

 **बैंक ऑफ बरोडा**
Bank of Baroda

नाम **ARUN KUMAR**

कार्यवाही क्र. 114844

E.C. No.



जारीकर्ता प्राधिकारी (उप.सो.प्र.)
Issuing Authority (O.R.M.)





धारक के हस्ताक्षर
Signature of Holder

Arun Kumar

Dr. Nitin Agarwal

MD., DM (Cardiology)
Consultant Interventional Cardiologist
Cell : +91-94578 33777

Formerly at :
Escorts Heart Institute & Research Centre, Delhi
Dr. Ram Manohar Lohia Hospital, Delhi



APPLE
CARDIAC CARE

DR. NITIN AGARWAL'S HEART CLINIC

12/11/22

Arjun wrrr

12/10/22

27h

SB

Asymptomatic

0

0

A-3, EKTA NAGAR, (OPP. CARE HOSPITAL) STADIUM ROAD, NEAR DELAPEER CHAURAHA, BAREILLY - 243 122 (U.P.)

OPD Timings : 12.00 Noon to 04.00 pm, Sunday : 12.00 Noon to 3.00 pm

नम्बर लगाने के लिए फोन करें : 09458888448, 07599031977

VALID FOR 5 DAYS.

पचाँ पाँच दिन के लिये मान्य

A Venture of Apple Cardiac Care

A-3, Ekta Nagar, Stadium Road,
(Opp. Care Hospital),
Bareilly - 243 122 (U.P.) India
Tel. : 07599031977, 09458888448



Reg.NO. : 23
NAME : **Mr. ARUN KUMAR**
REFERRED BY : Dr.Nitin Agarwal (D M)
SAMPLE : BLOOD

DATE : **12/11/2022**
AGE : 25 Yrs.
SEX : MALE

<u>TEST NAME</u>	<u>RESULTS</u>	<u>UNITS</u>	<u>BIOLOGICAL REF. RANGE</u>
------------------	----------------	--------------	------------------------------

HAEMATOLOGY

COMPLETE BLOOD COUNT (CBC)			
HAEMOGLOBIN	15.5	gm/dl	12.0-18.0
TOTAL LEUCOCYTE COUNT	5,800	/cumm	4,000-11,000
DIFFERENTIAL LEUCOCYTE COUNT(DLC)			
Neutrophils	65	%	40-75
Lymphocytes	32	%	20-45
Eosinophils	03	%	01-08
TOTAL R.B.C. COUNT	4.83	million/cumm	3.5-6.5
P.C.V./ Haematocrit value	45.3	%	35-54
M C V	93.8	fL	76-96
M C H	32.1	pg	27.00-32.00
M C H C	34.2	g/dl	30.50-34.50
PLATELET COUNT	1.64	lacs/mm ³	1.50 - 4.50
E.S.R. (Westergren Method)	17	mm/1st hr.	0 - 20
GLYCOSYLATED HAEMOGLOBIN	5.4		

EXPECTED RESULTS :

Non diabetic patients	: 4.0% to 6.0%
Good Control	: 6.0% to 7.0%
Fair Control	: 7.0% to -8%
Poor Control	: Above 8%

*ADA: American Diabetes Association

The glycosylated hemoglobin assay has been validated as a reliable indicator of mean blood glucose levels for a period of 8-12 week period prior to HBA1C determination. ADA recommends the testing twice a year in patients with stable blood glucose, and quarterly, if treatment changes, or if blood glucose levels are unstable.

METHOD : ADVANCED IMMUNO ASSAY.

BIOCHEMISTRY

Report is not valid for medicolegal purpose

A Venture of Apple Cardiac Care

A-3, Ekta Nagar, Stadium Road,
(Opp. Care Hospital),
Bareilly - 243 122 (U.P.) India
Tel. : 07599031977, 09458888448



Reg.NO. : 23
NAME : **Mr. ARUN KUMAR**
REFERRED BY : Dr.Nitin Agarwal (D M)
SAMPLE : BLOOD
DATE : **12/11/2022**
AGE : 25 Yrs.
SEX : MALE

<u>TEST NAME</u>	<u>RESULTS</u>	<u>UNITS</u>	<u>BIOLOGICAL REF. RANGE</u>
BLOOD SUGAR F.	80	mg/dl	60-100
Gamma Glutamyl Transferase (GGT)	19	U/L	7-32
BLOOD UREA	28	mg/dL.	10-40

* Low serum urea is usually associated with status of overhydration severe hepatic failure.

* A urea level of 10-45 mg/dl indicates normal glomerular function and a level of 100-250 mg/dl indicates a serious impairment of renal function. In chronic renal failure, urea correlates better with the symptoms of uremia than does serum creatinine.

* Urine/Serum urea is more than 9 in prerenal and less than 3 in renal uremia.

SERUM CREATININE	1.1	mg/dL.	0.5-1.4
URIC ACID	6.1	mg/dl	0-8

CLINICAL SIGNIFICANCE:

Analysis of synovial fluid plays a major role in the diagnosis of joint disease.

SERUM SODIUM (Na)	140	m Eq/litre.	135 - 155
SERUM POTASSIUM (K)	4.1	m Eq/litre.	3.5 - 5.5
SERUM CALCIUM	9.2	mg/dl	8.5 - 10.5

Report is not valid for medicolegal purpose

A Venture of Apple Cardiac Care

A-3, Ekta Nagar, Stadium Road,
(Opp. Care Hospital),
Bareilly - 243 122 (U.P.) India
Tel. : 07599031977, 09458888448



Reg.NO. : 23
NAME : **Mr. ARUN KUMAR**
REFERRED BY : Dr.Nitin Agarwal (D M)
SAMPLE : BLOOD

DATE : **12/11/2022**
AGE : 25 Yrs.
SEX : MALE

<u>TEST NAME</u>	<u>RESULTS</u>	<u>UNITS</u>	<u>BIOLOGICAL REF. RANGE</u>
LIVER PROFILE			
SERUM BILIRUBIN			
TOTAL	0.8	mg/dL	0.3-1.2
DIRECT	0.3	mg/dL	0.2-0.6
INDIRECT	0.5	mg/dL	0.1-0.4
SERUM PROTEINS			
Total Proteins	7.1	Gm/dL	6.4 - 8.3
Albumin	3.9	Gm/dL	3.5 - 5.5
Globulin	3.2	Gm/dL	2.3 - 3.5
A : G Ratio	1.22		0.0-2.0
SGOT	27	IU/L	0-40
SGPT	19	IU/L	0-40
SERUM ALK.PHOSPHATASE	76	IU/L	00-115

NORMAL RANGE : BILIRUBIN TOTAL

Premature infants. 0 to 1 day: <8 mg/dL Premature infants. 1 to 2 days: <12 mg/dL Adults: 0.3-1 mg/dL.

Premature infants. 3 to 5 days: <16 mg/dL Neonates, 0 to 1 day: 1.4-8.7 mg/dL

Neonates, 1 to 2 days: 3.4-11.5 mg/dL Neonates, 3 to 5 days: 1.5-12 mg/dL Children 6 days to 18 years: 0.3-1.2 mg/dL

COMMENTS-

Total and direct bilirubin determination in serum is used for the diagnosis, differentiation and follow-up of jaundice. Elevation of SGPT is found in liver and kidney diseases such as infectious or toxic hepatitis, IM and cirrhosis. Organs rich in SGOT are heart, liver and skeletal muscles. When any of these organs are damaged, the serum SGOT level rises in proportion to the severity of damage. Elevation of Alkaline Phosphatase in serum or plasma is found in hepatitis, biliary obstructions, hyperparathyroidism, steatorrhea and bone diseases.

Report is not valid for medicolegal purpose

A Venture of Apple Cardiac Care

A-3, Ekta Nagar, Stadium Road,
(Opp. Care Hospital),
Bareilly - 243 122 (U.P.) India
Tel. : 07599031977, 09458888448



Reg.NO. : 23
NAME : **Mr. ARUN KUMAR**
REFERRED BY : Dr.Nitin Agarwal (D M)
SAMPLE : BLOOD

DATE : **12/11/2022**
AGE : 25 Yrs.
SEX : MALE

<u>TEST NAME</u>	<u>RESULTS</u>	<u>UNITS</u>	<u>BIOLOGICAL REF. RANGE</u>
LIPID PROFILE			
SERUM CHOLESTEROL	146	mg/dL.	130 - 200
SERUM TRIGLYCERIDE	104	mg/dl.	30 - 160
HDL CHOLESTEROL	55	mg/dL.	30-70
VLDL CHOLESTEROL	20.8	mg/dL.	15 - 40
LDL CHOLESTEROL	70.20	mg/dL.	00-130
CHOL/HDL CHOLESTEROL RATIO	2.65	mg/dl	
LDL/HDL CHOLESTEROL RATIO	1.28	mg/dl	

INTERPRETATION

TRIGLYCERIDE level > 250mg/dL is associated with an approximately 2-fold greater risk of coronary vascular disease. Elevation of triglycerides can be seen with obesity, medication, fast less than 12 hrs., alcohol intake, diabetes melitus, and pancreatitis.

CHOLESTEROL, its fractions and triglycerides are the important plasma lipids in defining cardiovascular risk factors and in the management of cardiovascular disease. Highest acceptable and optimum values of cholesterol values of cholesterol vary with age. Values above 220 mgm/dl are associated with increased risk of CHD regardless of HDL & LDL values.

HDL-CHOLESTEROL level <35 mg/dL is associated with an increased risk of coronary vascular disease even in the face of desirable levels of cholesterol and LDL - cholesterol.

LDL - CHOLESTEROL & TOTAL CHOLESTEROL levels can be strikingly altered by thyroid, renal and liver disease as well as hereditary factors. Based on total cholesterol, LDL- cholesterol, and total cholesterol/HDL - cholesterol ratio, patients may be divided into the three risk categories.

URINE EXAMINATION

Report is not valid for medicolegal purpose

A Venture of Apple Cardiac Care

Å-3, Ekta Nagar, Stadium Road,
(Opp. Care Hospital),
Bareilly - 243 122 (U.P.) India
Tel. : 07599031977, 09458888448



Reg.NO. : 23
NAME : **Mr. ARUN KUMAR**
REFERRED BY : Dr.Nitin Agarwal (D M)
SAMPLE : BLOOD

DATE : **12/11/2022**
AGE : 25 Yrs.
SEX : MALE

<u>TEST NAME</u>	<u>RESULTS</u>	<u>UNITS</u>	<u>BIOLOGICAL REF. RANGE</u>
URINE EXAMINATION REPORT			
PHYSICAL EXAMINATION			
TRANSPARENCY			
Volume	25	ml	
Colour	Light Yellow		
Appearance	NIL		Nil
Odour	NIL		
Sediments	Nil		
Specific Gravity	1.015		1.015-1.025
Reaction	NIL		
BIOCHEMICAL EXAMINATION			
UROBILINOGEN	Nil		NIL
BILIRUBIN	Nil		NEGATIVE
URINE KETONE	Nil		NEGATIVE
Sugar	Nil		Nil
Albumin	Nil		Nil
Phosphates	NIL		Nil
MICROSCOPIC EXAMINATION			
Red Blood Cells	Nil	/H.P.F.	
Pus Cells	1-2	/H.P.F.	
Epithelial Cells	0-1	/H.P.F.	
Crystals	NIL		NIL
Casts	Nil	/H.P.F.	
DEPOSITS	NIL		

HAEMATOLOGY

Report is not valid for medicolegal purpose

A Venture of Apple Cardiac Care

Å-3, Ekta Nagar, Stadium Road,
(Opp. Care Hospital),
Bareilly - 243 122 (U.P.) India
Tel. : 07599031977, 09458888448



Reg.NO. : 23
NAME : **Mr. ARUN KUMAR**
REFERRED BY : Dr.Nitin Agarwal (D M)
SAMPLE : BLOOD

DATE : **12/11/2022**
AGE : 25 Yrs.
SEX : MALE

<u>TEST NAME</u>	<u>RESULTS</u>	<u>UNITS</u>	<u>BIOLOGICAL REF. RANGE</u>
BLOOD GROUP			
Blood Group	B		
Rh	POSITIVE		

Shweta

--{End of Report}--

Dr. Shweta Agarwal, M.D.
(Pathologist)

Report is not valid for medicolegal purpose



Patient ID 102216272
Name Mr. ARUN KUMAR
Sex/Age Male 25 Yrs
Ref. By Dr. NITIN AGARWAL

Reg. Date 12/11/2022 14:16:27
Reported On 12/11/2022 16:51:00

X-RAY CHEST PA VIEW

Trachea is central in position.
Bony cage is normal.
Both hila are normal.
No definite evidence of pleuro pulmonary pathology.
Both CP angles are clear.
Cardio - thoracic ratio is within normal limit.
Both diaphragms are normal in position and contour.

ADV - PLEASE CORRELATE CLINICALLY.

*** End of Report ***



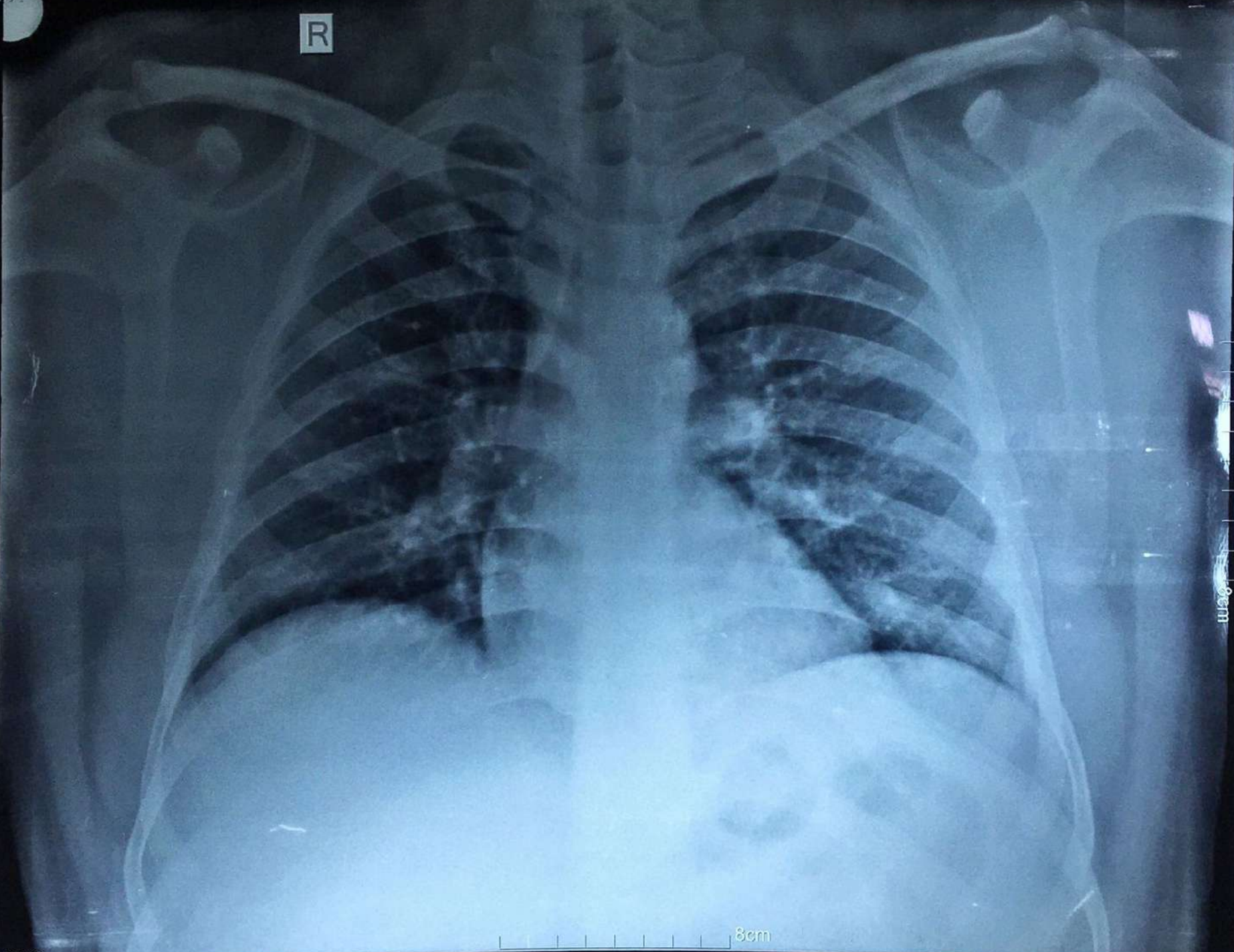
DR KAMAL NAYAN GANGEY
DNB RADIODIAGNOSIS

Page No 1 of 1



PA

R

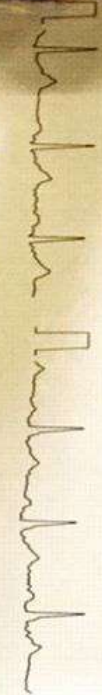


1920

ARUN KUMAR 25Y Male CHEST 12-11-2022

8cm

1 10mm/mV 25mm/sec \approx 25H
BPL CARDIART 61081
Pat. ID. Asin Kumar 12/1/22



111 10mm/mV 25mm/sec \approx 25Hz
Pat. ID.



aVR 10mm/mV 25mm/sec \approx 25Hz
BPL CARDIART 61081
Pat. ID.



aVL 10mm/mV 25mm/sec \approx 25Hz
Pat. ID.



aVF 10mm/mV 25mm/sec \approx 25Hz
BPL CARDIART 61081
Pat. ID.



25Hz

AVF

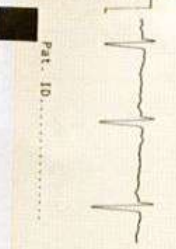
BPL CARDIART 61981



10mm/mV 25mm/sec 25I

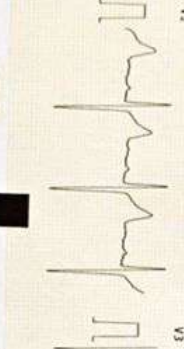
V2

BPL CARDIART 61981



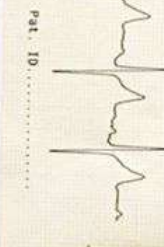
V3

10mm/mV 25mm/sec 25H



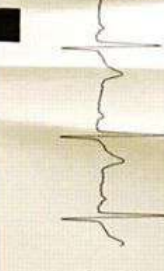
V4

BPL CARDIART 61981



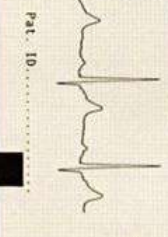
V5

10mm/mV 25mm/sec 25I



V6

BPL CARDIART 61981



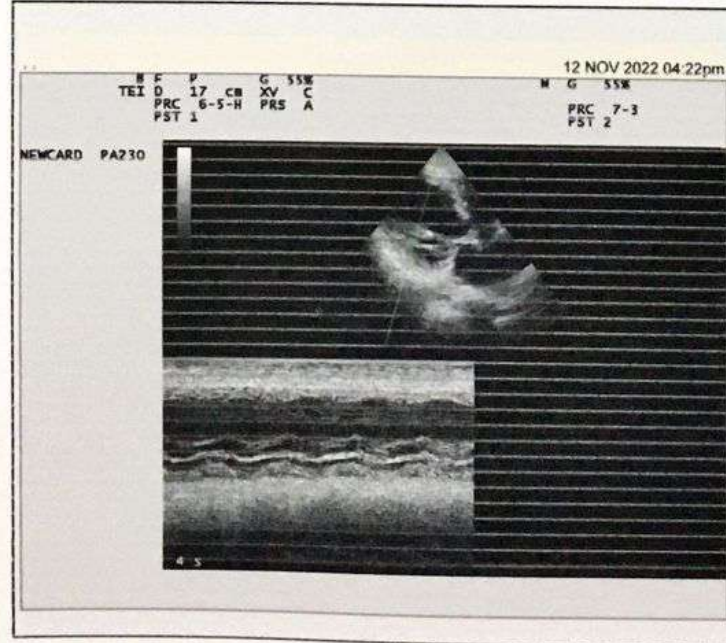
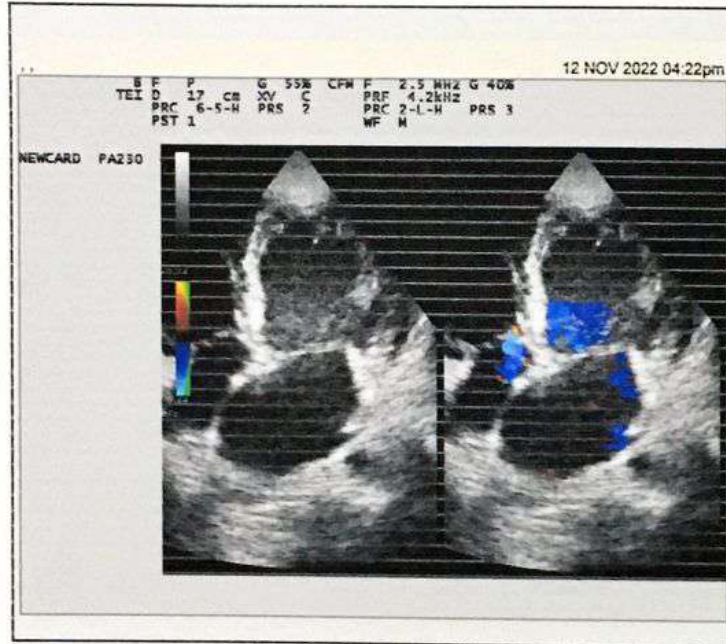
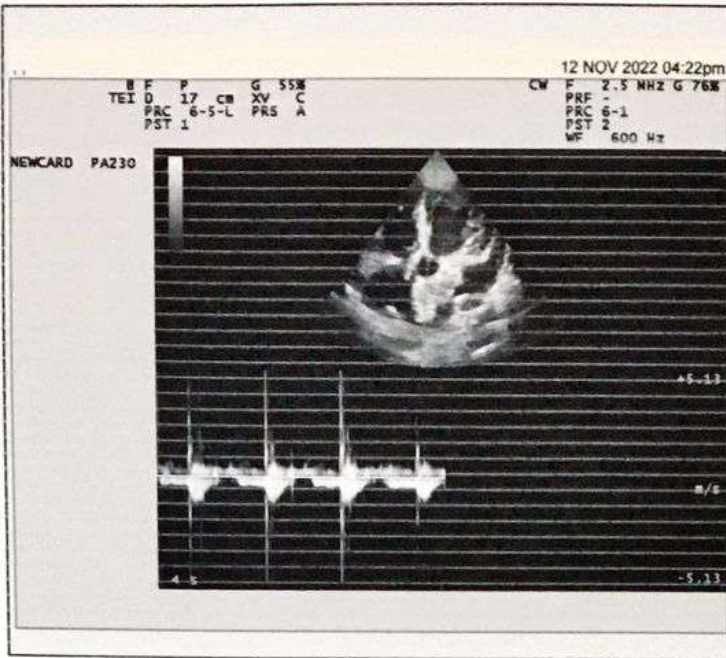
Pat. ID.

Pat. ID.

Pat. ID.

APPLE CARDIAC CARE, BAREILLY

saote My



NAME	Mr. ARUN KUMAR	AGE/SEX	25 Y/M
Ref. By	Dr. NITIN AGARWAL (DM)	DATE	12/11/2022

ECHOCARDIOGRAPHY AND COLOUR DOPPLER STUDY

<u>MEASUREMENTS</u>	<u>VALUE</u>	<u>NORMAL DIMENSIONS</u>
LVID (d)	4.5 cm	(3.7 –5.6 cm)
LVID (s)	2.5 cm	(2.2 –3.9 cm)
RVID (d)	2.4 cm	(0.7 –2.5 cm)
IVS (ed)	1.0 cm	(0.6 –1.1 cm)
LVPW (ed)	1.0 cm	(0.6 –1.1 cm)
AO	2.5 cm	(2.2 –3.7 cm)
LA	2.8 cm	(1.9 –4.0 cm)
<u>LV FUNCTION</u>		
EF	60 %	(54 –76 %)
FS	30 %	(25 –44 %)

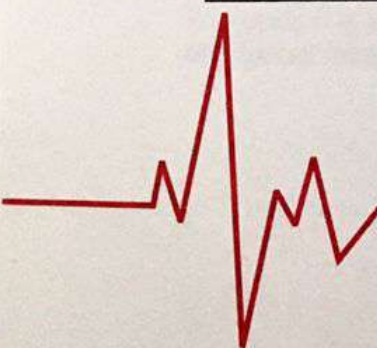
LEFT VENTRICLE : No regional wall motion abnormality
 No concentric left Ventricle Hypertrophy

MITRAL VALVE : Thin, PML moves posteriorly during Diastole
 No SAM, No Subvalvular pathology seen.
 No mitral valve prolapse calcification .

TRICUSPID VALVE : Thin, opening wells. No calcification, No doming .
 No Prolapse.
 Tricuspid inflow velocity= 0.7 m/sec

AORTIC VALVE : Thin, tricuspid, opening well, central closer,
 no flutter.
 No calcification
 Aortic velocity = 1.3 m/sec

PULMONARY VALVE : Thin, opening well, Pulmonary artery is normal
 EF slope is normal.
 Pulmonary Velocity = 0.9 m /sec



ON DOPPLER INTERROGATION THERE WAS :

- No mitral regurgitation
- No tricuspid regurgitation
- No aortic regurgitation
- No pulmonary regurgitation

MITRAL FLOW E= 0.8 m/sec A= 0.6 m/sec

ON COLOUR FLOW:

- No mitral regurgitation
- No tricuspid regurgitation
- No aortic regurgitation
- No pulmonary regurgitation

COMMENTS:

- No LA /LV clot
- No pericardial effusion
- No intracardiac mass
- IAS/IVS Intact
- Inferior vena cava – normal in size with normal respiratory variation

FINAL IMPRESSION

- NO REGIONAL WALL MOTION ABNORMALITY
- NORMAL LV DIASTOLIC FUNCTION
- NORMAL LV SYSTOLIC FUNCTION (LVEF~60%)
- NORMAL CARDIAC CHAMBER DIMENSIONS
- NORMAL VALVULAR COLOUR FLOW PATTERN



DR.NITIN AGARWAL
DM (Cardiology)
Consultant Cardiologist

This opinion is to be correlated with the clinically findings and if required, please re-evaluate / reconfirm with further investigation.





Patient ID 102216271
Name Mr. ARUN KUMAR
Sex/Age Male 25 Yrs
Ref. By Dr. NITIN AGARWAL

Reg. Date 12/11/2022 14:15:20
Reported On 12/11/2022 16:50:01

USG WHOLE ABDOMEN

Liver - is normal in size **with diffuse fatty changes**. No IHBRD / focal SOL is seen. PV - normal. Porta hepatitis - normal.

Gall bladder - Normal physiological distension. No calculus in lumen. Wall thickness is normal. CBD - normal.

Pancreas - is normal in thickness and echotexture. Pancreatic duct is not dilated. No evidence of pancreatic calcification.

Spleen - is normal in size and normal echotexture.

Both kidneys - normal in size, outline and cortical echotexture. Renal parenchymal width is normal. Corticomedullary definition is normal. No backpressure changes are seen. Perinephric spaces are normal.

Urinary bladder - No calculus is seen in the lumen. Wall is smooth and regular.

Prostate - Size is normal (9cc), parenchyma is homogeneous.

No free fluid is seen in peritoneal cavity.

IMPRESSION:

- **GRADE I FATTY LIVER.**

ADV - PLEASE CORRELATE CLINICALLY.

*** End of Report ***



DR KAMAL NAYAN GANGEY
DNB RADIODIAGNOSIS

Page No. 1 of 1

