



Patient Details

IJHID : AFD000015585
Patient Name : MR. VIKAS MEHRA
Age / Gender : 54 Yrs 8 Mth / MALE / 01-02-1968
Company : Acrofemi Healthcare Ltd
Address : 260 2ND FLOOR I P COLONY, FARIDABAD, HARYANA, INDIA, Zip No.-121003

Bill Date : 08-10-2022 09:51:33
Bill No. : AFDHC220000568
Receipt No. : AFDPRT220026739

Service Details

S. No.	Investigation	Rooms	Remarks
1	MEDIWHEEL PKG FOR MALE ABOVE 40YRS SELF		
2	CBC-T (COMPLETE BLOOD COUNT)		
3	ESR		
4	URINE, ROUTINE EXAMINATION		
5	STOOL ROUTINE EXAMINATION		
6	BLOOD GROUP (ABO & RH)		
7	GLUCOSE PLASMA (FASTING)		
8	GLUCOSE PLASMA (PP) POST PRANDIAL		12:40
9	GLYCATED HAEMOGLOBIN (HBA1C)		
10	THYROID PROFILE (FT3+FT4+TSH)		
11	LIPID PROFILE		
12	KFT/RFT-KIDNEY/RENAL PANEL 1		
13	LIVER FUNCTION TESTS (LFT)		
14	ECG		
15	2D ECHO DR. MITHILESH KUMAR		
16	TMT DR. MITHILESH KUMAR		
17	XRAY-CHEST P.A.		
18	USG-FOR WHOLE ABDOMEN		
19	OPD Consultation-Internal Medicine DR. MUKUND SINGH		
20	OPD Consultation-Dental DR. RAVJOT AHUJA		
21	OPD Consultation-Ophthal DR. UPASANA / DR. SATISH JERIA		

Prepared By : MR. NIKHIL SHARMA

Employee ID
Signature



FINAL REPORT

Bill No.	: AFBCB220003335	Bill Date	: 08-10-2022 11:32
Patient Name	: MR. VIKAS MEHRA	UHID	: AFD000015585
Age / Gender	: 54 Yrs 8 Mth / MALE	Patient Type	: If PHC :
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: AFB22326133	Current Ward / Bed	: /
		Receiving Date & Time	: 08-10-2022 16:14
		Reporting Date & Time	: 08-10-2022 17:15

SEROLOGY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: Serum

***THYROID PROFILE (FT3+FT4+TSH)**

FREE-TRI IODO THYRONINE (FT3) (ECLIA)		3.03	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)		1.46	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)		2.03	mIU/L	0.27-4.20

**** End of Report ****

IMPORTANT INSTRUCTIONS

CL - Critical Low, CH - Critical High, H - High, L - Low

Uma Rani

DR. UMA R

MD, PATHOLOGY

Sr. Consultant & Head of the Deptt.

FINAL REPORT

Bill No.	: AFDHC220000568	Bill Date	: 08-10-2022 09:51
Patient Name	: MR. VIKAS MEHRA	UHID	: AFD000015585
Age / Gender	: 54 Yrs 8 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: AFD22018479	Current Ward / Bed	: /
		Receiving Date & Time	: 08-10-2022 12:22
		Reporting Date & Time	: 08-10-2022 14:29

CLINICAL PATH REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: Urine

MEDIWHEEL PKG FOR MALE ABOVE 40YRS
URINE, ROUTINE EXAMINATION
PHYSICAL EXAMINATION

QUANTITY	40 mL		
COLOUR	Pale yellow		Pale Yellow
TURBIDITY	Clear		

CHEMICAL EXAMINATION

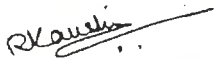
PH	6.0		5.0 - 8.5
PROTEINS	Negative		Negative
SUGAR	Negative		Negative
SPECIFIC GRAVITY, URINE	1.010		1.005 - 1.030

MICROSCOPIC EXAMINATION

LEUCOCYTES	1-2	/HPF	0 - 5
RBC's	Nil		
EPITHELIAL CELLS	1-2		
CASTS	Nil		
CRYSTALS	Nil		

**** End of Report ****
IMPORTANT INSTRUCTIONS

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DR. RICHA KAUSHIK MISHRA
 MBBS, DNB
 CONSULTANT


FINAL REPORT

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Patient Name	: MR. VIKAS MEHRA	UHID	: AFD000015585
Age / Gender	: 54 Yrs 8 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: AFD22018456	Current Ward / Bed	: /
		Receiving Date & Time	: 08-10-2022 11:10
		Reporting Date & Time	: 08-10-2022 12:05

BIOCHEMISTRY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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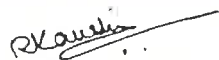
Sample Type: Serum

MEDIWHEEL PKG FOR MALE ABOVE 40YRS
LIVER FUNCTION TESTS (LFT)

BILIRUBIN-TOTAL (OPD)		0.82	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT (DPO)		0.16	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.66	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL (Buret)		7.8	g/dL	6 - 8.1
ALBUMIN-SERUM (Dye Binding-Bromocresol Green)		4.0	g/dL	
S.GLOBULIN		3.8	g/dL	2.8-3.8
A/G RATIO	L	1.05		1.5 - 2.5
ALKALINE PHOSPHATASE (IFCC AMP BUFFER)		73.3	IU/L	53 - 128
ASPARTATE AMINO TRANSFERASE (IFCC)		23.9	IU/L	10 - 42
ALANINE AMINO TRANSFERASE (IFCC)		26.5	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTID (IFCC)		34.7	IU/L	11 - 50
LACTATE DEHYDROGENASE (IFCC; L-P)	H	267.4	IU/L	0 - 248

**** End of Report ****
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Sample ID	: AFD22018456	Current Ward / Bed	: /
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Sample Type: Serum

MEDIWHEEL PKG FOR MALE ABOVE 40YRS

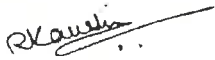
KFT/RFT- KIDNEY/RENAL PANEL 1

BLOOD UREA <small>Urease-GLDH,Knetic</small>		17	mg/dL	15 - 45
CREATININE-SERUM <small>(Modified Jaffe s Knetic)</small>	L	0.7	mg/dL	0.9 - 1.3
SODIUM-SERUM <small>(Indirect Ion-Selective Electrode)</small>		138	m.mol/L	135 - 145
POTASSIUM-SERUM <small>(Indirect Ion-Selective Electrode)</small>		4.4	m.mol/L	3.5 - 5.1
CHLORIDE-SERUM <small>(Indirect Ion-Selective Electrode)</small>		100	m.mol/L	98 - 107

**** End of Report ****

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Age / Gender	: 54 Yrs 8 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: AFD22018523	Current Ward / Bed	: /
		Receiving Date & Time	: 08-10-2022 15:11
		Reporting Date & Time	: 08-10-2022 16:27

BIOCHEMISTRY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: Plasma, Serum

MEDIWHEEL PKG FOR MALE ABOVE 40YRS

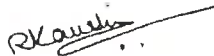
Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
CHOLESTROL-TOTAL (CHO-POD)	H	191	mg/dL	0 - 160
HDL CHOLESTROL Enzymatic Inhibition	L	33	mg/dL	>40
CHOLESTROL-LDL DIRECT Enzymatic Selective Protection	H	136	mg/dL	0 - 100
S.TRYGLYCERIDES (GPO-POD)		137	mg/dL	0 - 160
NON-HDL CHOLESTROL	H	158.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		5.8		1/2 Average Risk <3.3 Average Risk 3.3-4.4 2 Times Average Risk 4.5-7.1 3 Times Average Risk 7.2-11.0
LDL CHOLESTROL / HDL CHOLESTROL		4.1		1/2 Average Risk <1.0 Average Risk 1.0-3.6 2 Times Average Risk 3.7-6.3 3 Times Average Risk 6.4-8.0
CHOLESTROL-VLDL		27	mg/dL	10 - 35

Comments:

- Disorders of Lipid metabolism play a major role in atherosclerosis and coronary heart disease.
- There is an established relationship between increased total cholesterol & LDL cholesterol and myocardial infarction.
- HDL cholesterol level is inversely related to the incidence of coronary artery disease.
- Major risk factors which adversely affect the lipid levels are:
 - Cigarette smoking.
 - Hypertension.
 - Family history of premature coronary heart disease.
 - Pre-existing coronary heart disease.

**** End of Report ****
IMPORTANT INSTRUCTIONS

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FINAL REPORT

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Patient Name	: MR. VIKAS MEHRA	UHID	: AFD000015585
Age / Gender	: 54 Yrs 8 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: AFD22018523	Current Ward / Bed	: /
		Receiving Date & Time	: 08-10-2022 15:11
		Reporting Date & Time	: 08-10-2022 16:27

Sample Type: Plasma, Serum

MEDIWHEEL PKG FOR MALE ABOVE 40YRS

GLUCOSE-PLASMA (FASTING) (UV Hexokinase)	H	150.0	mg/dL	70 - 100
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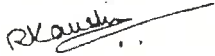
 Note: A diagnosis of diabetes mellitus is made if fasting blood glucose exceeds 126 mg/dL.
 (As per American Diabetes Association recommendation)

GLUCOSE-PLASMA (POST PRANDIAL) (UV Hexokinase)	H	243.0	mg/dL	70 - 140
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 Note: A diagnosis of diabetes mellitus is made if 2 hour post load glucose exceeds 200 mg/dL.
 (As per American Diabetes Association recommendation)

**** End of Report ****
IMPORTANT INSTRUCTIONS

CL - Critical Low, CH - Critical High, H - High, L - Low


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 MBBS, DNB
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FINAL REPORT

Bill No.	: AFDHC220000568	Bill Date	: 08-10-2022 09:51
Patient Name	: MR. VIKAS MEHRA	UHID	: AFD000015585
Age / Gender	: 54 Yrs 8 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: AFD22018455	Current Ward / Bed	: /
		Receiving Date & Time	: 08-10-2022 11:10
		Reporting Date & Time	: 08-10-2022 12:36

BLOOD BANK REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: EDTA Whole Blood

MEDIWHEEL PKG FOR MALE ABOVE 40YRS
BLOOD GROUP (ABO & RH)

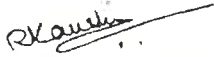
ABO GROUP	"AB"
RH TYPE	POSITIVE

Forward grouping done by slide method.

**** End of Report ****

IMPORTANT INSTRUCTIONS

CL - Critical Low, CH - Critical High, H - High, L - Low



DR. RICHA KAUSHIK MISHRA
 MBBS, DNB
 CONSULTANT

FINAL REPORT

Bill No.	: AFDHC220000568	Bill Date	: 08-10-2022 09:51
Patient Name	: MR. VIKAS MEHRA	UHID	: AFD000015585
Age / Gender	: 54 Yrs 8 Mth / MALE	Patient Type	: OPD If PHC :
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: AFD22018454	Current Ward / Bed	: /
		Receiving Date & Time	: 08-10-2022 11:10
		Reporting Date & Time	: 08-10-2022 12:43

HAEMATOLOGY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: EDTA Whole Blood

MEDIWHEEL PKG FOR MALE ABOVE 40YRS
CBC -1 (COMPLETE BLOOD COUNT)


TOTAL LEUCOCYTE COUNT (Flow Cytometry)		7.8	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.9	million/cumm	4.5 - 5.5
HAEMOGLOBIN (SLS Hb Detection)		14.2	g/dL	13 - 17
PACK CELL VOLUME (Cumulative Pulse Height Detection)		44.9	%	40 - 50
MEAN CORPUSCULAR VOLUME		91.7	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN		28.9	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		31.5	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		266	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)	H	56.2	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	15.9	%	11.6 - 14

DIFFERENTIAL LEUCOCYTE COUNT

NEUTROPHILS		60	%	40 - 80
LYMPHOCYTES		30	%	20 - 40
MONOCYTES		6	%	2 - 10
EOSINOPHILS		4	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	H	28	mm 1st hr	0 - 10

**** End of Report ****
IMPORTANT INSTRUCTIONS

CL - Critical Low, CH - Critical High, H - High, L - Low


DR. RICHA KAUSHIK MISHRA

 MBBS, DNB
 CONSULTANT

06.10.2022 12:01:50
ASIAN FIDELIS HOSPITAL
SEC- 88 FARIDABAD HARYANA
RPS CITY

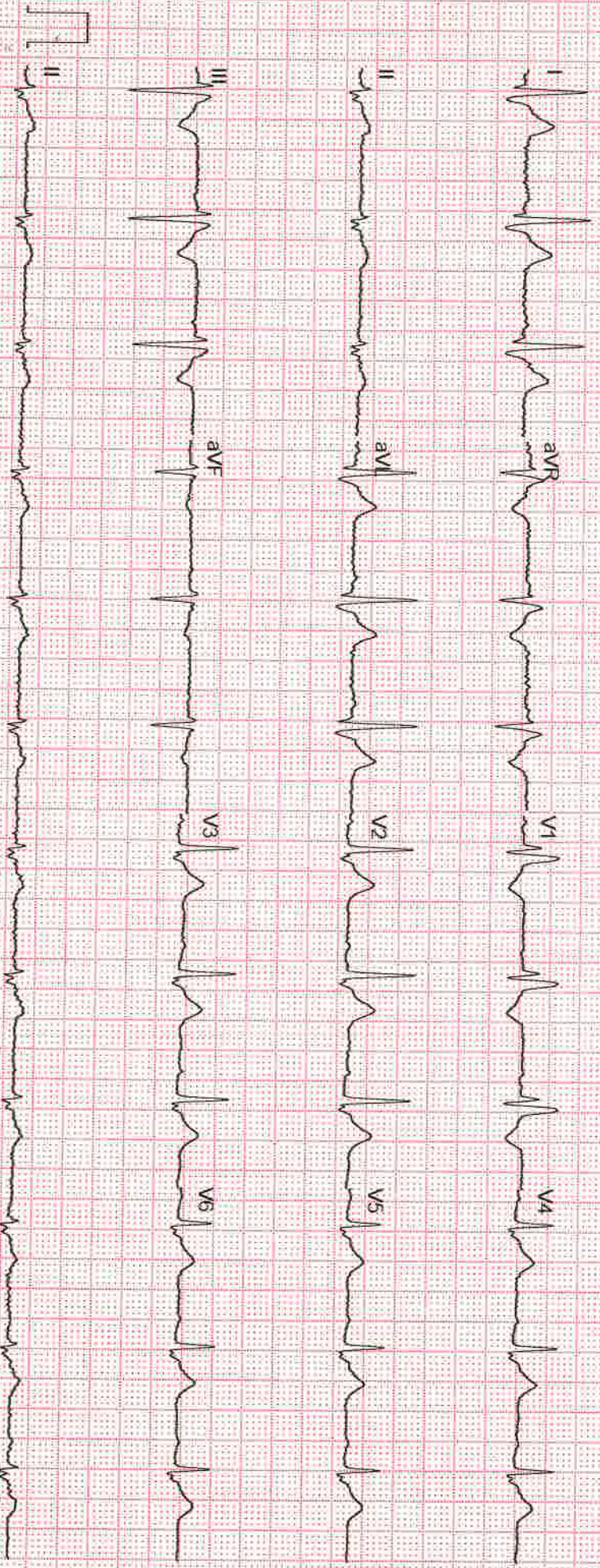
Location:
Room:
Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3:

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

71 bpm
- / - mmHg

QRS 136 ms
QT / QTcBaz 414 / 449 ms
PR 154 ms
P 92 ms
RR / PP 840 / 845 ms
P / QRS / T 20 / 26 / 0 degrees

Normal sinus rhythm
Right bundle branch block
Minimal voltage criteria for LVH, may be normal variant
Abnormal ECG



GE MAC2000 1 1 12SL™ V241

25 mm/s 10 mm/mV

ADS 0.56-20 Hz

Unconfirmed
4x2.5x3_25_R1

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : ULTRASOUND

Patient Name	: MR. VIKAS MEHRA	IPD No.	:
Age	: 54 Yrs 8 Mth	UHID	: AFD000015585
Gender	: MALE	Bill No.	: AFDHC220000568
Ref. Doctor	: SELF	Bill Date	: 08-10-2022 09:51:33
Ward	:	Room No.	:
		Print Date	: 08-10-2022 11:33:28

USG WHOLE ABDOMEN

FINDINGS:

- **Liver is enlarged in size (longitudinal span 16.2 cm), and shows mild to moderate fatty infiltration (s/o grade I/II fatty liver).** No evidence of any focal lesion is seen. No dilated intrahepatic biliary radicles are seen. Common duct and portal vein are normal in course and caliber.
- The gall bladder is well distended with normal wall thickness. No intraluminal calculi focal lesion seen. No pericholecystic pathology seen.
- *Visualized Pancreas is normal in size and parenchymal echogenicity. Rest of the pancreas and retroperitoneal structures are obscured by overlying bowel gas shadows.*
- Spleen is normal in size and echo pattern with no focal lesion.
- Both the kidneys are normal in size, shape and position. No evidence of any hydronephrosis is noted on either side. Normal corticomedullary differentiation is maintained bilaterally. The cortical thickness is within normal limits. The right kidney measures 11.9 x 5.8 cm. The left kidney measures 11.5 x 5.8 cm. No focal lesion/calculus noted in either kidney.
- The Urinary Bladder is well distended.
- Prostate is normal in size (31.0 cc), shape and echotexture.
- No ascites/retroperitoneal lymphadenopathy/pleural effusion.

IMPRESSION:

- **Hepatomegaly with grade I/II fatty liver changes.**

Please correlate clinically.

.....End of Report.....



Prepare By.
BHANOO

DR. BHANOO CHAUDHARY, MBBS, MD
CONSULTANT

Note : The information in this report is based on interpretation of images. This report is not the diagnosis and should be correlated with clinical details and other investigation.

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patient Name	: MR. VIKAS MEHRA	IPD No.	:
Age	: 54 Yrs 8 Mth	UHID	: AFD000015585
Gender	: MALE	Bill No.	: AFDHC220000568
Ref. Doctor	: SELF	Bill Date	: 08-10-2022 09:51:33
Ward	:	Room No.	:
		Print Date	: 08-10-2022 15:38:48

CHEST PA VIEW:

Cardiac shadow appears normal.

Both lung fields show prominent bronchovascular markings.

Both domes of diaphragm and both CP angles are clear.

Both hila appear normal.

Soft tissues and bony cage appear normal.

Please correlate clinically.

.....End of Report.....

Prepare By.
BHANOO


 DR. BHANOO CHAUDHARY, MBBS,MD
 CONSULTANT

Note : The information in this report is based on interpretation of images. This report is not the diagnosis and should be correlated with clinical details and other investigation.



FINAL REPORT

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Age / Gender	: 54 Yrs 8 Mth / MALE	Patient Type	: If PHC :
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: AFB22326132	Current Ward / Bed	: /
		Receiving Date & Time	: 08-10-2022 16:14
		Reporting Date & Time	: 10-10-2022 10:53

HAEMATOLOGY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: EDTA Whole Blood

***GLYCATED HAEMOGLOBIN (HBA1C)**

HBA1C (HPLC)	H	9.1	%	4.27 - 6.07
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INTERPRETATION:

HbA1c %	Degree of Glucose Control
>8%	Action suggested due to high risk of developing long term complications like Retinopathy, Nephropathy, Cardiopathy and Neuropathy
7.1 - 8.0	Fair Control
<7.0	Good Control

Note: 1.A three monthly monitoring is recommended in diabetics.
2.Since HbA1c concentration represents the integrated values for blood glucose over the preceding 6 - 10 weeks and is not affected by daily glucose fluctuation, exercise and recent food intake, it is a more useful tool for monitoring diabetics.

**** End of Report ****

IMPORTANT INSTRUCTIONS

CL - Critical Low, CH - Critical High, H - High, L - Low

DR. SHARMILA RAI
MD, PATHOLOGY
Consultant

NON INVASIVE CARDIOLOGY

Patient Name	: MR. VIKAS MEHRA	IPD No.	:
Age	: 54 Yrs 8 Mth	UHID	: AFD000015585
Gender	: MALE	Bill No.	: AFDHC220000568
Ref. Doctor	: SELF	Bill Date	: 08-10-2022 09:51:33
Ward	:	Room No.	:
		Procedure Date	: 10-10-2022 15:13:49

ECHOCARDIOGRAPHY & COLOR DOPPLER REPORT

MEASUREMENTS	ABSOLUTE VALUE		NORMAL VALUE
Aortic Root Diameter	3.0		2.0-3.7cm < 2.2cm/M2
Aortic Valve Opening	N		1.5-2.6cm
Left Atrial Dimension	4.0		1.9-4.0cm < 2.2cm/M2
RV Dimensions	N		0.7-2.6cm
RV thickness	N		0.3-0.9cm
LV ED Dimension	4.4		3.7-5.6 cm < 3.2cm /M2
LV ES Dimension	3.2		2.2-4.0 cm
IVS thickness	ED – 1.3	ES-1.5	0.6-1.2cm
LVPW Thickness	ED – 1.2	ES-1.4	0.5-1.1cm
IVS/ LVPW Ratio	N		
Mitral Valve	DE-N	EF -N	

INDICES OF LV FUNCTION		
EPSS		<9mm
FS%		24-42%
LV Ejection Fraction	60 %	60+/-6%

NON INVASIVE CARDIOLOGY

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Age	: 54 Yrs 8 Mth	UHID	: AFD000015585
Gender	: MALE	Bill No.	: AFDHC220000568
Ref. Doctor	: SELF	Bill Date	: 08-10-2022 09:51:33
Ward	:	Room No.	:
		Procedure Date	: 10-10-2022 15:13:49

IMAGING:

2D- imaging in PLAX.SAX and apical views revealed normal left ventricle. Movement of septum, posterior and lateral walls are normal. Global LVEF is 60%. Mitral valve opening is normal. No evidence of mitral valve prolapse is seen. Aortic valve has three cusps and its opening is not restricted. Tricuspid valve leaflets move normally, Pulmonary valve is normal. Interatrial and Interventricular septal are intact, No intracardiac mass or thrombus is seen. No pericardial pathology is observed.

MORPHOLOGICAL DATA

Mitral Valve : AML PML	Normal	Interatrial Septum	Intact
Aortic Valve	Normal	Interventricular Septum	Intact
Tricuspid Valve	Normal	Pulmonary Artery	Normal
Pulmonary Valve	Normal	Aorta	Normal
Right Ventricle	Normal	Right Atrium	Normal
Left Ventricle	Normal	Left Atrium	Normal

DOPPLER STUDY

	m/s	m/s	
MITRAL VELOCITY	E-0.6	A-0.7	MR 0/4
TRICUSPID VELOCITY	1.1 m/s		TR 0/4
AORTIC VELOCITY	1.0 m/s		AR 0/4
PULMONARY VELOCITY	1.0 m/s		PR 0/4
PA Pressure			

NON INVASIVE CARDIOLOGY

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Age	: 54 Yrs 8 Mth	UHID	:	AFD000015585
Gender	: MALE	Bill No.	:	AFDHC220000568
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		Procedure Date	:	10-10-2022 15:13:49

COLOUR FLOW MAPPING

No Valvular regurgitation.

FINAL IMPRESSION

1. No RWMA, LVEF-60%.
2. Mild concentric LVH seen.
3. High normal LA.
4. Normal cardiac valves.
5. Grade I diastolic dysfunction.
6. No clot/mass/vegetation/PE

DR. MITHAJESH KUMAR
MD, DNB (Cardiology)
Consultant Cardiologist

HMC-HN15723



For The perusal of a medical professional only

The content of this report is only an opinion based on images and is therefore subject to inherent technical limitations.

It is not the diagnosis & must be correlated clinically.

NOT FOR MEDICOLEGAL PURPOSES

.....End of Report.....

Prepare By.
MADHVI.S

OPD Assessment Form (First visit/Follow-up)



Name : MR. VIKAS MEHRA
 FATHER : LATE SHRI T S MEHRA
 Age / Gender : 54 Yrs 8 Mth / MALE
 CPG : CORPORATE CASHAIMS2122_FD
 Inst. Name : Acrofemi Healthcare Ltd
 Address : 260 2ND FLOOR I P COLONY, FARIDABAD, HARYANA, INDIA, Zip No.-121003

UHID No. : AFD000015585
 Date : 08-10-2022 09:48:00
 Doctor / Unit : DR. UPASANA / DR. SATISH JERIA /
 Department : OPHTHALMOLOGY

40 Routine checkup

Present Complaints:

100

BP (mm Hg)
Pulse
RR
Ht/Length
Wt-
Pain Score (1-10)

Past/Family History:

H/O Dm & Treatment - 3 years

Any known Allergies
<i>None</i>

History Given By :

Clinical Findings :

*Vu 6/9 n24
6/6P n18*

ALS

upf

*ACV +0.50 / +0.50 x 90° - 6/6
+0.25 x 80° - 6/6
Add +2.25 sp (BE) - W*

Provisional Diagnosis : *- Presbyopia*

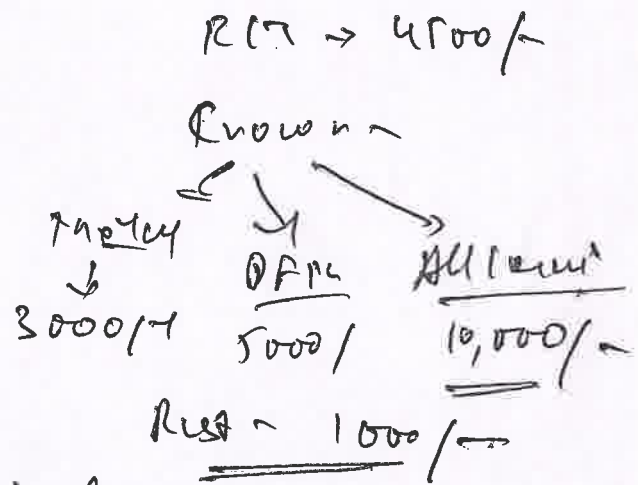
DR. UPASANA / DR. SATISH JERIA, M.D./MS, CONSULTANT-OPHTHALMOLOGY, Reg. No: DMC-71812

Note :
 Nature of illness, prognosis, potential side effects of medication used, risk of allergic reaction, need for follow-up & monitoring has been explained to the Patient/attendants in their own language.
WHEN TO OBTAIN URGENT CARE : In case high grade fever, recurrent vomiting, profuse diarrhea, severe oral ulcers, skin rash breathlessness, dizziness, loss of consciousness, bleeding from any site or new relevant/ alarming symptom

Investigations Advised :

RCA normal. Deep proximal. Can't approachy palpate $\frac{7}{7}$
 $\frac{+}{6}$ → Radiology involve enamel & dentin

Plan Of Care :



Treatment Advice:

- ① Adv → RCT $\frac{7}{7}$ followed by crown.
- ② Rest $\frac{+}{6}$

Nutritional Screening : Required (If required, please contact, the dietician)
 Not Required

Signature of Doctor / Consultant:  Date: 8/10/22 Time:

OPD Assessment Form (First visit/Follow-up)



Name : MR. VIKAS MEHRA
 FATHER : LATE SHRI T S MEHRA
 Age / Gender : 54 Yrs 8 Mth / MALE
 CPG : CORPORATE CASHAIMS2122_FD
 Inst. Name : Acrofemi Healthcare Ltd
 Address : 260 2ND FLOOR I P COLONY, FARIDABAD, HARYANA, INDIA, Zip No.-121003

UHID No. : AFD000015585
 Date : 08-10-2022 09:48:00
 Doctor / Unit : DR. RAVJOT AHUJA /
 Department : DENTAL

Present Complaints:

General Check up.

BP (mm Hg)
 Pulse
 RR
 Ht/Length
 Wt-
 Pain Score (1-10)

Past/Family History:

H/O Retina $\frac{4.0}{1}$

Any known Allergies

History Given By :

Clinical Findings :

Deep Proximal Caries in $\frac{70}{1}$

Provisional Diagnosis :

DR. RAVJOT AHUJA, DENTAL,

Asian Fidelis Multispeciality Hospital OPD Timings: Mon - Sat: 10:00am to 04:00pm.

Note :

Nature of illness, prognosis, potential side effects of medication used, risk of allergic reaction, need for follow-up & monitoring has been explained to the Patient/attendants in their own language.

WHEN TO OBTAIN URGENT CARE : In case high grade fever, recurrent vomiting, profuse diarrhea, severe oral ulcers, skin rash breathlessness, dizziness, loss of consciousness, bleeding from any site or new relevant/ alarming symptom.

Investigations Advised :

USG

fasting blood glucose = 150

PP blood glucose = 243

abdomen - fatty liver grade II

total cholesterol = 191

HDL = 33

LDL = 136

triglycerides = 137

EKG - mild concentric LVH

Plan Of Care :

Ad - H5A1C

Review Reports

Treatment Advice:

Nutritional Screening : Required (If required, please contact, the dietician)

Not Required

Dr. Mukund Singh
Consultant Internal Medicine
Asian Fidelis Multi Speciality Hospital
RPS Solvans City, Sector-88
Faridabad-121002, Haryana
MBBS 2004 DNB (Medicine) 2010
MCF-10001114008

Signature of Doctor / Consultant: Date: Time:

OPD Assessment Form (First visit/Follow-up)



Name : MR. VIKAS MEHRA
 FATHER : LATE SHRI T S MEHRA
 Age / Gender : 54 Yrs 8 Mth / MALE
 CPG : CORPORATE CASHAIMS2122_FD
 Inst. Name : Acrofemi Healthcare Ltd
 Address : 260 2ND FLOOR I P COLONY, FARIDABAD, HARYANA, INDIA, Zip No.-121003

UHID No. : AFD000015585
 Date : 08-10-2022 09:48:00
 Doctor / Unit : DR. MUKUND SINGH /
 Department : INTERNAL MEDICINE_FD

Present Complaints:

PHC

BP (mm Hg) 130/70mmHg
 Pulse
 RR
 Ht/Length
 Wt-
 Pain Score (1-10)

Past/Family History:

DM-II

History Given By :

Self

Clinical Findings :

None

Any known Allergies
None known

Provisional Diagnosis :

DM-II

DR. MUKUND SINGH, MBBS, DNB, CONSULTANT-INTERNAL MEDICINE_FD, Reg. No: BMC-35607

Asian Fidelis Multispeciality Hospital OPD Timing: Mon - Sat : 10:00am-04:00pm.

Note :
 Nature of illness, prognosis, potential side effects of medication used, risk of allergic reaction, need for follow-up & monitoring has been explained to the Patient/attendants in their own language.
WHEN TO OBTAIN URGENT CARE : In case high grade fever, recurrent vomiting, profuse diarrhea, severe oral ulcers, skin rash breathlessness, dizziness, loss of consciousness, bleeding from any site or new relevant/ alarming symptom

Investigations Advised :

Dilate fundus

Plan Of Care :

Treatment Advice:

- Dilate fundus (w/pt visit).
glasses (bifocal/progressive).

Nutritional Screening : Required (If required, please contact, the dietician)
Not Required

Signature of Doctor / Consultant: [Signature] Date: 8/10/2022 Time: 10:50 AM