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NAME OF PATIENT: MR. SUDARSHAN SHAMRAO **AGE 39YRS /MALE**

REFERRED BY: BOB **DATE:17/11/2023.**

CHEST X – RAY PA VIEW

FINDINGS:

- Both the domes of diaphragm and CP angles are normal.
- Both the hila and mediastinum are normal.
- Both the lung fields are clear. No e/o focal parenchymal lesion.
- Cardio-thoracic ratio is normal.
- Soft tissues and bony cage are unremarkable.

IMPRESSION:

- **NO SIGNIFICANT ABNORMALITY SEEN.**

Advised: Clinical correlation and further evaluation if clinically indicated.

APOLLO RAIPUR CLINIC

Dr. Zeeshan Ateeb Dani
MBBS, MD
Consultant Radiologist
Reg. No. CGMC-

DR. ZEESHAN ATEEB DANI
(MD)
CONSULTANT RADIOLOGIST

This report is for perusal of the doctor only not the definitive diagnosis; findings have to be clinically correlated. This report is not for medico-legal purposes.

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EXAMINATION OF EYES :-(BY OPHTALMOLOGIST)

Patient Name .Mr. Sudarshan Shanrao Date.17/11/2023

Sex/Age .79/M. MR No ..... Employee Id .....

EXTERNAL EXAMINATION	
SQUINT	
NYSTAGMUS	
COLOUR VISION	Defective
FUNDUS:(RE):- optic Dystrophy	(LE):- opticdystrophy.
INDIVIDUAL COLOUR IDENTIFICATION	Defective
DISTANT VISION:(RE):- FC 1M 6/24P	(LE):- FC 3M 6/24P
NEAR VISION:(RE):- N9 with	(LE):- N9 with
NIGHT BLINDNESS	NAD.

	SPH	CYL	AXIS	ADD
RIGHT	-2.0	-1.0	75°	
LEFT	-3.0	-1.0	100°	

REMARKS :- H/o Rodscone dystrophy.

Dr. Vikas Mishra
MBBS,MS(Ophthalmologist)
Reg. No. CGMC 621/2006

APOLLO RAIPUR CLINIC

ID: 130
MR SUDARSHAN SHAMRAO
Male 39Ycars

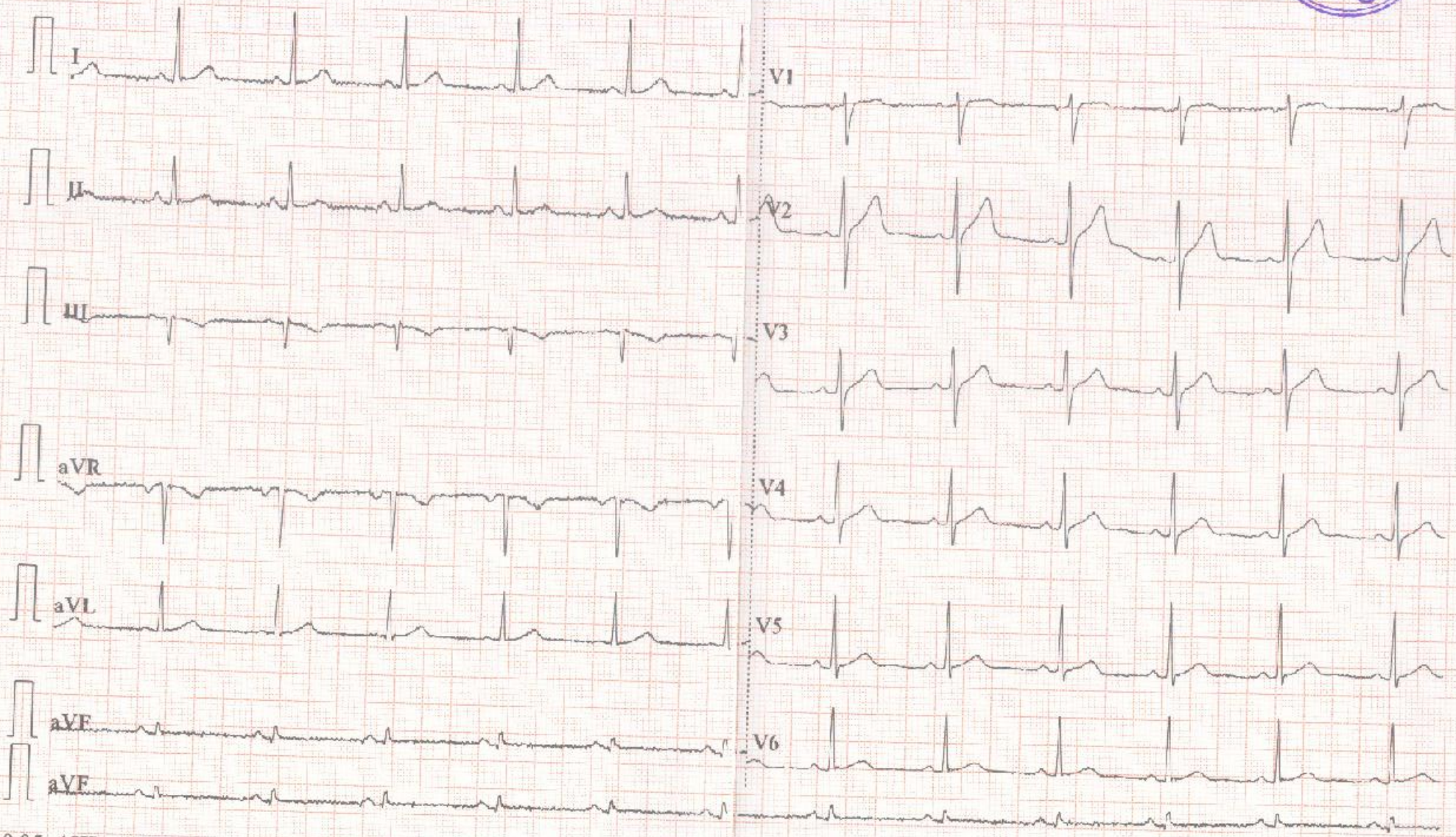
17-11-2023 10:30:06 AM

HR	: 74	bpm	
P	: 100	ms	
PR	: 136	ms	
QRS	: 78	ms	
QT/QTc	: 346/384	ms	
P/QRS/T	: 48/13/3	°	
RV5/SV1	: 1.268/0.681	mV	

Diagnosis Information:
Sinus rhythm
Normal ECG

Dr. Ankit Sharma
MD Medicine
Reg. No.- CGMC 7971/2018
Apollo Clinic, Raipur

Report Confirmed by:



0.05~45Hz AC50 25mm/s 10mm/mV 2*5.0s+1r ♥74 CARD[redacted] 9108 D V1.43 Glasgow V28.6.0 APOLLO CLINIC RAIPUR[redacted]

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Patient Name	: MR SUDARSHAN SHAMRAO BHA	**Age/Gender**	: 39 Y Male
UHID/ MR No	: 7584	**OP Visit No**	: OPD-UNIT-II-2
Visit Date	: 17/11/2023	**Reported On**	: 17/11/2023 02:03PM
Sample Collected On	: 17/11/2023 01:13PM		
Ref. Doctor	: SELF		
Sponsor Name	:		

HAEMATOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
HEMOGRAM			
Haemoglobin(HB) Method: CELL COUNTER	13.5	gm/dl	12 - 17
Erythrocyte (RBC) Count Method: CELL COUNTER	5.02	mill/cu.mm.	4.20 - 6.00
PCV (Packed Cell Volume) Method: CELL COUNTER	40.50	%	39 - 52
MCV (Mean Corpuscular Volume) Method: CELL COUNTER	80.7	fL	76.00 - 100
MCH (Mean Corpuscular Haemoglobin) Method: CELL COUNTER	26.9	pg	26 - 34
MCHC (Mean Corpuscular Hb Concn.) Method: CELL COUNTER	33.3	g/dl	32 - 35
RDW (Red Cell Distribution Width) Method: CELL COUNTER	12.0	%	11- 16
Total Leucocytes (WBC) Count Method: CELL COUNTER	8.78	cells/cumm	3.50 - 10.00
Neutrophils Method: CELL COUNTER	52	%	40.0 - 73.0
Lymphocytes Method: CELL COUNTER	29	%	15.0 - 45.0
Eosinophils Method: CELL COUNTER	12	%	1-6%
Monocytes	07	%	4.0 - 12.0
Basophils Method: CELL COUNTER	00	%	0.0 - 2.0

End of Report

Results are to be corelated clinically

Lab Technician / Technologist

path

DR DHANANJAY RAMCHANDRA PRASAD
M.D. PATHOLOGY

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HAEMATOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
Platelet Count Method: CELL COUNTER	179	lacs/cu.mm	150-400
ESR- Erythrocyte Sedimentation Rate Method: Westergren's Method	10	mm /HR	0 - 10

Blood Group (ABO Typing)

Blood Group (ABO Typing)	B
RhD factor (Rh Typing)	POSITIVE

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BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
GLUCOSE - (POST PRANDIAL)			
Glucose -Post prandial Method: REAGENT GRADE WATER	134.0	mg/dl	70-140
GLUCOSE (FASTING)			
Glucose- Fasting SUGAR REAGENT GRADE WATER	103.0	mg/dl	70 - 120
KFT - RENAL PROFILE - SERUM			
BUN-Blood Urea Nitrogen METHOD: Spectrophotometric	09	mg/dl	7 - 20
Creatinine METHOD: Spectrophotometric	0.96	mg/dl	0.6-1.4
Uric Acid Method: Spectrophotometric	3.6	mg/dL	2.6 - 7.2

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BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
LIPID PROFILE TEST (PACKAGE)			
Cholesterol - Total	172.0	mg/dl	Desirable: < 200 Borderline High: 200-239 High: >= 240
Triglycerides level	150.0	mg/dl	Normal : < 150 Borderline High : 150-199 Very High : >=500
Method: Spectrophotomatric HDL Cholesterol	42.0	mg/dl	Major risk factor for heart disease: < 40 Negative risk factor for heart disease :>60
Method: Spectrophotomatric LDL Cholesterol	100	mg/dl	Optimal:< 100 Near Optimal :100 – 129 Borderline High : 130-159 High : 160-189 Very High : >=190
Method: Spectrophotomatric VLDL Cholesterol	30	mg/dl	6 - 38
Total Cholesterol/HDL Ratio	4.10		3.5-5
Methode: Spectrophotometric			

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BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
LIVER FUNCTION TEST			
Bilirubin - Total Method: Spectrophotometric	0.8	mg/dl	0.1- 1.2
Bilirubin - Direct Method: Spectrophotometric	0.2	mg/dl	0.05-0.3
Bilirubin (Indirect) Mathod: Calculated	0.60	mg/dl	0 - 1
SGOT (AST) Method: Spectrophotometric	18	U/L	0 - 40
SGPT (ALT) Method: Spectrophotometric	20	U/L	0 - 41
ALKALINE PHOSPHATASE	78	U/L	25-147
Total Proteins Method: Spectrophotometric	7.1	g/dl	6 - 8
Albumin Method: Spectrophotometric	4.8	mg/dl	3.4 - 5.0
Globulin Mathod: Calculated	2.3	g/dl	1.8 - 3.6
A/G Ratio Mathod: Calculated	2.0	%	1.1 - 2.2

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Patient Name	: Mr.SUDARSHAN SHAMAROO	Collected	: 17/Nov/2023 01:49PM
Age/Gender	: 89 Y 0 M 0 D /M	Received	: 17/Nov/2023 01:51PM
UHID/MR No	: DSUS.0000005563	Reported	: 17/Nov/2023 03:31PM
Visit ID	: DSUSOPV6432	Status	: Final Report
Ref Doctor	: APOLLO CLINIC	Client Name	: PUP APOLLO CLINIC SAMRIDDHI AR
IP/OP NO	:	Patient location	: Raipur,Raipur

DEPARTMENT OF IMMUNOLOGY

Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , *SERUM*				
TRIIODOTHYRONINE (T3, TOTAL)	0.97	ng/mL	0.6-1.81	CLIA
THYROXINE (T4, TOTAL)	7.80	µg/dL	3.2-12.6	CLIA
THYROID STIMULATING HORMONE (TSH)	1.620	µIU/mL	0.35-5.5	CLIA

Comment:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 – 2.5
Second trimester	0.2 – 3.0
Third trimester	0.3 – 3.0

1. TSH is a glycoprotein hormone secreted by the anterior pituitary. TSH activates production of T3 (Triiodothyronine) and its prohormone T4 (Thyroxine). Increased blood level of T3 and T4 inhibit production of TSH.
2. TSH is elevated in primary hypothyroidism and will be low in primary hyperthyroidism. Elevated or low TSH in the context of normal free thyroxine is often referred to as sub-clinical hypo- or hyperthyroidism respectively.
3. Both T4 & T3 provides limited clinical information as both are highly bound to proteins in circulation and reflects mostly inactive hormone. Only a very small fraction of circulating hormone is free and biologically active.
4. Significant variations in TSH can occur with circadian rhythm, hormonal status, stress, sleep deprivation, medication & circulating antibodies.

TSH	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	N	N	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement Therapy.
N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy
Low	N	N	N	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism
Low	N	High	High	Thyroiditis, Interfering Antibodies
N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes
High	High	High	High	Pituitary Adenoma, TSHoma/Thyrotropinoma

*** End Of Report ***

Dr. SANDHYA VERMA
MBBS, MD,(Pathology)
Consultant Pathologist

*THIS PAPER IS USED FOR CLINICAL REPORTING PURPOSE ONLY

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CLINICAL PATHOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
URINE ROUTINE EXAMINATION			
Physical Examination			
Volum of urine	30ML		
Appearance	Clear		Clear
Colour	Pale Yellow		Colourless
Specific Gravity	1.020		1.001 - 1.030
Reaction (pH)	6.0		
Chemical Examination			
Protein(Albumin) Urine	Absent		Absent
Glucose(Sugar) Urine	Absent		Absent
Blood	Absent		Absent
Leukocytes	Absent		Absent
Ketone Urine	Absent		Absent
Bilirubin Urine	Absent		Absent
Urobilinogen	Absent		Absent
Nitrite (Urine)	Absent		Absent
Microscopic Examination			
RBC (Urine)	NIL	/hpf	0 - 2
Pus cells	2-4	/hpf	0 - 5
Epithelial Cell	Occasional	/hpf	0 - 5
Crystals	Not Seen	/hpf	Not Seen
Bacteria	Not Seen	/hpf	Not Seen
Budding yeast	Not Seen	/hpf	

End of Report

Results are to be corelated clinically

Lab Technician / Technologist
path

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BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
HbA1c (Glycosalated Haemoglobin)			
	5.5	%	Non- diabetic:<=5.6, Pre-Diabetic 5.7-6.4, Diabetic:>=6.5

1.HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
2.HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
3. Trends in HbA1c are a better indicator of diabetic control than a solitary test.
4. Low glycated haemoglobin(below 4%) in a non-diabetic individual are often associated with system c inflam

1.HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
2.HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
3. Trends in HbA1c are a better indicator of diabetic control than a solitary test.
4. Low glycated haemoglobin(below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia(especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
5. To estimate the eAG from the HbA1C value, the following equation is used: eAG(mg/dl) = 28.7*A1c-46.7
6. Interference of Haemoglobinopathies in HbA1c estimation.
A. For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
B. Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status
C. Heterozygous state dete

End of Report
Results are to be correlated clinically

Lab Technician / Technologist
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Allengers
CHHATTISGARH

Report

AGHPL

116 / MR SUDARSHAN / 39 Yrs / M / 165 Cms / 74 Kg Date: 17-Nov-2023

Stage	Time	Duration	Belt Speed (Kmph)	Elevation	METs	Rate	% THR Achieved	BP	RPP	PVC	Comments
Standing	00:15	0:01	00.0	00.0	01.0	89	49 %	130/80	115	00	
ExStart	00:20	0:06	02.7	10.0	01.1	92	51 %	130/80	119	00	
BRUCE Stage 1	03:20	3:00	02.7	10.0	04.7	124	69 %	132/84	163	00	
BRUCE Stage 2	06:20	3:00	04.0	12.0	07.1	146	81 %	134/86	195	00	
PeakEx	06:41	0:21	05.5	14.0	07.5	156	86 %	134/86	209	00	
Recovery	07:10	0:29	00.8	00.0	04.2	140	77 %	134/86	187	00	
Recovery	07:40	1:00	00.8	00.0	01.2	121	67 %	138/90	166	00	
Recovery	08:24	1:43	00.0	00.0	01.0	117	65 %	136/88	159	00	

Findings :

Exercise Time	: 06:22
Max HR Attained	: 156 bpm 86% of Target 181
Max BP Attained	: (Sys) 138/90
Max WorkLoad Attained	: 7.5 Fair response to induced stress
Test End Reasons	: Test Complete, Heart Rate Acheived

Report :

STRESS TEST IS NEGATIVE FOR REVERSIBLE MYOCARDIAL ISCHEMIA WITH FAIR FUNCTION CAPACITY.

APOLLO RAIPUR CLINIC

(GEM213180726)(R)Allengers

Doctor : DR DEEPAN DAS MBBS DIP.CARDIO

Allengers

Standing

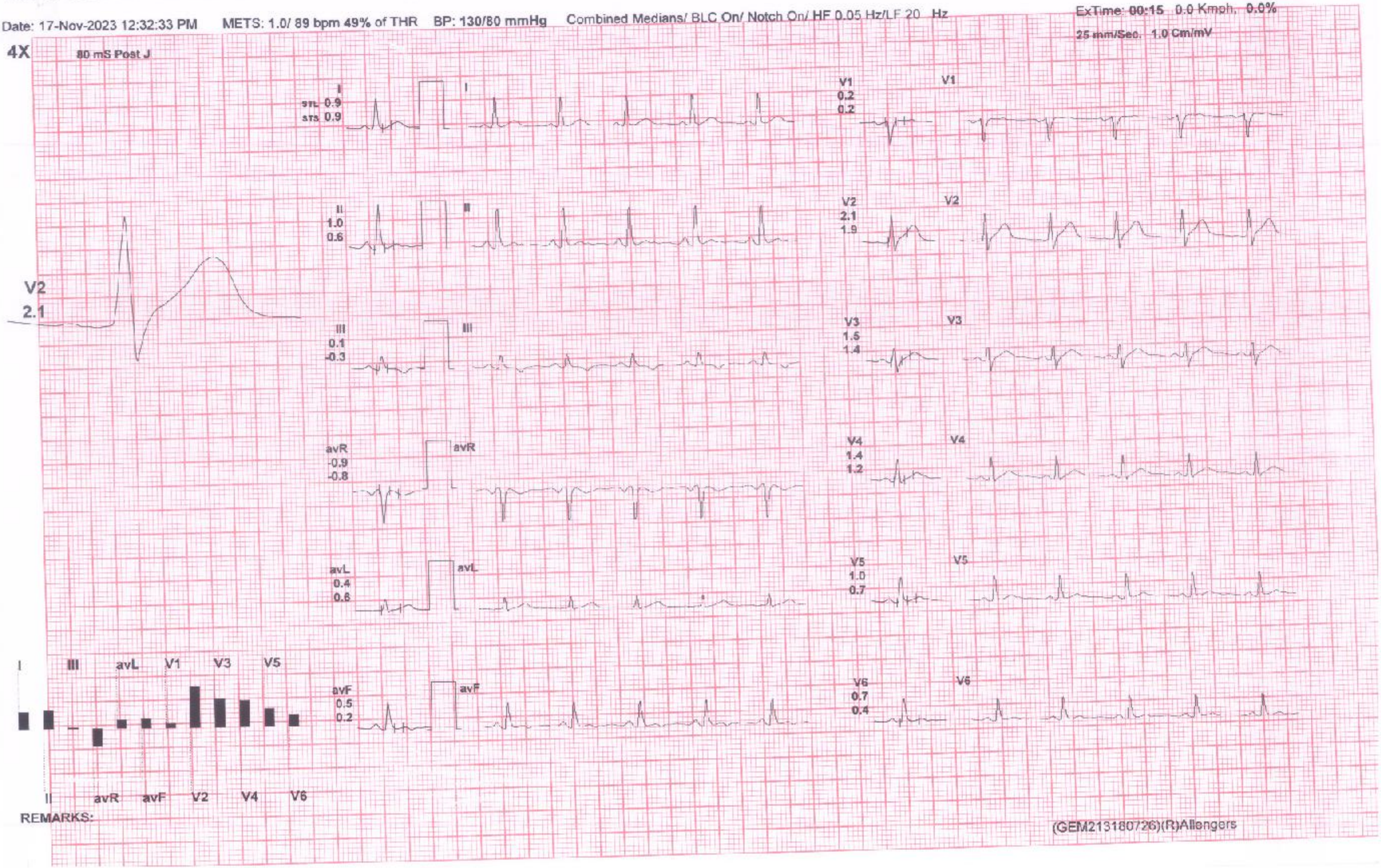
AGHPL

116 / MR SUDARSHAN / 39 Yrs / M / 165 Cms / 74 Kg / HR : 89

Date: 17-Nov-2023 12:32:33 PM METS: 1.0/ 89 bpm 49% of THR BP: 130/80 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 20 Hz

ExTime: 00:15 0.0 Kmph, 0.0%

25 mm/Sec, 1.0 Cm/mV



REMARKS:

(GEM213180726)(R)Allengers

Allengers

ExStart

116 / MR SUDARSHAN / 39 Yrs / M / 165 Cms / 74 Kg / HR : 92

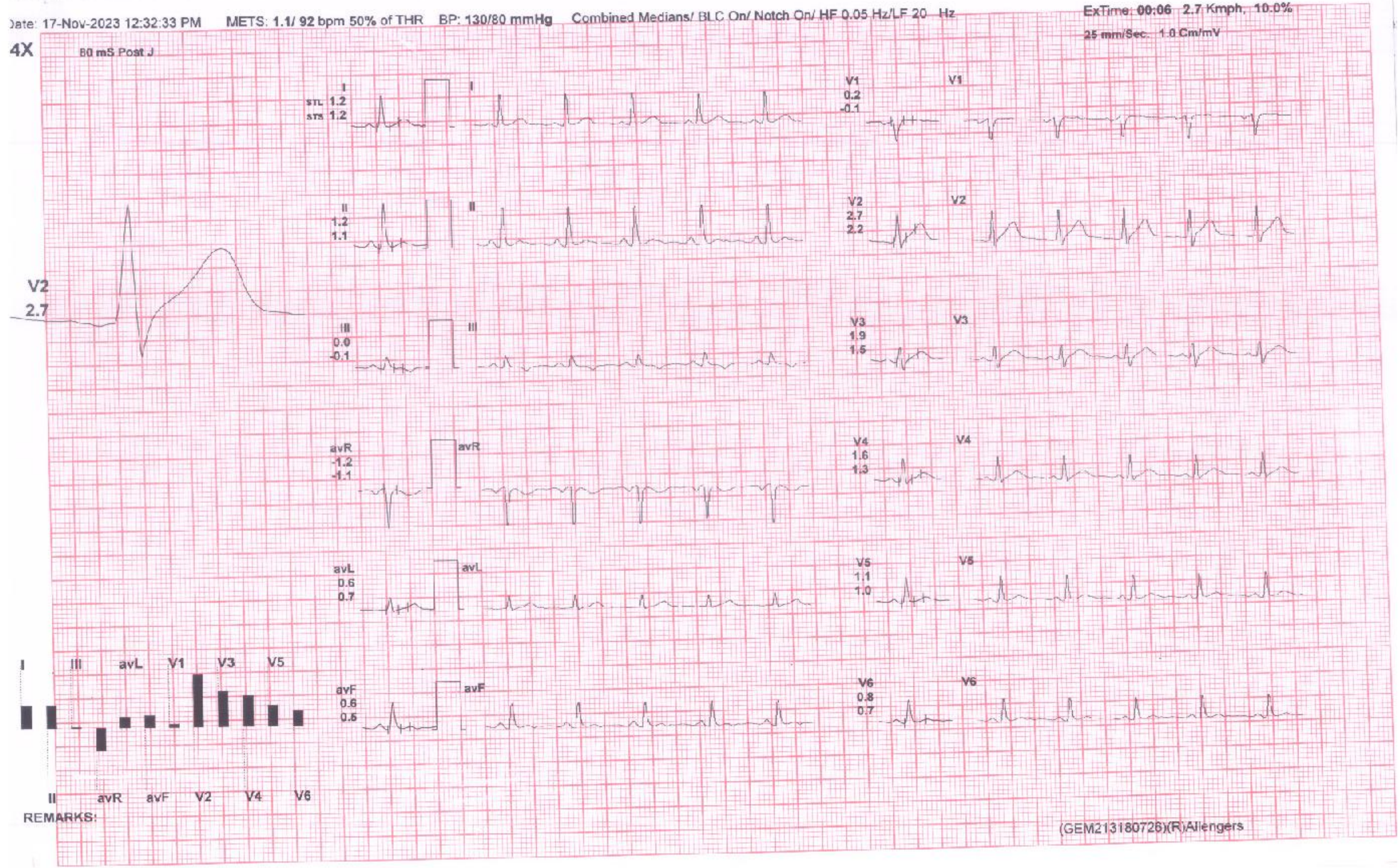
Date: 17-Nov-2023 12:32:33 PM METS: 1.1/ 92 bpm 50% of THR BP: 130/80 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 20 Hz

ExTime: 00:06 2.7 Kmph, 10.0%

25 mm/Sec. 1.0 Cm/mV

4X

80 mS Post J



REMARKS:

(GEM213180726)(R)Allengers

Allengers

BRUCE:Stage 2(3:00)

116 / MR SUDARSHAN / 39 Yrs / M / 165 Cms / 74 Kg / HR : 146

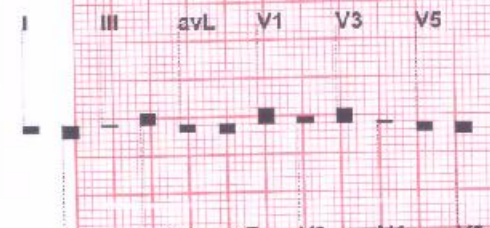
Date: 17-Nov-2023 12:32:33 PM METS: 7.1/ 146 bpm 80% of THR BP: 134/86 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 20 Hz

ExTime: 06:00 4.0 Kmph, 12.0%

25 mm/Sec. 1.0 Cm/mV

4X

60 mS Post J



REMARKS:

(GEM213180726)(R)Allengers

Allengers

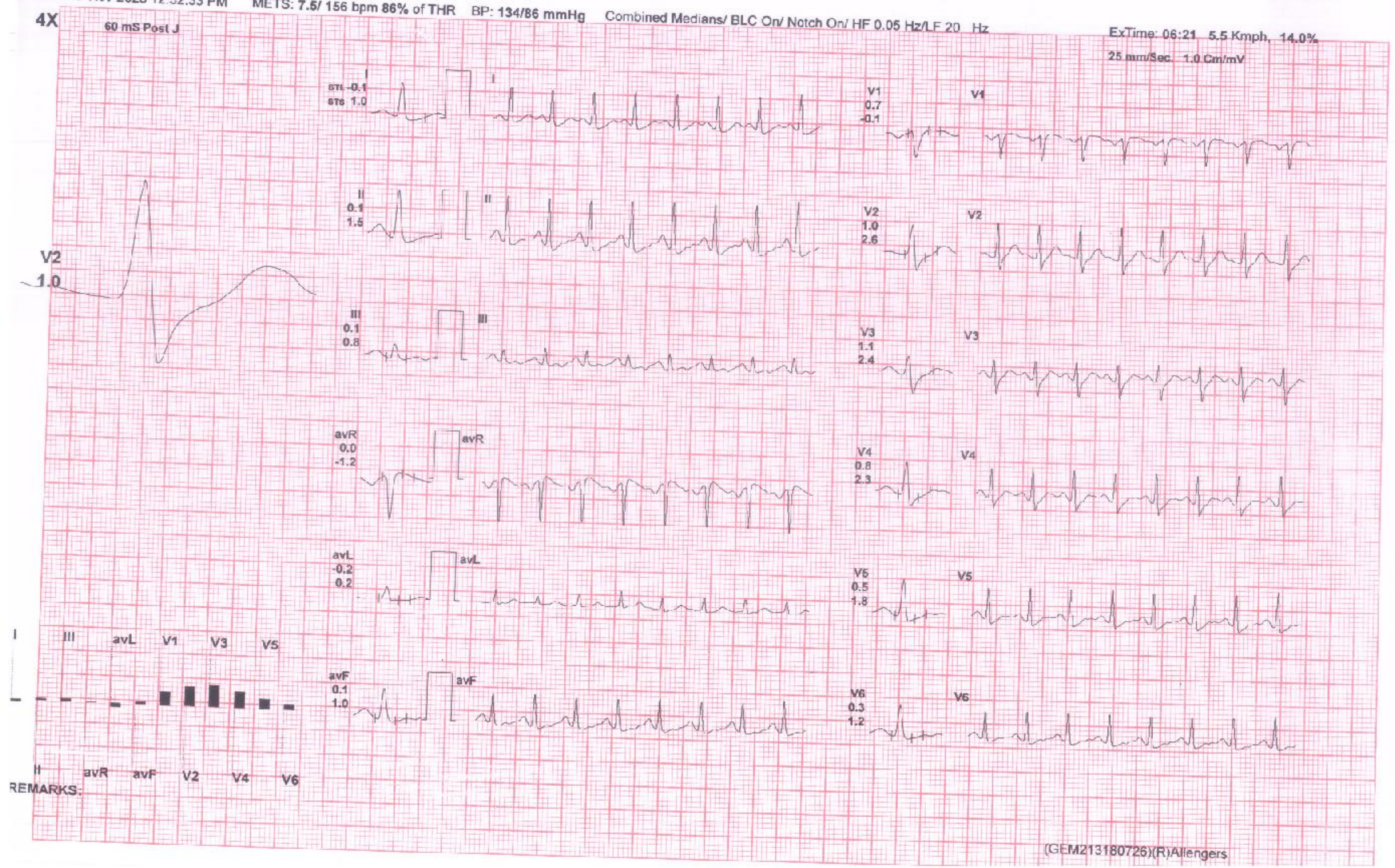
116 / MR SUDARSHAN / 39 Yrs / M / 165 Cms / 74 Kg / HR : 156

PeakEx

Date: 17-Nov-2023 12:32:33 PM METS: 7.5/ 156 bpm 86% of THR BP: 134/86 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 20 Hz

ExTime: 06:21 5.5 Kmph, 14.0%

25 mm/Sec, 1.0 Cm/mV



REMARKS:

(GEM213180726)(R)Allengers

Allengers

116 / MR SUDARSHAN / 39 Yrs / M / 165 Cms / 74 Kg / HR : 140

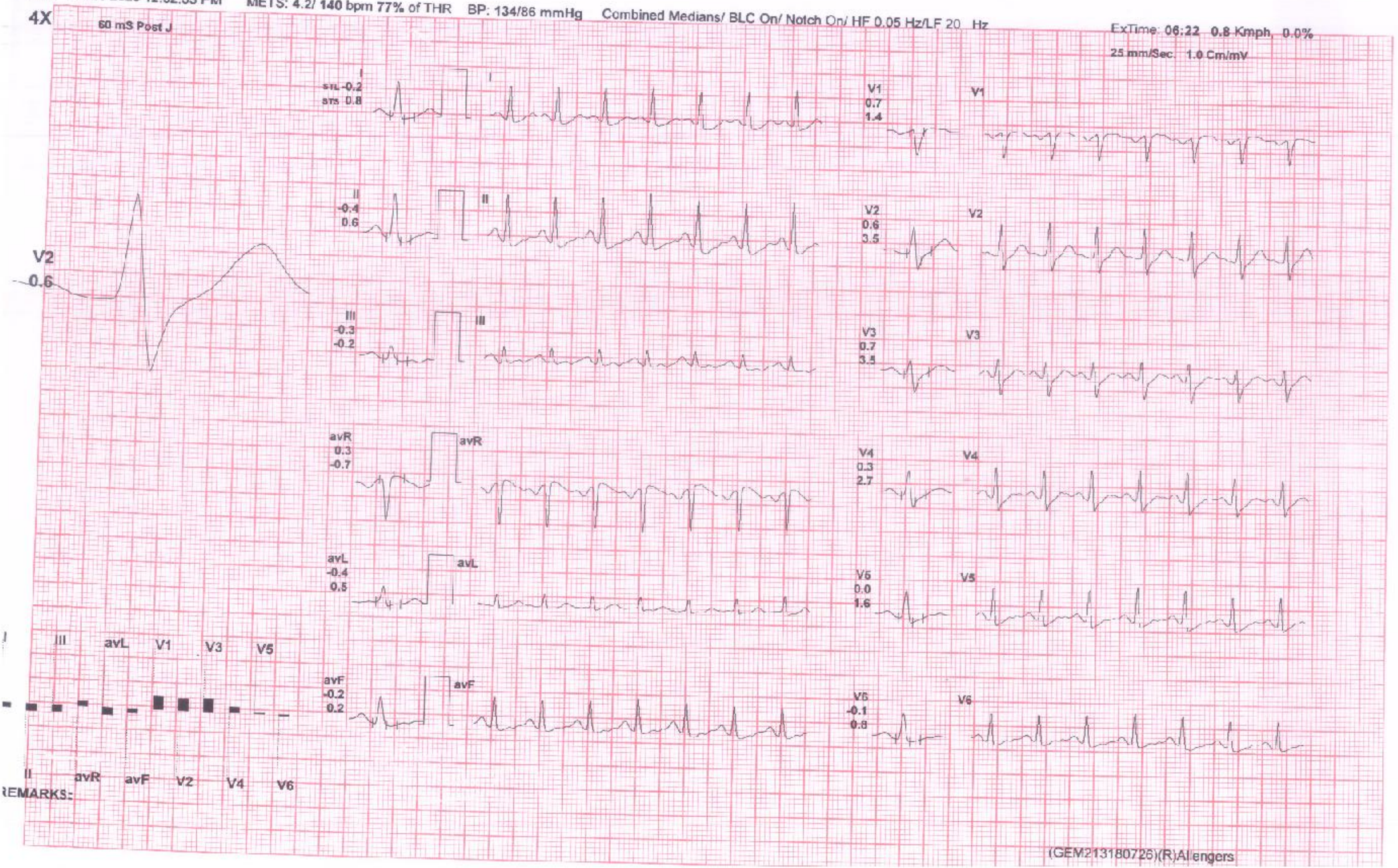
Recovery(0:29)

Date: 17-Nov-2023 12:32:33 PM METS: 4.2/ 140 bpm 77% of THR BP: 134/86 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 20 Hz

ExTime: 06:22 0.8 Kmph 0.0%

25 mm/Sec 1.0 Cm/mV

4X 60 mS Post J



REMARKS:

(GEM213180726)(R)Allengers

Allengers

116 / MR SUDARSHAN / 39 Yrs / M / 165 Cms / 74 Kg / HR : 121

Recovery(1:00)

AGHPL

Date: 17-Nov-2023 12:32:33 PM METS: 1.2/ 121 bpm 66% of THR BP: 138/90 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 20 Hz

ExTime: 06:22 0.8 Kmph, 0.0%

25 mm/Sec 1.0 Cm/mV

4X

80 mS Post J

I
STL 1.0
STS 1.9

II
1.4
2.4

III
0.5
0.7

avR
-1.2
-2.2

avL
0.2
0.7

avF
0.9
1.5

V1
0.4
-0.2

V2
2.9
3.5

V3
2.6
3.1

V4
2.2
2.9

V5
1.4
2.1

V6
0.9
1.4

V2
2.9

I III avL V1 V3 V5

II avR avF V2 V4 V6

REMARKS:

(GEM2131807 26)(R)Allengers

Allengers

BRUCE:Stage 1(3:00)

AGHPL

116 / MR SUDARSHAN / 39 Yrs / M / 165 Cms / 74 Kg / HR : 124

Date: 17-Nov-2023 12:32:33 PM METS: **4.7/ 124** bpm **68%** of THR BP: **132/84 mmHg** Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 20 Hz

ExTime: **03:00** 2.7 Kmph, **10.0%**

25 mm/Sec. 1.0 Cm/mV

4X 80 mS Post J

I aTL 0.4 sTS 0.9

II 0.5 0.7

III 0.1 -0.2

avR -0.4 -0.8

avL 0.2 0.5

avF 0.3 0.3

V1 0.6 0.9

V2 1.9 3.0

V3 1.6 2.6

V4 1.3 2.2

V5 0.8 1.2

V6 0.5 0.9

V2 1.9

I III avL V1 V3 V5

II avR avF V2 V4 V6

REMARKS:

(GEM213180726)(R)Allengers

Recovery(1:43)

AGHPL

Allengers

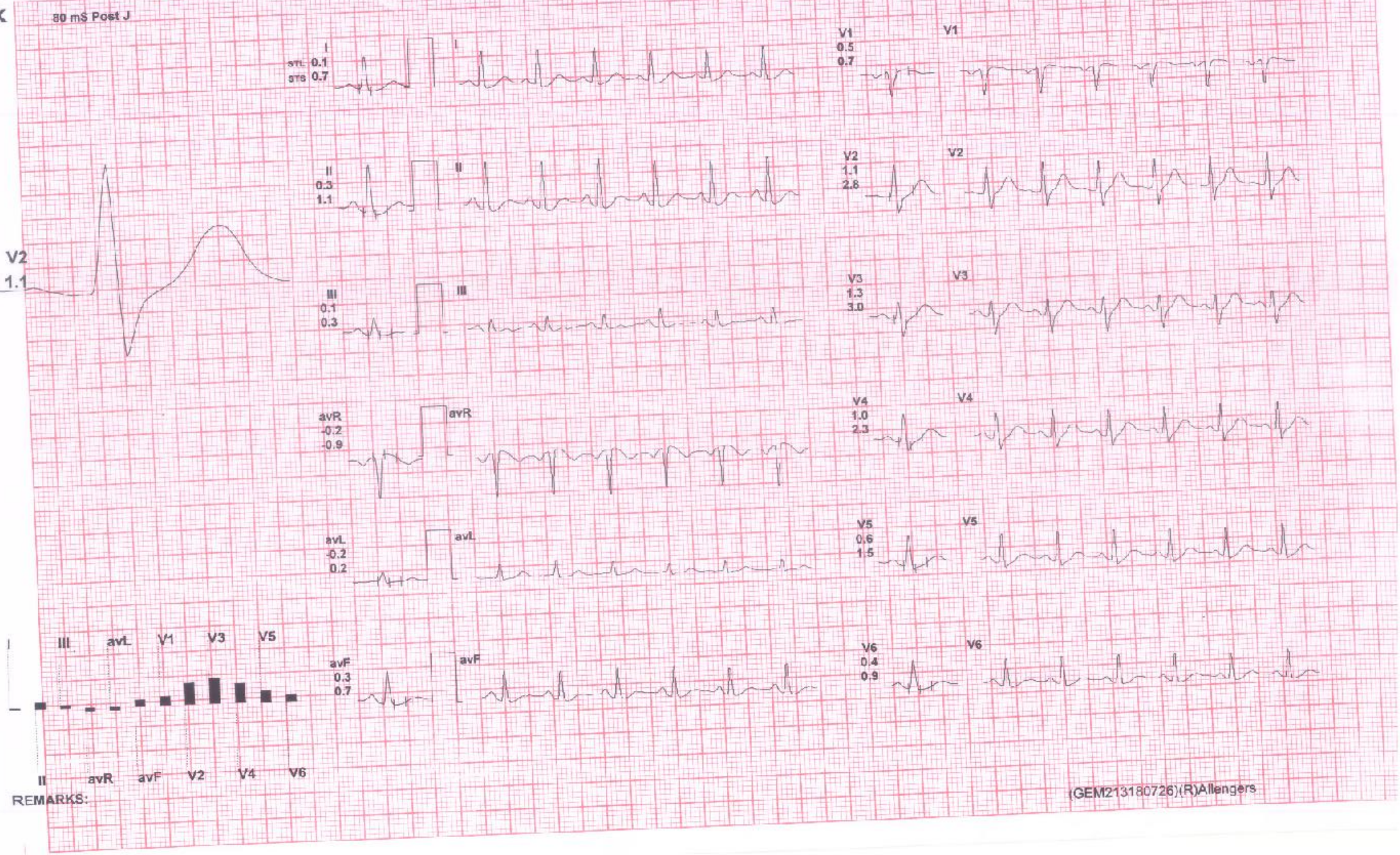
16 / MR SUDARSHAN / 39 Yrs / M / 165 Cms / 74 Kg / HR : 117

Date: 17-Nov-2023 12:32:33 PM METS: 1.0/ 117 bpm 64% of THR BP: 136/88 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 20 Hz

ExTime: 06:22 0.0 Kmph, 0.0%

25 mm/Sec. 1.0 Cm/mV

4X 80 mS Post J



REMARKS:

(GEM213180726)(R)Allengers