

Name : Mr. RAVISH RANJAN (44 /M)

Date : 03/04/2023

Address :

Examined by:

UHID : AMHL.0002119130

Package : MEDI WHEEL FULL BODY HCK - MALE (ABOVE 40 YRS WITH TMT/ECHO)

AHC No : AMHLAH171447



CHIEF COMPLAINTS

Eye pain

PRESENT KNOWN ILLNESS

No history of - Diabetes mellitus,
Hypertension,
Dyslipidemia, Thyroid
disorder



DRUG ALLERGY

NO KNOWN ALLERGY

:03/04/2023



SYSTEMIC REVIEW

Cardiovascular system

- Nil Significant

Respiratory system

- Nil Significant

Gastrointestinal system

- Nil Significant

Genitourinary system

- Nil Significant

Central nervous system

- Nil Significant

Eyes

- Nil Significant

ENT

- Nil Significant

Musculoskeletal system

Spine and joints

- Nil Significant

Skin

- Nil Significant



Past medical history

Past medical history - nil significant



Surgical history

Cholecystectomy - 2022



Personal history

Marital status - Married

No. of children - 1

Diet - Non Vegetarian

Alcohol - consumes alcohol
occasionally

Smoking - No

Chews tobacco - No

Physical activity - Mild



Family history

Father - alive

Mother - alive

Brothers - 4

Sisters - 1

Diabetes - father, mother

Coronary artery
disease - none

Cancer - None

PHYSICAL EXAMINATION



General

Build - obese

Height - 177

Weight - 103

BMI - 32.88

Pallor - No

Oedema - no



Cardiovascular system

Heart rate (Per minute) - 82

Rhythm - Regular

- B.P. Sitting

Systolic(mm of Hg) - 106

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Diastolic(mm of Hg) - 84
Heart sounds - S1S2+

Respiratory system

Breath sounds - Normal vesicular breath sounds

Abdomen

Organomegaly - No
Tenderness - No

Central nervous system

- No neurological deficit

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COMPLETE HAEMOGRAM PROFILE

Test Name	Result	Unit	Level	Range
Hemoglobin	13.5	g/dl	●	13.0-17.0
RBC COUNT	4.88	Million/ ul	●	4.5-5.5
Hematocrit - Hct:	44.4	%	●	41-53
MCV	90.9	fl	●	83-101
MCH	27.7	pg	●	27-32
MCHC	30.5 *	%	●	31.5-34.5
RDW	18.0 *	%	●	11.8-14.0
WBC Count	9300	/cu mm	●	4000-10000
Platelet Count	2.91	lacs/cu mm	●	1.5-4.0
Neutrophils	68	%	●	40-80
Lymphocytes	19 *	%	●	20-40
Monocytes	05	%	●	2-10
Eosinophils	08 *	%	●	01-06
Basophils	00	%	●	0-0
RBC:	Anisocytosis+, Predominantly Normocytic Normochromic.			
WBC:	Eosinophilia noted			
Platelets:	Adequate.			
ERYTHROCYTE SEDIMENTATION RATE (ESR)	11	mm/1st hr	●	0-15

URINE ROUTINE AND MICROSCOPY

Test Name	Result	Unit	Level	Range
Volume:	30	mL		
Colour:	Pale Straw			
Appearance	Slightly Turbid			
Specific Gravity	1.030			
pH:	6.0			
Albumin:	Not Detected			
Glucose	Not Detected			
Ketone:	Not Detected			
Bile Pigments	Not Detected			
RBC	Nil	/hpf		

Pus Cells	3-5	/hpf
Epithelial Cells	1-2 /h.p.f	/hpf
Casts:	Not Found	
Crystals:	Not Found	
Note	Biological reference interval RBC- 0-2/hpf Pus Cell - 0-5/hpf.	

URINE SUGAR - POST PRANDIAL (QUALITATIVE)

Test Name	Result	Unit	Level	Range
URINE GLUCOSE(POST PRANDIAL)	Nil			

URINE SUGAR- FASTING(QUALITATIVE)

Test Name	Result	Unit	Level	Range
URINE GLUCOSE(FASTING)	Nil			

BLOOD GROUPING AND TYPING (ABO AND RH)

Test Name	Result	Unit	Level	Range
ABO Group:	A			
Rh (D) Type:	POSITIVE			

LIVER FUNCTION TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
ALT(SGPT) - SERUM	17	U/L	●	10-40
ALBUMIN - SERUM	4.5	g/dL	●	3.5-5.1
ALKALINE PHOSPHATASE - SERUM	96	U/L	●	53-128
AST (SGOT) - SERUM	12	U/L	●	10-42
BILIRUBIN TOTAL - SERUM	0.5	mg/dL	●	0.0-1.0

LIPID PROFILE TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
CHOLESTEROL - SERUM	255 *	mg/dL	●	0-200

● Within Normal Range ● Borderline High/Low ● Out of Range

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CREATININE - SERUM

Test Name	Result	Unit	Level	Range
CREATININE - SERUM	0.9	mg/dL	●	0.9-1.3

GLOBULIN: (CALCULATED) - SERUM	2.4	g/dL	●	1.8-3.6
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LIVER FUNCTION TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM	24	U/L	●	7-64

THYROID PROFILE - I(T3,T4 AND TSH)

Test Name	Result	Unit	Level	Range
TOTAL T3: TRI IODOTHYRONINE - SERUM	0.9	ng/ml	●	0.8-2

TOTAL T4: THYROXINE - SERUM	7.2	µg/dL	●	5.1-14.1
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GLUCOSE - PLASMA (FASTING)

Test Name	Result	Unit	Level	Range
GLUCOSE - PLASMA (FASTING)	82	mg/dL	●	70-99

LIPID PROFILE TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
TRIGLYCERIDES - SERUM	117	mg/dL	●	0-150

GLUCOSE - PLASMA (POST PRANDIAL)

Test Name	Result	Unit	Level	Range
GLUCOSE - PLASMA (POST PRANDIAL)	106	mg/dL	●	70-140

THYROID PROFILE - I(T3,T4 AND TSH)

Test Name	Result	Unit	Level	Range
TSH: THYROID STIMULATING HORMONE - SERUM	4.2	µIU/mL	●	0.270-4.200

HBA1C (GLYCOSYLATED HAEMOGLOBIN)-WHOLE BLOOD

Test Name	Result	Unit	Level	Range
HBA1C (GLYCOSYLATED HAEMOGLOBIN)-WHOLE BLOOD	5.3	%	●	Nondiabetic : 4 - 5.6 % Prediabetics : 5.7 - 6.4% Diabetes : >= 6.5% ADA Therapeutic goal : <7%

URIC ACID - SERUM

Test Name	Result	Unit	Level	Range
URIC ACID - SERUM	7.1	mg/dL	●	3.5-7.2

LIVER FUNCTION TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
BILIRUBIN CONJUGATED (DIRECT) - SERUM	0.2	mg/dL	●	0.0-0.2

LIPID PROFILE TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
HDL CHOLESTEROL - SERUM	39	mg/dL	●	30-70
LDL CHOLESTEROL -SERUM	210 *	mg/dL	●	Optimal: <100
VLDL CHOLESTEROL - SERUM (Calculated)	6	mg/dL	●	0-35

PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL) - SERUM

Test Name	Result	Unit	Level	Range
PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL) - SERUM	0.41	ng/mL	●	0.00-6.50

LIVER FUNCTION TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
PROTEIN TOTAL - SERUM	6.9	g/dL	●	6.4-8.3

BUN (BLOOD UREA NITROGEN)

Test Name	Result	Unit	Level	Range
BUN (BLOOD UREA NITROGEN)	9.0	mg/dL	●	7.0-18.0

LIVER FUNCTION TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
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● Within Normal Range ● Borderline High/Low ● Out of Range

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A/G - RATIO 1.9 ● 1.0-2.0

ECG

SINUS RHYTHM.
LOW VOLTAGE T WAVES.

TREADMILL TEST / STRESS TEST

STRESS TEST IS NEGATIVE FOR PROVOCABLE
MYOCARDIAL ISCHAEMIA.

ULTRASOUND SCREENING WHOLE ABDOMEN

* Grade-I fatty liver.

X-RAY CHEST PA

Normal study.

INVESTIGATIONS NOT DONE / NOT YET REPORTED / NOT
PART OF PACKAGE(LAB,RADIOLOGY & CARDIOLOGY)

Haematology

STOOL ROUTINE

● Within Normal Range ● Borderline High/Low ● Out of Range

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Printed By :

AHC Physician / Consultant Internal Medicine

Note :- The Health Check-up examinations and routine investigations have certain limitations and may not be able to detect all the diseases. Any new or persisting symptoms should be brought to the attention of the Consulting Physician. Additional tests, consultations and follow up may be required in some cases.