

58years
Male
Caucasian

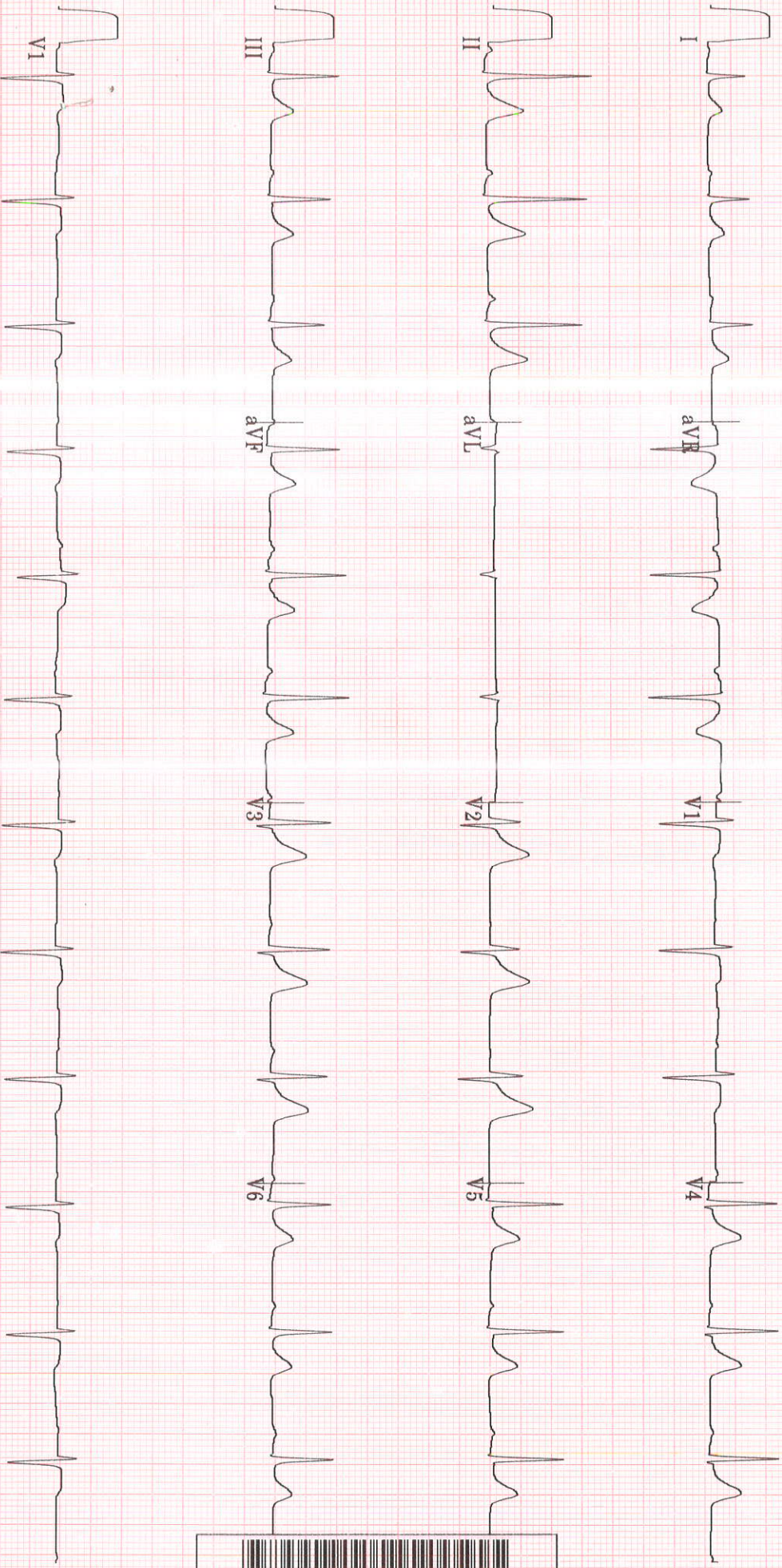
Vent. rate 73 bpm
PR interval 200 ms
QRS duration 70 ms
QT/QTc 348/383 ms
P-R-T axes 70 64 66

Normal sinus rhythm
Normal ECG

Technician:
Test ind:

Referred by:

Unconfirmed





TMT INVESTIGATION REPORT

Patient Name : SARJIT SINGH	Location : Ghaziabad
Age/Sex : 58Year(s)/male	Visit No : V0000000001-GHZB
MRN No 10618027	Order Date : 27/05/2023
Ref. Doctor : HCP	Report Date : 27/05/2023

Protocol : Bruce **MPHR** : 162BPM
Duration of exercise : 4min 19sec **85% of MPHR** : 137BPM
Reason for termination : Patient fatigue **Peak HR Achieved** : 138BPM
Blood Pressure (mmHg) : Baseline BP : 130/72mmHg **% Target HR** : 85%
Peak BP : 146/76mmHg **METS** : 6.1METS

STAGE	TIME (min)	H.R (bpm)	BP (mmHg)	SYMPTOMS	ECG CHANGES	ARRHYTHMIA
PRE- EXC.	0:00	79	130/72	Nil	No ST changes seen	Nil
STAGE 1	3:00	117	140/72	Nil	No ST changes seen	Nil
STAGE 2	1:19	138	146/76	Nil	No ST changes seen	Nil
RECOVERY	3:19	81	134/76	Nil	No ST changes seen	Nil

COMMENTS:

- No ST changes in base line ECG.
- No ST changes during test and recovery.
- Normal chronotropic response.
- Normal blood pressure response.
- Fair effort tolerance.

IMPRESSION:

Treadmill test is **negative** for exercise induced reversible myocardial ischemia.

Dr. Bhupendra SinghMD, DM (CARDIOLOGY),FACC
Sr. Consultant Cardiology**Dr. Abhishek Singh**MD, DNB (CARDIOLOGY),MNAMS
Sr. Consultant Cardiology**Dr. Sudhanshu Mishra**MD
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RADIOLOGY REPORT

Name : SARJIT SINGH Age : 58 Yr(s) Sex : Male
Registration No : MH010618027 Lab No : 202305003281
Patient Episode : H18000000591 Collection Date : 27 May 2023 09:44
Referred By : HEALTH CHECK MGD Reporting Date : 29 May 2023 12:30
Receiving Date : 27 May 2023 11:31

BLOOD BANK


TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Blood Group & Rh Typing (Agglutination by gel/tube technique)			Specimen-Blood
Blood Group & Rh typing	AB Rh(D) Positive		

Technical note:

ABO grouping and Rh typing is done by cell and serum grouping by microplate / gel technique.

Page 1 of 2

-----END OF REPORT-----


Dr. Alka Dixit Vats
Consultant Pathologist

RADIOLOGY REPORT

Name	: SARJIT SINGH	Age	: 58 Yr(s) Sex :Male
Registration No	: MH010618027	Lab No	: 202305003283
Patient Episode	: H18000000591	Collection Date	: 27 May 2023 14:59
Referred By	: HEALTH CHECK MGD	Reporting Date	: 29 May 2023 11:55
Receiving Date	: 27 May 2023 14:59		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
PLASMA GLUCOSE			
Specimen: Plasma			
GLUCOSE, POST PRANDIAL (PP), 2 HOURS	231.0 #	mg/dl	[80.0-140.0]

Method: Hexokinase

Note:

Conditions which can lead to lower postprandial glucose levels as compared to fasting glucose are excessive insulin release, rapid gastric emptying, brisk glucose absorption, post exercise

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-----END OF REPORT-----



Dr. Alka Dixit Vats
Consultant Pathologist

LABORATORY REPORT

Name : SARJIT SINGH Age : 58 Yr(s) Sex : Male
Registration No : MH010618027 Lab No : 202305003281
Patient Episode : H18000000591 Collection Date : 27 May 2023 11:31
Referred By : HEALTH CHECK MGD Reporting Date : 27 May 2023 12:44
Receiving Date : 27 May 2023 11:31

CLINICAL PATHOLOGY

ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

MACROSCOPIC DESCRIPTION

Colour	PALE YELLOW	(Pale Yellow - Yellow)
Appearance	CLEAR	
Reaction[pH]	7.0	(4.6-8.0)
Specific Gravity	1.005	(1.003-1.035)

CHEMICAL EXAMINATION

Protein/Albumin	Negative	(NEGATIVE)
Glucose	NIL	(NIL)
Ketone Bodies	Negative	(NEGATIVE)
Urobilinogen	Normal.	(NORMAL)

MICROSCOPIC EXAMINATION (Automated/Manual)

Pus Cells	1-2 /hpf	(0-5/hpf)
RBC	NIL	(0-2/hpf)
Epithelial Cells	NIL /hpf	
CASTS	NIL	
Crystals	NIL	
OTHERS	NIL	

Page 1 of 1

-----END OF REPORT-----


Dr. Alka Dixit Vats
Consultant Pathologist

RADIOLOGY REPORT

NAME	, SARJIT SINGH	STUDY DATE	27/05/2023 10:09AM
AGE / SEX	58 y / M	HOSPITAL NO.	MH010618027
ACCESSION NO.	R5592847	MODALITY	CR
REPORTED ON	27/05/2023 11:01AM	REFERRED BY	HEALTH CHECK MGD

X-RAY CHEST PA VIEW

FINDINGS

LUNGS: Normal
TRACHEA: Normal
CARINA: Normal
RIGHT AND LEFT MAIN BRONCHI: Normal
PLEURA: Normal
HEART: Normal
RIGHT HEART BORDER: Normal
LEFT HEART BORDER: Normal
PULMONARY BAY: Normal
PULMONARY HILA: Normal
AORTA: Normal
THORACIC SPINE: Normal
OTHER VISUALIZED BONES: Normal
VISUALIZED SOFT TISSUES: Normal
DIAPHRAGM: Normal
VISUALIZED ABDOMEN: Normal
VISUALIZED NECK: Normal

IMPRESSION

No significant abnormality seen.

Please correlate clinically

Srabhat

RADIOLOGY REPORT

NAME	, SARJIT SINGH	STUDY DATE	27/05/2023 10:09AM
AGE / SEX	58 y / M	HOSPITAL NO.	MH010618027
ACCESSION NO.	R5592847	MODALITY	CR
REPORTED ON	27/05/2023 11:01AM	REFERRED BY	HEALTH CHECK MGD

Dr. Prabhat Prakash Gupta MBBS, DNB, MNAMS (FRCR 2A)
CONSULTANT RADIOLOGIST

*****End Of Report*****

RADIOLOGY REPORT

NAME	, SARJIT SINGH	STUDY DATE	27/05/2023 11:33AM
AGE / SEX	58 y / M	HOSPITAL NO.	MH010618027
ACCESSION NO.	R5592848	MODALITY	US
REPORTED ON	27/05/2023 12:13PM	REFERRED BY	HEALTH CHECK MGD

USG ABDOMEN & PELVIS WITH PVR FINDINGS

LIVER: Liver is normal in size (measures 124 mm), shape but shows raised echogenicity suggesting grade I fatty changes. Rest normal.

SPLEEN: Spleen is normal in size (measures 77 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 9.6 mm.

COMMON BILE DUCT: Appears normal in size and measures 4.5 mm.

IVC, HEPATIC VEINS: Normal.

BILIARY SYSTEM: Normal.

GALL BLADDER: Gall bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.

PANCREAS: Pancreas is normal in size, shape and echotexture. Rest normal.

KIDNEYS: Bilateral kidneys are normal in size, shape and echotexture. Cortico-medullary differentiation is maintained. Rest normal.

Right Kidney: measures 102 x 41 mm.

Left Kidney: measures 105 x 51 mm. It shows a concretion measuring 3.3 mm at mid calyx.

PELVI-CALYCEAL SYSTEMS: Compact.

NODES: Not enlarged.

FLUID: Nil significant.

URINARY BLADDER: Urinary bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.

Pre-void urine volume 423 cc.

Post-void residual urine volume 15cc (Insignificant).

PROSTATE: Prostate is enlarged in size (measures 57 x 33 x 30 mm with volume 31 cc) but normal in shape and echotexture. Rest normal.

SEMINAL VESICLES: Normal.

BOWEL: Visualized bowel loops appear normal.

IMPRESSION

- Grade I fatty liver
- Left renal concretion.
- Prostatomegaly.

Recommend clinical correlation.

Prabhat

Dr. Prabhat Prakash Gupta MBBS, DNB, MNAMS (FRCR 2A)
CONSULTANT RADIOLOGIST

*****End Of Report*****

LABORATORY REPORT

Name : SARJIT SINGH Age : 58 Yr(s) Sex : Male
 Registration No : MH010618027 Lab No : 32230509527
 Patient Episode : H1800000591 Collection Date : 27 May 2023 13:40
 Referred By : HEALTH CHECK MGD Reporting Date : 27 May 2023 15:20
 Receiving Date : 27 May 2023 13:54

BIOCHEMISTRY

TEST RESULT UNIT BIOLOGICAL REFERENCE INTERVAL

Specimen Type : Serum

THYROID PROFILE, Serum

T3 - Triiodothyronine (ECLIA)	1.35	ng/ml	[0.70-2.04]
T4 - Thyroxine (ECLIA)	7.93	µg/dl	[4.60-12.00]
Thyroid Stimulating Hormone (ECLIA)	3.000	µIU/mL	[0.340-4.250]

Note : TSH levels are subject to circadian variation, reaching peak levels between 2-4.a.m.and at a minimum between 6-10 pm.Factors such as change of seasons hormonal fluctuations,Ca or Fe supplements,high fibre diet,stress and illness affect TSH results.

* References ranges recommended by the American Thyroid Association

1) Thyroid. 2011 Oct;21(10):1081-125.PMID .21787128

2) <http://www.thyroid-info.com/articles/tsh-fluctuating.html>

Test Name	Result	Unit	Biological Ref. Interval
TOTAL PSA, Serum (ECLIA)	59.390 #	ng/mL	[<3.500]

Note : PSA is a glycoprotein that is produced by the prostate gland. Normally, very little PSA is secreted in the blood. Increases in glandular size and tissue damage caused by BPH, prostatitis, or prostate cancer may increase circulating PSA levels.

Caution : Serum markers are not specific for malignancy, and values may vary by method.

Immediate PSA testing following digital rectal examination, ejaculation, prostate massage urethral instrumentation, prostate biopsy may increase PSA levels.

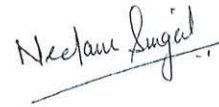
Name	: SARJIT SINGH	LABORATORY REPORT	Age	: 58 Yr(s)	Sex	: Male
Registration No	: MH010618027		Lab No	: 32230509527		
Patient Episode	: H1800000591		Collection Date	: 27 May 2023 13:40		
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BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Some patients who have been exposed to animal antigens, may have circulating anti-animal antibodies present. These antibodies may interfere with the assay reagents to produce unreliable results.			

Page 2 of 9

-----END OF REPORT-----



Dr. Neelam Singal
CONSULTANT BIOCHEMISTRY

LABORATORY REPORT

Name : SARJIT SINGH Age : 58 Yr(s) Sex : Male
 Registration No : MH010618027 Lab No : 202305003281
 Patient Episode : H18000000591 Collection Date : 27 May 2023 09:44
 Referred By : HEALTH CHECK MGD Reporting Date : 27 May 2023 11:42
 Receiving Date : 27 May 2023 11:31

HAEMATOLOGY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
COMPLETE BLOOD COUNT (AUTOMATED)			
SPECIMEN-EDTA Whole Blood			
RBC COUNT (IMPEDEANCE)	4.40 #	millions/cumm	[4.50-5.50]
HEMOGLOBIN	13.2	g/dl	[12.0-16.0]
Method:cyanide free SLS-colorimetry			
HEMATOCRIT (CALCULATED)	40.7	%	[40.0-50.0]
MCV (DERIVED)	92.5	fL	[83.0-101.0]
MCH (CALCULATED)	30.0	pg	[27.0-32.0]
MCHC (CALCULATED)	32.4	g/dl	[31.5-34.5]
RDW CV% (DERIVED)	13.5	%	[11.6-14.0]
Platelet count	228	x 10 ³ cells/cumm	[150-400]
MPV (DERIVED)	12.7		
WBC COUNT (TC) (IMPEDEANCE)	6.30	x 10 ³ cells/cumm	[4.00-10.00]
DIFFERENTIAL COUNT (VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	50.0	%	[40.0-80.0]
Lymphocytes	40.0	%	[17.0-45.0]
Monocytes	7.0	%	[2.0-10.0]
Eosinophils	3.0	%	[2.0-7.0]
Basophils	0.0	%	[0.0-2.0]
ESR	12.0	mm/1sthour	[0.0-

LABORATORY REPORT

Name : SARJIT SINGH Age : 58 Yr(s) Sex : Male
 Registration No : MH010618027 Lab No : 202305003281
 Patient Episode : H18000000591 Collection Date : 27 May 2023 11:31
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CLINICAL PATHOLOGY

ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

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Appearance	CLEAR	
Reaction[pH]	7.0	(4.6-8.0)
Specific Gravity	1.005	(1.003-1.035)

CHEMICAL EXAMINATION

Protein/Albumin	Negative	(NEGATIVE)
Glucose	NIL	(NIL)
Ketone Bodies	Negative	(NEGATIVE)
Urobilinogen	Normal	(NORMAL)

MICROSCOPIC EXAMINATION (Automated/Manual)

Pus Cells	1-2 /hpf	(0-5/hpf)
RBC	NIL	(0-2/hpf)
Epithelial Cells	NIL /hpf	
CASTS	NIL	
Crystals	NIL	
OTHERS	NIL	

LABORATORY REPORT

Name : SARJIT SINGH Age : 58 Yr(s) Sex : Male
 Registration No : MH010618027 Lab No : 202305003281
 Patient Episode : H18000000591 Collection Date : 27 May 2023 09:44
 Referred By : HEALTH CHECK MGD Reporting Date : 27 May 2023 12:43
 Receiving Date : 27 May 2023 11:31

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Glycosylated Hemoglobin			
Specimen: EDTA			
HbA1c (Glycosylated Hemoglobin)	7.3 #	%	[0.0-5.6]
Method: HPLC			
As per American Diabetes Association (ADA)			
HbA1c in %			
Non diabetic adults >= 18years <5.7			
Prediabetes (At Risk)5.7-6.4			
Diagnosing Diabetes >= 6.5			
Estimated Average Glucose (eAG)	163	mg/dl	

Comments : HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long term glycemic control.

Serum LIPID PROFILE

Serum TOTAL CHOLESTEROL	156	mg/dl	<200 Moderate risk:200-239 High risk:>240
TRIGLYCERIDES (GPO/POD)	159 #	mg/dl	[<150] Borderline high:151-199 High: 200 - 499 Very high:>500
HDL- CHOLESTEROL	41.0	mg/dl	[35.0-65.0]
Method : Enzymatic Immunoimhibition			
VLDL- CHOLESTEROL (Calculated)	32	mg/dl	[0-35]
CHOLESTEROL, LDL, CALCULATED	83.0	mg/dl	[<120.0]
Near/			
Borderline High:130-159			
High Risk:160-189			

Above optimal-100-129

LABORATORY REPORT

Name : SARJIT SINGH Age : 58 Yr(s) Sex : Male
 Registration No : MH010618027 Lab No : 202305003281
 Patient Episode : H18000000591 Collection Date : 27 May 2023 09:44
 Referred By : HEALTH CHECK MGD Reporting Date : 27 May 2023 12:43
 Receiving Date : 27 May 2023 11:31

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
T.Chol/HDL.Chol ratio(Calculated)	3.8		<4.0 Optimal 4.0-5.0 Borderline >6 High Risk
LDL.CHOL/HDL.CHOL Ratio(Calculated)	2.0		<3 Optimal 3-4 Borderline >6 High Risk

Note:
 Reference ranges based on ATP III Classifications.

KIDNEY PROFILE

Specimen: Serum

UREA Method: GLDH, Kinatic assay	20.8	mg/dl	[15.0-40.0]
BUN, BLOOD UREA NITROGEN Method: Calculated	9.7	mg/dl	[8.0-20.0]
CREATININE, SERUM Method: Jaffe rate-IDMS Standardization	1.05	mg/dl	[0.70-1.20]
URIC ACID Method:uricase PAP	6.5	mg/dl	[4.0-8.5]
SODIUM, SERUM	136.20	mmol/L	[136.00-144.00]
POTASSIUM, SERUM	4.65	mmol/L	[3.60-5.10]
SERUM CHLORIDE Method: ISE Indirect	102.2	mmol/l	[101.0-111.0]
eGFR (calculated) Technical Note	77.9	ml/min/1.73sq.m	[>60.0]

eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to 1.73 sq.m BSA and is not applicable to individuals below 18 years.

LABORATORY REPORT

Name	: SARJIT SINGH	Age	: 58 Yr(s) Sex : Male
Registration No	: MH010618027	Lab No	: 202305003281
Patient Episode	: H18000000591	Collection Date	: 27 May 2023 09:44
Referred By	: HEALTH CHECK MGD	Reporting Date	: 27 May 2023 12:42
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BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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eGFR tends to be less accurate when Serum Creatinine estimation is indeterminate e.g. patients at extremes of muscle mass, on unusual diets etc. and samples with severe Hemolysis Icterus / Lipemia.

LIVER FUNCTION TEST

BILIRUBIN - TOTAL <i>Method: D P D</i>	0.54	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT <i>Method: DPD</i>	0.11	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN (SERUM) <i>Method: Calculation</i>	0.43	mg/dl	[0.10-0.90]
TOTAL PROTEINS (SERUM) <i>Method: BIURET</i>	8.00	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) <i>Method: BCG</i>	4.57	g/dl	[3.50-5.20]
GLOBULINS (SERUM) <i>Method: Calculation</i>	3.40	gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO <i>Method: Calculation</i>	1.33		[1.00-2.50]
AST (SGOT) (SERUM) <i>Method: IFCC W/O P5P</i>	35.00	U/L	[0.00-40.00]
ALT (SGPT) (SERUM) <i>Method: IFCC W/O P5P</i>	51.90	U/L	[17.00-63.00]
Serum Alkaline Phosphatase <i>Method: AMP BUFFER IFCC</i>	84.0	IU/L	[32.0-91.0]