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Greetings of the day !

Thank you for choosing us as your preferred healthcare partner.

At Manipal Hospitals, we are devoted towards clinical excellence, patient centricity, and ethical practices. Our healthcare services are aligned towards patient needs. In today's busy life style most people tend to ignore preventive health check-ups. However, it is incredibly important to get your health assessed regularly. Preventive health check-ups along with right lifestyle, will help you lead a longer and healthier life. We are happy to be of support as you take this step.

Please find enclosed your health check reports.

1. Health- check physician report.
2. Clinicians notes (As applicable).
3. Dieticians notes (if applicable).
4. Lab reports.
5. Radiology reports.
6. Other diagnostic reports (as applicable) .

If you have any queries, please contact 011-4967 4967.

To book an appointment call on 9550378619

Thank you,

Hospital Director

HCMCT Manipal Hospitals





MR ABHIJEET DAS KUMAR,34 Yrs year old, Male, has come for Preventive Health Check Up on 14/01/2023

The patient presented with history of Nothing Significant

On clinical examination, the personal history revealed Veg Diet, Social Alcohol intake, No smoking habit, Irregular exercise routine.

MR ABHIJEET DAS KUMAR is presently on No medications. The patient has history of No sulpham drug allergies, No penicillin drug allergies. Other drug allergies were No

The family history revealed FATHER - T2 DM

On general examination of the patient there was No pallor, No cyanosis, No clubbing, No Pedal oedema, Normal Bones and joints, No Icterus, No Lymph node, Normal Thyroid, Normal oral cavity, Normal skin.

In Systemic examination:

1. The cardio vascular system shows 78 Pulse/ Min, Felt Bilateral peripheral pulses, Absent murmurs, Sinus pulse type. S1 S2 heart sounds were heard.
2. The Respiratory system shows Respiratory Rate Within Normal Limit, Normal Vesicular type of breathing with No adventitious sounds.
3. The Abdominal system shows Normal Liver, Normal Spleen, No other palpable lump.
4. The Central Nervous System showed Normal Higher Cortical function, Normal Cranial Nerves, Normal Motor system, Normal cerebellar function, Normal sensory system and Normal Gait.

The investigation results show BODERLINE INCREASED TGS , SGPT .LOW PLATELET COUNT . USG ABDOMEN SI SX OF GRADE I FATTY LIVER

Based on physical examination and investigation results,MR ABHIJEET DAS KUMAR has been advised for

- 1-BRISK WALK FOR 40 MINUTES DAILY
- 2-LOW FAT HIGH FIBRE DIET
- 3-REPEAT FASTING LIPID PROFILE AFTER 3 MONTHS

Further, MR ABHIJEET DAS KUMAR has been advised for regular exercise and dietary modification and





Name : MR ABHIJEET DAS  
Age[year(s)] / Sex : 34 Yr(s)/Male  
Reg No : MH010712440

Report Date : 14/01/2023  
Episode No : H03000051423

## PHYSICIAN REPORT

Urine Examination : Normal  
Stool Examination :  
CBC : PLATELET COUNT - 139000  
Blood Biochemical Analysis : TGS - 165  
SGPT - 51  
X-Ray Chest : Normal  
ECG : Normal  
Treadmill (stress)Test :  
Echo Cardiography : NORMAL STUDY  
Ultrasonography : FATTY LIVER GRADE I  
ECG : NORMAL STUDY  
Audiometry :  
Other Tests :  
Special Test :

### Impression

DYSLIPIDEMIA  
THROMBOCYTOPENIA  
FATTY LIVER GRADE I

### Advice

1-BRISK WALK FOR 40 MINUTES DAILY  
2-LOW FAT HIGH FIBRE DIET  
3-REPEAT FASTING LIPID PROFILE AFTER 3 MONTHS

Examined By :

*Anuja Lakra*

Dr. Anuja Lakra



# Human Care Medical Charitable Trust



Registered Office : Sector-6,Dwarka, New Delhi- 110075

Name : MR ABHIJEET DAS  
Age[year(s)] / Sex : 34 Yr(s)/Male  
Reg No : MH010712440

Report Date : 14/01/2023  
Episode No : H03000051423

## OPHTHALMOLOGY REPORT

Presenting : -NIL-  
Complaints :  
Past History : -NIL-  
DM : Nil Years HTN : Nil Years

### Examination

	Right eye		Left eye	
Vision	6/6	With Glasses	6/6	With Glasses
Near Vision	N6	With Glasses	N6	With Glasses
Color Vision	Normal			
Ant.Segment	Normal		Normal	
Fundus	Deferred		Deferred	

Extra Exams : NONE

### Impression

Normal

### Advice

Review sos

Examined by :

Dr. Vanuli Bajpai  
MBBS,MS



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**Name** : MR ABHIJEET DAS

**Age** : 34 Yr(s) Sex :Male

**Registration No** : MH010712440

**Lab No** : 32230104796

**Patient Episode** : H03000051423

**Collection Date** : 14 Jan 2023 09:01

**Referred By** : HEALTH CHECK MHD

**Reporting Date** : 14 Jan 2023 10:21

**Receiving Date** : 14 Jan 2023 09:34

## BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Interval
Lipid Profile (Serum)			
TOTAL CHOLESTEROL (CHOD/POD)	153	mg/dl	[<200] Moderate risk:200-239 High risk:>240
TRIGLYCERIDES (GPO/POD)	165 #	mg/dl	[<150] Borderline high:151-199 High: 200 - 499 Very high:>500
HDL - CHOLESTEROL (Direct)	40	mg/dl	[30-60]
VLDL - Cholesterol (Calculated)	33	mg/dl	[10-40]
LDL- CHOLESTEROL	80	mg/dl	[<100] Near/Above optimal-100-129 Borderline High:130-159 High Risk:160-189
T.Chol/HDL.Chol ratio	3.8		<4.0 Optimal 4.0-5.0 Borderline >6 High Risk
LDL.CHOL/HDL.CHOL Ratio	2.0		<3 Optimal 3-4 Borderline >6 High Risk

**Note:**  
Reference ranges based on ATP III Classifications.  
Recommended to do fasting Lipid Profile after a minimum of 8 hours of overnight fasting.





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**Patient Episode** : H03000051423  
**Referred By** : HEALTH CHECK MHD  
**Receiving Date** : 14 Jan 2023 09:34

**Age** : 34 Yr(s) Sex :Male  
**Lab No** : 32230104796  
**Collection Date** : 14 Jan 2023 09:01  
**Reporting Date** : 14 Jan 2023 10:20

## BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Interval
LIVER FUNCTION TEST (Serum)			
BILIRUBIN-TOTAL (mod.J Groff)**	0.57	mg/dl	[0.10-1.20]
BILIRUBIN - DIRECT (mod.J Groff)	0.23 #	mg/dl	[<0.2]
BILIRUBIN - INDIRECT (mod.J Groff)	0.34	mg/dl	[0.20-1.00]
SGOT/ AST (P5P,IFCC)	30.10	IU/L	[5.00-37.00]
SGPT/ ALT (P5P,IFCC)	51.40 #	IU/L	[10.00-50.00]
ALP (p-NPP,kinetic)*	124	IU/L	[45-135]
TOTAL PROTEIN (mod.Biuret)	7.8	g/dl	[6.0-8.2]
SERUM ALBUMIN (BCG-dye)	4.6	g/dl	[3.5-5.0]
SERUM GLOBULIN (Calculated)	3.2	g/dl	[1.8-3.4]
ALB/GLOB (A/G) Ratio	1.44		[1.10-1.80]

### Note:

\*\*NEW BORN:Vary according to age (days), body wt & gestation of baby

\*New born: 4 times the adult value



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## BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Interval
KIDNEY PROFILE (Serum)			
BUN (Urease/GLDH)	13.00	mg/dl	[8.00-23.00]
SERUM CREATININE (mod.Jaffe)	0.91	mg/dl	[0.80-1.60]
SERUM URIC ACID (mod.Uricase)	5.8	mg/dl	[3.5-7.2]
SERUM CALCIUM (NM-BAPTA)	9.7	mg/dl	[8.6-10.0]
SERUM PHOSPHORUS (Molybdate, UV)	3.3	mg/dl	[2.3-4.7]
SERUM SODIUM (ISE)	140.0	mmol/l	[134.0-145.0]
SERUM POTASSIUM (ISE)	4.42	mmol/l	[3.50-5.20]
SERUM CHLORIDE (ISE / IMT)	101.7	mmol/l	[95.0-105.0]
eGFR	109.6	ml/min/1.73sq.m	[>60.0]

### Technical Note

eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to 1.73 sq.m BSA and is not applicable to individuals below 18 years. eGFR tends to be less accurate when Serum Creatinine estimation is indeterminate e.g. patients at extremes of muscle mass, on unusual diets etc. and samples with severe Hemolysis / Icterus / Lipemia.

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-----END OF REPORT-----

Dr. Neelam Singal  
CONSULTANT BIOCHEMISTRY





**Name** : MR ABHIJEET DAS **Age** : 34 Yr(s) Sex :Male  
**Registration No** : MH010712440 **Lab No** : 32230104797  
**Patient Episode** : H03000051423 **Collection Date** : 14 Jan 2023 12:15  
**Referred By** : HEALTH CHECK MHD **Reporting Date** : 14 Jan 2023 14:10  
**Receiving Date** : 14 Jan 2023 12:58

## BIOCHEMISTRY

PLASMA GLUCOSE - PP

Plasma GLUCOSE - PP (Hexokinase) 120 mg/dl [70-140]

Note : Conditions which can lead to lower postprandial glucose levels as compared to fasting glucose are excessive insulin release, rapid gastric emptying, brisk glucose absorption , post exercise

Plasma GLUCOSE-Fasting (Hexokinase) 99 mg/dl [70-100]

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-----END OF REPORT-----

**Dr. Neelam Singal**  
**CONSULTANT BIOCHEMISTRY**







**Name** : MR ABHIJEET DAS **Age** : 34 Yr(s) Sex :Male  
**Registration No** : MH010712440 **Lab No** : 33230103111  
**Patient Episode** : H03000051423 **Collection Date** : 14 Jan 2023 09:01  
**Referred By** : HEALTH CHECK MHD **Reporting Date** : 14 Jan 2023 13:02  
**Receiving Date** : 14 Jan 2023 09:26

## HAEMATOLOGY

ERYTHROCYTE SEDIMENTATION RATE (Automated) Specimen-Whole Blood

ESR 14.0 # /1sthour [0.0-10.0]

### Interpretation :

Erythrocyte sedimentation rate (ESR) is a non-specific phenomena and is clinically useful in the diagnosis and monitoring of disorders associated with an increased production of acute phase reactants (e.g. pyogenic infections, inflammation and malignancies). The ESR is increased in pregnancy from about the 3rd month and returns to normal by the 4th week postpartum.

ESR is influenced by age, sex, menstrual cycle and drugs (eg. corticosteroids, contraceptives).

It is especially low (0 -1mm) in polycythemia, hypofibrinogenemia or congestive cardiac failure and when there are abnormalities of the red cells such as poikilocytosis, spherocytosis or sickle cells.

Test Name	Result	Unit	Biological Ref. Interval
COMPLETE BLOOD COUNT (EDTA Blood)			
WBC Count (Flow cytometry)	7240	/cu.mm	[4000-10000]
RBC Count (Impedence)	5.21	million/cu.mm	[4.50-5.50]
Haemoglobin (SLS Method)	14.8	g/dL	[13.0-17.0]
Haematocrit (PCV) (RBC Pulse Height Detector Method)	45.1	%	[40.0-50.0]
MCV (Calculated)	86.6	fL	[83.0-101.0]
MCH (Calculated)	28.4	pg	[25.0-32.0]
MCHC (Calculated)	32.8	g/dL	[31.5-34.5]
Platelet Count (Impedence)	139000 #	/cu.mm	[150000-410000]
RDW-CV (Calculated)	13.4	%	[11.6-14.0]
DIFFERENTIAL COUNT			
Neutrophils (Flowcytometry)	62.0	%	[40.0-80.0]

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Age : 34 Yr(s) Sex :Male

Registration No : MH010712440

Lab No : 33230103111

Patient Episode : H03000051423

Collection Date : 14 Jan 2023 09:01

Referred By : HEALTH CHECK MHD

Reporting Date : 14 Jan 2023 10:22

Receiving Date : 14 Jan 2023 09:26

## HAEMATOLOGY

Lymphocytes (Flowcytometry)	29.0	%	[20.0-40.0]
Monocytes (Flowcytometry)	7.2	%	[2.0-10.0]
Eosinophils (Flowcytometry)	1.5	%	[1.0-6.0]
Basophils (Flowcytometry)	0.3 #	%	[1.0-2.0]
IG	0.10	%	

Complete Blood Count is used to evaluate wide range of health disorders, including anemia, infection, and leukemia. Abnormal increase or decrease in cell counts as revealed may indicate that an underlying medical condition that calls for further evaluation.

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-----END OF REPORT-----

Dr.Lakshita singh





**Name** : MR ABHIJEET DAS **Age** : 34 Yr(s) Sex :Male  
**Registration No** : MH010712440 **Lab No** : 35230101744  
**Patient Episode** : H03000051423 **Collection Date** : 14 Jan 2023 11:56  
**Referred By** : HEALTH CHECK MHD **Reporting Date** : 14 Jan 2023 13:09  
**Receiving Date** : 14 Jan 2023 11:59

## MICROBIOLOGY

VDRL TEST/RPR Specimen-Serum  
Result Non-reactive  
Method : Slide Flocculation

### Technical Note:

This is a screening test for syphilis and is also used to monitor the course of disease after therapy. This test detects the presence of antibodies to lipoprotein material from damaged cells and cardiolipin from Treponemes. False positive reactions (titre < 1:8) may occur in viral infections, connective tissue disorders and pregnancy.

Reference: Clinical diagnosis and management by laboratory methods. Henry J.B. 20 Edn. 2001 pg 1133.

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-----END OF REPORT-----

**Dr. Navin Kumar**  
**CONSULTANT MICROBIOLOGY**





NAME	Abhijeet Kumar DAS	STUDY DATE	14-01-2023 10:16:03
AGE / SEX	034Yrs / M	HOSPITAL NO.	MH010712440
REFERRING DEPT	OPD	MODALITY/Procedure	US /Ultrasound abdomen n pelvis
REPORTED ON	14-01-2023 12:30:46	REFERRED BY	Dr. Health Check MHD

## USG WHOLE ABDOMEN

### Findings:

Liver is normal in size (13.3cm) and shows grade I fatty changes. No focal intra-hepatic lesion is detected. Intra-hepatic biliary radicals are not dilated. Portal vein is normal in calibre.

Gall bladder appears echofree with normal wall thickness. Common bile duct is normal in calibre.

Pancreas is normal in size and echopattern.

Spleen is normal in size and echopattern.

Both kidneys are normal in position, size and outline. Cortico-medullary differentiation of both kidneys is maintained. No focal lesion or calculus seen. Bilateral pelvicalyceal systems are not dilated.

Urinary bladder is partially distended.

Prostate is normal in shape and echopattern. It measures 15.7cc in volume.

No significant free fluid is detected.

### Impression:

Grade I fatty liver.

Kindly correlate clinically



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AGE / SEX	034Yrs / M	HOSPITAL NO.	MH010712440
REFERRING DEPT	OPD	MODALITY/Procedure	US /Ultrasound abdomen n pelvis
REPORTED ON	14-01-2023 12:30:46	REFERRED BY	Dr. Health Check MHD

**Dr. Abhinav Pratap Singh DNB,**  
**DMC Reg No. 58170**  
**Associate Consultant, Dept. of Radiology &**  
**Imaging**



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NAME	Abhijeet Kumar DAS	STUDY DATE	14-01-2023 10:08:06
AGE / SEX	034Yrs / M	HOSPITAL NO.	MH010712440
REFERRING DEPT	OPD	MODALITY/Procedure Description	CR /Xray chest PA (CXR)
REPORTED ON	14-01-2023 12:13:04	REFERRED BY	Dr. Health Check MHD

## X-RAY CHEST - PA VIEW

### Findings:

Visualized lung fields appear clear.

Both hilar shadows appear normal.

Cardiothoracic ratio is within normal limits.

Both hemidiaphragmatic outlines appear normal.

Both costophrenic angles are clear.

Kindly correlate clinically



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AGE / SEX	034Yrs / M	HOSPITAL NO.	MH010712440
REFERRING DEPT	OPD	MODALITY/Procedure Description	CR /Xray chest PA (CXR)
REPORTED ON	14-01-2023 12:13:04	REFERRED BY	Dr. Health Check MHD

**Dr. Aarushi MD,DNB, DMC/R/03291  
Consultant Radiologist**



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010712440

mr.abhijeet das kumar

1/14/2023 9:19:45 AM

34 Years

Male

Rate 82 . Sinus rhythm.....normal P axis, V-rate 50- 99

PR 125

QRSD 87

QT 371

QTc 434

--AXIS--

P 48

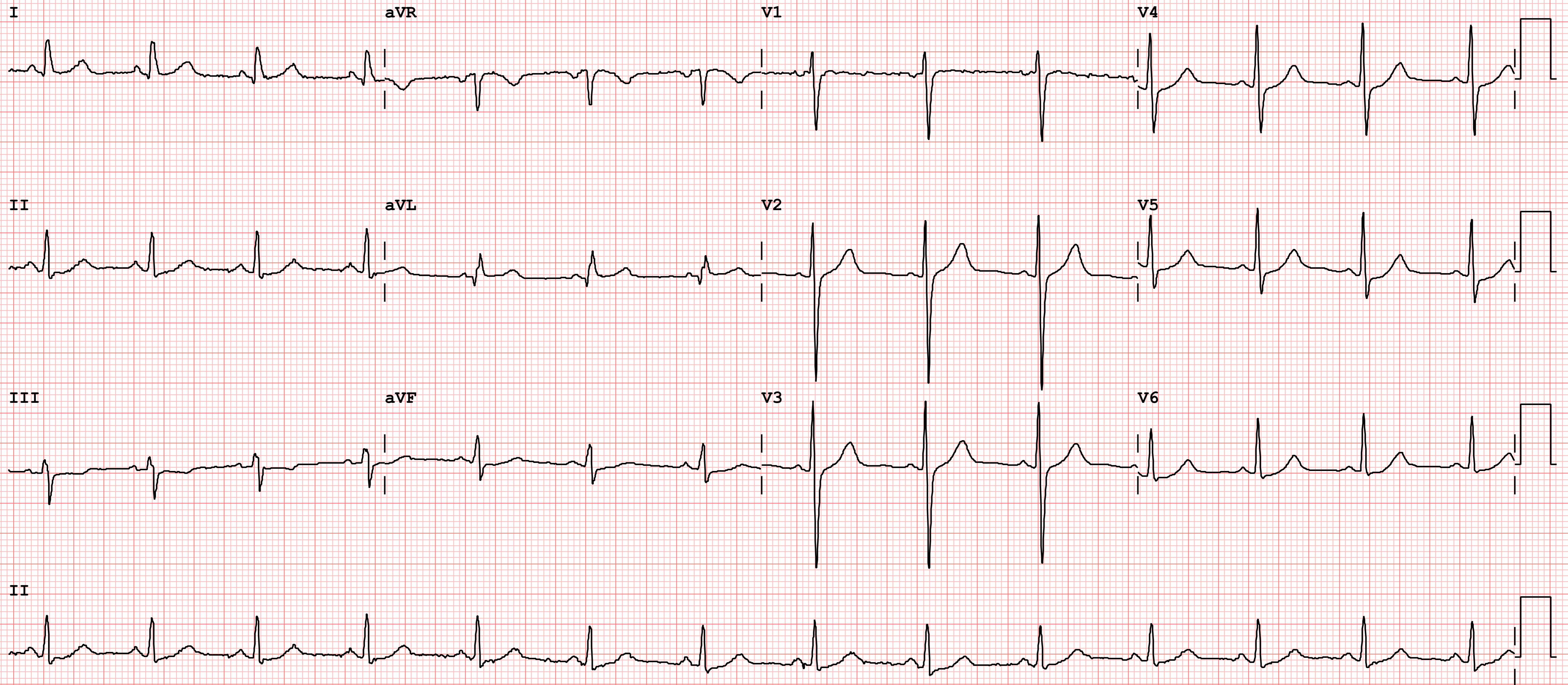
QRS 26

T 25

- NORMAL ECG -

12 Lead; Standard Placement

Unconfirmed Diagnosis



Device:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 60~ 0.15-100 Hz

100B CL

P?