आयकर विभाग INCOME TAX DEPARTMENT भारत सरकार GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड Permanent Account Number Card

AWGPA1896A

ATH | Name ABHISHEK

चिता का नाम | Father's Name RAM BABU SINGH

जम की तारीख/Date of Birth 30/12/1987

Abhishek हस्ताक्षर | Signature



Aphighell.





Mr. Abhis

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follow alubetic diet

In low It She water purch 2x that 23/h water purch





Patient Name

Referred By

Mr.ABHISHEK 35/Y M 30-03-2023 AF-001001632 WHB1018667

MR No:

Date:

Health Check-Up Report

PRESENT COMPLAINTS:

(ethorgy

PRESENT MEDICATIONS:

PERSONAL HISTORY

Unmarried /Married

Diet

Habits:

Tobacco

Alcohol

Bladder

Bowels

Sleep

Physical Activity

Drug / Any other allergy

Menstrual History

PAST MEDICAL HISTORY

NS

**FAMILY HISTORY** 

M

: Eggetarian / Vegetarian / Mixed

: Chews/Smokes

No.

Normal / Disturbed

Active/ Moderate / Sedentary

: N.

AM

## **Physical Examination Findings**

## **General Examination**

Height	170	cm	
Weight	87.9	kg	
вмі	30.4	kg/m2	
Pulse	82	/ min	
BP	140190	mm of Hg	
RR	\ 6	/min	
Evidence of	: pallor/Icterus/Pedal	Qedema /Cyanosis/Clubbing	

Abdominal Examination:	
Cardiovascular System:	
Respiratory System:	N
Musculoskeletal System:	
	1
Advice:	in dat, Ohn BOThuby

Doctor's Sign & Stamp:

Dr Merchant Adnaan Regn.No I-80064-A **Physician** 





## **ENT EVALUATION**

Mr . ABHISHEK

Name:	35/Y M 30-03-2023 AF-001001632	MR NO:	
Age/Gender:		Date:	
COMPLAINTS, IF ANY:	22.070.00		
Ear:-			
Tympanic Membrane:	1 1120.		
Pre- auricular:-	1 mo.		
Pina / EAC:			
Mastoid Tunning Fork tests:-			
NOSE:-			
External Nose:-	/		
Anterior Rhinoscopy:-			
Post – Nasal space:-			
THROAT:-		1	
Tongue / palate / Teeth:-	Compromised are	7	
NECK:-			
Nodes:-	res .		
Thyroid:-	<i>.</i>		
Glands:-			
INVESTIGATIONS:			
	Che		
IMPRESSION:- ( O			
		/	7

Dr .Sameer Lambay M.S. (ENT Surgeon), D.O.R.L Reg No. MMC/ 84342





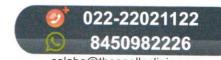


### OPHTHALMIC EVALUATION

**	Mr . ABHISHEK				
Name:		M AF-001001632		MR NO:	
Age/Sex:			Date:		
Examinatio	J. 680.0				
		Right Eye			Left Eye
Visual Acui Distance Vi			61 No	16	
Near Vision			N	6	
Color Vision	1		Normal/De	fective	
Refraction	Prescriptio	<u>n :</u>			
	Right Eye	;		Left Eye	
Sph.	Cyl.	Axis	Sph.	Cyl.	Axis
Remarks			Remarks		
SLIT LAMP	EXAMINAT	ION:	Kemarks		
Anterior Se	Λ				
IOP :	mn	ı of Hg.			
	/ ww	L			
Posterior Se	egment:				
REMARKS:_	can co	ntinue	same g	rasses	
			0		_
WNL = Within No	ormal Limits				
NAD N				Dr.Zelda	V.Dadachanji
NAD = No abnor	mality detected	i. Mi	BBS, M.S.(Oph	thal), DNB FIC	O(UK), MRCSEd
			геноw-Corn	Consultant	ve Surgery (NN) phthalmologist
					F

#### APOLLO CLINIC COLABA

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CORNEA&LASIK Specialist Reg. No.MMC2013/05/1940





## **DENTAL CHECKUP**

Mr.ABHISHEK 35/Y M 30-03-2023 AF-001001632		632	MR NO:		
/Gender:	0-03-2023 H	Date:			
ical history:		pertension _			
MINATION	UPPER RIGHT	UPPER LEFT	LOWER LEFT	LOWER RIGHT	
ulus& Stains		++	++	++	
ility					
es (Cavities)					
ass 1 (Occlusal)					
ass 2 (Proximal		25.			
ass 5 (Cervical)					
ty Restoration					
ty Crown					
tured Tooth					
Pieces		24		4+	
acted Tooth					
ing Tooth					
ting Denture					
ATMENT AD	NEW TOTAL STATE OF THE STATE OF				
ATMENT	UPPER RIGHT	UPPER LEFT	LOWER LEFT	LOWER RIGHT	
oration / Filling		25			
Canal Therapy					
n action		24		42	
ACLION		29		17	
thetic Advice Habits: T	Scaling & police for Braces: Yes to Replace Missin obacco Cigare dvice to quit any	Yes / No g Teeth: De tte Others form of tobacco	enture Bridg since yea o as it can caus	ars	
Habits: T	obacco Cigare dvice to quit any	tte Others form of tobacco	since	yeacaus	

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NABL ACCREDITED LABORATORY



BDS, GDC Mumbai (Reg.No. A-17381)

Advanced Prosthodontics, UCLA, California, USA





Mr.ABHISHEK 35/Y M 30-03-2023 AF-001001632

#### **NUTRITION PRESCRIPTION FOR DM**

Registration	Date:
--------------	-------

Ht./Wt.:

Cms. /

Kgs.

Keeping in mind your Medical Reports, health status, foodintake, dietary habits, a personalized Dietary Instructions are provided here.

#### **DIETARY RECOMMENDATIONS:-**Changes with regards to your present Dietary habits,

Have small frequent meals.

Trs./

- Fasting and feasting should be avoided.
- Start your day with 1 tbsp of methi seeds soaked overnight. Gulp methi along with water.
- <u>CEREALS</u>- Include more of whole grain products like wheat, jowar, oats, ragi, soya, barley and avoid consumption of refined flour and its products.
- FRUITS- Limit banana, mango, chiku, custardapple, grapes as these are high in sugars.
- VEGS-Limit potato, sweet potato, suran, arbi, raw banana.
- MILK- Avoid butter, cream, cheese, whole milk.
- NUTS- Avoid coconut, peanut, cashewnut.
- NON-VEG- Have more of Egg whites, chicken, fish; avoid red meat, shellfish, beef and pork.
- Avoid all fruit juices, fresh & canned, softdrinks, sherbets, sugarcane juice instead have whole fruits.
- Avoid use of sugar, honey, jaggery and food items made from them.
- Avoid papad, pickles, oily chutneys, fried foods, creamy foods, mayonnaise, chocolates, icecream, junk foods & fast foods.
- Use oil in rotation: Oil /Ghee consumption 3-4 tsp/day. i.e ½ kg/person/ month.
- Use Non-stick cookware for cooking your food.
- Avoid vanaspati, margarine, bakery products like cakes, pastries, cream-biscuits.
- Drink plenty of water, atleast 12-15 glasses(2.5 -3 litres) / day.
- Do not smoke, drink, or chew tobacco.
- Exercise daily for 45-60 mins either brisk walking, jogging, swimming. If medical complaint then as per doctor's advise.

Dr. Sabiha Siddiqui BHSc,P.G.Dietetics,CDE,DNYS (Head Clinical Dietitian & Nutritionist)

022-22021122







#### DIET CHART

MEAL	MENO	AMOUNT [HOUSEHOLD MEASURES
Carly morning	Water + 1 tsp fenugreek seeds	1 glass
50000	(soaked overnight or powdered)	
	OR Warm water + a pinch of	1 glass
	cinnamon	
		0
	Exercise/ Yoga/ Breathing exercise	
Breakfast	Tea / coffee (prepared with double	50 ml milk
Dicarrast	toned milk) (no sugar )	
	1 cup milk + 2 Tbsp Oats/ wheat	
	flakes + 2 egg whites / 1 whole egg	
	OR 1 c Milk with any one of below	
	option /Veg poha / Oats Upma /	1 vati
	(A)	
	Veg Dahlia OR Phulka / Roti + 1 vati	Medium size -2 nos (no oil / ghee)
	OK Thunsa / 2005	Medium Size 2 nos (no car g
	vegetable	2.8
	OR Brown Bread sandwich	2 slice
		125 L'angling (Seesangl fruit)
Mid - Morning	Fruit OR	1 Medium size (Seasonal fruit)
	Almonds 4-5	
	Walnuts 2	
Lunch	Salad / Thin soup	1 Big Bowl
	(Cucumber, Tomato, carrot,	
	cabbage, radish, etc.)	
		8
	Rotis or Phulkas	2 small / 1 big (No ghee / oil )
	1000	
	Rice (preferably brown rice)	1 vati Rice (twice a week)
	Rice (preferably brown rice)	
	Dol	1 Vati
	Dal	• • • • • • • • • • • • • • • • • • •



apollocliniccolaba@gmail.com





LIVES	Vegetables	1-2 Vati
	Curd (skimmed)/ Buttermilk	1/2 vati /1 glass
Evening	Roasted chana / Soya nuts/ OR sprouts bhel	1 handful 1 small katori
	OR Besanchilla / BesanMuthia	Medium size – 2 nos
9	Green Tea / Tea	1 cup (No sugar)
Dinner	SAME AS LUNCH	
	Except Rice	
OPTIONS	Veg khichdi + kadhi /curd + 1 vati vegetable	2 Vatis / 1 vati
OPTIONS	Wheat/Jowar/BajraBhakri	2 nos medium
	Vegetable	1 vati 1 vati
	Dal	1 vati
Bed – Time	Milk (Skimmed)	100 ml milk

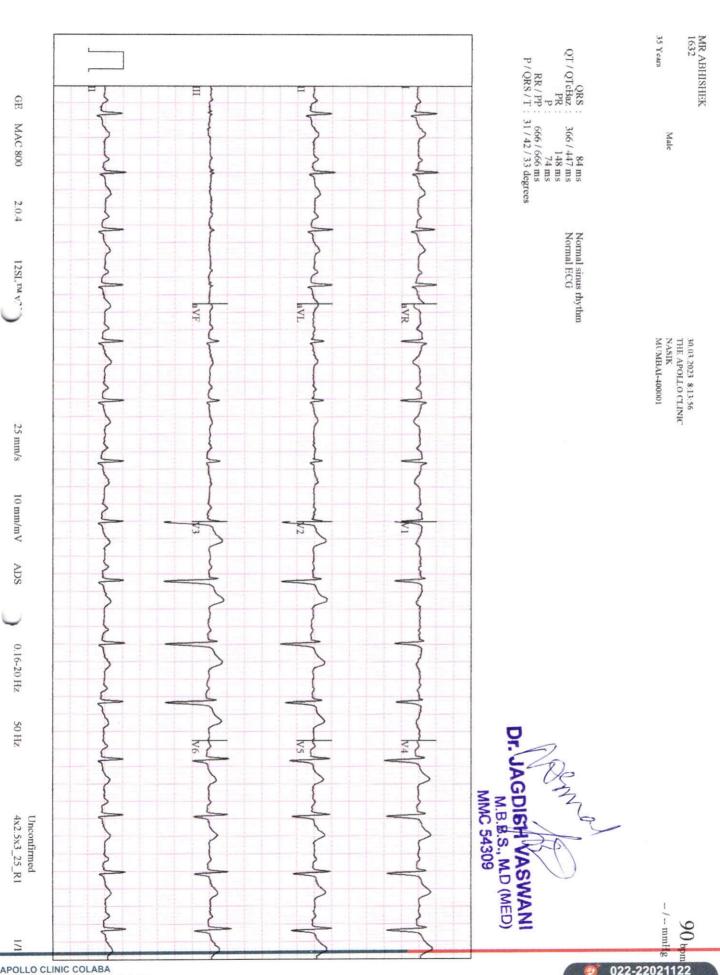
Total calories/day	Oil /Ghee /day	Salt/day	
1500 Kcals	3 to 4 tsps	3/4 tsp	

- Oil intake should be ½ liter per person per month.
- Consume Green tea/ Herbal tea 2-3 cups/ day.
- Take 1 Tsp Flaxseed (Alsi) after lunch and dinner.

Dr. Sabiha Siddiqui
BHSc,P.G.Dietetics,CDE,DNYS
(Head Clinical Dietitian & Nutritionist)







022-22021122 8450982226





NAME: MR. ABHISHEK AGE/SEX: 35 YEARS/MALE

MR.NO: AF001001632

REF. BY: ACROFEMI MEDIWHEEL/ HEALTH CHECKUP

DATE: 30/03/2023

## 2D ECHOCARDIOGRAPHY AND COLOR DOPPLER STUDY

### 2D ECHOCARDIOGRAPHY FINDINGS:

- 1. Normal sized LV with good contractility. LVEF appears to be 60%. No regional wall motion abnormality seen.
- 2. Structurally normal cardiac valves.
- 3. Normal sized RV with good contractility. RA and LA are normal in size.
- 4. IAS and IVS appear intact.
- 5. No obvious clot seen.
- 6. No vegetations or pericardial effusion.

#### SPECTRAL AND COLOR DOPPLER STUDY:

LV diastolic dysfunction. Trivial TR. Doppler estimated Pulmonary Artery Pressure is 20 mm of Hg. Rest normal flow velocities and color flow mapping seen across both atrioventricular and Semilunar valves. No intracardiac shunt or other regurgitation noticed IMPRESSION

Normal LV systolic function Type I LV diastolic dysfunction No Pulmonary Hypertension No clots/ vegetations.

> DR J VASWANI MD (MED)

NOTE:

NORMAL 2D TCHOCARDIOGRAPHY REPORT DOESNOT RULE OUT CRITICAL CAD. THESE REPORTS ARE NOT FOR MEDICO-LEGAL PURPOSE, AND FOR DOCTORS; TO KINDLY CORRELATE CLINICALLY.

022-22021122

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## APOLLO CLINIC (COLABA)

Name: ABHISHEK

MRN: 23-03-30-105441

Study Date: 30/03/2023 10:54

Gender: Male

Cardiac

**Dimension** 

**MMode** 

RVIDd (MM): 1.49 cm

IVSd (MM):

0.935 cm

LVIDd (MM): 4.80 cm

LVPWd (MM): 0.892 cm

IVSs (MM):

2.00 cm

LVIDs (MM): 2.34 cm

LVPWs (MM): 1.49 cm

AoR Diam (MM): 3.06 cm

LA Dimen (MM): 2.89 cm

AV Cusp Sep: 2.00 cm

EDV (MM-Teich): 108 ml

ESV (MM-Teich): 18.9 ml

IVS/LVPW (MM): 1.05

LA/Ao (MM): 0.944

LVPW % (MM): 66.7 %

EF (MM-Teich): 82.5 %

FS (MM-Teich): 51.3 %

IVS % (MM): 114 %

LV Mass (Cubed): 151 grams

**Aortic Valve** 

Doppler

AV Vmax:

179 cm/s (Avg.)

AV Max PG:

13.1 mmHg (Avg.)

Mitral Valve

MMode

APONY DE SHOPE DIGABOM/S

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23-03-30-105441 30/03/2023 10:54

MV D-E Time: 0.013 s POIO Cinic
MV D-E Dist: 2.17 cm Expertise. Closer to you.

MV E-F Slope: 4.87 cm/s MV E-F Time: 0.139 sec MV E-F Dist: 0.680 cm MV EPSS: 0.297 cm

### **Tricuspid Valve**

#### **Doppler**

TR Vmax:

153 cm/s

TV Vmax:

7.63 cm/s

TR Max PG:

9.33 mmHg

TV Max PG:

0.023 mmHg

### **Pulm Valve**

#### **Doppler**

PV Vmax:

137 cm/s

PV Max PG:

7.55 mmHg

### Interpretation Summary

#### 

Reading Physician: \_\_\_\_\_



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Patient Name : Mr. Abhishek

Age

: 35 yrs

Ref. By

: Arcofemi

MR No: AF001001632

Sex

: Male

Date

: 30-03-2023

### X-RAY CHEST PA VIEW

The lungs are clear.

Heart size is normal.

Mild unfolding of aorta.

Pleural spaces are clear.

Bilateral costophrenic angles are clear.

Bony thorax and soft tissues are unremarkable.

Dr. Bushra Rasool

Consultant Radiologist

022-22021122

8450982226





Patient Name: Mr. Abhishek MR No: AF001001632

Age : 35 yrs Sex : Male

Ref. By : Arcofemi Date : 30-03-2023

#### ULTRASOUND OF ABDOMEN AND PELVIS

<u>LIVER</u>: It is moderately enlarged in size. It measures 16.8 cm. The parenchyma shows moderately increased echo-texture. No focal lesion seen. Intra-hepatic biliary and portal radicles are normal. The main portal vein is normal.

**GALL BLADDER:** is partially distended. No calculus or mass seen. The wall thickness is normal. No peri-cholic abnormality seen. The common bile duct is normal. No evidence of choledocholithiasis seen.

<u>PANCREAS</u>: It is normal in size and echotexture. No focal lesion seen. No peri-pancreatic collection noted. The main pancreatic duct is normal.

**SPLEEN:** It is normal in size and echotexture. Splenic vein is normal.

**BOTH KIDNEYS**: Both kidneys are normal in size, shape and position. The parenchyma shows normal echo-texture. Cortico-medullary differentiation is well maintained.

Right kidney measures 11.9 x 5.9 cm. Small mid pole calculus noted approx measuring 3.4 mm.

<u>Left kidney</u> measures 11.8 x 5.6 cm. Mid and lower poles calcification. No evidence of hydronephrosis seen.

<u>URINARY BLADDER:</u> It is adequately distended. The margins are smooth. No vesical mass or calculus seen.

**PROSTATE:** is normal in size and shape. The parenchyma is normal. It measures 3.3 x 3.5 x 3.5 cm. The weight measures approx 22 cc.

No ascitis or lymphadenopathy noted.

#### **IMPRESSION:**

- MODERATE HEPATOMEGALY WITH GRADE II FATTY LIVER.
- RIGHT RENAL SMALL NON-OBSTRUCTING CALCULUS.

Dr. Bushra Rasool

Consultant Radiologist

Note: USG examinations have their limitations due to patient body habitus and bowel gas. Bowel abnormalities may not be detected on sonography. This document is not valid for medico-legal purpose.

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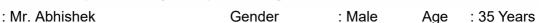
Name



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Tel.: 022-22021122, : 3450982226, E:apolloclinicmumbai@gmail.com, apollocliniccolaba@gmail.com



UHID : AF-001001632 Bill No : Lab No : c-3669-23

Ref. by : Arcofemi Healthcare Sample Col.Dt : 30/03/2023 09:01
Barcode No : 683 Reported On : 30/03/2023 19:02

TEST RESULTS BIOLOGICAL REFERENCE INTERVAL

#### URINE REPORT

**PHYSICAL EXAMINATION** 

QUANTITY 15 mL

COLOUR Yellow

APPEARANCE Clear Clear SEDIMENT Absent Absent

**CHEMICAL EXAMINATION(Strip Method)** 

REACTION(PH) 5.0 4.6 - 8.0

SPECIFIC GRAVITY 1.030 1.005 - 1.030

URINE ALBUMIN Absent Absent URINE SUGAR(Qualitative) Absent **Absent KETONES** Absent **Absent BILE SALTS Absent** Absent **BILE PIGMENTS** Absent **Absent UROBILINOGEN** Normal(<1 mg/dl) Normal OCCULT BLOOD Absent Absent **Nitrites** Absent Absent

**MICROSCOPIC EXAMINATION** 

**PUS CELLS** 2 - 3 / hpf 0 - 3/hpfNil /HPF **RED BLOOD CELLS** Absent **EPITHELIAL CELLS** 4-6/hpf 3 - 4/hpf **CASTS** Absent Absent **CRYSTALS** Absent Absent **BACTERIA** Absent Absent

Anushka Chavan Entered By Ms Kaveri Gaonkar Verified By

End of Report
Results are to be correlated clinically

Dr. Milind Patwardhan M.D(Path) Chief Pathologist

Page 1 of 9





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Name : Mr. Abhishek Gender : Male Age : 35 Years

**UHID** : AF-001001632 Bill No Lab No : c-3669-23

Ref. by : Arcofemi Healthcare Sample Col.Dt : 30/03/2023 09:01 Barcode No : 683 Reported On : 30/03/2023 19:07

**TEST RESULTS** UNITS BIOLOGICAL REFERENCE INTERVAL

> GLUCOSE PLASMA

Fasting Plasma Glucose: <u>123</u> mg/dL Normal < 100 mg/dL

Impaired Fasting glucose: 101 to 125 mg/dL

Diabetes Mellitus : >= 126 mg/dL (on more than one occasion)

(American diabetes association guidlines 2016)

Post Prandial Plasma Glucose: <u>232</u> mg/dL Normal < 140 mg/dL

Impaired Post Prandial glucose: 140 to 199 mg/dL

Diabetes Mellitus : >= 200 mg/dL (on more than one occasion)

(American diabetes association guidlines 2016)

Fasting Urine Glucose: Absent Fasting Urine Acetone: Absent

Post Prandial Urine Glucose: Present (+) Post Prandial Urine Acetone: Absent

Method: Hexokinase

Vasanti Gondal **Entered By** 

Ms Kaveri Gaonkar Verified By

Dr. Milind Patwardhan Page 2 of 10.D(Path) **Chief Pathologist** 

End of Report Results are to be correlated clinically





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Name : Mr. Abhishek Gender : Male Age : 35 Years

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 Ref. by
 : Arcofemi Healthcare
 Sample Col.Dt
 : 30/03/2023 09:01

 Barcode No
 : 683
 Reported On
 : 30/03/2023 18:21

TEST RESULTS BIOLOGICAL REFERENCE INTERVAL

#### HbA1c(Glycosylated Haemoglobin )WB-EDTA

(HbA1C) Glycosylated Haemoglobin: 6.5 % Normal <5.7 %

Pre Diabetic 5.7 - 6.5 % Diabetic >6.5 %

Target for Diabetes on therapy < 7.0 % Re-evalution of therapy > 8.0 %

Mean Blood Glucose: 139.85 mg/dL

Corelation of A1C with average glucose

A1C (%)	Mean Blood Glucose (mg/dl)		
6	126		
7	154		
8	183		
9	212		
10	240		
11	269		
12	298		

#### Method

#### High Performance Liquid Chromatography (HPLC).

#### **INTERPRETATION**

- \* The HbA1c levels corelate with the mean glucose concentration prevailing in the course of Pts recent history (apprx 6-8 weeks) & therefore provides much more reliable information for glycemia control than the blood glucose or urinary glucose.
- \* This Methodology is better then the routine chromatographic methods & also for the daibetic pts.having HEMOGLBINOPATHIES OR UREMIA as Hb varaints and uremia does not INTERFERE with the results in this methodology.
- \* It is recommended that HbA1c levels be performed at 4 8 weeks during therapy in uncontrolled DM pts.& every 3 4 months in well controlled daibetics.
- Mean blood glucose (MBG) in first 30 days ( 0-30 )before sampling for HbA1c contributes 50% whereas MBG in 90 120 days contribute to 10% in final HbA1c levels

Alsaba Shaikh Entered By Ms Kaveri Gaonkar Verified By Dr. Milind Patwardhan M.D(Path) Chief Pathologist

End of Report
Results are to be correlated clinically

Page 3 of 9





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 : Arcofemi Healthcare
 Sample Col.Dt
 : 30/03/2023 09:01

 Barcode No
 : 683
 Reported On
 : 30/03/2023 19:30

TEST RESULTS UNITS BIOLOGICAL REFERENCE INTERVAL

### **LFT(Liver Function Tests)-Serum**

S.Total Protein (Biuret method)	8.04	g/dL	6.6 - 8.7
S.Albumin (BCG method)	4.54	g/dL	3.5 - 5.2
S.Globulin (Calculated)	3.5	g/dL	2 - 3.5
S.A/G Ratio:(Calculated)	1.3		0.9 - 2
S.Total Bilirubin (DPD):	0.87	mg/dL	0.1 - 1.2
S.Direct Bilirubin (DPD):	<u>0.31</u>	mg/dL	0.1 - 0.3
S.Indirect Bilirubin (Calculated)	0.56	mg/dL	0.1 - 1.0
S.AST (SGOT)(IFCC Kinetic with P5P):	31	U/L	5 - 40
S.ALT (SGPT) (IFCC Kinetic with P5P):	<u>50</u>	U/L	5 - 41
S.Alk Phosphatase(pNPP-AMP Kinetic):	<u>138</u>	U/L	40 - 129
S.GGT(IFCC Kinetic):	26	U/L	11 - 50

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Vasanti Gondal Entered By Ms Kaveri Gaonkar Verified By

End of Report Results are to be correlated clinically Dr. Milind Patwardhan
M.D(Path)
Page 4 of Ghief Pathologist





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TEST RESULTS UNITS BIOLOGICAL REFERENCE INTERVAL

#### **Lipid Profile- Serum**

S. Cholesterol(Oxidase)	189	mg/dL	Desirable < 200 Borderline:>200-<240 Undesirable:>240
S. Triglyceride(GPO-POD)	105	mg/dL	Desirable < 150 Borderline:>150-<499 Undesirable:>500
S. VLDL:(Calculated)	21	mg/dL	Desirable <30
S. HDL-Cholesterol(Direct)	36.2	mg/dL	Desirable > 60 Borderline:>40-<59 Undesirable:<40
S. LDL:(calculated)	131.8	mg/dL	Desirable < 130 Borderline:>130-<159 Undesirable:>160
Ratio Cholesterol/HDL	<u>5.2</u>		3.5 - 5
Ratio of LDL/HDL	<u>3.6</u>		2.5 - 3.5

Vasanti Gondal Entered By Ms Kaveri Gaonkar Verified By

End of Report Results are to be correlated clinically Dr. Milind Patwardhan M.D(Path) Chief Pathologist





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TEST RESULTS UNITS BIOLOGICAL REFERENCE INTERVAL

#### RFT - Renal Profile-serum

S.Urea(Urease-GLDH)	28.2	mg/dL	10.0 - 45.0
S. Urea Nitrogen( Calculated)	13.16	mg/dL	5 - 20
S.Creatinine(Jaffe's Kinetic)	0.82	mg/dL	0.50 - 1.3
S.Uric Acid(Uricase-POD)	6.6	mg/dL	3.4 - 7.0
S.Total Protein(Biuret)	8.04	g/dL	6.6 - 8.7
S.Albumin(BCG)	4.54	g/dL	3.5 - 5.2
S.Globulin(Calculated)	3.5	g/dL	2 - 3.5
A/G Ratio(Calculated)	1.3		0.9 - 2
S.Sodium(Na) (ISE-Direct)	137	mmol/L	135 - 145
S.Potassium(K) (ISE-Direct)	4.1	mmol/L	3.5 - 5.3
S.Chloride(Cl) (ISE-Direct)	98	mmol/L	95 - 106
S.Calcium(NM-BAPTA)	9.63	mg/dL	8.6 - 10.0
S.Phosphorus(UV Phosphomolybdate)	3.34	mg/dL	2.5 - 4.5

Vasanti Gondal Entered By Ms Kaveri Gaonkar Verified By

End of Report Results are to be correlated clinically Dr. Milind Patwardhan M.D(Path) Chief Pathologist





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E:apolloclinicmumbai@gmail.com, apollocliniccolaba@gmail.com

Name : Mr. Abhishek Gender : Male Age : 35 Years

UHID : AF-001001632 Bill No : Lab No : c-3669-23

 Ref. by
 : Arcofemi Healthcare
 Sample Col.Dt
 : 30/03/2023 09:01

 Barcode No
 : 683
 Reported On
 : 30/03/2023 19:30

TEST RESULTS

Blood Grouping (ABO & Rh)-WB(EDTA) Serum

ABO Group: :O:

Rh Type: **Positive** 

Method: Tube Agglutination (forward and reverse)

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Shweta Unavane Entered By Ms Kaveri Gaonkar Verified By

End of Report
Results are to be correlated clinically

Dr. Milind Patwardhan M.D(Path) Chief Pathologist



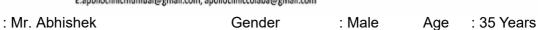
Name



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**UHID** : AF-001001632 Bill No : c-3669-23 Lab No

Ref. by : Arcofemi Healthcare Sample Col.Dt : 30/03/2023 09:01 Barcode No : 683 Reported On : 30/03/2023 16:08

**TEST RESULTS BIOLOGICAL REFERENCE INTERVAL** 

HAEMOGRAM(CBC,ESR,P/S)-WB (EDTA)

Haemoglobin(Colorimetric method)	16	g/dl	13 - 18	
RBC Count (Impedance)	5.21	Millions/cumm.	4 - 6.2	
PCV/Haematocrit(Calculated)	46.2	%	35 - 55	
MCV:(Calculated)	88.7	fl	78 - 98	
MCH:(Calculated)	30.7	pg	26 - 34	
MCHC:(Calculated)	34.6	gm/dl	30 - 36	
RDW-CV:	14.7	%	11.5 - 16.5	
Total Leucocyte count(Impedance)	9240	/cumm.	4000 - 10500	
Neutrophils:	52	%	40 - 75	
Lymphocytes:	36	%	20 - 40	
Eosinophils:	<u>08</u>	%	0 - 6	
Monocytes:	04	%	2 - 10	
Basophils:	00	%	0 - 2	
Platelets Count(Impedance method)	1.73	Lakhs/c.mm	1.5 - 4.5	
MPV	<u>11.1</u>	fl	6.0 - 11.0	
ESR(Westergren Method)	04	mm/1st hr	0 - 20	
Peripheral Smear (Microscopic examination) RBCs:	Normochromic, Normocytic			

WBCs: Eosinophilia **Platelets** Adequate

Test Run on 5 part cell counter. Manual diff performed. Note:

Alsaba Shaikh **Entered By** 

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Page 8 of 9





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E:apolloclinicmumbai@gmail.com, apollocliniccolaba@gmail.com

Name : Mr. Abhishek Gender : Male Age : 35 Years

: AF-001001632 **UHID** Bill No Lab No : c-3669-23

Ref. by : Arcofemi Healthcare Sample Col.Dt : 30/03/2023 09:01 Barcode No : 683 Reported On : 30/03/2023 19:30

**TEST RESULTS** BIOLOGICAL REFERENCE INTERVAL UNITS

Thyroid (T3,T4,TSH)- Serum

1.3 - 3.1 nmol/L Total T3 (Tri-iodo Thyronine) (ECLIA) 2.37 nmol/L

Total T4 (Thyroxine) (ECLIA) 66 - 181 nmol/L 122.3 nmol/L

TSH-Ultrasensitive μlU/ml Euthyroid:  $0.35 - 5.50 \mu lU/ml$ 3.65

Hyperthyroid :  $< 0.35 \mu lU/ml$ (Thyroid-stimulating hormone) Method: ECLIA

Hypothyroid :  $> 5.50 \mu IU/mI$ 

Grey zone values observed in physiological/therapeutic effect.

#### Note:

#### T3:

1. Decreased values of T3 (T4 and TSH normal) have minimal Clinical significance and not recommended for diagnosis of hypothyrodism.

- 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, Phenytoin) etc. In such cases Free T3 and free T4 give corrected Values.
- 3. Total T3 may decrease by < 25 percent in healthy older individuals

#### T4:

1. Total T3 and T4 Values may also be altered in other condition due to changes in serum proteins or binding sites, Pregnancy Drugs (Androgens, Estrogens, O C pills, Phenytoin), Nerphrosis etc. In such cases Free T3 and Free T4 give Corrected values.

- 1. TSH Values may be transiently altered because of non thyroidal illness like severe infections, liver disease, renal and heart failure. Severe burns, trauma and surgery etc.
- 2. Drugs that decrease TSH values e,g L dopa, Glucocorticoids.
- 3. Drugs that increase TSH values e.g. lodine, Lithium, Amiodarone

Vasanti Gondal **Entered By** 

Ms Kaveri Gaonkar Verified By

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End of Report Results are to be correlated clinically

Page 9 of 9