



NABL



BHAILAL AMIN  
GENERAL HOSPITAL

ESTD. 1964

## CONCLUSION OF HEALTH CHECKUP

ECU Ref. No : MH/22/000432 Patient No : 21038319 Date : 12/03/2022  
Name : MR. PRADEEP JAGDISH SINGH MALHOTRA Sex / Age : MALE 39  
Height / Weight : 172 Cms 71 Kgs Ideal Weight 68 Kgs BMI : 24

**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.*

Page 1 of 5



Name : MR. PRADEEP JAGDISH SINGH MALHOTRA

Sex / Age : MALE 39

**Present History**

NO ANY MAJOR ILLNESS AT PRESENT

**Past History**

K/C/O ALLERGIC RHINITIES

**Family History**

FATEHR- DIABETES MELLITUS; BRONCHIAL ASTHMA

MOTHER- HYPERTENSION

**Personal History**

NON VEG DIET; NO SMOKING; OCCASIONAL ALCOHOL

**Clinical Examination**

B.P. 116/70 MMHG

Pulse 80/MIN; REG

Others NAD

**Respiratory System**

CLINICALLY NAD

**Cardio Vascular System**

CLINICALLY NAD

**Abdominal System**

CLINICALLY NAD

**Neurological System**

CLINICALLY NAD



### Dietary Assessment

Name : MR. PRADEEP JAGDISH SINGH MALHOTRA Sex / Age : MALE 39  
Height : 172 Cms Weight : 71 Kgs Ideal Weight : 68 Kgs BMI : 24

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.

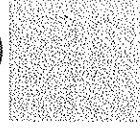
Drink green Tea or black Coffee once in a day.

Do brisk walking daily.

Dietitian

365 Days / 24 Hours Laboratory Services

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. PRADEEP JAGDISH SINGHMALHOTRA Type : OPD  
Gender / Age : Male / 39 Years 3 Months 25 Days Request No. : 30928  
MR No / Bill No. : 21038319 / 221029944 Request Date : 12/03/2022 08:56 AM  
Consultant : Dr. Manish Mittal Collection Date : 12/03/2022 09:05 AM  
Location : OPD Approval Date : 12/03/2022 04:31 PM

### Haematology

Test	Result	Units	Biological Ref. Range
<b>Blood Group</b>			
ABO system	O		
Rh system.	Positive		

By Gel Technology / Tube Agglutination Method

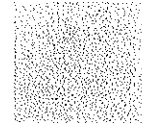
Note :

- 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. Nikunj V. Mehta  
MD (Path.)

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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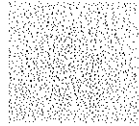
**CBC + ESR**

Test	Result	Units	Biological Ref. Range
<b>Haemoglobin.</b>			
Haemoglobin	14.3	gm/dL	13 - 17
Red Blood Cell Count (T-RBC)	4.93	mill/cmm	4.5 - 5.5
Hematocrit (HCT)	41.8	%	40 - 50
Mean Corpuscular Volume (MCV)	84.8	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	29.0	pg	27 - 32
MCH Concentration (MCHC)	34.2	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	12.5	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	39.0	fl	39 - 46
<b>Total Leucocyte Count (TLC)</b>			
Total Leucocyte Count (TLC)	8.33	thou/cmm	4 - 10
<b>Differential Leucocyte Count</b>			
Polymorphs	56	%	40 - 80
Lymphocytes	33	%	20 - 40
Eosinophils	6	%	1 - 6
Monocytes	5	%	2 - 10
Basophils	0	%	0 - 2
Polymorphs (Abs. Value)	4.67	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	2.71	thou/cmm	1 - 3
Eosinophils (Abs. Value)	0.49	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.42	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.04	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.2	%	1 - 3 : Borderline > 3 : Significant
<b>Platelet Count</b>			
Platelet Count	165	thou/cmm	150 - 410
Smear evaluation	Adequate		
ESR	1	mm/1 hr	0 - 10

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name	: Mr. PRADEEP JAGDISH SINGHMALHOTRA	Type	: OPD
Gender / Age	: Male / 39 Years 3 Months 25 Days	Request No.	: 30928
MR No / Bill No.	: 21038319 / 221029944	Request Date	: 12/03/2022 08:56 AM
Consultant	: Dr. Manish Mittal	Collection Date	: 12/03/2022 09:05 AM
Location	: OPD	Approval Date	: 12/03/2022 12:25 PM

### 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.

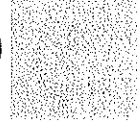
---- End of Report ----

Dr. Nikunj V. Mehta  
MD (Path.)

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DEPARTMENT OF LABORATORY MEDICINE

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Location : OPD Approval Date : 12/03/2022 01:52 PM

Clinical Biochemistry

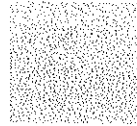
Test	Result	Units	Biological Ref. Range
Fasting Plasma Glucose	81	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	115	mg/dL	70 - 140

By Hexokinase method on RXL Dade Dimension

— End of Report —

Dr. Rakesh Vaidya  
MD (Path). DCP.

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Patient Name : Mr. PRADEEP JAGDISH SINGHMALHOTRA Type : OPD  
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 Consultant : Dr. Manish Mittal Collection Date : 12/03/2022 09:05 AM  
 Location : OPD Approval Date : 12/03/2022 02:07 PM

**Complete Lipid Profile**

Test	Result	Units	Biological Ref. Range
<b>Complete Lipid Profile</b>			
Appearance	Clear		
Triglycerides	94	mg/dL	1 - 150
<i>(By Lipase / Glycerol dehydrogenase on RXL Dade Dimension</i>			
<i>&lt; 150 Normal</i>			
<i>150-199 Borderline High</i>			
<i>200-499 High</i>			
<i>&gt; 499 Very High)</i>			
Total Cholesterol	150	mg/dL	1 - 200
<i>(By enzymatic colorimetric method on RXL Dade Dimension</i>			
<i>&lt;200 mg/dL - Desirable</i>			
<i>200-239 mg/dL - Borderline High</i>			
<i>&gt; 239 mg/dL - High)</i>			
HDL Cholesterol	52	mg/dL	40 - 60
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension</i>			
<i>&lt; 40 Low</i>			
<i>&gt; 60 High)</i>			
Non HDL Cholesterol (calculated)	98	mg/dL	1 - 130
<i>(Non- HDL Cholesterol</i>			
<i>&lt; 130 Desirable</i>			
<i>139-159 Borderline High</i>			
<i>160-189 High</i>			
<i>&gt; 191 Very High)</i>			
LDL Cholesterol	85	mg/dL	1 - 100
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension</i>			
<i>&lt; 100 Optimal</i>			
<i>100-129 Near / above optimal</i>			
<i>130-159 Borderline High</i>			
<i>160-189 High</i>			
<i>&gt; 189 Very High)</i>			
VLDL Cholesterol	18.8	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	1.63		2.1 - 3.5
T. Ch./HDL Ch. Ratio	2.88		3.5 - 5
<i>(Recent NECP / ATP III Guidelines / Classification (mg/dl) :)</i>			

---- End of Report ----

Dr. Rakesh Vaidya  
MD (Path). DCP.





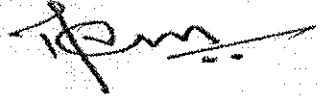
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 Location : OPD

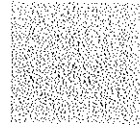
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 Request No. : 30928  
 Request Date : 12/03/2022 08:56 AM  
 Collection Date : 12/03/2022 09:05 AM  
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**Renal Function Test (RFT)**

Test	Result	Units	Biological Ref. Range
Urea (By Urease Kinetic method on RXL Dade Dimension)	20	mg/dL	10 - 45
Creatinine (By Modified Kinetic Jaffe Technique)	1.18	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)	6.7	mg/dL	3.4 - 7.2

--- End of Report ---

  
 Dr. Nikunj V. Mehta  
 MD (Path.)



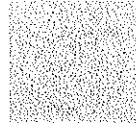
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 Consultant : Dr. Manish Mittal Collection Date : 12/03/2022 09:05 AM  
 Location : OPD Approval Date : 12/03/2022 02:07 PM

**Liver Function Test (LFT)**

Test	Result	Units	Biological Ref. Range
<b>Bilirubin</b>			
Bilirubin - Total	<b>1.47</b>	mg/dL	0 - 1
Bilirubin - Direct	0.27	mg/dL	0 - 0.3
Bilirubin - Indirect	1.2	mg/dL	0 - 0.7
<i>(By Diazotized sulfanilic acid on RXL Dade Dimension.)</i>			
Aspartate Aminotransferase (SGOT/AST)	<b>45</b>	U/L	15 - 40
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alanine Aminotransferase (SGPT/ALT)	<b>101</b>	U/L	10 - 40
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alkaline Phosphatase	72	U/L	53 - 128
<i>(BY PNPP AMP method on RXL Dade Dimension.)</i>			
Gamma Glutamyl Transferase (GGT)	37	U/L	15 - 85
<i>(By IFCC method on RXL Dade Dimension.)</i>			
<b>Total Protein</b>			
Total Proteins	7.34	gm/dL	6.4 - 8.2
Albumin	4.07	gm/dL	3.4 - 5
Globulin	3.27	gm/dL	3 - 3.2
A : G Ratio	1.24		1.1 - 1.6
<i>(By Biuret endpoint and Bromocresol purple method on RXL Dade Dimension.)</i>			

--- End of Report ---

Dr. Rakesh Vaidya  
MD (Path), DCP.



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 MR No / Bill No. : 21038319 / 221029944  
 Consultant : Dr. Manish Mittal  
 Location : OPD

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 Request No. : 30928  
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## Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
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Triiodothyronine (T3)	1.10	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)	7.68	mcg/dL	
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(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)	8.06	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

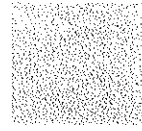
Pregnancy :

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 ))

— End of Report —

Dr. Rakesh Vaidya  
 MD (Path). DCP.



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**Urine Routine**

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	1.025		
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	Negative		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 (0-2)	/hpf	0 - 5
Epithelial Cells	Present (0-2)	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil		Nil
Mucus	Absent		Absent
Organism	Absent		

---- End of Report ----

Dr. Rakesh Vaidya  
MD (Path). DCP.



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**DEPARTMENT OF DIAGNOSTIC RADIOLOGY**

Patient No. : 21038319      Report Date : 12/03/2022  
Request No. : 190013403      12/03/2022 8.56 AM  
Patient Name : **PRADEEP JAGDISH SINGHMALHOTRA**  
Gender / Age : Male / 39 Years 3 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





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**DEPARTMENT OF DIAGNOSTIC RADIOLOGY**

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Request No. : 190013403 12/03/2022 8.56 AM  
Patient Name : **PRADEEP JAGDISH SINGHMALHOTRA**  
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**ADVANCED DIGITAL SOLUTIONS**

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Ultra High Resolution Sonography

Multi-Detector CT Scan

Mammography

Interventional Radiology

Digital Subtraction Angiography

Foetal Echocardiography

Echocardiography

**X-Ray Chest AP**

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





**DEPARTMENT OF DIAGNOSTIC RADIOLOGY**

- S C W
- 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. : 21038319                      Report Date : 12/03/2022  
Request No. : 190013407              12/03/2022 8.56 AM  
Patient Name : **PRADEEP JAGDISH SINGHMALHOTRA**  
Gender / Age : Male / 39 Years 3 Months 25 Days

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

**Liver is normal in size and increased in echo pattern.** 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 echo pattern.

Both kidneys are normal in shape and position. Normal echogenicity and cortico medullary differentiation is noted. No hydronephrosis seen.  
**5mm cyst is seen in upper pole of left kidney.**

	<b>RIGHT</b>	<b>LEFT</b>
Renal length :	91 mm.	94 mm.
A.P. :	31 mm.	32 mm.

No ascites.

**COMMENT:**

- **Fatty liver Grade- I.**
- **Left renal small cyst.**

Kindly correlate clinically.

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

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



ECU/21038319  
39 Years

12-Mar-22

9:44:33 AM  
Male

MR. PRADEEP J. SINGHALHOTRA



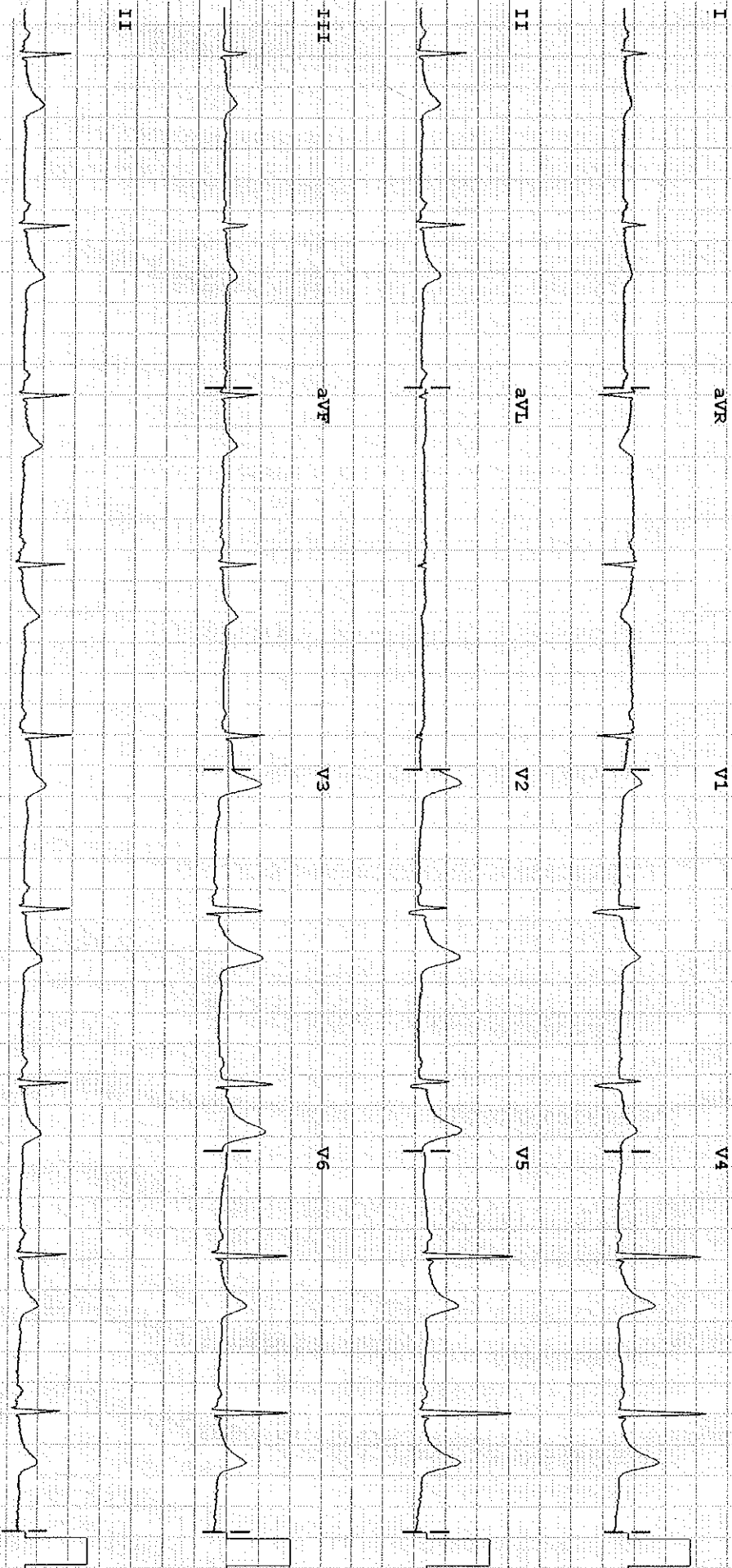
**ANAND HOSPITAL**  
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*ECU*

Doctor DR. MANISH MITTAL

Rate 54  
PR 144  
QRSD 77  
QT 464  
QTc 440

--AXIS--  
P 41  
QRS 65  
T 59



Dev: Speed: 25 mm/sec Limb: 10 mm, aV Chest: 10 mm/mV

50~0.15-150 Hz

PH08

P2



# Dr. Sonica Peshin

Cosmetic Dentist & Implantologist

Reg. No. : 6966-A

M. : 9586867301



BHAILAL AMIN  
GENERAL HOSPITAL

## Dental assessment form

12/03/2022

Name: Pradeep Jagdishsingh Malhotra

Age/ Sex: 39 years/Male

Patient has come for a regular check up.

### On Examination:

- Stains++ Calculus++
- History of horizontal brushing
- Mild attrition
- Missing tooth with respect to 46
- Mesial migrated 47, 48
- Decayed teeth with respect to 47, 48

### Provisional diagnosis:

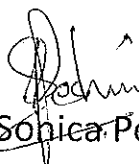
- Chronic generalised gingivitis

### Treatment plan:

- Scaling and polishing
- Restoration of 47, 48







### Advised:

- Brush your teeth twice daily
- Salt water gargle twice daily
- Clean your tongue and floss in between everyday.
- Follow vertical brushing technique.

  
Dr Sonica Peshin

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## EXERCISE STRESS TEST REPORT

Patient Name: PRADEEP J MALHOTRA,  
 Patient ID: 6524  
 Height: 172 cm  
 Weight: 70.8 kg

DOB: 16.11.1982  
 Age: 39yrs  
 Gender: Male  
 Race: Indian

Study Date: 12.03.2022  
 Test Type: Treadmill Stress Test  
 Protocol: BRUCE

Referring Physician: ARCOFEMI HEALTHCARE LTD  
 Attending Physician: DR. MANISH MITTAL  
 Technician: Mr. VISHAL MORE

Medications:

Medical History:

Reason for Exercise Test:  
 Screening for CAD

### Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	09:06	0.00	0.00	93	120/70	
	STANDING	00:02	0.00	0.00	92	120/70	
	HYPERV.	00:03	0.00	0.00	92	120/70	
	WARM UP	00:10	1.00	0.00	84	120/70	
EXERCISE	STAGE 1	03:00	1.70	10.00	127	120/70	
	STAGE 2	03:00	2.50	12.00	153	130/80	
	STAGE 3	01:03	3.40	14.00	162	140/80	
RECOVERY		03:15	0.00	0.00	111	110/70	

The patient exercised according to the BRUCE for 7:03 mins, achieving a work level of Max. METS: 10.10. The resting heart rate of 90 bpm rose to a maximal heart rate of 164 bpm. This value represents 90 % of the maximal, age-predicted heart rate. The resting blood pressure of 120/70 mmHg, rose to a maximum blood pressure of 140/80 mmHg. The exercise test was stopped due to Target heart rate achieved.

### Interpretation

Summary: Resting ECG: normal.

Functional Capacity: normal.

HR Response to Exercise: appropriate.

BP Response to Exercise: normal resting BP - appropriate response.

Chest Pain: none.

Arrhythmias: none.

ST Changes: none.

Overall impression: Normal stress test.

### Conclusions

STRESS TEST IS NEGATIVE FOR INDUCIBLE MYOCARDIAL ISCHEMIA

CONFIRMED BY : DR. MANISH MITTAL