

### CONCLUSION OF HEALTH CHECKUP

ECU Ref. No : MH/22/001379      Patient No : 21044771      Date : 11/06/2022  
Name : **VIJAY BHADUR**      Sex / Age : M      37  
Height / Weight : 185 Cms    132 K    Ideal Weigh    80 Kgs      BMI : 38.6

**Dr. Manish Mittal**  
Physician

*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.*

Name : VIJAY BHADUR

Sex / Age : M 37

**Present History**

NO MEDICAL COMPLAINTS AT PRESENT.

**Past History**

OPERATED FOR PILES IN PAST

**Family History**

FATHER : HYPERTENSION ; DIABETES.  
MOTHER : HYPERTENSION ; DIABETES ; IHD.

**Personal History**

VEG DIET.

**Clinical Examination**

B.P. 130/80 mm Hg

Pulse 72/MIN REG.

Others -

**Respiratory System**

CLINICALLY NAD

**Cardio Vascular System**

CLINICALLY NAD

**Abdominal System**

CLINICALLY NAD

**Neurological System**

CLINICALLY NAD

Name : **VIJAY BHADUR**

Sex / Age : M 37

**Eye Checkup**

Doctor Name

**Dr. Ketan J. Patel**

**Left**

History

NIL

NIL

Uncorrected vision

6/6

6/6

Corrected vision

N.6

N.6

IOP

-

-

Fundus

NORMAL

NORMAL

Any other

NIL

NIL

Advice

NIL

### Dietary Assessment

Name : **VIJAY BHADUR** Sex / Age : M 37  
Height : 185 Cms Weight : 132 Kgs Ideal Weight : 80 Kgs BMI : 38.6

Body Type : Normal / Underweight / Over weight

#### Diet History

Diet preference : Vegetarian / Eggeterian / Mixed  
Frequency of consuming fried food : / day / week or occasional  
Frequency of consuming sweets : / day or occasional  
Frequency of consuming outside food : / 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 servings of all fruits and vegetables, For Diabetic patients avoid Mango, Chikoo, Banana, Grapes and Custurd Apple.  
Drink 3 to 4 liters (12 - 14 glass) of water daily.  
Eat Beetroot, 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.

Dietitian

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mr. VIJAY BAHADUR  
Gender / Age : Male / 37 Years 7 Months 14 Days  
MR No / Bill No. : 21044771 / 231012021  
Consultant : Dr. Manish Mittal  
Location : OPD

Type : OPD  
Request No. : 48911  
Request Date : 11/06/2022 08:46 AM  
Collection Date : 11/06/2022 09:43 AM  
Approval Date : 11/06/2022 12:24 PM

**CBC + ESR**

Test	Result	Units	Biological Ref. Range
<b>Haemoglobin.</b>			
Haemoglobin	14.1	gm/dL	13 - 17
Red Blood Cell Count (T-RBC)	<b>4.14</b>	mill/cmm	4.5 - 5.5
Hematocrit (HCT)	41.0	%	40 - 50
Mean Corpuscular Volume (MCV)	99.0	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	<b>34.1</b>	pg	27 - 32
MCH Concentration (MCHC)	34.4	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	11.9	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	45.0	fl	39 - 46
<b>Total Leucocyte Count (TLC)</b>			
Total Leucocyte Count (TLC)	5.01	thou/cmm	4 - 10
<b>Differential Leucocyte Count</b>			
Polymorphs	44	%	40 - 80
Lymphocytes	<b>49</b>	%	20 - 40
Eosinophils	02	%	1 - 6
Monocytes	05	%	2 - 10
Basophils	00	%	0 - 2
Polymorphs (Abs. Value)	2.20	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	2.46	thou/cmm	1 - 3
Eosinophils (Abs. Value)	<b>0.10</b>	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.23	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.02	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.2	%	1 - 3 : Borderline > 3 : Significant
<b>Platelet Count</b>			
Platelet Count	282	thou/cmm	150 - 410
Smear evaluation	Adequate		
ESR	<b>15</b>	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.

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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

For Health-care professionals: A number of variables & technical conditions have to be followed to ensure with utmost findings and other related investigations before any test reports to health. Accuracy & safety may be maintained.

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Patient Name : Mr. VIJAY BAHADUR Type : OPD  
Gender / Age : Male / 37 Years 7 Months 14 Days Request No. : 48911  
MR No / Bill No. : 21044771 / 231012021 Request Date : 11/06/2022 08:46 AM  
Consultant : Dr. Manish Mittal Collection Date : 11/06/2022 09:43 AM  
Location : OPD Approval Date : 11/06/2022 02:30 PM

### Haematology

Test	Result	Units	Biological Ref. Range
<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 ---

Dr. Rakesh Vaidya  
MD (Path). DCP.

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 Approval Date : 11/06/2022 11:44 AM

**Clinical Biochemistry**

Test	Result	Units	Biological Ref. Range
Fasting Plasma Glucose	97	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	101	mg/dL	70 - 140

By Hexokinase method on RXL Dade Dimesion

--- End of Report ---

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 MD (Path). DCP.



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Clinical Biochemistry

Test	Result	Units	Biological Ref. Range
Glycosylated Hemoglobin (HbA1c)	6.3	%	
estimated Average Glucose (e AG) *	134.11	mg/dL	

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

\* Calculated value 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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Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea <i>(By Urease Kinetic method on RXL Dade Dimension)</i>	19	mg/dL	10 - 45
Creatinine <i>(By Modified Kinetic Jaffe Technique)</i>	0.74	mg/dL	0.9 - 1.3
Estimate Glomerular Filtration rate <i>(Ref. range &gt; 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)</i>	More than 60		
Uric acid <i>(By Uricase / Catalase method on RXL Siemens)</i>	6.2	mg/dL	3.4 - 7.2

— End of Report —

Dr. Sejal Odedra  
M.D.Pathology

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## Liver Function Test (LFT)

Test	Result	Units	Biological Ref. Range
<b>Bilirubin</b>			
Bilirubin - Total	0.61	mg/dL	0 - 1
Bilirubin - Direct	0.15	mg/dL	0 - 0.3
Bilirubin - Indirect	0.46	mg/dL	0 - 0.7
<i>(By Diazotized sulfanilic acid on RXL Dade Dimension.)</i>			
Aspartate Aminotransferase (SGOT/AST)	16	U/L	15 - 40
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alanine Aminotransferase (SGPT/ALT)	30	U/L	10 - 40
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alkaline Phosphatase	92	U/L	53 - 128
<i>(BY PNPP AMP method on RXL Dade Dimension.)</i>			
Gamma Glutamyl Transferase (GGT)	39	U/L	15 - 85
<i>(By IFCC method on RXL Dade Dimension.)</i>			
<b>Total Protein</b>			
Total Proteins	7.45	gm/dL	6.4 - 8.2
Albumin	3.75	gm/dL	3.4 - 5
Globulin	3.7	gm/dL	3 - 3.2
A : G Ratio	1.01		1.1 - 1.6
<i>(By Biuret endpoint and Bromocresol purple method on RXL Dade Dimesion.)</i>			

--- End of Report ---

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**Complete Lipid Profile**

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.

Test	Result	Units	Biological Ref. Range
<b>Complete Lipid Profile</b>			
Appearance	Clear		
Triglycerides (By Lipase / Glycerol dehydrogenase on RXL Dade Dimension < 150 Normal 150-199 Borderline High 200-499 High > 499 Very High)	121	mg/dL	1 - 150
Total Cholesterol (By enzymatic colorimetric method on RXL Dade Dimension <200 mg/dL - Desirable 200-239 mg/dL - Borderline High > 239 mg/dL - High)	185	mg/dL	1 - 200
HDL Cholesterol (By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension < 40 Low > 60 High)	<b>29</b>	mg/dL	40 - 60
Non HDL Cholesterol (calculated) (Non- HDL Cholesterol < 130 Desirable 139-159 Borderline High 160-189 High > 191 Very High)	156	mg/dL	1 - 130
LDL Cholesterol (By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension < 100 Optimal 100-129 Near / above optimal 130-159 Borderline High 160-189 High > 189 Very High)	<b>131</b>	mg/dL	1 - 100
VLDL Cholesterol (calculated)	24.2	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	4.52		2.1 - 3.5
T. Ch./HDL Ch. Ratio (Recent NECP / ATP III Guidelines / Classification (mg/dl) :)	6.38		3.5 - 5

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Clinical Biochemistry

Test	Result	Units	Biological Ref. Range
Total PSA	0.491	ng/ml	0 - 4

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

Remark

Age related reference range for interpretation :

< 40 yrs : 0.21 - 1.72

40 - 49 yrs : 0.27 - 2.19

50 - 59 yrs : 0.27 - 3.42

60 - 69 yrs : 0.27 - 6.16

>69 yrs : 0.21 - 6.77

TPSA may be raised usually mildly in benign prostatic conditions

like hyperplasia. Typically 30 % of BPH may show values

between 4-10 and 7 % between 10-40.

In Prostatic Malignancy 43 % show values below 4

21 % between 4 to 10

20 % between 10 to 40 &

16 % above 40)

— End of Report —

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MD (Path). DCP.

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Thyroid Hormone Study Biological Ref. Range

Test	Result	Units	Biological Ref. Range
Triiodothyronine (T3)	1.59	ng/ml	

(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))

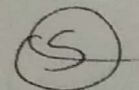
Thyroxine (T4)	10.21	mcg/dL	
----------------	-------	--------	--

(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)	2.11	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 —



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M.D.Pathology

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Consultant	: Dr. Manish Mittal	Collection Date	: 11/06/2022 09:43 AM
Location	: OPD	Approval Date	: 11/06/2022 01:52 PM

**Urine Routine**

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Test	Result	Units	Biological Ref. Range
<b>Physical Examination</b>			
Quantity	50	mL	
Colour	Pale Yellow		
Appearance	Clear		
<b>Chemical Examination (By Reagent strip method)</b>			
pH	6.0		
Specific Gravity	1.015		
Protein	Negative	gm/dL	Negative
Glucose	Negative	mg/dL	Negative
Ketones	Negative		Negative
Bilirubin	Negative		Negative
Urobilinogen	Negative		Negative (upto 1)
Blood	Negative		Negative
Bile Salt	Absent		Absent
Leucocytes	Trace		Negative
Bile Pigments	Absent		Absent
Nitrite	Negative		Negative
<b>Microscopic Examination (After Centrifugation at 2000 rpm for 10 min)</b>			
Red Blood Cells	Nil	/hpf	0 - 2
Leucocytes	Present (2-5)	/hpf	0 - 5
Epithelial Cells	Present (0-2)	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil		Nil
Mucus	Absent		Absent
Organism	Absent		Absent

--- End of Report ---

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  - Mammography
  - Interventional Radiology
  - Digital Subtraction Angiography
  - Foetal Echocardiography
  - Echocardiography

Patient No. : 21044771      Report Date : 11/06/2022  
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**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.

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

**Dr. Priyanka Patel, MD**  
Consultant Radiologist







**DEPARTMENT OF DIAGNOSTIC RADIOLOGY**

Patient No. : 21044771      Report Date : 11/06/2022  
Request No. : 190022944      11/06/2022 8.46 AM  
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- 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 ~ 23 cc. Prostate measures 34mm x 38mm x 33mm.

Urinary bladder is well distended and appears normal.

No ascites.

**COMMENT:**

**Fatty liver.**

*Kindly correlate clinically*

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

*Hasani*

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





**BHAILAL AMIN  
GENERAL HOSPITAL**

ESTD. 1944



Patient No. : 21044771      Report Date : 11/06/2022  
Request No. : 190023021      11/06/2022 8.46 AM  
Patient Name : VIJAY BAHADUR  
Gender / Age : Male / 37 Years 7 Months 14 Days

### Echo Color Doppler

MITRAL VALVE	:	NORMAL, NO MS, NO MR
AORTIC VALVE	:	TRILEAFLET, NO AS, NO AR
TRICUSPID VALVE	:	NORMAL, NO TR, NO PAH
PULMONARY VALVE	:	NORMAL, NO PR, NO PS
LEFT ATRIUM	:	NORMAL SIZE
AORTA	:	NORMAL
LEFT VENTRICLE	:	NORMAL LVEF - 60%, NO RWMA AT REST
RIGHT ATRIUM	:	NORMAL SIZE
RIGHT VENTRICLE	:	NORMAL SIZE
I.V.S.	:	INTACT
I.A.S.	:	INTACT
PULMONARY ARTERY	:	NORMAL
PERICARDIUM	:	NO EFFUSION
COLOUR/DOPPLER FLOW MAPPING	:	NO MR // AR // TR, NO PAH

### FINAL CONCLUSION:

1. NORMAL SIZED ALL CARDIAC CHAMBERS
2. NORMAL LV SYSTOLIC FUNCTION LVEF - 60%
3. NO RESTING REGIONAL WALL MOTION ABNORMALITY
4. NORMAL VALVES, NO MITRAL / AORTIC STENOSIS
5. NORMAL RIGHT HEART SIZE AND RV PRESSURES
6. NO PERICARDIAL EFFUSION, CLOT OR VEGETATION SEEN, SR+.

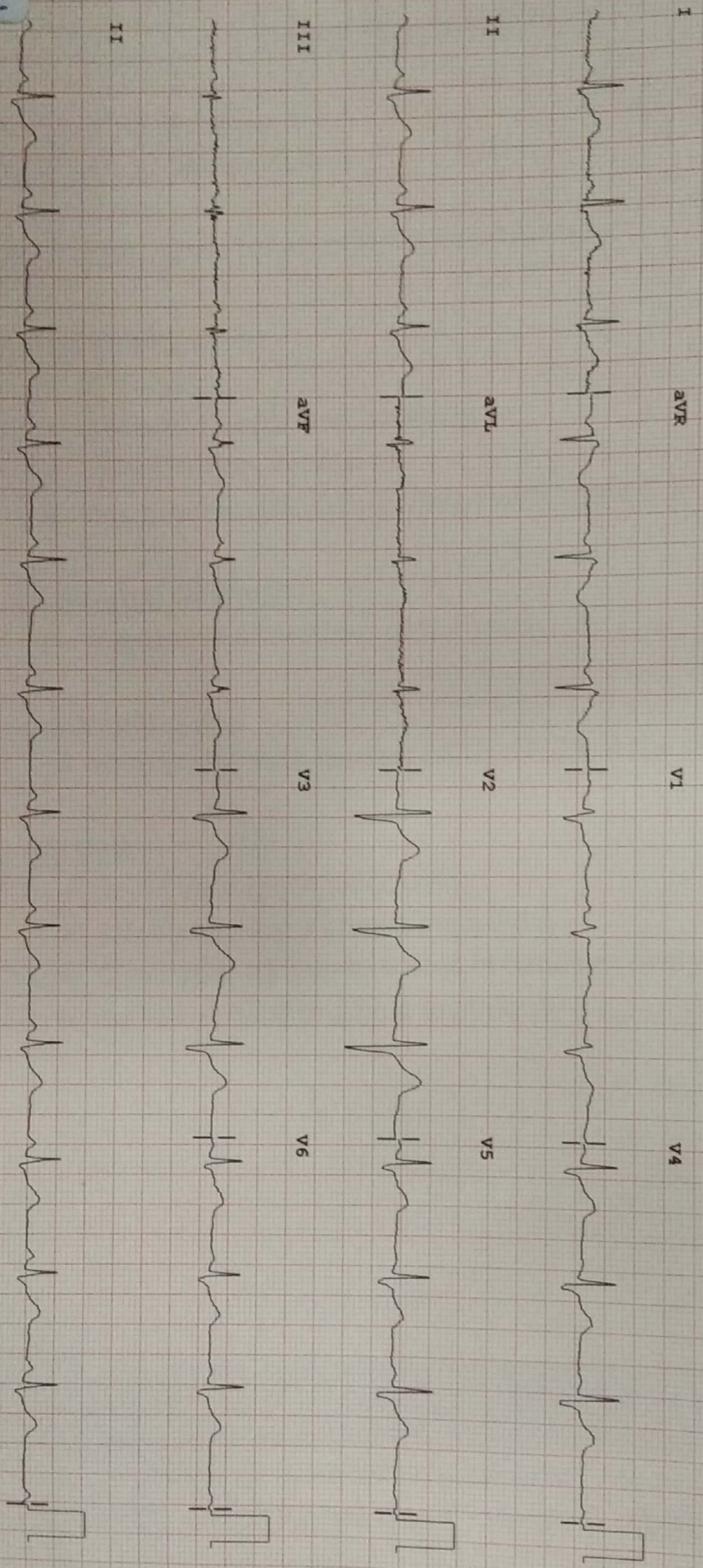
*Kaneria*  
DR. KILLOL KANERIA, M.D., D.M., CARD.

ECU/21/044771  
37 Years

11-Jun-22

11:08:14 AM MR VIJAY BAHADUR  
Male

Rate 76  
PR 144  
QRSD 104  
QT 384  
QTc 432  
--AXIS--  
P 61  
QRS 44  
T 36



Dev: Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10 mm/mV F 50 ~ 0.5-150 Hz W PH08 P?

  
**BHAILAL AMIN GENERAL HOSPITAL**  
An NABH, NABL & ISO Accredited Institute

Doctor MANISH MITTAL

Dental assessment form

11/06/2022

Name: Vijay Bahadur  
Age/ Sex: 37 years/Male

Patient has come for an oral hygiene check up

On Examination:

- Calculus+
- History of horizontal brushing
- Mild attrition, recession
- Fractured acrylic facing bridge with respect to 16, 17, 18

Provisional diagnosis:

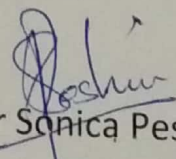
- Regressive alterations of the teeth

Treatment plan:

- New bridge with respect to 16, 17, 18, if the patient desires

Advised:

- Brush your teeth twice daily
- Salt water rinses atleast once a day.
- Clean your tongue and floss in between everyday.
- Follow vertical brushing technique.

  
Dr Sonica Peshin

ITEM CODE:SMD068

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