

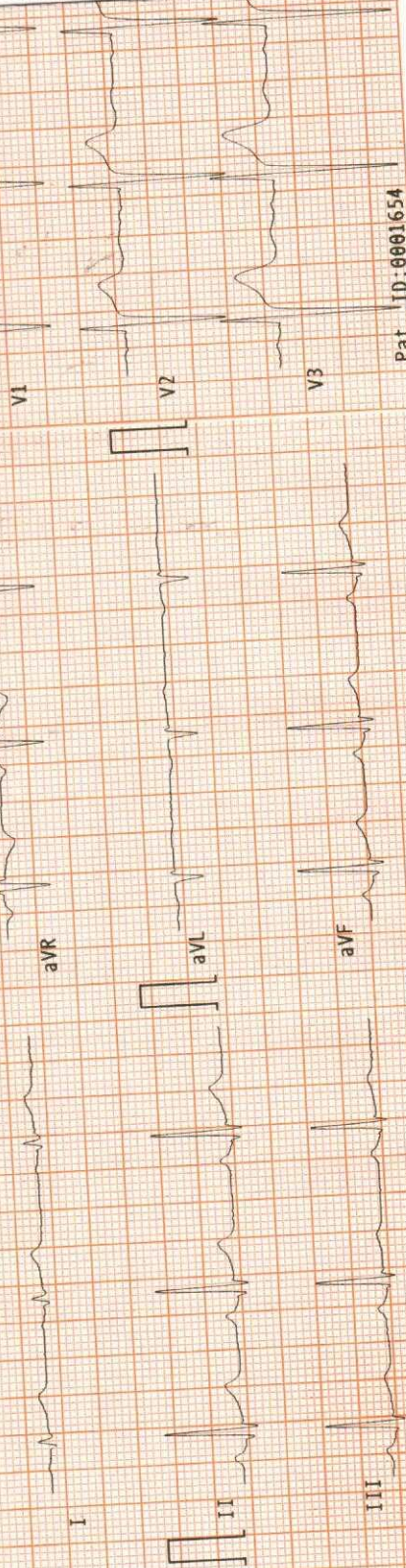
Pat. Name : **YASH**
 Pat. ID : 0001654
 Referred By :
 Consultant :
 Age / Sex : 23 Years / Male
 Date / Time : 17-05-24/09:41:40
 Pacemaker : No
 BP Sys / Dia: 0/0 mmHg
 Ht / Wt : 173cm / 67kg
 Race : Indian
 Drug 1 : No Medication
 Drug 2 : No Medication
 Clin. Diag. : Normal

BPL GenX3

10 mm/mV 25 mm/Sec @ 0.5

10 mm/mV 25 mm/Sec @ 0.5 -37Hz

10 mm/mV 25 mm/Sec @ 0.5



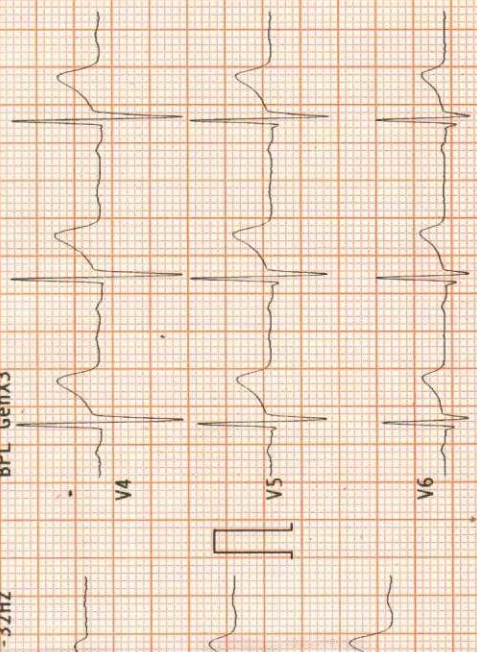
Pat. ID: 0001654

Hospital:

Pat. ID: 0001654

-32Hz

BPL GenX3



Heart Rate

72 bpm

HRV

592

Sinus rhythm

ST Frontal Axis 78 deg.
 ST Duration 86 ms
 Q-T Interval 364 ms
 QT Dispersion 50 ms
 P Terminal Force 2624 ms.uv

TFrontal Axis
 PR Interval
 QTc Hodges

58 deg.
 168 ms
 385 ms

Normal ECG - Within Normal Limits

Average beat fiducial point sample number

	Onset	Termination	Duration(ms)
P	266	366	100
QRS	434	522	88
T	608	798	190

DR. MITAL H. CHADRA
 REG NO. 10000000000
 DNB MEDICINE
 DNB CARDIOLOGY

Disclaimer: This report does not replace the diagnosis of a trained physician

Hospital:.....

Medical Examination

Name : Yash Somani

Date : 17/5/24

Age/ Gender : 23/ M

Family History : F/H/O Bronchial Asthma
No other F/H/O HTN/DM/Cardiac
illness

Personal History : Operated For Rt side Hernia
in childhood. No other Sx/Trauma
No Allergy to any known medication.
No habit of Smoking / Alcohol

Current complaints : c/o Fissure since 3-4 mths
No other complaints
No comorbidities

General Examination : Fair

Height : 173 cms

SpO2 : 98%

Pulse-Rate : 76/min

Heart Sounds : S1S2 (M) No
murmur

BMI : 22.4 kg/m² (Normal)

HIP TO WAIST RATIO : 0.82

Investigations :

ECG :


X-RAY :

FAST. ACCURATE. RELIABLE

Weight : 67 kg

Blood Pressure : 120/90 mm Hg

Eye Colour Vision : Normal


Dr. Signature: Dr. RUPALI DESAI
Rupali Desai M.B.B.S.
Reg. No. 2005/04/2498

ID : 15266 Collection : May 17, 2024, 09:22 a.m. Client Name : Arcofemi
 Name : YASH SOMANI Received : May 17, 2024, 03:00 p.m. Healthcare Pvt. Ltd - PANI017
 DOB/Age : 23 years Reported : May 17, 2024, 04:18 p.m. Client Address : GHATKOPAR
 Gender : Male Ref. Doctor : SELF



MT00030279

Test Description	Value(s)	Reference Range
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Complete Blood Count; CBC (EDTA whole blood)

Erythrocytes (Whole Blood)

Hemoglobin (Hb)* (NonCyanmethemoglobin Photometric Measurement)	15.1	gm/dL	13.5 - 18.0
Erythrocyte (RBC) Count* (Electrical Impedance)	4.93	mil/cu.mm	4.7 - 6.0
Packed Cell Volume (PCV)* (Calculated)	44.0	%	42 - 52
Mean Cell Volume (MCV)* (Electrical Impedance)	89.3	fL	78 - 100
Mean Cell Haemoglobin (MCH)* (Calculated)	30.6	pg	27 - 31
Mean Corpuscular Hb Conc. (MCHC)* (Calculated)	34.2	gm/dL	32 - 36
Red Cell Distribution Width (RDW)-CV* (Electrical Impedance)	13.8	%	11.5 - 14.0
Red Cell Distribution Width (RDW)-SD	42.4	fL	40.0 - 55.0

RBC Morphology

Remarks: Normocytic normochromic

Leucocytes (Whole, Blood)

Total Leucocytes (WBC) Count* (Electrical Impedance)	6600	cell/cu.mm	4000-10000
Neutrophils* (VCSn Technology)	51	%	40 - 80
Lymphocytes* (VCSn Technology)	40	%	20 - 40
Monocytes* (VCSn Technology)	6	%	2 - 10
Eosinophils* (VCSn Technology)	2	%	1 - 6
Basophils* (VCSn Technology)	1	%	1-2

Absolute Count



Dr. Suyash Vishwaroop
(MBBS,MD Pathology)

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MT00030279

Test Description	Value(s)	Reference Range
Absolute Neutrophil Count* (Calculated)	3.37	* 10 ⁹ /L 2.0 - 7.0
Absolute Lymphocyte Count* (Calculated)	2.64	* 10 ⁹ /L 1-3
Absolute Monocyte Count* (Calculated)	0.40	* 10 ⁹ /L 0.2-1.0
Absolute Eosinophil Count* (Calculated)	0.13	* 10 ⁹ /L 0.0-0.5
Absolute Basophils Count* (Calculated)	0.07	* 10 ⁹ /L 0.1-0.2
WBC	Within normal limits	
Platelets (Whole, Blood)		
Platelet Count* (Electrical Impedence)	286	10 ³ /ul 150 - 450
Mean Platelet Volume (MPV)* (Electrical Impedence)	8.1	fL 7.2 - 11.7
Platelet Morphology	Adequate on smear	
PCT* (Calculated)	0.231	% 0.2 - 0.5
PDW* (Calculated)	16.9	% 9.0 - 17.0

Tests done on Automated Five Part Cell Counter. (WBC, RBC, Platelet count by impedance method, colorimetric method for Hemoglobin, WBC differential by flow cytometry using laser technology other parameters are calculated). All Abnormal Haemograms are reviewed confirmed microscopically.



MC-2684

END OF REPORT

Dr. Suyash Vishwaroop
(MBBS, MD Pathology)

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 Name : YASH SOMANI Received : May 17, 2024, 03:00 p.m. Healthcare Pvt. Ltd - PANI017
 DOB/Age : 23 years Reported : May 17, 2024, 05:24 p.m. Client Address : GHATKOPAR
 Gender : Male Ref. Doctor : SELF



Test Description	Value(s)	Reference Range
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ESR; Erythrocyte Sedimentation Rate .

Erythrocyte Sedimentation Rate (EDTA Whole blood, modified westergren)	5	mm/hr	<15
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Interpretation:

It indicates presence and intensity of an inflammatory process. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, acute rheumatic fever,. It is also increased in multiple myeloma, hypothyroidism.



MC-2684

END OF REPORT

Preeti

Dr. Preeti Jain
(Consultant Pathologist)

ID : 15266 Collection : May 17, 2024, 09:22 a.m. Client Name : Arcofemi
 Name : YASH SOMANI Received : May 17, 2024, 03:03 p.m. Healthcare Pvt. Ltd - PANI017
 DOB/Age : 23 years Reported : May 17, 2024, 04:43 p.m. Client Address : GHATKOPAR
 Gender : Male Ref. Doctor : SELF



MT00030282

Test Description	Value(s)	Reference Range
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Glucose, Post Prandial (PP), 2 hours

Blood Glucose-Post Prandial* (Plasma - P, Hexokinase)	113	mg/dL	70-140
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MC-2684

END OF REPORT

Dr. Preeti Jain
(Consultant Pathologist)

ID : 15266 Collection : May 17, 2024, 09:22 a.m. Client Name : Arcofemi
 Name : YASH SOMANI Received : May 17, 2024, 03:00 p.m. Healthcare Pvt. Ltd - PANI017
 DOB/Age : 23 years Reported : May 17, 2024, 04:56 p.m. Client Address : GHATKOPAR
 Gender : Male Ref. Doctor : SELF



Test Description	Value(s)	Reference Range
	<u>SGPT</u>	
SGPT* (UV with P5P, IFCC 37 Degree)	29.44	U/L <50



MC-2684

END OF REPORT



Dr. Preeti Jain
(Consultant Pathologist)

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DOB/Age : 23 years	Reported : May 17, 2024, 04:43 p.m.	Client Address : GHATKOPAR
Gender : Male	Ref. Doctor : SELF	



Test Description	Value(s)	Reference Range
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Glucose Fasting (F)

Glucose Fasting* (Plasma, Hexokinase)	90	mg/dL	Normal: 70-100 Impaired Fasting Glucose (IFG): 100-125 Diabetes Mellitus: >= 126 (On more than one occasion) (American Diabetes Association guidelines 2017)
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MC-2684

END OF REPORT



Dr. Preeti Jain
(Consultant Pathologist)

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 Name : YASH SOMANI Received : May 17, 2024, 03:00 p.m. Healthcare Pvt. Ltd - PANI017
 DOB/Age : 23 years Reported : May 17, 2024, 04:58 p.m. Client Address : GHATKOPAR
 Gender : Male Ref. Doctor : SELF



Test Description	Value(s)	Reference Range
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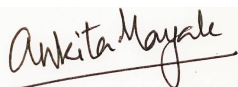
Creatinine, Serum

Creatinine* (Jaffe IDMS)	1.02	mg/dL	0.67 - 1.17
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MC-2684

END OF REPORT


Dr. Ankita Nayak
(M.D. Pathology)

ID : 15266 Collection : May 17, 2024, 09:22 a.m. Client Name : Arcofemi
 Name : YASH SOMANI Received : May 17, 2024, 03:00 p.m. Healthcare Pvt. Ltd - PANI017
 DOB/Age : 23 years Reported : May 17, 2024, 04:55 p.m. Client Address : GHATKOPAR
 Gender : Male Ref. Doctor : SELF



MT00030279

Test Description	Value(s)	Reference Range
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Blood Group ABO & RH Factor

Blood Group (EDTA whole blood & Serum, Forward and Reverse By Tube Method)	"B"	
RH Factor	Positive	

Methodology

This is done by forward and reverse grouping by tube Agglutination method.

Interpretation

Newborn baby does not produce ABO antibodies until 3 to 6 months of age. So the blood group of the Newborn baby is done by ABO antigen grouping (forward grouping) only, antibody grouping (reverse grouping) is not required. Confirmation of the New-born's blood group is indicated when the A and B antigen expression and the isoagglutinins are fully developed (2–4 years).



MC-2684

END OF REPORT

Dr. Suyash Vishwaroop
(MBBS, MD Pathology)

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 Gender : Male Ref. Doctor : SELF



MT00030281

Test Description	Value(s)	Reference Range
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Bun; Blood Urea Nitrogen

UREA* (Serum,Urease)	29.18	mg/dL	17 - 43
BUN* (Serum,Calculated)	13.64	mg/dL	7 - 18



MC-2684

END OF REPORT

Ankita Nayak
Dr. Ankita Nayak
(M.D. Pathology)

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DOB/Age : 23 years	Reported : May 17, 2024, 04:56 p.m.	Client Address : GHATKOPAR
Gender : Male	Ref. Doctor : SELF	



Test Description	Value(s)	Reference Range
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Bilirubin, Total

Bilirubin-Total (DPD)	1.11	mg/dL	0.3 - 1.2
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END OF REPORT



Dr. Preeti Jain
(Consultant Pathologist)

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 Gender : Male Ref. Doctor : SELF



MT00129848

Test Description	Value(s)	Reference Range
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Urine Examination-Routine

Volume*	50	ml	-
Colour*	Yellow		Pale Yellow
Transparency (Appearance)*	Clear		Clear
Deposit*	Absent		Absent
Reaction (pH)* (Double indicator)	6.5		4.5 - 8
Specific Gravity* (Ionic concentration)	1.020		1.010 - 1.030

Chemical Examination (Automated Dipstick Method) Urine

Urine Glucose (sugar)* (Glucose oxidase/oxidase reaction)	Absent		Absent
Urine Protein (Albumin)* (Error of indicators)	Absent		Absent
Urine Ketones (Acetone)* (Acetic acid reacts with nitroprusside)	Absent		Absent
Blood* (Peroxidase activity of hemoglobin)	Absent		Absent
Bilirubin* (Coupling of bilirubin with diazotized dichloroaniline)	Absent		Absent
Nitrite* (Conversion of nitrate to nitrite)	Absent		Absent
Urobilinogen* (Ehrlich reaction)	Normal		Normal

Microscopic Examination Urine

Pus Cells (WBCs)*	2-3	/hpf	0 - 5
Epithelial Cells*	0-1	/hpf	0 - 4
Red blood Cells*	Absent	/hpf	Absent
Crystals*	Absent		Absent
Cast*	Absent		Absent
Trichomonas Vaginalis*	Absent		Absent
Yeast Cells*	Absent		Absent
Amorphous deposits*	Absent		Absent



Dr. Preeti Jain
(Consultant Pathologist)

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Gender : Male	Ref. Doctor : SELF	



Test Description	Value(s)	Reference Range
Bacteria*	Absent	Absent



MC-2684

END OF REPORT



Dr. Preeti Jain
(Consultant Pathologist)

NAME: YASH SOMANI	AGE/GENDER: 23Y/M
REF. : SELF	DATE: 17.05.2024

X-RAY CHEST PA VIEW

Both lung fields show equal translucency and vasculature.

Pleural spaces are clear.

The cardiac size is normal.

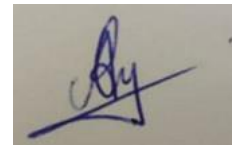
The domes of diaphragm are normal in position & show smooth outline.

The bony parts are normal.

Impression:

- **No obvious significant abnormality is seen.**

Suggest: Clinical correlation.



Dr. Abhishek Yadav
Consultant Radiologist

Note: Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. X-ray is known to have inter-observer variations. Further/ follow up imaging may be needed in some cases for confirmation/ exclusion of diagnosis. Not all fractures may be visible in given X-ray views; hence a clinical correlation is suggested in cases of injury with swelling and restricted movements. Please interpret accordingly.

NAME: YASH SOMANI	AGE/GENDER: 23Y/M
REF. : SELF	DATE: 17.05.2024

X-RAY CHEST PA VIEW

Both lung fields show equal translucency and vasculature.

Pleural spaces are clear.

The cardiac size is normal.

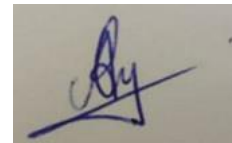
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The bony parts are normal.

Impression:

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Dr. Abhishek Yadav
Consultant Radiologist

Note: Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. X-ray is known to have inter-observer variations. Further/ follow up imaging may be needed in some cases for confirmation/ exclusion of diagnosis. Not all fractures may be visible in given X-ray views; hence a clinical correlation is suggested in cases of injury with swelling and restricted movements. Please interpret accordingly.