed: Photo - 2

PLEASE NOTE: INTESTINAL PATHOLOGY CAN NOT BE RULE OUT  
This is only an opinion, not a diagnosis, which should be clinically co-related. No procedure/surgery should be undertaken simply on the basis of this opinion because Ultrasound accuracy is only 96%.

\* Subject to Alwar jurisdiction. \* Not valid for medico-legal purpose.



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LABORATORY EQUIPED WITH COMPUTERISED AUTO ANALYZER & CBC

1, Ram Kuteer, Company Bagh Road, ALWAR - 301001 (Raj.) Ph: 0144-2700184, 2331842

Name : **VIKAS KHANDELWAL** age **32** Sex : **MALE**  
Ref. By : **M.N.THAREJA** Lab No. : Date : **September 10, 2022**

## HORMONES & MARKERS

<u>Test</u>	<u>Value</u>	<u>Units</u>	<u>Biological Ref. Values</u>
T3 (Total Triiodothyronine)	1.07	ng/dL	0.60-1.81 ng/dL Adults
T4 (TotalThyroxine)	5.82	µg/dL	3.2-12.60 µg/dL : Adults
TSH (Thyroid Stimulating Hormone)	1.64	µIU/mL	Adults : 0.35-5.50 µIU/mL

### Interpretation of TSH :-

#### Children

0 Days : 1.0-39.0 uIU/mL  
5 days : 1.7-9.1 uIU/mL  
1 year : 0.4-8.6 uIU/mL  
2 years : 0.4-7.6 uIU/mL  
3 years : 0.3-6.7 uIU/mL  
4-19 years : 0.4-6.2 uIU/mL

### Interpretation of TSH :-

#### Children

3.20 - 34.6 µIU/mL 1- 2 Days  
0.70 - 15.4 µIU/mL 3 - 4 Days  
0.70 - 9.10 µIU/mL 15 Days - 5 Months  
0.70 - 6.40 µIU/mL 5 Months - 20 Years

#### Adults

20-54 years : 0.35-5.50 uIU/mL  
55-87 years : 0.5-8.9 uIU/mL

#### Pregnancy

1st Trimester : 0.30 - 4.50 µIU/mL  
2nd Trimester : 0.50 - 4.60 µIU/mL  
3rd Trimester : 0.80 - 5.20 µIU/mL

#### Pregnancy

0.30 - 4.50 µIU/mL 1st Trimester  
0.50 - 4.60 µIU/mL 2nd Trimester  
0.80 - 5.20 µIU/mL 3rd Trimester

Method : **Fluorescence Immunoassay Technology**


Sample Type : **Fresh Blood Serum**

### Remarks:

Primary malfunction of the Thyroid gland may result in excessive (hyper) or Low (hypo) release of T3 or T4. In addition, as TSH directly affect thyroid function, malfunction of the pituitary or the hypothalamus influences the thyroid gland activity.

Disease in any portion of the thyroid-pituitary-hypothalamus system may influence the level of T3 and T4 in the blood, in Primary Hypothyroidism,

TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels may be low. In addition, in Euthyroid sick syndrome, multiple alterations in serum thyroid function test findings have been recognized.

  
Signature of Technician

  
Signature of Doctor