

Consultation with Physician _____

Consult. PHYSIO/DIET/DENTAL

2:15

✓ 2:20 PM

Blood Pressure : 120/80 mm of Hg

Height : 183 cm

Weight : 94 Kg

Body Mass Index : 28.1



Medicine Delivery at Your Doorstep Call.:

07720965555

Home Sample Collection No.:

Home Physiotherapy No.:

Dr Sheela S. Mundhada

MD, MBBS, MHA&M

Consultant Transfusion Medicine

Fellow UICC trained at MD Anderson Cancer Centre, USA

Medical Director

Mobile: 9422113811

E-mail: jbb21@hotmail.com

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JEEVAN JYOTI

BLOOD CENTRE & COMPONENTS

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**Dr. Ravi Wankhede**

Ex Sqn Ldr (IAF), MBBS, DCP

Consultant Transfusion Medicine

Medical Director

Mobile: 9423683350

Email: raviwankhede@gmail.com

Blood Group Report**Name of the Patient :** SHAILENDRA . RAI**Age :** 38 Year **Gender :** Male**Patient Sample ID :** JJ22-R13728**Hospital IP NO:** 330803**Referred By Hospital :** Wockhardt Super Speciality Hosp**Sample Received :** EDTA / PLAIN**Date & Time of Sample Receiving :** 25/Nov/2022 11:45 AM**Adequacy of Sample :** Adequacy**Investigation Required :** Blood Group**Date of Release of Report :** 25/Nov/2022 12:42 PM**Report****Forward Red Cell Blood Group :** O**Reverse Serum Blood Group :** O**Rh Typing :** Rh Positive**Final Blood Group:** O Rh Positive**Opinion :** If there is any Blood group discrepancy, it may be because of the irregular antibody present in the blood. This requires proper evaluation of Antibody Identification and Rh Phenotyping.**Remark :****Principle of the Test :**

As the Matrix gel card containing red blood cells is centrifuged under specific conditions, the red blood cells sensitized with antibody will agglutinate in the presence of the Anti- Human Globulin reagent in the gel matrix and will be trapped in the gel column. The red blood cells, which do not react are not trapped in the gel matrix and are pelleted at the bottom of the column.

The reactions are then read and graded according to their reactivity pattern.

End of Report**Tested By :** Sanjay**Verified By :** Dr. Deepika Jain

FDA LIC No. ND/BB/11

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www.facebook.com/laxminagarnagpurwww.dhruvlabs.com**Sign Of M.O. :**

Dr. Swarup Verma

Consultant - Internal Medicine

MBBS, DNB (Medicine)

swarup.verma@wockhardthospitals.com

Registration No. - 2007062473

WOCKHARDT
HOSPITALS

LIFE
WINS

9552509933 Health check up

Date: 25/11/22

Name: Mr. Phailendra Rai

UHID: _____

Primary Diagnosis: DM II on th

Chief Complaints: _____

T-Afebril / Febrile	___ OF
P-	___ / min
R-	___ / min
B.P.	120 / 80 mmHg
Pain - Yes / No	_____
Fall Risk : Yes / No	_____

Rx

Bb
Pz

Dicitam

1) P. Aspirin 5mg
 2) P. Bempifloxy 180mg
 3) P. UDAPA 5mg
 After Breakfast
 3) Calorie 60k cal a week.
 X 6 weeks
 then as a meal

X
2 months

FOLLOW-UP AFTER
_____ DAYS



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CIN: U85100MH1991PLC063096

Dr. Siddhartha Saoji

M.S. (ENT), Fellowship in Functional
Endoscopic Sinus Surgery (FESS)
Consultant- ENT
Regd No.- 2017/10/4854



Date : 25/11/22

Name : Mr. Shaitendra Rai

UHID :

Primary Diagnosis :

Ear chudrup

Chief Complaints :

T-Afebril / Febrile	___ OF
P-	___ / min
R-	___ / min
B.P.-	___ / ___ mmHg
Pain -	Yes / No
Fall Risk :	Yes / No

Rx Ear: B/L m intact

None air flow adequate B/L

Throat - no congestion Pw
no PND

FOLLOW-UP AFTER
___ DAYS



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CIN: U85100MH1991PLC063096

DEPARTMENT OF PATHOLOGY TEST REPORT

UHID : WHN2.0000330803	Age/Sex: 38(Y)05(M)02(D)/M	Order Date : 25-Nov-2022
Name : Mr SHAILENDRA RAI		Order No. : OPD472025
Con.Doctor : WOCKHARDT		Report Date : 25-Nov-2022

BANK OF BARODA HCU PKG 2022 (MALE AND FEMALE)

<u>Parameter</u>	<u>Result</u>	<u>Unit</u>	<u>Reference Range</u>
<u>COMPLETE BLOOD COUNT (WITH ESR)</u>			
Haemoglobin, SLS Method	15.9	g%	14-18
Haematocrit, Cumulative Pulse Height	48.9 *✓	%	37-47
MCV, Calculated	90.6	fl	76-96
MCH, Calculated	29.4	pg	27-32
● ICHC, Calculated	32.5	%	30-35
RDW-CV, Calculated	12.8	%	12-15
RBC Count, Hydrodynamic Focusing DC	5.40 *	Million/ul	4-5
TLC Count, Fluorescence Flow Cytometry	8410	Cells/cumm	4000-11000
Neutrophil	62	%	40-70
Lymphocyte	29	%	20-40
Monocyte	08	%	2-8
Eosinophil	01 *	%	2-6
Basophil	0	%	0-2
Platelet Count, Hydrodynamic Focusing DC	313	Thou/Cumm	150-450
MPV, Calculated	9.8	fl	
Blood ESR, Westergren's Method	06	mm/hr	0-15

● CBC done on 6-part Sysmex XN-550 haematology analyzer.
● ESR done on ALIFAX Roller 20LC ESR analyzer.

* Indicates test value is outside reference range defined. All such values are rechecked.

Alka Thool

Dr. ALKA THOOL, MD-PATH
SENIOR PATHOLOGIST

13217 VAISHALI CHALSE
Performed by



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BANK OF BARODA HCU PKG 2022 (MALE AND FEMALE)

<u>Parameter</u>	<u>Result</u>	<u>Unit</u>	<u>Reference Range</u>
Glycosylated Hemoglobin HbA1C, HPLC	6.7 —	%	Action required: 7.0-8.0% Good control: 6.5-7.0% Normal control: 4.8-6.4% Poor control: >8.0%

Estimated Mean glucose 161.22 mg/dl

Aberrant glycosylated haemoglobin values may be seen in patients with haemoglobinopathies, recent blood transfusion and severe anemias. In such cases, alternative methods of determination of blood glucose is recommended.

Dr. ALKA THOOL , MD-PATH
SENIOR PATHOLOGIST

22580 JWALA GAJBHIYE
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BANK OF BARODA HCU PKG 2022 (MALE AND FEMALE)

<u>Parameter</u>	<u>Result</u>	<u>Unit</u>	<u>Reference Range</u>
Fasting Blood Sugar, Hexokinase	125 * ↑	mg/dl	70-115
Urine Sugar (fasting)	Detected(+++)		
Post Prandial Blood Sugar, Hexokinase	195 * ↑	mg/dl	100-140
Urine Sugar (post Prandial)	Detected(++++)		

LIPID PROFILE

Serum Cholesterol, CHOD-PAP	251	mg/dl	1) Desirable Cholesterol Level: <201 2) Borderline Cholesterol: 200-240 3) High Cholesterol: >240
Serum Triglycerides, GPO-PAP	155	mg/dl	70-200
Serum HDL-Cholesterol, Direct Method	42	mg/dl	35-55
Serum VLDL Cholesterol, Calculated	31.00	mg/dl	10-35
Serum LDL Cholesterol, Calculated	178.00 *	mg/dl	80-130
Serum CHOL/HDL RATIO, Calculated	5.98		1) Low Risk 3.3-4.4 2) Average Risk 4.4-7.1 3) Moderate Risk 7.1-11.0 4) High Risk >11.0

* Indicates test value is outside reference range defined. All such values are rechecked.

CP

Dr. ALKA THOOL, MD-PATH
SENIOR PATHOLOGIST

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BANK OF BARODA HCU PKG 2022 (MALE AND FEMALE)

<u>Parameter</u>	<u>Result</u>	<u>Unit</u>	<u>Reference Range</u>
<u>KIDNEY FUNCTION TEST (K.F.T.)</u>			
Serum Sodium, ISE	143	mmol/l	135-145
Serum Potassium, ISE	4.2	mmol/l	3.6-5
Serum Creatinine, Jaffe's Kinetic	0.86	mg/dl	0.7-1.2
Serum Urea, Urease-GLDH	12	mg/dl	1-50
<u>LIVER PROFILE</u>			
Serum Alkaline Phosphatase, PNP AMP Kinetic	93	U/L	40-129
Serum SGOT, UV Kinetic (AST)	34	U/L	1-40
Serum SGPT, UV Kinetic (ALT)	61 *	U/L	1-41
Serum Total Protein, Biuret	6.67	g/dl	6.6-8.7
Serum Albumin, BCG	5.12 *	g/dl	3.4-4.8
Serum Globulin, Calculated	1.55 *	g/dl	2-4
Serum Albumin:Globulin Ratio, Calculated	3.30 *		1-2
Serum Total Bilirubin, Diazo	1.04	mg/dl	0-1.2
Serum Direct Bilirubin, Diazo	0.33 *	mg/dl	0-0.3
Serum Indirect Bilirubin, Calculated	0.71	mg/dl	0-0.8

* Indicates test value is outside reference range defined. All such values are rechecked.

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BANK OF BARODA HCU PKG 2022 (MALE AND FEMALE)

<u>Parameter</u>	<u>Result</u>	<u>Unit</u>	<u>Reference Range</u>
<u>SERUM VITAMIN D (25-OH)</u>			
25 Hydroxy Cholecalciferol (VITAMIN D), ECLIA	13.80 ↓	ng/mL	Insufficiency 10-30 Severe deficiency <10 Sufficiency >30 Toxicity >100
Serum Total T3, ECLIA	120.1	ng/dL	84.6-201.8
Serum Total T4, ECLIA	9.42	µg/dl	5.13-14.06
Serum TSH, ECLIA	2.12	µIU/mL	0.2-4.2

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BANK OF BARODA HCU PKG 2022 (MALE AND FEMALE)

<u>Parameter</u>	<u>Result</u>	<u>Unit</u>	<u>Reference Range</u>
<u>PSA TOTAL</u>			
Serum PSA total, ECLIA	1.31	ng/mL	0-4

Test results cannot be interpreted as absolute evidence for the presence or absence of malignant disease.

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SENIOR PATHOLOGIST

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BANK OF BARODA HCU PKG 2022 (MALE AND FEMALE)

<u>Parameter</u>	<u>Result</u>	<u>Unit</u>
<u>URINE ROUTINE & MICROSCOPY</u>		
<u>Physical Examination</u>		
Colour	Yellow	
Appearance	Clear	
<u>Urinalysis(Roche UriSys1100)</u>		
Specific Gravity	1.025	
PH	5	
Leukocytes, microscopy	00	/hpf
Erythrocytes, microscopy	00	/hpf
Nitrite, urinalyser	Negative	
Protein, urinalyser	Negative	
Glucose, urinalyser	Present(+++)	
Ketone, urinalyser	Present(trace)	
Urobilinogen, urinalyser	Normal	
Bilirubin, urinalyser	Negative	

Dr. ALKA THOOL , MD-PATH
SENIOR PATHOLOGIST

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CIN: U85100MH1991PLC063096

DEPARTMENT OF RADIOLOGY

UHID	: WHN2.0000330803	Age/Sex : 38 Year(s)/M	Order Date	: 25-Nov-2022
Name	: Mr SHAILENDRA RAI		Order No.	: OPD472025
Con.Doctor	: WOCKHARDT		Report Date	: 25-Nov-2022

BANK OF BARODA HCU PKG 2022 (MALE AND FEMALE)**XR CHEST PA**

Expiratory film.

Both lung fields are clear.

The costophrenic angles and domes of diaphragm appear normal.

No hilar or mediastinal lesion seen.

Cardiac silhouette is within normal limits.

Visualised bony thorax and soft tissues appear normal.

Impression:

Normal Chest X-Ray.



Dr. NITIN DEVKATE

M.D.
RADIOLOGIST



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Con.Doctor	: WOCKHARDT		Report Date	: 25-Nov-2022

BANK OF BARODA HCU PKG 2022 (MALE AND FEMALE)**USG ABDOMEN WITH PELVIS**

Real time sonography of the abdomen and pelvis was performed using the 3.5 MHz transducer.

The liver is mildly enlarged in size (16.1 cm) and shows bright echotexture suggesting fatty infiltration. No focal parenchymal lesion noted.

Intrahepatic biliary tree and venous radicles are normal.

The portal vein and CBD appear normal in course and calibre.

The gall bladder is normal in size with a normal wall thickness and there are no calculi noted within.

The pancreas is normal in size and echotexture. No evidence of focal lesion or calcification or duct dilatation seen.

The spleen is normal in size and echotexture.

Both kidneys are normal in size, position and echogenecity.

Cortical thickness and corticomedullary differentiation are normal.

No hydronephrosis or calculi noted.

The bladder is partially distended.

The prostate is normal in size and homogenous in echotexture.

There is no evidence of ascites.

Impression:-

Mild hepatomegaly with grade I fatty infiltration of liver.



Dr. NITIN DEVKATE

M.D.
RADIOLOGIST

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CIN: U85100MH1991PLC063096

Name : *Shablenha Raj*

Age/ Sex : yrs /

Date: *23/11/22*

Fundus Examination
(Direct Ophthalmoscopy)

	Right	Left
Media	<i>Ca</i>	<i>Ca</i>
<u>Optic Disc</u>		
Colour		
Size		
Shape		
Margin		
NRR		
C:D	<i>0.3:1</i>	<i>0.3:1</i>
<u>Blood Vessels</u>		
A:V ratio		
Abnormalities		
<u>Macula</u>		
FR	<i>+</i>	<i>+</i>
Abnormalities		
<u>Periphery</u>	<i>Con field with</i>	
<u>Impression</u>	<i>Ca</i>	

Dr. NITIN DHOK
9096377550
Consultant Ophthalmology



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CIN: U85100MH1991PLC063096

Rate 75 . Age not entered, assumed to be 50 years old for purpose of ECG interpretation
 PR 139 . Sinus rhythm.....normal P axis, V-rate 50-99
 QRS 85 . Low voltage, precordial leads.....precordial leads <1.0mV
 QT 348 . Abnormal R-wave progression, early transition.....QRS area>0 in V2
 QTc 389 . Baseline wander in lead(s) II, III, aVR, aVL, aVF, V1, V5, V6

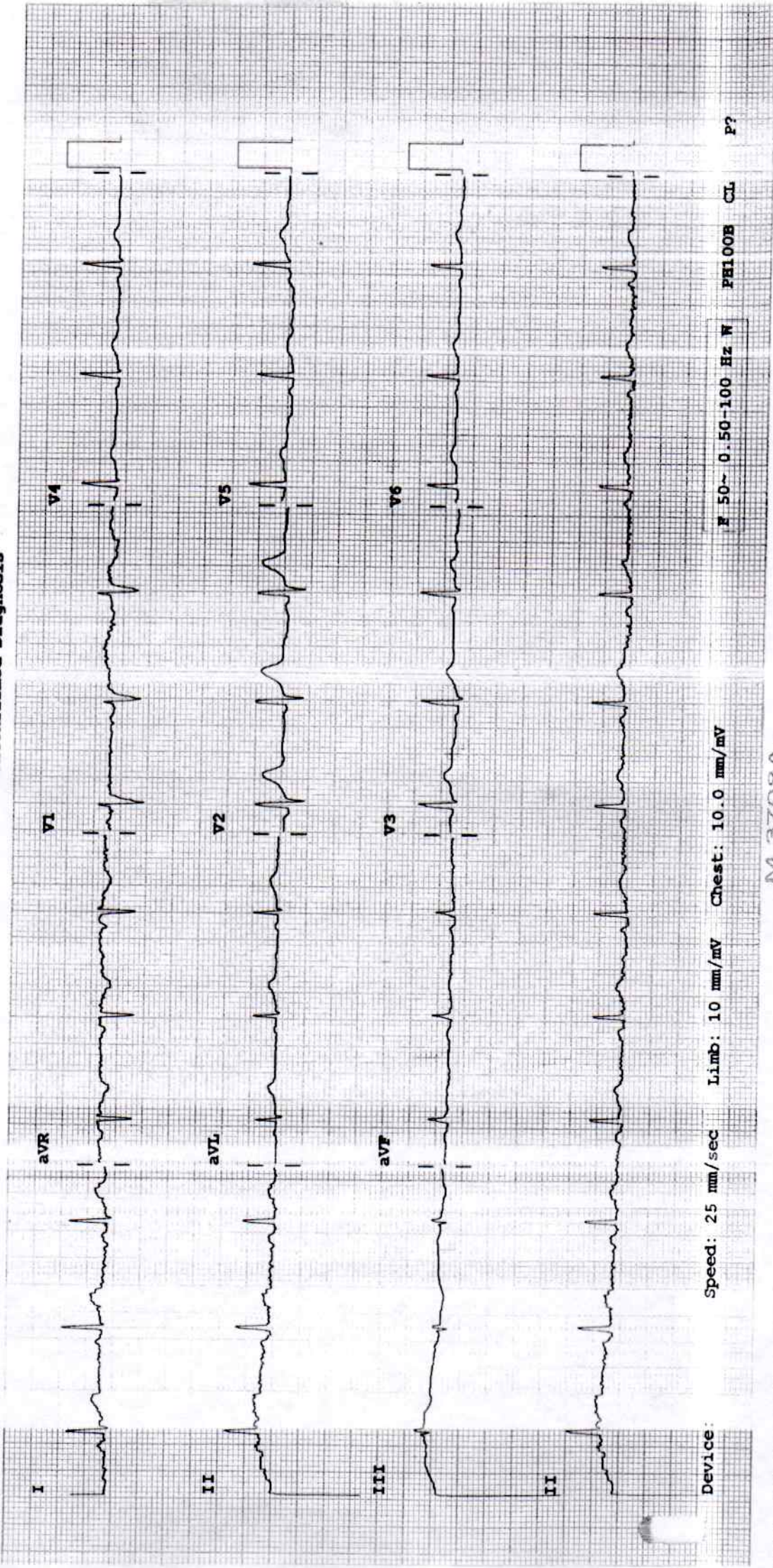
--AXIS--

P 45
 QRS 34
 T -1

12 Lead; Standard Placement

- OTHERWISE NORMAL ECG -

Unconfirmed Diagnosis



Device:

Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV

F 50- 0.50-100 Hz W

PH100B CL

P?

D: 000:30803
 25-Nov-2022
 13:29:14

36 years

Referred by:
 Test Ind:

10.0 mm/mV
 100hz

Max HR 147bpm 80% of max predicted 132bpm
 Max BP 140/80 Maximum workload 8.5METTS
 Reason for termination: Dyspnoea
 Comments: BASELINE ECG WITHIN NORMAL LIMITS
 PEAK EXERCISE PATIENT HAD FATIGUE & DYSPNOEA HENCE TEST WAS
 STOPPED. NO SIGNIFICANT ST CHANGES. NO ANGINA
 RECOVERY UNVENTRUL
 TEST IS NEGATIVE FOR INDUCIBLE ISCHEMIA AT ACHIEVED WORKLOAD
 DR NITIN TIWARI DM, DNB

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	Workload (METs)	HR (bpm)	BP (mmHg)	RPP (x100)
PRETEST	SUPINE	0:59	***	***	1.0	76	120/80	91
	STANDING	0:01	***	***	1.0	78	120/80	91
	HYPERVERENT	0:01	***	***	1.0	77	120/80	92
EXERCISE	Warm Up	0:08	0.5	0.0	1.0	84	120/80	97
	STAGE 1	3:00	1.7	0.0	1.0	119	130/80	143
	STAGE 2	3:00	2.5	2.0	1.0	130	140/80	182
	STAGE 3	1:01	3.4	4.0	8.5	147	140/80	206
RECOVERY		3:19	***	***	1.0	98	120/80	118

Technician:

WOCKHARDT HOSPITALS NAGPUR

Unconfirmed

MAC55-009D

2022
29:14

35 years

Male

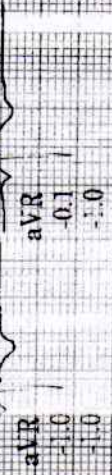
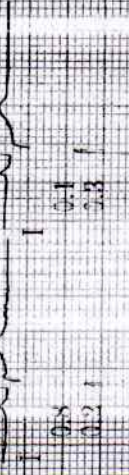
Max HR 147bpm 80% of max. predicted 132bpm
Max BP 140/80
Maximum workload 6.5 METS

25.0 mm/s
10.0 mm/mV
100hz

Referred by:
Test end:

BASELINE EXERCISE
0:00 81bpm
BP: 120/80

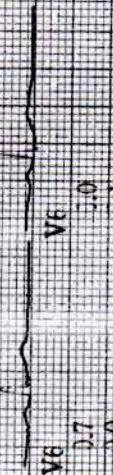
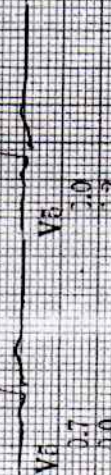
TEST END RECOVERY
3:19 98bpm
BP: 120/80



Technician:

BASELINE EXERCISE
0:00 81bpm
BP: 120/80

TEST END RECOVERY
3:19 98bpm
BP: 120/80



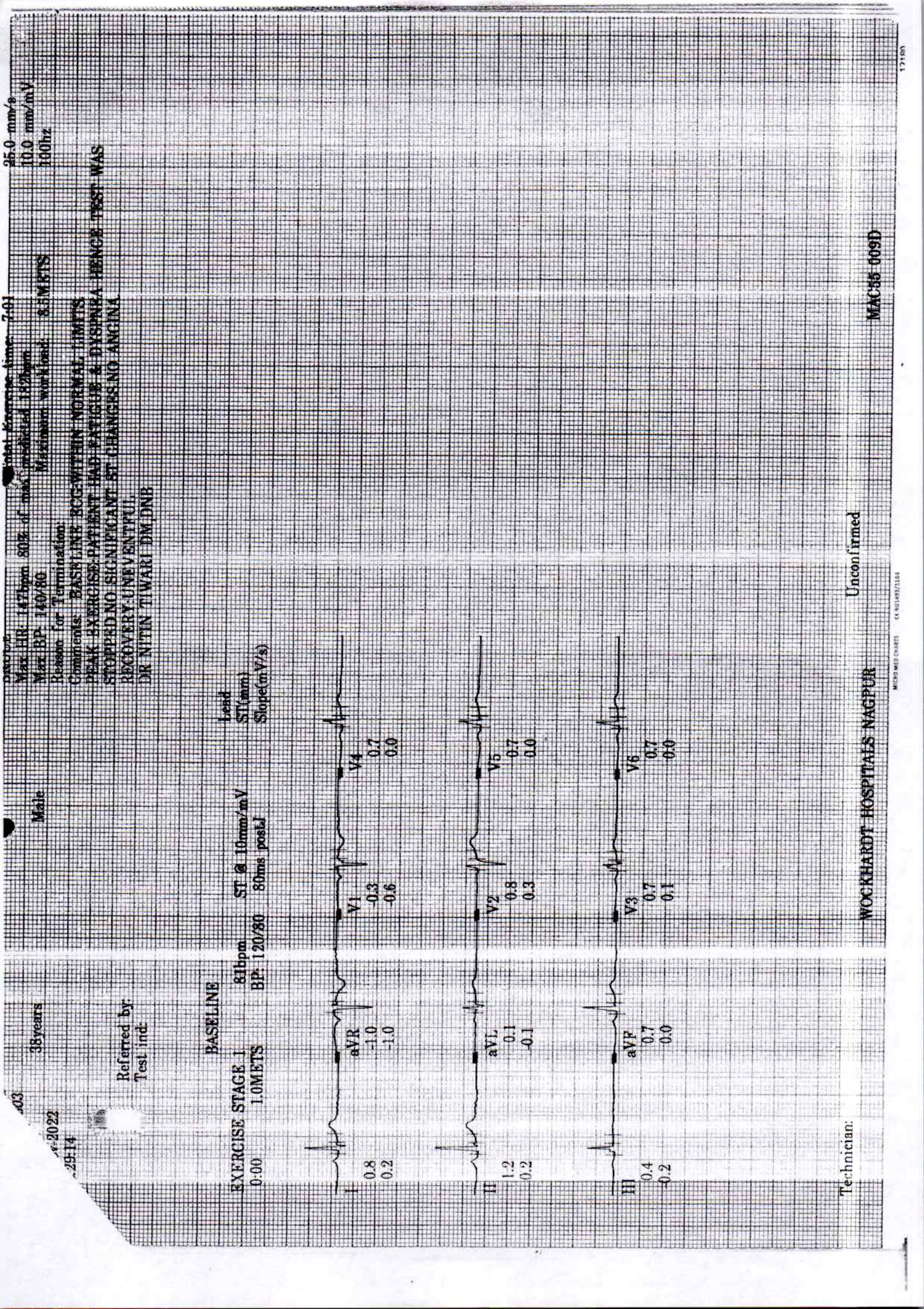
Unconfirmed

WOCKHARDT HOSPITALS NAGPUR

MAC55 009D

Lead
ST(mm)
Slope(mV/s)

Reason for Termination: Dyspnea
Comments: BASELINE ECG WITHIN NORMAL LIMITS
PEAK EXERCISE PATIENT HAD FATIGUE & DYSPNOEA. HENCE TEST WAS STOPPED. NO SIGNIFICANT ST CHANGES. NO ANGINA. RECOVERY UNEVENTFUL.
TMT IS NEGATIVE FOR INDUCIBLE ISCHEMIA AT ACHIEVED WORKLOAD.
DR. NITIN TIWARI DM, DNB



25.0 mm/s
 10.0 mm/mV
 100hz

Date: 03
 Total Exercise time: 7:01
 Max HR: 147bpm 80% of max predicted 182bpm
 Max BP: 140/80
 Maximum workload: 8.8 METS

Reason for Termination:
 Comments: BASELINE RCG WITHIN NORMAL LIMITS.
 PEAK EXERCISE PATIENT HAD FATIGUE & DYSPNOEA. HENCE TEST WAS STOPPED. NO SIGNIFICANT ST CHANGES. NO ANGINA RECOVERY. UNEVENTFUL.
 DR NITIN TIWARI DM, DNB

38 years
 Male

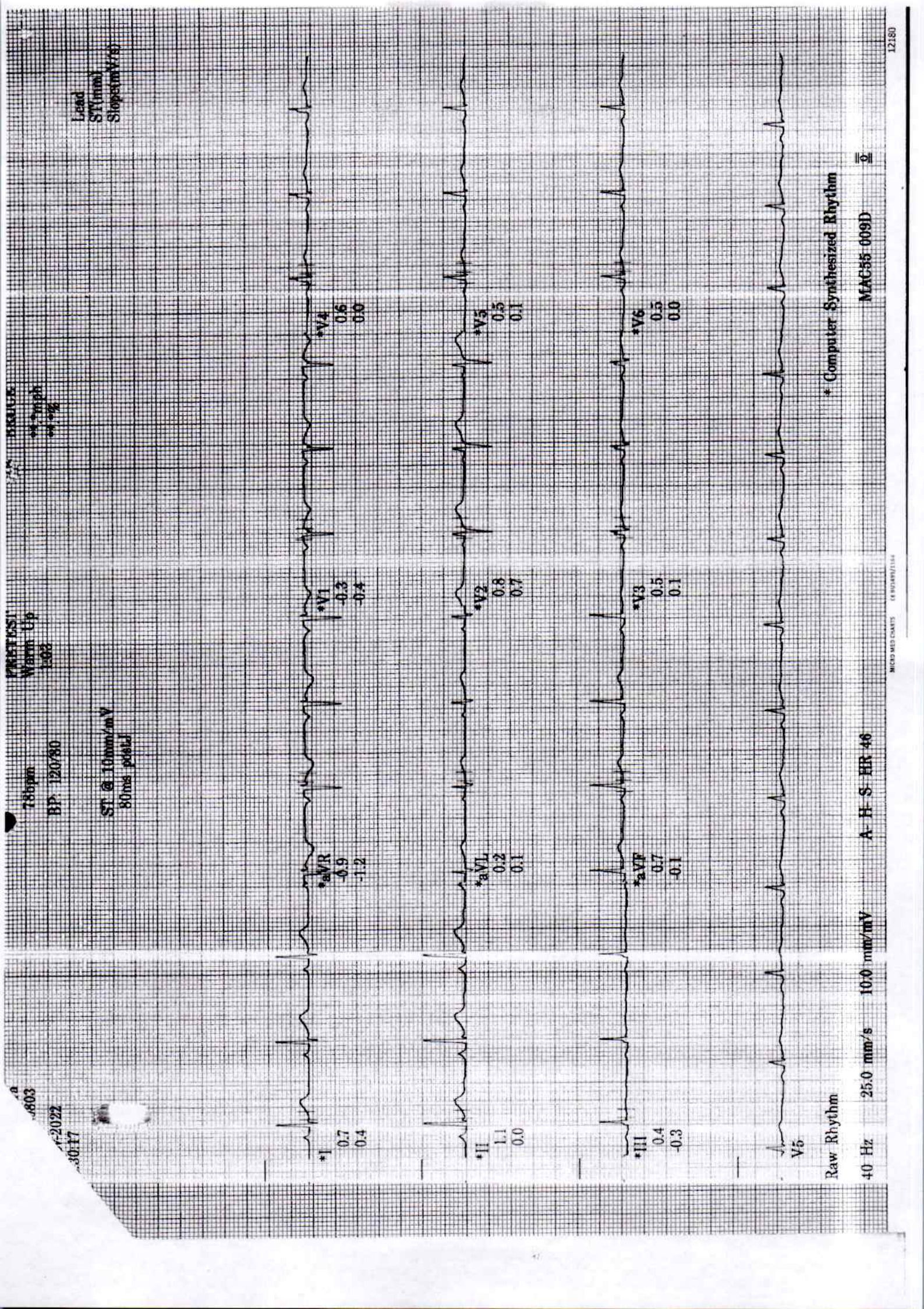
Referred by:
 Test ind:

EXERCISE STAGE I
 0:00 1.0 METS
 BP: 120/80
 ST @ 10mm/mV
 ST 80ms post J

Lead	ST (mm)	Slope (mV/s)
aVR	-1.0	-1.0
aVL	0.1	-0.1
aVF	0.7	0.0
V1	-0.3	-0.6
V2	0.8	0.3
V3	0.7	0.1
V4	0.7	0.0
V5	0.8	0.3
V6	0.7	0.0

Technician:

WOCKHARDT HOSPITALS NAGPUR
 Unconfirmed
 MAC:55 009D
 CE: 01/03/2154
 17150



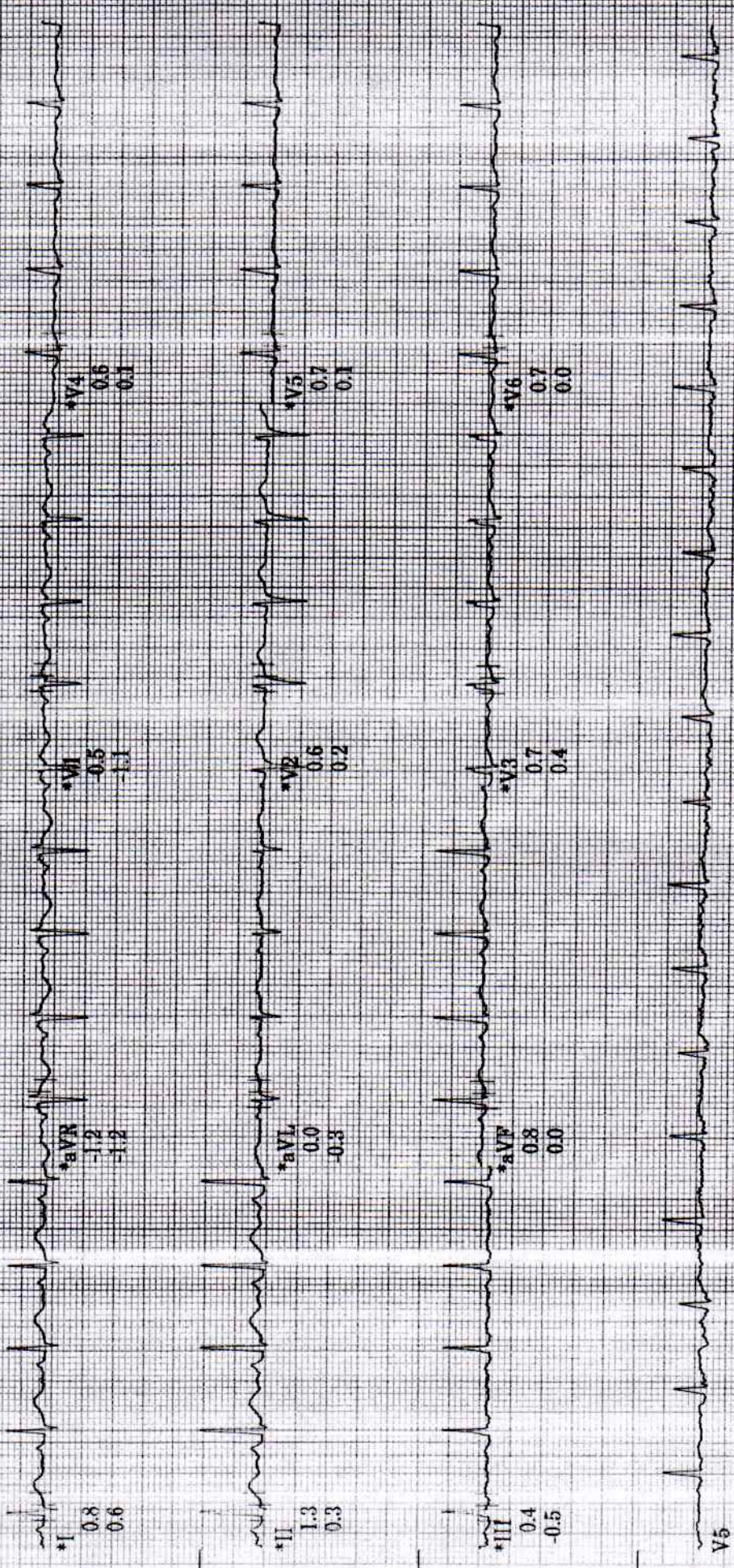
803
-2022
3:23

EXERCISE
STAGE I
3-00

BRUCE
1.7mph
10.0%

Lead
ST (mm)
Slope (mV/s)

110bpm
BP: 130/80
ST @ 10mm/mV
80ms post



Raw Rhythm

40 Hz 25.0 mm/s 10.0 mm/mV A-H-S-HR-46

* Computer Synthesized Rhythm

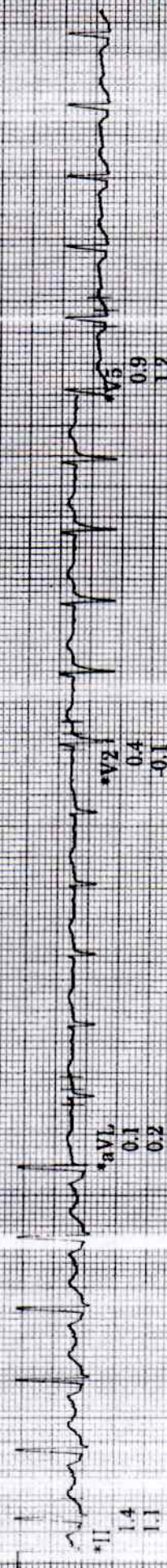
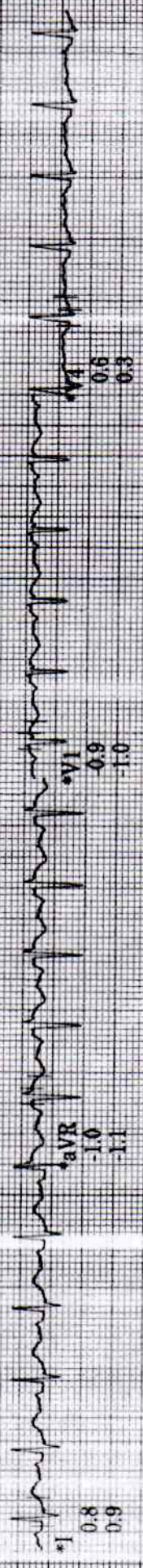
MAC55-009D

5

EXERCISE STAGE 2
 2.5 mph
 12.0%

130bpm
 BP: 140/80
 ST @ 10mm/mV
 60ms post-J

Lead
 STY(mm)
 Slope(mV/s)



Raw Rhythm

40 Hz 25.0 mm/s 10.0 mm/mV A-H-S-HR 46

Computer Synthesized Rhythm

MAC55-009D

0803
2022
5:37:24

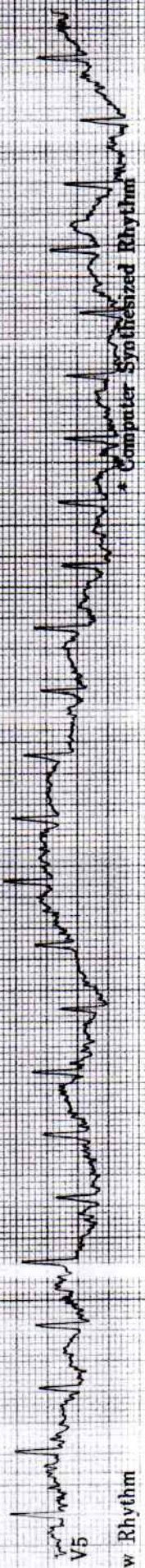
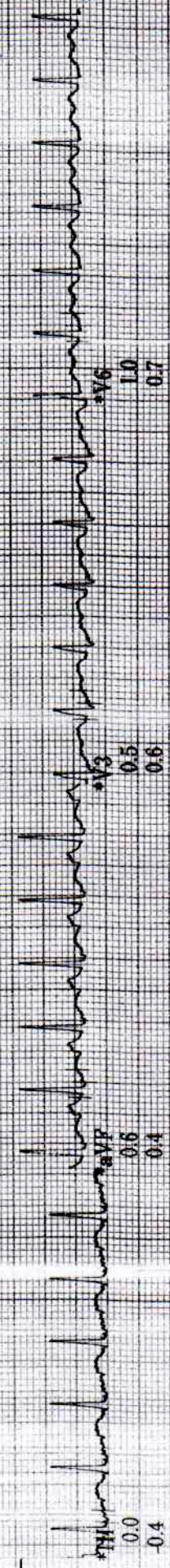
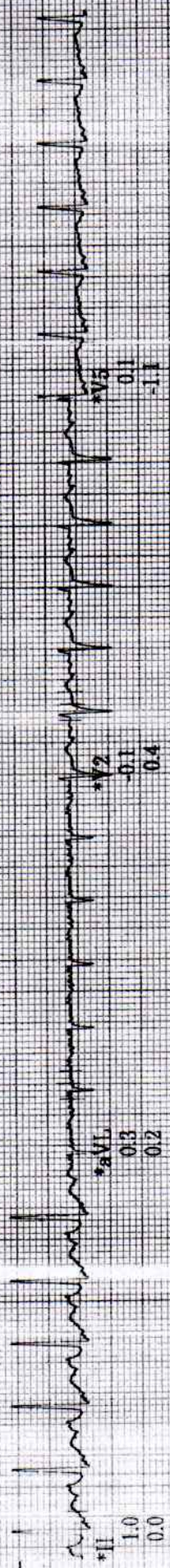
EXERCISE
STAGE 3
7:00

HR 147bpm
3.5kmph
14.0%

Lead
ST (mm)
Slope (mV/s)

ST @ 10mm/mV
80ms post J

Peak



Raw Rhythm

40 Hz 25.0 mm/s 10.0 mm/mV A-H-S-HR 46

MAC55 009D

0803
2022
3:38:24

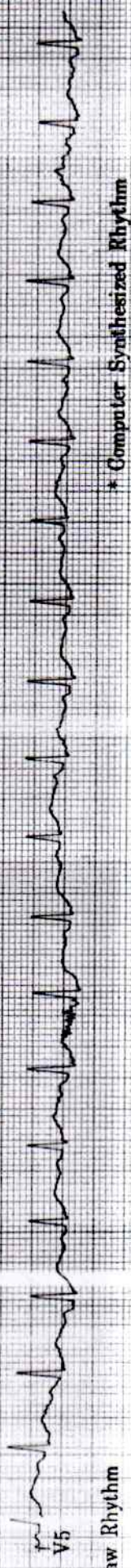
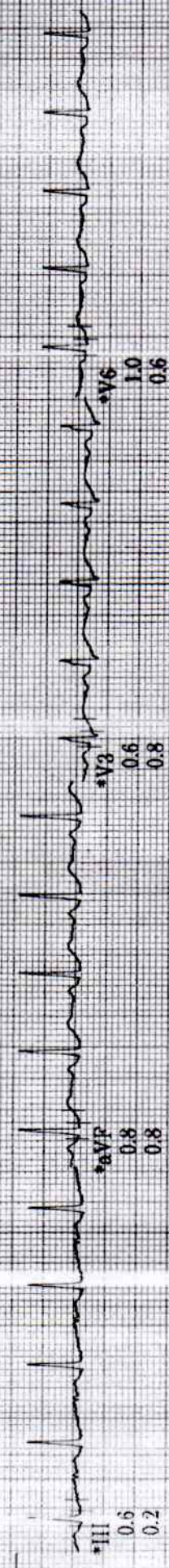
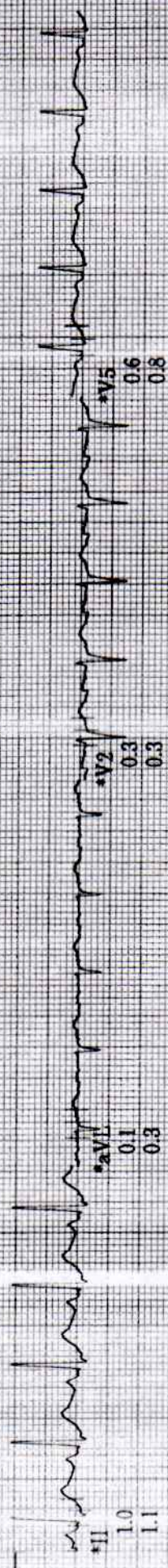
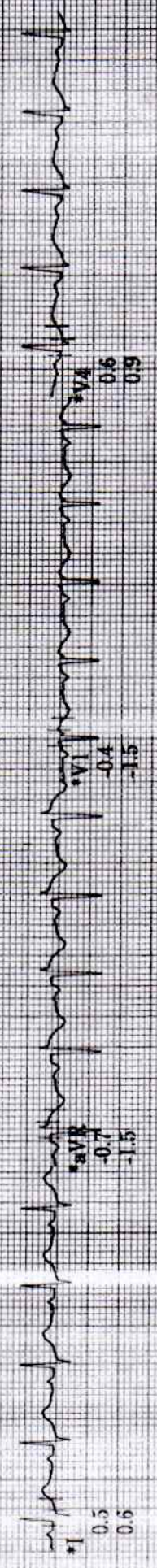
RECOVERY

BRUCE
3 mph
30%

Lead
ST (mm)
Slope (mV/s)

118bpm
BP: 120/80

ST @ 10mm/mV
80ms post J



* Computer Synthesized Rhythm

Raw Rhythm 40 Hz 25.0 mm/s 100 mm/mV A-H-S-HR 46

MAC55 009D