

### CONCLUSION OF HEALTH CHECKUP

ECU Number	: 2039	MR Number	: 23201214	Patient Name	: NARAYANA SWAMI
Age	: 31	Sex	: Male	Height	: 170
Weight	: 76	Ideal Weight	: 66	BMI	: 26.30
Date	: 25/02/2023				

Dr. Manish Mittal

Internal Medicine

Note : General Physical Examination & routine Investigations included in the Health Checkup have certain limitations and may not be able to detect all the latent and asymptomatic diseases.

ECU Number : 2039                      MR Number : 23201214                      Patient Name: NARAYANA SWAMI  
Age : 31                                      Sex : Male                                      Height : 170  
Weight : 76                                      Ideal Weight : 66                                      BMI : 26.30  
Date : 25/02/2023

Past H/O : NO P/H/O ANY MAJOR ILLNESS.

Present H/O : NO MEDICAL COMPLAINTS AT PRESENT.

Family H/O : MOTHER AND FATHER : DIABETES.

Habits : OCC. ALCOHOL.

Gen.Exam. : G.C. GOOD

B.P : 110/76 mm Hg

Pulse : 78/MIN REG.

Others : SPO2 : 98 %

C.V.S : NAD

R.S. : NAD

Abdomen : NP

Spleen : NP

Skin : NAD

C.N.S : NAD

Advice :



ECU Number : 2039  
Age : 31  
Weight : 76  
Date : 25/02/2023

MR Number : 23201214  
Sex : Male  
Ideal Weight : 66

Patient Name: NARAYANA SWAMI  
Height : 170  
BMI : 26.30

**Ophthalmic Check Up :**

**Right**

**Left**

Ext Exam

NORMAL

Vision Without Glasses

-

-

Vision With Glasses

6/6 N.5

6/6 N.5

Final Correction

SAME AS PATIENT OWN

SAME AS PATIENT  
OWN

Fundus

NORMAL

Colour Vision

NORMAL

Advice

NIL

**Orthopaedic Check Up :**

Ortho Consultation

Ortho Advice

ENT Check Up :

Ear

Nose

Throat

Hearing Test

ENT Advice

**General Surgery Check Up :**

General Surgery

Abdominal Lump

Hernia

External Genitals

PVR

Proctoscopy

Any Other

Surgical Advice

Dietary Assesment

ECU Number : 2039 MR Number : 23201214 Patient Name: NARAYANA SWAMI  
Age : 31 Sex : Male Height : 170  
Weight : 76 Ideal Weight : 66 BMI : 26.30  
Date : 25/02/2023

Body Type : Normal / Underweight / Overweight  
Diet History : Vegetarian / Eggetarian / Mixed

Frequency of consuming fried food : / Day / Week or occasional  
Frequency of consuming Sweets : / Day / or occasional  
Frequency of consuming outside food : / Day / Week or occasional  
Amount of water consumed / day : Glasses / liters

Life style assessment :  
Physical activity : Active / moderate / Sedentary / Nil  
Alcohol intake : Yes / No  
Smoking : Yes / No  
Allergic to any food : Yes / No  
Are you stressed out ? : Yes / No  
Do you travel a lot ? : Yes / No

General diet instructions :

Have small frequent meals.

Avoid fatty products like oil, ghee, butter, cheese.

Take salt restricted diet and avoid table salt.

Consume fibrous food regularly like whole grains, Daliya, Oats, Bajra, Flex seeds, Pulses, Fruits and Salads.

Keep changing your cooking oil every three months.

Avoid Maida, Starchy foods and Bakery products.

Consume 1-2 seervings of all fruits and vegetables, For Diabetic patients avoid Mango, Chikoo, Banana, Grapes and Custurd apple

Dring 3 to 4 liters (12 - 14 glass) of water daily.

Eat Beetroots, Figs, Almond, Walnut, Dates, Leafy vegetables, roasted Channa and Jeggary (Gur) for Heamoglobin in case of diabetic patient avoid Rasins, Dates and Jeggary

Drink green Tea or black Coffee once in a day.

Do brisk walking daily.



Patient Name : Mr. NARAYANA SWAMI SIVARATHRI Type : OPD  
 Gender / Age : Male / 31 Years 9 Months 7 Days Request No. : 109312  
 MR No / Bill No. : 23201214 / 231068536 Request Date : 25/02/2023 09:28 AM  
 Consultant : Dr. Manish Mittal Collection Date : 25/02/2023 09:49 AM  
 Location : OPD Approval Date : 25/02/2023 01:25 PM

**CBC + ESR**

Test	Result	Units	Biological Ref. Range
<b>Haemoglobin.</b>			
Haemoglobin	15.9	gm/dL	13 - 17
Red Blood Cell Count (T-RBC)	5.35	mill/cmm	4.5 - 5.5
Hematocrit (HCT)	47.1	%	40 - 50
Mean Corpuscular Volume (MCV)	88.0	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	29.7	pg	27 - 32
MCH Concentration (MCHC)	33.8	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	13.1	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	42.9	fl	39 - 46
<b>Total Leucocyte Count (TLC)</b>			
Total Leucocyte Count (TLC)	5.91	thou/cmm	4 - 10
<b>Differential Leucocyte Count</b>			
Polymorphs	57	%	40 - 80
Lymphocytes	36	%	20 - 40
Eosinophils	1	%	1 - 6
Monocytes	6	%	2 - 10
Basophils	0	%	0 - 2
Polymorphs (Abs. Value)	3.38	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	2.16	thou/cmm	1 - 3
Eosinophils (Abs. Value)	<b>0.04</b>	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.26	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.07	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.2	%	1 - 3 : Borderline > 3 : Significant
<b>Platelet Count</b>			
Platelet Count	219	thou/cmm	150 - 410
Smear evaluation	Adequate		
ESR	2	mm/1 hr	0 - 10

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / repeat may be requested.

365 Days / 24 Hours Laboratory Services

Home Collection Facility Available  
(Mon To Sat 8:00 am to 5:00 pm)



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DEPARTMENT OF LABORATORY MEDICINE

Patient Name	: Mr. NARAYANA SWAMI SIVARATHRI	Type	: OPD
Gender / Age	: Male / 31 Years 9 Months 7 Days	Request No.	: 109312
MR No / Bill No.	: 23201214 / 231068536	Request Date	: 25/02/2023 09:28 AM
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**CBC + ESR**

Immature Granulocyte (IG) count is a useful early marker of infection or inflammation, even when other markers are normal. It is an early and rapid discrimination of bacterial from viral infections. It is also increased in patients on steroid therapy / chemotherapy or haematological malignancy. High IG is always pathological; except in pregnancy and neonates of < 7 days.  
Method : HB by Non-Cyanide Hemoglobin analysis method. HCT by RBC pulse height detection method. RBC, TLC & PLC are by Particle Count by Electrical Impedance in Cell Counter. Optical Platelets by Fluorescent + Laser Technology. MCV, MCH, MCHC, RDW (CV & SD) are calculated parameter. DLC by Flowcytometry method using semi-conductor Laser+Smear verification. ESR on Ves metic 20, comparable to Westergrens method and in accordance to ICSH reference method.

---- End of Report ----

Dr. Sejal Odedra  
M.D.Pathology

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**DEPARTMENT OF LABORATORY MEDICINE**

Follow us :  

Patient Name : Mr. NARAYANA SWAMI SIVARATHRI  
Gender / Age : Male / 31 Years 9 Months 7 Days  
MR No / Bill No. : 23201214 / 231068536  
Consultant : Dr. Manish Mittal  
Location : OPD

Type : OPD  
Request No. : 109312  
Request Date : 25/02/2023 09:28 AM  
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Approval Date : 25/02/2023 02:04 PM

**Haematology**

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>Biological Ref. Range</u>
<b>Blood Group</b>			
ABO system	O		
Rh system.	Positive		

By Gel Technology / Tube Agglutination Method  
Note :

- This blood group has been done with new sensitive Gel Technology using both Forward and Reverse Grouping Card with Autocontrol.
- This method check`s group both on Red blood cells and in Serum for "ABO" group.

---- End of Report ----

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M.D.Pathology

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DEPARTMENT OF LABORATORY MEDICINE

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Approval Date : 25/02/2023 03:12 PM

**Fasting Plasma Glucose**

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>Biological Ref. Range</u>
<i>Fasting Plasma Glucose</i>			
Fasting Plasma Glucose	86	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	89	mg/dL	70 - 140

By Hexokinase method on RXL Dade Dimension

---- End of Report ----

Dr. Sejal Odedra  
M.D.Pathology

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / retest may be requested.





Patient Name : Mr. NARAYANA SWAMI SIVARATHRI Type : OPD  
 Gender / Age : Male / 31 Years 9 Months 7 Days Request No. : 109312  
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 Location : OPD Approval Date : 25/02/2023 03:12 PM

**HbA1c (Glycosylated Hb)**

Test	Result	Units	Biological Ref. Range
<b>HbA1c (Glycosylated Hb)</b>			
Glycosylated Hemoglobin (HbA1c)	5.5	%	
estimated Average Glucose (e AG) *	111.15	mg/dL	

(Method:

By Automated HPLC analyser on D-10 Biorad. NGSP Certified, US-FDA approved, Traceable to IFCC reference method.

\* Calculated valued for past 60 days, derived from HbA1c %, based on formula recommended by the A1c - Derived Average Glucose study from ADA and EASD funded The ADAG trial.

Guidelines for Interpretation:

Indicated Glycemic control of previous 2-3 months

HbA1c%	e AG (mg/dl)	Glycemic control
> 8	> 183	Action suggested...High risk of developing long-term complications. Action suggested, depends on individual patient circumstances
7 - 8	154 - 183	Good
< 7	< 154	Goal...Some danger of hypoglycemic reaction in type I Diabetics. Some Glucose intolerant individuals and Sub-Clinical diabetics may demonstrate (elevated) HbA1c in this area.
6 - 7	126 - 154	Near Normal
< 6	< 126	Nondiabetic level)

---- End of Report ----

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**Complete Lipid Profile**

Test	Result	Units	Biological Ref. Range
<b>Complete Lipid Profile</b>			
Appearance	Hazy		
Triglycerides	<b>317</b>	mg/dL	1 - 150
<i>(By Lipase / Glycerol dehydrogenase on RXL Dade Dimension</i>			
<i>&lt; 150 Normal</i>			
<i>150-199 Borderline High</i>			
<i>200-499 High</i>			
<i>&gt; 499 Very High)</i>			
Total Cholesterol	175	mg/dL	1 - 200
<i>(By enzymatic colorimetric method on RXL Dade Dimension</i>			
<i>&lt;200 mg/dL - Desirable</i>			
<i>200-239 mg/dL - Borderline High</i>			
<i>&gt; 239 mg/dL - High)</i>			
HDL Cholesterol	<b>32</b>	mg/dL	40 - 60
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension</i>			
<i>&lt; 40 Low</i>			
<i>&gt; 60 High)</i>			
Non HDL Cholesterol (calculated)	143	mg/dL	1 - 130
<i>(Non- HDL Cholesterol</i>			
<i>&lt; 130 Desirable</i>			
<i>139-159 Borderline High</i>			
<i>160-189 High</i>			
<i>&gt; 191 Very High)</i>			
LDL Cholesterol	91	mg/dL	1 - 100
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension</i>			
<i>&lt; 100 Optimal</i>			
<i>100-129 Near / above optimal</i>			
<i>130-159 Borderline High</i>			
<i>160-189 High</i>			
<i>&gt; 189 Very High)</i>			
VLDL Cholesterol (calculated)	63.4	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	2.84		2.1 - 3.5
T. Ch./HDL Ch. Ratio	5.47		3.5 - 5
<i>(Recent NECP / ATP III Guidelines / Classification (mg/dl) :)</i>			

---- End of Report ----

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**Liver Function Test (LFT)**

Test	Result	Units	Biological Ref. Range
<b>Bilirubin</b>			
Bilirubin - Total	0.56	mg/dL	0 - 1
Bilirubin - Direct	0.09	mg/dL	0 - 0.3
Bilirubin - Indirect	0.47	mg/dL	0 - 0.7
<i>(By Diazotized sulfanilic acid on RXL Dade Dimension.)</i>			
Aspartate Aminotransferase (SGOT/AST)	29	U/L	15 - 40
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alanine Aminotransferase (SGPT/ALT)	<b>65</b>	U/L	16 - 63
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alkaline Phosphatase	<b>51</b>	U/L	53 - 128
<i>(BY PNPP AMP method on RXL Dade Dimension.)</i>			
Gamma Glutamyl Transferase (GGT)	44	U/L	15 - 85
<i>(By IFCC method on RXL Dade Dimension.)</i>			
<b>Total Protein</b>			
Total Proteins	7.79	gm/dL	6.4 - 8.2
Albumin	4.27	gm/dL	3.4 - 5
Globulin	3.52	gm/dL	3 - 3.2
A : G Ratio	1.21		1.1 - 1.6
<i>(By Biuret endpoint and Bromocresol purple method on RXL Dade Dimension.)</i>			

--- End of Report ---

Dr. Sejal Odedra  
M.D.Pathology



Patient Name : Mr. NARAYANA SWAMI SIVARATHRI  
 Gender / Age : Male / 31 Years 9 Months 7 Days  
 MR No / Bill No. : 23201214 / 231068536  
 Consultant : Dr. Manish Mittal  
 Location : OPD

Type : OPD  
 Request No. : 109312  
 Request Date : 25/02/2023 09:28 AM  
 Collection Date : 25/02/2023 09:49 AM  
 Approval Date : 25/02/2023 03:12 PM

## Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea (By Urease Kinetic method on RXL Dade Dimension)	35	mg/dL	10 - 45
Creatinine (By Modified Kinetic Jaffe Technique)	1.18	mg/dL	0.9 - 1.3
Estimate Glomerular Filtration rate (Ref. range : > 60 ml/min for adults between age group of 18 to 70 yrs. eGFR Calculated by IDMS Traceable MDRD Study equation. Reporting of eGFR can help facilitate early detection of CKD. By Modified Kinetic Jaffe Technique)	More than 60		
Uric acid (By Uricase / Catalase method on RXL Siemens)	7.0	mg/dL	3.4 - 7.2

---- End of Report ----

Dr. Sejal Odedra  
M.D.Pathology



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 Gender / Age : Male / 31 Years 9 Months 7 Days  
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## Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
------	--------	-------	-----------------------

Triiodothyronine (T3)	1.57	ng/ml	
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(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)

Reference interval (ng/ml)

1 - 3 days	: 0.1 - 7.4
1-11 months	: 0.1 - 2.45
1-5 years	: 0.1 - 2.7
6-10 years	: 0.9 - 2.4
11-15 years	: 0.8 - 2.1
16-20 years	: 0.8 - 2.1
Adults (20 - 50 years)	: 0.7 - 2.0
Adults (> 50 years)	: 0.4 - 1.8
Pregnancy (in last 5 months)	: 1.2 - 2.5

(Reference : Tietz - Clinical guide to laboratory test, 4th edition ))

Thyroxine (T4)	7.63	mcg/dL	
----------------	------	--------	--

(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)

Reference interval (mcg/dL)

1 - 3 days	: 11.8 - 22.6
1 - 2 weeks	: 9.8 - 16.6
1 - 4 months	: 7.2 - 14.4
4 - 12 months	: 7.8 - 16.5
1-5 years	: 7.3 - 15.0
5 - 10 years	: 6.4 - 13.3
10 - 20 years	: 5.6 - 11.7
Adults / male	: 4.6 - 10.5
Adults / female	: 5.5 - 11.0
Adults (> 60 years)	: 5.0 - 10.7

(Reference : Tietz - Clinical guide to laboratory test, 4th edition ))

Thyroid Stimulating Hormone (US-TSH)	1.93	microlU/ml	
--------------------------------------	------	------------	--

(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)

Reference interval (microlU/ml)

Infants (1-4 days)	: 1.0 - 39
2-20 weeks	: 1.7 - 9.1
5 months - 20 years	: 0.7 - 6.4
Adults (21 - 54 years)	: 0.4 - 4.2
Adults (> 55 years)	: 0.5 - 8.9

Pregnancy :

1st trimester	: 0.3 - 4.5
2nd trimester	: 0.5 - 4.6
3rd trimester	: 0.8 - 5.2

(Reference : Tietz - Clinical guide to laboratory test, 4th edition ))

---- End of Report ----

Dr. Sejal Odedra  
M.D.Pathology



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**Urine routine analysis (Auto)**

Test	Result	Units	Biological Ref. Range
<b>Physical Examination</b>			
Quantity	30	mL	
Colour	Pale Yellow		
Appearance	Clear		
<b>Chemical Examination (By Reagent strip method)</b>			
pH	5.5		
Specific Gravity	1.025		
Protein	Negative	gm/dL	0 - 5
Glucose	Negative	mg/dL	0 - 5
Ketones	Negative		0 - 5
Bilirubin	Negative		Negative
Urobilinogen	Negative		Negative (upto 1)
Blood	Negative		Negative
Leucocytes	Negative		Negative
Nitrite	Negative		Negative
<b>Microscopic Examination (by Microscopy after Centrifugation at 2000 rpm for 10 min or on fully automated Sysmex urine sedimentation analyzer UF4000)</b>			
Red Blood Cells	0 - 1	/hpf	0 - 2
Leucocytes	0 - 1	/hpf	0 - 5
Epithelial Cells	0 - 1	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil	/hpf	Nil
Mucus	Absent	/hpf	Absent
Organism	Absent		

--- End of Report ---

Dr. Sejal Odedra  
M.D.Pathology

25-02-2023 10:10:09 AM

ID: 23201214

NARAYANA SWAMI SIVARATHRI

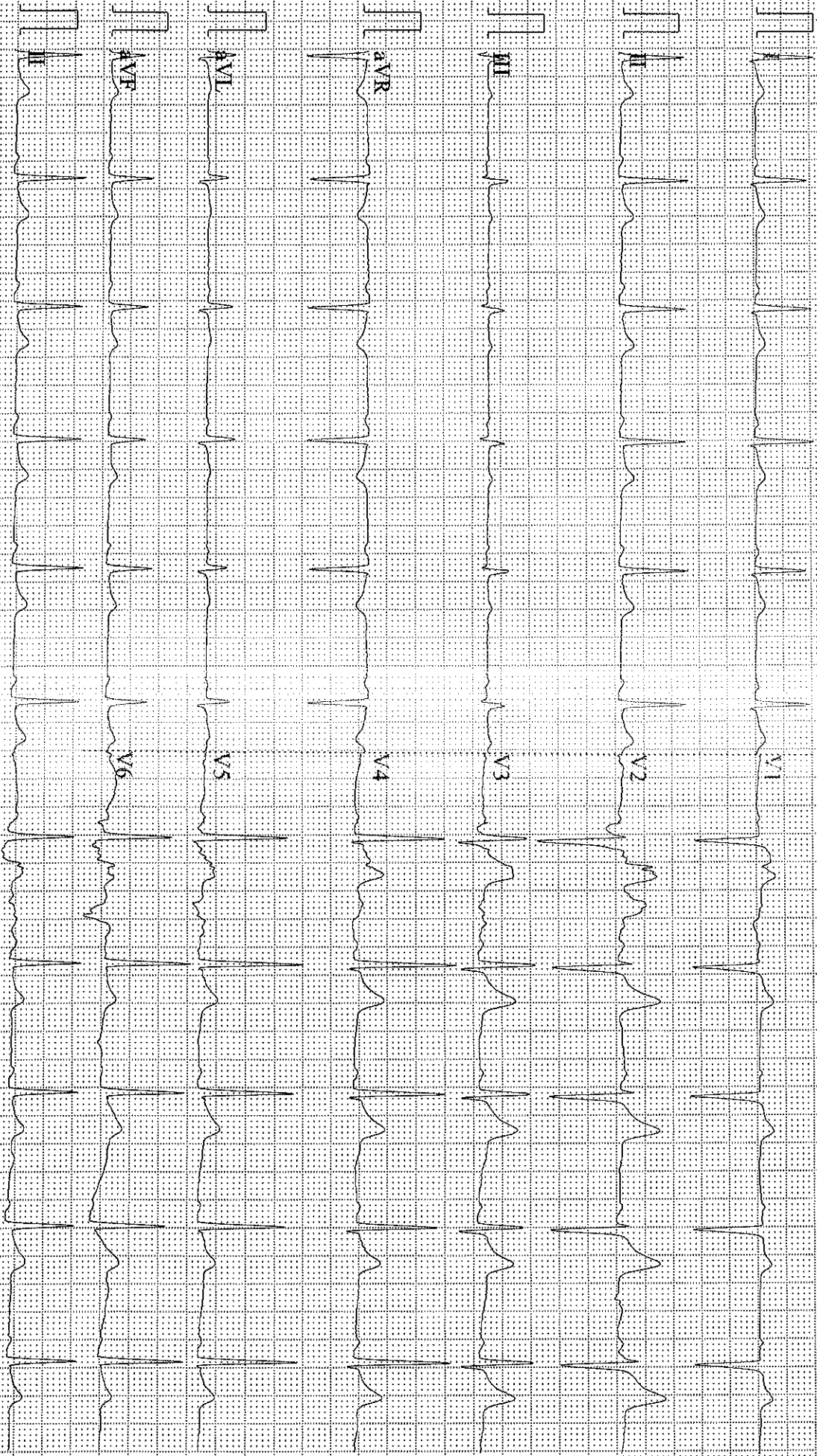
Male 31 Years

HR	64	bpm
P	164	ms
PR	150	ms
QRS	89	ms
QT/QTc	384/396	ms
PQRST	474/447	ms
RV5SV1	1.635/1.199	mV

Diagnosis Information:  
 Sinus Rhythm  
 \*\*\*Normal ECG\*\*\*

Report Confirmed by:

Normal



0.67-25Hz AC50 25mm/s 10mm/mV 2\*5s+1r v64

V202 SEMIP V17

BHAALAI AMIN GENERAL HOSPITAL ECHO DEPT


Patient No. : 23201214      Report Date : 25/02/2023  
Request No. : 190054670      25/02/2023 9.28 AM  
Patient Name : Mr. NARAYANA SWAMI SIVARATHRI  
Gender / Age : Male / 31 Years 9 Months 7 Days

### Echo Color Doppler

MITRAL VALVE : NORMAL  
AORTIC VALVE : TRILEAFLET, NORMAL  
TRICUSPID VALVE : NORMAL, NO TR,  
PULMONARY VALVE : NORMAL  
LEFT ATRIUM : NORMAL  
AORTA : NORMAL  
LEFT VENTRICLE : NORMAL, NO REGIONAL WALL MOTION ABNORMALITY,  
LVEF=60%  
RIGHT ATRIUM : NORMAL  
RIGHT VENTRICLE : NORMAL  
I.V.S. : INTACT  
I.A.S. : INTACT  
PULMONARY ARTERY : NORMAL  
PERICARDIUM : NORMAL  
COLOUR/DOPPLER : NO LV diastolic dysfunction  
FLOW MAPPING : NO AR, MR, TR, NO PAH

### FINAL CONCLUSION:

1. ALL CARDIAC CHAMBERS ARE NORMAL IN DIMENSIONS
2. NO REGIONAL WALL MOTION ABNORMALITY AT REST
3. NORMAL LV SYSTOLIC FUNCTION, LVEF=60%
4. NORMAL VALVES
5. NO LV DIASTOLIC DYSFUNCTION
6. NO AR, MR, TR, NO PULMONARY HYPERTENSION , ( IVC COLLAPSING )
7. NO PERICARDIAL EFFUSION, CLOT VEGETATION.

  
Dr. KILLOL KANERIA MD, DM  
Consultant Cardiologist





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**DEPARTMENT OF DIAGNOSTIC RADIOLOGY**

Patient No. : 23201214      Report Date : 25/02/2023  
Request No. : 190054707      25/02/2023 9.28 AM  
Patient Name : Mr. NARAYANA SWAMI SIVARATHRI  
Gender / Age : Male / 31 Years 9 Months 7 Days

**ADVANCED DIGITAL SOLUTIONS**

- Computer Radiography
- Ultra Sensitive Colour Doppler
- Ultra High Resolution Sonography
- Multi-Detector CT Scan
- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

**USG : Screening for Abdomen (excluding Pelvis) Or Upper Abdomen**

**Liver is normal in size and increased in echopattern.** No mass lesion identified. The hepatic veins are clear and patent. PV patent. No dilated IHBR.

Gall bladder is well distended and shows no obvious abnormality. Common bile duct measures 4 mm in diameter.

Pancreas shows no obvious abnormality. Tail obscured. Spleen is normal size and echopattern.

Both kidneys are normal in shape and position. Normal echogenicity and cortico medullary differentiation is noted. No hydronephrosis or mass lesion seen.

Prostate appears normal in size and volume is ~ 10 cc. Prostate measures 28mm x 28mm x 24mm.

Urinary bladder is well distended and appears normal.

No ascites.

**COMMENT:**

**Fatty liver.**

*Kindly correlate clinically*

*Prerna C Hasani*

**Dr.Prerna C Hasani, MD**  
Consultant Radiologist



• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES  
 • NOT VALID FOR MEDICO-LEGAL PURPOSES  
 • CLINICAL CORRELATION RECOMMENDED





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**DEPARTMENT OF DIAGNOSTIC RADIOLOGY**

Patient No. : 23201214      Report Date : 25/02/2023  
 Request No. : 190054651      25/02/2023 9.28 AM  
 Patient Name : Mr. NARAYANA SWAMI SIVARATHRI  
 Gender / Age : Male / 31 Years 9 Months 7 Days

**ADVANCED DIGITAL SOLUTIONS**

- Computer Radiography
- Ultra Sensitive Colour Doppler
- Ultra High Resolution Sonography
- Multi-Detector CT Scan
- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

**X-Ray Chest AP**

Both lung fields are clear.  
 Both costophrenic sinuses appear clear.  
 Heart size is normal.  
 Hilar shadows show no obvious abnormality.  
 Aorta is normal.  
 Elevated right dome of diaphragm seen

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES  
 • NOT VALID FOR MEDICO-LEGAL PURPOSES  
 • CLINICAL CORRELATION RECOMMENDED

*Prerna C Hasani*

**Dr. Prerna C Hasani, MD**  
 Consultant Radiologist

