

Dr. Kumar Verma - 3114

28/08/24

Healthy Healthy Checkup

MR. 54/14

BP: 120/80

PTMC + HC

Cv: H2 @ No

Ms: BILVBS @ No
Med M3

PIA: SOB NT

US: NP

Cv: HF (N)

Dental Eval - NAD

Skin Eval - NAD

ENT - NAD

- NO fresh Complaints

PT: non-DM HYP/IND/CCPD/CVA

Plus Not Significant

1b14

- CBC - WNL Hb - 14.7 TLC - 5800

- UFT - WNL

- Chole. 229, TG - 255, LDL - 122

- PFT - WNL H3MC - 5.5

- PBI - 108

- PSA - 0.2 (N) UCR M - NAD

- ECG: WNL

2D Echo: (N) Study

- CXR (PIA) - NAD

- USH abd NAD Splenomegaly (not sign)

Imp: - no significant medical
comorbidity noted clinically
except with dyslipidemia.

Ry
① 26 atoms 10 y - HJ
← ○ (1 ml)
⊕
Regular Exercise

PATIENT NAME : MR. OM KUMAR VERMA
UHID NO. : 29466
AGE / SEX : 31 Y Male
CONSULTANT : DR ANIS SIDDIQUI

RECEIPT NO. : PAC/20
SAMPLE RECEIVED ON / AT : 28/08/2021 10:07AM
SAMPLE REPORTED ON / AT : 28/08/2021 02:35PM

COMPLETE BLOOD COUNT(CBC)

RBC

Haemoglobin (HB)	14.7	gm%	12 - 17mg/dl
Haematocrit (HCT)	42.3	%	40 - 55
RBC Count	5.60	millions/cumm	4.5 - 6
MCV	75.5	fL	78 - 92
MCH	26.3	pg	27 - 32
MCHC	34.8	g/dl	32 - 36
RDW-CV	13.4	%	11 - 16

WBC

Total Leucocyte Count (TLC) 5800 4000 - 11000

Differential Leucocyte Count (DLC)

Neutrophils	66	%	40 - 75
Lymphocytes	27	%	20 - 40
Monocytes	05	%	0 - 8
Eosinophils	02	%	1 - 7%
Basophils	00	%	0 - 1

PLATELETS

PLT Count	1.59	lakhs/cmm	1.0 - 4.0
MPV	10.1	fl	8 - 11

Advice

The test results are to be used for help in diagnosing/treating medical diseases & not for forensic applications. These result cannot be used fo medico-legal purposes. These reported results are for the information of referring clinical only.

Test Done By MEDONIC M-SERIES Fully Automatic.

Test Done By
Senior Technologist
SATYANARAYAN SINGH

Report Checked By
Technician

Pathologist
Dr. D. Prashant
M.D. (Pathologist)

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BIO CHEMISTRY			
TEST	RESULT	UNIT	REF. RANGE
BSPP			<140 mg/dl
Urine SUGAR(PP)	ABSENT		ABSENT
GGT(GAMMA GT)			
GGT(GAMMA GT)	63.5	U/L	<55
LFT(Liver Function Test)			
Bilirubin - Total	0.44	mg/dl	0.2 - 1.3
Bilirubin - Direct	0.17	mg/dl	Adult : 0.0 - 0.4 Neonatal : - 0.0 - 0.6
Bilirubin (Indirect)	0.27	mg/dl	Adult : 0.0 - 0.9 Neonatal : 0.6 - 10.5
Total Proteins	7.62	g/dl	6.4 - 8.3 g/dl
Albumin	4.67	g/dl	3.5 - 5.2 g/dl
Globulin	2.95	g/dl	2.3 - 3.6
A/G Ratio	1.58		1.10 - 2.20
Alkaline Phosphatase	57	U/L	4 - 15 Yrs 54 - 389 20 - 59 Yrs 53-128 >60 Yrs 56 - 119
SGOT (AST)	31	U/L	upto 35 U/L
SGPT (ALT)	32	U/L	upto 45 U/L

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Lipid Profile

Total Cholesterol	229	mg/dl	Desirable : <200 Borderline : 200 - 239 High : ≥ 240
Triglycerides	255	mg/dl	Normal: <161 High: 161 - 199 Hypertriglyceridemic : 200 - 499 Very High : > 499
<i>Note: The National Cholesterol Education Program Adult Treatment Panel III ((NCEP-ATP III) report.</i>			
HDL Cholesterol	56	mg/dl	35.3 - 79.5
LDL Cholesterol	122	mg/dl	60 - 165
<i>Note: The National Cholesterol Education Program Adult Treatment Panel III ((NCEP-ATP III) report.</i>			
VLDL Cholesterol	51	mg/dl	20 - 50
Total Cholesterol/HDL Ratio	4.09		0 - 5.1
LDLC/HDLC Ratio	2.18		2.5 - 3.5

Correlates with Lipid Profile:

1. **Fasting state:** Fasting should begin 12 to 14 Hrs before the sample collection. This includes all beverages, although water is permitted. No alcohol should be taken 24 before sample collection.
2. **Drugs:** Cholesterol and Triglyceride lowering agents. Please repeat with fresh sample if clinically indicated

The test has been performed on fully-Automated Biochemistry Analyser "EREA EM 200"

KFT(KIDNEY FUNCTION TEST)

Urea	42	mg/dL	15 - 45
Serum Creatinine	1.02	mg/dl	0.70 - 1.40 mg/dl.
Uric Acid	6.4	mg/dL	3.5 - 7.2

Test Done By MICRO LAB 300 Fully Automatic.

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HAEMATOLOGY

TEST	RESULT	UNIT	REF. RANGE
HbA1c (Glycosalated Haemoglobin)			
HbA1C-Glycosalated Haemoglobin	5.55	%	4 to 6% Non-diabetic 6 to 7% Excellent control 7 to 8% fair to good control 8 to 10% Unsatisfactory control Above 10% poor Control

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The test has been performed on fully-Automated Biochemistry Analyser "ERBA EM 200"


ESR	16	mm at 1hr	up to 15 mm (1 hr)
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Blood Group

ABO Group : O Rh Positive
SLIDE METHOD.

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Machine Footer



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Senior Technologist
SATYANARAYAN SINGH

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Technician




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Dr. D. Prashant
M.D. (Pathologist)

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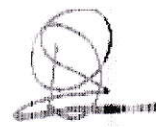
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PATHOLOGY			
TEST	RESULT	UNIT	REF. RANGE
BSF (Fasting Sample Required)	108		<110 mg/dl




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THYROID HORMONES

TEST	RESULT	UNIT	REF. RANGE
THYROID HORMONES			
T3 (Triiodothyronine)	0.87	ng/ml	0.5 - 2.0
<i>Remarks: 1. Decreased values of T3 (T4 and TSH normal) have minimal clinical significance and not recommended for diagnosis of hypothyroidism 2. Total T3 and T4 values may also be altered in other conditions due to changes in serum proteins or binding sites, pregnancy, Drugs (Androgens, Estrogens, O C pills, Phenyloin) Nephrosis etc.</i>			
T4 (Thyroxine)	6.94	µg/dl	4.4 - 10.8
<i>Remark: 1. Total T3 and T4 values may also be altered in other conditions due to changes in serum proteins or binding sites, pregnancy, Drugs (Androgens, Estrogens, O C pills, Phenyloin) Nephrosis etc.</i>			
TSH	2.19	µIU/ml	0.39- 6.16 µIU/ml
<i>Remarks: 1. 4.51 to 15 µIU/ml - Suggested clinical co-relation or repeat the test with new sample as physiological factors can give falsely high TSH. 2. TSH values may be transiently altered because of non thyroidal illness like severe infection, liver disease, renal and heart failure, severe burns, trauma and surgery etc. 3. Drugs that decreases TSH values e.g. L-dopa, Glucocorticoids Drugs that increases TSH values e.g. Iodine, Lithium, Amiodarone.</i>			
METHOD - ELISA ACCUBIND			


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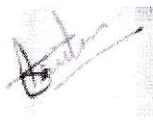
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TUMOR MARKERS

TEST	RESULT	UNIT	REF. RANGE
PSA (Total)	0.20	ng/mL	> 4.00
<i>The instrument for ichroma test calculate the test result automatically and displays PSA concentration of the test sample in terms of ng/mL</i>			

Test done by ichroma



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ROUTINE URINE ANALYSIS TEST

TEST	RESULT	UNIT	REF. RANGE
Urine Routine ANALYSIS TEST			
General Examination			
Volume	20	ml	10 - 50
Colour	Pale Yellow		Pale Yellow
Appearance	Clear		Clear
pH	5.0		5.5 - 8.0
Chemical Examination			
Urine Protein(Albumin)	Absent	g/L	Absent
Urine Glucose(Sugar)	Absent	mmol/L	Absent
Urine Ketons(Acetone)	Absent	mmol/L	Absent
Specific Gravity	1.020		
Microscopic Examination			
Pus cells	1-2/HPF	/hpf	<5
RBC (Urine)	Nil	/hpf	Nil
Epithelial cell	1-2/HPF		0-4
Casts	Absent		Absent
Crystals	Absent		Absent

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M.D. (Pathologist)

EYE EXAMINATION

NAME: - Mst. Omkumar Verma
AGE/SEX 31YM

DATE:- 28/08/21

1. EXAMINATION OF EYES : (BY OPHTHALMOLOGIST)

EXTRENAL, EXAMINATION				
NAD				
SQUINT				
NAD				
NYSTAGMUS				
NAD				
COLOUR VISION				
NORMAL				
FUDUS				
WNL				
INDIVIDUAL COLOUR IDENTIFICATION				
NORMAL				
DISTANT VISION				
6/6 6/6				
NEAR VISION				
N/G				
NIGHT BLINDNESS				
NAD				
	SPH	CYL	AXIS	ADD
RIGHT				
LEFT				

REMARK :-

(Signature)
(SIGN.)

MR.OM KUMAR

Male 31Years

Diagnosis Information:

Sinus Rhythm

Normal ECG

HR : 89 bpm

P : ms

PR : 134 ms

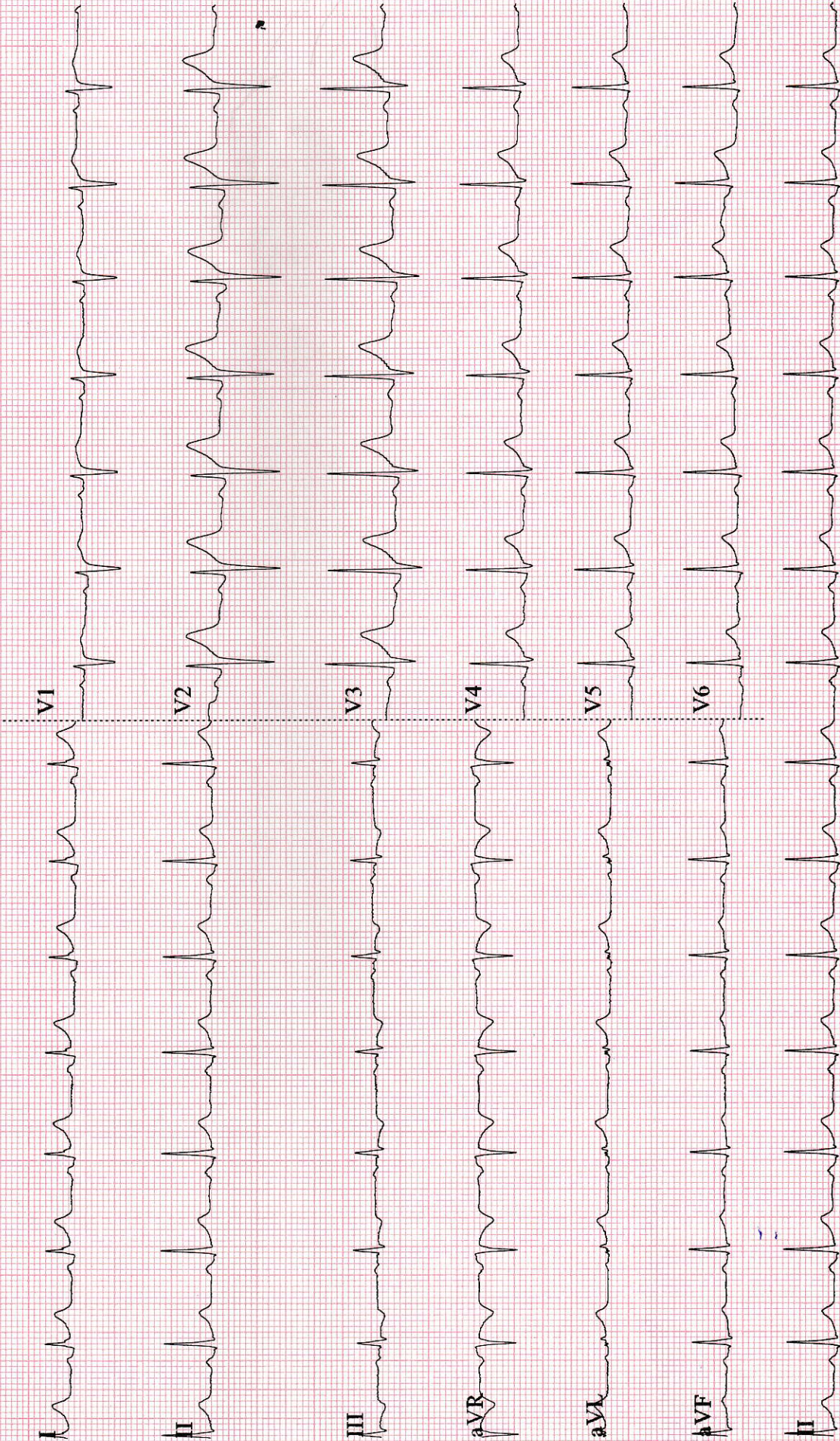
QRS : 82 ms

QT/QTc : 322/393 ms

P/QRS/T : 22/50/12 °

RV5/SV1 : 0.99/0.567 mV

Report Confirmed by:



NAME MR. OM KUMAR VERMA

AGE 31 YR/M

REF BY: DR. A SIDDIQUI

DATE: 28/08/2021

ECHOCARDIOGRAPHY

M-MODE

<u>MEASUREMENT</u>	<u>PT'S VALUE</u>	<u>NORMAL VALUE</u>
AO	26.2 mm	20-37 mm
LA	30.4 mm	19-40 mm
IVS (d)	11.5 mm	6-11 mm
LVID (d)	35.7 mm	35-50 mm
LVPW (d)	11.5 mm	6-11 mm
LVID (S)	19.4 mm	23-39 mm
EF	60%	

2 D ECHO & CFI

CHAMBERS	-	NORMAL
VALVES	-	NORMAL
SEPTAE	-	IVS / IAS Intact
RWMA	-	NO RWMA PRESENT AT REST.
EF	-	60%

CLOT / VEGETATION/ PERICARDIAL EFFUSSION – NILL.

<u>VALVE</u> <u>(mmHg)</u>	<u>REGURGITATION</u>	<u>GRADIENT</u>
-------------------------------	----------------------	-----------------

Mitral Valve	NILL	Not Significant
Aortic Valve	NILL	Not Significant
Tricuspid Valve	NILL	Not Significant
Pulmonary Valve	NILL	Not Significant

PULSE WAVE DOPPLER

- Mitral Valve inflow shows E Wave < A Wave .

I M P R E S S I O N .

- NO RWMA PRESENT AT REST.
 - NORMAL BIVENTRICULAR SYSTOLIC FUNCTION.
 - GLOBAL LVEF 60%.
 - NO AS/MS/TR/AR/NO MR.
- NO INTRACARDIAC CLOT, VEGETATION.

Dr.ANIS SIDDIQUI (MD,PGCCDM)

PATIENT'S NAME: SUDEN POTAI 30YR M
REFERRED BY: DR V PANDEY
MRD NO: XR MULTY 29449 DI 10635 IPD

STUDY TIME: 27-08-21
REPORT TIME: 27/08/21 9:02 AM
PRINT TIME: 28/08/21 12:56 PM

STUDY: XRAY OF THE CHEST PA VIEW

INDICATION: RTA

COMPARISON: None.

OBSERVATIONS & CONCLUSION:

NO ACUTE BONY PATHOLOGY IS SEEN.

NO PULMONARY INFILTRATE, COLLASPE OR CONSOLIDATION, EFFUSION, OR PNEUMOTHORAX IS SEEN.

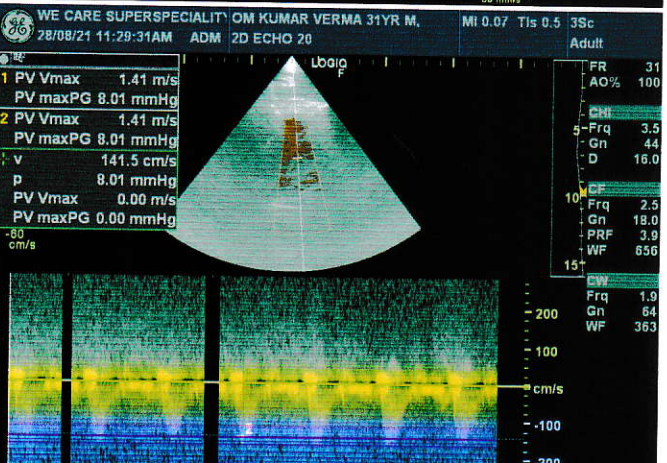
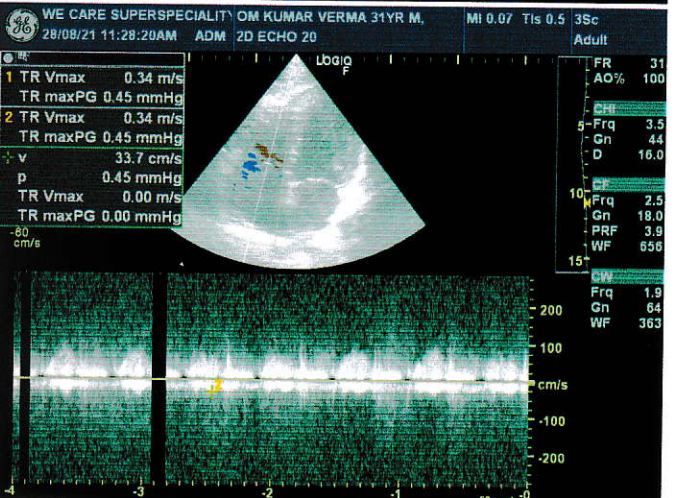
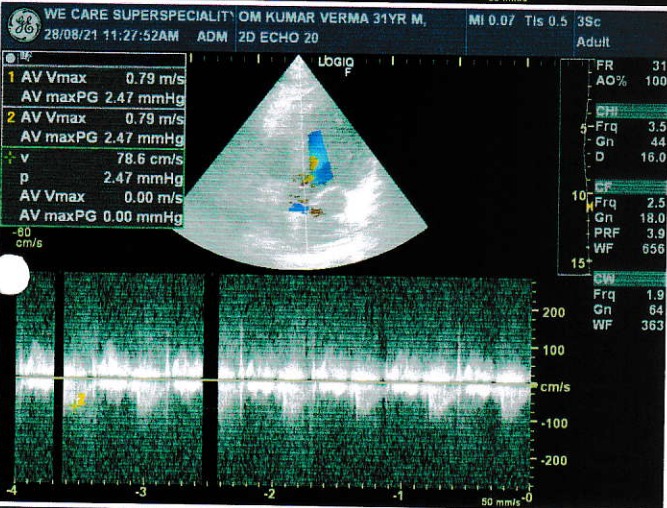
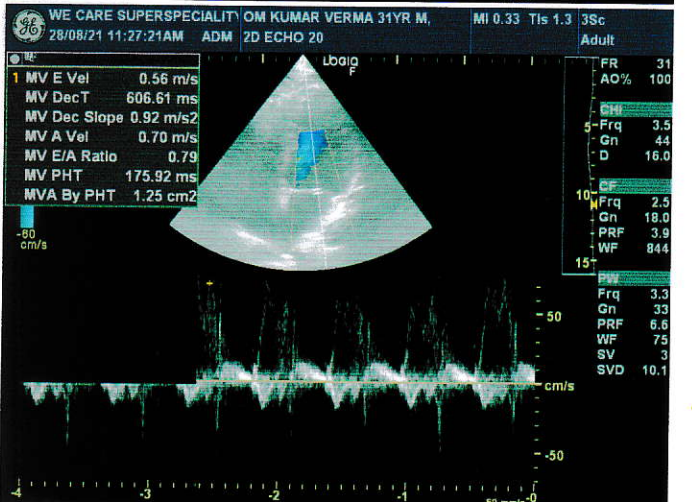
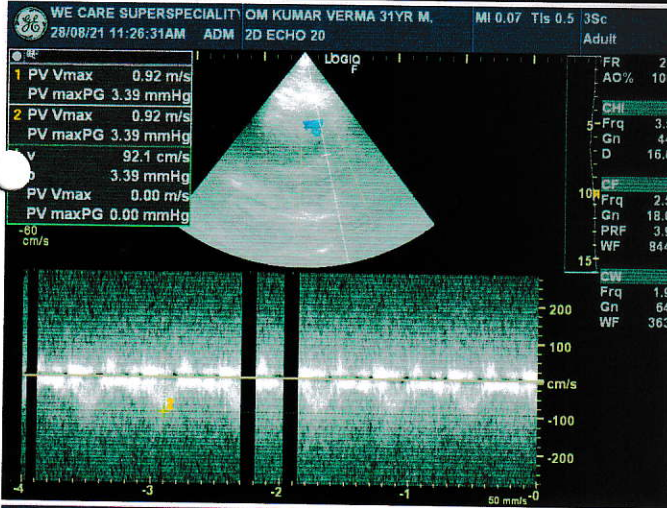
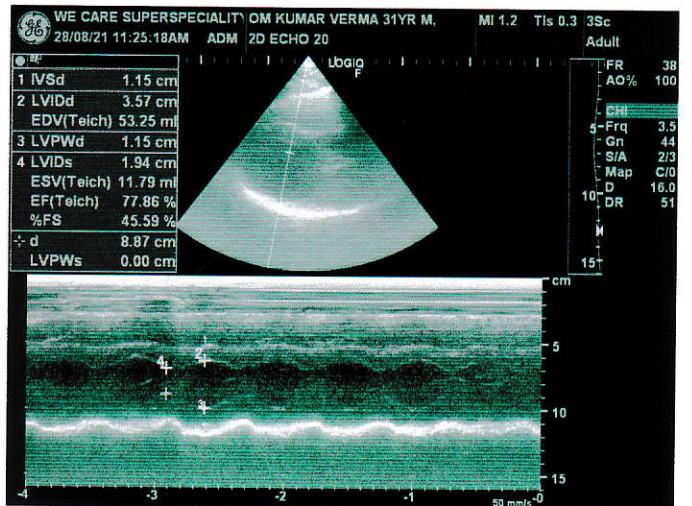
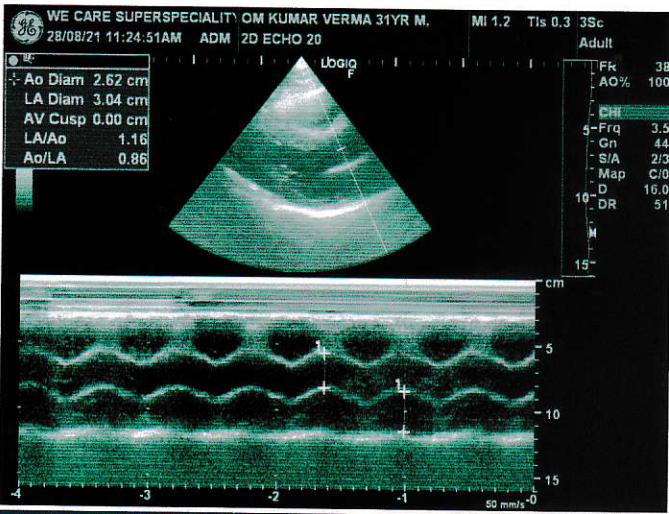
TRACHEA IS IN MIDLINE.

NO SIGNIFICANT CARDIOMEGALY IS SEEN.

THE SOFT TISSUES DEMONSTRATE NO ACUTE PATHOLOGY.

DR NEERAJ GAUTAM
DNB RADIODIAGNOSIS
CONSULTANT RADIOLOGIST





PATIENT'S NAME: OM KUMAR VERMA 31YR M
REFERRED BY: DR A SIDDIQUI
MRD NO: XR CHEST 29466 DI 20

STUDY TIME: 28-08-21
REPORT TIME: 28/08/21 12:08 PM
PRINT TIME: 28/08/21 12:12 PM

STUDY: XRAY OF THE CHEST PA VIEW

INDICATION: Routine Health check up. No complaints otherwise.

COMPARISON: None.

OBSERVATIONS & CONCLUSION:

NO ACUTE BONY PATHOLOGY IS SEEN.

NO PULMONARY INFILTRATE, COLLAPSE OR CONSOLIDATION, EFFUSION, OR PNEUMOTHORAX IS SEEN.

TRACHEA IS IN MIDLINE.

NO CARDIOMEGALY IS SEEN.

THE SOFT TISSUES DEMONSTRATE NO ACUTE PATHOLOGY.

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CONSULTANT RADIOLOGIST



PATIENT'S NAME: OM KUMAR VERMA 31YR M
REFERRED BY: DR A SIDDIQUI
MRD NO: USG ABD 29466

STUDY TIME: 28-08-21
REPORT TIME: 28/08/21 12:09 PM
PRINT TIME: 28/08/21 12:12 PM

STUDY: USG OF THE ABDOMEN

INDICATION: Routine Health check up. No complaints otherwise.

COMPARISON: None.

OBSERVATIONS:

Liver is normal in size measuring 134 mm in craniocaudal extent, and normal in parenchymal echogenicity. No obvious focal lesion is seen. Intrahepatic biliary radicles are not dilated.

Spleen is enlarged measuring 134 mm in size. No focal lesion is seen.

Pancreas appears normal in size and echopattern. Pancreatic duct is not dilated. No obvious pancreatic parenchymal calcifications are seen either.

Gall bladder is well distended. No calculus is seen. Wall thickness is normal. CBD is normal.

Portal vein is normal. IVC and aorta are unremarkable.

Right kidney measures 108 x 42 mm in size. Left kidney measures 110 x 50 mm in size. Both kidneys are normal in size, shape, position and echogenicity. Corticomedullary differentiation is maintained. No focal lesion is noted. No evidence of calculus or hydronephrosis is noted.

Urinary bladder is collapsed. Prostate cannot be commented upon.

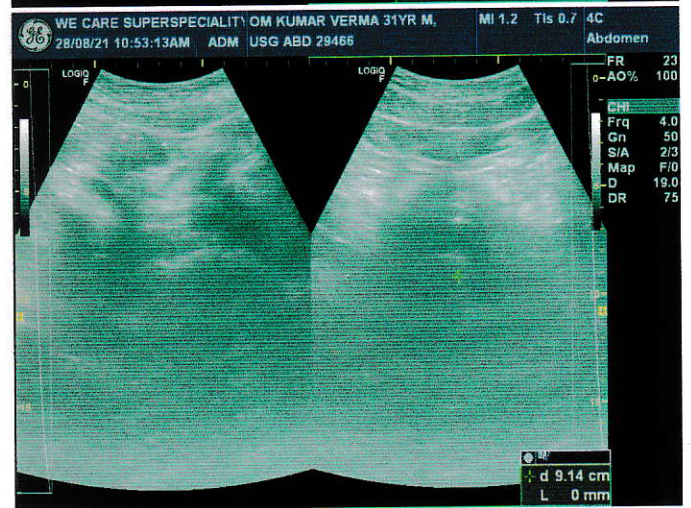
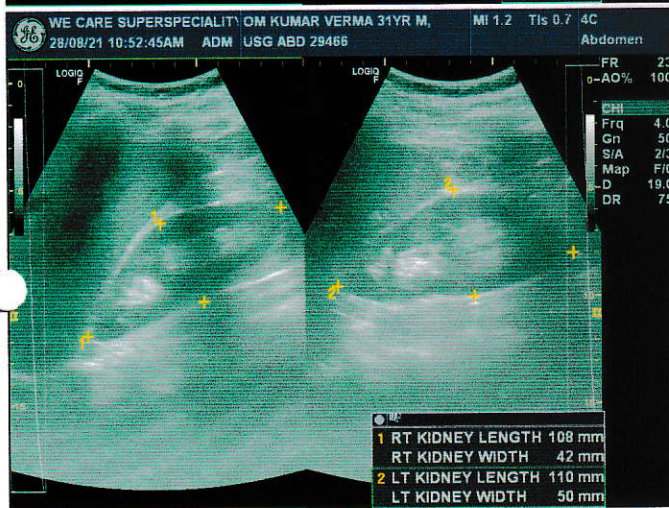
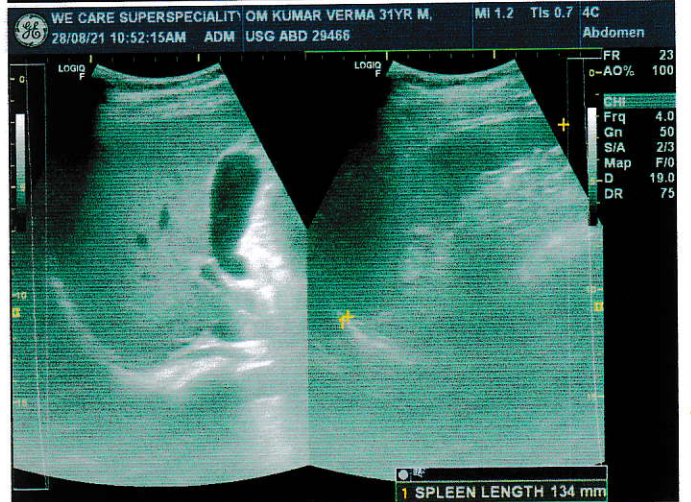
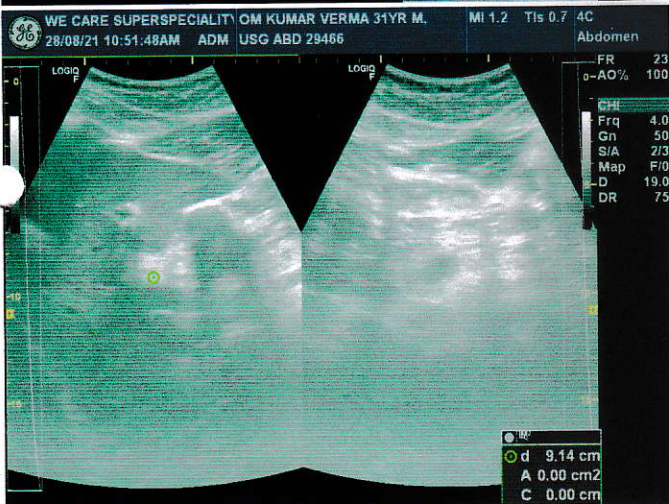
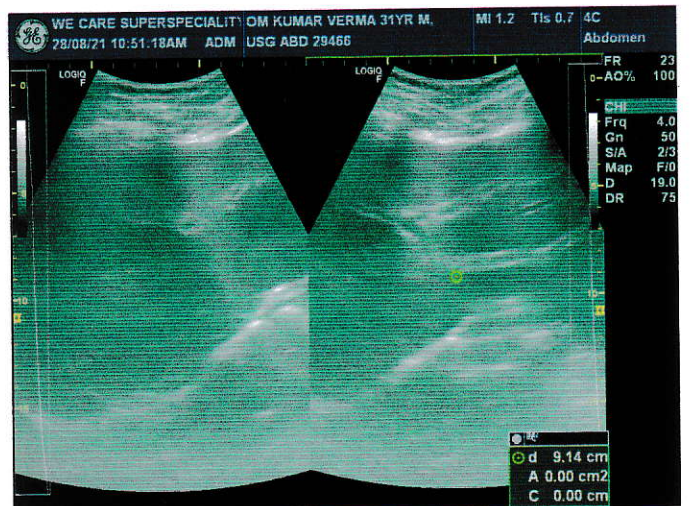
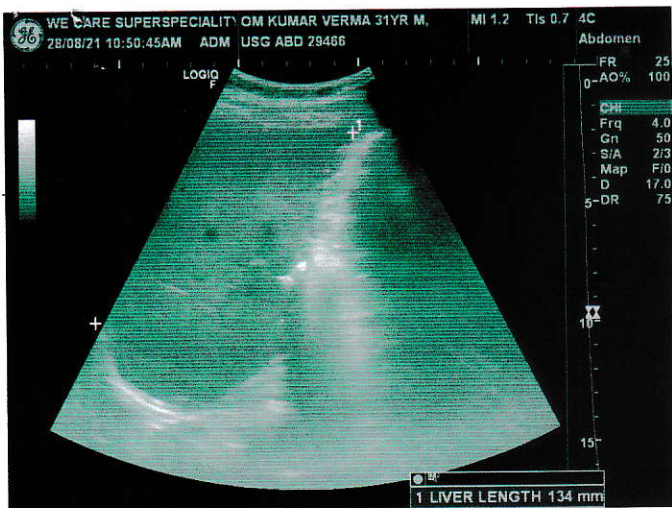
No free fluid is seen. No significant lymphadenopathy is seen.

CONCLUSION:

Mild Splenomegaly.

DR NEERAJ GAUTAM
DNB RADIODIAGNOSIS
CONSULTANT RADIOLOGIST





WE CARE

SUPER SPECIALITY HOSPITAL

(A UNIT OF SYNERGY HEALTH TECH)

State of The Art Trauma Centre

DR. P. NANWANI

MBBS, MS(ENT)

Reg.No-CGMC-4179/2012

Ph. : 9827881201

Email-prashantnanwani@yahoo.com

Dr. Kumar Verma - 3114

28/00/2022

ENT Consult

Normal BIL - 12

Spleen - (N)
NO DNR

Throat - Heavy

Swallow - Normal

Throat: clear

Lymph node - absent

NO lymphadenopathy

ENT - EAC - (N) no debris

TMJ: - Heavy
no perforation

Heavy - (N) BIL

Imp? (N) of ENT examination
no significant
abnormality detected

(N)



WE CARE
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State of The Art Trauma Centre

GTB PLAZA, Beside Airtel Office,
Ring Road No.1, Telibandha, Raipur (C.G.)
Ph.: 0771-4024901, Emergency No.: 09109178901
E-mail : Wecarehospitals@gmail.com

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BIO CHEMISTRY

TEST	RESULT	UNIT	REF. RANGE
BSPP	110		<140 mg/dl
Urine SUGAR(PP)	ABSENT		ABSENT



Test Done By
Senior Technologist
SATYANARAYAN SINGH

Report  By
Technician

Pathologist
Dr. D. Prashant
M.D. (Pathologist)



R

TOSHAN CHANDRAKAR 42YR M XR CHEST 29375 DJ 10258 IPD DR A SIDDIQUI CHEST PA 22-Aug-21
WE CARE SUPERSPECIALITY HOSPITAL GTR PLAZA TELIBANDHA RAIPUR JG C