


ajit

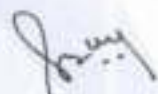
Transport Department Government of NCT of Delhi
Licence to Drive Vehicles Throughout India

Licence No.	: DL08 20069187385	(P) CA	
Name	: NEERAJ PURI		
S/W/D	: SH KUNWARPAL		
DOB	: 20/02/1979	BG: A+	
Address	: A16 SHRI RAM APPT Dwarka, South West Delt, DL 110075		
Auth to Drive	LMV	Date of Issue	20/03/2006
Issue Date	: 30/05/2018	(Holder Signature)	
Validity(NT)	: 19/03/2026	Issuing Authority	NW2-1.WAZIRPUR
Validity(T)	: NA		
Intr. Contr. No	: 78P		

IPSC PAIN AND SPINE HOSPITAL
Plot No 453 Dwarka Sector-19
New Delhi-110075

Patient Name : Mr. NEERAJ PURIL	Reg No. : 3232/UHID22DL	Lab ID. : 3534/OPDPB23DL
Age / Gender : 44Y / Male	Date : 08-Sep-2023	
Mobile No. : 8744988158	Manual No.	Collected : 08-Sep-2023 10.05
Refd. By : Dr. .		Received : 08-Sep-2023 10.05
Sample Type : EDTA whole blood	Sample ID : 232844	Report : 08-Sep-2023 13.18

TEST NAME	RESULT	UNIT	RANGE	METHOD
HEAMATOLOGY				
COMPLETE BLOOD COUNT				
HEMOGLOBIN	14.9	g/dl	12.5-16.5	Colorimetric
TOTAL LEUCOCYTE COUNT	7.8	10 ³ /uL	4.0-11.0	Electrical impedance
DIFFERENTIAL LEUCOCYTE COUNT(DLC)				
Neutrophil	71	%	40-75	Electrical impedance
Lymphocyte	21	%	20-45	Electrical impedance
Eosinophil	05	%	01-06	Microscopy
Monocyte	03	%	2-10	Microscopy
Basophil	00	%	0-2	Microscopy
ESR	08	mm/1sthr	0-20	Westergren's
RBC COUNT	4.68	mill/cmm	3.8-5.5	Electrical impedance
PCV	44	%	35-45	Calculated
MCV	94.50	Fl	80-100	Calculated
MCH	31.8	Picogram	27.5-33.2	Calculated
MCHC	33.70	gm/dl	32-36	Calculated
PLATELET COUNT	196	10 ³ /uL	150-450	Electrical impedance
-----End of Report-----				



Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMG/25252


Lab Technician : ramshankar



BOOK APPOINTMENT





Patient Name : Mr. NEERAJ PURIL	Reg No. : 3232/UH/D22DL	Lab ID. : 3532/OPDPB23DL
Age / Gender : 44Y / Male	Date : 08-Sep-2023	
Mobile No. : 8744968158	Manual No.	Collected :08-Sep-2023 10.04
Refd. By : Dr. INSURANCE		Received :08-Sep-2023 10.04
Sample Type : Serum	Sample ID : 232842	Report :08-Sep-2023 13.18

TEST NAME	RESULT	UNIT	RANGE	METHOD
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BIOCHEMISTRY

BUN	9.01	mg/dl	6-20	Urease-Gldh
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-----End of Report-----

Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252

Lab Technician : SONUKUM



BOOK APPPOINTMENT



Patient Name : Mr. NEERAJ PURIL	Reg No. : 3232/UHID22DL	Lab ID. : 3532/OPDPB23DL
Age / Gender : 44Y / Male	Date : 08-Sep-2023	
Mobile No. : 8744988158	Manual No.	Collected : 08-Sep-2023 12.57
Refd. By : Dr. INSURANCE		Received : 08-Sep-2023 12.57
Sample Type : Plasma(Sodium fluoride)	Sample ID : 232842	Report : 08-Sep-2023 13.18

TEST NAME	RESULT	UNIT	RANGE	METHOD
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BIOCHEMISTRY

Blood Sugar PP	132.2	mg/dl	70-150	GOD-POD
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INTERPRETATION:

2018 American Diabetes Association (ADA) Diabetes Guidelines

Criteria for Diabetes Diagnosis:

FPG > 126.0 mg/dl (Fasting is defined as no caloric intake for >8 hours)

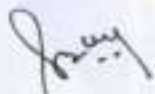
2-hr PG > 200 mg/dl during OGTT (75-G)*

Using a glucose load containing the equivalent of 75g anhydrous glucose dissolved in water

Random PG < 200 mg/dl

in individuals with symptoms of hyperglycemia or hyperglycemic crisis

-----End of Report-----




Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252

Lab Technician : ramshankar



BOOK APPOINTMENT



Patient Name : Mr. NEERAJ PURIL	Reg No. : 3232/UHID22DL	Lab ID. : 3532/OPDPB23DL
Age / Gender : 44Y / Male	Date : 08-Sep-2023	
Mobile No. : 8744988158	Manual No.	Collected : 08-Sep-2023 10.04
Refd. By : Dr. INSURANCE		Received : 08-Sep-2023 10.04
Sample Type : Plasma(Sodium fluoride)	Sample ID : 232842	Report : 08-Sep-2023 13.18

TEST NAME	RESULT	UNIT	RANGE	METHOD
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BIOCHEMISTRY

BLOOD SUGAR FASTING	100.0	mg/dl	74-100	GOD-POD
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INTERPRETATION:

2018 American Diabetes Association (ADA) Diabetes Guidelines

Criteria for Diabetes Diagnosis:

FPG > 126.0 mg/dl (Fasting is defined as no caloric intake for >8 hours)

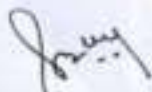
2-hr PG > 200 mg/dl during OGTT(75-G)*

Using a glucose load containing the equivalent of 75g anhydrous glucose dissolved in water

Random PG < 200 mg/dl

in individuals with symptoms of hyperglycemia or hyperglycemic crisis


-----End of Report-----



Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252

Lab Technician : ramshankar



Patient Name : Mr. NEERAJ PURIL	Reg No. : 3232/UHID22DL	Lab ID. : 3532/OPDPB23DL
Age / Gender : 44Y / Male	Date : 08-Sep-2023	
Mobile No. : 8744988158	Manual No.	Collected : 08-Sep-2023 10.04
Refd. By : Dr. INSURANCE		Received : 08-Sep-2023 10.04
Sample Type : EDTA whole blood	Sample ID : 232842	Report : 08-Sep-2023 13.18

TEST NAME	RESULT	UNIT	RANGE	METHOD
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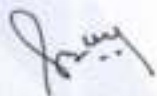
HEAMOTOLOGY

BLOOD GROUPING(A,B,O)&Rh
FACTOR
BLOOD GROUP ABO
RH TYPING

"A"
"POSITIVE"

Manual
Manual

-----End of Report-----




Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252
Lab Technician : SONUKUM



BOOK APPOINTMENT



Patient Name : Mr. NEERAJ PURIL	Reg No. : 3232/UHID22DL	Lab ID. : 3532/OPDPB23DL
Age / Gender : 44Y / Male	Date : 08-Sep-2023	
Mobile No. : 8744988158	Manual No.	Collected : 08-Sep-2023 10.04
Refd. By : Dr. INSURANCE		Received : 08-Sep-2023 10.04
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TEST NAME	RESULT	UNIT	RANGE	METHOD
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HEAMOTOLOGY

HbA1c (GLYCOSYLATED HB)	5.7	%	4-6	PEIT
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Metabolically healthy patients 4.5 - 6.0 %
6.1 - 6.5 %

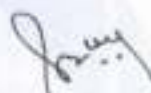
Good control :

Fair control : 6.6 - 7.0 %

Poor control : Above - >7.0 %

COMMENTS: HbA1c is an indicator of glycemic control. HbA1c represents average glycemia over the past six to eight weeks. Glycation of hemoglobin occurs over the entire 120 day life span of the red blood cell, but with in this 120 days, Recent glycemia has the largest influence on the HbA1c value. Clinical studies suggest that a patient in stable control will have 50% of their HbA1c formed in the month before sampling, 25% in the month before that, and the remaining 25% in months two to four. Estimated Average Glucose mg/dl = (HbA1c x 35.6) - 77.3) Correlation between HbA1c and Mean Plasma Glucose (MPG) is not "perfect" but rather only this means that to predict or estimate average glucose from Hb-A1c or vice-versa is not "perfect" but gives a good working ballpark estimate. Afternoon and evening results correlate more closely to HbA1c than morning results, perhaps because morning fasting glucose levels vary much more than daytime glucose levels, which are easier to predict and control. As per IFCC recommendations 2007, HbA1c being reported as above maintaining traceability to both IFCC (mmol/mol) & NGSP (%) units.

-----End of Report-----




Dr. Sangeeta B
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DMC/25252

Lab Technician : ramshankar

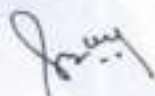


BACK APPORMENT



Patient Name : Mr. NEERAJ PURIL	Reg No. : 3232/UHID22DL	Lab ID. : 3532/OPDPB23DL
Age / Gender : 44Y / Male	Date : 08-Sep-2023	
Mobile No. : 8744988158	Manual No.	Collected : 08-Sep-2023 10.04
Refd. By : Dr. INSURANCE		Received : 08-Sep-2023 10.04
Sample Type : Serum	Sample ID : 232842	Report : 08-Sep-2023 13.18

TEST NAME	RESULT	UNIT	RANGE	METHOD
BIOCHEMISTRY				
KIDNEY FUNCTION TEST				
Blood Urea	19.3	mg/dl	15.0-45.0	urease
Serum Creatinine	0.5	mg/dl	0.7-1.3	Jaffes Kinetic
Serum Uric Acid	4.40	mg/dl	2.5-7.2	Uricase
Total Protein				
PROTEN	7.20	g/dl	6.4-8.3	Biuret
ALBUMIN	4.1	g/dl	3.4-4.8	Beg
GLOBULIN	3.10	g/dl	2.3-3.5	
A/G RATIO	1.32	g/dl		
Calcium	11.8	mg/dl	8.6-10.2	Arsenazo
Sodium	140.0	mmol/L	136.0-149.0	ISE Indirect
Potassium	4.2	mmol/L	3.5-5.5	ISE Indirect
Chloride	104.5	mmol/L	98.0-109.0	ISE Indirect
-----End of Report-----				




Dr. Sangeeta B
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DMC/25252
Lab Technician : ramshankar



BOOK APPOINTMENT



Patient Name : Mr. NEERAJ PURIL	Reg No. : 3232/UHID22DL	Lab ID. : 3532/OPDPB23DL
Age / Gender : 44Y / Male	Date : 08-Sep-2023	
Mobile No. : 8744988156	Manual No.	Collected : 08-Sep-2023 10.04
Refd. By : Dr. INSURANCE	Sample ID : 232842	Received : 08-Sep-2023 10.04
Sample Type : Serum		Report : 08-Sep-2023 13.18

TEST NAME	RESULT	UNIT	RANGE	METHOD
BIOCHEMISTRY				
LIPID PROFILE				
Total Cholesterol	165.00	mg/dl	123-199	CHOD-PAP
Triglycerides	85.2	mg/dl	40-160	Gpo
HDL Cholesterol Direct	45.4	mg/dl	35.3-79.5	Direct
Vldl	17	mg/dl	4.7-22.1	
LDL Cholesterol Direct	102.6	mg/dl	63-129	
Total Cholesterol/HDL Ratio	3.6		0.0-4.97	
LDL/HDL Ratio	2.3		0.0-3.55	

INTERPRETATION:-

Acceptable/Low Risk : < 200 mg/dL : <130 mg/dL : < 4.5
 Borderline High Risk : 200-239 mg/dL : 130-159 mg/dl : 4.5 - 6.0
 High Risk : > 240 mg /dL : > 160 mg/dL : > 6.0

APO A1 & APO B: Recent studies have shown that Apolipoproteins A1 & B might be the best indicators of Coronary Artery.


COMMENTS:-

TRIGLYCERIDE level > 250mg/dL is associated with an approximately 2-fold greater risk of coronary vascular disease. Elevation of triglycerides can be seen with obesity, medication, fast less than 12 hrs., alcohol intake, diabetes mellitus, and



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Patient Name : Mr. NEERAJ PURIL	Reg No. : 3232/UHID22DL	Lab ID. : 3532/OPDPB23DL
Age / Gender : 44Y / Male	Date : 08-Sep-2023	
Mobile No. : 8744988158	Manual No.	Collected : 08-Sep-2023 10.04
Refd. By : Dr. INSURANCE		Received : 08-Sep-2023 10.04
Sample Type : Serum	Sample ID : 232842	Report : 08-Sep-2023 13.18

pancreatitis.

CHOLESTEROL, its fractions and triglycerides are the important plasma lipids in defining cardiovascular risk factors and in the management of cardiovascular disease. Highest acceptable and optimum values of cholesterol values of cholesterol vary with age. Values above 220 mgm/dl are associated with increased risk of CHD regardless of HDL & LDL values.

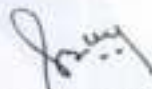
HDL-CHOLESTEROL level <35 mg/dL is associated with an increased risk of coronary vascular disease even in the face of desirable levels of cholesterol and LDL - cholesterol.

LDL - CHOLESTEROL & TOTAL CHOLESTEROL levels can be strikingly altered by thyroid, renal and liver disease as well as hereditary factors. Based on total cholesterol, LDL- cholesterol, and total cholesterol/HDL - cholesterol ratio, patients may be divided into the three risk categories :-

CHOLESTEROL LDL-CHOLESTEROL CHO/HDL RATIO

Artery Disease risk in an individual. Patients who have normal lipid profile may have abnormal Apo A1 & Apo B values. Ratio of Apo B : Apo A1 is >1 in cases of increased CHD risk.

-----End of Report-----



Dr. Sangeeta B
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DMC/25252

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BOOK APPOINTMENT



Patient Name : Mr. NEERAJ PURIL	Reg No. : 3232/UHID22DL	Lab ID. : 3532/OPDPB23DL
Age / Gender : 44Y / Male	Date : 08-Sep-2023	
Mobile No. : 8744988158	Manual No.	Collected : 08-Sep-2023 10.04
Refd. By : Dr. INSURANCE		Received : 08-Sep-2023 10.04
Sample Type : Serum	Sample ID : 232842	Report : 08-Sep-2023 13.18

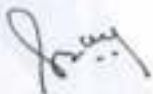
TEST NAME	RESULT	UNIT	RANGE	METHOD
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BIOCHEMISTRY

LIVER FUNCTION TEST

Serum Bilirubin				
Total Bilirubin	1.46	mg/dl	0.0-2.0	Diazo
Direct Bilirubin	0.52	mg/dl	0-0.4	Diazo
Indirect Bilirubin	0.94	mg/dl	0-0.8	Calculated
Total Protein				
PROTEN	7.20	g/dl	6.4-8.3	Biuret
ALBUMIN	4.1	g/dl	3.4-4.8	Bcg
GLOBULIN	3.10	g/dl	2.3-3.5	
A/G RATIO	1.32	g/dl		
SGOT	21	U/L	0-35	IFCC
SGPT	38	U/L	0.0-45	IFCC
Gamma GT	33.0	U/L	0-55	Glupa-c
Alkaline Phosphatase	120	U/L	53-128	Amp

-----End of Report-----




Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252

Lab Technician : ramshankar



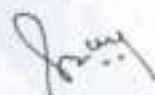
BOOK APPOINTMENT



Patient Name : Mr. NEERAJ PURIL	Reg No. : 3232/UHID22DL	Lab ID. : 3532/OPDPB23DL
Age / Gender : 44Y / Male	Date : 08-Sep-2023	
Mobile No. : 8744988158	Manual No.	Collected : 08-Sep-2023 11.16
Refd. By : Dr. INSURANCE		Received : 08-Sep-2023 11.17
Sample Type : STOOL	Sample ID : 232842	Report : 08-Sep-2023 13.18

TEST NAME	RESULT	UNIT	RANGE	METHOD
CLINICAL PATHOLOGY				
STOOL R/M				
PHYSICAL EXAMINATION				
COLOUR/ APPEARANCE	BROWNISH			
CONSISTENCY	SEMI-FORMED			
PUS	NIL			
MUCUS	NIL			
BLOOD	NIL			
CHEMICAL REACTION				
REACTION	ACIDIC			
MICROSCOPY EXAMINATION				
PUS CELLS	2-3 /HPF			
RBC'S	NIL			
OVA	NIL			
CYST	NIL			
BACTERIA	NIL			
OTHERS	NIL			

-----End of Report-----




Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252
Lab Technician : ramshankar



BOOK APPOINTMENT



Patient Name : Mr. NEERAJ PURIL	Reg No. : 3232/UHID22DL	Lab ID. : 3532/OPDPB23DL
Age / Gender : 44Y / Male	Date : 08-Sep-2023	
Mobile No. : 8744988158	Manual No.	Collected : 08-Sep-2023 10.04
Refd. By : Dr. INSURANCE		Received : 08-Sep-2023 10.04
Sample Type : Serum	Sample ID : 232842	Report : 08-Sep-2023 13.18

TEST NAME	RESULT	UNIT	RANGE	METHOD
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HORMONES

THYROID PROFILE

T3	1.0	ng/dl		CLIA
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All values

Adults (euthyroid) 0.50-2.00

Newborns 0.73-2.88

6d - 3 mth 0.80-2.75

4 - 12 mth 0.86-2.65

1 - 6 yr 0.92-2.48

7 - 11 yr 0.93-2.31

12- 20 yr 0.91-2.18

Pregnancy

First trimester 0.05 - 3.70

Second trimester 1.7 - 4.3

Third trimester 0.4 - 3.9

T4	8.85	µg/dl		CLIA
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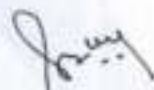
Adults - M - 4.4-10.8 µg/dl

F- 4.8 - 11.6 µg/dl

1st Trimester 7.3-15.00 µg/dl

2nd Trimester 8.92-17.38

3rd Trimester 7.98-17.70




Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252

Lab Technician : ramshankar



BOOK AFFIRMATION



Patient Name : Mr. NEERAJ PURIL	Reg No. : 3232/UHID22DL	Lab ID. : 3532/OPDPB23DL
Age / Gender : 44Y / Male	Date : 08-Sep-2023	
Mobile No. : 8744988158	Manual No.	Collected : 08-Sep-2023 10.04
Refd. By : Dr. INSURANCE		Received : 08-Sep-2023 10.04
Sample Type : Serum	Sample ID : 232842	Report : 08-Sep-2023 13.18

TSH 2.85 μ IU/ml CLIA

Adults

21-100 yrs 0.42 - 5.45

Pediatric

0-12 Months 0.98-5.63

1-5 years 0.64-5.76

6-10 Years 0.51-4.82

11-14 Years 0.53-5.27

15-20 years 0.43-4.20

Pregnancy

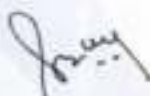
First trimester 0.1 - 2.5*

Second trimester 0.2 - 3*

Third trimester 0.3 - 3*

COMMENTS: Assay results should be interpreted in context to the clinical condition and associated results of other investigations. Previous treatment with corticosteroid therapy may result in lower TSH levels while thyroid hormone levels are normal. Results are invalidated if the client has undergone a radionuclide scan within 7-14 days before the test. Abnormal thyroid test findings often found in critically ill clients should be repeated after the critical nature of the condition is resolved. The production, circulation, and disintegration of thyroid hormones are altered throughout the stages of pregnancy

-----End of Report-----




Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252

Lab Technician : ramshankar



Barcode APPORMENT



Patient Name : Mr. NEERAJ PURIL	Reg No. : 3232/UHID22DL	Lab ID. : 3532/OPDPB23DL
Age / Gender : 44Y / Male	Date : 08-Sep-2023	
Mobile No. : 8744988158	Manual No.	Collected : 08-Sep-2023 11.16
Refd. By : Dr. INSURANCE		Received : 08-Sep-2023 11.17
Sample Type : URINE	Sample ID : 232842	Report : 08-Sep-2023 13.18

TEST NAME	RESULT	UNIT	RANGE	METHOD
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CLINICAL PATHOLOGY

URINE ROUTINE

MICROSCOPY

PHYSICAL EXAMINATION

QUANTITY

30.00 ml 10-30

COLOUR

PALE YELLOW

TRANSPARENCY

CLEAR

SPECIFIC GRAVITY

1.020 1.015-1.025

PH

6.0 5.5 - 7

CHEMICAL EXAMINATION

ALBUMIN

NIL

SUGAR

NIL

MICROSCOPIC EXAMINATION

PUS CELLS

1-2 /hpf MICROSCOPIC

RBC'S

NIL NIL

CASTS

NIL

CRYSTALS

NIL

EPITHELIAL CELLS

1-2

BACTERIA

NIL

OTHERS

NIL

-----End of Report-----



Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252

Lab Technician : ramshankar



Radiology No.	: 3532/OPDPB23DL	Date	: 08-Sep-2023
Patient Name	: Mr. NEERAJ PURIL	Age/Sex	: 44Y Male
Guardian Name	:	UHID No.	: 3232/UHID22DL
Referred By	: Dr. INSURANCE	Mobile No.	: 8744988158

ULTRASOUND OF WHOLE ABDOMAN

Convex and linear probes were used.

The liver is normal in size contour however is increased in echotexture. Intrahepatic bile ducts and CBD are not dilated. Hepatic portal veins and the IVC appear normal in caliber.

Gall bladder is adequately distended with normal intraluminal fluid contents. No evidence of calculus / wall thickness noted.

Pancreas is of normal size and contour with normal echotexture.

Right kidney is normal in size and position. It shows normal movements with respiration. Cortical thickness is normal .

No calculus, mass or hydronephrotic changes seen.

Right kidney measures- 10.25x4.87cm

Renal artery pulsation appear normal.

Left kidney is normal in size and position .It shows normal movements with respiration.

Cortical thickness is normal. **Concretions are seen in left kidney.**

No calculus, mass or hydronephrotic changes seen.

Left kidney measures- 10.75x5.03cm

Renal artery pulsation appear normal.



Dr. Harshita Surange
MBBS, DMRD (RADIODIAGNOSIS)
DIPLOMA IN MSK, UCAM (Spain)
Reg. No. MCI/16522, DMC/18402



Radiology No.	: 3532/OPDPB23DL	Date	: 08-Sep-2023
Patient Name	: Mr. NEERAJ PURIL	Age/Sex	: 44Y Male
Guardian Name	:	UHID No.	: 3232/UHID22DL
Referred By	: Dr. INSURANCE	Mobile No.	: 8744988158

Spleen is of normal size and shape. Echotexture is normal. No focal lesion is seen.

No evidence of retro-peritoneal lymphadenopathy/ ascites/ pleural effusion noted.

Urinary bladder does not show any calculus or mass lesion. No significant wall thickening noted.

Prostate is of normal size for age with regular contours and normal echo-texture.
It measures 37x39x49mm which is equal to 37.88gms.

Impressions: 1) Fatty liver grade I
2) Left Renal Concretions

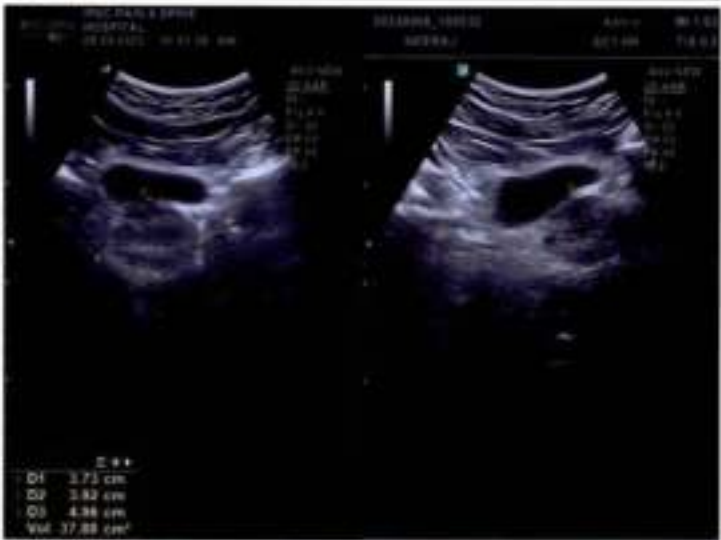


Dr. Harshita Surange
MBBS,DMRD(RADIODIAGNOSIS)
DIPLOMA IN MSK,UCAM(Spain)
Reg.No. MCI/16522,DMC/18402



BOOK APPOINTMENT



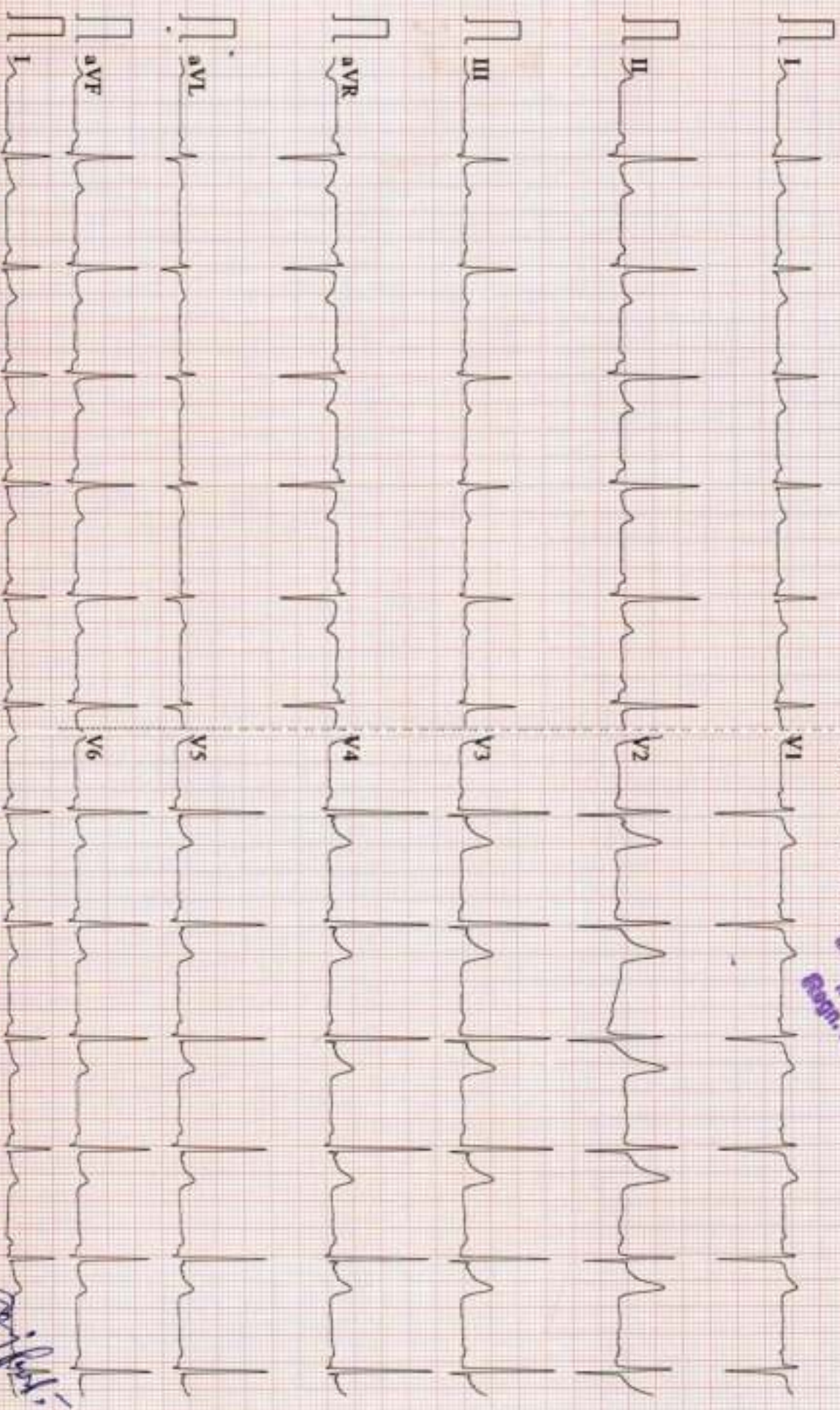


hceeraj
Male 44Years
Req. No. :

HR : 72 bpm
P : 98 ms
PR : 148 ms
QRS : 92 ms
QT/QTcBz : 360/394 ms
PQRST : 54/62/51
RV5/SV1 : 1.603/1.124 mV

Diagnosis Information:
Sinus rhythm
Normal ECG

WNL
Report Confirmed by **Dr. ANIL SAHOO**
MD, PGDCC
Regn. No. 33201



Dr. Anil Sahoo

Radiology No.	: 3532/OPDPB23DL	Date	: 08-Sep-2023
Patient Name	: Mr. NEERAJ PURIL	Age/Sex	: 44Y Male
Guardian Name	:	UHID No.	: 3232/UHID22DL
Referred By	: Dr. INSURANCE	Mobile No.	: 8744988158

ECHO-DOPPLER REPORT

Final Interpretation

- No RWMA, LVEF-60%
- Normal mitral inflow pattern
- No Clot/ Veg/ PE
- IVC normal size with preserved respiratory variation

M-Mode/2-D Description

- Left Atrium: Normal
- Right Atrium: Normal
- Right Ventricle: Normal
- Aortic Valve: Normal
- Mitral Valve: Normal
- Tricuspid valve: Normal
- Pulmonary Valve: Normal
- Main Pulmonary artery & its branches: Normal
- Pericardium: Normal

Measurements (mm):

	Observed Values		Normal Values
Aortic root diameter	26		20-36 (22mm/M ²)
Aortic Valve Opening			15-26
Left Atrium size	28		19-40
	End Diastole	End Systole	Normal Values
Left Ventricle size	44	26	(ED= 37-56)
Inter ventricular Septum	11	14	(ED= 6-12)
Posterior Wall Thickness	10	13	(ED= 5-10)
LV Ejection Fraction (%)	60%		55%-80%

Doppler velocities (cm/sec)



BOOK APPOINTMENT





Radiology No.	: 3532/OPDPB23DL	Date	: 08-Sep-2023
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Pulmonary valve		Aortic valve	
Max velocity	73	Max velocity	90
Mitral valve		Tricuspid valve	
E	69	Max Velocity	108
A	48	Mean Velocity	
DT		Mean PG	4
E/A			
Max PG =			
Mean PG =			

Regurgitation

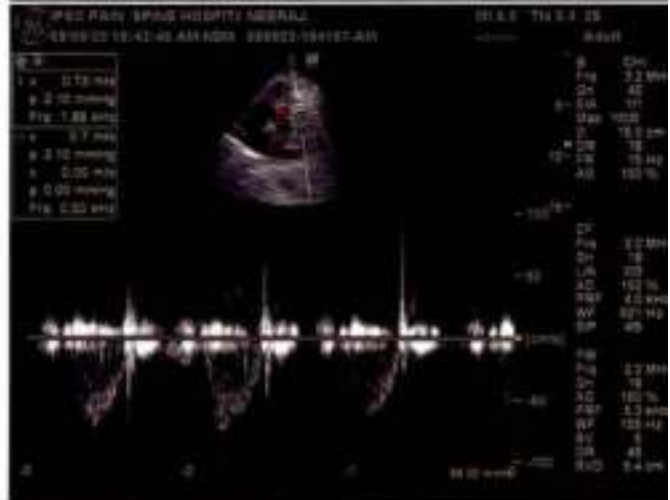
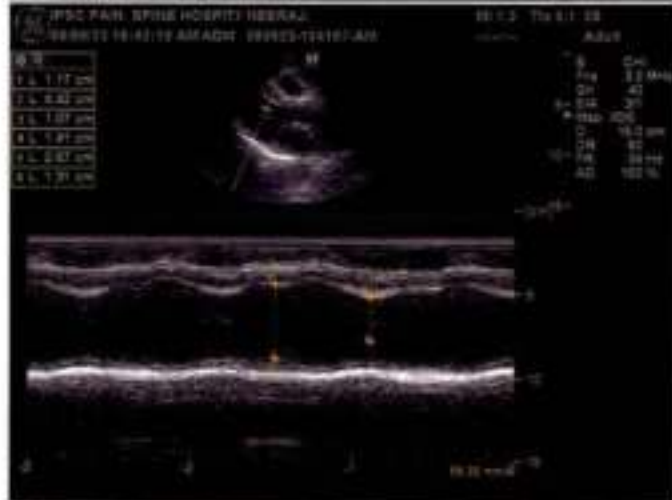
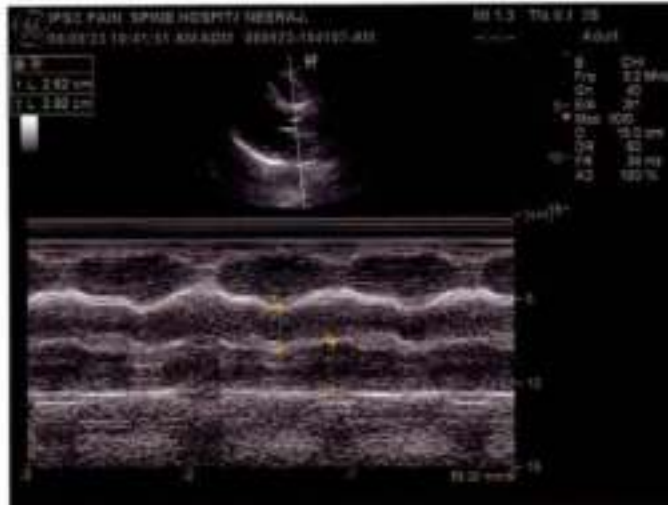
MR		TR	
Severity	nil	Severity	nil
Max Velocity		PASP	4
AR		PR	
Severity	nil	Severity	nil

DR ANIL SAHOO
(CARDIOLOGY)



BOOK APPOINTMENT





Radiology No.	: 3532/OPDPB23DL	Date	: 08-Sep-2023
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X-RAY CHEST

Indication: H/O-Routine check-up.

Image quality:-

No evidence of rotation.PA view. Normal penetration.

Airway:- Trachea central. Carina & bronchi are normal.

No hilar abnormality.

Lung fields:- apical capping is seen in bilaterally.

Lungs field are Clear.

Cardiac:- Cardiac borders are visible.

Normal heart size.

Diaphragm:- Costophrenic angles on right & left are normal.

Cardiophrenic angles on right & left are normal.


Flattening of hemidiaphragm is seen.

Bony cage:- No evidence of bony lesion/fracture seen.

No evidence of cervical ribs seen.

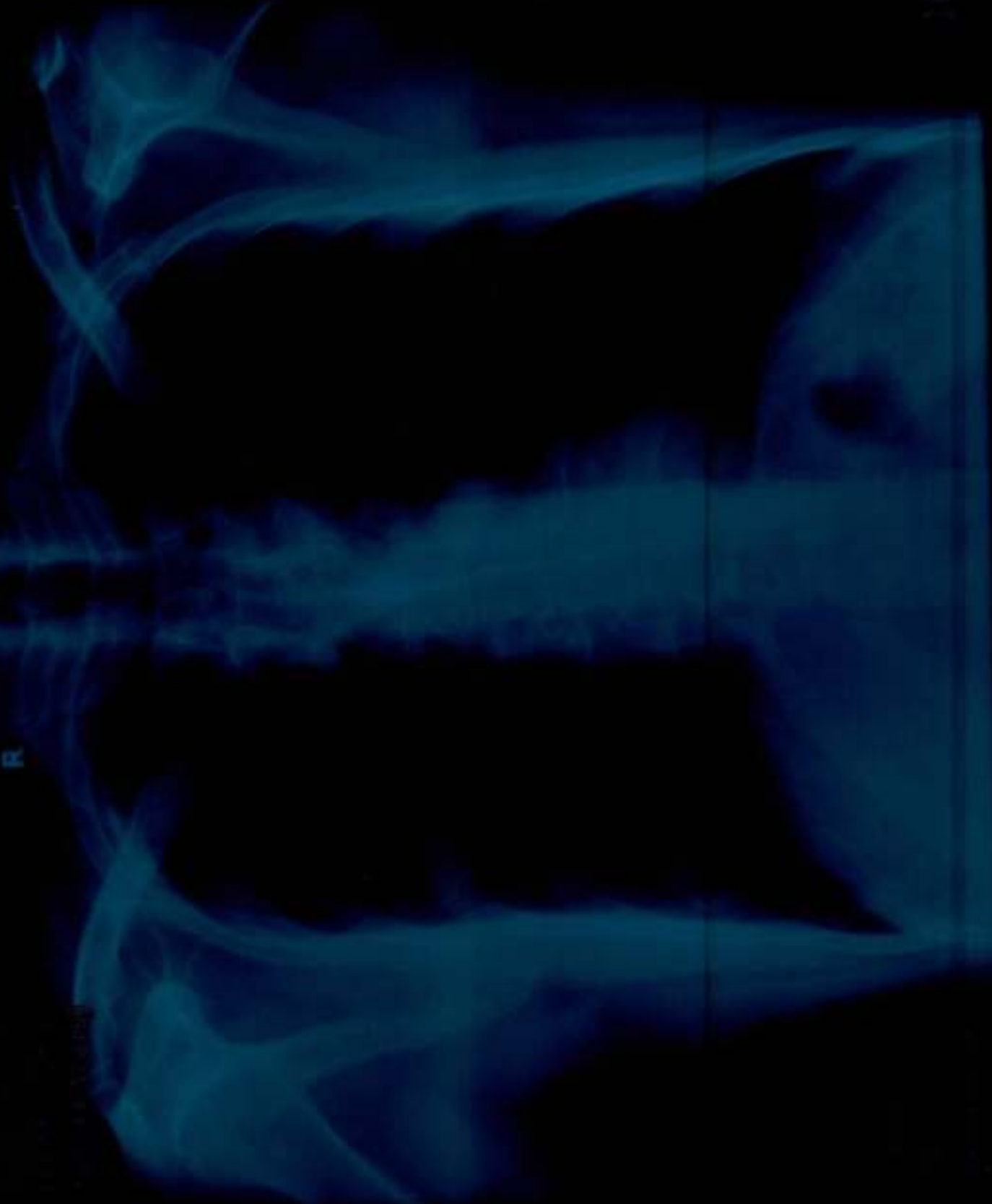
Please correlate clinically.

Impression: COPD changes.



Dr. Harshita Surange
MBBS,DMRD(RADIODIAGNOSIS)
DIPLOMA IN MSK,UCAM(Spain)
Reg.No. MCI/16522,DMC/18402





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Figure 1

Transport Department Government of NCT of Delhi
Licence to Drive Vehicles Throughout India

Licence No. : DL08 20069187385 (P) CA
Name : NEERAJ PURIL
S/W/D : SH KUNWARPAL

DOB : 20/02/1979 BG : A+
Address :
A16 SHRI RAM APPT Dwarka, South
West Delh, DL 110075




Auth to Drive
LMV

Date of Issue
20/03/2006



Issue Date : 30/05/2018
Validity(NT) : 19/03/2026
Validity(T) : NA
Inv Carr No : NA

(Holder Signature)


Issuing Authority
NWZ-1, WAZIRPUR



453, Sector 19, Pocket 1, Dwarka, New Delhi, Delhi, 110075, India

New Delhi
Delhi
India



31°C
88°F

2023-09-08(Fri) 09:41(am)