

### CONCLUSION OF HEALTH CHECKUP

ECU Number	: 2037	MR Number	: 23201238	Patient Name	: VEERABABU JAKKA
Age	: 30	Sex	: Male	Height	: 166
Weight	: 86	Ideal Weight	: 63	BMI	: 31.21
Date	: 25/02/2023				

Dr. Manish Mittal

Internal Medicine

Note : General Physical Examination & routine Investigations included in the Health Checkup have certain limitations and may not be able to detect all the latent and asymptomatic diseases.

ECU Number : 2037                      MR Number : 23201238                      Patient Name: VEERABABU JAKKA  
Age : 30                                      Sex : Male                                      Height : 166  
Weight : 86                                      Ideal Weight : 63                                      BMI : 31.21  
Date : 25/02/2023

Past H/O : NO P/H/O ANY MAJOR ILLNESS.

Present H/O : C/O DRY COUGH 1-2 DAYS ; BRONCHITIS ; C/O FEVERISH

Family H/O : NO F/H/O ANY MAJOR ILLNESS.

Habits : NO HABITS.

Gen.Exam. : G.C. GOOD

B.P : 110/70 mm Hg

Pulse : 86/MIN REG.

Others : SPO2 : 98 %

C.V.S : NAD

R.S. : NAD

Abdomen : NP

Spleen : NP

Skin : NAD

C.N.S : NAD

Advice :

ECU Number : 2037  
Age : 30  
Weight : 86  
Date : 25/02/2023

MR Number : 23201238  
Sex : Male  
Ideal Weight : 63

Patient Name : VEERABABU JAKKA  
Height : 166  
BMI : 31.21

**Ophthalmic Check Up :**

**Right**

**Left**

Ext Exam  
Vision Without Glasses  
Vision With Glasses  
Final Correction  
Fundus  
Colour Vision  
Advice

-  
6/6 N.5  
SAME AS PATIENT OWN  
NORMAL  
NORMAL  
NIL

NORMAL  
-  
6/6 N.5  
SAME AS PATIENT  
OWN

**Orthopaedic Check Up :**

Ortho Consultation

Ortho Advice

**ENT Check Up :**

Ear

Nose

Throat

Hearing Test

ENT Advice

**General Surgery Check Up :**

General Surgery

Abdominal Lump

Hernia

External Genitals

PVR

Proctoscopy

Any Other

Surgical Advice

Dietary Assessment

ECU Number : 2037                      MR Number : 23201238                      Patient Name: VEERABABU JAKKA  
Age : 30                                      Sex : Male                                      Height : 166  
Weight : 86                                      Ideal Weight : 63                                      BMI : 31.21  
Date : 25/02/2023

Body Type : Normal / Underwight / Overwight  
Diet History : Vegetarian / Eggetarian / Mixed

Frequency of consuming fried food : / Day / Week or occasional  
Frequency of consuming Sweets : / Day / or occasional  
Frequency of consuming outside food : / Day / Week or occasional  
Amount of water consumed / day : Glasses / liters

Life style assessment :  
Physical activity : Active / moderate / Sedentary / Nil  
Alcohol intake : Yes / No  
Smoking : Yes / No  
Allergic to any food : Yes / No  
Are you stressed out ? : Yes / No  
Do you travel a lot ? : Yes / No

General diet instructions :

- Have small frequent meals.
- Avoid fatty products like oil, ghee, butter, cheese.
- Take salt restricted diet and avoid table salt.
- Consume fibrous food regularly like whole grains, Daliya, Oats, Bajra, Flex seeds, Pulses, Fruits and Salads.
- Keep changing your cooking oil every three months.
- Avoid Maida, Starchy foods and Bakery products.
- Consume 1-2 servings of all fruits and vegetables, For Diabetic patients avoid Mango, Chikoo, Banana, Grapes and Custurd apple
- Dring 3 to 4 liters (12 - 14 glass) of water daily.
- Eat Beetroots, Figs, Almond, Walnut, Dates, Leafy vegetables, roasted Channa and Jeggary (Gur) for Heamoglobin in case of diabetic patient avoid Rasins, Dates and Jeggary
- Drink green Tea or black Coffee once in a day.
- Do brisk walking daily.



Patient Name : Mr. VEERABABU JAKKA  
 Gender / Age : Male / 30 Years 8 Months 12 Days  
 MR No / Bill No. : 23201238 / 231068572  
 Consultant : Dr. Manish Mittal  
 Location : OPD

Type : OPD  
 Request No. : 109348  
 Request Date : 25/02/2023 10:13 AM  
 Collection Date : 25/02/2023 10:39 AM  
 Approval Date : 25/02/2023 03:29 PM

**CBC + ESR**

Test	Result	Units	Biological Ref. Range
<b>Haemoglobin.</b>			
Haemoglobin	14.0	gm/dL	13 - 17
Red Blood Cell Count (T-RBC)	<b>5.67</b>	mill/cmm	4.5 - 5.5
Hematocrit (HCT)	44.7	%	40 - 50
Mean Corpuscular Volume (MCV)	<b>78.8</b>	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	<b>24.7</b>	pg	27 - 32
MCH Concentration (MCHC)	<b>31.3</b>	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	<b>15.8</b>	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	45.2	fl	39 - 46
<b>Total Leucocyte Count (TLC)</b>			
Total Leucocyte Count (TLC)	6.24	thou/cmm	4 - 10
<b>Differential Leucocyte Count</b>			
Polymorphs	60	%	40 - 80
Lymphocytes	31	%	20 - 40
Eosinophils	4	%	1 - 6
Monocytes	5	%	2 - 10
Basophils	0	%	0 - 2
Polymorphs (Abs. Value)	3.75	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	1.99	thou/cmm	1 - 3
Eosinophils (Abs. Value)	0.25	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.22	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.03	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.3	%	1 - 3 : Borderline > 3 : Significant
<b>Platelet Count</b>			
Platelet Count	278	thou/cmm	150 - 410
Smear evaluation	Adequate		
ESR	1	mm/1 hr	0 - 10

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any final opinion is made. Reclassification may be suggested.



Patient Name	: Mr. VEERABABU JAKKA	Type	: OPD
Gender / Age	: Male / 30 Years 8 Months 12 Days	Request No.	: 109348
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**CBC + ESR**

Immature Granulocyte (IG) count is a useful early marker of infection or inflammation, even when other markers are normal. It is an early and rapid discrimination of bacterial from viral infections. It is also increased in patients on steroid therapy / chemotherapy or haematological malignancy. High IG is always pathological; except in pregnancy and neonates of < 7 days.  
Method : HB by Non-Cyanide Hemoglobin analysis method. HCT by RBC pulse height detection method. RBC, TLC & PLC are by Particle Count by Electrical Impedance in Cell Counter. Optical Platelets by Fluorescent + Laser Technology. MCV, MCH, MCHC, RDW (CV & SD) are calculated parameter. DLC by Flowcytometry method using semi-conductor Laser+Smear verification. ESR on Ves metic 20, comparable to Westergrens method and in accordance to ICSH reference method.

--- End of Report ---

Dr. Sejal Odedra  
M.D.Pathology

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mr. VEERABABU JAKKA  
Gender / Age : Male / 30 Years 8 Months 12 Days  
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Approval Date : 25/02/2023 03:30 PM

**Haematology**

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>Biological Ref. Range</u>
<b>Blood Group</b>			
ABO system	B		
Rh system.	Positive		

By Gel Technology / Tube Agglutination Method

Note :

- This blood group has been done with new sensitive Gel Technology using both Forward and Reverse Grouping Card with Autocontro
- This method check's group both on Red blood cells and in Serum for "ABO" group.

---- End of Report ----

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DEPARTMENT OF LABORATORY MEDICINE

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**Fasting Plasma Glucose**

Test	Result	Units	Biological Ref. Range
<b>Fasting Plasma Glucose</b>			
Fasting Plasma Glucose	88	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	90	mg/dL	70 - 140

Hexokinase method on RXL Dade Dimesion

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**HbA1c (Glycosylated Hb)**

Test	Result	Units	Biological Ref. Range
<b>HbA1c (Glycosylated Hb)</b>			
Glycosylated Hemoglobin (HbA1c)	5.8	%	
estimated Average Glucose (e AG) *	119.76	mg/dL	

(Method:

By Automated HPLC analyser on D-10 Biorad. NGSP Certified, US-FDA approved, Traceable to IFCC reference method.

\* Calculated valued for past 60 days, derived from HbA1c %, based on formula recommended by the A1c - Derived Average Glucose study from ADA and EASD funded The ADAG trial.

**Guidelines for Interpretation:**

Indicated Glycemic control of previous 2-3 months

HbA1c%	e AG (mg/dl)	Glycemic control
> 8	> 183	Action suggested...High risk of developing long-term complications. Action suggested, depends on individual patient circumstances
7 - 8	154 - 183	Good
< 7	< 154	Goal...Some danger of hypoglycemic reaction in type I Diabetics. Some Glucose intolerant individuals and Sub-Clinical diabetics may demonstrate (elevated) HbA1c in this area.
6 - 7	126 - 154	Near Normal
< 6	< 126	Nondiabetic level)

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**Complete Lipid Profile**

Test	Result	Units	Biological Ref. Range
<b>Complete Lipid Profile</b>			
Appearance	Clear		
Triglycerides	29	mg/dL	1 - 150
<i>(By Lipase / Glycerol dehydrogenase on RXL Dade Dimension)</i>			
< 150 Normal			
150-199 Borderline High			
200-499 High			
> 499 Very High)			
Total Cholesterol	153	mg/dL	1 - 200
<i>(By enzymatic colorimetric method on RXL Dade Dimension)</i>			
<200 mg/dL - Desirable			
200-239 mg/dL - Borderline High			
> 239 mg/dL - High)			
HDL Cholesterol	34	mg/dL	40 - 60
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension)</i>			
< 40 Low			
> 60 High)			
Non HDL Cholesterol (calculated)	119	mg/dL	1 - 130
<i>(Non- HDL Cholesterol)</i>			
< 130 Desirable			
139-159 Borderline High			
160-189 High			
> 191 Very High)			
LDL Cholesterol	113	mg/dL	1 - 100
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension)</i>			
< 100 Optimal			
100-129 Near / above optimal			
130-159 Borderline High			
160-189 High			
> 189 Very High)			
VLDL Cholesterol (calculated)	5.8	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	3.32		2.1 - 3.5
T. Ch./HDL Ch. Ratio	4.5		3.5 - 5
<i>(Recent NECP / ATP III Guidelines / Classification (mg/dl) :)</i>			

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**Liver Function Test (LFT)**

Test	Result	Units	Biological Ref. Range
<b>Bilirubin</b>			
Bilirubin - Total	0.56	mg/dL	0 - 1
Bilirubin - Direct	0.11	mg/dL	0 - 0.3
Bilirubin - Indirect	0.45	mg/dL	0 - 0.7
<i>(By Diazotized sulfanilic acid on RXL Dade Dimension.)</i>			
Aspartate Aminotransferase (SGOT/AST)	23	U/L	15 - 40
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alanine Aminotransferase (SGPT/ALT)	32	U/L	16 - 63
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alkaline Phosphatase	106	U/L	53 - 128
<i>(BY PNPP AMP method on RXL Dade Dimension.)</i>			
Gamma Glutamyl Transferase (GGT)	<b>90</b>	U/L	15 - 85
<i>(By IFCC method on RXL Dade Dimension.)</i>			
<b>Total Protein</b>			
Total Proteins	7.21	gm/dL	6.4 - 8.2
Albumin	3.56	gm/dL	3.4 - 5
Globulin	3.65	gm/dL	3 - 3.2
A : G Ratio	0.98		1.1 - 1.6
<i>(By Biuret endpoint and Bromocresol purple method on RXL Dade Dimension.)</i>			

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Check / retest may be requested.

---- End of Report ----

Dr. Sejal Odedra  
M.D.Pathology



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**Renal Function Test (RFT)**

Test	Result	Units	Biological Ref. Range
Urea (By Urease Kinetic method on RXL Dade Dimension)	16	mg/dL	10 - 45
Creatinine (By Modified Kinetic Jaffe Technique)	1.02	mg/dL	0.9 - 1.3
Estimate Glomerular Filtration rate (Ref. range : > 60 ml/min for adults between age group of 18 to 70 yrs. EGFR Calculated by IDMS Traceable MDRD Study equation. Reporting of eGFR can help facilitate early detection of CKD. By Modified Kinetic Jaffe Technique)	More than 60		
Uric acid (By Uricase / Catalase method on RXL Siemens)	5.8	mg/dL	3.4 - 7.2

--- End of Report ---

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**Thyroid Hormone Study**

Test	Result	Units	Biological Ref. Range
------	--------	-------	-----------------------

Triiodothyronine (T3)

1.71

ng/ml

(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.

Reference interval (ng/ml)

1 - 3 days : 0.1 - 7.4  
 1-11 months : 0.1 - 2.45  
 1-5 years : 0.1 - 2.7  
 6-10 years : 0.9 - 2.4  
 11-15 years : 0.8 - 2.1  
 16-20 years : 0.8 - 2.1  
 Adults (20 - 50 years) : 0.7 - 2.0  
 Adults (> 50 years) : 0.4 - 1.8  
 Pregnancy (in last 5 months) : 1.2 - 2.5

(Reference : Tietz - Clinical guide to laboratory test, 4th edition ))

Thyroxine (T4)

9.81

mcg/dL

(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.

Reference interval (mcg/dL)

1 - 3 days : 11.8 - 22.6  
 1 - 2 weeks : 9.8 - 16.6  
 1 - 4 months : 7.2 - 14.4  
 4 - 12 months : 7.8 - 16.5  
 1-5 years : 7.3 - 15.0  
 5 - 10 years : 6.4 - 13.3  
 10 - 20 years : 5.6 - 11.7  
 Adults / male : 4.6 - 10.5  
 Adults / female : 5.5 - 11.0  
 Adults (> 60 years) : 5.0 - 10.7

(Reference : Tietz - Clinical guide to laboratory test, 4th edition ))

Thyroid Stimulating Hormone (US-TSH)

2.42

microIU/ml

(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.

Reference interval (microIU/ml)

Infants (1-4 days) : 1.0 - 39  
 2-20 weeks : 1.7 - 9.1  
 5 months - 20 years : 0.7 - 6.4  
 Adults (21 - 54 years) : 0.4 - 4.2  
 Adults (> 55 years) : 0.5 - 8.9  
 Pregnancy :  
 1st trimester : 0.3 - 4.5  
 2nd trimester : 0.5 - 4.6  
 3rd trimester : 0.8 - 5.2

(Reference : Tietz - Clinical guide to laboratory test, 4th edition ))

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--- End of Report ---

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M.D.Pathology



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**Urine routine analysis (Auto)**

Test	Result	Units	Biological Ref. Range
<b>Physical Examination</b>			
Quantity	30	mL	
Colour	Pale Yellow		
Appearance	Clear		
<b>Chemical Examination (By Reagent strip method)</b>			
pH	6.0		
Specific Gravity	<=1.005		
Protein	Negative	gm/dL	0 - 5
Glucose	Negative	mg/dL	0 - 5
Ketones	Negative		0 - 5
Bilirubin	Negative		Negative
Urobilinogen	Negative		Negative (upto 1)
Blood	Negative		Negative
Leucocytes	Negative		Negative
Nitrite	Negative		Negative
<b>Microscopic Examination (by Microscopy after Centrifugation at 2000 rpm for 10 min or on fully automated Sysmex urine sedimentation analyzer UF4000)</b>			
Red Blood Cells	0 - 1	/hpf	0 - 2
Leucocytes	0 - 1	/hpf	0 - 5
Epithelial Cells	0 - 1	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil	/hpf	Nil
Mucus	Absent	/hpf	Absent
Organism	Absent		

--- End of Report ---

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M.D.Pathology



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- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

Patient No. : 23201238      Report Date : 25/02/2023  
 Request No. : 190054758      25/02/2023 10.13 AM  
 Patient Name : Mr. VEERABABU JAKKA  
 Gender / Age : Male / 30 Years 8 Months 12 Days

**X-Ray Chest AP**

Both lung fields are clear.  
 Both costophrenic sinuses appear clear.  
 Heart size is normal.  
 Hilar shadows show no obvious abnormality.  
 Aorta is normal.

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES  
 • NOT VALID FOR MEDICO-LEGAL PURPOSES  
 • CLINICAL CORRELATION RECOMMENDED

**Dr. Priyanka Patel, MD**  
 Consultant Radiologist



H-2015-0297

MC-3004

E-2021-0037





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Patient No. : 23201238      Report Date : 25/02/2023  
Request No. : 190054655      25/02/2023 10.13 AM  
Patient Name : Mr. VEERABABU JAKKA  
Gender / Age : Male / 30 Years 8 Months 12 Days

**USG : Screening for Abdomen (excluding Pelvis) Or Upper Abdomen**

Liver is normal in size echopattern. No mass lesion identified. The hepatic veins are clear and patent. PV patent. No dilated IHBR.

Gall bladder is well distended and shows no obvious abnormality. Common bile duct measures 4 mm in diameter.

Pancreas shows no obvious abnormality. Tail obscured.  
Spleen is normal in size and echopattern.

Both kidneys are normal in shape and position. Normal echogenicity and cortico medullary differentiation is noted. No hydronephrosis or mass lesion seen.

Prostate appears normal in size and volume is ~15 cc.  
Prostate measures 27 mm x33 mm x 33mm.

Urinary bladder is well distended and appears normal.  
No ascites.

**COMMENT:**

**No obvious abnormality seen.**

*Kindly correlate clinically*

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES  
 • NOT VALID FOR MEDICO-LEGAL PURPOSES  
 • CLINICAL CORRELATION RECOMMENDED

*Hasani*

**Dr.Perna C Hasani, MD**  
Consultant Radiologist



H-2015-0297

MC-3004

E-2021-0037



EC

Patient No. : 23201238      Report Date : 25/02/2023  
Request No. : 190054785      25/02/2023 10.13 AM  
Patient Name : Mr. VEERABABU JAKKA  
Gender / Age : Male / 30 Years 8 Months 12 Days

### Echo Color Doppler

MITRAL VALVE : NORMAL  
AORTIC VALVE : TRILEAFLET, NORMAL  
TRICUSPID VALVE : NORMAL, NO TR,  
PULMONARY VALVE : NORMAL  
LEFT ATRIUM : NORMAL  
AORTA : NORMAL  
LEFT VENTRICLE : NORMAL, NO REGIONAL WALL MOTION ABNORMALITY,  
LVEF=60%  
RIGHT ATRIUM : NORMAL  
RIGHT VENTRICLE : NORMAL  
I.V.S. : INTACT  
I.A.S. : INTACT  
PULMONARY ARTERY : NORMAL  
PERICARDIUM : NORMAL  
  
COLOUR/DOPPLER : NO LV diastolic dysfunction  
FLOW MAPPING : NO AR, MR, TR, NO PAH

---

### FINAL CONCLUSION:

1. ALL CARDIAC CHAMBERS ARE NORMAL IN DIMENSIONS
2. NO REGIONAL WALL MOTION ABNORMALITY AT REST
3. NORMAL LV SYSTOLIC FUNCTION, LVEF=60%
4. NORMAL VALVES
5. NO LV DIASTOLIC DYSFUNCTION
6. NO AR, MR, TR, NO PULMONARY HYPERTENSION , ( IVC COLLAPSING )
7. NO PERICARDIAL EFFUSION, CLOT VEGETATION.

Dr.KILLOL KANERIA MD, DM  
Consultant Cardiologist

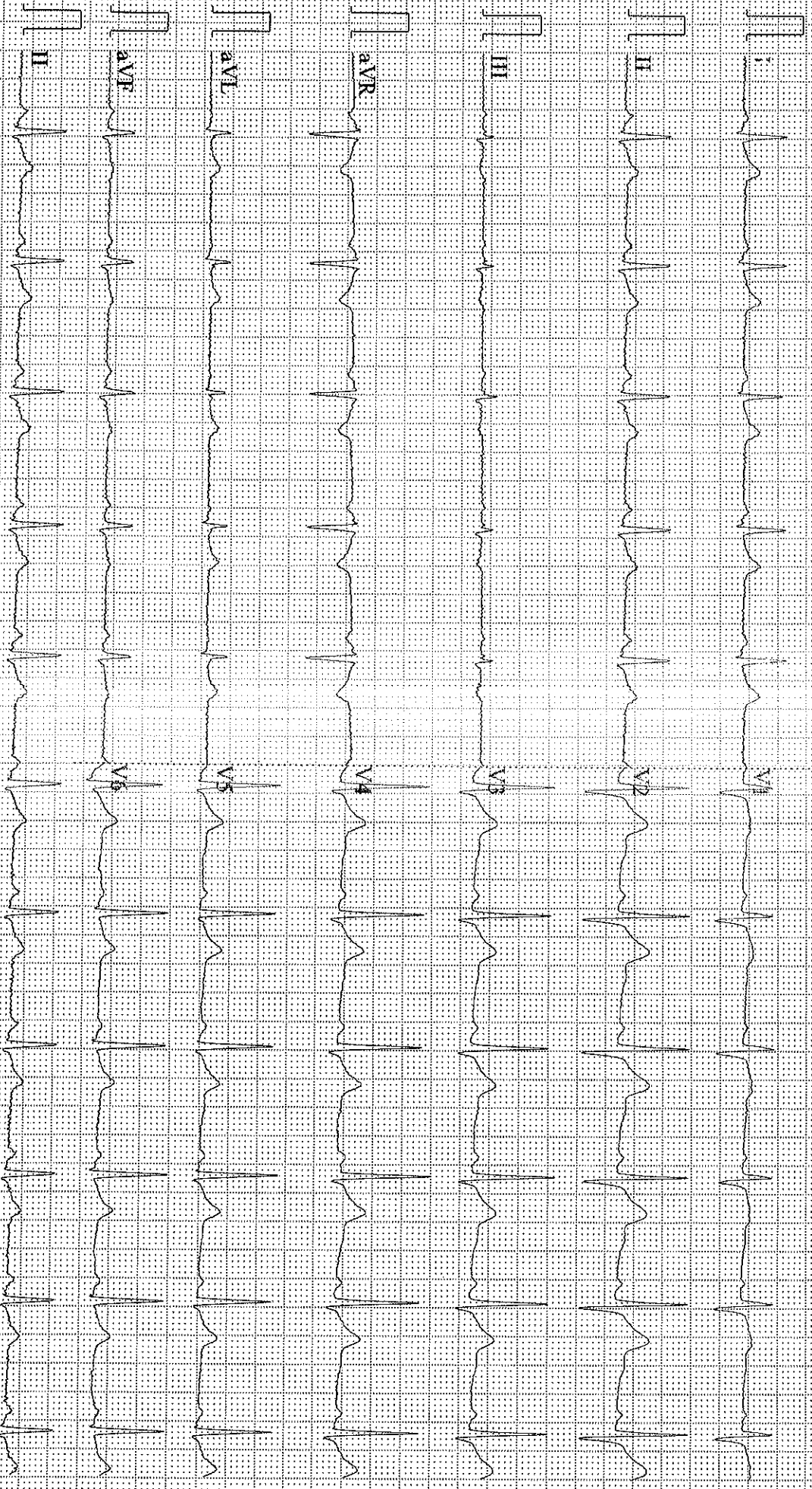
25-07-21 10:28:28 AM  
ID: 21  
V/FER, B. S. JAKKA  
Male 57 yrs

HR 75 bpm  
P 101 ms  
PR 140 ms  
QRS 87.405 ms  
QT/QTc 133/122 ms  
RVSSV1 287.0443 mV

Diagnosis Information:  
Normal ECG\*\*\*

Report Confirmed by:

for use



0.67-25Hz AC50 25mm/s 10mm/mV 2\*5s-1r 65 V202 SEMIP V17 BHADAL AMIN GENERAL HOSPITAL ECHO DEPT.