

Name : Mr. SUNDAR BRATA SARKAR (43 /M)

Date : 24/02/2023

Address :

Examined by:

UHID : AMHL.0002037195

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

AHC No : AMHLAH168119



CHIEF COMPLAINTS

For corporate health checkup

PRESENT KNOWN ILLNESS

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



DRUG ALLERGY

NO KNOWN ALLERGY :25/02/2023



SYSTEMIC REVIEW

Cardiovascular system

Chest pain - on and off; Character - atypical

Respiratory system

- Nil Significant

Gastrointestinal system

- Nil Significant

Genitourinary system

- Nil Significant

Central nervous system

- Nil Significant

Eyes

- Nil Significant

ENT

- Nil Significant



Past medical history

Past medical history - nil significant



Personal history

Marital status - Married

No. of children - 1

Diet	- Non Vegetarian
Alcohol	- consumes alcohol occasionally
Smoking	- Yes
Type	- Cigarette
Frequency	- daily
Chews tobacco	- No
Physical activity	- Mild



Family history

Father	- has expired
Mother	- alive
Brothers	- 1
Coronary artery disease	- none
Cancer	- None

PHYSICAL EXAMINATION



General

Build	- over weight
Height	- 175
Weight	- 81
BMI	- 26.45
Pallor	- No
Oedema	- no



Cardiovascular system

Heart rate (Per minute)	- 72
Rhythm	- Regular
	- B.P. Sitting
Systolic(mm of Hg)	- 120
Diastolic(mm of Hg)	- 80
Heart sounds	- S1S2+

Respiratory system

Breath sounds - Normal vesicular breath sounds



Abdomen

Organomegaly - No

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Tenderness - No



Central nervous system

- No neurological deficit

Printed By : Benazir Begaum

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COMPLETE HAEMOGRAM PROFILE

Test Name	Result	Unit	Level	Range
Hemoglobin	16.3	g/dl	●	13.0-17.0
RBC COUNT	5.33	Million/ ul	●	4.5-5.5
Hematocrit - Hct:	51.2	%	●	41-53
MCV	96.0	fl	●	83-101
MCH	30.6	pg	●	27-32
MCHC	31.8	%	●	31.5-34.5
RDW	14.3 *	%	●	11.8-14.0
WBC Count	6100	/cu mm	●	4000-10000
Platelet Count	1.56	lacs/cu mm	●	1.5-4.0
Neutrophils	72	%	●	40-80
Lymphocytes	20	%	●	20-40
Monocytes	04	%	●	2-10
Eosinophils	04	%	●	01-06
Basophils	00	%	●	0-0
RBC:	Normocytic Normochromic cells			
Platelets:	Adequate.			
ERYTHROCYTE SEDIMENTATION RATE (ESR)	02	mm/1st hr	●	0-15

URINE ROUTINE AND MICROSCOPY

Test Name	Result	Unit	Level	Range
Volume:	30	mL		
Colour:	Pale Straw			
Appearance	Clear			
Specific Gravity	1.015			
pH:	6.0			
Albumin:	Not Detected			
Glucose	Not Detected			
Ketone:	Not Detected			
Bile Pigments	Not Detected			
RBC	Nil	/hpf		
Pus Cells	Occasional/hpf			
Epithelial Cells	Occasional/hpf			

Casts: Not Found
 Crystals: Not Found
 Note: Biological reference interval
 RBC- 0-2/hpf
 Pus Cell - 0-5/hpf.
 oUTSIDE CONTAINER.

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:	B			
Rh (D) Type:	POSITIVE			

LIVER FUNCTION TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
ALT(SGPT) - SERUM	35	U/L	●	10-40
ALBUMIN - SERUM	4.9	g/dL	●	3.5-5.1
ALKALINE PHOSPHATASE - SERUM	68	U/L	●	53-128
AST (SGOT) - SERUM	26	U/L	●	10-42
BILIRUBIN TOTAL - SERUM	0.8	mg/dL	●	0.0-1.0

LIPID PROFILE TEST (PACKAGE)

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

CREATININE - SERUM

Test Name	Result	Unit	Level	Range

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

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CREATININE - SERUM 0.9 mg/dL ● 0.9-1.3

GLOBULIN: (CALCULATED) - SERUM 2.8 g/dL ● 1.8-3.6

LIVER FUNCTION TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM	15	U/L	●	7-64

THYROID PROFILE - I(T3,T4 AND TSH)

Test Name	Result	Unit	Level	Range
TOTAL T3: TRI IODOTHYRONINE - SERUM	1.0	ng/ml	●	0.8-2
TOTAL T4: THYROXINE - SERUM	9.2	µg/dL	●	5.1-14.1

GLUCOSE - PLASMA (FASTING)

Test Name	Result	Unit	Level	Range
GLUCOSE - PLASMA (FASTING)	85	mg/dL	●	70-99

LIPID PROFILE TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
TRIGLYCERIDES - SERUM	204 *	mg/dL	●	0-150

GLUCOSE - PLASMA (POST PRANDIAL)

Test Name	Result	Unit	Level	Range
GLUCOSE - PLASMA (POST PRANDIAL)	88	mg/dL	●	70-140

THYROID PROFILE - I(T3,T4 AND TSH)

Test Name	Result	Unit	Level	Range
TSH: THYROID STIMULATING HORMONE - SERUM	1.9	µIU/mL	●	0.270-4.200

HBA1C (GLYCOSYLATED HAEMOGLOBIN)-WHOLE BLOOD

Test Name	Result	Unit	Level	Range
HBA1C (GLYCOSYLATED HAEMOGLOBIN)-WHOLE BLOOD	4.9	%	●	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	5.5	mg/dL	●	3.5-7.2

LIPID PROFILE TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
HDL CHOLESTEROL - SERUM	45	mg/dL	●	30-70
LDL CHOLESTEROL -SERUM	130	mg/dL	●	Optimal: <100
VLDL CHOLESTEROL - SERUM (Calculated)	25	mg/dL	●	0-35

LIVER FUNCTION TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
BILIRUBIN CONJUGATED (DIRECT) - SERUM	0.1	mg/dL	●	0.0-0.2

LIVER FUNCTION TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
PROTEIN TOTAL - SERUM	7.7	g/dL	●	6.4-8.3

PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL) - SERUM

Test Name	Result	Unit	Level	Range
PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL) - SERUM	0.4	ng/mL	●	0.00-6.50

BUN (BLOOD UREA NITROGEN)

Test Name	Result	Unit	Level	Range
BUN (BLOOD UREA NITROGEN)	8.3	mg/dL	●	7.0-18.0

LIVER FUNCTION TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
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A/G - RATIO 1.7 ● 1.0-2.0

ECG

SINUS RHYTHM.
1ST DEGREE A-V BLOCK.
RIGHT AXIS DEVIATION.
POSSIBLE ST- SEGMENT ELEVATION ANTERIOR
LEADS.
LARGE T WAVE IN V2-V3.

TREADMILL TEST / STRESS TEST

STRESS TEST IS NEGATIVE FOR PROVOCABLE
MYOCARDIAL ISCHAEMIA.

ULTRASOUND SCREENING WHOLE ABDOMEN

* Grade-I fatty liver.

Dr. ARJUN ROY
DNB RESIDENT
In consultation with

X-RAY CHEST PA

Chest skiagram does not reveal any significant
abnormality.

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

Haematology

STOOL ROUTINE

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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.