



Balaji Medical Centre

An ISO 9001:2015 Accredited Organization
info@balajimedicalcentre.com, dr@balajimedicalcentre.com



- CHENNAI** : No.5 (3/2), Jagadeeswaran Street,T.Nagar,Chennai-600 017. INDIA ☎ : 044-24364651 / 52 / 53
No.38, Manikodi Srinivasan Nagar Main Road, Rajiv Gandhi Salai, Perungudi, Chennai-600 096. INDIA ☎ : 044-29865513 / 14
- TUTICORIN** : Plot No.51, Door No.20/10, Roche Colony, South Beach Road,Tuticorin - 628 001.INDIA ☎ : 0461-2332719 / 20
- CUDDALORE** : No.26, Dowlath Nagar, Semmandalam, Cuddalore - 607001.INDIA ☎ : 04142-202150,203150
- KOCHI** : No.66/2345A, Veekshnam Road, Ernakulam,Kochi-682018 . INDIA ☎ : 0484-2395006 / 07 / 08
- VIZAG** : Door No.39-11- 63/4-1, Murali Nagar, Visakhapatnam,Andhra Pradesh-530 007. INDIA ☎ : 0891-2710299 / 399
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- KAKINADA** : 70-17-15/1,RR Nagar,Road No.2, Kakinada, Andhra Pradesh -533003.INDIA ☎ : 0884-2345555, 0884-3500132.

REG. NO: MA23080000127

DATE:12/08/2023

MEDICAL FITNESS CERTIFICATE

This is to certify that I have examined Mr. PAULOSE P C (49/M)

Who is found to be Medically **FIT**.

He is not found to be suffering from any contagious Disease or Ailment.

He is **FIT** to perform his duty.


Dr. VIDYA KUMARI
Reg.No. 10306
DGS Approval No. KA/MG/08/2022

“HEALTHIER MARINERS TOWARDS A WEALTHIER NATION”



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PHYSICAL EXAMINATION

Date Of Exam : 12/08/2023

Reg. No:MA23080000127

Name : Mr. PAULOSE P C

(49/Male)

Type Of Exam : Physical

Reference : Apollo Health and Lifestyle Limited

The doctor has examined this client at Balaji Medical Centre Mangalore for updated Physical examination and found the following.

Temperature	:	36.0C
Blood Pressure	:	150/90mmHg
Pulse	:	76/min
Respiration Rate	:	16/min
Waist (cm)	:	90Cms
Height	:	188Cms
Weight	:	86.4Kgs
BMI	:	24.4 kg/m ²

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Name: Mr. PAULOSE P C

Date: 12/08/2023

Reg. No : MA23080000127

Ref : Dr. A.H.Balaji

OPHTHALMIC REPORT

	RIGHT	LEFT
Distant:	6/6	6/6
Near:	N/5	N/5
Colour:	Normal	Normal
Anterior Segment:	Normal	Normal
Intra Ocular Pressure:	Normal	Normal
Fundus:	Normal	Normal


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LABORATORY REPORT

DATE : 12/08/2023 REG. NO : MA23080000127
 NAME : Mr. PAULOSE P C
 AGE : 49 YRS SEX : MALE
 REF BY : DR.A.H.BALAJI

COMPLETE BLOOD COUNT (CBC)

INVESTIGATION	OBSERVED VALUE	UNIT	BIOLOGICAL REFERENCE INTERVAL
ERYTHROCYTE (RBC) COUNT	5.5	mill/cu.mm	4.7-6.0
HAEMOGLOBIN (Hb)	15.8	gm/dl	13.5-18
PCV (PACKED CELL VOLUME)	47.4	%	42-52
MCV (MEAN CORPUSCULAR VOLUME)	90.5	fl	78-100
MCH (MEAN CORPUSCULAR HAEMOGLOBIN)	28.3	pg	27-31
MCHC (MEAN CORPUSCULAR Hb CONC.N.)	32.0	g/dl	32-36
RDW (RED CELL DISTRIBUTION WIDTH)	13.9	%	11.5-14.0
TOTAL LEUCOCYTES (WBC) COUNT	7100	Cells /cu.mm	4000-10500
ABSOLUTE NEUTROPHILS COUNT	3600	/c.mm	2000-7000
ABSOLUTE LYMPHOCYTE COUNT	2400	/c.mm	1000-3000
ABSOLUTE MONOCYTE COUNT	570	/c.mm	200-1000
ABSOLUTE EOSINOPHIL COUNT	220	/c.mm	20-500
ABSOLUTE BASOPHIL COUNT	90	/c.mm	20-100
NEUTROPHILS	54.0	%	40-80
LYMPHOCYTES	37.0	%	20-40
MONOCYTES	5.0	%	2-10
EOSINOPHILS	4.0	%	1-6
BASOPHILS	1.0	%	0-2
PLATELET COUNT	2.1	10 ³ /μl	1.50-4.50
MPV (MEAN PLATELET VOLUME)	7.6	fL	6-9.5
PCT (PLATELET HAEMATOCRIT)	0.2	%	0.2-0.5
PDW (PLATELET DISTRIBUTION WIDTH)	16.2	%	9-17

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LABORATORY REPORT

DATE : 12/08/2023 REG. NO :MA23080000127

NAME : Mr. PAULOSE P C

AGE : 49 YRS SEX : MALE

REF BY : DRA.H.BALAJI

ROUTINE EXAMINATION URINE			
INVESTIGATION	OBSERVED VALUE	UNIT	BIOLOGICAL REFERENCE INTERVAL
GENERAL EXAMINATION:			
COLOUR	PALE YELLOW		PALE YELLOW
APPEARANCE	CLEAR		CLEAR
REACTION (pH)	5.5		4.5 - 8
SPECIFIC GRAVITY	1.020		1.010 - 1.030
CHEMICAL EXAMINATION (AUTOMATED DIPSTICK METHOD):			
URINE PROTEIN(ALBUMIN)	ABSENT		ABSENT
URINE GLUCOSE(SUGAR)	ABSENT		ABSENT
URINE KETONES(ACETONE)	ABSENT		ABSENT
BILE SALTS	ABSENT		ABSENT
BILE PIGMENTS	ABSENT		ABSENT
UROBILINOGEN	NORMAL		NORMAL
NITRITE	NEGATIVE		NEGATIVE
MICROSCOPIC EXAMINATION			
RED BLOOD CELLS	NIL	/hpf	0 - 2
PUS CELLS (WBCs)	1-2	/hpf	0 - 5
EPITHELIAL CELLS	0-1	/hpf	0 - 5
CRYSTALS	ABSENT	/hpf	ABSENT
CAST	ABSENT	/hpf	ABSENT
AMORPHOUS DEPOSITS	ABSENT	/hpf	ABSENT
BACTERIA	ABSENT	/hpf	ABSENT

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Date : 12/08/2023 Reg. No : MA23080000127
Name : Mr. PAULOSE P C
Age : 49Yrs Sex : Male
Ref By : DR.A.H.BALAJI

INVESTIGATION	OBSERVED VALUE	UNIT	BIOLOGICAL REFERENCE INTERVAL
ESR – Erythrocyte Sedimentation Rate (EDTA Whole Blood, Automated-Capillary photometry aggregation/ Manual – Westergrens method)	07	mm/hr	0-15

Method: Automated Westergren

Interpretation;

1. It indicates presence and intensity of an inflammatory process, never diagnosis of a specific disease, Chance are more significant than a single abnormal test.
2. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis, polymyalgia rheumatica.
3. It is also increased in pregnancy, multiple myeloma, menstruation and hypothyroidism.

Remark: ESR Performed using capillary photometric aggregation (for automated analysis) & westergrens (for manual testing).


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Date : 12/08/2023 Reg. No : MA23080000127

Name : Mr. PAULOSE P C

Age : 49 yrs Sex : Male

Reference : APOLLO HEALTH AND LIFESTYLE LIMITED

Ref By : DR.A.H. BALAJI

Test Name	Result	Units	Ref.Interval
LIPID SCREEN, SERUM (Spectrophotometry)			
Cholesterol	183.00	mg/dL	(<200.00)
Triglycerides	164.00	mg/dL	(<150.00)
HDL Cholesterol	34.8	mg/dL	(<40.00)
LDL Cholesterol, Calculated	91.2	mg/dL	(<100.00)
VLDL Cholesterol, Calculated	32.8	mg/dL	(<30.00)

Note:

- Measurements in the same patient can show physiological & analytical variations. Three serial samples 1 week apart are recommended for Total cholesterol, Triglycerides, HDL & LDL Cholesterol.
- ATP III recommends a complete lipoprotein profile as the initial test for evaluating cholesterol.
- Friedewald equation to calculate LDL cholesterol is most accurate when Triglyceride level is <400 mg/dL. Measurement of Direct LDL cholesterol is recommended when Triglyceride level is >400 mg/dL.

INTERPRETATION	TOTAL CHOLESTEROL in mg/dL	Triglyceride in mg/dL	LDL CHOLESTEROL in mg/dL
Optimal	< 200	<150	<100
Above Optimal	-	-	100-129
Boderline High	200-239	150-199	130-159
High	>=240	200-499	160-189
Very High	-	>=500	>=190

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Age : 49 yrs

Sex : Male

Reference : Apollo Health and Lifestyle Limited

Ref By : DR. A.H. BALAJI

LIVER FUNCTION TEST

TEST	PATIENT'S VALUES	UNITS	NORMAL RANGE	
			FROM	TO
Serum Bilirubin (Total)	0.6	mg/dl	0.1	1.2
Serum Bilirubin (Direct)	0.1	mg/dl	-	<0.3
Serum Bilirubin (Indirect)	0.5	mg/dl	0.1	1
S. Alkaline Phosphatase	78.0	U/L	-	<150
Serum Gamma G.T.	23.0	U/L	4	40
Serum G. P. T.	19.0	U/L	10	40
Serum G. O. T.	20.0	U/L	10	42
Serum Total Proteins	7.1	gm/dl	6.0	7.8
Albumin	4.0	gm/dl	3.5	5.0
Globulin	3.1	gm/dl	2.6	3.5
Albumin: Globulin Ratio	1.2	-	-	-


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Age : 49 Yrs Sex : Male

Ref By : DR.A.H.BALAJI

BIOCHEMISTRY

<u>Investigation</u>	<u>Observed value</u>	<u>unit</u>	<u>biological reference interval</u>
HbA1C-Glycated Haemoglobin (HPLC)	114.04	%	non-diabetic: <= 5.6 pre-diabetic: 5.7-6.4 Diabetic : >= 6.5
Estimated Average glucose (e AG)	105.41	mg/dl	

INTERPRETATION & REMARK:

- HbA1c is used for monitoring diabetic control.it reflects the estimated average glucose. (eAG)
- HbA1c has been endorsed by clinical group & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
- Trends in HbA1Care a better indicator of diabetic control than a solitary test.
- Low glycated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anemia (especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases.clinical correlation suggested.
- To estimate the eAG from the HbA1C value, the following equation is used:
 $eAG(mg/dl) = 28.7 * A1c - 46.7$
- Interference of heamoglobinopathies in HbA1c estimation.
 - for HbF >25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c
 - Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring Diabetic status.
 - Heterozygous state detected (D10/turbo is corrected for HbS & HbC trait)
- In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control. Excellent control-6 to 7%, fair to good control -7 to 8%, unsatisfactory control -8 to 10 % and poor control -More than 10%

NOTE: Hemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy.

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Date : 12/08/2023 Reg. No : MA23080000127
Name : Mr. PAULOSE P C
Age : 49Yrs Sex : Male
Reference : Apollo Health and Lifestyle Limited
Ref By : DR. A.H. BALAJI

<u>Tests</u>	<u>Value/Results</u>	<u>Units</u>	<u>Reference Interval</u>
<u>BIO-CHEMISTRY</u>			
Blood Sugar (F)	: 104	mg/dl	70-110
Blood Sugar (PPBS)	: 132	mg/dl	120-140
GGTP	: 132	mg/dl	120-140
GGT	: 23	U/L	<150

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Reg.No. 10306
DGS Approval No. KAMG/08/2022



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LABORATORY REPORT

Reg. No : MA23080000127
Name : Mr. PAULOSE P C (49/Male)
Reference : Apollo Health and Lifestyle Limited
Ref. By : DR.A.H.BALAJI
Reported On : 12/08/2023

<u>TEST</u>	<u>Value/Results</u>	<u>Units</u>	<u>REFERENCE INTERVAL</u>
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RENAL FUNCTION TEST

Urea	:	22	mg/dL	15-40
Creatinine	:	0.9	mg/dL	0.2-1.2
BUN	:	10	mg/dL	6-21
Blood Uric Acid	:	5.2	mg/dL	4.7-6.1


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LABORATORY REPORT

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Name : Mr. PAULOSE P C
Age : 49Yrs Sex: Male
Reference : Apollo Health and Lifestyle Limited
Ref By : DR. A.H. BALAJI

HAEMOTOLOGY

Blood Group & Rh Type : "B" POSITIVE


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LABORATORY REPORT

Reg No : MA23080000127
Name : Mr. PAULOSE P C Date : 12/08/2023
Age : 49 yrs Sex : Male
Reference : Apollo Health and Lifestyle Limited.
Ref By : DR. A.H. BALAJI

PERIPHERAL SMEAR EXAMINATION

RED BLOOD CELL MORPHOLOGY : NORMAL
W B C MORPHOLOGY : NORMAL
PLATELET MORPHOLOGY : NORMAL

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Date: 12/08/2023


Reg. No : MA23080000127

TO WHOMSOEVER IT MAY CONCERN

This is to certify that I have examined Mr. PAULOSE P C (49/M)

- HEAD CASHIER for his Dental condition.

No dental issues, His Dental condition and oral hygiene are good.


Dr. S. Naresh
BDS
Reg. No.: 11291

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LABORATORY REPORT

Reg. No : MA23080000127 Date : 12/08/2023

Name : Mr. PAULOSE P C

Age : 49 yrs Sex : Male

Ref By : DR.A.H. BALAJI

Test Name	Result	Units	Ref.Range
THYROID PROFILE,TOTAL,SERUM (CLIA)			
T3,Total	158.0	ng/dl	(70-204)
T4,Total	9.30	ug/dL	(5.0-12.5)
TSH	2.5	uIU/ml	(0.45-4.5)

Reference Range for pregnancy:

TSH	REFERENCE RANGE IN Uiu/mL
Pregnancy	
1 st Trimester	0.30-4.50
2 nd Trimester	0.50-4.60
3 rd Trimester	0.80-5.20

- Note:**1 TSH levels are subject to circadian variation,reaching peak levels between 2-4.a.m.and at a Minimum between 6-10pm.The variation is of the order of 50%,hence time of the day has Influence on the measured serum TSH concentrations.
- 2 Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.
- 3 Physiological rise in Total T3 /T4 levels is seen in pregnancy and in patients on steroid therapy.

Clinical Use

- Primary Hypothyroidism
- Hyperthyroidism
- Hypothalamic-Pituitary hypothyroidism
- Inappropriate TSH secretion
- Non thyroidal illness
- Autoimmune thyroid disease
- Pregnancy associated thyroid disorders
- Thyroid dysfunction in infancy and early childhood


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DIGITAL RADIOGRAPH – CHEST PA- VIEW

Date : 12/08/2023 Reg. No : MA23080000127
Name : Mr. PAULOSE P C
Age : 49 yrs
Sex : Male
Ref By : DR.A.H.BALAJI

The cardio mediastinal silhouette is normal.

The lungs are well inflated. No focal mass lesion, lobar collapse or consolidation is seen.

No pleural effusion is detected.

The soft tissues and bones appear unremarkable.

Conclusion:

- Normal chest radiograph.


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ECG REPORT

Date : 12/08/2023 Reg. No : MA23080000127

Name : Mr. PAULOSE P C

Age : 49 yrs

Sex : Male

Ref By : DR. A. H. BALAJI

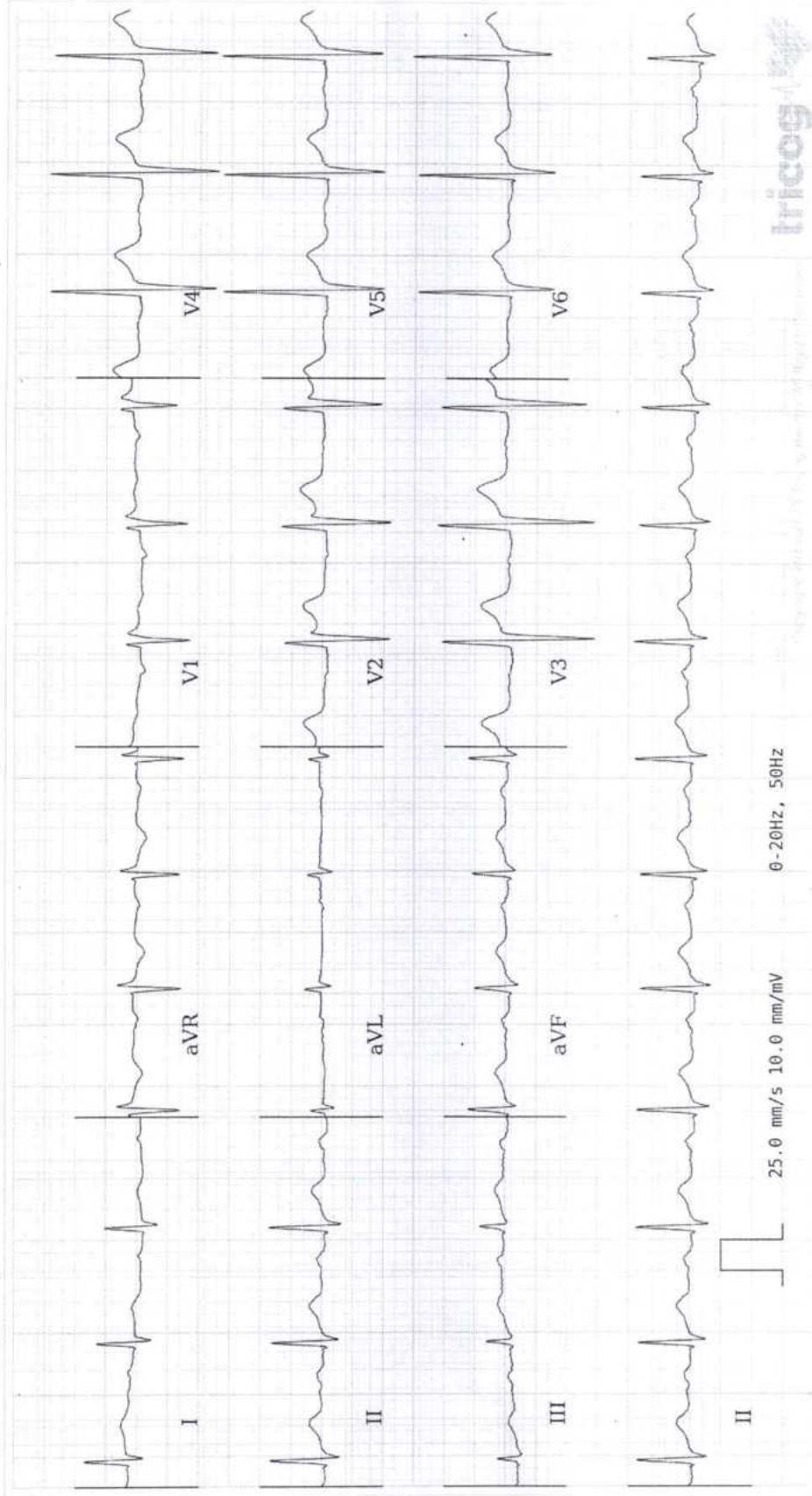
Impression : Normal Sinus Rhythm.


Dr. VIDYA KUMARI
Reg.No. 10306
DGS Approval No. KA/MG/08/2022



Balaji Medical Centre Mangalore

Age / Gender: 49/Male Date and Time: 12th Aug 23 10:08 AM
Patient ID: MA23080000127



AR: 79bpm VR: 79bpm QRSD: 114ms QT: 384ms QTcB: 440ms PRI: 214ms P-R-T: 65° 56° 70°

ECG Within Normal Limits: Sinus Rhythm. Please correlate clinically.

REPORTED BY

Abhishek
Dr. Alafia Hatim Canteenwala

Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a qualified physician.

2000/08/2914



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NAME : Mr. PAULOSE P C **AGE** : 49YRS /M

STUDY DATE : 12/08/2023 **REG.NO** : MA23080000127

PNDT. REG. NO : 06/2018-19 **REF. BY** : APOLLO

USG COMPLETE ABDOMEN

LIVER:

Is Normal in size. Hepatic Parenchyma is intrinsically normal.
No focal lesion seen in liver.
IHBR and CBD are normal in caliber. Portal vein is normal

Gall Bladder:

Is well distended and is normal. No calculus seen. No abnormal wall thickening.

Pancreas:

The head, tail and body of the pancreas are normal. No dilatation of pancreatic duct.

Spleen:

Is normal in size. No focal parenchymal lesions.

RT. Kidneys measures 9.0x4.0cms, normal in size.

Cortico medullary differentiation is maintained.
No calculus noted. Pelvicalyceal system is normal.

LT. Kidneys measures 10.2x4.5cms, normal in size.

Cortico medullary differentiation is maintained.
No calculus noted. Pelvicalyceal system is normal.

Urinary Bladder:

Is well distended and normal. No abnormal wall thickening.
No intraluminal echoes/calculus.

Prostate:

Normal in size and measures 3.8x2.4x2.6cms (Volume~12.40cc).
Seminal vesicles are normal.
No free fluid in abdomen.
No evidence of any significant lymphadenopathy seen.

Impression:

- Normal Study of Liver, Gall bladder ,Spleen, Pancreas, Right kidney, Left kidney, Urinary bladder and Prostate.


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Balaji Medical Centre Mangalore

Address: shree Heights building ,Shop no 5, Door no 1-65/31,Kulur-Kavoor,Airport Road Vivek Nagar Panjimogaru, Mangaluru 575013 Karnataka India

Echocardiography Report

PATIENT NAME PAULOSE P C	AGE 49 yrs	HEIGHT 188 cm	WEIGHT 86 kg	BSA 2.12 m ²	DATE TIME 2023/08/12 15:20
PATIENT ID MA23080000127	GENDER Male	REFERRING PHYSICIAN DR.VIDYA KUMARI	REPORTED BY DR. JEEVARATHINAM. N		

PROCEDURE

An ECHO exam was performed including 2D, M-mode, Spectral, Color-flow.

SUMMARY

Normal chamber size and shape
Normal LV systolic function, EF-55-60%(Eyeball assessment)
No regional wall motion abnormality
Mild paradoxical septal motion
Normal LV diastolic filling pattern
Normal valves

LEFT VENTRICLE

Measurement	Value	Reference	Measurement	Value	Reference
Systolic Function			Dimensions		
EF(Teich) (%)	58.83	(72-52)	LVIDd (cm)	5.02	(4.2-5.8)
SV(Teich) (ml)	70.21	(72-144)	LVIDd Index (cm/m ²)	2.37	(2.2-3.0)
SI(Teich) (ml/m ²)	33.12	(42-66)	LVIDs (cm)	3.45	(2.5-4.0)
EDV(Teich) (ml)	119.35	(62-150)	LVIDs Index (cm/m ²)	1.63	(1.3-2.1)
ESV(Teich) (ml)	49.14	(21-51)	IVSd (cm)	0.95	(0.6-1.0)
Diastolic Function			LVPWd (cm)	0.89	(0.6-1.0)
MV E Vel (m/s)	0.45	(0.6-0.8)	LVd Mass (g)	163.94	(88-224)
MV A Vel (m/s)	0.37	(0.2-0.35)	LVd Mass Index (g/m ²)	77.33	(49-115)
MV E/A Ratio	1.22	(>=0.8)	RWT	0.35	(0.24-0.42)

LEFT ATRIUM

Measurement	Value	Reference	Measurement	Value	Reference
LA Diam (cm)	3.87	(2.0-4.0)	LAESV MOD A4C (ml)	26.90	(-)
LA/Ao	1.17	(<1.3)	LAESVInd MOD A4C (ml/m ²)	12.69	(16-34)

RIGHT ATRIUM

Measurement	Value	Reference
RAAs A4C (cm ²)	10.18	(<=18)
RALs A4C (cm)	4.36	(-)

AORTIC VALVE & AORTA

Measurement	Value	Reference
AV Outflow		
AV Vmax (m/s)	0.64	(<2.6)
AV maxPG (mmHg)	1.64	(<30)
LVOT/ Aorta		
Ao Diam (cm)	3.31	(<3.7)
Ao/LA	0.74	(-)

PULMONARY VALVE AND PULMONARY ARTERY

Measurement	Value	Reference
Pulmonary Outflow		
PV Vmax (m/s)	0.64	(<1.9)
PV maxPG (mmHg)	1.64	(<36)

OBSERVATIONS :

Left Ventricle	Size - Left ventricle normal in size LV geometry - Normal LV geometry Systolic function - LV systolic function - normal Regional wall motion - No regional wall motion abnormality Diastolic function - LV diastolic function - normal filling pattern
Left Atrium	Size - Normal left atrium size
Right Atrium	Size - Normal right atrium size
Right Ventricle	Size - Normal right ventricular size Systolic function - Right ventricular systolic function - normal
Aortic Valve	Structure and function - Normal trileaflet aortic valve Regurgitation - No aortic regurgitation
Mitral Valve	Structure and function - Normal mitral valve Regurgitation - No mitral regurgitation
Tricuspid Valve	Structure and function - Normal tricuspid valve Regurgitation - No tricuspid regurgitation
Pulmonic Valve	Structure and function - Normal pulmonic valve Regurgitation - No pulmonic regurgitation
Pericardium	Effusion - No pericardial effusion
Aorta	Size - Normal aorta
Pulmonary Artery	Size - Normal pulmonary artery size
Pulmonary Hypertension	Probability - Low probability of pulmonary hypertension

Disclaimer: This report is generated based on the review of Echocardiography images transmitted and does not consider the patient's current symptoms or medical history. The quality or accuracy of the report is dependent on the quality and accuracy of the Echo images transmitted. The report is not meant or valid for any medico legal purposes



Reported By:
DR. JEEVARATHINAM. N
Clinical Cardiologist

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