

Dr. Vimmi Goel

Head - Non Invasive Cardiology

Incharge - Preventive Health Care

MBBS, MD (Internal Medicine)

Reg. No: MMC-2014/01/0113

CIN: 7499913052



Name: Mr. Kapil Chopnaley Date: 16/10/23

Age: 35y Sex: M / F Weight: 72.2 kg Height: 172.8 Inc BMI: 24.2

BP: 120/80 mmHg Pulse: 64 bpm RBS: _____ mg/dl

SpO₂: 98%

Name: Mr Kapil Gopnarayan Date: 16/10/23

Age: 35 yrs Sex: M/F Weight: _____ kg Height: _____ inc BMI: _____

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

Routine dental checkup.

POH:- Crown $\bar{1}$

O/E- Pit caries $\bar{7/8}$

Stains +

Calculus +

Advice:- Complete oral prophylaxis

Restoration $\bar{7}$

Dr. Megha

DEPARTMENT OF OPHTHALMOLOGY
OUT PATIENT ASSESSMENT RECORD

KAPIL GOPNARAYAN 35Y(S) 0M(S) 4D(S)/M UMR2324024663 9011729878	CONSULT DATE : 16-10-2023 CONSULT ID : OPC2324072390 CONSULT TYPE : WALK IN VISIT TYPE : NORMAL TRANSACTION TYPE :	DR. ASHISH PRAKASHCHANDRA KAMBLE MBBS,MS, FVRS,FICO CONSULTANT DEPT OPHTHALMOLOGY
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VITALS

Temp : **Pulse** : **BP (mmHg)** : **spO2** : **Pain Score** : **Height** :
-- °F -- /min -- %RA -- /10 -- cms

Weight : **BMI** :
-- kg --

MEDICATION PRESCRIBED

#	Medicine	Route	Dose	Frequency	When	Duration
1	HYMOIST EYE DROP 10ML	Eye	1-1-1-1	Every Day	After Food	2 months
Instructions : --						
Composition : SODIUM HYALURONATE 0.1% W/V						

NOTES

GLASS PRESCRIPTION :-
DISTANCE VISION

EYE	SPH	CYL	AXIS	VISION
RIGHT EYE	00	+0.75	175	6/6
LEFT EYE	00	+0.75	180	6/6

NEAR ADDITION

RIGHT EYE	00	N6
LEFT EYE	00	N6

REMARK- blue cut glasses

REVIEW

Follow up Date : 16-04-2024

Ashish Kamble

Dr. Ashish Prakashchandra Kamble
MBBS,MS, FVRS,FICO
Consultant

Printed On : 16-10-2023 11:19:30

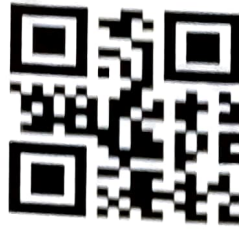


CLINICAL DIAGNOSTIC LABORATORY
DEPARTMENT OF PATHOLOGY

Patient Name : Mr. KAPIL GOPNARAYAN	Age / Gender : 35 Y(s)/Male
Bill No/ UMR No : BIL2324048400/UMR2324024663	Referred By : Dr. Vimmi Goel MBBS,MD
Received Dt : 16-Oct-23 09:55 am	Report Date : 16-Oct-23 11:27 am

HAEMOGRAM

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Haemoglobin	Blood	14.5	13.0 - 17.0 gm%	Photometric
Haematocrit(PCV)		44.2	40.0 - 50.0 %	Calculated
RBC Count		4.82	4.5 - 5.5 Millions/cumm	Photometric
Mean Cell Volume (MCV)		92	83 - 101 fl	Calculated
Mean Cell Haemoglobin (MCH)		30.0	27 - 32 pg	Calculated
Mean Cell Haemoglobin Concentration (MCHC)		32.7	31.5 - 35.0 g/l	Calculated
RDW		16.5		
Platelet count		264	11.5 - 14.0 %	Calculated
WBC Count		7200	150 - 450 10 ³ /cumm	Impedance
			4000 - 11000 cells/cumm	Impedance
<u>DIFFERENTIAL COUNT</u>				
Neutrophils		53.8	50 - 70 %	Flow Cytometry/Light microscopy
Lymphocytes		38.7	20 - 40 %	Flow Cytometry/Light microscopy
Eosinophils		1.7	1 - 6 %	Flow Cytometry/Light microscopy
Monocytes		5.8	2 - 10 %	Flow Cytometry/Light microscopy
Basophils		0.0	0 - 1 %	Flow Cytometry/Light microscopy
Absolute Neutrophil Count		3873.6	2000 - 7000 /cumm	Calculated



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DEPARTMENT OF PATHOLOGY**

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Referred By : Dr. Vimmi Goel MBBS,MD
Received Dt : 16-Oct-23 09:55 am
Report Date : 16-Oct-23 11:27 am

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Absolute Lymphocyte Count		2786.4	1000 - 4800 /cumm	Calculated
Absolute Eosinophil Count		122.4	20 - 500 /cumm	Calculated
Absolute Monocyte Count		417.6	200 - 1000 /cumm	Calculated
Absolute Basophil Count		0	0 - 100 /cumm	Calculated
<u>PERIPHERAL SMEAR</u>				
RBC		Normochromic		
WBC		Normocytic		
Platelets		As Above		
ESR		Adequate		
		06	0 - 15 mm/hr	

*** End Of Report ***

Automated Westergren's Method

Suggested Clinical Correlation * If necessary, Please discuss

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**Dr. GAURI HARDAS, MBBS,MD
CONSULTANT PATHOLOGIST**



CLINICAL DIAGNOSTIC LABORATORY

DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mr. KAPIL GOPNARAYAN	Age / Gender : 35 Y(s)/Male
Bill No/ UMR No : BIL2324048400/UMR2324024663	Referred By : Dr. Vimmi Goel MBBS,MD
Received Dt : 16-Oct-23 09:54 am	Report Date : 16-Oct-23 11:27 am

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Fasting Plasma Glucose	Plasma	80	< 100 mg/dl	GOD/POD,Colorimetric
Post Prandial Plasma Glucose		86	< 140 mg/dl	GOD/POD, Colorimetric

GLYCOSYLATED HAEMOGLOBIN (HBA1C)

HbA1c	5.1	Non-Diabetic : <= 5.6 % Pre-Diabetic : 5.7 - 6.4 % Diabetic : >= 6.5 %	HPLC
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*** End Of Report ***

Suggested Clinical Correlation * If necessary, Please discuss

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Dr. GAURI HARDAS, MBBS,MD

SPANV CONSULTANT PATHOLOGIST

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. KAPIL GOPNARAYAN	Age / Gender : 35 Y(s)/Male
Bill No/ UMR No : BIL2324048400/UMR2324024663	Referred By : Dr. Vimmi Goel MBBS,MD
Received Dt : 16-Oct-23 09:55 am	Report Date : 16-Oct-23 11:27 am

LIPID PROFILE

Parameter	Specimen	Results	Method
Total Cholesterol	Serum	195	Enzymatic(CHE/CHO/PO D)
Triglycerides		< 200 mg/dl	Enzymatic (Lipase/GK/GPO/POD)
HDL Cholesterol Direct		212	Phosphotungstic acid/mgcl-Enzymatic (microslide)
LDL Cholesterol Direct		36	Enzymatic
VLDL Cholesterol		112.77	Calculated
Tot Chol/HDL Ratio		42	Calculation
		5	

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

*** End Of Report ***

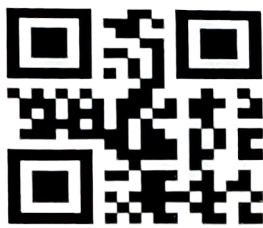
Suggested Clinical Correlation * If necessary, Please discuss

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CONSULTANT PATHOLOGIST



CLINICAL DIAGNOSTIC LABORATORY

DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mr. KAPIL GOPNARAYAN	Age /Gender : 35 Y(s)/Male
Bill No/ UMR No : BIL2324048400/UMR2324024663	Referred By : Dr. Vimmi Goel MBBS,MD
Received Dt : 16-Oct-23 12:58 pm	Report Date : 16-Oct-23 01:35 pm

<u>Parameter</u>	<u>Specimen</u>	<u>Result Values</u>	
URINE SUGAR			
Urine Glucose		Negative	
THYROID PROFILE			
T3		1.51	0.55 - 1.70 ng/ml Enhanced chemiluminescence
Free T4		1.37	0.80 - 1.70 ng/dl Enhanced Chemiluminescence
TSH		5.37	0.50 - 4.80 uIU/ml Enhanced chemiluminescence

*** End Of Report ***

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CONSULTANT PATHOLOGIST
SPANV Mediscare 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. KAPIL GOPNARAYAN	Age / Gender	: 35 Y(s)/Male
Bill No/ UMR No	: BIL2324048400/UMR2324024663	Referred By	: Dr. Vimmi Goel MBBS,MD
Received Dt	: 16-Oct-23 09:55 am	Report Date	: 16-Oct-23 11:27 am

<u>Parameter</u>	<u>Specimen</u>	<u>Result Values</u>	<u>Biological Reference</u>	<u>Method</u>
RFT				
Blood Urea	Serum	16	19.0 - 43.0 mg/dl	Urease with indicator dye
Creatinine		0.9	0.66 - 1.25 mg/dl	Enzymatic (creatinine amidohydrolase)
GFR		114.2		Calculation by CKD-EPI 2021
Sodium		140	136 - 145 mmol/L	Direct ion selective electrode
Potassium		4.67	3.5 - 5.1 mmol/L	Direct ion selective electrode
LIVER FUNCTION TEST(LFT)				
Total Bilirubin		0.46	0.2 - 1.3 mg/dl	Azobilirubin/Dyphylline
Direct Bilirubin		0.02	0.1 - 0.3 mg/dl	Calculated
Indirect Bilirubin		0.44	0.1 - 1.1 mg/dl	Duel wavelength spectrophotometric
Alkaline Phosphatase		77	38 - 126 U/L	pNPP/AMP buffer
SGPT/ALT		28	10 - 40 U/L	Kinetic with pyridoxal 5 phosphate
SGOT/AST		26	15 - 40 U/L	Kinetic with pyridoxal 5 phosphate
Serum Total Protein		7.68	6.3 - 8.2 gm/dl	Biuret (Alkaline cupric sulphate)
Albumin Serum		4.51	3.5 - 5.0 gm/dl	Bromocresol green Dye
Globulin		3.18	2.0 - 4.0 gm/dl	Binding
A/G Ratio		1.4		Calculated

*** End Of Report ***

Suggested Clinical Correlation * If necessary, Please discuss

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Dr. GAURI HARDAS, MBBS,MD

CONSULTANT PATHOLOGIST
SPANV Healthcare Resolutions Private Limited

44, Parwana Bhawan, Kingsway, Nagpur - 440 001, Maharashtra, India.

Phone: +91 0712 6789100

CIN: U74999MH2018PTC303510



CLINICAL DIAGNOSTIC LABORATORY

DEPARTMENT OF PATHOLOGY

Patient Name : Mr. KAPIL GOPNARAYAN	Age / Gender : 35 Y(s)/Male
Bill No/ UMR No : BIL2324048400/UMR2324024663	Referred By : Dr. Vimmi Goel MBBS,MD
Received Dt : 16-Oct-23 10:36 am	Report Date : 16-Oct-23 12:19 pm

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Method</u>
URINE MICROSCOPY			
<u>PHYSICAL EXAMINATION</u>			
Volume	Urine	30 ml	
Colour.		Pale yellow	
Appearance		Clear	
<u>CHEMICAL EXAMINATION</u>			
Reaction (pH)	Urine	5.0	4.6 - 8.0
Specific gravity		1.015	1.005 - 1.025
Urine Protein		Negative	Indicators ion concentration
Sugar		Negative	protein error of pH indicator
Bilirubin		Negative	GOD/POD
Ketone Bodies		Negative	Diazonium
Nitrate		Negative	Legal's est Principle
Urobilinogen		Normal	Ehrlich's Reaction
<u>MICROSCOPIC EXAMINATION</u>			
Epithelial Cells	Urine	0-1	0 - 4 /hpf
R.B.C.		Absent	0 - 4 /hpf
Pus Cells		0-1	0 - 4 /hpf
Casts		Absent	
Crystals		Absent	
USF(URINE SUGAR FASTING)			
Urine Glucose	Urine	Negative	GOD/POD

*** End Of Report ***

Suggested Clinical Correlation * If necessary, Please discuss

Verified By : : 11100400

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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 IMMUNO HAEMATOLOGY

Patient Name : Mr. KAPIL GOPNARAYAN
Age / Gender : 35 Y(s)/Male
Bill No/ UMR No : BIL2324048400/UMR2324024663
Referred By : Dr. Vimmi Goel MBBS,MD
Received Dt : 16-Oct-23 09:55 am
Report Date : 16-Oct-23 12:40 pm

BLOOD GROUPING AND RH

Parameter
BLOOD GROUP.

Specimen **Results**
EDTA Whole " B "
Blood &
Plasma/
Serum

Gel Card Method

Rh (D) Typing.

" Positive "(+Ve)
*** End Of Report ***

Suggested Clinical Correlation * If neccessary, Please discuss

Verified By : : 11100245

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Dr. GAURI HARDAS, MBBS,MD
CONSULTANT PATHOLOGIST

DEPARTMENT OF RADIOLOGY & IMAGING SCIENCE

NAME	KAPIL GOPNARAYAN	STUDY DATE	16-10-2023 12:11:57
AGE/ SEX	35Y4D / M	HOSPITAL NO.	UMR2324024663
ACCESSION NO.	BIL2324048400-9	MODALITY	DX
REPORTED ON	16-10-2023 12:38	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.

N.B : This is only a professional opinion and not the final diagnosis. Radiological investigations are subject to variations due to technical limitations. Hence, correlation with clinical findings and other investigations should be carried out to know true nature of illness.

PATIENT NAME:	MR. KAPIL GOPNARAYAN	AGE /SEX:	35 YRS/MALE
UMR NO:	2324024663	BILL NO:	2324048400
REF BY	DR. VIMMI GOEL	DATE:	16/10/2023

USG WHOLE ABDOMEN

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

Both KIDNEYS are normal in shape, size and echotexture.
No evidence of calculus or hydronephrosis seen.
URETERS are not dilated.

BLADDER is partially distended. No calculus or mass lesion seen.

Prostate is normal in size, shape and echotexture. Wt- 15.5 gms.

There is no free fluid or abdominal lymphadenopathy seen.

IMPRESSION -

No significant abnormality seen.

Suggest clinical correlation / further evaluation.



DR NAVEEN PUGALIA.
MBBS, MD [076125]
SENIOR CONSULTANT RADIOLOGIST

2D ECHOCARDIOGRAPHY AND COLOR DOPPLER REPORT

Patient Name : Mr. Kapil Gopnarayan
Age : 35 years / Male
UMR : UMR2324024663
Date : 16/10/2023
Done by : Dr. Vimmi Goel
ECG : NSR, ST-Coving V1-V4
Blood pressure: 120/80 mm Hg (Right arm, Supine position)
BSA : 1.86 m²

Impression:

Normal 2D Echocardiography

- Normal chambers dimensions
- No RWMA of LV at rest
- Good LV systolic function with LVEF – 65%
- Normal LV diastolic function
- E Velocity is 70 cm/s, A Velocity is 41 cm/s, E/A is 1.7
- Medial E' is 9.8 cm/sec, Lateral E' is 18.6 cm/sec, E/E' is 5.5 (Average)
- Valves are normal
- No pulmonary hypertension
- No clots / Pericardial effusion
- IVC – Normal in size and collapsing well with respiration


Dr. Vimmi Goel
MD, Sr. Consultant
Non-invasive Cardiology

16-Oct-23 11:05:56 AM

MR KAPIL GOPNARAYAN

Male

KIMS-KINGSWAY HOSPITALS

PHC DEPT.

35 Years

Rate 59
 PR 117
 QRSD 106
 QT 384
 QTC 381

• Sinus rhythm.....normal P axis, V-rate 50-99
 • Borderline short PR interval.....PR int <120ms
 • Probable left ventricular hypertrophy.....multiple LVH criteria

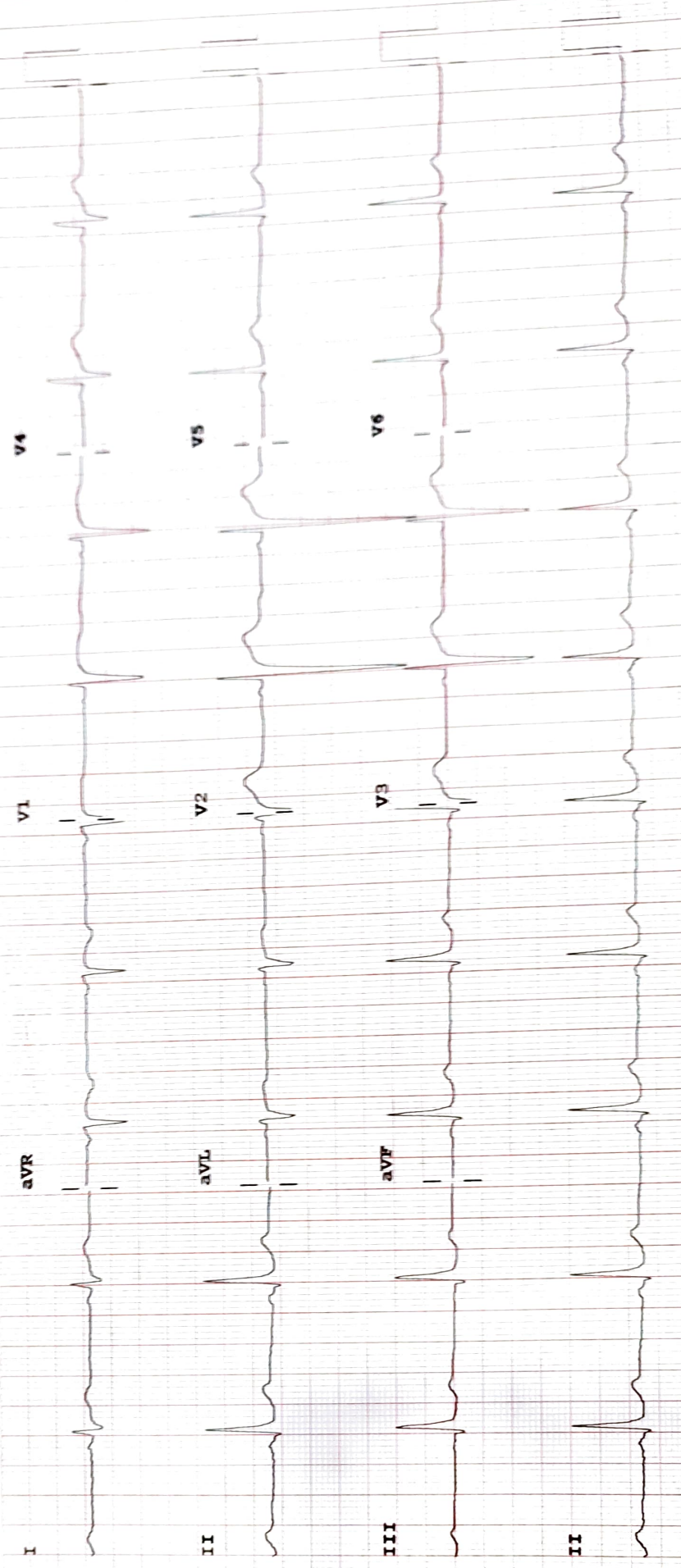
--AXIS--

P 45
 QRS 82
 T 51

12 Lead; Standard Placement

-- ABNORMAL ECG --

Unconfirmed Diagnosis



Device:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

P 50 ~ 0.50-150 Hz W

100B CL

P7