



BHAILAL AMIN
GENERAL HOSPITAL



H-2015-0297



MC-3004



E-2021-0037



CONCLUSION OF HEALTH CHECKUP

ECU Number : 1494	MR Number : 23199378	Patient Name: AMARENDRA KUMAR
Age : 48	Sex : Male	Height : 169
Weight : 74	Ideal Weight : 66	BMI : 25.91
Date : 28/01/2023		

Dr. Manish Mittal

Internal Medicine

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.



BHAILAL AMIN GENERAL HOSPITAL



H-2015-0297



MC-3004



E-2021-0037



ECU Number : 1494 MR Number : 23199378 Patient Name: AMARENDRA KUMAR
Age : 48 Sex : Male Height : 169
Weight : 74 Ideal Weight : 66 BMI : 25.91
Date : 28/01/2023

Past H/O : NO P/H/O ANY MAJOR ILLNESS

Present H/O : NO MEDICAL COMPLAIN AT PRESENT

Family H/O : NO F/H/O ANY MAJOR ILLNESS

Habits : NO HABITS

Gen.Exam. : G.C.GOOD

B.P : 120/70 mm Hg

Pulse : 74/MIN REG

Others : SPO2-98%

C.V.S : CLINICALLY NAD

P.S. : CLINICALLY NAD

Abdomen : NP

Spleen : NP

kin : NAD

C.N.S : NAD

Advice :

ECU Number : 1494
Age : 48
Weight : 74
Date : 28/01/2023

MR Number : 23199378
Sex : Male
Ideal Weight : 66

Patient Name: AMARENDRA KUMAR
Height : 169
BMI : 25.91

Ophthalmic Check Up :

Right

Left

Ext Exam

NIL

Vision Without Glasses

Vision With Glasses

6/6 N.5

6/6 N.5

Final Correction

SAME AS PATIENT S OWN

NA

Fundus

NORMAL

Colour Vision

NORMAL

Advice

NIL

Orthopedic Check Up :

Ortho Consultation

Ortho Advice

ENT Check Up :

Ear

Nose

Throat

Hearing Test

ENT Advice

General Surgery Check Up :

General Surgery

Abdominal Lump

Hernia

External Genitals

PVR

Proctoscopy

Any Other

Surgical Advice

Dietary Assessment

ECU Number : 1494 MR Number : 23199378 Patient Name: AMARENDRA KUMAR
Age : 48 Sex : Male Height : 169
Weight : 74 Ideal Weight : 66 BMI : 25.91
Date : 28/01/2023

Body Type : Normal / Underweight / Overweight

Diet History : Vegetarian / Eggetarian / Mixed

Frequency of consuming fried food : / Day / Week or occasional

Frequency of consuming Sweets : / Day / or occasional

Frequency of consuming outside food : / Day / 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 Beetroots, 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.



Patient Name : Mr. AMARENDRA KUMAR Type : OPD
 Gender / Age : Male / 48 Years 2 Months 11 Days Request No. : 102928
 MR No / Bill No. : 23199378 / 231063115 Request Date : 28/01/2023 08:11 AM
 Consultant : Dr. BAGH Doctor Collection Date : 28/01/2023 08:12 AM
 Location : OPD Approval Date : 28/01/2023 01:18 PM

CBC + ESR

Test	Result	Units	Biological Ref. Range
<i>Haemoglobin.</i>			
Haemoglobin	14.3	gm/dL	13 - 17
Red Blood Cell Count (T-RBC)	5.30	mill/cmm	4.5 - 5.5
Hematocrit (HCT)	44.5	%	40 - 50
Mean Corpuscular Volume (MCV)	84.0	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	27.0	pg	27 - 32
MCH Concentration (MCHC)	32.1	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	14.5	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	44.9	fl	39 - 46
<i>Total Leucocyte Count (TLC)</i>			
Total Leucocyte Count (TLC)	5.68	thou/cmm	4 - 10
<i>Differential Leucocyte Count</i>			
Polymorphs	64	%	40 - 80
Lymphocytes	30	%	20 - 40
Eosinophils	2	%	1 - 6
Monocytes	4	%	2 - 10
Basophils	0	%	0 - 2
Polymorphs (Abs. Value)	3.61	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	1.66	thou/cmm	1 - 3
Eosinophils (Abs. Value)	0.12	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.27	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.02	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.2	%	1 - 3 : Borderline > 3 : Significant
<i>Platelet Count</i>			
Platelet Count	111	thou/cmm	150 - 410
Smear evaluation	Adequate		
Estimated Platelet count (Smear evaluation)	few large platelets seen	thou/cmm	
ESR	1	mm/1 hr	0 - 10

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 / repeat may be requested.

365 Days./ 24 Hours Laboratory Services

Home Collection Facility Available
(Mon To Sat 8:00 am to 5:00 pm)



BHAILAL AMIN
GENERAL HOSPITAL

📍 Bhaikal Amin Marg, Gorwa, Vadodara, Gujarat 390003.

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name	: Mr. AMARENDRA KUMAR	Type	: OPD
Gender / Age	: Male / 48 Years 2 Months 11 Days	Request No.	: 102928
MR No / Bill No.	: 23199378 / 231063115	Request Date	: 28/01/2023 08:11 AM
Consultant	: Dr. BAGH Doctor	Collection Date	: 28/01/2023 08:12 AM
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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. Rakesh Vaidya
MD (Path). DCP.

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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GENERAL HOSPITAL

DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mr. AMARENDRA KUMAR
Gender / Age : Male / 48 Years 2 Months 11 Days
MR No / Bill No. : 23199378 / 231063115
Consultant : Dr. BAGH Doctor
Location : OPD

Type : OPD
Request No. : 102928
Request Date : 28/01/2023 08:11 AM
Collection Date : 28/01/2023 08:12 AM
Approval Date : 28/01/2023 02:42 PM

Haematology

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>Biological Ref. Range</u>
Blood Group			
ABO system	B		
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. Rakesh Vaidya
MD (Path). DCP.

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.



Patient Name : Mr. AMARENDRA KUMAR
 Gender / Age : Male / 48 Years 2 Months 11 Days
 MR No / Bill No. : 23199378 / 231063115
 Consultant : Dr. BAGH Doctor
 Location : OPD

Type : OPD
 Request No. : 102928
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 Approval Date : 28/01/2023 10:09 AM

Fasting Plasma Glucose

Test	Result	Units	Biological Ref. Range
<i>Fasting Plasma Glucose</i>			
Fasting Plasma Glucose	104	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	109	mg/dL	70 - 140

By Hexokinase method on RXL Dade Dimension

--- End of Report ---

Dr. Sejal Odedra
M.D.Pathology



Patient Name : Mr. AMARENDRA KUMAR
 Gender / Age : Male / 48 Years 2 Months 11 Days
 MR No / Bill No. : 23199378 / 231063115
 Consultant : Dr. BAGH Doctor
 Location : OPD

Type : OPD
 Request No. : 102928
 Request Date : 28/01/2023 08:11 AM
 Collection Date : 28/01/2023 08:12 AM
 Approval Date : 28/01/2023 01:13 PM

HbA1c (Glycosylated Hb)

Test	Result	Units	Biological Ref. Range
<i>HbA1c (Glycosylated Hb)</i>			
Glycosylated Hemoglobin (HbA1c)	5.4	%	
estimated Average Glucose (e AG) *	108.28	mg/dL	

(Method:

By Automated HPLC analyser on D-10 Biorad. NGSP Certified, US-FDA approved, Traceable to IFCC reference method.

* Calculated valued for past 60 days, derived from HbA1c %, based on formula recommended by the A1c - Derived Average Glucose study from ADA and EASD funded The ADAG trial.

Guidelines for Interpretation:

Indicated Glycemic control of previous 2-3 months

HbA1c%	e AG (mg/dl)	Glycemic control
> 8	> 183	Action suggested...High risk of developing long-term complications. Action suggested, depends on individual patient circumstances
7 - 8	154 - 183	Good
< 7	< 154	Goal...Some danger of hypoglycemic reaction in type I Diabetics. Some Glucose intolerant individuals and Sub-Clinical diabetics may demonstrate (elevated) HbA1c in this area.
6 - 7	126 - 154	Near Normal
< 6	< 126	Nondiabetic level)

---- End of Report ----

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M.D.Pathology



Patient Name : Mr. AMARENDRA KUMAR
Gender / Age : Male / 48 Years 2 Months 11 Days
MR No / Bill No. : 23199378 / 231063115
Consultant : Dr. BAGH Doctor
Location : OPD

Type : OPD
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Complete Lipid Profile

Test	Result	Units	Biological Ref. Range
Complete Lipid Profile			
Appearance	Clear		
Triglycerides	95	mg/dL	1 - 150
<i>(By Lipase / Glycerol dehydrogenase on RXL Dade Dimension < 150 Normal 150-199 Borderline High 200-499 High > 499 Very High)</i>			
Total Cholesterol	149	mg/dL	1 - 200
<i>(By enzymatic colorimetric method on RXL Dade Dimension <200 mg/dL - Desirable 200-239 mg/dL - Borderline High > 239 mg/dL - High)</i>			
HDL Cholesterol	46	mg/dL	40 - 60
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension < 40 Low > 60 High)</i>			
Non HDL Cholesterol (calculated)	103	mg/dL	1 - 130
<i>(Non- HDL Cholesterol < 130 Desirable 139-159 Borderline High 160-189 High > 191 Very High)</i>			
LDL Cholesterol	86	mg/dL	1 - 100
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension < 100 Optimal 100-129 Near / above optimal 130-159 Borderline High 160-189 High > 189 Very High)</i>			
VLDL Cholesterol (calculated)	19	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	1.87		2.1 - 3.5
T. Ch./HDL Ch. Ratio	3.24		3.5 - 5
<i>(Recent NECP / ATP III Guidelines / Classification (mg/dl) :)</i>			

--- End of Report ---

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Renal Function Test (RFT)

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>Biological Ref. Range</u>
Urea <i>(By Urease Kinetic method on RXL Dade Dimension)</i>	24	mg/dL	10 - 45
Creatinine <i>(By Modified Kinetic Jaffe Technique)</i>	0.87	mg/dL	0.9 - 1.3
Estimate Glomerular Filtration rate <i>(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)</i>	More than 60		
Uric acid <i>(By Uricase / Catalase method on RXL Siemens)</i>	6.1	mg/dL	3.4 - 7.2

--- End of Report ---

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Liver Function Test (LFT)

Test	Result	Units	Biological Ref. Range
Bilirubin			
Bilirubin - Total	1.08	mg/dL	0 - 1
Bilirubin - Direct	0.21	mg/dL	0 - 0.3
Bilirubin - Indirect	0.87	mg/dL	0 - 0.7
<i>(By Diazotized sulfanilic acid on RXL Dade Dimension.)</i>			
Aspartate Aminotransferase (SGOT/AST)	56	U/L	15 - 40
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alanine Aminotransferase (SGPT/ALT)	43	U/L	16 - 63
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alkaline Phosphatase	151	U/L	53 - 128
<i>(BY PNPP AMP method on RXL Dade Dimension.)</i>			
Gamma Glutamyl Transferase (GGT)	30	U/L	15 - 85
<i>(By IFCC method on RXL Dade Dimension.)</i>			
Total Protein			
Total Proteins	7.15	gm/dL	6.4 - 8.2
Albumin	3.68	gm/dL	3.4 - 5
Globulin	3.47	gm/dL	3 - 3.2
A : G Ratio	1.06		1.1 - 1.6
<i>(By Biuret endpoint and Bromocresol purple method on RXL Dade Dimesion.)</i>			

---- End of Report ----

Dr. Sejal Odedra
M.D.Pathology



Patient Name : Mr. AMARENDRA KUMAR
Gender / Age : Male / 48 Years 2 Months 11 Days
MR No / Bill No. : 23199378 / 231063115
Consultant : Dr. BAGH Doctor
Location : OPD

Type : OPD
Request No. : 102928
Request Date : 28/01/2023 08:11 AM
Collection Date : 28/01/2023 08:12 AM
Approval Date : 28/01/2023 10:10 AM

Prostate Sp. (Antigen)

Test	Result	Units	Biological Ref. Range
Total PSA	0.813	ng/ml	0 - 4

(Method : Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.

Remark :

Age related reference range for interpretation :

< 40 yrs : 0.21 - 1.72

40 - 49 yrs : 0.27 - 2.19

50 - 59 yrs : 0.27 - 3.42

60 - 69 yrs : 0.27 - 6.16

>69 yrs : 0.21 - 6.77

TPSA may be raised usually mildly in benign prostatic conditions like hyperplasia. Typically 30 % of BPH may show values between 4-10 and 7 % between 10-40.

In Prostatic Malignancy 43 % show values below 4

21 % between 4 to 10

20 % between 10 to 40 &

16 % above 40)

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

Dr. Sejal Odedra
M.D.Pathology



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 Gender / Age : Male / 48 Years 2 Months 11 Days
 MR No / Bill No. : 23199378 / 231063115
 Consultant : Dr. BAGH Doctor
 Location : OPD

Type : OPD
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 Approval Date : 28/01/2023 10:09 AM

Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
------	--------	-------	-----------------------

Triiodothyronine (T3)	1.34	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)	8.16	mcg/dL	
----------------	------	--------	--

(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)	4.18	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. Sejal Odedra
M.D.Pathology



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 Gender / Age : Male / 48 Years 2 Months 11 Days Request No. : 102928
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Urine routine analysis (Auto)

Test	Result	Units	Biological Ref. Range
Physical Examination			
Quantity	50	mL	
Colour	Pale Yellow		
Appearance	Clear		
Chemical Examination (By Reagent strip method)			
pH	7.0		
Specific Gravity	1.020		
Protein	Negative	gm/dL	0 - 5
Glucose	Negative	mg/dL	0 - 5
Ketones	Negative		0 - 5
Bilirubin	Negative		Negative
Urobilinogen	Negative		Negative (upto 1)
Blood	Negative		Negative
Leucocytes	Negative		Negative
Nitrite	Negative		Negative
Microscopic Examination (by Microscopy after Centrifugation at 2000 rpm for 10 min or on fully automated Sysmex urine sedimentation analyzer UF4000)			
Red Blood Cells	0 - 1	/hpf	0 - 2
Leucocytes	1 - 5	/hpf	0 - 5
Epithelial Cells	0 - 1	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil	/hpf	Nil
Mucus	Absent	/hpf	Absent
Organism	Absent		

---- End of Report ----

Dr. Sejal Odedra
M.D.Pathology



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DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 23199378 Report Date : 28/01/2023
Request No. : 190050710 28/01/2023 8.11 AM
Patient Name : **Mr. AMARENDRA KUMAR**
Gender / Age : Male / 48 Years 2 Months 11 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

Hasani

Dr.Pruna C Hasani, MD
Consultant Radiologist





DEPARTMENT OF DIAGNOSTIC RADIOLOGY

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. : 23199378 Report Date : 28/01/2023
Request No. : 190050709 28/01/2023 8.11 AM
Patient Name : Mr. AMARENDRA KUMAR
Gender / Age : Male / 48 Years 2 Months 11 Days

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

Liver is normal in size echopattern. 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 in size and echopattern.

Both kidneys are normal in shape and position. Normal echogenicity and cortico medullary differentiation is noted. No hydronephrosis or mass lesion seen.

Prostate appears normal in size and volume is ~ 21cc. Prostate measures 33mm x 35mm x 35mm.

Urinary bladder is well distended and appears normal.

No ascites.

COMMENT:

No obvious abnormality seen.

Kindly correlate clinically

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

Hasani

Dr. Prerna C Hasani, MD
Consultant Radiologist



Patient No. : 23199378 Report Date : 28/01/2023
Request No. : 190050744 28/01/2023 8.11 AM
Patient Name : Mr. AMARENDRA KUMAR
Gender / Age : Male / 48 Years 2 Months 11 Days

Echo Color Doppler

MITRAL VALVE : NORMAL, NO MS, NO MR
AORTIC VALVE : TRILEAFLET, NO AS, NO AR
TRICUSPID VALVE : NORMAL, NO TR, NO PAH
PULMONARY VALVE : NORMAL, NO PR, NO PS
LEFT ATRIUM : NORMAL SIZE
AORTA : NORMAL
LEFT VENTRICLE : NORMAL LVEF -60-65 %, NO RWMA AT REST
RIGHT ATRIUM : NORMAL SIZE
RIGHT VENTRICLE : NORMAL SIZE
I.V.S. : INTACT
I.A.S. : INTACT
PULMONARY ARTERY : NORMAL
PERICARDIUM : NO EFFUSION
COLOUR/DOPPLER FLOW MAPPING : NO AR, MR, TR NO PAH

FINAL CONCLUSION:

1. NORMAL SIZED ALL CARDIAC CHAMBERS
2. NORMAL LV SYSTOLIC FUNCTION LVEF - 60-65 %
3. NO RESTING RWMA
4. NORMAL VALVES, NO MITRAL / AORTIC STENOSIS
5. NORMAL RIGHT HEART SIZE AND RV PRESSURE
6. NO PERICARDIAL EFFUSION, CLOT OR VEGETATION SEEN, SR+.

DR. KILLOL KANERIA MD, DM
INTERVENTIONAL CARDIOLOGIST

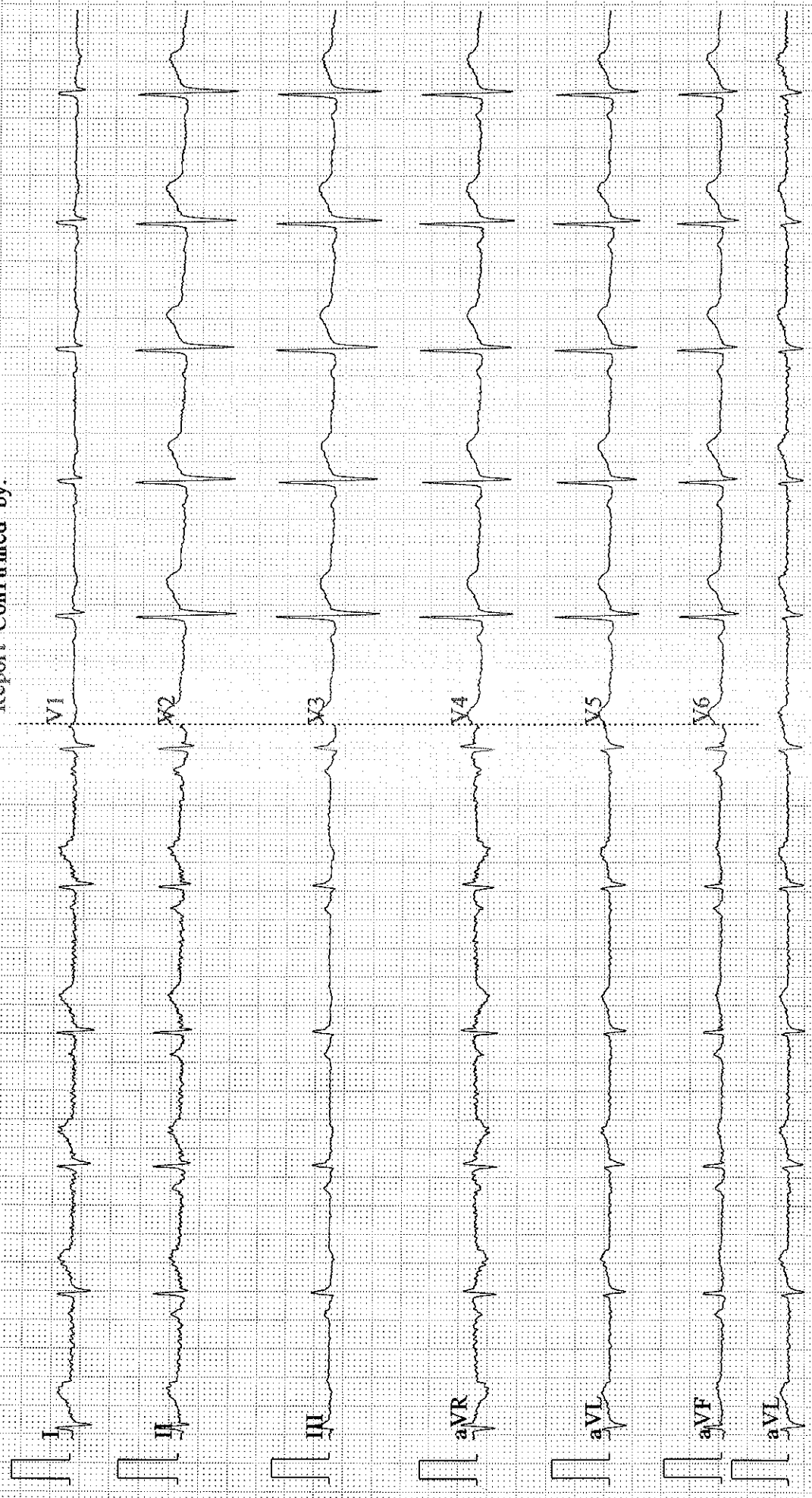
ID: 0
AMARENDRA KUMAR
Male 48Years

HR : 64 bpm
P : 110 ms
PR : 172 ms
QRS : 81 ms
QT/QTc : 392/405 ms
P/QRS/T : 70/92/26 °
RV5/SV1 : 0.994/0.139 mV

Diagnosis Information:
Sinus Rhythm
Right Axis Deviation

WPM

Report Confirmed by:



Dr. Sonica Peshin

Cosmetic Dentist & Implantologist

Reg. No. : 6966-A

M. : 9586867301



BHAILAL AMIN
GENERAL HOSPITAL

Dental assessment form

28/01/2023

Name: Amarendra Kumar

Age/ Sex: 48 years/Male

Patient has come for an oral hygiene check up

On Examination:

- Stains+++ Calculus++
- History of horizontal brushing
- Generalised attrition, recession
- Decayed tooth with respect to 36
- Missing teeth with respect to 16, 17
- Generalised sensitivity and mobility seen

Provisional diagnosis:

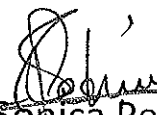
- Chronic generalised periodontitis

Treatment plan:

- Scaling and polishing
- Restoration of 36
- Extraction of hopeless teeth
- Prosthesis with respect to missing and extracted teeth

Advised:

- Brush your teeth twice daily
- Salt water rinses atleast once a day.
- Clean your tongue and floss in between everyday.
- Follow vertical brushing technique.


Dr. Sonica Peshin

ITEM CODE:SMD066

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