

Ecu Number MC/22/000261 Ecu.Date 23/04/2022

Pat.Number 21042080 AAKASH PANDYA Age 40

Ctgry.Desc.

Height 178 Cm. Weight 91 Kg. Ideal Weight 73 Kg. BMI : 29 Kg / Mtr²

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

Present H/O NO MEDICAL COMPLAINTS AT PRESENT.

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

Habits VEG DIET. ; OCC. ALCOHOL.

Gen. Exam. G.C. GOOD B.P 120/80 mm Hg Pulse 86/MIN REG. Other -

C.V.S. CLINICALLY NAD

R.S. CLINICALLY NAD

Abdomen : Liver : NP Spleen : NP

Skin NAD

C.N.S. NAD

OPHTHALMIC CHECK UP		RT	LT
Ext-Exam		NORMAL	NORMAL
Vision Without Glasses		6/6	6/6
Vision With Glasses		N.6	N.6
Final Correction		NORMAL	NORMAL
Fundus		NORMAL	
Colour Vision		NIL	
Advice		NIL	

Dr. Manish Mittal

0



Patient Name : Mr. AAKASH PANDYA
 Gender / Age : Male / 40 Years 2 Months 23 Days
 MR No / Bill No. : 21042080 / 231003617
 Consultant : Dr. Manish Mittal
 Location : OPD

Type : OPD
 Request No. : 40215
 Request Date : 23/04/2022 08:25 AM
 Collection Date : 23/04/2022 08:29 AM
 Approval Date : 23/04/2022 12:32 PM

CBC + ESR

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.

Test	Result	Units	Biological Ref. Range
Haemoglobin.			
Haemoglobin	14.2	gm/dL	13 - 17
Red Blood Cell Count (T-RBC)	4.76	mill/cmm	4.5 - 5.5
Hematocrit (HCT)	40.1	%	40 - 50
Mean Corpuscular Volume (MCV)	84.2	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	29.8	pg	27 - 32
MCH Concentration (MCHC)	35.4	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	11.7	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	36.5	fl	39 - 46
Total Leucocyte Count (TLC)			
Total Leucocyte Count (TLC)	7.08	thou/cmm	4 - 10
Differential Leucocyte Count			
Polymorphs	51	%	40 - 80
Lymphocytes	42	%	20 - 40
Eosinophils	03	%	1 - 6
Monocytes	04	%	2 - 10
Basophils	00	%	0 - 2
Polymorphs (Abs. Value)	3.61	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	2.93	thou/cmm	1 - 3
Eosinophils (Abs. Value)	0.20	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.31	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.03	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.3	%	1 - 3 : Borderline > 3 : Significant
Platelet Count			
Platelet Count	255	thou/cmm	150 - 410
Smear evaluation	Adequate		
ESR	5	mm/1 hr	0 - 10



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DEPARTMENT OF LABORATORY MEDICINE

Patient Name	: Mr. AAKASH PANDYA	Type	: OPD
Gender / Age	: Male / 40 Years 2 Months 23 Days	Request No.	: 40215
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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.



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Haematology

Test	Result	Units	Biological Ref. Range
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 ---

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Clinical Biochemistry

Test	Result	Units	Biological Ref. Range
Fasting Plasma Glucose	91	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	73	mg/dL	70 - 140

By Hexokinase method on RXL Dade Dimension

— End of Report —

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Complete Lipid Profile

Test	Result	Units	Biological Ref. Range
Complete Lipid Profile			
Appearance	Clear		
Triglycerides	157	mg/dL	1 - 150
<i>(By Lipase / Glycerol dehydrogenase on RXL Dade Dimension)</i>			
<i>< 150 Normal</i>			
<i>150-199 Borderline High</i>			
<i>200-499 High</i>			
<i>> 499 Very High</i>			
Total Cholesterol	163	mg/dL	1 - 200
<i>(By enzymatic colorimetric method on RXL Dade Dimension)</i>			
<i><200 mg/dL - Desirable</i>			
<i>200-239 mg/dL - Borderline High</i>			
<i>> 239 mg/dL - High</i>			
HDL Cholesterol	38	mg/dL	40 - 60
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension)</i>			
<i>< 40 Low</i>			
<i>> 60 High</i>			
Non HDL Cholesterol (calculated)	125	mg/dL	1 - 130
<i>(Non- HDL Cholesterol)</i>			
<i>< 130 Desirable</i>			
<i>139-159 Borderline High</i>			
<i>160-189 High</i>			
<i>> 191 Very High</i>			
LDL Cholesterol	94	mg/dL	1 - 100
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension)</i>			
<i>< 100 Optimal</i>			
<i>100-129 Near / above optimal</i>			
<i>130-159 Borderline High</i>			
<i>160-189 High</i>			
<i>> 189 Very High</i>			
VLDL Cholesterol	31.4	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	2.47		2.1 - 3.5
T. Ch./HDL Ch. Ratio	4.29		3.5 - 5
<i>(Recent NECP / ATP III Guidelines / Classification (mg/dl) :)</i>			

--- End of Report ---

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Liver Function Test (LFT)

Test	Result	Units	Biological Ref. Range
Bilirubin			
Bilirubin - Total	0.35	mg/dL	0 - 1
Bilirubin - Direct	0.09	mg/dL	0 - 0.3
Bilirubin - Indirect	0.26	mg/dL	0 - 0.7
<i>(By Diazotized sulfanilic acid on RXL Dade Dimension.)</i>			
Aspartate Aminotransferase (SGOT/AST)	19	U/L	15 - 40
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alanine Aminotransferase (SGPT/ALT)	27	U/L	10 - 40
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alkaline Phosphatase	84	U/L	53 - 128
<i>(BY PNPP AMP method on RXL Dade Dimension.)</i>			
Gamma Glutamyl Transferase (GGT)	28	U/L	15 - 85
<i>(By IFCC method on RXL Dade Dimension.)</i>			
Total Protein			
Total Proteins	7.04	gm/dL	6.4 - 8.2
Albumin	3.53	gm/dL	3.4 - 5
Globulin	<u>3.51</u>	gm/dL	3 - 3.2
A : G Ratio	<u>1.01</u>		1.1 - 1.6
<i>(By Biuret endpoint and Bromocresol purple method on RXL Dade Dimension.)</i>			

--- End of Report ---

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Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea (By Urease Kinetic method on RXL Dade Dimension)	27	mg/dL	10 - 45
Creatinine (By Modified Kinetic Jaffe Technique)	0.96	mg/dL	0.9 - 1.3
Estimate Glomerular Filtration rate (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)	More than 60		
Uric acid (By-Uricase / Catalase method on RXL-Siemens)	5.7	mg/dL	3.4 - 7.2

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Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
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Triiodothyronine (T3)	1.21	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)	9.34	mcg/dL	
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(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)	3.57	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))

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Clinical Biochemistry

Test	Result	Units	Biological Ref. Range
Total PSA	0.310	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)

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Patient Name : Mr. AAKASH PANDYA
 Gender / Age : Male / 40 Years 2 Months 23 Days
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Clinical Biochemistry

Test	Result	Units	Biological Ref. Range
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Glycosylated Hemoglobin (HbA1c)	4.9	%	
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estimated Average Glucose (e AG) *	93.93	mg/dL	
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*(Method:**By Automated HPLC analyser on D-10 Blorad. 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)

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Urine Routine

Test	Result	Units	Biological Ref. Range
Physical Examination			
Quantity	20	mL	
Colour	Pale Yellow		
Appearance	Clear		
Chemical Examination (By Reagent strip method)			
pH	6.0		
Specific Gravity	>=1.030		
Protein	Negative	gm/dL	Negative
Glucose	Negative	mg/dL	Negative
Ketones	Negative		Negative
Bilirubin	Negative		Negative
Urobilinogen	Negative		Negative (upto 1)
Blood	Negative		Negative
Bile Salt	Absent		Absent
Leucocytes	Negative		Negative
Bile Pigments	Absent		Absent
Nitrite	Negative		Negative
Microscopic Examination (After Centrifugation at 2000 rpm for 10 min)			
Red Blood Cells	Nil	/hpf	0 - 2
Leucocytes	Present (0-2)	/hpf	0 - 5
Epithelial Cells	Present (0-2)	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil		Nil
Mucus	Absent		Absent
Organism	Absent		

--- End of Report ---

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- Echocardiography

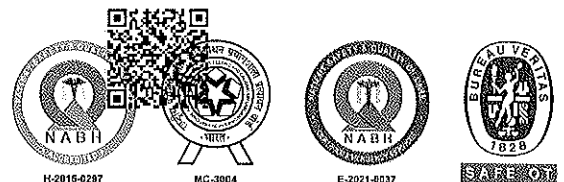
Patient No. : 21042080 Report Date : 23/04/2022
 Request No. : 190017883 23/04/2022 8.25 AM
 Patient Name : **AAKASH PANDYA**
 Gender / Age : Male / 40 Years 2 Months 23 Days

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


Dr. Priyanka Patel, MD
 Consultant Radiologist





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- Foetal Echocardiography
- Echocardiography

Patient No. : 21042080 Report Date : 23/04/2022
Request No. : 190017887 23/04/2022 8.25 AM
Patient Name : **AAKASH PANDYA**
Gender / Age : Male / 40 Years 2 Months 23 Days

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

Liver is normal in size and increased in echopattern. No mass lesion identified. The hepatic veins are clear and patent. PV patent. No dilated IHBR.

Gall bladder is well distended and shows multiple calculi largest measures 6-7mm. Common bile duct measures 4 mm in diameter.

Pancreas shows no obvious abnormality. Tail obscured. Spleen is normal 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. **Tiny concretion is seen in left kidney.**

Prostate appears normal in size and volume is ~ 19 cc. Prostate measures 30mm x 38mm x 31mm.

Urinary bladder is well distended and appears normal.

No ascites.

COMMENT:

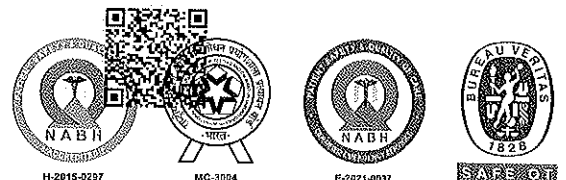
Fatty liver.
Multiple GB calculi.
Left renal tiny concretion.

Kindly correlate clinically

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

Prerna C Hasani

Dr. Prerna C Hasani, MD
Consultant Radiologist





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Patient No. : 21042080 Report Date : 23/04/2022
Request No. : 190017908 23/04/2022 8.25 AM
Patient Name : AAKASH PANDYA
Gender / Age : Male / 40 Years 2 Months 23 Days

Echo Color Doppler

MITRAL VALVE : NORMAL, NO MS, NO MR
AORTIC VALVE : TRILEAFLET, NO AS, NO AR
TRICUSPID VALVE : NORMAL, TRACE TR, NO PAH TR MAX ~ 15 MMHG
PULMONARY VALVE : NORMAL, NO PR, NO PS
LEFT ATRIUM : NORMAL SIZE
AORTA : NORMAL
LEFT VENTRICLE : NORMAL LVEF ~60%, 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, TRACE TR NO PAH

FINAL CONCLUSION:

1. NORMAL SIZED ALL CARDIAC CHAMBERS
2. NORMAL LV SYSTOLIC FUNCTION LVEF - 60%
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

ECU/21042080
40 Years

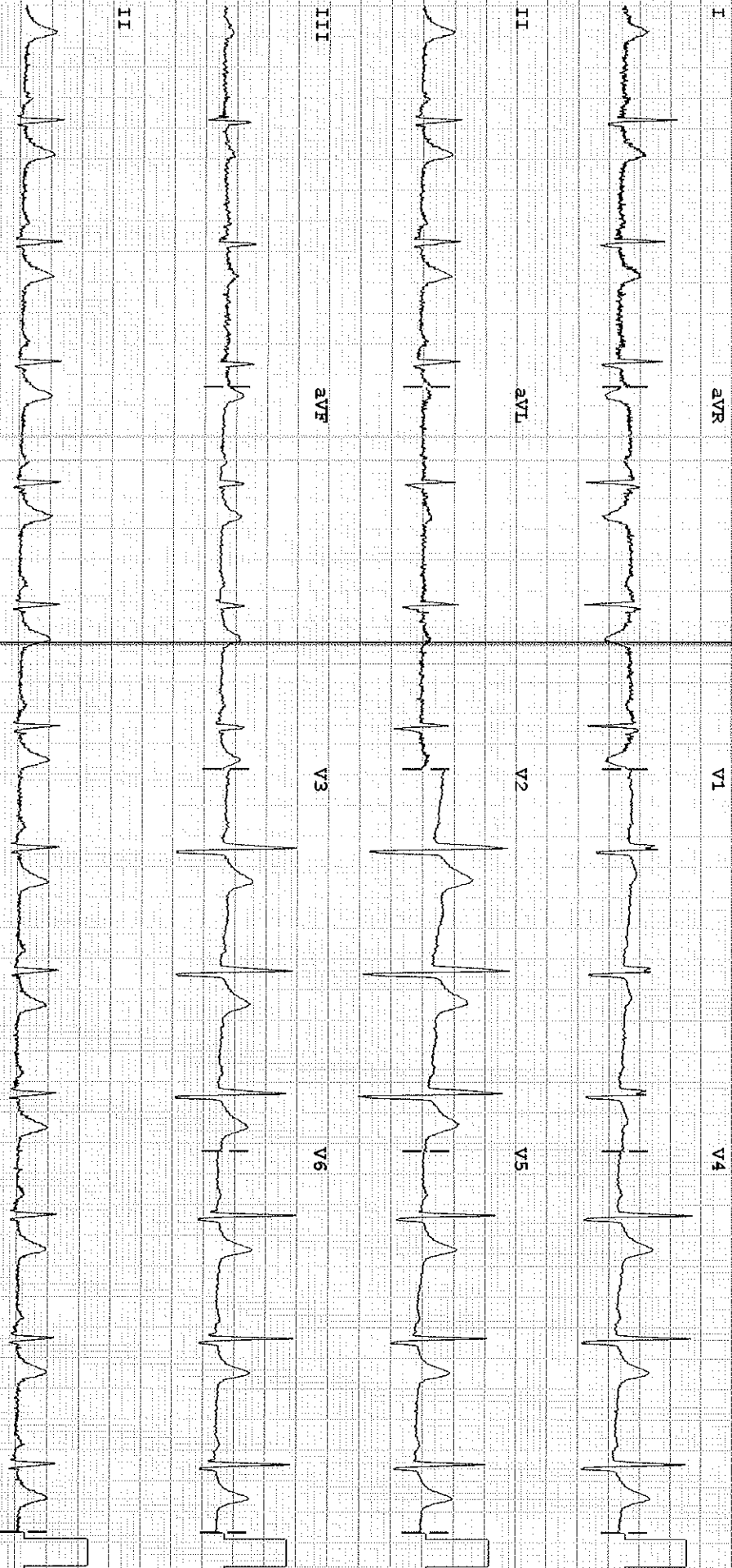
23-Apr-22

9:08:20 AM
Male
AAKASH PANDYA

Rate 75
PR 184
QRSD 90
QT 360
QTc 402

--AXIS--
P 50
QRS 63
T 47

Doctor
MANISH MITTAL



Dev: Speed: 25 mm/sec Limb: 1 mm/mV Chest: 10 mm/mV 50~0.15-150 Hz PH08 P2

Dental assessment form

23/04/2022

Name: Aakash Pandya
Age/ Sex: 40 years/Male

Patient has come for a regular check up.

On Examination:

- Stains++ Calculus+++
- History of horizontal brushing
- Mild attrition, recession
- Initial caries with respect to 18
- Pit caries with respect to 28
- History of RCT with respect to 46

Provisional diagnosis:


- Chronic generalised gingivitis

Treatment plan:

- Scaling and polishing
- Restoration of 28
- Crown with respect to 46

Advised:


- Brush your teeth twice daily
- Salt water gargle twice daily
- Clean your tongue and floss in between everyday.
- Follow vertical brushing technique.


Dr Sonica Peshin

ITEM CODE:SMD066

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