

Patient Name : Mr.SABIR ALTAFALI SAYYED	Collected : 10/Jun/2023 10:41AM
Age/Gender : 33 Y 1 M 3 D/M	Received : 10/Jun/2023 04:16PM
UHID/MR No : CPIM.0000110807	Reported : 10/Jun/2023 05:43PM
Visit ID : CPIMOPV145257	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE40373	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

PERIPHERAL SMEAR , WHOLE BLOOD-EDTA

RBCs ARE NORMOCYTIC NORMOCHROMIC.
TLC , DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.
PLATELETS ARE ADEQUATE.
NO HEMOPARASITES SEEN.



Patient Name : Mr.SABIR ALTAFALI SAYYED	Collected : 10/Jun/2023 10:41AM
Age/Gender : 33 Y 1 M 3 D/M	Received : 10/Jun/2023 04:16PM
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DEPARTMENT OF HAEMATOLOGY

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Test Name	Result	Unit	Bio. Ref. Range	Method
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HEMOGRAM , WHOLE BLOOD-EDTA

HAEMOGLOBIN	15.7	g/dL	13-17	Spectrophotometer
PCV	46.50	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.07	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	91.9	fL	83-101	Calculated
MCH	30.9	pg	27-32	Calculated
MCHC	33.7	g/dL	31.5-34.5	Calculated
R.D.W	14.1	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,470	cells/cu.mm	4000-10000	Electrical Impedence

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	58.9	%	40-80	Electrical Impedence
LYMPHOCYTES	32.2	%	20-40	Electrical Impedence
EOSINOPHILS	1.8	%	1-6	Electrical Impedence
MONOCYTES	6.5	%	2-10	Electrical Impedence
BASOPHILS	0.6	%	<1-2	Electrical Impedence

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	4988.83	Cells/cu.mm	2000-7000	Electrical Impedence
LYMPHOCYTES	2727.34	Cells/cu.mm	1000-3000	Electrical Impedence
EOSINOPHILS	152.46	Cells/cu.mm	20-500	Electrical Impedence
MONOCYTES	550.55	Cells/cu.mm	200-1000	Electrical Impedence
BASOPHILS	50.82	Cells/cu.mm	0-100	Electrical Impedence

PLATELET COUNT

PLATELET COUNT	228000	cells/cu.mm	150000-410000	Electrical impedence
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ERYTHROCYTE SEDIMENTATION RATE (ESR)

ERYTHROCYTE SEDIMENTATION RATE (ESR)	2	mm at the end of 1 hour	0-15	Modified Westergren
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PERIPHERAL SMEAR

RBCs ARE NORMOCYTIC NORMOCHROMIC.
 TLC , DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.
 PLATELETS ARE ADEQUATE.
 NO HEMOPARASITES SEEN



Patient Name : Mr.SABIR ALTAFALI SAYYED	Collected : 10/Jun/2023 10:41AM
Age/Gender : 33 Y 1 M 3 D/M	Received : 10/Jun/2023 04:16PM
UHID/MR No : CPIM.0000110807	Reported : 10/Jun/2023 06:03PM
Visit ID : CPIMOPV145257	Status : Final Report
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DEPARTMENT OF HAEMATOLOGY

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Test Name	Result	Unit	Bio. Ref. Range	Method
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BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD-EDTA				
BLOOD GROUP TYPE	O			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



Patient Name : Mr.SABIR ALTAFALI SAYYED	Collected : 10/Jun/2023 10:41AM
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	108	mg/dL	70-100	HEXOKINASE
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Comment:

As per American Diabetes Guidelines

Fasting Glucose Values in mg/d L	Interpretation
<100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes



Patient Name : Mr.SABIR ALTAFALI SAYYED	Collected : 10/Jun/2023 01:12PM
Age/Gender : 33 Y 1 M 3 D/M	Received : 10/Jun/2023 06:22PM
UHID/MR No : CPIM.0000110807	Reported : 10/Jun/2023 06:37PM
Visit ID : CPIMOPV145257	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA	112	mg/dL	70-140	HEXOKINASE

Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other.

Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.

Ref: Marks medical biochemistry and clinical approach



Patient Name : Mr.SABIR ALTAFALI SAYYED	Collected : 10/Jun/2023 10:41AM
Age/Gender : 33 Y 1 M 3 D/M	Received : 10/Jun/2023 04:17PM
UHID/MR No : CPIM.0000110807	Reported : 10/Jun/2023 05:07PM
Visit ID : CPIMOPV145257	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.2	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	103	mg/dL		Calculated

Comment:

Reference Range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS >18 YEARS	<5.7
AT RISK (PREDIABETES)	5.7 – 6.4
DIAGNOSING DIABETES	≥ 6.5
DIABETICS	
· EXCELLENT CONTROL	6 – 7
· FAIR TO GOOD CONTROL	7 – 8
· UNSATISFACTORY CONTROL	8 – 10
· POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

1. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
3. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present. Fructosamine may be used as an alternate measurement of glycemic control



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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
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LIPID PROFILE , SERUM

TOTAL CHOLESTEROL	126	mg/dL	<200	CHO-POD
TRIGLYCERIDES	42	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	57	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	69	mg/dL	<130	Calculated
LDL CHOLESTEROL	60.49	mg/dL	<100	Calculated
VLDL CHOLESTEROL	8.49	mg/dL	<30	Calculated
CHOL / HDL RATIO	2.21		0-4.97	Calculated

Comment:

Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220

Measurements in the same patient can show physiological and analytical variations.

NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.



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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM

BILIRUBIN, TOTAL	0.61	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.14	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.47	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	26.16	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	26.4	U/L	<50	IFCC
ALKALINE PHOSPHATASE	62.66	U/L	30-120	IFCC
PROTEIN, TOTAL	7.79	g/dL	6.6-8.3	Biuret
ALBUMIN	4.48	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.31	g/dL	2.0-3.5	Calculated
A/G RATIO	1.35		0.9-2.0	Calculated



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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM

CREATININE	0.94	mg/dL	0.72 – 1.18	Modified Jaffe, Kinetic
UREA	41.14	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	19.2	mg/dL	8.0 - 23.0	Calculated
URIC ACID	7.27	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	10.05	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	2.31	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	143.28	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.3	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	102.44	mmol/L	101–109	ISE (Indirect)



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	10.29	U/L	<55	IFCC



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Visit ID : CPIMOPV145257	Status : Final Report
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DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM

TRI-IODOTHYRONINE (T3, TOTAL)	1.28	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	7.20	µg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	2.046	µIU/mL	0.34-5.60	CLIA

Comment:

Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night and the nadir occurring between 10 a.m. and 4 p.m. In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels will be elevated. In primary hyperthyroidism, TSH levels will be low. Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroid-ism, respectively. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

Note:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 - 3.0
Third trimester	0.3 - 3.0



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Visit ID : CPIMOPV145257	Status : Final Report
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DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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COMPLETE URINE EXAMINATION (CUE) , URINE

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	5.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	>1.025		1.002-1.030	Bromothymol Blue

BIOCHEMICAL EXAMINATION

URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

PUS CELLS	2 - 3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1 - 2	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY




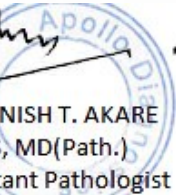
Patient Name : Mr.SABIR ALTAFALI SAYYED	Collected : 10/Jun/2023 10:41AM
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DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	Dipstick
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	Dipstick

*** End Of Report ***

DR. MANISH T. AKARE
M.B.B.S, MD(Path.)
Consultant Pathologist




Dr Sneha Shah
MBBS, MD (Pathology)
Consultant Pathologist




Dr. Sanjay Ingle
M.B.B.S, MD(Pathology)
Consultant Pathologist



Patient Name : Mr. SABIR ALTAFALI SAYYED

Age/Gender : 33 Y/M

UHID/MR No. : CPIM.0000110807

OP Visit No : CPIMOPV145257

Sample Collected on :

Reported on : 10-06-2023 18:33

LRN# : RAD2019128

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : bobE40373

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Observation:-

Both lung fields are clear.

Both C-P angles are clear.

Cardiac size appear normal.

Hila and pulmonary vessels are within normal limits.

Both the domes of diaphragm are normal.

Thoracic cage and soft tissues are within normal limits.

Impression

Study is within normal limits.



Dr. KIRAN PRALHAD SUDHARE
MBBS, DMRD
Radiology



Patient Name : Mr. SABIR ALTAFALI SAYYED

Age/Gender : 33 Y/M

UHID/MR No. : CPIM.0000110807

OP Visit No : CPIMOPV145257

Sample Collected on :

Reported on : 10-06-2023 18:13

LRN# : RAD2019128

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : bobE40373

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Name: Mr. SABIR ALTAFALI SAYYED
Age/Gender: 33 Y/M
Address: MANCHAR
Location: PUNE, MAHARASHTRA
Doctor:
Department: GENERAL
Rate Plan: PIMPRI_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. SUPRIYA GAWARE

MR No: CPIM.0000110807
Visit ID: CPIMOPV145257
Visit Date: 10-06-2023 10:39
Discharge Date:
Referred By: SELF

Doctor's Signature

Name: Mr. SABIR ALTAFALI SAYYED
Age/Gender: 33 Y/M
Address: MANCHAR
Location: PUNE, MAHARASHTRA
Doctor:
Department: GENERAL
Rate Plan: PIMPRI_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Miss. SNEHA NAIR

MR No: CPIM.0000110807
Visit ID: CPIMOPV145257
Visit Date: 10-06-2023 10:39
Discharge Date:
Referred By: SELF

Doctor's Signature

Name: Mr. SABIR ALTAFALI SAYYED
Age/Gender: 33 Y/M
Address: MANCHAR
Location: PUNE, MAHARASHTRA
Doctor:
Department: GENERAL
Rate Plan: PIMPRI_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. SAMEER KUMAR SABAT

MR No: CPIM.0000110807
Visit ID: CPIMOPV145257
Visit Date: 10-06-2023 10:39
Discharge Date:
Referred By: SELF

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

Name: Mr. SABIR ALTAFALI SAYYED
Age/Gender: 33 Y/M
Address: MANCHAR
Location: PUNE, MAHARASHTRA
Doctor:
Department: GENERAL
Rate Plan: PIMPRI_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. PRADNYA AJAYKUMAR VASUDEV

MR No: CPIM.0000110807
Visit ID: CPIMOPV145257
Visit Date: 10-06-2023 10:39
Discharge Date:
Referred By: SELF

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
10-06-2023 14:53	84 Beats/min	110/80 mmHg	20 Rate/min	97 F	162 cms	55 Kgs	%	%	Years	20.96	cms	cms	cms		AHLL03446

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
10-06-2023 14:53	84 Beats/min	110/80 mmHg	20 Rate/min	97 F	162 cms	55 Kgs	%	%	Years	20.96	cms	cms	cms		AHLL03446

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
10-06-2023 14:53	84 Beats/min	110/80 mmHg	20 Rate/min	97 F	162 cms	55 Kgs	%	%	Years	20.96	cms	cms	cms		AHLL03446

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
10-06-2023 14:53	84 Beats/min	110/80 mmHg	20 Rate/min	97 F	162 cms	55 Kgs	%	%	Years	20.96	cms	cms	cms		AHLL03446

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UHID/MR No : CPIM.0000110807	Reported : 10/Jun/2023 05:43PM
Visit ID : CPIMOPV145257	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE40373	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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HEMOGRAM , WHOLE BLOOD-EDTA

HAEMOGLOBIN	15.7	g/dL	13-17	Spectrophotometer
PCV	46.50	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.07	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	91.9	fL	83-101	Calculated
MCH	30.9	pg	27-32	Calculated
MCHC	33.7	g/dL	31.5-34.5	Calculated
R.D.W	14.1	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,470	cells/cu.mm	4000-10000	Electrical Impedence

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	58.9	%	40-80	Electrical Impedence
LYMPHOCYTES	32.2	%	20-40	Electrical Impedence
EOSINOPHILS	1.8	%	1-6	Electrical Impedence
MONOCYTES	6.5	%	2-10	Electrical Impedence
BASOPHILS	0.6	%	<1-2	Electrical Impedence

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	4988.83	Cells/cu.mm	2000-7000	Electrical Impedence
LYMPHOCYTES	2727.34	Cells/cu.mm	1000-3000	Electrical Impedence
EOSINOPHILS	152.46	Cells/cu.mm	20-500	Electrical Impedence
MONOCYTES	550.55	Cells/cu.mm	200-1000	Electrical Impedence
BASOPHILS	50.82	Cells/cu.mm	0-100	Electrical Impedence

PLATELET COUNT

PLATELET COUNT	228000	cells/cu.mm	150000-410000	Electrical impedence
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ERYTHROCYTE SEDIMENTATION RATE (ESR)

ERYTHROCYTE SEDIMENTATION RATE (ESR)	2	mm at the end of 1 hour	0-15	Modified Westergren
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PERIPHERAL SMEAR

RBCs ARE NORMOCYTIC NORMOCHROMIC.

TLC , DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.

PLATELETS ARE ADEQUATE.

NO HEMOPARASITES SEEN



Patient Name : Mr.SABIR ALTAFALI SAYYED	Collected : 10/Jun/2023 10:41AM
Age/Gender : 33 Y 1 M 3 D/M	Received : 10/Jun/2023 04:16PM
UHID/MR No : CPIM.0000110807	Reported : 10/Jun/2023 05:43PM
Visit ID : CPIMOPV145257	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE40373	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

PERIPHERAL SMEAR , WHOLE BLOOD-EDTA

RBCs ARE NORMOCYTIC NORMOCHROMIC.
TLC , DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.
PLATELETS ARE ADEQUATE.
NO HEMOPARASITES SEEN.



Patient Name : Mr.SABIR ALTAFALI SAYYED	Collected : 10/Jun/2023 10:41AM
Age/Gender : 33 Y 1 M 3 D/M	Received : 10/Jun/2023 04:16PM
UHID/MR No : CPIM.0000110807	Reported : 10/Jun/2023 06:03PM
Visit ID : CPIMOPV145257	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE40373	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD-EDTA				
BLOOD GROUP TYPE	O			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



Patient Name : Mr.SABIR ALTAFALI SAYYED	Collected : 10/Jun/2023 10:41AM
Age/Gender : 33 Y 1 M 3 D/M	Received : 10/Jun/2023 04:22PM
UHID/MR No : CPIM.0000110807	Reported : 10/Jun/2023 05:43PM
Visit ID : CPIMOPV145257	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE40373	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	108	mg/dL	70-100	HEXOKINASE
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Comment:

As per American Diabetes Guidelines

Fasting Glucose Values in mg/d L	Interpretation
<100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes



Patient Name : Mr.SABIR ALTAFALI SAYYED	Collected : 10/Jun/2023 01:12PM
Age/Gender : 33 Y 1 M 3 D/M	Received : 10/Jun/2023 06:22PM
UHID/MR No : CPIM.0000110807	Reported : 10/Jun/2023 06:37PM
Visit ID : CPIMOPV145257	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE40373	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA	112	mg/dL	70-140	HEXOKINASE
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Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other.

Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.

Ref: Marks medical biochemistry and clinical approach



Patient Name : Mr.SABIR ALTAFALI SAYYED	Collected : 10/Jun/2023 10:41AM
Age/Gender : 33 Y 1 M 3 D/M	Received : 10/Jun/2023 04:17PM
UHID/MR No : CPIM.0000110807	Reported : 10/Jun/2023 05:07PM
Visit ID : CPIMOPV145257	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE40373	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.2	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	103	mg/dL		Calculated

Comment:

Reference Range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS >18 YEARS	<5.7
AT RISK (PREDIABETES)	5.7 – 6.4
DIAGNOSING DIABETES	≥ 6.5
DIABETICS	
• EXCELLENT CONTROL	6 – 7
• FAIR TO GOOD CONTROL	7 – 8
• UNSATISFACTORY CONTROL	8 – 10
• POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

- A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
- Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
- Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present. Fructosamine may be used as an alternate measurement of glycemic control



Patient Name : Mr.SABIR ALTAFALI SAYYED	Collected : 10/Jun/2023 10:41AM
Age/Gender : 33 Y 1 M 3 D/M	Received : 10/Jun/2023 04:12PM
UHID/MR No : CPIM.0000110807	Reported : 10/Jun/2023 05:24PM
Visit ID : CPIMOPV145257	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE40373	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	126	mg/dL	<200	CHO-POD
TRIGLYCERIDES	42	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	57	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	69	mg/dL	<130	Calculated
LDL CHOLESTEROL	60.49	mg/dL	<100	Calculated
VLDL CHOLESTEROL	8.49	mg/dL	<30	Calculated
CHOL / HDL RATIO	2.21		0-4.97	Calculated

Comment:

Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220

Measurements in the same patient can show physiological and analytical variations.

NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.



Patient Name : Mr.SABIR ALTAFALI SAYYED	Collected : 10/Jun/2023 10:41AM
Age/Gender : 33 Y 1 M 3 D/M	Received : 10/Jun/2023 04:12PM
UHID/MR No : CPIM.0000110807	Reported : 10/Jun/2023 05:24PM
Visit ID : CPIMOPV145257	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE40373	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.61	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.14	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.47	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	26.16	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	26.4	U/L	<50	IFCC
ALKALINE PHOSPHATASE	62.66	U/L	30-120	IFCC
PROTEIN, TOTAL	7.79	g/dL	6.6-8.3	Biuret
ALBUMIN	4.48	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.31	g/dL	2.0-3.5	Calculated
A/G RATIO	1.35		0.9-2.0	Calculated

SIN No: SE04393021



Patient Name	: Mr.SABIR ALTAFALI SAYYED	Collected	: 10/Jun/2023 10:41AM
Age/Gender	: 33 Y 1 M 3 D/M	Received	: 10/Jun/2023 04:12PM
UHID/MR No	: CPIM.0000110807	Reported	: 10/Jun/2023 05:24PM
Visit ID	: CPIMOPV145257	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bobE40373		

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
Test Name	Result	Unit	Bio. Ref. Range	Method
CREATININE	0.94	mg/dL	0.72 – 1.18	Modified Jaffe, Kinetic
UREA	41.14	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	19.2	mg/dL	8.0 - 23.0	Calculated
URIC ACID	7.27	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	10.05	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	2.31	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	143.28	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.3	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	102.44	mmol/L	101–109	ISE (Indirect)

SIN No SE04393021



Patient Name	: Mr.SABIR ALTAFALI SAYYED	Collected	: 10/Jun/2023 10:41AM
Age/Gender	: 33 Y 1 M 3 D/M	Received	: 10/Jun/2023 04:12PM
UHID/MR No	: CPIM.0000110807	Reported	: 10/Jun/2023 05:24PM
Visit ID	: CPIMOPV145257	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bobE40373		

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	10.29	U/L	<55	IFCC



Patient Name : Mr.SABIR ALTAFALI SAYYED	Collected : 10/Jun/2023 10:41AM
Age/Gender : 33 Y 1 M 3 D/M	Received : 10/Jun/2023 04:13PM
UHID/MR No : CPIM.0000110807	Reported : 10/Jun/2023 05:18PM
Visit ID : CPIMOPV145257	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE40373	

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	1.28	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	7.20	µg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	2.046	µIU/mL	0.34-5.60	CLIA

Comment:

Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night and the nadir occurring between 10 a.m. and 4 p.m. In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels will be elevated. In primary hyperthyroidism, TSH levels will be low. Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroid-ism, respectively. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

Note:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 - 3.0
Third trimester	0.3 - 3.0



Patient Name	: Mr.SABIR ALTAFALI SAYYED	Collected	: 10/Jun/2023 10:41AM
Age/Gender	: 33 Y 1 M 3 D/M	Received	: 10/Jun/2023 05:04PM
UHID/MR No	: CPIM.0000110807	Reported	: 10/Jun/2023 05:31PM
Visit ID	: CPIMOPV145257	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bobE40373		

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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COMPLETE URINE EXAMINATION (CUE) , URINE

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	5.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	>1.025		1.002-1.030	Bromothymol Blue

BIOCHEMICAL EXAMINATION

URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

PUS CELLS	2 - 3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1 - 2	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY




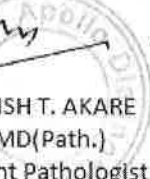
Patient Name : Mr.SABIR ALTAFALI SAYYED	Collected : 10/Jun/2023 10:41AM
Age/Gender : 33 Y 1 M 3 D/M	Received : 10/Jun/2023 05:04PM
UHID/MR No : CPIM.0000110807	Reported : 10/Jun/2023 05:37PM
Visit ID : CPIMOPV145257	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE40373	

DEPARTMENT OF CLINICAL PATHOLOGY


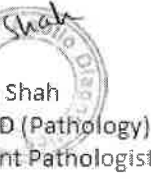
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	Dipstick
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	Dipstick

*** End Of Report ***

DR. MANISH T. AKARE
M.B.B.S, MD(Path.)
Consultant Pathologist

Dr Sneha Shah
MBBS, MD (Pathology)
Consultant Pathologist




Dr. Sanjay Ingle
M.B.B.S, MD(Pathology)
Consultant Pathologist



Patient Name : Mr. SABIR ALTAFALI SAYYED Age : 33 Y M
UHID : CPIM.0000110807 OP Visit No : CPIMOPV145257
Reported on : 10-06-2023 17:02 Printed on : 10-06-2023 18:33
Adm/Consult Doctor : Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Observation:-

Both lung fields are clear.

Both C-P angles are clear.

Cardiac size appear normal.

Hila and pulmonary vessels are within normal limits.

Both the domes of diaphragm are normal.

Thoracic cage and soft tissues are within normal limits.

Impression

Study is within normal limits.

Printed on:10-06-2023 17:02

---End of the Report---



Dr. KIRAN PRALHAD SUDHARE
MBBS, DMRD
Radiology

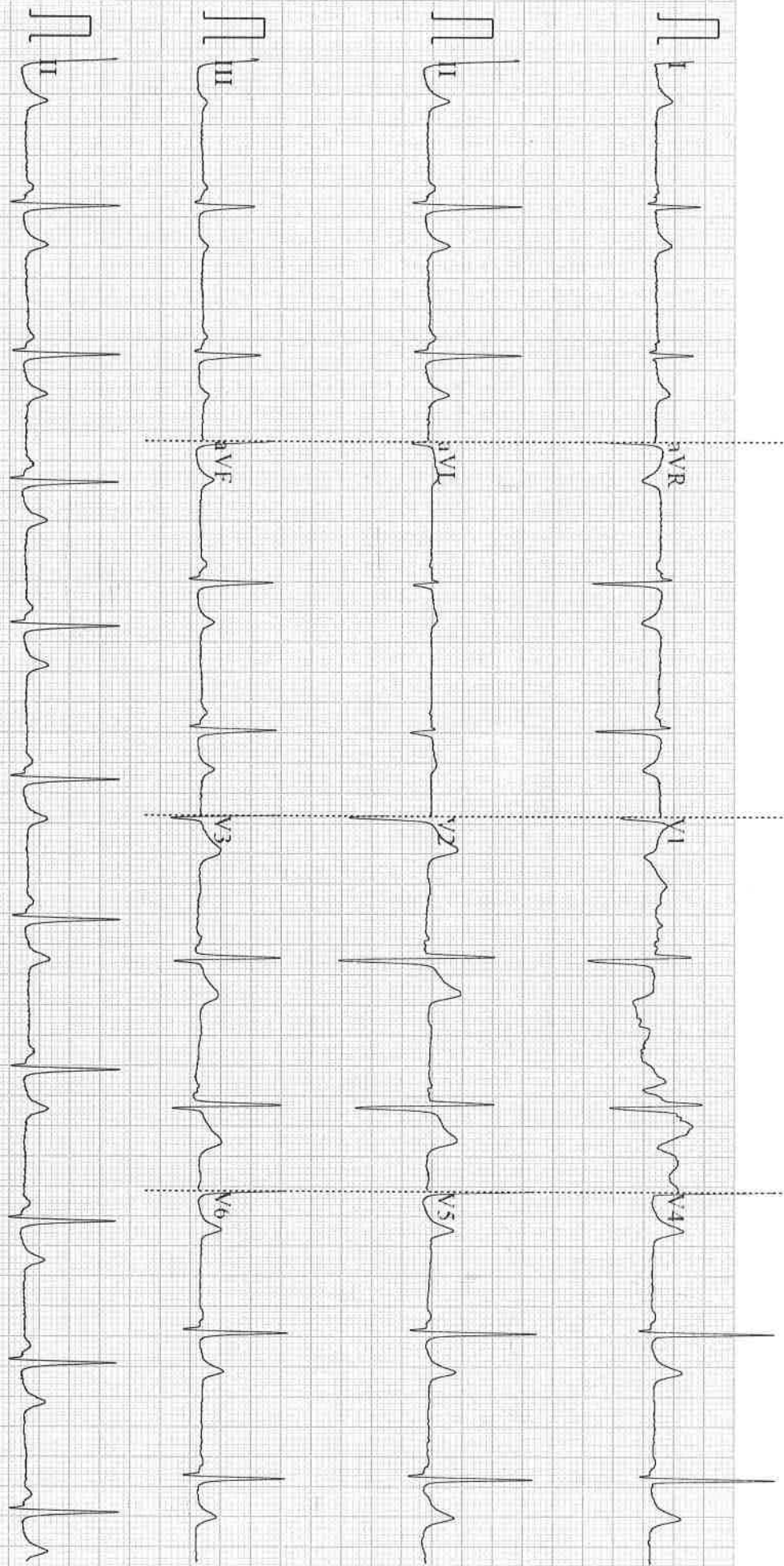
ID: 104
MR SABIR SAYYED
Male 33Years

10-06-2023 11:16:08 AM
HR : 61 bpm
P : 102 ms
PR : 132 ms
QRS : 91 ms
QT/QTc : 381/384 ms
P/QRS/T : 72/71/41 °
RV5/SV1 : 1.783/1.001 mV

Diagnosis Information:
Sinus Rhythm
Excessive Overload of Left Atrium



Report Confirmed by:



2 D ECHOCARDIOGRAPHY & COLOUR DOPPLER STUDY

Patient's Name: MR. SABIR SAYYED	Age/Sex: 33 / M
Ref: ARCOFEMI	Date: 10/06/2023

2 DIMENSIONAL ECHOCARDIOGRAPHY:

1. All cardiac chambers are normal in dimensions
2. No LV regional wall motion abnormalities at rest
3. LVEF = 60 %
4. Good RV function
5. All cardiac valves structurally normal
6. IAS / IVS intact
7. No clots / vegetation/ pericardial effusion seen on TTE
8. Great arteries are normally related & appear normal
9. IVC is normal in size & collapsing well with respiration

DOPPLER STUDIES (CONTINUOUS WAVE, PULSED WAVE, COLOR DOPPLER):

1. Normal transvalvular pressure gradients, No AR/MR, Mild TR
2. No LV diastolic dysfunction
3. No pulmonary hypertension
4. No intracardiac or extracardiac shunt noted

DIMENSIONS (M-MODE) :

Left Atrium	33.0 mm	Aortic Root	27.0 mm
IVS (d)	09.0 mm	IVS (s)	14.0 mm
LVID (d)	45.0 mm	LVID (s)	28.0 mm
LVPW(d)	09.0 mm	LVPW(s)	14.0 mm

IMPRESSION :

NORMAL CARDIAC CHAMBER DIMENSIONS

GOOD BIVENTRICULAR FUNCTION

LVEF = 60%

NO LV DIASTOLIC DYSFUNCTION

STRUCTURALLY NORMAL CARDIAC VALVES, MILD TR

NO PULMONARY HYPERTENSION

IAS/IVS INTACT

NO CLOT/VEGETATION/PERICARDIAL EFFUSION



DR. RAJENDRA V. CHAVAN
MD (MEDICINE), DM (CARDIOLOGY)
CONSULTANT CARDIOLOGIST

Apollo Clinic,
Nigdi, Pune - 411044.

Date - 10.06.23

Patient Name Sabir Sayyed

UHID:

Age / Sex: 33 yr / M

EYE CHECK UP

COMPLETE

PREMEDICAL/OTHER

	RIGHT EYE	LEFT EYE
Far Vision	6/6	6/6
Near Vision	NG	NG
Anterior Segment Pupil	WNL	WNL
Color Vision	WNL	WNL
Family History/Medical History	N/A	N/A

plano BE

IMPRESSION:-


OPTOMETRIST

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

Regd. Office: 1- 10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet,
Hyderabad, Telangana - 500 016. Ph No: 040-4904 7777, Fax No: 4904 7744 | Email

ID: enquiry@apollohi.com | www.apollohi.com

APOLLO CLINICS NETWORK MAHARASHTRA

Pune (Aundh) | Kharadi | Nigdi Pradhikaran | Viman Nagar | Wanowrie)

Online appointment: www.apolloclinic.com

Date : 10-06-2023

Department : GENERAL

MR NO : CPIM.0000110807

Doctor :

Name : Mr. SABIR ALTAFALI SAYYED

Registration No :

Age/ Gender : 33 Y / Male

Qualification :

Consultation Timing: 10:39

Ht-162

wt-55.5

BP-110/80

Patient Name : Mr. SABIR ALTAFALI SAYYED Age : 33 Y/M
UHID : CPIM.0000110807 OP Visit No : CPIMOPV145257
Conducted By: : Conducted Date : 10-06-2023 11:55
Referred By : SELF

2 DIMENSIONAL ECHOCARDIOGRAPHY:

1. All cardiac chambers are normal in dimensions
2. No LV regional wall motion abnormalities at rest
3. LVEF = 60 %
4. Good RV function
5. All cardiac valves structurally normal
6. IAS / IVS intact
7. No clots / vegetation/ pericardial effusion seen on TTE
8. Great arteries are normally related & appear normal
9. IVC is normal in size & collapsing well with respiration

DOPPLER STUDIES (CONTINUOUS WAVE, PULSED WAVE, COLOR DOPPLER):

1. Normal transvalvular pressure gradients, No AR/MR, Mild TR
2. No LV diastolic dysfunction
3. No pulmonary hypertension
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DIMENSIONS (M-MODE) :

Left Atrium	33.0 mm	Aortic Root	27.0 mm
IVS (d)	09.0 mm	IVS (s)	14.0 mm
LVID (d)	45.0 mm	LVID (s)	28.0 mm
LVPW(d)	09.0 mm	LVPW(s)	14.0 mm

IMPRESSION :

NORMAL CARDIAC CHAMBER DIMENSIONS

GOOD BIVENTRICULAR FUNCTION

LVEF = 60%

NO LV DIASTOLIC DYSFUNCTION

STRUCTURALLY NORMAL CARDIAC VALVES, MILD TR

NO PULMONARY HYPERTENSION

IAS/IVS INTACT

NO CLOT/VEGETATION/PERICARDIAL EFFUSION

DR. RAJENDRA V. CHAVAN

MD (MEDICINE), DM (CARDIOLOGY)

CONSULTANT CARDIOLOGIST

Patient Name : Mr. SABIR ALTAFALI SAYYED
UHID : CPIM.0000110807
Conducted By: :
Referred By : SELF

Age : 33 Y/M
OP Visit No : CPIMOPV145257
Conducted Date :

Patient Name : Mr. SABIR ALTAFALI SAYYED
UHID : CPIM.0000110807
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