

### CONCLUSION OF HEALTH CHECKUP

ECU Number	: 2487	MR Number	: 23202942	Patient Name	: ANUPAM KUMAR
Age	: 39	Sex	: Male	Height	: 170
Weight	: 63	Ideal Weight	: 66	BMI	: 21.80
Date	: 24/03/2023				

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 : 2487                      MR Number : 23202942                      Patient Name: ANUPAM KUMAR  
Age : 39                                      Sex : Male                                      Height : 170  
Weight : 63                                      Ideal Weight : 66                                      BMI : 21.80  
Date : 24/03/2023

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

Present H/O : NO MEDICAL COMPLAIN AT PRESENT

Family H/O : FATHER: PACEMAKER IMPLANTATION

Habits : ALCOHOL:- ONCE/2-3 MONTHS  
Gen.Exam. : G.C.GOOD  
B.P : 160/104 mm Hg  
Pulse : 86/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 : 2487

Age : 39

Weight : 63

Date : 24/03/2023

MR Number : 23202942

Sex : Male

Ideal Weight : 66

Patient Name : ANUPAM KUMAR

Height : 170

BMI : 21.80

**Ophthalmic Check Up :**

**Right**

**Left**

Ext Exam

Vision Without Glasses

Vision With Glasses

Final Correction

6/6

N.6

NA

**LEFT EYES:-  
CONJUNCTIVITIS**

6/6

N.6

NA

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



Patient Name : Mr. ANUPAM KUMAR  
 Gender / Age : Male / 39 Years 11 Months 25 Days  
 MR No / Bill No. : 23202942 / 231074530  
 Consultant : Dr. Manish Mittal  
 Location : OPD

Type : OPD  
 Request No. : 114980  
 Request Date : 24/03/2023 08:13 AM  
 Collection Date : 24/03/2023 08:04 AM  
 Approval Date : 24/03/2023 02:55 PM

**CBC + ESR**

Test	Result	Units	Biological Ref. Range
<b>Haemoglobin.</b>			
Haemoglobin	13.5	gm/dL	13 - 17
Red Blood Cell Count (T-RBC)	<b>4.43</b>	mill/cmm	4.5 - 5.5
Hematocrit (HCT)	40.6	%	40 - 50
Mean Corpuscular Volume (MCV)	91.6	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	30.5	pg	27 - 32
MCH Concentration (MCHC)	33.3	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	<b>14.7</b>	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	<b>50.1</b>	fl	39 - 46
<b>Total Leucocyte Count (TLC)</b>			
Total Leucocyte Count (TLC)	4.31	thou/cmm	4 - 10
<b>Differential Leucocyte Count</b>			
Polymorphs	66	%	40 - 80
Lymphocytes	30	%	20 - 40
Eosinophils	01	%	1 - 6
Monocytes	03	%	2 - 10
Basophils	00	%	0 - 2
Polymorphs (Abs. Value)	2.84	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	1.26	thou/cmm	1 - 3
Eosinophils (Abs. Value)	<b>0.04</b>	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	<b>0.14</b>	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.03	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.2	%	1 - 3 : Borderline > 3 : Significant
<b>Platelet Count</b>			
Platelet Count	<b>81</b>	thou/cmm	150 - 410
Smear evaluation	Adequate		
Estimated Platelet count (Smear evaluation)	120	thou/cmm	
Remarks	Few large platelets seen .		
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.

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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. ANUPAM KUMAR	Type	: OPD
Gender / Age	: Male / 39 Years 11 Months 25 Days	Request No.	: 114980
MR No / Bill No.	: 23202942 / 231074530	Request Date	: 24/03/2023 08:13 AM
Consultant	: Dr. Manish Mittal	Collection Date	: 24/03/2023 08:04 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 metric 20, comparable to Westergrens method and in accordance to ICSH reference method.

---- End of Report ----

Dr. Rakesh Vaidya  
MD (Path). DCP.

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.



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 Gender / Age : Male / 39 Years 11 Months 25 Days Request No. : 114980  
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**Haematology**

Test	Result	Units	Biological Ref. Range
<b>Blood Group</b>			
ABO system	B		
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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**Fasting Plasma Glucose**

Test	Result	Units	Biological Ref. Range
<i>Fasting Plasma Glucose</i>			
Fasting Plasma Glucose	95	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	96	mg/dL	70 - 140

By Hexokinase method on RXL Dade Dimesion

---- End of Report ----

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**HbA1c (Glycosylated Hb)**

Test	Result	Units	Biological Ref. Range
<b>HbA1c (Glycosylated Hb)</b>			
Glycosylated Heamoglobin (HbA1c)	4.6	%	
estimated Average Glucose (e AG) *	85.32	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)

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**Complete Lipid Profile**

Test	Result	Units	Biological Ref. Range
<b>Complete Lipid Profile</b>			
Appearance	Clear		
Triglycerides	<b>171</b>	mg/dL	1 - 150
<i>(By Lipase / Glycerol dehydrogenase on RXL Dade Dimension &lt; 150 Normal 150-199 Borderline High 200-499 High &gt; 499 Very High)</i>			
Total Cholesterol	118	mg/dL	1 - 200
<i>(By enzymatic colorimetric method on RXL Dade Dimension &lt;200 mg/dL - Desirable 200-239 mg/dL - Borderline High &gt; 239 mg/dL - High)</i>			
HDL Cholesterol	<b>35</b>	mg/dL	40 - 60
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension &lt; 40 Low &gt; 60 High)</i>			
Non HDL Cholesterol (calculated)	83	mg/dL	1 - 130
<i>(Non- HDL Cholesterol &lt; 130 Desirable 139-159 Borderline High 160-189 High &gt; 191 Very High)</i>			
LDL Cholesterol	71	mg/dL	1 - 100
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension &lt; 100 Optimal 100-129 Near / above optimal 130-159 Borderline High 160-189 High &gt; 189 Very High)</i>			
VLDL Cholesterol (calculated)	34.2	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	2.03		2.1 - 3.5
T. Ch./HDL Ch. Ratio	3.37		3.5 - 5
<i>(Recent NECP / ATP III Guidelines / Classification (mg/dl) :)</i>			

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.

--- End of Report ---

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**Liver Function Test (LFT)**

Test	Result	Units	Biological Ref. Range
<b>Bilirubin</b>			
Bilirubin - Total	<b>1.63</b>	mg/dL	0 - 1
Bilirubin - Direct	0.27	mg/dL	0 - 0.3
Bilirubin - Indirect (By Diazotized sulfanilic acid on RXL Dade Dimension.)	1.36	mg/dL	0 - 0.7
Aspartate Aminotransferase (SGOT/AST) (By IFCC UV kinetic method on RXL Dade Dimension.)	26	U/L	15 - 40
Alanine Aminotransferase (SGPT/ALT) (By IFCC UV kinetic method on RXL Dade Dimension.)	19	U/L	16 - 63
Alkaline Phosphatase (BY PNPP AMP method on RXL Dade Dimension.)	94	U/L	53 - 128
Gamma Glutamyl Transferase (GGT) (By IFCC method on RXL Dade Dimension.)	28	U/L	15 - 85
<b>Total Protein</b>			
Total Proteins	7.64	gm/dL	6.4 - 8.2
Albumin	<b>6.08</b>	gm/dL	3.4 - 5
Globulin	1.56	gm/dL	3 - 3.2
A : G Ratio (By Biuret endpoint and Bromocresol purple method on RXL Dade Dimesion.)	3.9		1.1 - 1.6

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---- End of Report ----

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**Renal Function Test (RFT)**

Test	Result	Units	Biological Ref. Range
Urea (By Urease Kinetic method on RXL Dade Dimension)	17	mg/dL	10 - 45
Creatinine (By Modified Kinetic Jaffe Technique)	1.03	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)	7.7	mg/dL	3.4 - 7.2

--- End of Report ---

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## Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
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Triiodothyronine (T3)	1.34	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)	8.03	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)	5.11	microIU/ml	
--------------------------------------	------	------------	--

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

Reference interval (microIU/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))

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.

--- End of Report ---

Dr. Rakesh Vaidya  
MD (Path). DCP.



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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	6.0		
Specific Gravity	<=1.005		
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. Rakesh Vaidya  
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**DEPARTMENT OF DIAGNOSTIC RADIOLOGY**

Patient No. : 23202942      Report Date : 24/03/2023

Request No. : 190058161      24/03/2023 8.13 AM

Patient Name : Mr. ANUPAM KUMAR

Gender / Age : Male / 39 Years 11 Months 25 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.

• 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**

**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

Patient No. : 23202942      Report Date : 24/03/2023  
Request No. : 190058148      24/03/2023 8.13 AM  
Patient Name : **Mr. ANUPAM KUMAR**  
Gender / Age : Male / 39 Years 11 Months 25 Days

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

Liver is normal in size 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 enlarged in size (13cm) and normal in 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 ~14 cc.

Urinary bladder is well distended and appears normal.

No ascites.

**COMMENT:**

**Mild splenomegaly.**

*Kindly correlate clinically*

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

*Hasani*

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



Patient No. : 23202942      Report Date : 24/03/2023  
Request No. : 190058171      24/03/2023 8.13 AM  
Patient Name : Mr. ANUPAM KUMAR  
Gender / Age : Male / 39 Years 11 Months 25 Days

### Echo Color Doppler

MITRAL VALVE : NORMAL  
AORTIC VALVE : TRILEAFLET, NORMAL  
TRICUSPID VALVE : NORMAL, TRACE TR, PASP BY TR JET=14 MMHG  
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 : Grade I diastolic dysfunction, E/e'=12  
FLOW MAPPING : NO MR, 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, MILD CONCENTRIC LVH
5. GRADE I DIASTOLIC DYSFUNCTION
6. TRACE MR, TR, NO PULMONARY HYPERTENSION, ( IVC COLLAPSING )
7. NO PERICARDIAL EFFUSION, CLOT VEGETATION.

  
Dr. KILLOL KANERIA MD, DM  
Consultant Cardiologist



Wdme Anupam Kumar  
Patient ID 23202942

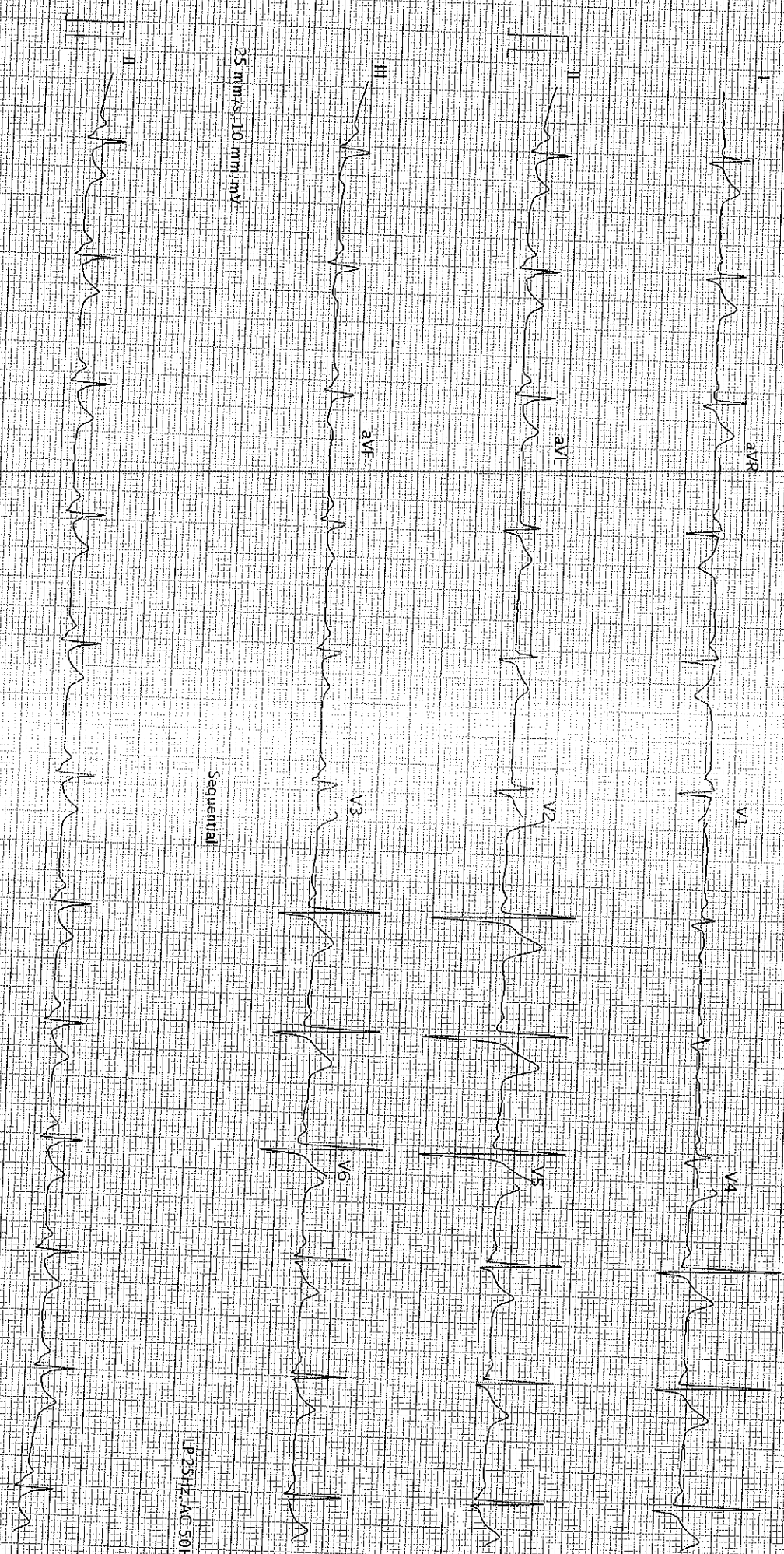
24.03.2023 08:44:38  
Standard 12-Lead

Date of birth 30.03.1983  
Gender Male  
Height  
Weight  
Ethnicity Undefined  
Facemaker Unknown  
Visit ID  
Room  
Medication  
Order ID  
Ord. prty.  
Ord. prot.

HR 71 bpm  
RR 849 ms  
PR 106 ms  
P axis 60°  
QRS axis 32°  
T axis 20°  
QT 358 ms  
QTcB 389 ms

Abnormal  
Sinus rhythm  
Normal electrical axis  
QRS(+) contour abnormality  
consistent with old inferior myocardial infarction  
Abnormal ECG  
Unconfirmed report

*cm*



25 mm/s, 10 mm/mV

Sequential

LP 25Hz, AC 50Hz

AT-102-G2-12-0 (0080-011030)

SCHILLER

Printed on 24.03.2023 08:44:51

EP 25Hz, AC 50Hz

**Dr. Sonica Peshin**

Cosmetic Dentist & Implantologist

Reg. No. : 6966-A

M. : 9586867301



**BHAILAL AMIN  
GENERAL HOSPITAL**

Dental assessment form

24/03/2023

Name: Anupam Kumar

Age/ Sex: 39 years/Male

Patient has come for an oral hygiene check up

On Examination:

- Stains+ Calculus+
- History of horizontal brushing
- Generalised attrition, recession

Provisional diagnosis:

- Chronic generalised gingivitis

Treatment plan:

- Recalled after an year for an oral hygiene check up

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:SMD066

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