

Name : Mr. AMIN SAIYED (58 /M)
 Address : AHMEDABAD, AHMEDABAD, AHMEDABAD, GUJARAT, INDIA
 Examined by: Dr .BHAWANA DAGA
 Package Approved by Joint Commission International MEDIWHEEL-FULL BODY CHK-ABOVE40-MALE

Date : 11/02/2023

UHID : AHCC000012701

AHC No : AHCCA4483



CHIEF COMPLAINTS

For corporate health checkup
 Constipation

PRESENT KNOWN ILLNESS

No history of - Diabetes mellitus,
 Hypertension,
 Dyslipidemia, Thyroid
 disorder, Heart disease,
 Stroke, Asthma, COPD,
 Cancer, Impaired Glycemia

Marital status - Married
 No. of children - 3
 Diet - Mixed Diet
 Alcohol - does not consume alcohol
 Smoking - No
 Chews tobacco - No
 Physical activity - Mild

Family history

Diabetes - father, mother
 Hypertension - mother
 Coronary artery disease - mother
 Cancer - None
 Asthma - father
 Renal disease - mother



SYSTEMIC REVIEW

Cardiovascular system

Breathing difficulty - yes; Exacerbated by - moderate
 exertion; Relieved by - rest

Gastrointestinal system

Dyspepsia - yes; Nature - intermittent; Symptoms -
 acidity

Present medications

Nil

Past medical history

Do you have any - No
 Allergies?
 Covid 19 - Yes
 Hospitalization for - No
 Covid 19
 Malaria - 1989

Surgical history

Surgical history - Nil

Immunization history

- Covid Dose1, Covid Dose2

Personal history

PHYSICAL EXAMINATION

General

General appearance - normal
 Build - Morbid obesity
 Height - 179
 Weight - 119.3
 BMI - 37.23
 Pallor - No
 Oedema - no

Cardiovascular system

Heart rate (Per minute) - 82
 Rhythm - Regular
 Systolic(mm of Hg) - 163
 Diastolic(mm of Hg) - 106
 Heart sounds - S1S2+

Respiratory system

Rate of respiration(per
 minute) - 14
 Breath sounds - Normal vesicular breath
 sounds

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Organomegaly - No
Tenderness - No

ted By : BHAWANA DAGA

ge 2 of 10

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 Apollo
HOSPITALS

URINE FOR ROUTINE EXAMINATION

Test Name	Result	Unit	Level	Range
Specific Gravity	1.025			
Colour:	Pale-Yellow			
Transparency:	Clear			
pH	6			
Protein :	Nil			
Sugar:	Nil			
Blood:	Negative			
Ketone	Absent			
Bile Pigments:	Absent			
Urobilinogen	Normal	E.U./d L		
Nitrite	Negative			
Pus Cells	Occasional		0-5	
RBC	Nil	/hpf	0-5/hpf	
Epithelial Cells	Occasional			
Casts:	Absent			
Crystals:	Absent			

Basophils	00	%	●	0-1
Platelet Count (Impedance)	250000	/cu mm	●	150000-450000
MPV (Calculated)	9.1	fl	●	7-11
RBC:	Hypochromic Microcytic RBCs			
RBC::	Target cells (+)-Anisocytosis (+)			
ERYTHROCYTE SEDIMENTATION RATE (ESR) (Automated/ optic- electronic)	08	mm/1st hr	●	0-15
SUGGEST :	Hb electrophoresis.-Hb electrophoresis is indicated after iron supplements.-S. Iron Profile is indicated.			

URINE GLUCOSE(POST PRANDIAL)

Test Name	Result	Unit	Level	Range
Urine Glucose (Post Prandial)	Nil			

BLOOD GROUPING AND TYPING (ABO and Rh)

Test Name	Result	Unit	Level	Range
BLOOD GROUP:	O Positive			

COMPLETE BLOOD COUNT WITH ESR

Test Name	Result	Unit	Level	Range
Hemoglobin (Photometric Measurement)	11 *	gm%	●	13.0-17.0
Packed cell volume(Calculated)	35.9 *	%	●	40-50
RBC COUNT (Impedance)	5.39	Million/ ul	●	4.5-5.9
MCV (From RBC Histogram)	66.7 *	fl	●	80-100
MCH(Calculated)	20.3 *	pg	●	27-32
MCHC(Calculated)	30.5 *	%	●	31-36
RDW(Calculated)	16.4 *	%	●	11.5-14.5
WBC Count (Impedance)	9100	/cu mm	●	4000-11000
Neutrophils	63	%	●	40-75
Lymphocytes	24	%	●	20-40
Monocytes	09	%	●	2-10
Eosinophils	04	%	●	01-06

LFT (LIVER FUNCTION TEST)

Test Name	Result	Unit	Level	Range
ALT(SGPT) - SERUM / PLASMA	14	U/L	●	0-50
ALKALINE PHOSPHATASE - SERUM/PLASMA	115	U/L	●	Adult(Male): 40 - 129
AST (SGOT) - SERUM	18	U/L	●	> 1 year Male : <40
Total Bilirubin	0.564	mg/dL	●	0.300-1.200
Direct Bilirubin	0.226	mg/dL	●	Upto 0.3 mg/dl

● Within Normal Range

● Borderline High/Low

● Out of Range

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Indirect Bilirubin 0.34 mg/dL ●

1 Day ≤5.1 mg/dL
2 Days ≤7.2 mg/dL
3-5 Days ≤10.3 mg/dL
6-7 Days ≤8.4 mg/dL
8-9 Days ≤6.5 mg/dL
10-11 Days ≤4.6 mg/dL
12-13 Days ≤2.7 mg/dL
14 Days - 9 Years 0.2-0.8 mg/dL
10-19 Years 0.2-1.1 mg/dL
≥20 Years 0.2-1.2 mg/dL

GLYCOSYLATED HEMOGLOBIN (HBA1C) - WHOLE BLOOD

Test Name	Result	Unit	Level	Range
Glycosylated Hemoglobin (HbA1c)	6.78 *	%	●	Normal < 5.7
				%Increased risk for Diabetes 5.7 - 6.4%
				Diabetes ≥= 6.5%
				Monitoring criteria for Diabetes Mellitus <7.0 : Well Controlled Diabetes 7.1 – 8.0 : Unsatisfactory Control > 8.0 : Poor Control & Needs Immediate Treatment

CREATININE - SERUM / PLASMA

Test Name	Result	Unit	Level	Range
CREATININE - SERUM / PLASMA	0.83	mg/dL	●	Adult Male: 0.6 - 1.3

LFT (LIVER FUNCTION TEST)

Test Name	Result	Unit	Level	Range
GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM	24	U/L	●	Male : 10 - 71 Female : 6 - 42

GLUCOSE - SERUM / PLASMA (FASTING)

Test Name	Result	Unit	Level	Range
Glucose - Plasma (Fasting)	111 *	mg/dL	●	70 - 100 : Normal 100 - 125 : Impaired Glucose Tolerance >= 126 : Diabetes Mellitus

GLUCOSE - SERUM / PLASMA (POST PRANDIAL) - PPBS

Test Name	Result	Unit	Level	Range
Glucose - Plasma (Post Prandial)	183 *	mg/dL	●	70-140

● Within Normal Range ● Borderline High/Low ● Out of Range

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VLDL CHOLESTEROL 14.6 ● < 40 mg/dl
C/H RATIO 3.4 ● 0-4.5

Liver appears normal in size and shows fatty infiltration (grade I). No evidence of focal pathology seen. Intra and extra hepatic biliary radicles are not dilated. Portal vein is normal in caliber. Intrahepatic portal radicles appear normal.

ECHO/TMT

POOR ECHO WINDOW.

Normal LV systolic function, LVEF: 60%.

Reduced LV compliance.

No PAH.

Gall bladder appears normal with no evidence of calculus. Wall thickness appears normal. No evidence of pericholecystic collection.

Visualized pancreas appears normal in size and echotexture. No focal lesions identified. Visualize pancreatic duct appears normal in caliber.

USG WHOLE ABDOMEN

Spleen is normal in size and shows uniform echotexture.

Both kidneys are normal in size and show normal echopattern with good corticomedullary differentiation. Cortical outlines appear smooth. No evidence of calculi. Left renal exophytic simple cyst at upper pole (size 22 x 20 mm). Specks of parenchymal calcification in left renal upper pole.

No evidence of ascites or lymphadenopathy. Visualized bowel loops are unremarkable.

Urinary bladder is normal in contour and outline. Wall thickness appears normal. No evidence of any intraluminal pathology seen.

Prostate (volume 28 cc) mild enlarged and show normal echopattern

Approx 3 cm sized wall defect seen at umbilicus with herniation of mesenteric fat on straining. No evidence of strangulation.

IMPRESSION:

Grade I fatty liver.

Mild prostatomegaly (28 cc).

Left renal simple cyst. Specks of parenchymal calcification in left renal upper pole.

Approx 3 cm sized wall defect seen at umbilicus with herniation of mesenteric fat on straining. No evidence of strangulation.

X-RAY CHEST PA

NORMAL STUDY.

● Within Normal Range ● Borderline High/Low ● Out of Range

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INVESTIGATIONS NOT DONE / NOT YET REPORTED / NOT PART OF PACKAGE (LAB, RADIOLOGY & CARDIOLOGY)

Haematology

URINE GLUCOSE (FASTING)

STOOL ROUTINE

CARDIOLOGY

ECG

● Within Normal Range ● Borderline High/Low ● Out of Range

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AHC No : AHCCAH4483



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Executive Summary

BP READINGS RAISED.
 IMPAIRED BLOOD GLUCOSE LEVELS.
 ANEMIA.

Wellness Prescription

Advice On Diet :-

CARB RESTRICTED DIET.
 LOW SALT DIET.

Advice On Physical Activity :-

REGULAR EXERCISE.

Medications

TAB TAZLOC 40 MG AFTER BREAKFAST.
TAB GLADOR 1 MG BEFORE BREAKFAST FOR 15 DAYS.
TAB DEXORANGE ONE TAB AFTER LUNCH FOR 3 MONTHS.

Recommended Follow-up Tests

Test Name	Test Schedule	Repeat Frequency	Remarks
GLUCOSE - SERUM / PLASMA (FASTING)	14 Day(s)		
GLUCOSE - SERUM / PLASMA (POST PRANDIAL) - PPBS	14 Day(s)		

Follow-up and Review Plan

FOLLOW UP AFTER 15 DAYS.



Scan the QR code in AskApollo App to book your follow-up appointments and investigations



Dr. BHAWANA DAGA
AHC Physician / Consultant Internal Medicine

Printed By : BHAWANA DAGA

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Note :- The Health Check-up examinations and routine investigations have certain limitations and may not be able to detect all the diseases. Any new or persisting symptoms should be brought to the attention of the Consulting Physician. Additional tests, consultations and follow up may be required in some cases.

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Medications

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TAB GLADOR 1 MG BEFORE BREAKFAST FOR 15 DAYS.
TAB DEXORANGE ONE TAB AFTER LUNCH FOR 3 MONTHS.



Dr. BHAWANA DAGA
AHC Physician / Consultant Internal Medicine





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DEPARTMENT OF BIOCHEMISTRY AND IMMUNOLOGY



Name : Mr. AMIN SAIYED
 UHID : AHCC.0000127071 / AHCCA4483
 SIN \ LRN : 3751056 \ 3751055 \ 3751061 \ 3751057 \ 1608432
 Specimen : Plasma
 Ref Doctor : DR. MHC

Age : 58Yr 4Mth 18Days Gender : Male
 W/BNo/RefNo : AHC



Collected on : 11-FEB-2023 10:08:09 AM Received on : 11-FEB-2023 12:43:21 PM Reported on : 11-FEB-2023 05:31:02 PM

MEDIWHEEL-FULL BODY CHK-ABOVE40-MALE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
ALT(SGPT) - SERUM / PLASMA (UV without P5P)	14	Adult Male : < 45	U/L
ALKALINE PHOSPHATASE - SERUM/PLASMA (PNP AMP BUFFER)	115	Adult(Male): 40 - 129	U/L
AST (SGOT) - SERUM (UV without P5P)	18	> 1 year Male : <40	U/L
BILIRUBIN (DIRECT/INDIRECT/TOTAL) - SERUM (Diazotization)			
Bilirubin Total	0.564	0-1 days : 0 - 6mg/dl 1-2 days : 0 - 8mg/dl 2-5 days : 0 - 12mg/dl 5days - 4 months : 0.3 -1.2mg/dl >4 months : 0.3-1.2 mg/dl	mg/dL
Direct Bilirubin	0.226	Upto 0.3 mg/dl	mg/dL
Indirect Bilirubin	0.34	1 Day ≤5.1 mg/dL 2 Days ≤7.2 mg/dL 3-5 Days ≤10.3 mg/dL 6-7 Days ≤8.4 mg/dL 8-9 Days ≤6.5 mg/dL 10-11 Days ≤4.6 mg/dL 12-13 Days ≤2.7 mg/dL 14 Days - 9 Years 0.2-0.8 mg/dL 10-19 Years 0.2-1.1 mg/dL	mg/dL

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The Emergency Specialist





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CREATININE - SERUM / PLASMA (Alkaline picrate - kinetic rate blanked)	0.83	≥20 Years 0.2-1.2 mg/dL Adult Male: 0.6 - 1.3	mg/dL
GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM (IFCC)	24	Male : 10 - 71 Female : 6 - 42	U/L
PROTEIN TOTAL - SERUM / PLASMA (Biuret)	7.36	>2 Year: 6.0 - 8.0	g/dL
ALBUMIN - SERUM Globulin -Serum/Plasma	4.44 2.9	Adult(18 - 60 Yr): 3.5 - 5.2 2.2 - 4.2	g/dL
A/G ratio	1.5	1.00 - 2.00	
TOTAL T3: TRI IODOETHYRONINE - SERUM (Electrochemiluminescence:ECLIA)	0.9	0.8 - 2.0	ng/mL
TOTAL T4: THYROXINE - SERUM (Electrochemiluminescence:ECLIA)	5.58 *	5.1 - 14.1	ug/dL
TSH: THYROID STIMULATING HORMONE - SERUM (Electrochemiluminescence:ECLIA)	1.21	14-120 years : 0.27 - 4.20	μIU/mL
URIC ACID - SERUM (Uricase, colorimetric)	7.3 *	Male : 3.4-7.0 Female : 2.4-5.7	mg/dL
PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL) - SERUM (Electrochemiluminescence:ECLIA)	2.64	Healthy Men: ≤ 4.0 Males: 40-49 yrs: 0 - 2.5 50-59 yrs: 0 - 3.5 60-69 yrs: 0 - 4.5 70-79 Yrs: 0 - 6.5	ng/mL



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 UHID : AHCC.0000127071 / AHCCAH4483
 W/BNo/RefNo : AHC
 SIN \ LRN : 3751056 \ 3751055 \ 3751061 \ 3751057 \
 Specimen : 1608432
 Plasma
 Ref Doctor : DR. MHC



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BUN (BLOOD UREA NITROGEN) (Histology)	10	Adult : 6 - 20	mg/dL
UREA - SERUM / PLASMA	21	15 - 50	mg/dL
LIPID PROFILE - SERUM			
TOTAL CHOLESTEROL (CHOD POD)	158	0 - 200 : Desirable 200 - 240 : Borderline High 240 - 280 : High > 280 : Very High	mg/dl
TRIGLYCERIDES - SERUM (Enzymatic Endpoint)	73	Normal: <150 High: 150 - 199 Hypertriglyceridemic: 200 - 499 Very High: >=500	mg/dL
HDL CHOLESTEROL - SERUM / PLASMA (Direct Enzymatic Colorimetric)	47 *	< 40 : Major risk factor for heart disease 40 - 59 : The higher The better. >=60 : Considered protective against heart disease	mg/dL
LDL CHOLESTEROL - SERUM / PLASMA (Direct LDL)	102	< 100 : Optimal 100-129 : Near Optimal 130-159 : Borderline High 160-189 : High >=190 : Very High	mg/dL
VLDL CHOLESTEROL (Calculated)	14.6	< 40 mg/dl	
C/H RATIO (Calculated)	3.4	< 4.5	
GLYCOSYLATED HEMOGLOBIN (HBA1C) - WHOLE BLOOD	6.78 *	Normal < 5.7%	%



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(Immuno-turpoidimetric)

Increased risk for Diabetes 5.7 - 6.4%

Diabetes >= 6.5%

Monitoring criteria for Diabetes Mellitus
 <7.0 : Well Controlled Diabetes
 7.1 - 8.0 : Unsatisfactory Control
 > 8.0 : Poor Control & Needs Immediate Treatment

Mean Blood Sugar	148		
GLUCOSE - SERUM / PLASMA (POST PRANDIAL) - PPBS (Hexokinase)			
GLUCOSE - SERUM / PLASMA (POST PRANDIAL)	183 *	70 - 140	mg/dL
GLUCOSE - SERUM / PLASMA (FASTING) (Hexokinase)	111 *	70 - 100 : Normal 100 - 125 : Impaired Glucose Tolerance >= 126 : Diabetes Mellitus	mg/dL

11/02/2023

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 SIN \ LRN : 3751056 \ 3751055 \ 3751061 \ 3751057 \
 Specimen : 1608432 Plasma
 Ref Doctor : DR. MHC

Age : 58Yr 4Mth 18Days Gender : Male
 W/BNo/RefNo : AHC



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 Received on : 11-FEB-2023 12:43:21 PM
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Report Status: Final

*** END OF REPORT ***

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Dr. HARDIK KOSHTI
MD PATHOLOGY,
CONSULTANT



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DEPARTMENT OF CLINICAL PATHOLOGY

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UHID : AHCC.0000127071 / AHCCA4483
SIN\LRN : 3751054 \ 1608432
Specimen : Urine
Ref Doctor : DR. MHC

Age : 58Yr 4Mth 18Days Gender : Male
W/BNo/RefNo : AHC



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MEDIWHEEL-FULL BODY CHK-ABOVE40-MALE

TEST NAME RESULT

URINE GLUCOSE(POST PRANDIAL)
\$ URINE GLUCOSE(POST PRANDIAL) Nil

11/02/2023

Report Status:Final

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 SIN ILRN : 3751059 \ 1608432
 Specimen : Urine
 Ref Doctor : DR. MHC

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MEDIWHEEL-FULL BODY CHK-ABOVE40-MALE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
URINE FOR ROUTINE EXAMINATION : (Solubility Method)			
PHYSICAL EXAMINATION			
Specific Gravity	1.025		
Colour:	Pale-Yellow		
Transparency:	Clear		
CHEMICAL EXAMINATION			
pH	6		
Protein :	Nil		
Sugar:	Nil		
Blood:	Negative		
Ketone	Absent		
Bile Pigments:	Absent		
Urobilinogen	Normal		
Nitrite	Negative		E.U./dL
Cells:			
Pus Cells	Occasional		
RBC	Nil	0-5/hpf	
Epithelial Cells	Occasional	0-5/hpf	/hpf
Casts:	Absent		
Crystals:	Absent		

*11/02/2023

Report Status:Final

* END OF REPORT *

CHECKED BY : 1060162
 717880

Printed On : 11-FEB-2023 06:44:04 PM


 Dr.HARDIK KOSHTI
 MD PATHOLOGY,
 CONSULTANT





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DEPARTMENT OF HAEMATOLOGY



Name : Mr. AMIN SAIYED Age : 58Yr 4Mth 18Days Gender : Male
 UHID : AHCC.0000127071 / AHCCA4483 W/BNo/RefNo : AHC
 SIN/ LRN : 3751062 \ 1608432
 Specimen : Whole Blood (EDTA)
 Ref Doctor : DR. MHC



Collected on : 11-FEB-2023 10:08:09 AM Received on : 11-FEB-2023 12:43:07 PM Reported on : 11-FEB-2023 03:22:36 PM

MEDIWHEEL-FULL BODY CHK-ABOVE40-MALE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
COMPLETE BLOOD COUNT WITH ESR			
Hemoglobin (Photometric Measurement)	11 *	13.0 - 17.0	gm%
Packed cell volume(Calculated)	35.9 *	40 - 50	%
RBC COUNT (Impedance)	5.39	4.5 - 5.9	Million/ul
MCV (From RBC Histogram)	66.7 *	80 - 100	fl
MCH(Calculated)	20.3 *	27 - 32	pg
MCHC(Calculated)	30.5 *	31 - 36	%
RDW(Calculated)	16.4 *	11.5 - 14.5	%
WBC Count (Impedance)	9100	4000 - 11000	/cu mm
Differential Count (VCS Technology and Microscopy)			
Neutrophils	63	40 - 75	%
Lymphocytes	24	20 - 40	%
Monocytes	09	2 - 10	%
Eosinophils	04	01 - 06	%
Basophils	00	0 - 1	%
Platelet Count (Impedance)	250000	150000 - 450000	/cu mm
MPV (Calculated)	9.1	7 - 11	fl
PERIPHERAL SMEAR(Microscopy)	Hypochromic Microcytic RBCs		
RBC:	Target cells (+),Anisocytosis (+)		
ERYTHROCYTE SEDIMENTATION RATE (ESR) (Automated/ optic-electronic)	03	0 - 15	mm/1st hr

SUGGEST : Hb electrophoresis.,Hb electrophoresis is indicated after iron supplements.,S. Iron Profile is indicated.

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DEPARTMENT OF HAEMATOLOGY



Name : Mr. AMIN SAIYED Age : 58Yr 4Mth 18Days Gender : Male
 UHID : AHCC.0000127071 / AHCCAH4483 W/BNo/RefNo : AHC
 SIN /LRN : 3751062 \ 1608432
 Specimen : Whole Blood (EDTA)
 Ref Doctor : DR. MHC



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*11/02/2023

Report Status:Final

* END OF REPORT *

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DEPARTMENT OF BLOOD BANK

Name : Mr. AMIN SAIYED Age : 58Yr 4Mth 18Days Gender : Male
 UHID : AHCC.0000127071 / AHCCA4483 W/BNo/RefNo : AHC
 SIN \LRN : 3751060 \ 1608432
 Specimen : Blood
 Ref Doctor : DR. MHC



Collected on : 11-FEB-2023 10:08:09 AM Received on : 11-FEB-2023 04:02:20 PM Reported on : 11-FEB-2023 04:49:53 PM

MEDIWHEEL-FULL BODY CHK-ABOVE40-MALE

TEST NAME	RESULT
BLOOD GROUPING AND TYPING (ABO and Rh)	O Positive
BLOOD GROUP:	O Positive
Report Status:Final	

* END OF REPORT *

CHECKED BY : 1010661
 717844

Printed On : 11-FEB-2023 06:44:43 PM

Dr.SANJAY GUPTA
 MBBS, DIHBT,
 CONSULTANT, BLOOD BANK

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AHCC.0000127071
 MR. AMIN SAIYED
 Age: 58 Year(s) Year(s)/Male
 11 Feb 2023 8:41:46 AM



IP No: 12345
 Reg. No: 12345

DENTISTRY

Name :
 Occupation :
 Age : Sex : Male Female

Date : 11/02/23 Unit No. :
 Ref. Physician :
 Copies to :

DENTAL RECORD

ALLERGIES :

PAIN : Score (0-10) _____ Location : _____ Character : _____

DENTAL CLEANING HABIT Once Twice Occasionally
 Brush Finger Stick Any other
 Tooth Paste Powder Any other

DO THE GUMS BLEED WHEN YOU BRUSH YOUR TEETH? Yes No

ARE YOUR TEETH SENSITIVE TO HEAT / COLD? Yes No

ORAL HYGIENE Good Fair Poor

ORAL TISSUE EXAMINATION	PERIODONTAL EXAMINATION	OCCLUSION
NORMAL FINDINGS IN DISEASE	MILD MOD SEV	CLASS I II III CROSSBITE
Lips :	Gingivitis <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Hypoplasia
Cheeks :	Calculus <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Impaction
Tongue :	Recession <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Non-vital
Floor of the mouth :	Periodontal Pockets <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Fracture
Palate :	Attrition <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Abcess
Tonsillar Area :	Erosion <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Ulcers
Any other :	Mobility <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Caries <input checked="" type="checkbox"/>
		Missing Teeth
		Supernumerary
		Others

PRESENT COMPLAINT :

PRE-MEDICAL HISTORY: DM HTN Thyroid Acidity Pregnancy
 Anticoagulant Under Drug Therapy



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DEPARTMENT OF RADIOLOGY AND IMAGING SCIENCES

Patient Details : Mr. AMIN SAIYED | Male | 58Yr 4Mth 18Days
UHID : AHCC.0000127071 **Patient Location:** AHC
Patient Identifier: AHCCA4483 
DRN : 123019105 **Completed on :** 11-FEB-2023 10:53
Ref Doctor : DR. MHC

X-RAY CHEST PA

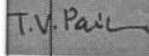
FINDINGS :

Both lung fields appear normal. No evidence of consolidation or collapse.
 Bilateral hilar shadows appear normal. Trachea and major bronchi appear normal.
 Cardiothoracic ratio is normal.
 Both costophrenic angles are clear. Domes of diaphragm are well delineated.
 Visualized bony thorax appear normal.

IMPRESSION

NORMAL STUDY.

— END OF THE REPORT —



TIRTH VINAYKUMAR PARIKH

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DEPARTMENT OF RADIOLOGY AND IMAGING SCIENCES

Patient Details : Mr. AMIN SAIYED | Male | 58Yr 4Mth 18Days
UHID : AHCC.0000127071 **Patient Location:** AHC
Patient Identifier: AHCCA4483 
DRN : 223007704 **Completed on :** 11-FEB-2023 09:38
Ref Doctor : DR. MHC

USG WHOLE ABDOMEN SCREENING

IMPRESSION

Liver appears normal in size and shows fatty infiltration (grade I). No evidence of focal pathology seen. Intra and extra hepatic biliary radicles are not dilated. Portal vein is normal in caliber. Intrahepatic portal radicles appear normal.

Gall bladder appears normal with no evidence of calculus. Wall thickness appears normal. No evidence of pericholecystic collection.

Visualized pancreas appears normal in size and echotexture. No focal lesions identified. Visualize pancreatic duct appears normal in caliber.

Spleen is normal in size and shows uniform echotexture.

Both kidneys are normal in size and show normal echopattern with good corticomedullary differentiation. Cortical outlines appear smooth. No evidence of calculi. Left renal exophytic simple cyst at upper pole (size 22 x 20 mm). Specks of parenchymal calcification in left renal upper pole.

No evidence of ascites or lymphadenopathy. Visualized bowel loops are unremarkable.

Urinary bladder is normal in contour and outline. Wall thickness appears normal. No evidence of any intraluminal pathology seen.

Prostate (volume 28 cc) mild enlarged and show normal echopattern

Approx 3 cm sized wall defect seen at umbilicus with herniation of mesenteric fat on straining. No evidence of strangulation.

IMPRESSION:

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Mr. AMIN SAIYED

AHCC.0000127071

AHCCA4483

USG WHOLE ABDOMEN SCREENING

Grade I fatty liver.

Mild prostatomegaly (28 cc).

Left renal simple cyst. Specks of parenchymal calcification in left renal upper pole.

Approx 3 cm sized wall defect seen at umbilicus with herniation of mesenteric fat on straining. No evidence of strangulation.

— END OF THE REPORT —

T.V. Pail

TIRTH VINAYKUMAR PARIKH

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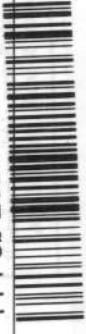


AHCC.0000127071

MR. AMIN SAIYED

Age: 58 Year(s) Year(s)/Male

11 Feb 2023 8:41:46 AM



ELECTROCARDIOGRAM REPORT

Name: _____ Age/Sex: _____ Date: _____
 Ref. By: _____ ECG No. _____ UHID/IP: _____

Referral Diagnosis:

Atria - Rate:

Rhythm:

Axis:

PR Interval:

P Wave:

Voltage:

Q Wave:

S-T Changes:

Final Impression:

Reported By:

NSR/wmm

Ventricular Rate:

QRS:

QTc:

	V _{4R}	V ₁	V ₂	V ₅	V ₆
R/S					



***Caution:** Please get the ECG photocopied for future reference.

Copy ID:

Name:

Sex: Birth date: / /

cm kg

Medication:

Symptoms:

History:

Vent. rate

PR int

QRS dur

QT/QTc(E) int

P/QRS/T axis

RV5/SV1 amp

RV5+SV1 amp

79 bpm

154 ms

98 ms

372 / 407 ms

53 / 62 / 56 °

1.48 / 0.35 mV

1.83 mV

1100 Sinus rhythm

9110 ** normal ECG **

AHCC-0000127071

MR. AMIN SAIYED

Age: 58 Year(s) Male

11 Feb 2023 8:41:50 AM



Unconfirmed Report

Reviewed by:

10 mm/mV

10 mm/mV

Filter: H50 D 35 Hz 10 mm/mV

10 mm/mV 25 mm/s



II



III



Rhythm [I1] 10 mm/mV



Exam:

Dept.:

07-01

02-10

EYE CHECK UP

NAME Mr. Amin Saïyed

Date 11/02/23

VA 6/6
6/16

557m

flo

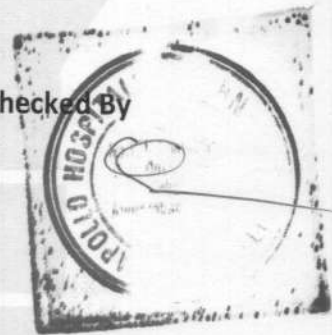
BCVA(Distance & Near)

RE -1.0/-1.0 x 80-816
LE -1.0/-1.0 x 80-816
Add 25

Colour Vision Normal

Advice:

Checked By



Anterior Segment

Fundus

Advice:

Diagnosis


Checked By



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CARDIOLOGY

Patient Details : Mr. AMIN SAIYED | Male | 58Yr 4Mth 18Days
UHID : AHCC.0000127071 **Patient Location:** AHC
Patient Identifier: AHCCA4483 
DRN : 5623014162 **Completed on :** 11-FEB-2023 16:33
Ref Doctor : DR. MHC

ECHO

POOR ECHO WINDOW.

Normal cardiac chamber dimensions.

Normal LV systolic function, LVEF: 60%. No RWMA at rest.

Reduced LV compliance.

All cardiac valves are structurally normal.

Trivial MR, No AR, No PR, Mild TR. No PAH, RVSP: 27 mm Hg.

No clots/ vegetation/ effusion.

Impression

POOR ECHO WINDOW.

Normal LV systolic function, LVEF: 60%.

Reduced LV compliance.

No PAH.

— END OF THE REPORT —



DR SAMEER DANI MD.DM

Interventional Cardiologist

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