

NAME	HIMANSHU SHEKHAR	STUDY DATE	24-12-2022 14:14:15
AGE / SEX	051Yrs / M	HOSPITAL NO.	MH010665744
REFERRING DEPT	OPD	MODALITY/Procedure Description	US /Echo-Cardiogram
REPORTED ON	27-12-2022 16:14:55	REFERRED BY	Dr. Health Check MHD

2D ECHOCARDIOGRAPHY REPORT

Findings:

	End diastole	End systole
IVS thickness (cm)	1.2	1.4
Left Ventricular Dimension (cm)	4.4	2.7
Left Ventricular Posterior Wall thickness (cm)	1.1	1.3
Aortic Root Diameter (cm)	2.7	
Left Atrial Dimension (cm)	3.0	
Left Ventricular Ejection Fraction (%)	55%	

LEFT VENTRICLE	:	Mild LVH present. No RWMA. LVEF= 55%
RIGHT VENTRICLE	:	Normal in size. Normal RV function.
LEFT ATRIUM	:	Normal in size
RIGHT ATRIUM	:	Normal in size
MITRAL VALVE	:	Mild MR
AORTIC VALVE	:	Normal
TRICUSPID VALVE	:	Trace TR (PASP ~ 20 mmHg)
PULMONARY VALVE	:	Normal
MAIN PULMONARY ARTERY & ITS BRANCHES	:	Appears normal.
INTERATRIAL SEPTUM	:	Intact.

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INTERVENTRICULAR SEPTUM : Intact.

PERICARDIUM : No pericardial effusion or thickening

DOPPLER STUDY

VALVE	Peak Velocity (cm/sec)	Maximum P.G. (mmHg)	Mean P. G. (mmHg)	Regurgitation	Stenosis
MITRAL	E=80 A=104	-	-	Mild	Nil
AORTIC	134	-	-	Nil	Nil
TRICUSPID	-	N	N	Trace	Nil
PULMONARY	84	N	N	Nil	Nil

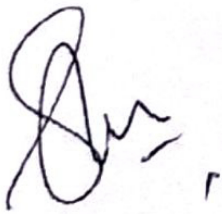
SUMMARY & INTERPRETATION:

- o No LV regional wall motion abnormality with LVEF = 55%
- o Mild LVH present. Normal sized RA/RV/LA. Normal RV function.
- o Mild MR
- o Trace TR (PASP ~ 20 mmHg)
- o Grade I diastolic dysfunction.
- o IVC normal in size, >50% collapse with inspiration, suggestive of normal RA pressure.
- o No clot/ no vegetation/ no pericardial effusion.

Please correlate clinically

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REPORTED ON	27-12-2022 16:14:55	REFERRED BY	Dr. Health Check MHD



DR. SAMANJOY MUKHERJEE
MD, DM
CONSULTANT CARDIOLOGIST



DR. JYOTIRMAYA SAHOO
MD, DM CARDIOLOGY
ASSOCIATE CONSULTANT

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NAME	HIMANSHU SHEKHAR	STUDY DATE	24-12-2022 12:23:58
AGE / SEX	051Yrs / M	HOSPITAL NO.	MH010665744
REFERRING DEPT	OPD	MODALITY/Procedure Description	CR /Xray chest PA (CXR)
REPORTED ON	24-12-2022 14:28:17	REFERRED BY	Dr. Health Check MHD

X-RAY CHEST - PA VIEW

Findings:

Visualized lung fields appear clear.

Both hilar shadows appear normal.

Cardiothoracic ratio is within normal limits.

Both hemidiaphragmatic outlines appear normal.

Both costophrenic angles are clear.

Kindly correlate clinically



Dr. Divya Jain MBBS, DNB
DMC/R/7955
Associate Consultant Radiologist

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Rate 69 . Sinus rhythm.....normal P axis, V-rate 50- 99
 . Consider left atrial enlargement.....wide or notched P waves
 PR 163 . Abnormal R-wave progression, early transition.....QRS area>0 in V2
 QRSD 81 . Baseline wander in lead(s) V5
 QT 353
 QTc 378

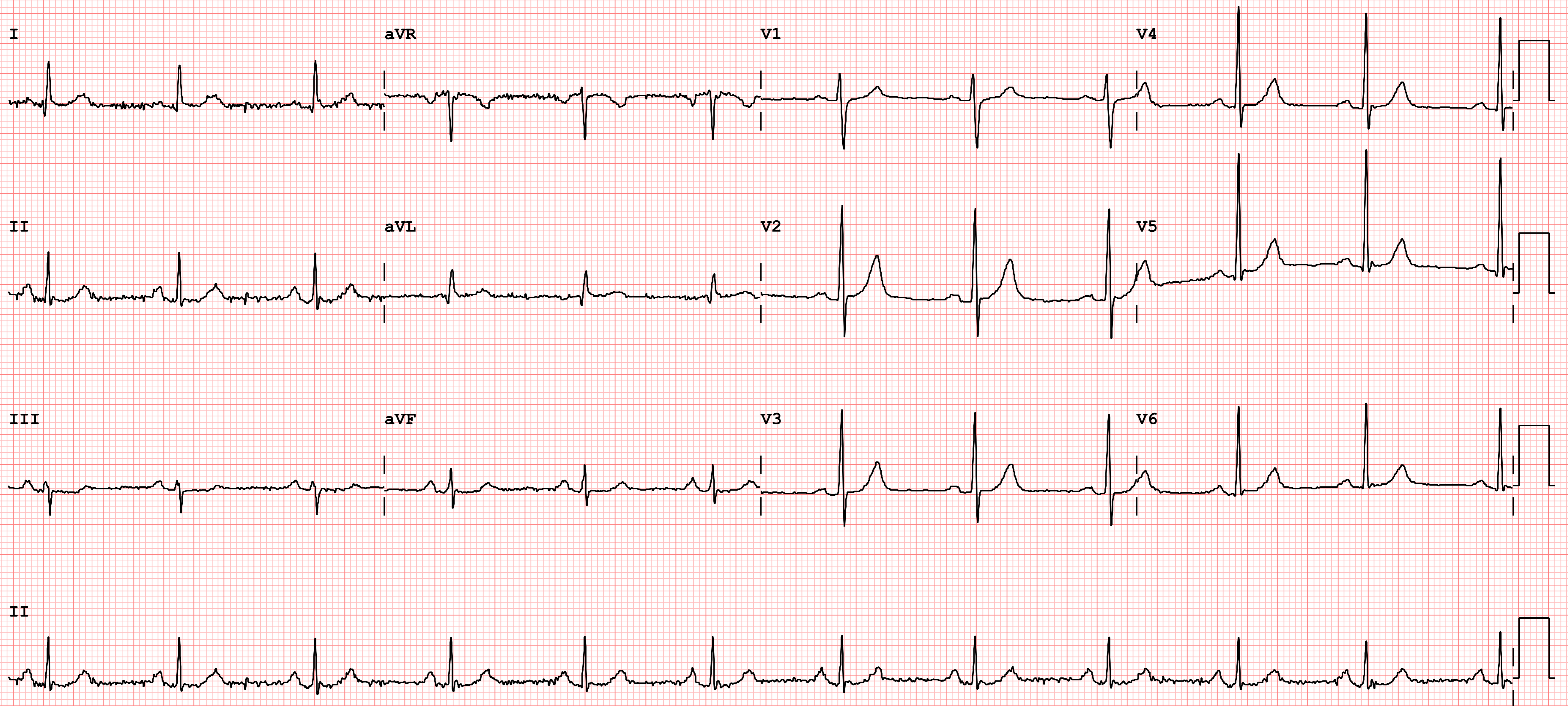
--AXIS--

P 75
 QRS 26
 T 39

- OTHERWISE NORMAL ECG -

12 Lead; Standard Placement

Unconfirmed Diagnosis





Name : MR HIMANSHU SHEKHAR **Age** : 51 Yr(s) Sex :Male
Registration No : MH010665744 **Lab No** : 32221208153
Patient Episode : H03000050921 **Collection Date** : 24 Dec 2022 11:10
Referred By : HEALTH CHECK MHD **Reporting Date** : 24 Dec 2022 13:18
Receiving Date : 24 Dec 2022 11:40

BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Interval
Lipid Profile (Serum)			
TOTAL CHOLESTEROL (CHOD/POD)	194	mg/dl	[<200] Moderate risk:200-239 High risk:>240
TRIGLYCERIDES (GPO/POD)	125	mg/dl	[<150] Borderline high:151-199 High: 200 - 499 Very high:>500
HDL - CHOLESTEROL (Direct)	51	mg/dl	[30-60]
VLDL - Cholesterol (Calculated)	25	mg/dl	[10-40]
LDL- CHOLESTEROL	118 #	mg/dl	[<100] Near/Above optimal-100-129 Borderline High:130-159 High Risk:160-189
T.Chol/HDL.Chol ratio	3.8		<4.0 Optimal 4.0-5.0 Borderline >6 High Risk
LDL.CHOL/HDL.CHOL Ratio	2.3		<3 Optimal 3-4 Borderline >6 High Risk

Note:
 Reference ranges based on ATP III Classifications.
 Recommended to do fasting Lipid Profile after a minimum of 8 hours of overnight fasting.



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Registration No : MH010665744 **Lab No** : 32221208153
Patient Episode : H03000050921 **Collection Date** : 24 Dec 2022 11:10
Referred By : HEALTH CHECK MHD **Reporting Date** : 24 Dec 2022 13:19
Receiving Date : 24 Dec 2022 11:40

BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Interval
LIVER FUNCTION TEST (Serum)			
BILIRUBIN-TOTAL (mod.J Groff)**	0.32	mg/dl	[0.10-1.20]
BILIRUBIN - DIRECT (mod.J Groff)	0.18	mg/dl	[<0.2]
BILIRUBIN - INDIRECT (mod.J Groff)	0.14 #	mg/dl	[0.20-1.00]
SGOT/ AST (P5P,IFCC)	23.70	IU/L	[5.00-37.00]
SGPT/ ALT (P5P,IFCC)	24.90	IU/L	[10.00-50.00]
ALP (p-NPP,kinetic)*	88	IU/L	[45-135]
TOTAL PROTEIN (mod.Biuret)	7.7	g/dl	[6.0-8.2]
SERUM ALBUMIN (BCG-dye)	4.8	g/dl	[3.5-5.0]
SERUM GLOBULIN (Calculated)	2.9	g/dl	[1.8-3.4]
ALB/GLOB (A/G) Ratio	1.66		[1.10-1.80]

Note:

**NEW BORN:Vary according to age (days), body wt & gestation of baby
 *New born: 4 times the adult value



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Registration No : MH010665744 **Lab No** : 32221208153
Patient Episode : H03000050921 **Collection Date** : 24 Dec 2022 11:10
Referred By : HEALTH CHECK MHD **Reporting Date** : 24 Dec 2022 13:18
Receiving Date : 24 Dec 2022 11:40

BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Interval
KIDNEY PROFILE (Serum)			
BUN (Urease/GLDH)	8.00	mg/dl	[8.00-23.00]
SERUM CREATININE (mod.Jaffe)	0.86	mg/dl	[0.80-1.60]
SERUM URIC ACID (mod.Uricase)	6.6	mg/dl	[3.5-7.2]
SERUM CALCIUM (NM-BAPTA)	8.9	mg/dl	[8.6-10.0]
SERUM PHOSPHORUS (Molybdate, UV)	3.2	mg/dl	[2.3-4.7]
SERUM SODIUM (ISE)	137.0	mmol/l	[134.0-145.0]
SERUM POTASSIUM (ISE)	4.17	mmol/l	[3.50-5.20]
SERUM CHLORIDE (ISE / IMT)	101.8	mmol/l	[95.0-105.0]
eGFR	100.4	ml/min/1.73sq.m	[>60.0]

Technical Note

eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to 1.73 sq.m BSA and is not applicable to individuals below 18 years. eGFR tends to be less accurate when Serum Creatinine estimation is indeterminate e.g. patients at extremes of muscle mass, on unusual diets etc. and samples with severe Hemolysis / Icterus / Lipemia.





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Registration No : MH010665744 **Lab No** : 32221208153
Patient Episode : H03000050921 **Collection Date** : 24 Dec 2022 11:10
Referred By : HEALTH CHECK MHD **Reporting Date** : 24 Dec 2022 12:38
Receiving Date : 24 Dec 2022 11:40

BIOCHEMISTRY

Plasma GLUCOSE-Fasting (Hexokinase) 98 mg/dl [70-100]

Page 4 of 7

-----END OF REPORT-----

Dr. Lona Mohapatra
CONSULTANT PATHOLOGY



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IND18.6278/05/12/2018- 04/12/2019



Name : MR HIMANSHU SHEKHAR **Age** : 51 Yr(s) Sex : Male
Registration No : MH010665744 **Lab No** : 33221206180
Patient Episode : H03000050921 **Collection Date** : 24 Dec 2022 11:10
Referred By : HEALTH CHECK MHD **Reporting Date** : 24 Dec 2022 14:32
Receiving Date : 24 Dec 2022 11:56

HAEMATOLOGY

ERYTHROCYTE SEDIMENTATION RATE (Automated) Specimen-Whole Blood

ESR **21.0 #** **/1sthour** **[0.0-12.0]**

Interpretation :

Erythrocyte sedimentation rate (ESR) is a non-specific phenomena and is clinically useful in the diagnosis and monitoring of disorders associated with an increased production of acute phase reactants (e.g. pyogenic infections, inflammation and malignancies). The ESR is increased in pregnancy from about the 3rd month and returns to normal by the 4th week postpartum.

ESR is influenced by age, sex, menstrual cycle and drugs (eg. corticosteroids, contraceptives).

It is especially low (0 -1mm) in polycythemia, hypofibrinogenemia or congestive cardiac failure and when there are abnormalities of the red cells such as poikilocytosis, spherocytosis or sickle cells.

Test Name	Result	Unit	Biological Ref. Interval
COMPLETE BLOOD COUNT (EDTA Blood)			
WBC Count (Flow cytometry)	5420	/cu.mm	[4000-10000]
RBC Count (Impedence)	4.66	million/cu.mm	[4.50-5.50]
Haemoglobin (SLS Method)	14.3	g/dL	[13.0-17.0]
Haematocrit (PCV) (RBC Pulse Height Detector Method)	43.3	%	[40.0-50.0]
MCV (Calculated)	92.9	fL	[83.0-101.0]
MCH (Calculated)	30.7	pg	[25.0-32.0]
MCHC (Calculated)	33.0	g/dL	[31.5-34.5]
Platelet Count (Impedence)	89000 #	/cu.mm	[150000-410000]
RDW-CV (Calculated)	13.8	%	[11.6-14.0]
DIFFERENTIAL COUNT			
Neutrophils (Flowcytometry)	66.0	%	[40.0-80.0]

Page 5 of 7



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www.manipalhospitals.com E info@manipalhospitals.com P +91 11 4967 4967
 Home sample collection: +91 74 2876 9482 Pharmacy Home Delivery: +91 84 4848 6472



Name : MR HIMANSHU SHEKHAR **Age** : 51 Yr(s) Sex :Male
Registration No : MH010665744 **Lab No** : 33221206180
Patient Episode : H03000050921 **Collection Date** : 24 Dec 2022 11:10
Referred By : HEALTH CHECK MHD **Reporting Date** : 24 Dec 2022 12:50
Receiving Date : 24 Dec 2022 11:56

HAEMATOLOGY

Lymphocytes (Flowcytometry)	24.2	%	[20.0-40.0]
Monocytes (Flowcytometry)	8.5	%	[2.0-10.0]
Eosinophils (Flowcytometry)	1.1	%	[1.0-6.0]
Basophils (Flowcytometry)	0.2 #	%	[1.0-2.0]
IG	0.00	%	

Complete Blood Count is used to evaluate wide range of health disorders, including anemia, infection, and leukemia. Abnormal increase or decrease in cell counts as revealed may indicate that an underlying medical condition that calls for further evaluation.

-----END OF REPORT-----

Dr.Lakshita singh



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Name : MR HIMANSHU SHEKHAR **Age** : 51 Yr(s) Sex :Male
Registration No : MH010665744 **Lab No** : 35221202885
Patient Episode : H03000050921 **Collection Date** : 24 Dec 2022 11:42
Referred By : HEALTH CHECK MHD **Reporting Date** : 24 Dec 2022 14:20
Receiving Date : 24 Dec 2022 12:52

MICROBIOLOGY

VDRL TEST/RPR

Specimen-Serum

Result

Non-reactive

Method :

Slide Flocculation

Technical Note:

This is a screening test for syphilis and is also used to monitor the course of disease after therapy. This test detects the presence of antibodies to lipoprotein material from damaged cells and cardiolipin from Treponemes. False positive reactions (titre < 1:8) may occur in viral infections, connective tissue disorders and pregnancy.

Reference: Clinical diagnosis and management by laboratory methods. Henry J.B. 20Edn. 2001 pg1133.

Page 7 of 7

-----END OF REPORT-----

Dr. Navin Kumar
CONSULTANT MICROBIOLOGY



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DEPARTMENT OF RESPIRATORY MEDICINE



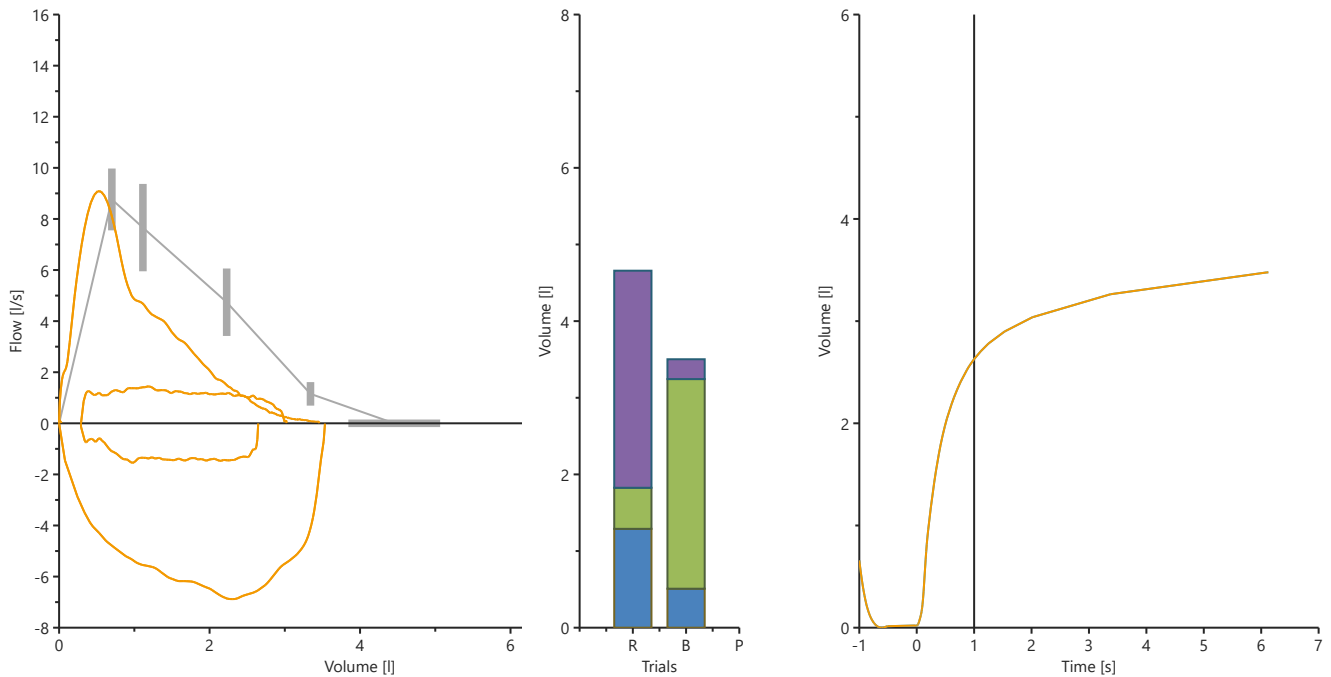
Last name	SHEKHAR	Age	51 years	BMI	24.2
First name	HIMANSHU	Height	176.0 cm	Smoker	NO
Patient Id	MH010665744	Weight	75.0 kg	Technician	ASHRAF ALI
History		Gender	male	Physician	HEALTH CHECK

Measured: 12/24/2022 11:52 AM LFX 1.9.0

Ambient: 26.5 °C 1013 hPa 50 %

12/24/2022 2:39 PM LFX 1.9.0

Ref. module: GLI2017 & ECCS93



		Pred	LLN	Pre	% Pred	Z-Score
FVC	[L]	4.45	3.52	3.46	78 %	-1.8
FEV 1	[L]	3.55	2.75	2.68	75 %	-1.8
FEV1%FVC	[%]	79.91	69.77	77.55	97 %	-0.5
MEF 75	[L/s]	7.66	4.86	5.95	78 %	-1.0
MEF 50	[L/s]	4.74	2.57	2.97	63 %	-1.3
MEF 25	[L/s]	1.15	0.52	0.79	68 %	-0.8
MMEF	[L/s]	3.29	1.76	2.18	66 %	-1.1
PEF	[L/s]	8.76	6.78	9.09	104 %	0.3
T EX	[sec]	-	-	3.03	-	

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AGE / SEX	051Yrs / M	HOSPITAL NO.	MH010665744
REFERRING DEPT	OPD	MODALITY/Procedure Description	US /Ultrasound abdomen n pelvis
REPORTED ON	24-12-2022 16:47:58	REFERRED BY	Dr. Health Check MHD

USG WHOLE ABDOMEN

Findings:

Liver is normal in size (~13.3 cm) and echopattern. No focal intra-hepatic lesion is detected. Intra-hepatic biliary radicals are not dilated. Portal vein is normal in calibre.

Gall bladder appears echofree with normal wall thickness.
Common bile duct is normal in calibre.

Pancreas is normal in size and echopattern.

Spleen is normal in size and echopattern.

Both kidneys are normal in position, size and outline. Cortico-medullary differentiation of both kidneys is maintained. Central sinus echoes are compact. No focal lesion or calculus seen. Bilateral pelvicalyceal systems are not dilated.

Urinary bladder is normal in wall thickness with clear contents. No significant intra or extraluminal mass is seen.

Prostate is normal in shape and echopattern. It measures approx. ~14.4 cc in volume

No significant free fluid is detected.

IMPRESSION: No significant abnormality detected.

Kindly correlate clinically



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REPORTED ON	24-12-2022 16:47:58	REFERRED BY	Dr. Health Check MHD

**Dr. Anuja MBBS,DMRD,DNB,
DMC No. 76738
Associate Consultant, Radiology**

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