

NAME:	Mr. Uday S. Girkar	UHID:	5178
AGE:	41 YRS	DATE OF HEALTHCHECK:	25/2/23
GENDER:	Male		

HEIGHT:	184 cm	MARITAL STATUS:	M
WEIGHT:	110.6 kg	NO OF CHILDREN:	1
BMI:	32.7		

C/O:

K/C/O: - NO

PRESENT MEDICATION: - NO

P/M/H: - NO

P/S/H: - NO

ALLERGY: - NO

PHYSICAL ACTIVITY: Active/ Moderate/ Sedentary ✓

H/A: SMOKING:

FAMILY HISTORY FATHER:

ALCOHOL:

MOTHER:

TOBACCO/PAN:

O/E:

LYMPHADENOPATHY:

BP: 150/100 PULSE: - 96/min

PALLOR/ICTERUS/CYNOSIS/CLUBBING:

TEMPERATURE: M SCARS:

OEDEMA:

S/E:

RS:



P/A:



CVS: S1 S2

Extremities & Spine: - NO

ENT: -

CNS: cerebellum, vestibular

Skin: - NO

Vision:

	Without Glass		With Glass	
	Right Eye	Left Eye	Right Eye	Left Eye
FAR :				
NEAR :				
COLOUR VISION:	—————			

OPHTHALMIC EVALUATION

UHID No.: 5178

Date: 25/2/23

Name: M. Uday Age: 41 Gender: Male / Female

Without Correction :

Distance: Right Eye _____ Left Eye _____

Near : Right Eye _____ Left Eye _____

With Correction :

Distance: Right Eye 6/6 Left Eye 6/5
N6 N6

Near : Right Eye _____ Left Eye _____

	RIGHT					LEFT				
	SPH	CYL	AXIS	PRISM	VA	SPH	CYL	AXIS	PRISM	VA
Distance	<u>0.50</u>					<u>0.50</u>				
Near	<u>+0.50</u>					<u>+0.50</u>				

Colour Vision : Normal (BU) Presbyopia

Anterior Segment Examination : _____

Pupils : NO (BU)

Fundus : _____

Intraocular Pressure : 12 mmHg (BU)

Diagnosis : eye glasses.

Advice : _____

Re-Check on 1 mths (This Prescription needs verification every year)

DR. RUCHIRA SHARMA
 M. S. (OPHTH)
 CONSULTING OPHTHALMOLOGIST
 & MICRO SURGEON
 REG. No.: 3262 / 09 / 02

Dr. [Signature]
 (Consultant Ophthalmologist)

DENTAL CHECKUP

Name: <u>Mr. Uday Jykar</u>	MR NO:
Age/Gender : <u>41/M</u>	Date: <u>25/2</u>

Medical history: Diabetes Hypertension _____

EXAMINATION	UPPER RIGHT	UPPER LEFT	LOWER LEFT	LOWER RIGHT
Calculus& Stains				
Mobility				
Caries (Cavities)				
a)Class 1 (Occlusal)				
b)Class 2 (Proximal)				
c)Class 5 (Cervical)				
Faulty Restoration				
Faulty Crown				
Fractured Tooth				
Root Pieces				
Impacted Tooth				
Missing Tooth				
Existing Denture				

NA

TREATMENT ADVISED:

TREATMENT	UPPER RIGHT	UPPER LEFT	LOWER LEFT	LOWER RIGHT
Restoration / Filling				
Root Canal Therapy				
Crown				
Extraction				

Oral Prophylaxis: Scaling & polishing
 Orthodontic Advice for Braces: Yes / No
 Prosthetic Advice to Replace Missing Teeth: Denture Bridge Implant
 Oral Habits: Tobacco Cigarette Others since ___ years
 Advice to quit any form of tobacco as it can cause cancer.
 Other Findings: NA

DR. SNEHA NITIN GADHIYA
 BDS (BACHELOR OF DENTAL SURGERY)
 REG NO: 39708

• ANDHERI • COLABA • NASHIK • VASHI

Name : Mr. Uday Shriram Girkar Gender : Male Age : 41 Years
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Barcode No : 6718 Reported On : 25/02/2023 18:06

TEST RESULTS BIOLOGICAL REFERENCE INTERVAL

CBC (Complete Blood Count)-WB (EDTA)

Haemoglobin(Colorimetric method)	16.1	g/dl	13 - 18
RBC Count (Impedance)	5.42	Millions/cumm.	4 - 6.2
PCV/Haematocrit(Calculated)	46.7	%	35 - 55
MCV:(Calculated parameter)	86.3	fl	78 - 98
MCH:(Calculated parameter)	29.7	pg	26 - 34
MCHC:(Calculated parameter)	34.4	gm/dl	30 - 36
RDW-CV:	14.3	%	11.5 - 16.5
Total Leucocyte count(Impedance)	8550	/cumm.	4000 - 10500
Neutrophils:	70	%	40 - 75
Lymphocytes:	23	%	20 - 40
Eosinophils:	03	%	0 - 6
Monocytes:	04	%	2 - 10
Basophils:	00	%	0 - 2
Platelets Count(Impedance method)	1.92	Lakhs/c.mm	1.5 - 4.5
MPV	8.7	fl	6.0 - 11.0
Peripheral Smear (Microscopic examination)			
RBCs:	Normochromic, Normocytic		
WBCs:	Normal		
Platelets	Adequate		
Note:	Test Run on 5 part cell counter.		

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Ms Kaveri Gaonkar
Verified By

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Dr. Milind Patwardhan
M.D(Path)
Chief Pathologist

End of Report
Results are to be correlated clinically


Name : Mr. Uday Shriram Girkar Gender : Male Age : 41 Years
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TEST RESULTS BIOLOGICAL REFERENCE INTERVAL
ESR(Westergren Method)

Erythrocyte Sedimentation Rate:- 08 mm/1st hr 0 - 20

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TEST

RESULTS

Blood Grouping (ABO & Rh)-WB(EDTA) Serum

ABO Group:

:B:

Rh Type:

Positive

Method :

Tube Agglutination (forward and reverse)

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TEST RESULTS BIOLOGICAL REFERENCE INTERVAL

HbA1c(Glycosylated Haemoglobin)WB-EDTA

(HbA1C) Glycosylated Haemoglobin : 5.1 %
 Normal <5.7 %
 Pre Diabetic 5.7 - 6.5 %
 Diabetic >6.5 %
 Target for Diabetes on therapy < 7.0 %
 Re-evaluation of therapy > 8.0 %

Mean Blood Glucose : 99.67 mg/dL

Correlation of A1C with average glucose

A1C (%)	Mean Blood Glucose (mg/dl)
6	126
7	154
8	183
9	212
10	240
11	269
12	298


Method High Performance Liquid Chromatography (HPLC).

INTERPRETATION

- * The HbA1c levels correlate with the mean glucose concentration prevailing in the course of Pts recent history (apprx 6-8 weeks) & therefore provides much more reliable information for glycemia control than the blood glucose or urinary glucose.
- * This Methodology is better then the routine chromatographic methods & also for the daibetic pts.having HEMOGLBINOPATHIES OR UREMIA as Hb varaints and uremia does not INTERFERE with the results in this methodology.
- * It is recommended that HbA1c levels be performed at 4 - 8 weeks during therapy in uncontrolled DM pts.& every 3 - 4 months in well controlled daibetics .
- * Mean blood glucose (MBG) in first 30 days (0-30)before sampling for HbA1c contributes 50% whereas MBG in 90 - 120 days contribute to 10% in final HbA1c levels

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Indira Health And Lifestyle Private Limited.

NABL Accredited Laboratory

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Besides Neel Siddhi Tower, Vashi-Navi Mumbai-400703.

Tel.: (022) - 2788 1322 / 23 / 24 ☎ 8291490000

Email: apolloclinicvashi@gmail.com

Apollo Clinic
VASHI


Name : Mr. Uday Shriram Girkar Gender : Male Age : 41 Years
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TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
PLASMA GLUCOSE			
Fasting Plasma Glucose :	102	mg/dL	Normal < 100 mg/dL Impaired Fasting glucose : 101 to 125 mg/dL Diabetes Mellitus : \geq 126 mg/dL (on more than one occasion) (American diabetes association guidelines 2016)
Post Prandial Plasma Glucose :	104	mg/dL	Normal < 140 mg/dL Impaired Post Prandial glucose : 140 to 199 mg/dL Diabetes Mellitus : \geq 200 mg/dL (on more than one occasion) (American diabetes association guidelines 2016)

Method : Hexokinase

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TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
Lipid Profile- Serum			
S. Cholesterol(Oxidase)	154	mg/dL	Desirable < 200 Borderline:>200-<240 Undesirable:>240
S. Triglyceride(GPO-POD)	134	mg/dL	Desirable < 150 Borderline:>150-<499 Undesirable:>500
S. VLDL:(Calculated)	26.8	mg/dL	Desirable <30
S. HDL-Cholesterol(Direct)	37.3	mg/dL	Desirable > 60 Borderline:>40-<59 Undesirable:<40
S. LDL:(calculated)	89.9	mg/dL	Desirable < 130 Borderline:>130-<159 Undesirable:>160
Ratio Cholesterol/HDL	4.1		3.5 - 5
Ratio of LDL/HDL	2.4		2.5 - 3.5

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TEST RESULTS UNITS BIOLOGICAL REFERENCE INTERVAL


LFT(Liver Function Tests)-Serum

S.Total Protein (Biuret method)	7.07	g/dL	6.6 - 8.7
S.Albumin (BCG method)	4.59	g/dL	3.5 - 5.2
S.Globulin (Calculated)	2.48	g/dL	2 - 3.5
S.A/G Ratio:(Calculated)	1.85		0.9 - 2
S.Total Bilirubin (DPD):	0.67	mg/dL	0.1 - 1.2
S.Direct Bilirubin (DPD):	0.25	mg/dL	0.1 - 0.3
S.Indirect Bilirubin (Calculated)	0.42	mg/dL	0.1 - 1.0
S.AST (SGOT)(IFCC Kinetic with P5P): 15		U/L	5 - 40
S.ALT (SGPT) (IFCC Kinetic with P5P): 29		U/L	5 - 41
S.Alk Phosphatase(pNPP-AMP Kinetic): 66		U/L	40 - 129
S.GGT(IFCC Kinetic): 27		U/L	11 - 50

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TEST	RESULTS	BIOLOGICAL REFERENCE INTERVAL
BIOCHEMISTRY		
S.Urea(Urease Method)	14.5 mg/dl	10.0 - 45.0
BUN (Calculated)	6.76 mg/dL	5 - 20
S.Creatinine(Jaffe's Method)	1.00 mg/dl	0.50 - 1.3
BUN / Creatinine Ratio	<u>6.76</u>	9:1 - 23:1
S.Uric Acid(Uricase Method)	4.0 mg/dl	3.4 - 7.0

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TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
Thyroid (T3,T4,TSH)- Serum			
Total T3 (Tri-iodo Thyronine) (ECLIA)	1.57	nmol/L	1.3 - 3.1 nmol/L
Total T4 (Thyroxine) (ECLIA)	95.16	nmol/L	66 - 181 nmol/L
TSH (Thyroid-stimulating hormone) (ECLIA)	1.24	□IU/mL	Euthyroid :0.35 - 5.50 □IU/mL Hyperthyroid : < 0.35 □IU/mL Hypothyroid : > 5.50 □IU/mL

Grey zone values observed in physiological/therapeutic effect.

Note:

T3 :

1. Decreased values of T3 (T4 and TSH normal) have minimal Clinical significance and not recommended for diagnosis of hypothyroidism.
2. Total T3 and T4 values may also be altered in other conditions due to changes in serum proteins or binding sites ,Pregnancy, Drugs (Androgens,Estrogens,O C pills, Phenytoin) etc. In such cases Free T3 and free T4 give corrected Values.
3. Total T3 may decrease by < 25 percent in healthy older individuals

T4 :

1. Total T3 and T4 Values may also be altered in other condition due to changes in serum proteins or binding sites, Pregnancy Drugs (Androgens,Estrogens,O C pills, Phenytoin), Nerphrosis etc. In such cases Free T3 and Free T4 give Corrected values.

TSH :

1. TSH Values may be transiently altered because of non thyroidal illness like severe infections,liver disease, renal and heart failure. Severe burns, trauma and surgery etc.
2. Drugs that decrease TSH values e,g L dopa, Glucocorticoids.
3. Drugs that increase TSH values e.g. Iodine,Lithium, Amiodarone

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M.D(Path)

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TEST	RESULTS	BIOLOGICAL REFERENCE INTERVAL
PROSTATE SPECIFIC ANTIGEN		
Prostate Specific Antigen (ECLIA):	0.243ng/mL	0.03 - 3.5 ng/ml

INTERPERETATION

Serum PSA is a useful diagnostic tool for diagnosis of prostatic cancer. PSA levels should always be assessed in conjunction with the patient's medical history, clinical examination, prostatic acid phosphatase and radiological findings
Elevated levels are indicative of pathologic conditions of prostatitis, Benign hyperplasia or Prostatic adenocarcinoma
Rate of the fall of PSA levels to non detectable levels can occur following radiotherapy, hormonal therapy or radical surgical removal of the prostate & provides information of the success of treatment.
Inflammation or trauma of prostate can lead to elevated PSA levels of varying magnitude and duration.

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TEST RESULTS BIOLOGICAL REFERENCE INTERVAL

URINE REPORT

PHYSICAL EXAMINATION

QUANTITY	40	mL	
COLOUR	Yellow		
APPEARANCE	Clear		Clear
SEDIMENT	Absent		Absent

CHEMICAL EXAMINATION(Strip Method)

REACTION(PH)	7.0		4.6 - 8.0
SPECIFIC GRAVITY	1.005		1.005 - 1.030
URINE ALBUMIN	Absent		Absent
URINE SUGAR(Qualitative)	Absent		Absent
KETONES	Absent		Absent
BILE SALTS	Absent		Absent
BILE PIGMENTS	Absent		Absent
UROBILINOGEN	Normal(<1 mg/dl)		Normal
OCCULT BLOOD	Absent		Absent
Nitrites	Absent		Absent

MICROSCOPIC EXAMINATION

PUS CELLS	Occasional		0 - 3/hpf
RED BLOOD CELLS	Nil /HPF		Absent
EPITHELIAL CELLS	Occasional		3 - 4/hpf
CASTS	Absent		Absent
CRYSTALS	Absent		Absent
BACTERIA	Absent		Absent

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Dr. Milind Patwardhan
M.D(Path)

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End of Report
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Uday, Girkar
5178

41 Years

Male

25.02.2023 8:49:43
Apollo Clinic
1st Flr, The Emerald, Sector-12,
Vashi, Mumbai-400703.

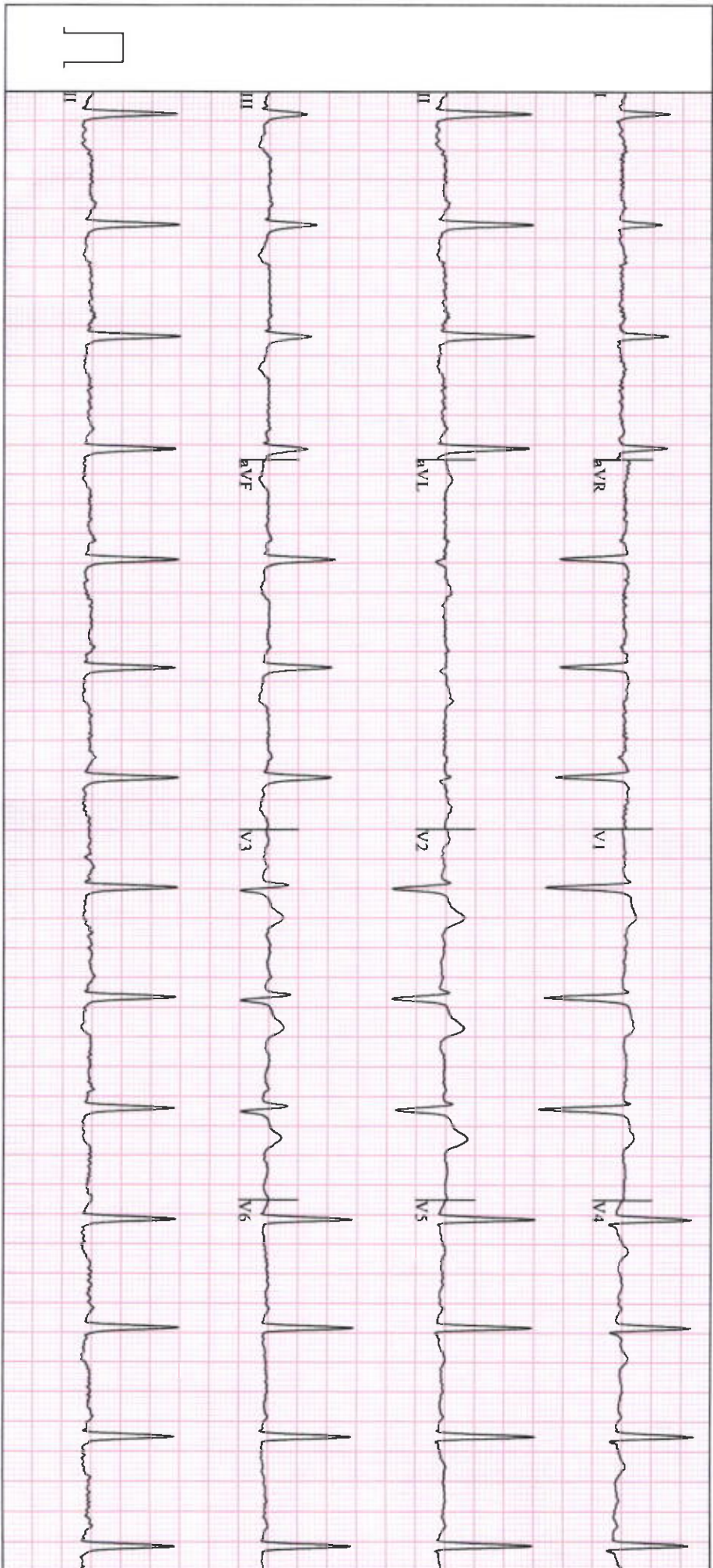
81 bpm
--/-- mmHg

QRS : 96 ms
QT / QTcBaz : 362 / 420 ms
PR : 100 ms
P : 68 ms
RR / PP : 744 / 740 ms
P / QRS / T : 21 / 57 / -48 degrees

Sinus rhythm with short PR
ST & T wave abnormality, consider inferior ischemia
Abnormal ECG

ST depression in T1, II, III aVF.

DR. RISHI A. BHARGAVA
MD, DM (Cardiology)
CONSULTANT CARDIOLOGIST
Reg. No.: 2019/02/0494



□

GE MAC2000

1.1

12SL™ V241

25 mm/s

10 mm/mV

ADS

0.56-20 Hz

50 Hz

Unconfirmed
4x2.5x3_25_R1

1/1

PATIENT'S NAME	MR UDAY S GIRKAR	AGE :- 41Y/M
UHID	5178	DATE :- .25 Feb. 23

2D Echo and Colour doppler report

- All cardiac chambers are normal in dimension.
- No obvious resting regional wall motion abnormalities (RWMA).
- Interatrial and Interventricular septum – Appears Normal
- Valves – Structurally normal.
- Good biventricular function.
- IVC is normal.
- Pericardium is normal.
- Great vessels - Origin and visualized proximal part are normal.
- No coarctation of aorta.

Doppler study

- Normal flow across all the valves.
- No pulmonary hypertension.
- PASP – 14 mmHg.
- Grade I diastolic dysfunction.
- Peak systolic gradients across LVOT/AV – 08 mmHg.

• ANDHERI • COLABA • NASHIK • VASHI

Measurements

Aorta annulus	18 mm
Left Atrium	36 mm
LVID(Systole)	32 mm
LVID(Diastole)	46 mm
IVS(Diastole)	12 mm
PW(Diastole)	12 mm
LV ejection fraction.	60%

Conclusion

- Good biventricular function
- No RWMA
- Valves – Structurally normal
- Mild concentric LVH
- Grade I diastolic dysfunction
- No PAH.



DR. RISHI BHARGAVA
MD DM
CONSULTANT INTERVENTIONAL CARDIOLOGIST

• ANDHERI • COLABA • NASHIK • VASHI

PATIENT'S NAME	UDAY S GIRKAR	AGE :- 41y/M
UHID NO	5178	25 Feb 2023

X-RAY CHEST PA VEIW

OBSERVATION:

Bilateral lung fields are clear.
Both hila are normal.
Bilateral cardiophrenic and costophrenic angles are normal.
The trachea is central.
Aorta appears normal.
The mediastinal and cardiac silhouette are normal.
Soft tissues of the chest wall are normal.
Bony thorax is normal.

IMPRESSION:

➤ No significant abnormality seen.



DR.CHHAYA S. SANGANI
CONSULTANT SONOLOGIST
Reg No. 073826

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PATIENT'S NAME	UDAY S GIRKAR	AGE :- 41y/M
UHID NO	5178	25 Feb 2023

USG WHOLE ABDOMEN

LIVER is normal in size, shape and shows bright echotexture .No evidence of any focal lesion. The portal vein appears normal & shows normal hepatopetal flow. No evidence of intra-hepatic biliary duct dilatation.

Gall Bladder appears well distended with normal wall thickness. an anterior wall Polyp 5 mms. There is no calculus or pericholecystic collection or free fluid noted. CBD appears normal.

Visualised parts of head & body of pancreas appear normal. PD is not dilated.

SPLEEN is normal in size and echotexture. No focal lesion seen. SV is normal.

Both kidneys are normal in size, shape and echotexture with normal parenchymal reflectivity and maintained cortico-medullary differentiation. No hydronephrosis or calculi or mass seen.

RIGHT KIDNEY measures 11.2 x 4.3 cm. **LEFT KIDNEY** measures 11.0 x 4.5 cm.

Urinary Bladder is adequately distended; no e/o any obvious wall thickening or mass or calculi seen.

PROSTATE is normal in size, shape & echotexture. It measures approximately 14 gms.

Visualised bowel loops appear normal. There is no free fluid seen.

IMPRESSION –

- **Grade I fatty liver.**
- **Gall bladder polyp.**
- **No other significant abnormality detected.**

THIS REPORT IS NOT TO BE USED FOR MEDICOLEGAL PURPOSE.THE CONTENTS OF THIS REPORT REQUIRE CLINICAL CO-RELATION BEFORE ANY APPLICATION.



**DR. DISHA MINOCHA
DMRE (RADIOLOGIST)**

• ANDHERI • COLABA • NASHIK • VASHI

Name: Mr. Uday. S. Girkar

Age: 41y

Date of Health check-up: 25/2/23


Findings and Recommendation:

Findings:-

- ECG changes
- yB polyp.

Recommendation:-

- S₁ ref
- BP monitoring
- SOS T. ^{Trinexavan} ~~Trinexavan~~ 20 mg

Signature: 

Consultant -

DR. ANIRBAN DASGUPTA
MBBS, D.N.B MEDICINE
DIPLOMA CARDIOLOGY
MMC-2005/02/0920