

Dr. Vinimi Goel
Head - Non Invasive Cardiology
Incharge - Preventive Health Care
MBBS, MD (Internal Medicine)
Reg. No: MMC- 2014/01/0113
7499913052

 **KIMS-KINGSWAY
HOSPITALS**

Name: Mr. Dhiraj Baxale Date: 9/9/23
Age: 38 Sex M F Weight: 57.3 kg Height: 179.6 inc BMI: 17.79
BP: 100/60 mmHg Pulse: 78/m bpm RBS: _____ mg/dl
SpO2: 99%



CLINICAL DIAGNOSTIC LABORATORY
DEPARTMENT OF PATHOLOGY

Patient Name : Mr. DHIRAJ BOKADE
Age / Gender : 38 Y(s)/Male
Bill No/ UMR No : BIL2324038965/UMR2324019596
Referred By : Dr. Vimmi Goel MBBS,MD
Received Dt : 09-Sep-23 10:07 am
Report Date : 09-Sep-23 12:47 pm

HAEMOGRAM

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Haemoglobin	Blood	15.5	13.0 - 17.0 gm%	Photometric
Haematocrit(PCV)		45.6	40.0 - 50.0 %	Calculated
RBC Count		5.52	4.5 - 5.5 Millions/cumm	Photometric
Mean Cell Volume (MCV)		83	83 - 101 fl	Calculated
Mean Cell Haemoglobin (MCH)		28.0	27 - 32 pg	Calculated
Mean Cell Haemoglobin Concentration (MCHC)		33.9	31.5 - 35.0 g/l	Calculated
RDW		14.5		Calculated
Platelet count		251	11.5 - 14.0 %	Calculated
WBC Count		4300	150 - 450 10^3 /cumm	Impedance
<u>DIFFERENTIAL COUNT</u>				
Neutrophils		53.5	4000 - 11000 cells/cumm	Impedance
Lymphocytes		41.9	50 - 70 %	Flow Cytometry/Light microscopy
Eosinophils		1.0	20 - 40 %	Flow Cytometry/Light microscopy
Monocytes		3.6	1 - 6 %	Flow Cytometry/Light microscopy
Basophils		0.0	2 - 10 %	Flow Cytometry/Light microscopy
Absolute Neutrophil Count		2300.5	0 - 1 %	Flow Cytometry/Light microscopy
			2000 - 7000 /cumm	Calculated



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<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Absolute Lymphocyte Count		1801.7	1000 - 4800 /cumm	Calculated
Absolute Eosinophil Count		43	20 - 500 /cumm	Calculated
Absolute Monocyte Count		154.8	200 - 1000 /cumm	Calculated
Absolute Basophil Count		0	0 - 100 /cumm	Calculated

PERIPHERAL SMEAR

RBC	Normochromic
WBC	Normocytic
Platelets	As Above
ESR	Adequate
	05
	0 - 15 mm/hr

*** End Of Report ***

Automated
Westergren's Method

Suggested Clinical Correlation * If necessary, Please discuss

Verified By : : 11100499

Test results related only to the item tested.

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Paiswal

Dr. PURVA JAISWAL, MBBS,MD,DNB
CONSULTANT PATHOLOGIST



CLINICAL DIAGNOSTIC LABORATORY
DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mr. DHIRAJ BOKADE	Age / Gender : 38 Y(s)/Male
Bill No/ UMR No : BIL2324038965/UMR2324019596	Referred By : Dr. Vimmi Goel MBBS,MD
Received Dt : 09-Sep-23 10:06 am	Report Date : 09-Sep-23 11:40 am

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Fasting Plasma Glucose	Plasma	108	< 100 mg/dl	GOD/POD,Colorimetric
GLYCOSYLATED HAEMOGLOBIN (HBA1C)				
HbA1c		5.5	Non-Diabetic : <= 5.6 % Pre-Diabetic : 5.7 - 6.4 % Diabetic : >= 6.5 %	HPLC

*** End Of Report ***

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Paiswal

Dr. PURVA JAISWAL, MBBS,MD,DNB

SPAN CONSULTANT PATHOLOGIST Private Limited
44, Parwana Bhawan, Kingsway, Nagpur - 440 001, Maharashtra, India.
Phone: +91-0712-6789100
CIN: U74999MH2018PTC303510



CLINICAL DIAGNOSTIC LABORATORY
DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mr. DHIRAJ BOKADE	Age /Gender : 38 Y(s)/Male
Bill No/ UMR No : BIL2324038965/UMR2324019596	Referred By : Dr. Vimmi Goel MBBS,MD
Received Dt : 09-Sep-23 01:07 pm	Report Date : 09-Sep-23 02:18 pm

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Post Prandial Plasma Glucose	Plasma	76	< 140 mg/dl	GOD/POD, Colorimetric

Interpretation:

Clinical Decision Value as per ADA Guidelines 2021

- Diabetes Mellites If,
- Fasting \geq 126 mg/dl
- Random/2Hrs. OGTT \geq 200 mg/dl
- Impaired Fasting = 100-125 mg/dl
- Impaired Glucose Tolerance = 140-199 mg/dl

*** End Of Report ***

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Dr. GAURI HARDAS, MBBS,MD
CONSULTANT PATHOLOGIST



CLINICAL DIAGNOSTIC LABORATORY
DEPARTMENT OF BIOCHEMISTRY

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Report Date : 09-Sep-23 11:40 am

LIPID PROFILE

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Method</u>
Total Cholesterol	Serum	144	Enzymatic(CHE/CHO/POD)
Triglycerides		83	Enzymatic
HDL Cholesterol Direct		51	(Lipase/GK/GPO/POD)
LDL Cholesterol Direct		76.20	Phosphotungstic acid/mgcl-Enzymatic (microslide)
VLDL Cholesterol		17	Enzymatic
Tot Chol/HDL Ratio		3	Calculated
		3 - 5	Calculation

<u>Initiate therapeutic</u>	<u>Consider Drug therapy</u>	<u>LDC-C</u>
CHD OR CHD risk equivalent	>100	<100
Multiple major risk factors conferring 10 yrs CHD risk >20%	>130	<130
Two or more additional major risk factors, 10 yrs CHD risk <20%	>160	<160
No additional major risk or one additional major risk factor	>190, optional at 160-189	<160

*** End Of Report ***

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CLINICAL DIAGNOSTIC LABORATORY
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Patient Name : Mr. DHIRAJ BOKADE	Age / Gender : 38 Y(s)/Male
Bill No/ UMR No : BIL2324038965/UMR2324019596	Referred By : Dr. Vimmi Goel MBBS,MD
Received Dt : 09-Sep-23 10:07 am	Report Date : 09-Sep-23 11:40 am

THYROID PROFILE

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
T3	Serum	1.63	0.55 - 1.70 ng/ml	Enhanced chemiluminescence
Free T4		1.35	0.80 - 1.70 ng/dl	Enhanced Chemiluminescence
TSH		1.93	0.50 - 4.80 uIU/ml	Enhanced chemiluminescence

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Dr. PURVA JAISWAL, MBBS,MD,DNB
CONSULTANT PATHOLOGIST



CLINICAL DIAGNOSTIC LABORATORY
DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mr. DHIRAJ BOKADE	Age / Gender : 38 Y(s)/Male
Bill No/ UMR No : BIL2324038965/UMR2324019596	Referred By : Dr. Vimmi Goel MBBS,MD
Received Dt : 09-Sep-23 10:07 am	Report Date : 09-Sep-23 11:40 am

<u>Parameter</u>	<u>Specimen</u>	<u>Result Values</u>	<u>Biological Reference</u>	<u>Method</u>
RFT				
Blood Urea	Serum	15	19.0 - 43.0 mg/dl	Urease with indicator dye
Creatinine		0.87	0.66 - 1.25 mg/dl	Enzymatic (creatinine amidohydrolase)
GFR		113.3		Calculation by CKD-EPI 2021
Sodium		141	136 - 145 mmol/L	Direct ion selective electrode
Potassium		4.39	3.5 - 5.1 mmol/L	Direct ion selective electrode
LIVER FUNCTION TEST(LFT)				
Total Bilirubin		0.89	0.2 - 1.3 mg/dl	Azobilirubin/Dyphylline
Direct Bilirubin		0.06	0.1 - 0.3 mg/dl	Calculated
Indirect Bilirubin		0.83	0.1 - 1.1 mg/dl	Duel wavelength spectrophotometric
Alkaline Phosphatase		83	38 - 126 U/L	pNPP/AMP buffer
SGPT/ALT		22	10 - 40 U/L	Kinetic with pyridoxal 5 phosphate
SGOT/AST		26	15 - 40 U/L	Kinetic with pyridoxal 5 phosphate
Serum Total Protein		8.00	6.3 - 8.2 gm/dl	Biuret (Alkaline cupric sulphate)
Albumin Serum		5.13	3.5 - 5.0 gm/dl	Bromocresol green Dye
Globulin		2.88	2.0 - 4.0 gm/	Binding
A/G Ratio		1.78		Calculated

*** End Of Report ***

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Dr. PURVA JAISWAL, MBBS,MD,DNB
SPANY CONSULTANT PATHOLOGIST Private Limited
44, Parwana Bhawan, Kingsway, Nagpur - 440 001, Maharashtra, India.
Phone: +91 0712 6780100
CIN: U74999MH2018PTC303510



CLINICAL DIAGNOSTIC LABORATORY
DEPARTMENT OF PATHOLOGY

Patient Name : Mr. DHIRAJ BOKADE	Age / Gender : 38 Y(s)/Male
Bill No/ UMR No : BIL2324038965/UMR2324019596	Referred By : Dr. Vimmi Goel MBBS,MD
Received Dt : 09-Sep-23 10:26 am	Report Date : 09-Sep-23 11:51 am

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Method</u>
URINE MICROSCOPY			
<u>PHYSICAL EXAMINATION</u>			
Volume	Urine	40 ml	
Colour.		Pale yellow	
Appearance		Clear	
<u>CHEMICAL EXAMINATION</u>			
Reaction (pH)	Urine	7.0	4.6 - 8.0
Specific gravity		1.005	1.005 - 1.025
Urine Protein		Negative	Indicators ion concentration protein error of pH indicator
Sugar		Negative	GOD/POD
Bilirubin		Negative	Diazonium
Ketone Bodies		Negative	Legal's est Principle
Nitrate		Negative	
Urobilinogen		Normal	Ehrlich's Reaction
<u>MICROSCOPIC EXAMINATION</u>			
Epithelial Cells	Urine	0-1	0 - 4 /hpf
R.B.C.		Absent	0 - 4 /hpf
Pus Cells		0-1	0 - 4 /hpf
Casts		Absent	
Crystals		Absent	
USF(URINE SUGAR FASTING)			
Urine Glucose	Urine	Negative	

*** End Of Report ***

GOD/POD

Suggested Clinical Correlation * If necessary, Please discuss

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Dr. Anuradha Deshmukh, MBBS,MD
SPAN Medica Lifesciences Private Limited
44, Parwana Bhawan, Kingsway, Nagpur - 440 001, Maharashtra, India.
Phone: +91 0712 6780100
CIN: U74999MH2018PTC303510



CLINICAL DIAGNOSTIC LABORATORY
DEPARTMENT OF IMMUNO HAEMATOLOGY

Patient Name : Mr. DHIRAJ BOKADE	Age / Gender : 38 Y(s)/Male
Bill No/ UMR No : BIL2324038965/UMR2324019596	Referred By : Dr. Vimmi Goel MBBS,MD
Received Dt : 09-Sep-23 10:07 am	Report Date : 09-Sep-23 12:35 pm

BLOOD GROUPING AND RH

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	
BLOOD GROUP.	EDTA Whole Blood & Plasma/ Serum	" B "	Gel Card Method
Rh (D) Typing.		" Positive "(+Ve)	
		*** End Of Report ***	

Suggested Clinical Correlation * If neccessary, Please discuss

Verified By : : 11100499

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Dr. PURVA JAISWAL, MBBS,MD,DNB
CONSULTANT PATHOLOGIST



CLINICAL DIAGNOSTIC LABORATORY
DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mr. DHIRAJ BOKADE	Age / Gender : 38 Y(s)/Male
Bill No/ UMR No : BIL2324038965/UMR2324019596	Referred By : Dr. Vimmi Goel MBBS,MD
Received Dt : 09-Sep-23 01:25 pm	Report Date : 09-Sep-23 02:07 pm

URINE SUGAR

Parameter
Urine Glucose

Result Values

Negative
*** End Of Report ***

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Dr. GAURI HARDAS, MBBS,MD
CONSULTANT PATHOLOGIST

DEPARTMENT OF RADIOLOGY & IMAGING SCIENCE

NAME	DHIRAJ BOKADE	STUDY DATE	09-09-2023 10:57:57
AGE/ SEX	38Y11M17D / M	HOSPITAL NO.	UMR2324019596
ACCESSION NO.	BIL2324038965-9	MODALITY	DX
REPORTED ON	09-09-2023 13:49	REFERRED BY	Dr. Vimmi Goel

X-RAY CHEST PA VIEW

Both the lung fields are clear.

Heart and Aorta are normal.

Both hilar shadows appear normal.

Diaphragm domes and CP angles are clear.

Bony cage is normal.

IMPRESSION:

No pleuro-parenchymal abnormality seen.



DR NAVEEN PUGALIA
MBBS, MD [076125]
SENIOR CONSULTANT RADIOLOGIST.

N.B.: This is only a professional opinion and not the final diagnosis. Radiological investigations are subject to variations due to technical limitations. Hence, correlation with clinical findings and other investigations should be carried out to know true nature of illness.

PATIENT NAME:	MR. DHIRAJ BOKADE	AGE /SEX:	38 YRS/MALE
UMR NO:	2324019596	BILL NO:	2324038965
REF BY	DR. VIMMI GOEL	DATE:	09/09/2023

USG WHOLE ABDOMEN

LIVER is normal in size, shape and echotexture.
No evidence of any focal lesion seen. Intrahepatic biliary radicals are not dilated.
PORTAL VEIN and CBD are normal in course and caliber.

GALL BLADDER is physiologically distended. No stones or sludge seen within it.
Wall thickness is within normal limits.

PANCREAS is normal in shape, size and echotexture.

SPLEEN is normal in shape, size and echotexture. No focal lesion seen.

Right kidney measures 9.4 x 3.7 cm. Left kidney measures 10.1 x 5.2 cm.
Both KIDNEYS are normal in shape, size and echotexture.
No evidence of calculus or hydronephrosis seen.
URETERS are not dilated.

BLADDER is partially distended. No calculus or mass lesion seen.

Prostate is normal in size (volume 12 cc), shape and echotexture.

There is no free fluid or abdominal lymphadenopathy seen.

IMPRESSION:

**No significant abnormality seen.
Suggest clinical correlation / further evaluation.**



DR UNNATI PARMAR.
MBBS, MD
JUNIOR CONSULTANT RADIOLOGIST

2D ECHOCARDIOGRAPHY AND COLOR DOPPLER REPORT

Patient Name : Mr. Dhiraj Bokade
 Age : 38 years / Male
 UMR : UMR2324019596
 Date : 09/09/2023
 Done by : Dr. Vimmi Goel
 ECG : NSR, WNL
 Blood pressure: 100/60 mm Hg (Right arm, Supine position)
 BSA : 1.69 m²

Impression: Normal 2D Echocardiography Study

Normal chambers dimensions
No RWMA of LV at rest
Good LV systolic function, LVEF 66%
Normal LV diastolic function
E/A is 2.2
Valves are normal
Trivial MR
No pulmonary hypertension
IVC is normal in size and collapsing well with respiration
No clots or pericardial effusion

Comments:

Sector echocardiography was performed in various conventional views (PLAX, SSAX, AP4 CH and 5 CH views). LV size normal. There is no RWMA of LV seen at rest. Good LV systolic function. LVEF 66%. Normal LV diastolic function. E Velocity is 70 cm/s, A Velocity is 31 cm/s. E/A is 2.2. Valves are normal. Trivial MR. No Pulmonary Hypertension. IVC normal in size and collapsing well with respiration. Pericardium is normal. No clots or pericardial effusion seen.

M Mode echocardiography and dimension:

	Normal range (mm)		Observed (mm)
	(adults)	(children)	
Left atrium	19-40	7-37	26
Aortic root	20-37	7-28	22
LVIDd	35-55	8-47	42
LVIDs	23-39	6-28	26
IVS (d)	6-11	4-8	09
LVPW (d)	6-11	4-8	07
LVEF %	~ 60%	~60%	66%
Fractional Shortening			36%

P.T.O

Dr. Vimmi Goel
MD, Sr. Consultant
Non-invasive Cardiology

38 Years

MR DHIRAJ BORKAR
Male

05-Sep-23 12:10:29 PM
KIMS-KINGSWAY HOSPITALS

PHC DEPT.

Rate 64
 PR 96
 QRS 91
 QT 399
 QTc 412

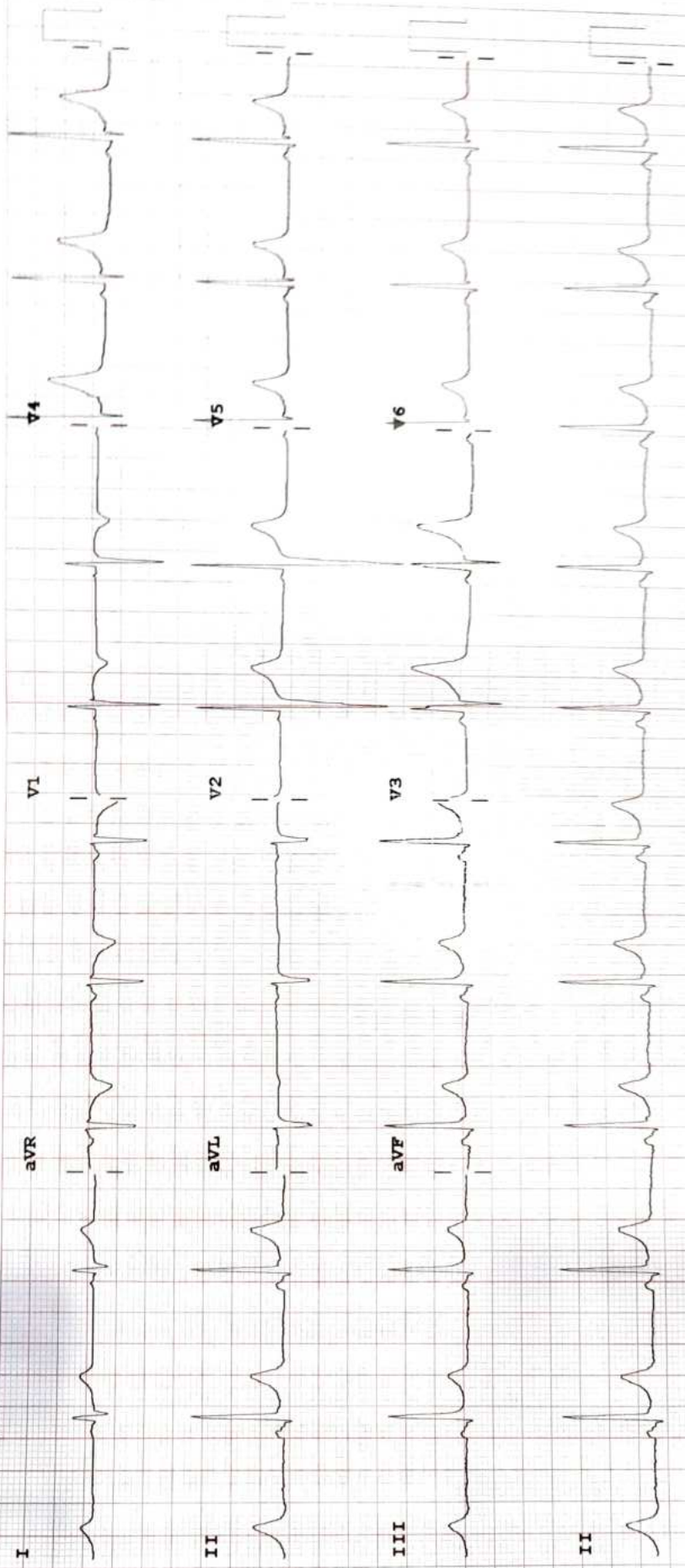
Sinus rhythm
 Short PR interval
 Probable left ventricular hypertrophy
 ST elev, probable normal early repol pattern
 Baseline wander in lead(s) V2

--AXIS--
 P 69
 QRS 85
 T 65

12 Lead; Standard Placement

- ABNORMAL ECG -

Unconfirmed Diagnosis



Device:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 50~ 0.50-150 Hz W

100B CL

P?