

R/o → Nagpur

Dr. Vimmi Goel
MBBS, MD (Internal Medicine)
Sr. Consultant Non Invasive Cardiology
Reg. No: MMC-2014/01/0113

Medi-Wheel



Name: Mr. Prarid Deshpande Date: 25/03/23

Age: 42y Sex: M / F Weight: 71.9 kg Height: 161.1 Inc BMI: 27.7

BP: 136/80 mmHg Pulse: 80 bpm RBS: _____ mg/dl

SPO₂ - 96%



DEPARTMENT OF PATHOLOGY

Patient Name : Mr. PRANIL DESHPANDE **Age / Gender** : 42 Y(s)/Male
Bill No/ UMR No : BIL2223024931/UMR2223139017 **Referred By** : Dr. Vimmi Goel MBBS,MD
Received Dt : 25-Mar-23 09:46 am **Report Date** : 25-Mar-23 11:37 am

HAEMOGRAM

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Haemoglobin	Blood	16.5	13.0 - 17.0 gm%	Photometric
Haematocrit(PCV)		48.0	40.0 - 50.0 Vol%	Calculated
RBC Count		5.51	4.5 - 5.5 Millions/cumm	Photometric
Mean Cell Volume (MCV)		87	83 - 101 fl	Calculated
Mean Cell Haemoglobin (MCH)		30.0	27 - 32 pg	Calculated
Mean Cell Haemoglobin Concentration (MCHC)		34.4	31.5 - 35.0 g/l	Calculated
RDW		14.8	11.5 - 14.0 %	Calculated
Platelet count		261	150 - 450 10 ³ /cumm	Impedance
WBC Count		9200	4000 - 11000 cells/cumm	Impedance

DIFFERENTIAL COUNT

Neutrophils	60.6	50 - 70 %	Flow Cytometry/Light microscopy
Lymphocytes	33.9	20 - 40 %	Flow Cytometry/Light microscopy
Eosinophils	3.6	1 - 6 %	Flow Cytometry/Light microscopy
Monocytes	1.9	2 - 10 %	Flow Cytometry/Light microscopy
Basophils	0.0	0 - 1 %	Flow Cytometry/Light microscopy
Absolute Neutrophil Count	5575.2	2000 - 7000 /cumm	Calculated
Absolute Lymphocyte Count	3118.8	1000 - 4800 /cumm	Calculated
Absolute Eosinophil Count	331.2	20 - 500 /cumm	Calculated
Absolute Monocyte Count	174.8	200 - 1000 /cumm	Calculated



MC-4807



**KIMS - KINGSWAY
HOSPITALS**

DEPARTMENT OF PATHOLOGY

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<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Absolute Basophil Count		0	0 - 100 /cumm	Calculated
PERIPHERAL SMEAR				
RBC		Normochromic Normocytic		
Anisocytosis		Anisocytosis +(Few)		
WBC		As Above		
Platelets		Adequate		
ESR		07	0 - 15 mm/hr	Automated Westergren's Method
*** End Of Report ***				

Suggested Clinical Correlation * If necessary, Please discuss

Verified By : : 11100245

Test results related only to the item tested.

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Page 2 of 2

Dr. VAIDEHEE NAIK, MBBS,MD
CONSULTANT PATHOLOGIST

SPANV Medisearch Lifesciences Private Limited
44, Parwana Bhawan, Kingsway, Nagpur - 440 001, Maharashtra, India.
Phone: +91 0712 6789100
CIN: U74999MH2018PTC303510



CLINICAL DIAGNOSTIC LABORATORY

DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mr. PRANIL DESHPANDE	Age / Gender : 42 Y(s)/Male
Bill No/ UMR No : BIL2223024931/UMR2223139017	Referred By : Dr. Vimmi Goel MBBS,MD
Received Dt : 25-Mar-23 09:47 am	Report Date : 25-Mar-23 11:34 am

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Fasting Plasma Glucose	Plasma	87	< 100 mg/dl	GOD/POD,Colorimetric

Interpretation:

Clinical Decision Value as per ADA Guidelines 2021

- Diabetes Mellites If,
- Fasting \geq 126 mg/dl
- Random/2Hrs.OGTT \geq 200 mg/dl
- Impaired Fasting = 100-125 mg/dl
- Impaired Glucose Tolerance = 140-199 mg/dl

Post Prandial Plasma Glucose	105	< 140 mg/dl	GOD/POD, Colorimetric
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Interpretation:

Clinical Decision Value as per ADA Guidelines 2021

- Diabetes Mellites If,
- Fasting \geq 126 mg/dl
- Random/2Hrs.OGTT \geq 200 mg/dl
- Impaired Fasting = 100-125 mg/dl
- Impaired Glucose Tolerance = 140-199 mg/dl

GLYCOSYLATED HAEMOGLOBIN (HBA1C)

HbA1c	5.5	Non-Diabetic : \leq 5.6 % Pre-Diabetic : 5.7 - 6.4 % Diabetic : \geq 6.5 %	HPLC
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MC-4807



DEPARTMENT OF BIOCHEMISTRY

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LIPID PROFILE

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Method</u>
Total Cholesterol	Serum	193 < 200 mg/dl	Enzymatic(CHE/CHO/POD)
Triglycerides		131 < 150 mg/dl	Enzymatic (Lipase/GK/GPO/POD)
HDL Cholesterol Direct		38 > 40 mg/dl	Phosphotungstic acid/mgcl-Enzymatic (microslide)
LDL Cholesterol Direct		123.55 < 100 mg/dl	Enzymatic
VLDL Cholesterol		26 < 30 mg/dl	Calculated
Tot Chol/HDL Ratio		5 3 - 5	Calculation

<u>Intiate therapeutic</u>	<u>Consider Drug therapy</u>	<u>LDC-C</u>
CHD OR CHD risk equivalent	>100	>130, optional at 100-129
Multiple major risk factors conferring 10 yrs CHD risk >20%		<100
Two or more additional major risk factors, 10 yrs CHD risk <20%	>130	10 yrs risk 10-20 % >130
No additional major risk or one additional major risk factor	>160	10 yrs risk <10% >160
		>190, optional at 160-189
		<160

*** End Of Report ***

Suggested Clinical Correlation * If necessary, Please discuss

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Dr. VAIDEHEE NAIK, MBBS,MD

CONSULTANT PATHOLOGIST



DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mr. PRANIL DESHPANDE	Age / Gender : 42 Y(s)/Male
Bill No/ UMR No : BIL2223024931/UMR2223139017	Referred By : Dr. Vimmi Goel MBBS,MD
Received Dt : 25-Mar-23 09:46 am	Report Date : 25-Mar-23 11:34 am

LIVER FUNCTION TEST(LFT)

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Total Bilirubin	Serum	0.86	0.2 - 1.3 mg/dl	Azobilirubin/Dyphylline
Direct Bilirubin		0.29	0.1 - 0.3 mg/dl	Calculated
Indirect Bilirubin		0.57	0.1 - 1.1 mg/dl	Duel wavelength spectrophotometric
Alkaline Phosphatase		62	38 - 126 U/L	pNPP/AMP buffer
SGPT/ALT		38	10 - 40 U/L	Kinetic with pyridoxal 5 phosphate
SGOT/AST		25	15 - 40 U/L	Kinetic with pyridoxal 5 phosphate
Serum Total Protein		7.84	6.3 - 8.2 gm/dl	Biuret (Alkaline cupric sulphate)
Albumin Serum		4.04	3.5 - 5.0 gm/dl	Bromocresol green Dye Binding
Globulin		3.80	2.0 - 4.0 gm/	Calculated
A/G Ratio		1.06		

*** End Of Report ***

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CONSULTANT PATHOLOGIST**



**CLINICAL DIAGNOSTIC LABORATORY
DEPARTMENT OF BIOCHEMISTRY**

Patient Name : Mr. PRANIL DESHPANDE
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Bill No/ UMR No : BIL2223024931/UMR2223139017
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Received Dt : 25-Mar-23 09:46 am
Report Date : 25-Mar-23 11:34 am

<u>Parameter</u>	<u>Specimen</u>	<u>Result Values</u>	<u>Biological Reference</u>	<u>Method</u>
RFT				
Blood Urea	Serum	32	19.0 - 43.0 mg/dl	Urease with indicator dye
Creatinine		1.42	0.66 - 1.25 mg/dl	Enzymatic (creatinine amidohydrolase)
GFR		63.3		Calculation by CKD-EPI 2021
Sodium		143	136 - 145 mmol/L	Direct ion selective electrode
Potassium		3.57	3.5 - 5.1 mmol/L	Direct ion selective electrode
URINE SUGAR				
Urine Glucose		Negative		
THYROID PROFILE				
T3		1.35	0.55 - 1.70 ng/ml	Enhanced chemiluminescence
Free T4		1.03	0.80 - 1.70 ng/dl	Enhanced Chemiluminescence
TSH		5.47	0.50 - 4.80 uIU/ml	Enhanced chemiluminescence

*** End Of Report ***

Suggested Clinical Correlation * If necessary, Please discuss

Verified By: 111001



CLINICAL DIAGNOSTIC LABORATORY DEPARTMENT OF PATHOLOGY

Patient Name : Mr. PRANIL DESHPANDE
Age / Gender : 42 Y(s)/Male
Bill No/ UMR No : BIL2223024931/UMR2223139017
Referred By : Dr. Vimmi Goel MBBS,MD
Received Dt : 25-Mar-23 10:43 am
Report Date : 25-Mar-23 12:24 pm

Parameter

Specimen Results

Method

URINE MICROSCOPY

PHYSICAL EXAMINATION

Volume	Urine	30 ml		
Colour.		Pale yellow		
Appearance		Clear		

CHEMICAL EXAMINATION

Reaction (pH)	Urine	5.0	4.6 - 8.0	
Specific gravity		1.010	1.005 - 1.025	
Urine Protein		Negative		Indicators

Sugar		Negative		ion concentration
Bilirubin		Negative		protein error of pH indicator
Ketone Bodies		Negative		GOD/POD
Nitrate		Negative		Diazonium
Urobilinogen		Negative		Legal's est Principle
MICROSCOPIC EXAMINATION		Normal		Ehrlich's Reaction

Epithelial Cells

Epithelial Cells	Urine	0-1	0 - 4 /hpf	Manual
R.B.C.		Absent	0 - 4 /hpf	Manual
Pus Cells		0-1	0 - 4 /hpf	Manual

Casts		Absent		Manual
Crystals		Absent		Manual
Others		.		Manual

USF (URINE SUGAR FASTING)

Urine Glucose	Urine	Negative		GOD/POD
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MC-4807



**KIMS-KINGSWAY
HOSPITALS**

DEPARTMENT OF IMMUNO HAEMATOLOGY

Patient Name : Mr. PRANIL DESHPANDE
Age / Gender : 42 Y(s)/Male
Bill No/ UMR No : BIL2223024931/UMR2223139017
Referred By : Dr. Vimmi Goel MBBS,MD
Received Dt : 25-Mar-23 09:46 am
Report Date : 25-Mar-23 12:10 pm

BLOOD GROUPING AND RH

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>
BLOOD GROUP.	EDTA Whole Blood & Plasma/Serum	"AB"
Rh (D) Typing.		" Positive "(+Ve)

Gel Card Method

*** End Of Report ***

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Phone: +91 0712 6789100
CIN: U74999MH2018PTC303510

DEPARTMENT OF RADIOLOGY & IMAGING SCIENCE

NAME	PRANIL DESHPANDE	STUDY DATE	25-03-2023 10:26:13
AGE/ SEX	42Y9M5D / M	HOSPITAL NO.	UMR2223139017
ACCESSION NO.	BIL2223024931-9	MODALITY	DX
REPORTED ON	25-03-2023 12:58	REFERRED BY	Dr. Vimmi Goel

X-RAY CHEST PA VIEW

Both the lung fields are clear.

Heart and Aorta are normal.

Both hilar shadows appear normal.

Diaphragm domes and CP angles are clear.

Bony cage is normal.

IMPRESSION -

No pleuro-parenchymal abnormality seen.



DR NAVEEN PUGALIA

MBBS, MD [076125]

SENIOR CONSULTANT RADIOLOGIST.

NAME OF PATIENT:	PRANIL DESHPANDE	AGE & SEX:	42 Y / M
UMR NO	2223139017		
REF BY:	DR. VIMMI GOEL	DATE:	25/03/2023

USG ABDOMEN AND PELVIS

LIVER is normal in size and **shows moderately raised echotexture**.
No evidence of any focal lesion seen. Intrahepatic biliary radicals are not dilated.
PORTAL VEIN and CBD are normal in course and caliber.

GALL BLADDER is physiologically distended. No stones or sludge seen within it.
Wall thickness is within normal limits.

PANCREAS is normal in shape, size and echotexture.

SPLEEN is normal in size, shape and echotexture. No focal lesion seen.

Right kidney measures 8.6 x 4.3 cm. Left kidney measures 9.2 x 4.8 cm.
Both kidneys are normal in size, shape and echotexture.
No evidence of calculus or hydronephrosis seen.
URETERS are not dilated.

URINARY BLADDER is partially distended with mildly thickened bladder wall. No calculus or mass lesion seen.

Prostate is enlarged in size (Volume- 40 cc).

There is no free fluid or abdominal lymphadenopathy seen.

IMPRESSION:

- **Grade II fatty liver.**
- **Moderate prostatomegaly**
- **Mildly thickened urinary bladder wall – to rule out cystitis.**



DR. AMEYA KAWTHALKAR
MBBS, MD (RADIOLOGICALS, TATA HOSPITAL MUMBAI),
DNB, FRCR (UK), EDIR (EUROPE), DIP.ICRI
FELLOWSHIP IN MUSCULOSKELETAL IMAGING AND
INTERVENTIONS, SMK, NETHERLANDS
MUSCULOSKELETAL INTERVENTIONAL AND SPORTS
RADIOLOGIST.

Kingsway Hospitals
44 Kingsway, Mohan Nagar,
Near Kasturchand Park, Nagpur

Station
Telephone:

EXERCISE STRESS TEST REPORT

Patient Name: Mr. Pranil, Deshpande
Patient ID: 139017
Height:
Weight:
Study Date: 25.03.2023
Test Type: Treadmill Stress Test
Protocol: BRUCE

DOB: 20.06.1980
Age: 42yrs
Gender: Male
Race: Indian
Referring Physician: Mediwheel HCU
Attending Physician: Dr. Vimmi Goel
Technician: --

Medications:

Medical History:

HTN

Reason for Exercise Test:

Screening for CAD

Exercise Test Summary:

Case Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	00:04	0.00	0.00	78	120/80	
	STANDING	00:01	0.00	0.00	80		
	WARM-UP	00:05	0.00	0.00	80		
EXERCISE	STAGE 1	03:00	1.70	10.00	126		
	STAGE 2	03:00	2.50	12.00	141	120/80	
	STAGE 3	02:55	3.40	14.00	166	140/80	
RECOVERY		01:00	0.00	0.00	131	160/80	
		02:00	0.00	0.00	115	140/80	
		00:31	0.00	0.00			

The patient exercised according to the BRUCE for 8:54 min:s, achieving a work level of Max. METS: 10.10. The resting heart rate of 78 bpm rose to a maximal heart rate of 166 bpm. This value represents 93% of the maximal, age-predicted heart rate. The resting blood pressure of 120/80 mmHg, rose to a maximum blood pressure of 160/80 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:

TMT is negative for inducible ischemia.


Dr. VIMMI GOEL
MBBS, MD
Sr. Consultant Non Invasive Cardiology
Reg No: 2014/07/0113

MR PRANIL DESHPANDE
Male

PHC DEPT.

42 Years

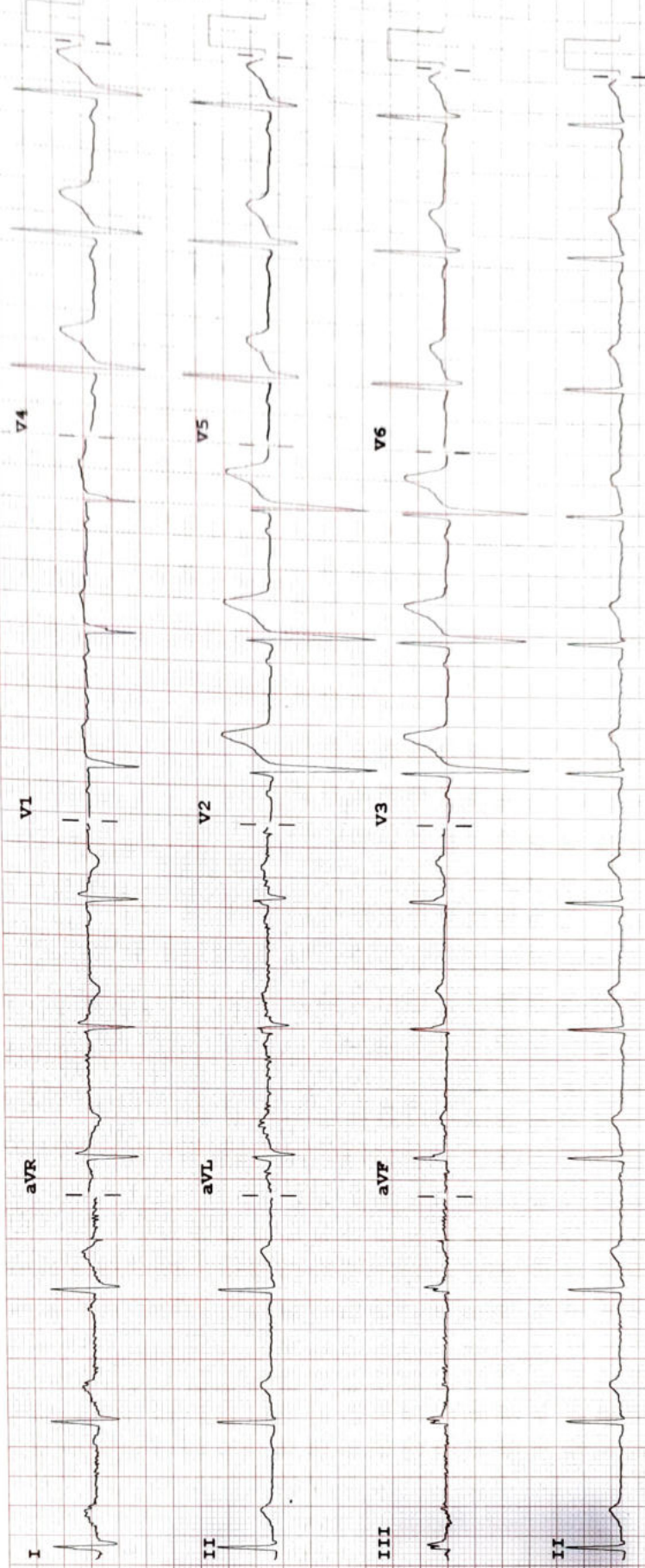
Rate 69 . Sinus rhythm.....normal P axis, V-rate 50-99
 PR 154 . ST elev, probable normal early repol pattern.....ST elevation, age<55
 QRSD 88 . Baseline wander in lead(s) V4

--AXIS--
 P 6
 QRS 57
 T 24

Unconfirmed Diagnosis

12 Lead; Standard Placement

- NORMAL ECG -



Device:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 50~ 0.50-150 Hz W

100B CL

P?