



Patient Name	: Mr.TANWAR VIKAS	Bill Date	: 14-01-2023 08:40
Age / Gender	: 39 Y(s) / Male	Sample Collected Date	: 14-01-2023 11:55
Bill No/UHID No	: PS004021/P00000473548	Report Date	: 14-01-2023 13:43
Lab No / Result No	: 2300001757/4064	Specimen	: SERUM
Ref erred By	: HOSPITAL CASE		

## DEPARTMENT OF BIO CHEMISTRY

<u>Investigation</u>	<u>Result</u>	<u>Reference Range</u>	<u>Methods</u>
<b><u>BUN</u></b>			
UREA NITROGEN(BUN)	: 18.27	6.0 - 20.0 mg/dL	Calculated
UREA	: 39.1	12.8-42.8 mg/dL	Urease
<b><u>CALCIUM</u></b>			
CALCIUM	: 9.3	8.6 - 10.2 mg/dL	Arsenazo
<b><u>CREATININE</u></b>			
CREATININE	: 1.1	0.6 - 1.3 mg/dL	Enzymatic
<b><u>ELECTROLYTES (Na &amp; K)</u></b>			
SODIUM	: 139.0	136.0 - 145.0 mmol/L	Potentiometric
POTASSIUM	: 4.9	3.5 - 5.1 mmol/L	Potentiometric
<b><u>Liver Function Test</u></b>			
TOTAL BILIRUBIN	: 0.4	0.3 - 1.2 mg/dL	DIAZO
DIRECT BILIRUBIN	: 0.2	0-0.4 mg/dL	DIAZO
INDIRECT BILIRUBIN	: 0.2	0.0 - 0.8 mg/dL	DIAZO
ALANINE TRANSAMINASE	: 22.0	<50 U/L	Kinetic
ASPARTATE TRANSAMINASE	: 27.0	10.0 - 40.0 U/L	Kinetic
ALKALINE PHOSPHATASE	: 83.0	30.0 - 115.0 U/L	4NPP/AMP BUFFER
TOTAL PROTEIN	: 7.2	6.0 - 8.0 g/dl	Biuret
ALBUMIN	: 4.3	3.5-4.8 g/dl	BCG
GLOBULIN	: 2.9	2.3-3.5 gm/dL	Calculated
A/G RATIO	: 1.48		Calculated
<b><u>LIPID PROFILE</u></b>			
CHOLESTEROL	: 245.0	130.0 - 220.0 mg/dL	Enzymatic
TRIGLYCERIDES	: 67.0	35.0 - 180.0 mg/dL	Enzymatic
HDL CHOLESTEROL	: 50.0	35-65 mg/dL	Enzymatic
LDL CHOLESTEROL	: 181.6	10.0 - 130.0 mg/dL	Calculated
VLDL CHOLESTEROL	: 13.4	5.0-36.0 mg/dL	Calculated
CHOL/HDL RATIO	: 4.9	2.0-6.2	Calculated
<b><u>PHOSPHOROUS</u></b>			
PHOSPHORUS	: 4.3	2.7-4.5 mg/dL	Phospho Molybdate
<b><u>TOTAL PROTEINS (Total Protein Albumin+Globulin)</u></b>			
TOTAL PROTEIN	: 7.2	6.0 - 8.0 g/dl	Biuret
ALBUMIN	: 4.3	3.5-4.8 g/dl	BCG
GLOBULIN	: 2.9	2.3-3.5 gm/dL	Calculated
A/G RATIO	: 1.48		Calculated
<b><u>URIC ACID</u></b>			
URIC ACID	: 6.0	3.5-7.2 mg/dL	Uricase

\*\*\* End Of The Report \*\*\*

Note : This test is performed on automated BIO CHEMISTRY analyzer - VITROS250

Printed By : GOPAL2

Printed On : 1/16/2023 10:03:32 AM



Patient Name	: Mr.TANWAR VIKAS	Bill Date	: 14-01-2023 08:40
Age / Gender	: 39 Y(s) / Male	Sample Collected	: Date
Bill No/UHID No	: PS004021/P00000473548	Report Date	: Specimen
Lab No / Result No	: /4064		
Ref erred By	: HOSPITAL CASE		

Anju A sanghavi

**Dr.Anjana Sanghavi**  
**Consultant Pathologist**

**Verified By**

Ruhi S

NOTE :

- \* Clinically correlate, Kindly discuss if necessary.
- \* This report relates only to the item received.



Patient Name	: Mr.TANWAR VIKAS	Bill Date	: 14-01-2023 08:40
Age / Gender	: 39 Y(s) / Male	Sample Collected Date	: 14-01-2023 11:55
Bill No/UHID No	: PS004021/P00000473548	Report Date	: 14-01-2023 14:58
Lab No / Result No	: 2300001757/10064	Specimen	: SERUM
Ref erred By	: HOSPITAL CASE		

### DEPARTMENT OF BIO CHEMISTRY

<u>Investigation</u>	<u>Result</u>	<u>Reference Range</u>	<u>Methods</u>
<b>FBS</b> GLUCOSE (FASTING).	: 89.0	Prediabetic : 100 - 125 mg/dL Diabetic : >= 126 mg/dL Normal : < 100.0 mg/dL	GOD-POD

REFERENCE : ADA 2015 GUIDELINES

#### **PPBS**

GLUCOSE (POST PRANDIAL)	: 128.0	60-140 mg/dL	GOD-POD
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#### **T3-T4-TSH -**

Tri-iodothyronine, (Total T3)	: 1.06	0.87-1.78 ng/ml	ECLIA
THYROXINE (T4), TOTAL	: 7.58	4.6 - 10.5 ug/dl	ECLIA
THYROID STIMULATING HORMONE (ULTRA).	: 5.43	0.28-3.89 uIU/mL	ECLIA

NOTE. : Kindly correlate clinically

TSH - For pregnancy the referance range is as follows -  
1st -trimester : 0.6 - 3.4 uIU/mL  
2nd trimester : 0.37 - 3.6 uIU/mL  
3rd trimester : 0.38 - 4.04 uIU/mL

\*\*\* End Of The Report \*\*\*

**Note : This test is performed on automated BIO CHEMISTRY analyzer - COBAS E411**

#### **Verified By**

Anand

NOTE :

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**Dr.POOJA PATHAK**  
**ASSOCIATE CONSULTANT**



Patient Name	: Mr.TANWAR VIKAS	Bill Date	: 14-01-2023 08:40
Age / Gender	: 39 Y(s) / Male	Sample Collected Date	: 14-01-2023 11:55
Bill No/UHID No	: PS004021/P00000473548	Report Date	: 14-01-2023 13:43
Lab No / Result No	: 2300001758-G/4064	Specimen	: WHOLE BLOOD
Ref erred By	: HOSPITAL CASE		

### **DEPARTMENT OF BIO CHEMISTRY**

<b><u>Investigation</u></b>	<b><u>Result</u></b>	<b><u>Reference Range</u></b>	<b><u>Methods</u></b>
<b><u>GLYCOSYLATED HB% (HbA1C)</u></b>			
GLYCOSYLATED HAEMOGLOBIN (HBA1c)	: 5.6	Prediabetic : 5.7 - 6.4 % Diabetic : >= 6.5 % Therapeutic Target : <7.0 %	HPLC

REFERENCE : ADA 2015 GUIDELINES

\*\*\* End Of The Report \*\*\*

**Note : This test is performed on automated BIO CHEMISTRY analyzer - BIORAD D10**

**Dr.Anjana Sanghavi  
Consultant Pathologist**

**Verified By**

Anand

**NOTE :**

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Patient Name	: Mr.TANWAR VIKAS	Bill Date	: 14-01-2023 08:40
Age / Gender	: 39 Y(s) / Male	Sample Collected Date	: 14-01-2023 15:39
Bill No/UHID No	: PS004021/P00000473548	Report Date	: 14-01-2023 19:47
Lab No / Result No	: 2300001808/4064	Specimen	: STOOL
Ref erred By	: HOSPITAL CASE		

## DEPARTMENT OF CLINICAL PATHOLOGY

<u>Investigation</u>	<u>Result</u>	<u>Reference Range</u>	<u>Methods</u>
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### STOOL ROUTINE

#### Physical Examination Stool

COLOUR.	: BROWN
CONSISTENCY	: SEMI SOLID
MUCUS	: ABSENT
BLOOD	: Absent

#### Microscopic Examination of Stool

PUS CELLS	: 1-2
RED BLOOD CELLS	: ABSENT
MACROPHAGES	: ABSENT
TROPHOZOITES	: ABSENT
YEAST CELLS	: ABSENT
CYSTS	: ABSENT
OVA	: ABSENT
FAT GLOBULES.	: ABSENT
STARCH GLOBULES	: ABSENT
OIL GLOBULES	: ABSENT
MUSCLE FIBRES	: ABSENT
STARCH	: ABSENT
STOOL REDUCING SUBSTANCE	: ABSENT
Vegetative matter	: ABSENT
OTHERS.	: ABSENT

\*\*\* End Of The Report \*\*\*

#### **Verified By**

Shrikant.A

#### NOTE :

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**Dr.POOJA PATHAK**  
**ASSOCIATE CONSULTANT**



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Bill No/UHID No	: PS004021/P00000473548	Report Date	: 14-01-2023 13:43
Lab No / Result No	: 2300001759/4064	Specimen	: URINE
Ref erred By	: HOSPITAL CASE		

## DEPARTMENT OF CLINICAL PATHOLOGY

<u>Investigation</u>	<u>Result</u>	<u>Reference Range</u>	<u>Methods</u>
<b><u>URINE ROUTINE</u></b>			
<b><u>PHYSICAL EXAMINATION</u></b>			
COLOUR	: Pale Yellow		
APPEARANCE	: Clear		
<b><u>CHEMICAL TEST</u></b>			
PH	: 6.0	5.0-7.0	
SPECIFIC GRAVITY	: 1.025	1.015-1.030	
ALBUMIN	: Absent	Abset	
URINE SUGAR	: Absent	Absent	
KETONE BODIES	: Absent	Absent	
BILE PIGMENTS/ BILIRUBIN	: Absent	Absent	
UROBILINOGEN	: Normal	Normal	
NITRITES	: Absent	Absent	
LEUCOCYTES ESTERASE	: Absent	Absent	
<b><u>MICROSCOPIC TEST</u></b>			
PUS CELLS.	: 1-2	0 - 5 /hpf	
RED BLOOD CELLS.	: Absent	0 - 2 /hpf	
EPITHELIAL CELLS.	: 1-2	0-5 /hpf	
BACTERIA	: Absent	Absent	
CAST	: Absent	Absent	
YEAST CELLS	: Absent	Absent	
CRYSTALS	: Absent	Absent	
OTHERS	: Absent	Absent	

\*\*\* End Of The Report \*\*\*

**Verified By**  
Shrikant.A

NOTE :

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- \* This report relates only to the item received.

**Dr.Anjana Sanghavi**  
**Consultant Pathologist**



Patient Name	: Mr.TANWAR VIKAS	Bill Date	: 14-01-2023 08:40
Age / Gender	: 39 Y(s) / Male	Sample Collected Date	: 14-01-2023 11:55
Bill No/UHID No	: PS004021/P00000473548	Report Date	: 14-01-2023 16:07
Lab No / Result No	: 2300001758/4064	Specimen	: WHOLE BLOOD
Ref erred By	: HOSPITAL CASE		

### **DEPARTMENT OF HAEMATOLOGY**

<b><u>Investigation</u></b>	<b><u>Result</u></b>	<b><u>Reference Range</u></b>	<b><u>Methods</u></b>
<b><u>BLOOD GROUP</u></b>			
BLOOD GROUP	: O RH POSITIVE		
<b><u>Erythrocyte Sedimentation Rate</u></b>			
ESR at 1 Hour	: 5	0 - 15 mm/hr	Modified Westergren Method

#### INTERPRETATION :

ESR is a screening test to detect presence of systemic disease; however a normal result does not rule out a systemic disease.

ESR is also used to monitor course of disease or response to therapy if initially elevated.

\*\*\* End Of The Report \*\*\*

**Verified By**  
SANDEEP

NOTE :

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**Dr.POOJA PATHAK**  
**ASSOCIATE CONSULTANT**



Patient Name : **Mr.TANWAR VIKAS** Bill Date : 14-01-2023 08:40  
Age / Gender : **39 Y(s) / Male** Sample Collected : 14-01-2023 11:55  
Bill No/UHID No : **PS004021/P00000473548** Date  
Lab No / Result No : 2300001758/4064 Report Date : 14-01-2023 13:43  
Ref erred By : HOSPITAL CASE Specimen : WHOLE BLOOD

### DEPARTMENT OF HAEMATOLOGY

<u>Investigation</u>	<u>Result</u>	<u>Reference Range</u>	<u>Methods</u>
<b>HAEMOGRAM REPORT</b>			
W.B.C.COUNT	: 5230	4000-11000 /ul	Coulter Principle
NEUTROPHILS	: 52.6	40-75 %	Derived from WBC Histogram
LYMPHOCYTES	: 37.6	20-40 %	
MONOCYTES	: 5.6	2-10 %	
EOSINOPHILS	: 3.2	1.0-6.0 %	
BASOPHILS	: 1.0	0.0-1.0 %	
%IMMATURE GRANULOCYTES	: 0.01	0.00-0.10 %	
ABSOLUTE NEUTROPHIL COUNT	: 2.75	2-7 x10 <sup>3</sup> cells/ul	Calculated
ABSOLUTE LYMPHOCYTE COUNT	: 1.96	1 - 3 x10 <sup>3</sup> cells/ul	Calculated
ABSOLUTE MONOCYTE COUNT	: 0.29	0.2-1.0 x10 <sup>3</sup> cells/ul	Calculated
ABSOLUTE EOSINOPHIL COUNT	: 0.15	0.02-0.5 x10 <sup>3</sup> cells/ul	Calculated
ABSOLUTE BASOPHIL COUNT	: 0.07	0.02-0.1 x10 <sup>3</sup> cells/ul	Calculated
R.B.C COUNT	: 5.71	4.5 - 6.5 million/ul	Coulter Principle
HAEMOGLOBIN	: 14.8	13 - 17 g/dl	Cyanmethemoglobin Photometry
HAEMATOCRIT	: 44.6	40-50 %	Calculated
MCV	: <b>78.0</b>	83-99 fl	Coulter Principle
MCH	: <b>25.9</b>	27 - 32 pg	Calculated
MCHC	: 33.2	31.5 - 34.5 g/dl	Calculated
RDW	: <b>11.4</b>	11.6-14.0 %	Calculated From RBC Histogram
PLATELET COUNT	: 300	150 - 450 x10 <sup>3</sup> /ul	Coulter Principle
MPV	: 9.2	7.8-11 fl	Coulter Principle
RBC MORPHOLOGY	: Normocytic Normochromic		
WBC MORPHOLOGY	: Within normal range		
PLATELET	: Adequate		

\*\*\* End Of The Report \*\*\*

Note : This test is performed on automated HAEMATOLOGY analyzer - HORIBA YUMIZEN H550

Verified By  
SANDEEP

NOTE :

- \* Clinically correlate, Kindly discuss if necessary.
- \* This report relates only to the item received.

*Anjana A. Sanghavi*

Dr. Anjana Sanghavi  
Consultant Pathologist



## RUBY HALL CLINIC PIMPLE SAUDAGAR

**Name:** VIKAS TANWAR

**Date:** 14-01-2023 **Time:**

**Age:** 39

**Gender:** M

**Height:** 172 cms

**Weight:** 72 Kg

**ID:** P0473548

**Clinical History:** NIL

**Medications:** NIL

### Test Details:

**Protocol:** Bruce

**Predicted Max HR:** 181

**Target HR:** 153

**Exercise Time:** 0:09:01

**Achieved Max HR:** 155 (86% of Predicted MHR)

**Max BP:** 150/70

**Max BP x HR:** 23250

**Max Mets:** 10.1

**Test Termination Criteria:**

### Protocol Details:

Stage Name	Stage Time	METS	Speed kmph	Grade %	Heart Rate bpm	BP mmHg	RPP	Max ST Level mm	Max ST mV/s
Supine	00:06	1	0	0	66	120/80	7920	0.5 V6	0.5 V2
Standing	00:06	1	0	0	69	120/80	8280	0.7 V5	0.4 V4
HyperVentilation	00:06	1	0	0	62	120/80	7440	-0.6 aVR	0.4 V2
PreTest	00:06	1	1.6	0	75	120/80	9000	0.7 V2	-0.3 aVR
Stage: 1	03:00	4.7	2.7	10	102	130/80	13260	2.1 II	-1.2 aVR
Stage: 2	03:00	7	4	12	123	140/80	17220	-2.9 V5	2.4 V3
Stage: 3	03:00	10.1	5.5	14	155	150/70	23250	-4.5 V3	2 V1
Peak Exercise	00:01	10.1	6.8	16	155	150/70	23250	-4.5 V3	2 V1
Recovery1	01:00	1	0	0	109	150/70	16350	-1.7 V3	2.2 V3
Recovery2	01:00	1	0	0	87	150/70	13050	-1 V3	0.9 V4

### Interpretation

The Patient Exercised according to Bruce Protocol for 0:09:01 achieving a work level of 10.1 METS.  
 Resting Heart Rate, initially 66 bpm rose to a max. heart rate of 155bpm (86% of Predicted Maximum Heart Rate).  
 Resting Blood Pressure of 120/80 mmHg, rose to a maximum Blood Pressure of 150/70 mmHg  
 Good Effort Tolerance  
 Normal HR & BP Response  
 No Angina or Arrhythmias  
 No Significant ST-T Changes Noted During Exercise  
 Negative Stress Test

Ref. Doctor: ----

  
**Doctor: DR.KEDAR KULKA**

**SCHILLER**  
 The Art of Diagnostics

( Summary Report edited by User )  
 Spandan CS 10 Version:2.12.0



Grant Medical Foundation  
**Ruby Hall Clinic**  
 Hinjawadi

Rajeev Gandhi Infotech Park, MIDC, Phase No. 1, Plot No P-33, Hinjawadi, Pune - 411057.

• Ph: 020 66999999 • Email : hinjawadi@rubyhall.com • 24 hrs Helpline - 8554802253 • Website : www.rubyhall.com

**OPHTHALMOLOGY**

NAME : **VIKAS TANWAR.**

AGE : **39/M**

**R -1.75 SPH**

**L -1.0 -1.0 X 90°**

1) Vision  $\left\{ \begin{array}{l} \text{unaided} \quad \underline{6/6} \\ \text{c glasses} \quad \underline{-1-} \end{array} \right.$

2) Near Vision  $\left\{ \begin{array}{l} \text{unaided} \quad \underline{6/6} \\ \text{c glasses} \quad \underline{-1-} \end{array} \right.$

3) Binocular Vision \_\_\_\_\_

4) Colour Vision NAD

5) Tension \_\_\_\_\_

6) Anterior Segment \_\_\_\_\_


7) Pupils \_\_\_\_\_

8) Lens \_\_\_\_\_

9) Media & Fundus \_\_\_\_\_

10) Remarks \_\_\_\_\_

Date : **14/01/23**

  
 (Signature)



Grant Medical Foundation

**Ruby Hall Clinic**

*Pimple Saudagar*

Name: TANWAR VIKAS .  
Age : 039 Years  
Gender: M  
PID: P00000473548  
OPD :

Exam Date : 14-Jan-2023 08:51  
Accession: 87546140030  
Exam: CHEST X RAY  
Physician: HOSPITAL CASE^^^^

Health Check

**Radiograph Chest PA View :**

Both lung fields normal.

Both costo-phrenic angles are clear.

Cardiac silhouette and aortic knuckle are normal.

Both hilar shadows and the diaphragmatic contours are normal.

Thoracic soft tissues and the rib cage normal.

**Impression :**

No significant abnormality noted.

DR. YATIN R. VISAVE  
CONSULTANT RADIOLOGIST  
MBBS, DMRD  
Regd. No. 090812

Date: 16-Jan-2023 14:00:34

Name:	TANWAR VIKAS.	Exam Date :	14-Jan-2023 09:09
Age :	039Y	Accession:	87333091150
Gender:	M	Exam:	ABDOMEN AND PELVIS
PID:	P00000473548	Physician:	HOSPITAL CASE <sup>****</sup>
OPD :			

### ULTRASOUND OF ABDOMEN AND PELVIS

Liver appears normal in size 14.5cm , shape and echotexture. No focal lesion is seen. No intrahepatic biliary radicle dilatation seen. The portal vein and CBD appear normal.

Gall bladder is well distended with normal wall thickness. No calculus or sludge is seen.  
Pancreas appears normal in size and echotexture. No focal lesion is seen.  
Spleen appears normal in size and echotexture. No focal lesion is seen.

Right kidney measures 11 x 4.4 cms. Left kidney measures 10.3 x 4.9 cms. Both kidneys appear normal in size, shape & echotexture. They show good cortico-medullary differentiation. There is no hydronephrosis, hydroureter or calculus seen on either side.

The urinary bladder is well distended. Wall thickness is normal. No mass lesion or calculus is seen.

Prostate is normal in size, shape and echotexture. No obvious focal lesion is seen on present transabdominal study.

Visualised bowel loops are non-dilated and show normal peristalsis.  
There is no ascites or significant lymphadenopathy seen.

**IMPRESSION : No significant abnormality noted.**

**Suggest : Clinical correlation.**



**DR. YATIN R. VISAVE**  
**CONSULTANT RADIOLOGIST**  
MBBS, DMRD  
Regd. No. 090812

Date: 16-Jan-2023 13:59:48

ID:

Name: vikas

Sex: M

cm

kg

Birth date:

/

mmHg

bpm

ms

ms

ms

ms

mV

mV

Filter: H50 D 35 Hz

10 mm/mV

25 mm/s

10 mm/mV

10 mm/mV

10 mm/mV

10 mm/mV

10 mm/mV

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MR. TANWAR VIKAS

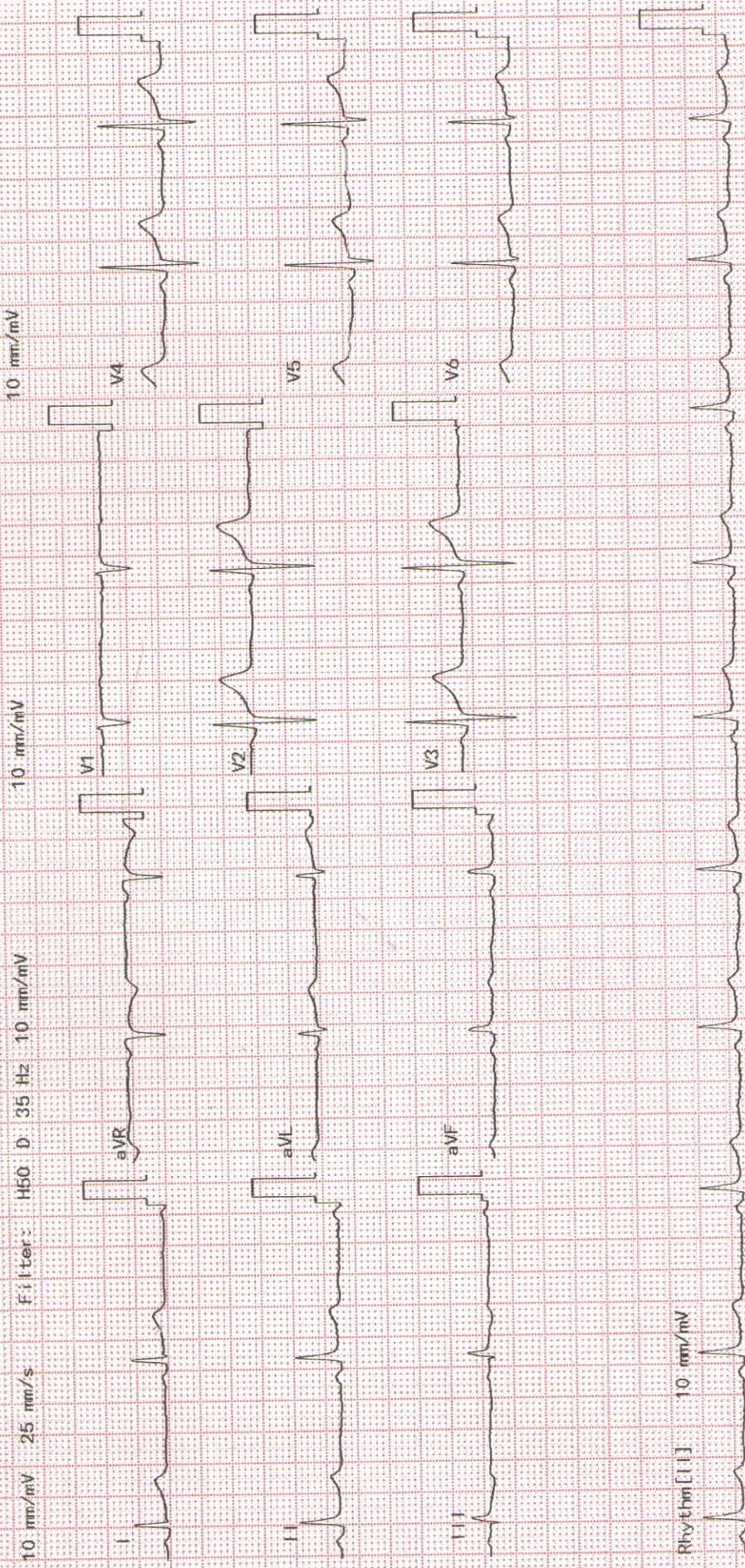


Ref: PS004021-Reg: OPS00002892  
 39.3.30/M - NH - 14/01/2023  
 P00000473548 -

39 years 1100 Sinus rhythm

9110 \*\* normal ECG \*\*

Unconfirmed Report  
Reviewed by:





Grant Medical Foundation

**Ruby Hall Clinic**

Pimple Saudagar

Dental For OPD.

14.1.2023

Mr. Vikas Jannas:

39/M.

CC: - Pt. has come for regular dental check-up.

OE:


- Gen. stains (++) and Calculus (+) present.

DX:

- CGG.

Rx:

- Scaling and Polishing.

  
(Dr. Priya Lokanath, MDS).