

Patient Name:-	RAHUL RANAKOTI	Date :-	11/02/2023
Age & Sex :-	32Y M		
Referred By :-	HEALTH CHECK UP		

**X-RAY CHEST PA VIEW**

Both lung zones are clear

Cardiac silhouette is normal.

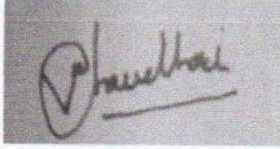
Both costophrenic angles clear.

Both domes of diaphragm are at normal level.

Bony thorax is unremarkable.

Impression -No significant abnormality detected in present study.

Please correlate with clinical findings and relevant investigations.



**Dr. Vivek Chaudhari**  
D.M.R.E.  
Consultant Radiologist



**Patient Name :** MR. RAHUL RANAKOTI

**Age / Gender :** 32 years / Male

**Patient ID :** 19362

**Source :** Sardar Patel Hospital (OPD)

**Referral :** Dr Mediwheel Full body Health Checkup

**Collection Time :** 11/02/2023, 08:34 AM

**Reporting Time :** 11/02/2023, 10:41 AM

**Sample ID :**



Test Description	Value(s)	Reference Range	Unit(s)
<b>CBC</b>			
Hemoglobin (Hb)* Method : Cymmeth Photometric Measurement	14.2	13.5 - 18.0	gm/dL
Erythrocyte (RBC) Count* Method : Electrical Impedence	4.70	4.7 - 6.0	mil/cu.mm
Packed Cell Volume (PCV)* Method : Calculated	40.5	42 - 52	%
Mean Cell Volume (MCV)* Method : Electrical Impedence	86.17	78 - 100	fL
Mean Cell Haemoglobin (MCH)* Method : Calculated	30.21	27 - 31	pg
Mean Corpuscular Hb Concn. (MCHC)* Method : Calculated	35.06	32 - 36	gm/dL
Red Cell Distribution Width (RDW)* Method : Electrical Impedence	12.3	11.5 - 14.0	%
Total Leucocytes (WBC) Count* Method : Electrical Impedence	4790	4000-10000	cell/cu.mm
Neutrophils* Method : VCSn Technology	51	40 - 80	%
Lymphocytes* Method : VCSn Technology	39	20 - 40	%
Monocytes* Method : VCSn Technology	07	2 - 10	%
Eosinophils* Method : VCSn Technology	03	1 - 6	%
Basophils Method : VCSn Technology	00	0 - 4	%
Platelet Count* Method : Electrical Impedence	150	150 - 450	10 <sup>3</sup> /ul

**E.S.R**

throcyte Sedimentation Rate Method : EDTA Whole blood, modified westerngren	30	<15	mm/hr
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**Interpretation:**

It indicates presence and intensity of an inflammatory process. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, acute rheumatic fever,. It is also increased in multiple myeloma, hypothyroidism.

**\*\*END OF REPORT\*\***

*B. Dholiya*

**Dr. Bhavika Dholiya**  
M. D. Pathology  
Registration No: G-32571



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**Collection Time :** 11/02/2023, 08:34 AM

**Reporting Time :** 11/02/2023, 09:54 AM

**Sample ID :**



001004223

Test Description	Value(s)	Reference Range	Unit(s)
<b>RENAL PROFILE</b>			
Urea *	17.7	17- 55 mg/dL	mg/dL
Method : Serum, Urease			
Creatinine*	0.86	0.6 - 1.4 mg/dl	mg/dL
Method : Serum, Enzymatic			
Uric Acid*	7.0	3.5 - 7.2	mg/dL
Method : Serum, Uricase/POD			
Blood Urea Nitrogen-BUN*	8.27	7 - 25 mg/dL	mg/dL
Method : Calculated			
Calcium*	10.58	8.8 - 10.6	mg/dL
Method : Arsenazo III			
Sodium*	138.7	136 - 146	mmol/L
Method : Serum, Indirect ISE			
Potassium*	4.70	3.5 - 5.1	mmol/L
Method : Serum, Indirect ISE			
Chloride*	98.4	97.0 - 108.0	mmol/L
Method : Serum, Indirect ISE			
<b>LIVER FUNCTION TEST-1</b>			
Bilirubin - Total	0.65	0.3 - 1.2	mg/dL
Method : Diazotization			
Bilirubin - Direct	0.32	Adults and Children: 0.0 - 0.4	mg/dL
Method : Serum, Diazotization			
Bilirubin - Indirect	0.33		
Method : Calculated			
SGOT	38.8	< 50	U/L
Method : Serum, UV without P5P			
SGPT	36.9	< 50	U/L
Method : Serum, UV without P5P			
Alkaline Phosphatase-ALPI	68.0	30-120	U/L
Method : Serum, PNPP, AMP Buffer, IFCC 37 degree			
tal Protein	7.43	6.6 - 8.3	g/dL
Method : Serum, Biuret, reagent blank end point			
Albumin	4.48	Adults: 3.5 - 5.2	g/dL
Method : Serum, Bromocresol green			
Globulin	2.95	1.8 - 3.6	g/dL
Method : Calculated			
A/G Ratio	1.52	1.2 - 2.2	ratio
Method : Calculated			

**\*\*END OF REPORT\*\***

*Bholya*

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**Sample ID :**



Test Description	Value(s)	Reference Range	Unit(s)
<b>LIPID PROFILE (D)</b>			
Cholesterol-Total Method : Serum, Cholesterol oxidase esterase, peroxidase	213.0	Desirable: <= 200 Borderline High: 201-239 High: > 239	mg/dL
Triglycerides Method : Serum, Enzymatic, endpoint	204.6	Normal: < 150 Borderline High: 150-199 High: 200-499 Very High: >= 500	mg/dL
Cholesterol-HDL Direct Method : Serum, Direct measure-PEG	45.5	Normal: > 40 Major Heart Risk: < 40	mg/dL
LDL Cholesterol Method : Calculated	126.58	Optimal: < 100 Near optimal/above optimal: 100-129 Borderline high: 130-159 High: 160-189 Very High: >= 190	mg/dL
Non - HDL Cholesterol, Serum Method : calculated	167.50	Desirable: < 130 mg/dL Borderline High: 130-159mg/dL High: 160-189 mg/dL Very High: > or = 190 mg/dL	mg/dL
VLDL Cholesterol Method : calculated	40.92	6 - 38	mg/dL
CHOL/HDL RATIO Method : calculated	4.68	3.5 - 5.0	ratio
LDL/HDL RATIO Method : calculated	2.78	Desirable / low risk - 0.5 -3.0 Low/ Moderate risk - 3.0- 6.0 Elevated / High risk - > 6.0	ratio
HDL/LDL RATIO Method : calculated	0.36	Desirable / low risk - 0.5 -3.0 Low/ Moderate risk - 3.0- 6.0 Elevated / High risk - > 6.0	ratio

**Note:** 8-10 hours fasting sample is required. Test results may show interferences due to pregnancy, certain drugs such as estrogens and other drugs(such as androgenic and related steroids), and insulin therapy etc. 12 hours fast is recommended prior to the test as non fasting status may result in falsely elevated test values. Alcohol should not be consumed for atleast 24 hours before the test. Values may be increased in acute illness, colds or flu. Obesity, stress, physical inactivity, cigarette smoking may lead to increase test values. If possible all medications should be withheld for atleast 24 hours before testing(On Doctors Advice). Intraindividual variations, seasonal as well as positional variations(levels lower when sitting compared to standing etc.)have been observed. Cholesterol and HDL-C should not be measured immediately after MI, and 3 months wait is suggested.

**\*\*END OF REPORT\*\***

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Test Description	Value(s)	Reference Range	Unit(s)
<b>THYROID FUNCTION TEST 1</b>			
T3-Total Method : Serum, CLIA	1.30	0.69 - 2.15 ng/mL	ng/mL
T4-Total Method : Serum, CLIA	6.87	5.2 - 12.7 ug/dL	ug/dL
TSH Method : Serum, CLIA	4.50	0.3 - 4.5 uIU/mL	uIU/mL

**Interpretation**

**BLOOD GROUP & RH (D) FACTOR, EDTA WHOLE BLOOD**

Blood Group Method : Forward and Reverse By Tube Method	"A"
RH Factor	Positive

**Methodology**

This is done by forward and reverse grouping by tube Agglutination method.

**Interpretation**

Newborn baby does not produce ABO antibodies until 3 to 6 months of age. So the blood group of the Newborn baby is done by ABO antigen grouping (forward grouping) only, antibody grouping (reverse grouping) is not required. Confirmation of the New-born's blood group is indicated when the A and B antigen expression and the isoagglutinins are fully developed (2-4 years).

**\*\*END OF REPORT\*\***

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Test Description	Value(s)	Reference Range	Unit(s)
<b><u>BLOOD GLUCOSE FASTING (FBS)</u></b>			
Glucose fasting Method : Fluoride Plasma-F, Hexokinase	101.5	Normal: 70 - 99 Impaired Tolerance: 100-125 Diabetes mellitus: $\geq 126$ (on more than one occasion) (American diabetes association guidelines 2018)	mg/dL
Urine Fasting	Absent		
Urine Ketones	-		
<b><u>BLOOD GLUCOSE POST PRANDIAL (PP2BS)</u></b>			
Blood Glucose-Post Prandial Method : Hexokinase	97.7	70 - 140	mg/dL
Urine Post Prandial	Absent		
<b><u>GLYCOSYLATED HB (HBA1C)</u></b>			
Glyco Hb (HbA1C)	5.2	Non-Diabetic: $\leq 5.6$ Pre Diabetic: 5.7-6.4 Diabetic: $\geq 6.5$	%
Estimated Average Glucose :	102.54		mg/dL
<b>Interpretations</b>			
1. HbA1C has been endorsed by clinical groups and American Diabetes Association guidelines 2017 for diagnosing diabetes using a cut off point of 6.5%			
2. Low glycated haemoglobin in a non diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency and haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.			
3. In known diabetic patients, following values can be considered as a tool for monitoring the glycemc control.			
Excellent control-6-7 %			
Fair to Good control - 7-8 %			
Unsatisfactory control - 8 to 10 %			
Poor Control - More than 10 %			

**\*\*END OF REPORT\*\***

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Test Description	Value(s)	Reference Range	Unit(s)
<b>URINE ROUTINE</b>			ml
Volume*	20	ml -	
Colour*	Pale Yellow	Pale Yellow	
Transparency (Appearance)*	Clear	Clear	
Deposit*	Absent	Absent	
Reaction (pH)*	6.5	4.5 - 8	
Specific Gravity*	1.005	1.010 - 1.030	
<b>Chemical Examination (Automated Dipstick Method) Urine</b>			
Urine Glucose (sugar)*	Absent	Absent	
Urine Protein (Albumin)*	Absent	Absent	
Urine Ketones (Acetone)*	Absent	Absent	
Blood*	Absent	Absent	
Bile pigments*	Absent	Absent	
Nitrite*	Absent	Absent	
<b>Microscopic Examination Urine</b>			
Pus Cells (WBCs)*	Absent	0 - 5	/hpf
Epithelial Cells*	Occasional	0 - 4	/hpf
Red blood Cells*	Absent	Absent	/hpf
Crystals*	Absent	Absent	
Cast*	Absent	Absent	
Trichomonas Vaginalis*	Absent	Absent	
Yeast Cells*	Absent	Absent	
Amorphous deposits*	Absent	Absent	
Bacteria*	Absent	Absent	

\*\*END OF REPORT\*\*

*Bholya*

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M. D. Pathology  
Registration No: G-32571





18 FEB 2023  
S/B Dr. Vivek Gupta  
MD Medicine



SARDAR  
PATEL HOSPITAL  
& HEART INSTITUTE

Name: Rahul. Ranakoti

Date: 18/2/23

Age: 32 Sex: M

No C/o

No pills any major illness.

Rx s/o ↑Tg & LDL

Adv:-

Slp Covid-19  
Vaccinated

Tab. Torvacon-F  
(10/160)

DOT

30

Q  
P- 67/min  
BP- 130/80

SpO<sub>2</sub> 99%

Cvs S/S @  
Normal

R/S → Clear

PIA Suf 1BS @



**OPD INITIAL ASSESSMENT FORM**

(To be filled by Nursing Staff)

Patient Name: - Rahul Ramakoti UHID Number: - 2024

Consultant Name: DR. Kalpesh Date: 18/2/23 Start Time: - \_\_\_\_\_ Age: - 32 (Years)

Sex: - M (M/F) Vadodariya

Height: - \_\_\_\_\_ cms, Weight: - \_\_\_\_\_ kgs. Temp. \_\_\_\_\_, Pulse: - \_\_\_\_\_ (Per minute), SPO2 \_\_\_\_\_

B.P. :- \_\_\_\_\_ (mm of Hg), RBS:- \_\_\_\_\_ First Visit / Follow Up

Visit: First visit (Perk)

Nursing Staff Name & Signature: - Sudhu End Time:- \_\_\_\_\_

**Past History: - (TICK MARK)**

Diabetes, Hypertension, IHD, COPD, Asthma, TB, Smoker, Alcoholic, Hypothyroidism

Other:-

Family History:-

Nutritional Screening:-

Psychosocial Assessment:-

Immunization Status:-

To be filled by Clinician) Start Time:- \_\_\_\_\_

Clinical Findings:-

Diagnosis:-

Investigations and Advice:-







11.07.2023 10:32:58  
SARC PATEL HOSPITAL  
CHIKUWADI  
ANKLESHWAR

Room:

71 bpm  
-- / -- mmHg

Or Location:  
Number:  
Visit:  
Indication:  
Medication 1:  
Medication 2:  
Medication 3:

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

QRS : 86 ms  
QT / QTcBaz : 362 / 393 ms  
PR : 126 ms  
P : 92 ms  
RR / PP : 844 / 845 ms  
P / QRS / T : 54 / 60 / 56 degrees

Normal sinus rhythm  
Normal ECG

