



Bharti Hospital

An ISO 9001 : 2008 (QMS) Certified Hospital

Date :

REG...NO : 2022-1101202

DATE : 12/11/2022

NAME : MR. RAMVEER SINGH

REF...BY: BOB

AGE /SEX: 29 Y/M

2D REAL TIME GENERAL SONOLOGICAL STUDY OF WHOLE ABDOMEN

LIVER: Is normal in size & parenchymal echotexture. Margins are regular. Intra hepatic bile ducts (IHD) are not dilated. No focal mass seen. Portal Vein & C.B.D. is normal in caliber.

GALL BLADDER: No calculi/mass lesion is seen in its lumen. No pericholecystic collection is seen.

SPLEEN: is normal in size and shape. Echotexture appears normal.

PANCREAS: Shows normal size and echotexture. No focal mass / peripancreatic collection is seen.

RIGHT KIDNEY: Shows normal position, size, shape and contour. Cortical echotexture is normal. CMD is maintained. No calculus /hydronephrosis is seen.

LEFT KIDNEY: Shows normal position, size, shape and contour. Cortical echotexture is normal. CMD is maintained. No hydronephrosis, No free fluid/ retroperitoneal adenopathy is seen.

U.BLADDER: is normal in distension and in wall thickness. Lumen is clear. No calculus or mass lesion is seen.

PROSTATE: is normal in size (15.1x45.6x29.8mm), shape and echotexture. Weight 10.9 cm³.

NOTE- Excessive Gas is Present in Abdomen.

IMPRESSION: No Abnormality Detected.

SONOLOGIST

Best efforts were made during investigation, however in case of any Confusion/ Confirmation review can be done, free of cost. Not valid for medico-legal purpose.

Facilities

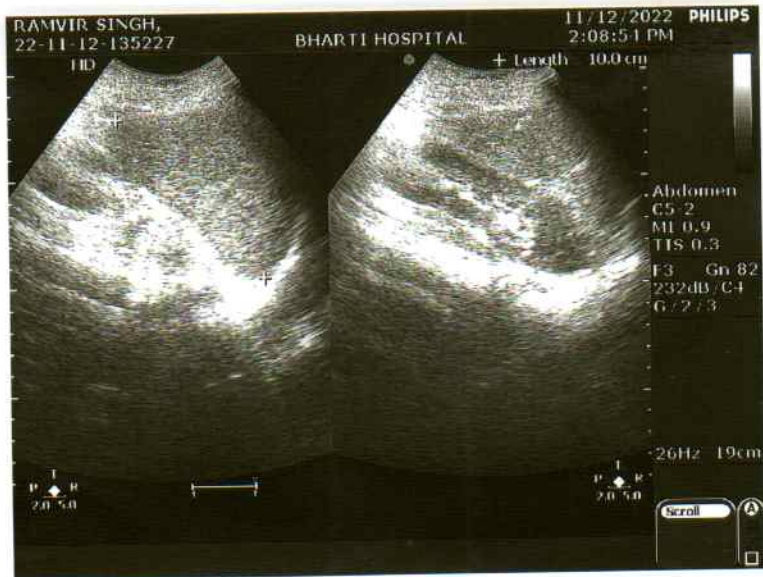
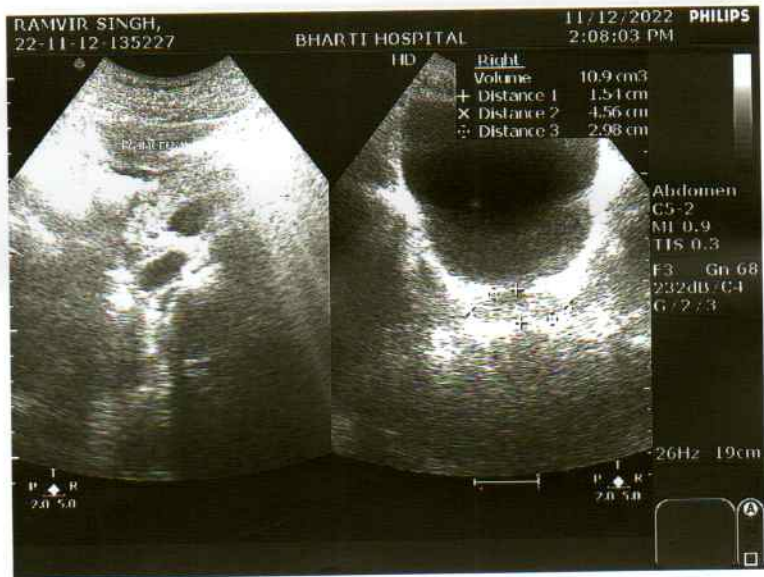
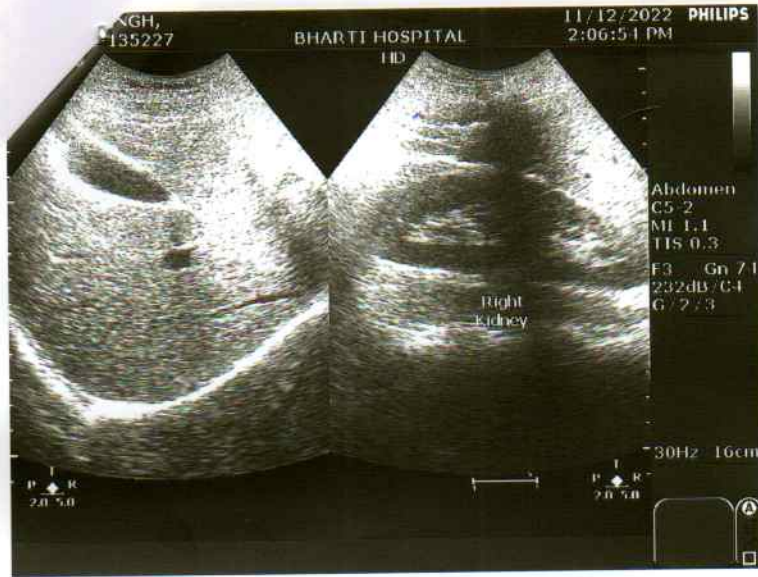
ICU, Facility for Medical & Cardiac Emergency, ECG, Nebulizer, Centralized Oxygen, Monitor BIPAP, Defibrillator, Echo Cardiography, TMT, X-ray, PFT, Computerised Pathology

यहाँ धूम-लिंग परीक्षण नहीं किया जाता है। यह एक दृष्टनीय अपराध है।

This Report is only A Professional Opinion & Should Be Clinically Co-related

NOT VALID FOR MEDICO-LEGAL PURPOSE

सभी प्रकार के हैल्थ चेकअप पैकेज उपलब्ध





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REG...NO: 2022-1101201
NAME: MR. RAMVEER SINGH
REF...BY: BOB

Date.....

DATE: 12/11/2022

AGE: 29 Y/M

ECHOCARDIOGRAPHY REPORT

Measurements

Aortic root diameter:	29 mm	(20-37mm)
Aortic valve diameter:	20 mm	(15-26mm)
LV dimension:		(19-40mm)
LVD(systolic):	46 mm	(22-40mm)
LVD(diastolic):	29 mm	(37-56mm)
RVD(diastolic):	21 mm	(7-23mm)
IVST	ES:11.5	ED: 8.5
LVPWT	ES:11.0	ED: 8.9
LA(diastolic):	23.4mm	(19-40mm)

INDICES OF LV FUNCTION:

EPSS		(< 9mm)
Fractional shortening	30%	(24-42%)
Ejection fraction	60%	(50-70%)

IMAGING:

Significant tachycardia present during examination.

M mode examination revealed normal movements of both mitral leaflets during diastole(DE-18mm,EF-130mm/sec). No mitral valve prolapse is seen.

Aortic cusps are not thickened and closure line is central, tricuspid and pulmonary valves are normal. Aortic root is normal in size.

Dimension of left atrium and left ventricle are normal.

2D imaging in PLAX, SAX and apical view revealed a normal size left ventricle.

No regional wall motion abnormality present.

Global LVEF is 60%.

Mitral valve opening is normal. No mitral valve prolapse is seen.

Aortic valve has three cusps and its opening is not restricted.

Tricuspid valve leaflets move normally. Pulmonary valve is normal.

Interatrial and interventricular septa are intact.

No intra cardiac mass or thrombus is seen. No pericardial effusion is seen.

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DOPPLER :

MV	0.55/0.39m/sec.	MR : nil
AV	0.87 m/sec.	AR : nil
TV	0.45 m/sec.	TR : nil
PV	0.71 m/sec.	PR : nil

COLOUR FLOW

Normal flow signals are seen across all cardiac valves.
No flow signals are seen across IAS and IVS.

FINAL DIAGNOSIS :

Normal cardiac chamber dimension
No regional wall motion abnormality is present.
Systolic left ventricle function is normal with EF 60%.
Diastolic left ventricle function is normal.
Colour flow through all the valves is normal with no structural abnormality.
No intracardiac thrombus or mass is seen.
No pericardial effusion is present.

DR. BHARTI GUPTA (M.D)

All congenital heart defect can not be detected by transthoracic echocardiography.
In case of disparity test should be repeated at higher cardiac centre. Not valid for medico-legal purpose.

Facilities

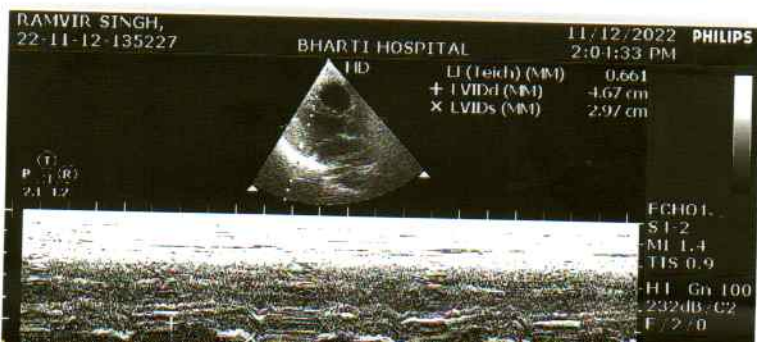
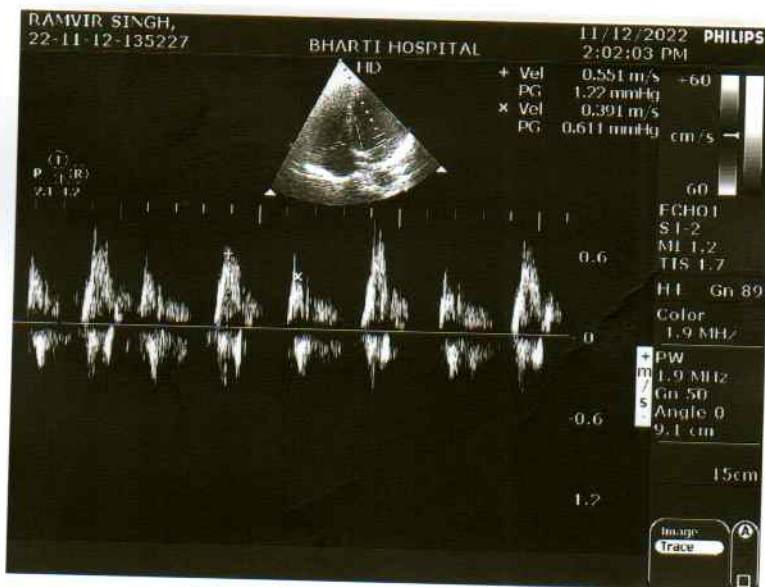
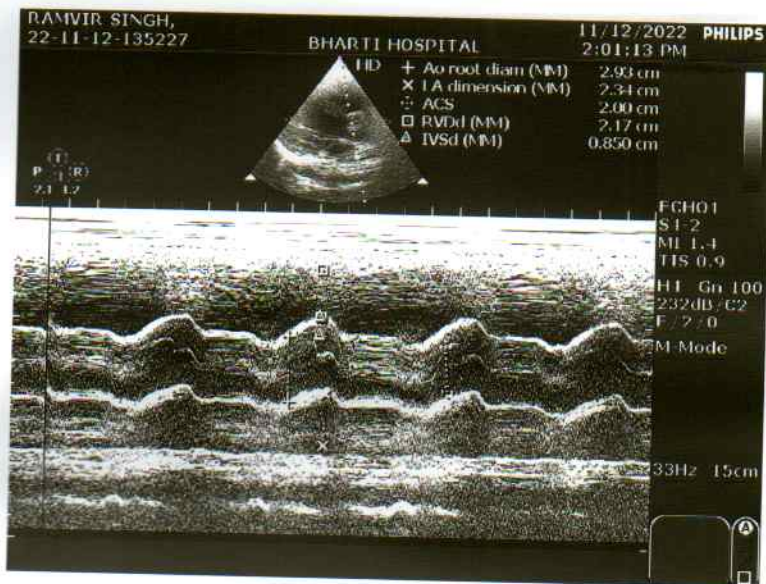
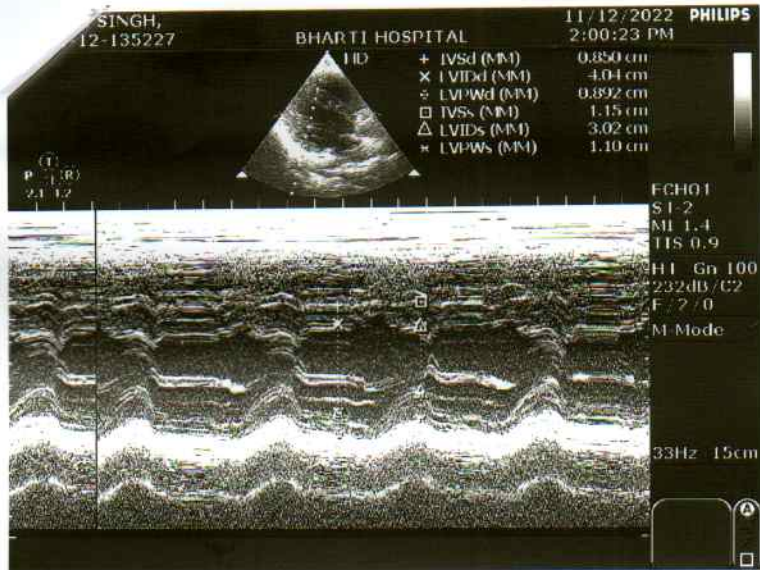
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R



RAMVEER SINGH 29Y Female

12/11/2022

Chest PA

BHARTI HOSPITAL SONKH ROAD, KRISHNA NAGAR , MATHURA



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NAME: RAMVEER

DATE/12/11/2022

AGE/SEX: 29Y/M

REF...BY: DR. BHARTI GARG (M.D)

CHEST X-RAY (PA. VIEW)

Bronchovascular markings are prominent.

Both Lungs field are clear.

Both hilar regions are normal.

Cardiac shadow is normal in size.

Both Domes of diaphragm are normal in position.

Cardiophrenic & costophrenic angles are clear.


Radiologist

This is the professional opinion and not the diagnosis, based on imaging. It should be co-related clinically to arrive at conclusion. Not valid for medico-legal purpose.

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Bal. 3180

S.V. SCIENTIFIC PATHOLOGY

Bharti Hospital

DR. SHIKHA VYAS

D.C.P. (PATH.)

R.NO. 52957/ 17.08.2006

SONKH ROAD, KRISHNA NAGAR, MATHURA

Date	12/11/2022	Srl No.	128	Sex	M
Name	MR. RAMVEER SINGH	Age	29 Yrs.	OUT SIDE SAMPLE	
Ref. By	BOB				

Investigation Name	Result Value	Unit	Biomedical Ref Range
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HAEMATOLOGY - TEST REPORT**C . B . C**

HAEMOGLOBIN (HB)	15.3	gm/dl	13.5 - 18.0
TOTAL LEUCOCYTIC COUNT (TLC)	3,900	/cumm	4000 - 11000
DIFFERENTIAL LEUCOCYTE COUNT (DLC)			
NEUTROPHIL	54	%	40 - 80
LYMPHOCYTE	37	%	20 - 40
EOSINOPHIL	05	%	1 - 6
MONOCYTE	04	%	2 - 10
R B C	5.45	millions/cmm	4.5 - 5.5
P.C.V / HAEMATOCRIT	46.3	%	40.0 - 50.0
M C V	85.0	fl.	82.0 - 101.0
M C H	28.1	picogram	27.0 - 32.0
M C H C	33.0	gm/dl	31.5 - 34.5
PLATELET COUNT	145	$\times 10^3/\mu\text{L}$	150 - 450
MEAN PLATELET VOLUME	11.2	fl	7.5 - 11.5
RDW-CV	13.6	%	11.5 - 14.5
ERYTHROCYTE SED.RATE(WGN)	10	mm/1st hr.	0.00 - 15.0
Automated Mini ESR			
HbA1C (GLYCOSYLATED Hb)	5.12	%	

METHOD : HIGH PERFORMANCE LIQUID CHROMATOGRAPHY. (HPLC)
(BIO-RAD DIASTAT)

EXPECTED VALUES :-

Metabolically healthy patients =	4.8 - 6.0 % HbA1C
Good Control	= 5.5 - 6.8 % HbA1C
Fair Control	= 6.8-8.2 % HbA1C

Contd...2



All Tests have Technical Limitations. Collaborative clinicopathological interpretation is mandatory. In Case of disparity Test may be repeated immediately. Test marked with an (*) are not accredited by NABL.

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Website : www.svscientificpathology.com

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Name	MR. RAMVEER SINGH	Age	29 Yrs.	OUT SIDE SAMPLE	
Ref. By	BOB				

Investigation Name	Result Value	Unit	Biomedical Ref Range
Poor Control	=	>8.2 % HbA1C	
HBA1C ESTIMATED AVERAGE GLUCOSE (eAG)	99.7		65.00 - 135.00

REMARKS:-

In vitro quantitative determination of HbA1C in whole blood is utilized in long term monitoring of glycemia. The HbA1C level correlates with the mean glucose concentration prevailing in the course of the patient's recent history (approx - 6-8 weeks) and therefore provides much more reliable information for glycemia monitoring than do determinations of blood glucose or urinary glucose.

It is recommended that the determination of HbA1C be performed at intervals of 4-6 weeks during diabetes mellitus therapy.

Results of HbA1C should be assessed in conjunction with the patient's medical history, clinical examinations and other findings.

Estimated average glucose (eAG) - There is a predictable relationship between HbA1c and eAG. It helps people with diabetes to correlate their A1c to daily glucose monitoring levels. It reflects the average glucose levels in the past 2 -3 months. The eAG calculation converts the A1c percentage to the same units used by glucometers-mg/dl. The following table shows the relationship of eAG and A1c.

HbA1c (%)	eAG (mg/dL)
5	97
6	126
7	154
8	183
9	212
10	240
11	269
12	298

BLOOD GROUP ABO

" B "

RH TYPING

NEGATIVE

The upper agglutination test for grouping has some limitations.
For further confirmation Reverse typing card (Dia clon ABO / D) Method is suggested.



Contd...3

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Name	MR. RAMVEER SINGH	Age	29 Yrs.	OUT SIDE SAMPLE	
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Investigation Name	Result Value	Unit	Biomedical Ref Range
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BIOCHEMISTRY - TEST REPORT

BLOOD SUGAR FASTING	85.9	mg/dl	
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REFERENCE RANGE :

Normal	:	< 110
Impaired Glucose Tolerance	:	110 - 125
Diabetes Mellitus	:	≥126

CREATININE	0.73	mg/dl	0.70 - 1.30
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Neonates (premature): 0.29 - 1.04
 Neonates (Full term): 0.24 - 0.85
 2 - 12 Months : 0.17 - 0.42
 1 - <3 Yrs : 0.24 - 0.41
 3 - <5 Yrs : 0.31 - 0.47
 5 - <7 Yrs : 0.32 - 0.59
 7 - <9 Yrs : 0.40 - 0.60
 9 - <11 Yrs : 0.39 - 0.73
 11 - <13 Yrs : 0.53 - 0.79
 13 - <15 Yrs : 0.57 - 0.87

URIC ACID	5.82	mg/dl	3.4 - 7.20
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BLOOD UREA NITROGEN (BUN)	9.64	mg/dl	5.0 - 21.0
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LIPID PROFILE

SERUM CHOLESTEROL	192.4	mg/dl	
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Optimal	< 200	mg/dl
Border Line High Risk	200 - 239	mg/dl
High Risk	> 240	mg/dl

Contd...4



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SONKH ROAD, KRISHNA NAGAR, MATHURA

Date	12/11/2022	Srl No.	128	Sex	M
Name	MR. RAMVEER SINGH	Age	29 Yrs.	OUT SIDE SAMPLE	
Ref. By	BOB				

Investigation Name	Result Value	Unit	Biomedical Ref Range
TRIGLYCERIDES	105.7	mg/dL	
Optimal	< 150	mg/dl	
Border Line High Risk	150 - 199	mg/dl	
High Risk	200 - 499	mg/dl	
Very High Risk	> 500	mg/dl	
H D L CHOLESTEROL(direct)	57.8		
	Male		Female
Optimal>	55 mg/dl		> 65 mg/dl
Border Line High Risk	35 - 55 mg/dl		45 - 65 mg/dl
High Risk	< 35 mg/dl		< 45 mg/dl
L D L CHOLESTEROL (DIRECT)	113.46	mg/dl	
Optimal	<100	mg/dl	
Near or Above Optimal	100 - 129	mg/dl	
Border Line High Risk	130 - 159	mg/dl	
High Risk	160 - 189	mg/dl	
Very High Risk	> 190	mg/dl	
V L D L	21.14	mg/dl	25.0 - 40.0
SERUM CHOLESTEROL/HDL RATIO	3.329		
LDL / HDL CHOLESTEROL RATIO	1.963		0.00 - 3.55

R.O. risk factor

Risk Factor of Coronary Heart Disease.

Positive Risk Factors

1. Age - Males >45 Yrs.

Females >55 Yrs. or premature menopause without estrogen replacement therapy.

2. Family history of premature coronary heart disease.

3. Cigarette smoking.

4. Hypertension (>140/90 mm Hg or on antihypertensive medication)

5. Low HDL Cholesterol <30 mg/dl

6. Diabetes mellitus

Negative Risk Factor

Contd...5



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Name	MR. RAMVEER SINGH	Age	29 Yrs.	OUT SIDE SAMPLE	
Ref. By	BOB				

Investigation Name	Result Value	Unit	Biomedical Ref Range
--------------------	--------------	------	----------------------

1. High HDL Cholesterol >60 mg/dl

BIOCHEMISTRY - TEST REPORT

L.F.T / LIVER FUNCTION TEST

TOTAL BILIRUBIN	0.62	mg/dl	0.20 - 1.00
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Reference range

Reference range according to Thomas

Total bilirubin : up to 1.1 mg/dl

Reference range according to Sherlock and Meites

Adults and children : up to 1.0 mg/dl

New born

Age of new born

24 hours

48 hours

3 - 5 days

Age of new born

24 hours

48 hours

3-5 days

Premature

1.0 - 6.0 mg/dl

6.0 - 8.0 mg/dl

10.0 - 15.0 mg/dl

Full term

2.0 - 6.0 mg/dl

6.0 - 7.0 mg/dl

4.0 - 12.0 mg/dl

CONJUGATED (D. Bilirubin)	0.38	mg/dl	0.1 - 0.4
UNCONJUGATED (I.D. Bilirubin)	0.24	mg/dl	0.2 - 0.7
TOTAL PROTEINS	7.25	gm/dl	6.0 - 8.2
ALBUMIN	4.69	gm/dl	3.5 - 5.2
GLOBULIN	2.56	gm/dl	2.3 - 3.5
A/G RATIO	1.832	gm/dl	0.8 - 2.0
S.G.O.T (AST)	37.6	U/L	0.0 - 35.0
S G.P.T (ALT)	43.8	U/L	0.0 - 45.0
ALKALINE PHOSPHATASE OPTIMIZED	105.4	U/L	0 - 0

Contd...6



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Investigation Name	Result Value	Unit	Biomedical Ref Range
TSH	7.04	μIU/ml	0.25 - 5.50

Test	Reference Group	Age	Reference Range	Unit
TSH		Cord Blood	1.00 - 39.0	μIU/ml
		1-4 Week	1.70 - 9.10	μIU/ml
		1-12 Months	0.80 - 8.20	μIU/ml
		1-5 Years	0.70 - 5.70	μIU/ml
		6-10 Years	0.70 - 5.70	μIU/ml
		11-15 Years	0.70 - 5.70	μIU/ml
		16-20 Years	0.70 - 5.70	μIU/ml

The test has been carried out in Fully Automated Immunoassay System VIDAS using ELFA (Enzyme Linked Fluorescence Assay) technology.

URINE EXAMINATION -TEST REPORT

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW
TRANSPARENCY	TURBID
SPECIFIC GRAVITY	1.020
pH	6.5

CHEMICAL EXAMINATION

ALBUMIN	FINE TRACE
REDUCING SUGAR	NIL
BILE SALTS	NEGATIVE
BILE PIGMENT	NEGATIVE
KETONE BODIES /ACETONE	NEGATIVE

Contd...8



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MICROSCOPIC EXAMINATION

PUS CELLS	4-5	/HPF
EPITHELIAL CELLS	5-6	/HPF
RBC's	0-1	/HPF
CRYSTALS	NIL	
CASTS	NIL	
BACTERIA	PRESENT	
OTHERS	NIL	

**** Report Completed****



DR. SHIKHA VYAS
D.C.P (Path.)
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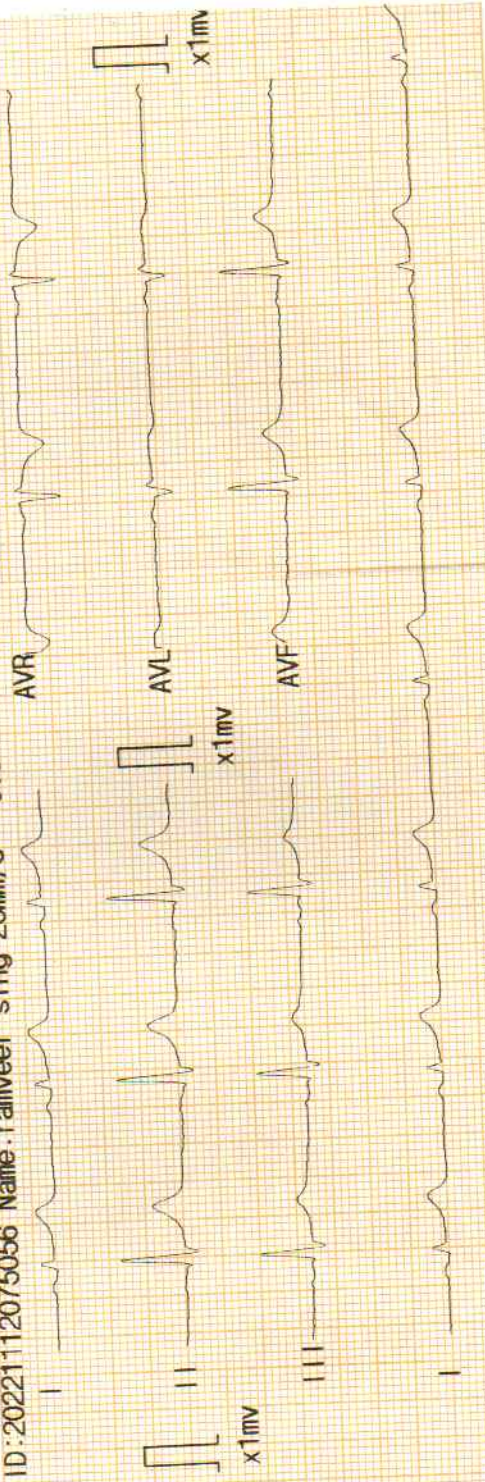
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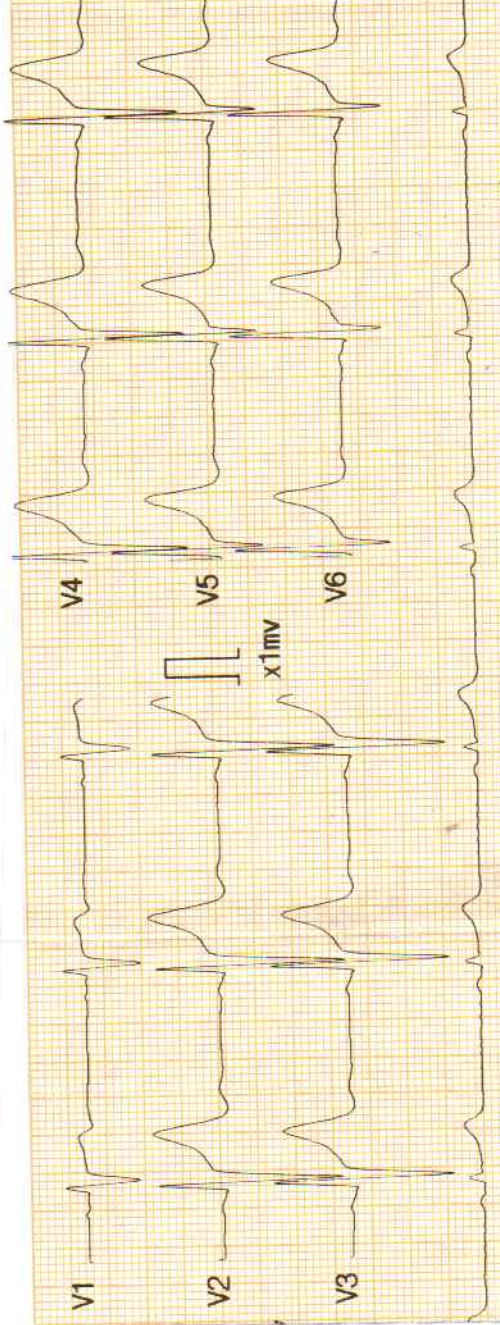
ID: 2022112075056 Name: ramveer sing 25mm/s 0.5-25Hz AC: 50Hz 10mm/mv



Organization: ----- Doctor: -----

BPL

ID : 2022112075056
Name : ramveer sing
Sex : Male
Age : 29
HR : 53 bpm
R-R : 1147 ms
P-R : 145 ms
QRS : 111 ms
QT/QTc : 413/390 ms
P/QRS/T : 35/ 73/ 48
RV5/SV1 : 1.306/-0.610 mV
RV5+SV1 : 0.696 mV
QTcf : 0.360



CARDIART