

DATE: 28/6/2021

GENERAL PHYSICAL EXAMINATION

FULL NAME Arvind Srivast
DATE OF BIRTH 24/10/1993
MARTIAL STATUS married.
COMPANY NAME B O B.
ADDRESS Haridwar.
ID NO. 108714
MOBILE NO. 8115520595

MEASUREMENTS

HEIGHT IN CMS: 166.
WEIGHT IN KGS: 67
CHEST (EXP/INSP): 93/98
ABDOMEN IN CMS: 90

APPEARANCE: Healthy
BLOOD PRESSURE READING (SYSTOLIC/DIASTOLIC) 111/70
BMI 24.3

CARDIOVASCULAR SYSTEM

HEART SOUNDS: Normal.
PULSE RATE: 72.

GENITO-URINARY SYSTEM

ANY URINARY DISE-ASE NO
IS HERNIA PRESENT NO



Since 1991



MOUTH EYES EARS AND THROAT

GUMS: Normal
 TEETH: Normal
 TONGUE: Normal
 EYES: Normal.
 EARS: Normal
 NOSE: Normal
 THROAT: Normal
 VISION: Normal
 RIGHT EYE: Normal
 LEFT EYE: Normal
 HEARING: Normal
 COLOUR VISION: Normal.

RESPIRATORY SYSTEM

ANY TYPE OF RESPIRATORY DISEASE, CNC/CVS: None

DOCTOR REMARKS: None


THIS TO CERTIFY THAT MR. Arvind Srivastava S/O Mr. Phoolchand.


IS MEDICALLY FIT TO JOIN ANY ORIGINATION


Signature of Medical Examiner
DR. RISHI BUSHAN KALIA (M.D)

Dr. RISHI BHUSHAN KALIA
 M.D.
 CHANDAN DIAGNOSTIC CENTRE
 56, New Road, MKP Chowk
 Dehradun-248001
 Reg.No.01858




 भारत सरकार
GOVERNMENT OF INDIA

 अरविन्द श्रीवास
Arvind Srivas
जन्म तिथि/ DOB: 24/10/1993
पुरुष / MALE



3179 7148 7138

मेरा आधार, मेरी पहचान

 भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पता: Address:
आत्माजा: फूल चंद श्रीवास,
निर्मल ब्लॉक- ए, गली न -
04, कीरपुर खुर्द, ऋषिकेश
** देहरादून,
उत्तराखण्ड - 249203

S/O: Phool Chand Srivas, Nirmal
Block-A, Gali No - 04, Birpur
Khurd, Rishikesh, Dehradun,
Uttarakhand - 249203

3179 7148 7138

MERA AADHAAR, MERI PEHACHAN


Dr. RISHI BHUSHAN KALIA
M.D.
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Dehradun-248001
Reg.No.01858



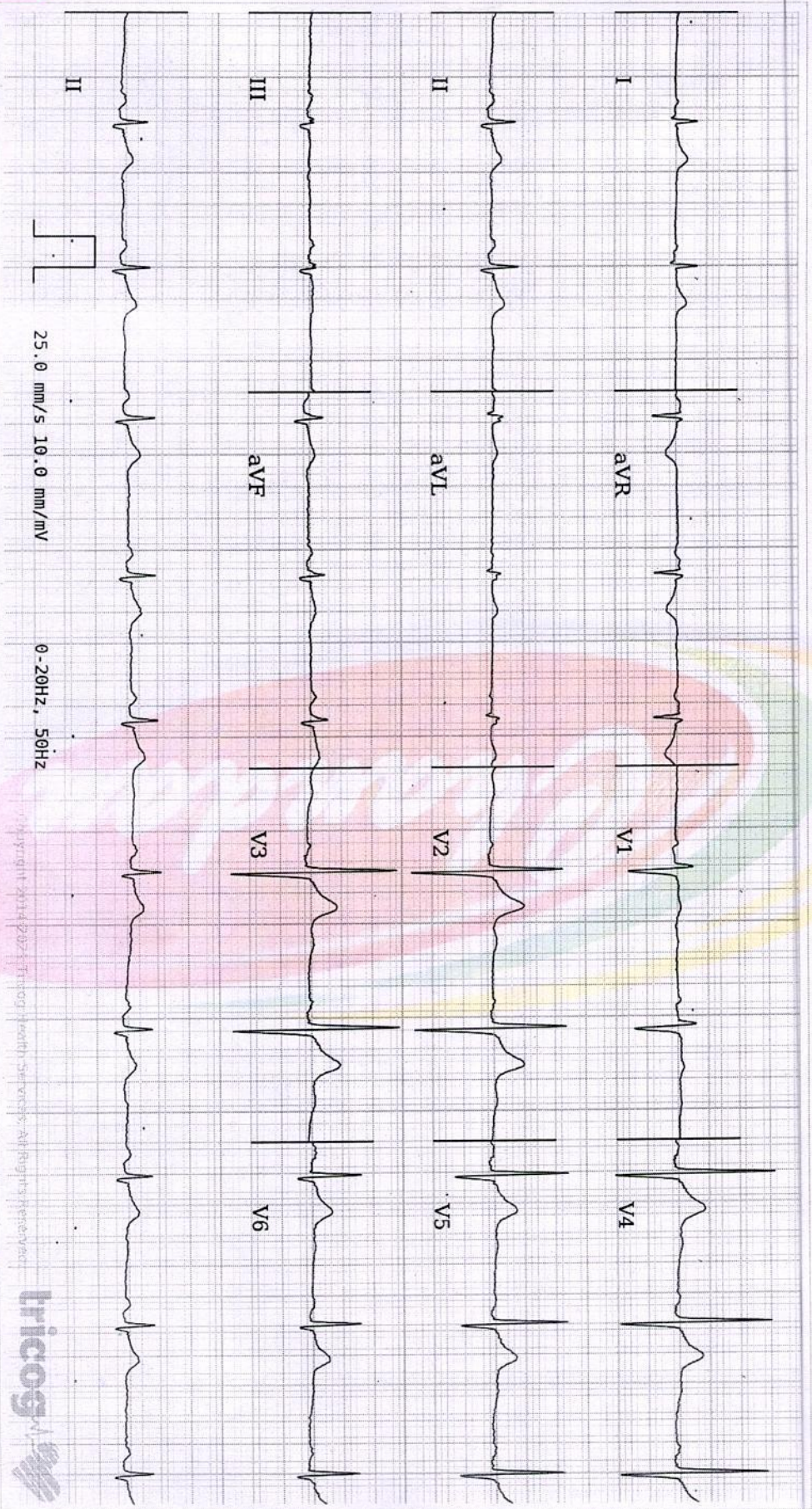


Chandan Diagnostic Centre, Dehradun

Age / Gender: 27/Male
Patient ID: IDUN0119652122
Patient Name: Mr.ARVIND SRIVAS-PKG10000238
Date and Time: 28th Jun 21 9:59 AM



Customer Care No.: +91-9918300637 E-mail: customercare.diagnostic@chandan.co.in Web: www.chandandiagnostic.com



ECG Within Normal Limits: Sinus Rhythm, Normal Axis. Please correlate clinically.

Home Samp Collection
1800-419-0002

AUTHORIZED BY
Dr. Chaiti
MD, DM-Cardiology
63382

REPORTED BY
Dr. Prabhakar
29 YEARS

Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a qualified physician.



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Add: Armelia, 1st Floor, 56 New Road, M.K.P Chowk, Dehradun

Ph: 9235501532, 01352710192

CIN : U85110DL2003PLC308206



Patient Name	: Mr.ARVIND SRIVAS-PKG10000238	Registered On	: 28/Jun/2021 09:46:03
Age/Gender	: 27 Y 0 M 0 D /M	Collected	: N/A
UHID/MR NO	: IDUN.0000139729	Received	: N/A
Visit ID	: IDUN0119652122	Reported	: 28/Jun/2021 11:31:10
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

LIVER

- The liver measures 151.5 mms. It shows diffuse increase in echogenicity. No focal lesion is seen.

PORTAL SYSTEM

- The intra hepatic portal channels are normal.
- Portal vein measured 10.0 mms. (Normal) at the porta.

BILIARY SYSTEM

- The intra-hepatic biliary radicles are normal.
- Common duct measured 3.0 mms. (Normal) at the porta.
- The gall bladder is normal in size and has regular walls measuring 2.0 mms. in thickness (normal) .Lumen of the gall bladder is anechoic.

PANCREAS

- The pancreas is normal in size and shape and has a normal homogenous echotexture.

GREAT VESSELS

- Great vessels are normal.

RIGHT KIDNEY

- The right kidney is normal in size, shape and cortical echotexture.
- Multiple calculi (approx 5) largest of which measures 5.7 x 4.2 mms are seen in upper, middle and lower calyx.
- The collecting system is normal and corticomedullary demarcation is clear.

LEFT KIDNEY

- The left kidney is normal in size, shape and cortical echotexture.
- A calculus measuring 4.8 x 4.0 mms is seen in middle calyx.
- The collecting system is normal and corticomedullary demarcation is clear.

SPLEEN

- The spleen is normal in size and has a homogenous echotexture.





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DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

LYMPHNODES

- No pre-or-para aortic lymph node mass is seen.

URETERS

- Both the ureters are normal.

URINARY BLADDER

- The urinary bladder is normal. Bladder wall is normal in thickness and regular.

PROSTATE

- The prostate gland is normal in texture and size. No focal mass or capsular breach is seen.

IMPRESSION

GRADE I DIFFUSE FATTY CHANGE OF LIVER WITH BILATERAL RENAL CALCULI

***** End Of Report *****

(* Test not done under NABL accredited Scope

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, ECG / EKG



R. Kalia
DR. R B KALIA
 MD (RADIOLOGIST)

This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days.

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Conduction Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing *



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Visit ID	: IDUN0119652122	Reported	: 28/Jun/2021 16:52:13
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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Blood Group (ABO & Rh typing) * , Blood

Blood Group	A
Rh (Anti-D)	POSITIVE



Ritu
 DR. RITU KALIA
 MD (PATHOLOGY)





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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Glucose PP Sample: Plasma After Meal	96.46	mg/dl	<140 Normal 140-199 Pre-diabetes >200 Diabetes	GOD POD

Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.
- I.G.T = Impaired Glucose Tolerance.

GLYCOSYLATED HAEMOGLOBIN (HBA1C) *, EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	4.87	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (Hb-A1c)	30.00	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	93	mg/dl	

Interpretation:

NOTE:-

- eAG is directly related to A1c.
- An A1c of 7% -the goal for most people with diabetes-is the equivalent of an eAG of 154 mg/dl.
- eAG may help facilitate a better understanding of actual daily control helping you and your health care provider to make necessary changes to your diet and physical activity to improve overall diabetes management.

The following ranges may be used for interpretation of results. However, factors such as duration of diabetes, adherence to therapy and the age of the patient should also be considered in assessing the degree of blood glucose control.

Haemoglobin A1C (%)NGSP	mmol/mol / IFCC Unit	eAG (mg/dl)	Degree of Glucose Control Unit
> 8	>63.9	>183	Action Suggested*
7-8	53.0 -63.9	154-183	Fair Control
< 7	<63.9	<154	Goal**
6-7	42.1 -63.9	126-154	Near-normal glycemia
< 6%	<42.1	<126	Non-diabetic level

*High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc.





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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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**Some danger of hypoglycemic reaction in Type I diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.

N.B. : Test carried out on Automated G8 90 SL TOSOH HPLC Analyser.

Clinical Implications:

- *Values are frequently increased in persons with poorly controlled or newly diagnosed diabetes.
- *With optimal control, the HbA 1c moves toward normal levels.
- *A diabetic patient who recently comes under good control may still show higher concentrations of glycosylated hemoglobin. This level declines gradually over several months as nearly normal glycosylated *Increases in glycosylated hemoglobin occur in the following non-diabetic conditions: a. Iron-deficiency anemia b. Splenectomy c. Alcohol toxicity d. Lead toxicity
- *Decreases in A 1c occur in the following non-diabetic conditions: a. Hemolytic anemia b. chronic blood loss
- *Pregnancy d. chronic renal failure. Interfering Factors:
- *Presence of Hb F and H causes falsely elevated values. 2. Presence of Hb S, C, E, D, G, and Lepore (autosomal recessive mutation resulting in a hemoglobinopathy) causes falsely decreased values.



Ritu
DR. RITU KALIA
MD (PATHOLOGY)



Patient Name	: Mr.ARVIND SRIVAS-PKG10000238	Registered On	: 28/Jun/2021 09:46:03
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UHID/MR NO	: IDUN.0000139729	Received	: N/A
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DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

X-RAY DIGITAL CHEST PA *


(500 mA COMPUTERISED UNIT SPOT FILM DEVICE)

DIGITAL CHEST P-A VIEW

- Soft tissue shadow appears normal.
- Bony cage is normal.
- Diaphragmatic shadows are normal on both sides.
- Costo-phrenic angles are bilaterally clear.
- Trachea is central in position.
- Cardiac size & contours are normal.
- Hilar shadows are normal.
- Pulmonary vascularity & distribution are normal.
- Pulmonary parenchyma did not reveal any significant lesion.

IMPRESSION : NORMAL SKIAGRAM




DR. R B KALIA
MD (RADIOLOGIST)

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DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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COMPLETE BLOOD COUNT (CBC) * , Blood

Haemoglobin	14.10	g/dl	13.5-17.5	PHOTOMETRIC
TLC (WBC)	6,300.00	/Cu mm	4000-10000	MICROSCOPIC EXAMINATION

DLC

Polymorphs (Neutrophils)	54.00	%	55-70	MICROSCOPIC EXAMINATION
Lymphocytes	39.00	%	25-40	MICROSCOPIC EXAMINATION
Monocytes	5.00	%	3-5	MICROSCOPIC EXAMINATION
Eosinophils	2.00	%	1-6	MICROSCOPIC EXAMINATION
Basophils	0.00	%	< 1	MICROSCOPIC EXAMINATION

ESR

Observed	10.00	Mm for 1st hr.	
Corrected	6.00	Mm for 1st hr.	< 9
PCV (HCT)	43.90	cc %	40-54

Platelet count

Platelet Count	1.5	LACS/cu mm	1.5-4.0	MICROSCOPIC EXAMINATION
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RBC Count

RBC Count	5.33	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE
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Blood Indices (MCV, MCH, MCHC)

MCV	82.40	fl	80-100	CALCULATED PARAMETER
MCH	26.40	pg	28-35	CALCULATED PARAMETER
MCHC	32.10	%	30-38	CALCULATED PARAMETER

Ritu

DR. RITU KALIA
MD (PATHOLOGY)



SIN No.: 51526621

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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Glucose Fasting Sample: Plasma	80.32	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD

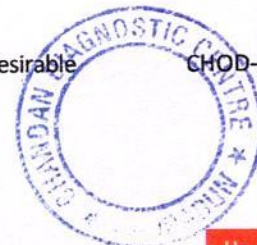
Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.
- I.G.T = Impaired Glucose Tolerance.

BUN (Blood Urea Nitrogen) * Sample: Serum	11.10	mg/dL	7.0-23.0	CALCULATED
Creatinine Sample: Serum	1.21	mg/dl	0.7-1.3	MODIFIED JAFFES
e-GFR (Estimated Glomerular Filtration Rate) Sample: Serum	76.00	ml/min/1.73m ²	2 - 90-120 Normal - 60-89 Near Normal	CALCULATED
Uric Acid Sample: Serum	4.48	mg/dl	3.4-7.0	URICASE
L.F.T.(WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST)	37.66	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	62.45	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	18.27	IU/L	11-50	OPTIMIZED SZAZING
Protein	5.70	gm/dl	6.2-8.0	BIRUET
Albumin	3.73	gm/dl	3.8-5.4	B.C.G.
Globulin	1.97	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.89		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	77.85	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.39	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.18	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.21	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (MINI) * , Serum				
Cholesterol (Total)	108.56	mg/dl	<200 Desirable	CHOD-PAP



SIN No: 51526621



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PPP-April 2021



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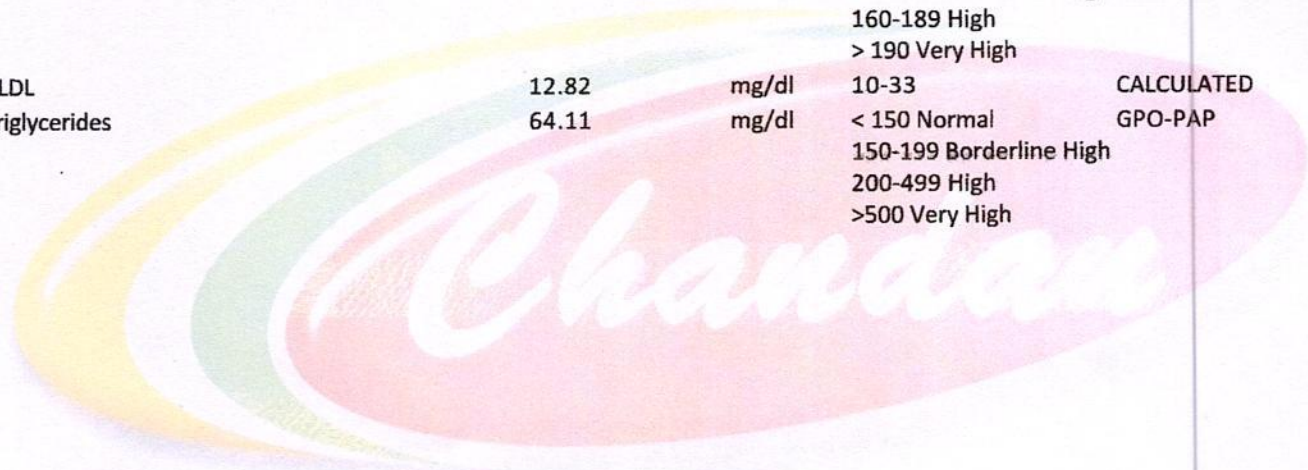


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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
HDL Cholesterol (Good Cholesterol)	21.70	mg/dl	200-239 Borderline High > 240 High 30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	74	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	CALCULATED
VLDL	12.82	mg/dl	10-33	CALCULATED
Triglycerides	64.11	mg/dl	< 150 Normal 150-199 Borderline High 200-499 High >500 Very High	GPO-PAP



Ritu
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DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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URINE EXAMINATION, ROUTINE * , Urine

Color	PALE YELLOW			
Specific Gravity	1.020			
Reaction PH	Acidic (6.0)			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent 10-40 (+) 40-200 (++) 200-500 (+++) > 500 (++++)	DIPSTICK
Sugar	ABSENT	gms%	< 0.5 (+) 0.5-1.0 (++) 1-2 (+++) > 2 (++++)	DIPSTICK
Ketone	ABSENT			DIPSTICK
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
Microscopic Examination:				
Epithelial cells	1-2/h.p.f			MICROSCOPIC EXAMINATION
Pus cells	ABSENT			MICROSCOPIC EXAMINATION
RBCs	ABSENT			MICROSCOPIC EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC EXAMINATION
Others	ABSENT			

SUGAR, FASTING STAGE * , Urine

Sugar, Fasting stage	ABSENT	gms%
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Interpretation:

(+)	< 0.5
(++)	0.5-1.0
(+++)	1-2
(++++)	> 2



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DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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THYROID PROFILE - TOTAL * , Serum

T3, Total (tri-iodothyronine)	121.50	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	6.88	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	2.69	μIU/mL	0.27 - 5.5	CLIA

Interpretation:

0.3-4.5	μIU/mL	First Trimester
0.4-4.2	μIU/mL	Adults 21-54 Years
0.5-4.6	μIU/mL	Second Trimester
0.5-8.9	μIU/mL	Adults 55-87 Years
0.7-64	μIU/mL	Child(21 wk - 20 Yrs.)
0.7-27	μIU/mL	Premature 28-36 Week
0.8-5.2	μIU/mL	Third Trimester
1-39	μIU/mL	Child 0-4 Days
1.7-9.1	μIU/mL	Child 2-20 Week
2.3-13.2	μIU/mL	Cord Blood > 37Week

1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.

2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.

3) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.

4) Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.

5) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.

6) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.

7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.

8) Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.

*** End Of Report ***

(*) Test not done under NABL accredited Scope

Result/s to Follow:

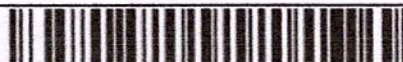
Blood Group (ABO & Rh typing), STOOL, ROUTINE EXAMINATION, GLUCOSE PP, GLYCOSYLATED HAEMOGLOBIN (HBA1C), ECC

This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days.

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing *

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Home Sample Collection
1800-419-0002

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