

SHRIMATI JAYABEN MODY HOSPITAL

REGD. No. F/106/BHARUCH

MANAGED BY :

Ankleshwar Industrial Development Society, Ankleshwar
VALIA ROAD, GIDC, ANKLESHWAR - 393 002. PHONE : 222220, 224550

NAME OF PATIENT : HIRE RAVI
DATE : 11/02/2023

USG OF ABDOMEN AND PELVIS

Liver appears normal in size, shape and shows normal echotexture.
No evidence of focal SOL or dilation of IHBR seen.
Porta hepatis is appears normal.
Gallbladder appears partially distended and shows few calculi within, largest approximately measures 7 mm. Wall thickness appears normal.
Pancreas appears normal in size and echotexture.
Spleen appears normal in size and echotexture.
Aorta appears normal. No para aortic lymphnodes seen.
Right kidney appears normal in size, location and echotexture.
Cortex and collecting system of right kidney appears normal.
No evidence of large renal calculi or obsrtuctive uropathy.
Right renal middle calyx a tiny concretions noted.
Left kidney appears normal in size, location and echotexture.
Cortex and collecting system of left kidney appears normal.
No evidence of large renal calculi or obsrtuctive uropathy.
Bladder & Prostate appears normal.No calculi seen.
Terminal ileum and ceacum appears normal.
Appendix is not seen due to bowel gas, no evidence of probe tenderness.
No evidence of free fluid or collection is seen in peritoneal spaces.

COMMENTS:

- Cholelithiasis without changes of cholecystitis.

THANKS FOR THE REFERENCE

DR. JANAKI RAJ (M.D)
CONSULTANT RADIOLOGIST



Patient Name : Mr. Ravi Jagdish Hire
Registration No : 101-023-2076-000
Sex : Male
Patient Arrived At : 11-Feb-2023 09:00:00 AM
Test Name : ECHO STUDY

DOB : 31-Aug-1984
Age : 38 Yrs/
Result Verified At : 11-Feb-2023 14:46

2D ECHO CARDIOGRAPHY REPORT

- All cardiac chambers are normal in dimension
- Normal LV Systolic function at Rest, LVEF = 60 %
- No RWMA at Rest.
- Borderline LVH+
- MV – Normal, No MS/MR AV – No AS/Trivial AR
- TV – Normal , No TS/ Trivial TR PV – No PS / PR
- No significant Pulmonary Hypertension, RVSP = 30 mmHg
- IAS / IVS Intact
- No e/o Clot / Vegetation /pericardial effusion
- IVC normal diameter and collapse > 50 % with respiration

IMPRESSION: NORMAL LVEF, NO RWMA, BORDERLINE LVH

Dr. Milan Mehta
D.Card (Mumbai)
Non-Invasive cardiology

11.07.2023 15:06:29
SARU PATEL HOSPITAL
CHIKUWADI
ANKLESHWAR

Location:
Number:
Visit:
Indication:
Medication 1:
Medication 2:
Medication 3:

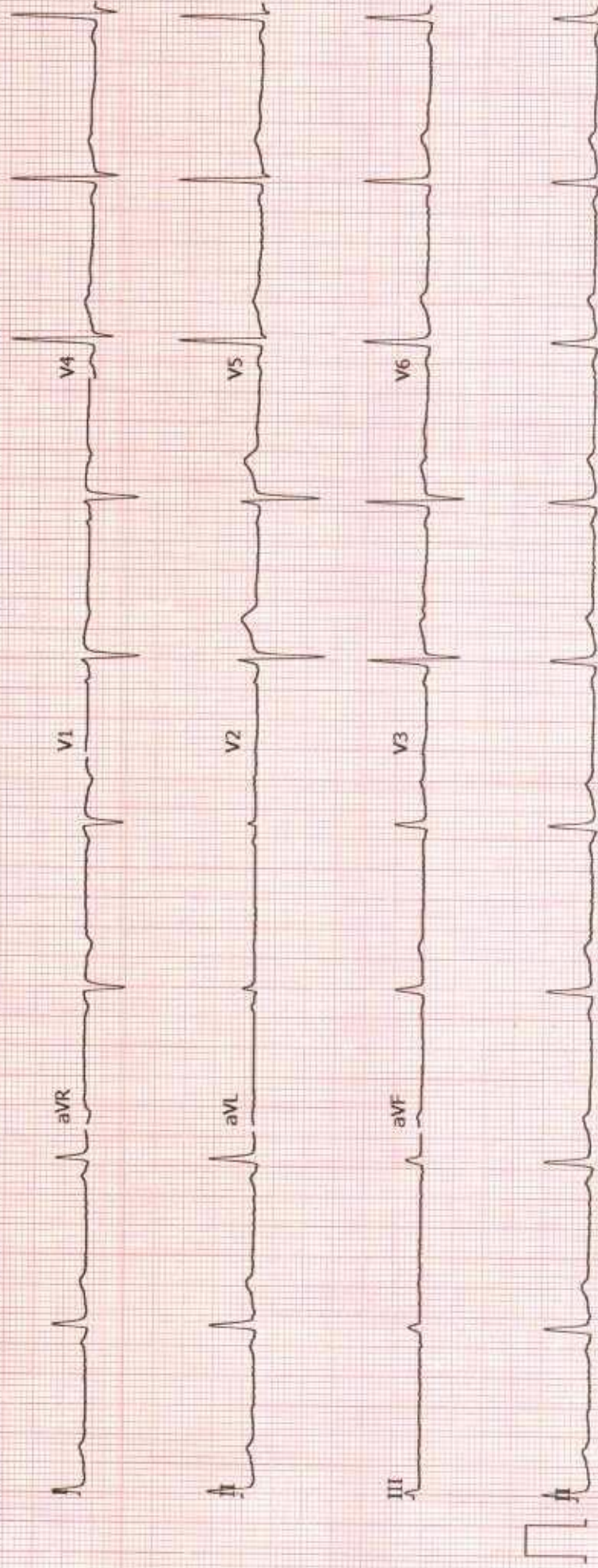
55 bpm
--/-- mmHg

Room:

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 84 ms
QT / QTcBaz : 422 / 403 ms
PR : 150 ms
P : 104 ms
RR / PP : 1094 / 1090 ms
P / QRS / T : 38 / 47 / 43 degrees

Sinus bradycardia
Nonspecific T wave abnormality
Abnormal ECG



Patient Name:-	RAVI JAGDISH HIRE	Date :-	11/02/2023
Age & Sex :-	38Y M		
Referred By :-	HEALTH CHECK UP		

X-RAY CHEST PA VIEW

Both lung zones are clear

Cardiac silhouette is normal.

Both costophrenic angles clear.

Both domes of diaphragm are at normal level.

Bony thorax is unremarkable.

Impression -No significant abnormality detected in present study.

Please correlate with clinical findings and relevant investigations.



Dr. Vivek Chaudhari
D.M.R.E.
Consultant Radiologist

Patient Name : MR. RAVI JAGDISH HIRE

Age / Gender : 38 years / Male

Patient ID : 19364

Source : Sardar Patel Hospital (OPD)

Referral : Dr Mediwheel Full body Health Checkup

Collection Time : 11/02/2023, 08:49 AM

Reporting Time : 11/02/2023, 10:50 AM

Sample ID :



Test Description	Value(s)	Reference Range	Unit(s)
CBC			
Hemoglobin (Hb)* Method : Cymeth Photometric Measurement	17.9	13.5 - 18.0	gm/dL
Erythrocyte (RBC) Count* Method : Electrical Impedence	5.34	4.7 - 6.0	mil/cu.mm
Packed Cell Volume (PCV)* Method : Calculated	49.4	42 - 52	%
Mean Cell Volume (MCV)* Method : Electrical Impedence	92.51	78 - 100	fL
Mean Cell Haemoglobin (MCH)* Method : Calculated	33.52	27 - 31	pg
Mean Corpuscular Hb Conc. (MCHC)* Method : Calculated	36.23	32 - 36	gm/dL
Red Cell Distribution Width (RDW)* Method : Electrical Impedence	13.2	11.5 - 14.0	%
Total Leucocytes (WBC) Count* Method : Electrical Impedence	6260	4000-10000	cell/cu.mm
Neutrophils* Method : VCSn Technology	61	40 - 80	%
Lymphocytes* Method : VCSn Technology	28	20 - 40	%
Monocytes* Method : VCSn Technology	05	2 - 10	%
Eosinophils* Method : VCSn Technology	06	1 - 6	%
Basophils Method : VCSn Technology	00	0 - 4	%
Platelet Count* Method : Electrical Impedence	188	150 - 450	10 ³ /ul
E.S.R			
Erythrocyte Sedimentation Rate Method : EDTA Whole blood, modified westerngren	04	<15	mm/hr

Interpretation:

It indicates presence and intensity of an inflammatory process. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, acute rheumatic fever,. It is also increased in multiple myeloma, hypothyroidism.

****END OF REPORT****

Dr. Bhavika Dholiya
M. D. Pathology
Registration No: G-32571

Patient Name : MR. RAVI JAGDISH HIRE

Age / Gender : 38 years / Male

Patient ID : 19364

Source : Sardar Patel Hospital (OPD)

Referral : Dr Mediwheel Full body Health Checkup

Collection Time : 11/02/2023, 08:49 AM

Reporting Time : 11/02/2023, 10:28 AM

Sample ID :



Test Description	Value(s)	Reference Range	Unit(s)
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BLOOD GROUP & RH (D) FACTOR, EDTA WHOLE BLOOD

Blood Group

Method : Forward and Reverse By Tube Method

"A"

RH Factor

Positive

Methodology

This is done by forward and reverse grouping by tube Agglutination method.

Interpretation

Newborn baby does not produce ABO antibodies until 3 to 6 months of age. So the blood group of the Newborn baby is done by ABO antigen grouping (forward grouping) only, antibody grouping (reverse grouping) is not required. Confirmation of the New-born's blood group is indicated when the A and B antigen expression and the isoagglutinins are fully developed (2-4 years).

THYROID FUNCTION TEST 1

T3-Total	1.66	0.69 - 2.15 ng/mL	ng/mL
Method : Serum, CLIA			
T4-Total	7.91	5.2 - 12.7 ug/dL	ug/dL
Method : Serum, CLIA			
TSH	1.64	0.3 - 4.5 uIU/mL	uIU/mL
Method : Serum, CLIA			

Interpretation

END OF REPORT

Dr. Bhavika Dholiya
M. D. Pathology
Registration No: G-32571

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Age / Gender : 38 years / Male

Patient ID : 19364

Source : Sardar Patel Hospital (OPD)

Referral : Dr Mediwheel Full body Health Checkup

Collection Time : 11/02/2023, 08:49 AM

Reporting Time : 11/02/2023, 11:55 AM

Sample ID :



Test Description	Value(s)	Reference Range	Unit(s)
BLOOD GLUCOSE FASTING (FBS)			
Glucose fasting Method : Fluoride Plasma-F, Hexokinase	116.0	Normal: 70 - 99 Impaired Tolerance: 100-125 Diabetes mellitus: >= 126 (on more than one occasion) (American diabetes association guidelines 2018)	mg/dL
Urine Fasting Urine Ketones	Absent		
BLOOD GLUCOSE POST PRANDIAL (PP2BS)			
Blood Glucose-Post Prandial Method : Hexokinase	161.4	70 - 140	mg/dL
Urine Post Prandial	Absent		
GLYCOSYLATED HB (HBA1C)			
Glyco Hb (HbA1C)	4.8	Non-Diabetic: <=5.6 Pre Diabetic: 5.7-6.4 Diabetic: >=6.5	%
Estimated Average Glucose :	91.06		mg/dL

Interpretations

- HbA1C has been endorsed by clinical groups and American Diabetes Association guidelines 2017 for diagnosing diabetes using a cut off point of 6.5%
- Low glycated haemoglobin in a non diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency and haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
- In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control.
 - Excellent control-6-7 %
 - Fair to Good control - 7-8 %
 - Unsatisfactory control - 8 to 10 %
 - Poor Control - More than 10 %

****END OF REPORT****

Dr. Bheviha Dholya
M. D. Pathology
Registration No: G-32571

Patient Name : MR. RAVI JAGDISH HIRE

Age / Gender : 38 years / Male

Patient ID : 19364

Source : Sardar Patel Hospital (OPD)

Referral : Dr Mediwheel Full body Health Checkup

Collection Time : 11/02/2023, 08:49 AM

Reporting Time : 11/02/2023, 10:30 AM

Sample ID :



Test Description	Value(s)	Reference Range	Unit(s)
RENAL PROFILE			
Urea *	17.2	17- 55 mg/dL	mg/dL
Method : Serum, Urease			
Creatinine*	0.84	0.6 - 1.4 mg/dl	mg/dL
Method : Serum, Enzymatic			
Uric Acid*	6.8	3.5 - 7.2	mg/dL
Method : Serum, Uricase/POD			
Blood Urea Nitrogen-BUN*	7.10	7 - 25 mg/dL	mg/dL
Method : Calculated			
Calcium*	9.66	8.8 - 10.6	mg/dL
Method : Arsenazo III			
Sodium*	140.1	136 - 146	mmol/L
Method : Serum, Indirect ISE			
Potassium*	4.06	3.5 - 5.1	mmol/L
Method : Serum, Indirect ISE			
Chloride*	102.2	97.0 - 108.0	mmol/L
Method : Serum, Indirect ISE			
LIVER FUNCTION TEST-1			
Bilirubin - Total	0.9	0.3 - 1.2	mg/dL
Method : Diazotization			
Bilirubin - Direct	0.43	Adults and Children: 0.0 - 0.4	mg/dL
Method : Serum, Diazotization			
Bilirubin - Indirect	0.47		
Method : Calculated			
SGOT	36.5	< 50	U/L
Method : Serum, UV without P5P			
SGPT	38.3	< 50	U/L
Method : Serum, UV without P5P			
Alkaline Phosphatase-ALPI	73.0	30-120	U/L
Method : Serum, PNPP, AMP Buffer, IFCC 37 degree			
Total Protein	6.77	6.6 - 8.3	g/dL
Method : Serum, Biuret, reagent blank end point			
Albumin	4.03	Adults: 3.5 - 5.2	g/dL
Method : Serum, Bromocresol green			
Globulin	2.74	1.8 - 3.6	g/dL
Method : Calculated			
A/G Ratio	1.47	1.2 - 2.2	ratio
Method : Calculated			

****END OF REPORT****

B. Sholji

Dr. Bhavika Dholiya
M. D. Pathology
Registration No: G-32571

Patient Name : MR. RAVI JAGDISH HIRE

Age / Gender : 38 years / Male

Patient ID : 19364

Source : Sardar Patel Hospital (OPD)

Referral : Dr Mediwheel Full body Health Checkup

Collection Time : 11/02/2023, 08:49 AM

Reporting Time : 11/02/2023, 10:29 AM

Sample ID :



Test Description	Value(s)	Reference Range	Unit(s)
LIPID PROFILE (D)			
Cholesterol-Total Method : Serum, Cholesterol oxidase esterase, peroxidase	194.0	Desirable: <= 200 Borderline High: 201-239 High: > 239	mg/dL
Triglycerides Method : Serum, Enzymatic, endpoint	223.4	Normal: < 150 Borderline High: 150-199 High: 200-499 Very High: >= 500	mg/dL
Cholesterol-HDL Direct Method : Serum, Direct measure-PEG	50.3	Normal: > 40 Major Heart Risk: < 40	mg/dL
LDL Cholesterol Method : Calculated	99.02	Optimal: < 100 Near optimal/above optimal: 100-129 Borderline high: 130-159 High: 160-189 Very High: >= 190	mg/dL
Non - HDL Cholesterol, Serum Method : calculated	143.70	Desirable: < 130 mg/dL Borderline High: 130-159mg/dL High: 160-189 mg/dL Very High: > or = 190 mg/dL	mg/dL
VLDL Cholesterol Method : calculated	44.68	6 - 38	mg/dL
CHOL/HDL RATIO Method : calculated	3.86	3.5 - 5.0	ratio
LDL/HDL RATIO Method : calculated	1.97	Desirable / low risk - 0.5 -3.0 Low/ Moderate risk - 3.0- 6.0 Elevated / High risk - > 6.0	ratio
HDL/LDL RATIO Method : calculated	0.51	Desirable / low risk - 0.5 -3.0 Low/ Moderate risk - 3.0- 6.0 Elevated / High risk - > 6.0	ratio

Note: 8-10 hours fasting sample is required. Test results may show interferences due to pregnancy, certain drugs such as estrogens and other drugs (such as androgenic and related steroids), and insulin therapy etc. 12 hours fast is recommended prior to the test as non fasting status may result in falsely elevated test values. Alcohol should not be consumed for atleast 24 hours before the test. Values may be increased in acute illness, colds or flu. Obesity, stress, physical inactivity, cigarette smoking may lead to increase test values. If possible all medications should be withheld for atleast 24 hours before testing (On Doctors Advice). Intraindividual variations, seasonal as well as positional variations (levels lower when sitting compared to standing etc.) have been observed. Cholesterol and HDL-C should not be measured immediately after MI, and 3 months wait is suggested.

****END OF REPORT****

Dr. Bhevi Dholiya
M. D. Pathology
Registration No: G-32571

Patient Name : MR. RAVI JAGDISH HIRE

Age / Gender : 38 years / Male

Patient ID : 19364

Source : Sardar Patel Hospital (OPD)

Referral : Dr Mediwheel Full body Health Checkup

Collection Time : 11/02/2023, 08:49 AM

Reporting Time : 12/02/2023, 01:04 PM

Sample ID :



Test Description	Value(s)	Reference Range	Unit(s)
URINE ROUTINE			
Volume*	15	ml -	ml
Colour*	Pale Yellow	Pale Yellow	
Transparency (Appearance)*	Clear	Clear	
Deposit*	Absent	Absent	
Reaction (pH)*	6.0	4.5 - 8	
Specific Gravity*	1.030	1.010 - 1.030	
Chemical Examination (Automated Dipstick Method) Urine			
Urine Glucose (sugar)*	Absent	Absent	
Urine Protein (Albumin)*	Absent	Absent	
Urine Ketones (Acetone)*	Absent	Absent	
Blood*	Absent	Absent	
Bile pigments*	Absent	Absent	
Nitrite*	Absent	Absent	
Microscopic Examination Urine			
Pus Cells (WBCs)*	Absent	0 - 5	/hpf
Epithelial Cells*	1-3	0 - 4	/hpf
Red blood Cells*	Occasional	Absent	/hpf
Crystals*	Absent	Absent	
Cast*	Absent	Absent	
Trichomonas Vaginalis*	Absent	Absent	
Yeast Cells*	Absent	Absent	
Amorphous deposits*	Absent	Absent	
Bacteria*	Absent	Absent	

END OF REPORT

B. Dholiya

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