



Indira Health And Lifestyle Private Limited.
NABL Accredited Laboratory
Eucharistic Congress Bldg. No. 1, Opp. Café Leopold,
Close to Delhi Darbar Hotel, Convent Street, Colaba, Mumbai - 400 001.
Tel.: 022-22021122, ☎: 8450982226,
E: apolloclinicmumbai@gmail.com, apollocliniccolaba@gmail.com



Name : Mr. Ramesh Ramavath Gender : Male Age : 33 Years
UHID : AF-001001716 Bill No : Lab No : c-355-23
Ref. by : Arcofemi Healthcare Sample Col.Dt : 04/04/2023 09:29
Barcode No : 1340 Reported On : 04/04/2023 17:18

TEST RESULTS UNITS BIOLOGICAL REFERENCE INTERVAL

PLASMA GLUCOSE

Fasting Plasma Glucose : 98 mg/dL Normal < 100 mg/dL
Impaired Fasting glucose : 101 to 125 mg/dL
Diabetes Mellitus : >= 126 mg/dL
(on more than one occasion)
(American diabetes association guidelines 2016)

Post Prandial Plasma Glucose : 91 mg/dL Normal < 140 mg/dL
Impaired Post Prandial glucose : 140 to 199 mg/dL
Diabetes Mellitus : >= 200 mg/dL
(on more than one occasion)
(American diabetes association guidelines 2016)

Method : Hexokinase

Vasanti Gondal
Entered By

Ms Kaveri Gaonkar
Verified By

Dr. Milind Patwardhan
M.D(Path)
Chief Pathologist

End of Report
Results are to be correlated clinically



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TEST RESULTS BIOLOGICAL REFERENCE INTERVAL

HbA1c(Glycosylated Haemoglobin)WB-EDTA

(HbA1C) Glycosylated Haemoglobin : 5.4 % Normal <5.7 %
Pre Diabetic 5.7 - 6.5 %
Diabetic >6.5 %
Target for Diabetes on therapy < 7.0 %
Re-evaluation of therapy > 8.0 %

Mean Blood Glucose : 108.28 mg/dL

Correlation of A1C with average glucose

A1C (%)	Mean Blood Glucose (mg/dl)
6	126
7	154
8	183
9	212
10	240
11	269
12	298

Method High Performance Liquid Chromatography (HPLC).

INTERPRETATION

- * The HbA1c levels correlate with the mean glucose concentration prevailing in the course of Pts recent history (apprx 6-8 weeks) & therefore provides much more reliable information for glycemia control than the blood glucose or urinary glucose.
- * This Methodology is better than the routine chromatographic methods & also for the diabetic pts. having HEMOGLBINOPATHIES OR UREMIA as Hb variants and uremia does not INTERFERE with the results in this methodology.
- * It is recommended that HbA1c levels be performed at 4 - 8 weeks during therapy in uncontrolled DM pts. & every 3 - 4 months in well controlled diabetics .
- * Mean blood glucose (MBG) in first 30 days (0-30) before sampling for HbA1c contributes 50% whereas MBG in 90 - 120 days contribute to 10% in final HbA1c levels

Sushant Gaikwad
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TEST RESULTS UNITS BIOLOGICAL REFERENCE INTERVAL

LFT(Liver Function Tests)-Serum

S.Total Protein (Biuret method)	7.86	g/dL	6.6 - 8.7
S.Albumin (BCG method)	4.74	g/dL	3.5 - 5.2
S.Globulin (Calculated)	3.12	g/dL	2 - 3.5
S.A/G Ratio:(Calculated)	1.52		0.9 - 2
S.Total Bilirubin (DPD):	0.52	mg/dL	0.1 - 1.2
S.Direct Bilirubin (DPD):	0.12	mg/dL	0.1 - 0.3
S.Indirect Bilirubin (Calculated)	0.4	mg/dL	0.1 - 1.0
S.AST (SGOT)(IFCC Kinetic with P5P):	18	U/L	5 - 40
S.ALT (SGPT) (IFCC Kinetic with P5P):	16	U/L	5 - 41
S.Alk Phosphatase(pNPP-AMP Kinetic):	86	U/L	40 - 129
S.GGT(IFCC Kinetic):	22	U/L	11 - 50

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TEST RESULTS UNITS BIOLOGICAL REFERENCE INTERVAL

Lipid Profile- Serum

S. Cholesterol(Oxidase)	210	mg/dL	Desirable < 200 Borderline:>200-<240 Undesirable:>240
S. Triglyceride(GPO-POD)	234	mg/dL	Desirable < 150 Borderline:>150-<499 Undesirable:>500
S. VLDL:(Calculated)	46.8	mg/dL	Desirable <30
S. HDL-Cholesterol(Direct)	33.0	mg/dL	Desirable > 60 Borderline:>40-<59 Undesirable:<40
S. LDL:(calculated)	130.2	mg/dL	Desirable < 130 Borderline:>130-<159 Undesirable:>160
Ratio Cholesterol/HDL	6.4		3.5 - 5
Ratio of LDL/HDL	3.9		2.5 - 3.5

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RFT - Renal Profile-serum

S.Urea(Urease-GLDH)	11.4	mg/dL	10.0 - 45.0
S. Urea Nitrogen(Calculated)	5.32	mg/dL	5 - 20
S.Creatinine(Jaffe's Kinetic)	0.84	mg/dL	0.50 - 1.3
S.Uric Acid(Uricase-POD)	6.0	mg/dL	3.4 - 7.0
S.Total Protein(Biuret)	7.86	g/dL	6.6 - 8.7
S.Albumin(BCG)	4.74	g/dL	3.5 - 5.2
S.Globulin(Calculated)	3.12	g/dL	2 - 3.5
A/G Ratio(Calculated)	1.52		0.9 - 2
S.Sodium(Na) (ISE-Direct)	140	mmol/L	135 - 145
S.Potassium(K) (ISE-Direct)	4.2	mmol/L	3.5 - 5.3
S.Chloride(Cl) (ISE-Direct)	103	mmol/L	95 - 106
S.Calcium(NM-BAPTA)	9.23	mg/dL	8.6 - 10.0
S.Phosphorus(UV Phosphomolybdate)	2.63	mg/dL	2.5 - 4.5

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TEST

RESULTS

Blood Grouping (ABO & Rh)-WB(EDTA) Serum

ABO Group:

:AB:

Rh Type:

Positive

Method :

Tube Agglutination (forward and reverse)

Anushka Chavan
Entered By

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TEST RESULTS BIOLOGICAL REFERENCE INTERVAL

HAEMOGRAM(CBC,ESR,P/S)-WB (EDTA)

Haemoglobin(Colorimetric method)	15.3	g/dl	13 - 18
RBC Count (Impedance)	5.22	Millions/cumm.	4 - 6.2
PCV/Haematocrit(Calculated)	46.1	%	35 - 55
MCV:(Calculated)	88.4	fl	78 - 98
MCH:(Calculated)	29.2	pg	26 - 34
MCHC:(Calculated)	33.1	gm/dl	30 - 36
RDW-CV:	15.6	%	11.5 - 16.5
Total Leucocyte count(Impedance)	6170	/cumm.	4000 - 10500
Neutrophils:	44	%	40 - 75
Lymphocytes:	48	%	20 - 40
Eosinophils:	04	%	0 - 6
Monocytes:	04	%	2 - 10
Basophils:	00	%	0 - 2
Platelets Count(Impedance method)	2.09	Lakhs/c.mm	1.5 - 4.5
MPV	9.9	fl	6.0 - 11.0
ESR(Westergren Method)	05	mm/1st hr	0 - 20
Peripheral Smear (Microscopic examination)			
RBCs:	Normochromic, Normocytic		
WBCs:	Lymphocytosis		
Platelets	Adequate		
Note:	Test Run on 5 part cell counter. Manual diff performed.		

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TEST RESULTS UNITS BIOLOGICAL REFERENCE INTERVAL

Thyroid (T3,T4,TSH)- Serum

Total T3 (Tri-iodo Thyronine) (ECLIA)	2.23	nmol/L	1.3 - 3.1 nmol/L
Total T4 (Thyroxine) (ECLIA)	94.34	nmol/L	66 - 181 nmol/L
TSH-Ultrasensitive (Thyroid-stimulating hormone) Method : ECLIA	0.512	μIU/ml	Euthyroid : 0.35 - 5.50 μIU/ml Hyperthyroid : < 0.35 μIU/ml Hypothyroid : > 5.50 μIU/ml

Grey zone values observed in physiological/therapeutic effect.

Note:

T3 :

1. Decreased values of T3 (T4 and TSH normal) have minimal Clinical significance and not recommended for diagnosis of hypothyroidism.
2. Total T3 and T4 values may also be altered in other conditions due to changes in serum proteins or binding sites ,Pregnancy, Drugs (Androgens,Estrogens,O C pills, Phenytoin) etc. In such cases Free T3 and free T4 give corrected Values.
3. Total T3 may decrease by < 25 percent in healthy older individuals

T4 :

1. Total T3 and T4 Values may also be altered in other condition due to changes in serum proteins or binding sites, Pregnancy Drugs (Androgens,Estrogens,O C pills, Phenytoin), Nerphrosis etc. In such cases Free T3 and Free T4 give Corrected values.

TSH :

1. TSH Values may be transiently altered because of non thyroidal illness like severe infections,liver disease, renal and heart failure. Severe burns, trauma and surgery etc.
2. Drugs that decrease TSH values e,g L dopa, Glucocorticoids.
3. Drugs that increase TSH values e.g. Iodine,Lithium, Amiodarone

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Mr. RAMESH RAMAVATH
 33 09:28 M
 04-04-2023 AF-001001716

 PLF1091671

Patient Name :	04-04-2023 AF-001001716	MR No:
Age/Sex :		Date:
Referred By :		

Health Check-Up Report

PRESENT COMPLAINTS:

- None

PRESENT MEDICATIONS:

PERSONAL HISTORY

Unmarried /Married

Diet : Eggetarian /Vegetarian / Mixed

Habits: Tobacco : Chews/Smokes
 Alcohol : 

Bladder : 

Bowels : 

Sleep : Normal / Disturbed

Physical Activity : Active/ Moderate / Sedentary

Drug / Any other allergy : N.

Menstrual History : NA

PAST MEDICAL HISTORY

NA

FAMILY HISTORY

Mother - Hemiparesis.
 Father - HTN

Physical Examination Findings

General Examination

Height	164	cm
Weight	59.8	kg
BMI	22.2	kg/m ²
Pulse	84.	/min
BP	120/70.	mm of Hg
RR	16	/min
Evidence of : pallor / Icterus / Pedal Oedema / Cyanosis / Clubbing		

SpO₂ = 99.1

Abdominal Examination:

Cardiovascular System:

Respiratory System:


Musculoskeletal System:

Advice:

Doctor's Sign & Stamp:

Dr Merchant Adnaan
Regn.No I-80064-A
Physician

ENT EVALUATION

Name:	Mr. RAMESH RAMAYATH 33 09:28 M	MR NO:
Age/Gender:	04-04-2023 AF-001001716  UR874626	Date:

COMPLAINTS, IF ANY:

Ear:-

Tympanic Membrane:-
Pre-auricular:-
Pina / EAC:
Mastoid Tuning Fork tests:-

NOSE:-

External Nose:-
Anterior Rhinoscopy:-
Post - Nasal space:-

THROAT:-

Tongue / palate / Teeth:-


NECK:-

Nodes:-
Thyroid:-
Glands:-

Handwritten signature/initials

INVESTIGATIONS:

IMPRESSION:- ENT complaints are


Dr .Sameer Lambay
M.S. (ENT Surgeon), D.O.R.L
Reg No. MMC/ 84342

OPHTHALMIC EVALUATION

Name:	Mr. RAMESH RAMAVATH	MR NO:
Age/Sex:	33 09:28 M 04-04-2023 AF-001001716	Date:



Examination

Right Eye

Left Eye

Visual Acuity

Distance Vision

— 6/6 —

Near Vision

— N6 —

Color Vision

Normal/~~Defective~~

Refraction Prescription :

Right Eye			Left Eye		
Sph.	Cyl.	Axis	Sph.	Cyl.	Axis
Remarks			Remarks		

SLIT LAMP EXAMINATION:

Anterior Segment: NAD

IOP :- 18 mm of Hg.

Posterior Segment: WNL

REMARKS: NORMAL

↓

Dr. Poonawala Murtaza H.
M.S. (Ophthal)
Reg. No. 85594
Consultant Ophthalmologist

WNL = Within Normal Limits
NAD = No abnormality detected.

DENTAL CHECKUP

Name:	Mr. RAMESH RAMAVATH 33 09:28 M	MR NO:
Age/Gender :	04-04-2023 AF-001001716  UR874626	Date:

Medical history: Diabetes Hypertension _____

EXAMINATION	UPPER RIGHT	UPPER LEFT	LOWER LEFT	LOWER RIGHT
Calculus& Stains	+	+	+	+
Mobility				
Caries (Cavities)				
a)Class 1 (Occlusal)				
b)Class 2 (Proximal)				
c)Class 5 (Cervical)				
Faulty Restoration				
Faulty Crown				
Fractured Tooth				
Root Pieces				
Impacted Tooth				
Missing Tooth				
Existing Denture				

TREATMENT ADVISED:

TREATMENT	UPPER RIGHT	UPPER LEFT	LOWER LEFT	LOWER RIGHT
Restoration / Filling				
Root Canal Therapy				
Crown				
Extraction				

Oral Prophylaxis: Scaling & polishing

Orthodontic Advice for Braces: Yes / No

Prosthetic Advice to Replace Missing Teeth: Denture Bridge Implant

Oral Habits: Tobacco Cigarette Others since ___ years

Advice to quit any form of tobacco as it can cause cancer.

Other Findings: _____

Enamel Hypoplasia seen in ☺ teeth.



Dr. Prachi Shah Manudhane
BDS, GDC Mumbai (Reg.No. A-17381)
Advanced Prosthodontics, UCLA, California, USA

Mr. RAMESH RAMAVATH
33 09:28 M
04-04-2023 AF-001001716
SS678331


NUTRITION PRESCRIPTION For LOW FAT

	Registration Date:
Ht./Wt.:	Cms./ Kgs.

Keeping in mind your Medical Reports, health status, food intake, dietary habits, personalized Dietary Instructions are provided here.

DIETARY RECOMMENDATIONS:-Changes with regards to your present Dietary habits,

- Start your day with 1 tsp of methi seeds soaked overnight. Gulp methi along with water.
- Have 2 walnuts and 2 tsps of flaxseed daily.
- Have Salad vegs like- cucumber, tomato, onion, cabbage, carrots and raddish.
- Have roasted snacks like popcorns, channas, riceflakes, puffed rice.
- **CEREALS-** Include more of Whole grains in a diet and avoid refined flour and its products .
- **VEGS-** Include more of green leafy vegetables.
- **MILK-** Avoid butter, ghee, cream, cheese, whole milk, Dalda .
- **NUTS-** Avoid coconut, peanut, cashewnut.
- **NON-VEG-** Have more of Egg whites, chicken, fish.
- Limit papad, pickles, oily chutneys, fried foods, sugar, sweets, creamy foods, mayonnaise, chocolates, ice-cream, junk foods & fast foods.
- Use Non-stick cookware for cooking your food.
- Use groundnut, Mustard, Til ,Rice bran oil. ½ liter per person /month
- Oil /Ghee consumption – 3-4 tsp/day. Cook your meal separately to restrict fat in diet.
- Avoid vanaspati, margarine, bakery products like cakes, pastries, cream-biscuits.
- Drink plenty of water, at least 12-15 glasses (2.5 -3 liters) / day.
- Exercise daily for 45-60 mins either brisk walking, jogging, swimming. If medical complaint then as per doctor's advise.


Dr. Sabiha Siddiqui
BHSc,P.G.Dietetics,CDE,DNYS
(Head Clinical Dietitian & Nutritionist)

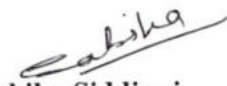
DIET CHART

TIME	MEAL	MENU	AMOUNT [HOUSEHOLD MEASURES]
7:30 am	Early morning	Warm Water	1 glass
		Aerobic Exercise	45 mins. (minimum)
9:00am	Breakfast	Tea / coffee/ Milk (skimmed)	50 ml milk
		Veg poha /Oats Upma / Veg Dahlia	1 vati
		Phulka / Methi Khakra / Bhakri	Medium size -2 nos (no oil / ghee)
11:00am	Mid – Morning	Fruit	1 Medium size
1: 00 pm	Lunch	Salad / Thin soup	1 Big Bowl
		Cucumber ,Tomato, cabbage, onion , sprouted pulses . etc	
		Roti / Phulka	2 small / 1 big
		Vegetables	1-2 Vati (cook in 1 tsp oil)
		Rice	1 vati
		Dal	1 Vati
		Curd (skimmed)/ Buttermilk	1/2 cup /1 glass
4:00pm – 6.00pm	Evening	Diet Khakra / digestive oats biscuit	1 / 2 nos only
		Roasted chana/Roastedrice flakes / sprouts bhel, /sweet corns	1 handful 1 small katori
		Tea	1 cup

8:30pm	Dinner	SAME AS LUNCH (except rice)	
	OPTIONS	Veg khichdi + kadhi /curd	2 Vatis / 1 vati
	OPTIONS	Bhakri -Wheat /Bajra/Jowar Vegetable Dal	2 nos 1 vati 1 vati
10:00pm	Bed – Time	Milk (Skimmed)	100 ml milk

Total calories/day	Oil /Ghee /day	Salt/day
1500 Kcals	4 tsps	3/4 tsp

- Oil intake should be ½ liter per person per month.
- Consume Green tea/ Herbal tea 2-3 cups/ day.
- Take 1 Tsp Flaxseed (Alsi) after lunch and dinner (optional)


Dr. Sabiha Siddiqui
BHSc,P.G.Dietetics,CDE,DNYS
(Head Clinical Dietitian & Nutritionist)

MR RAMESH RAMAVATH
1716

33 Years Male

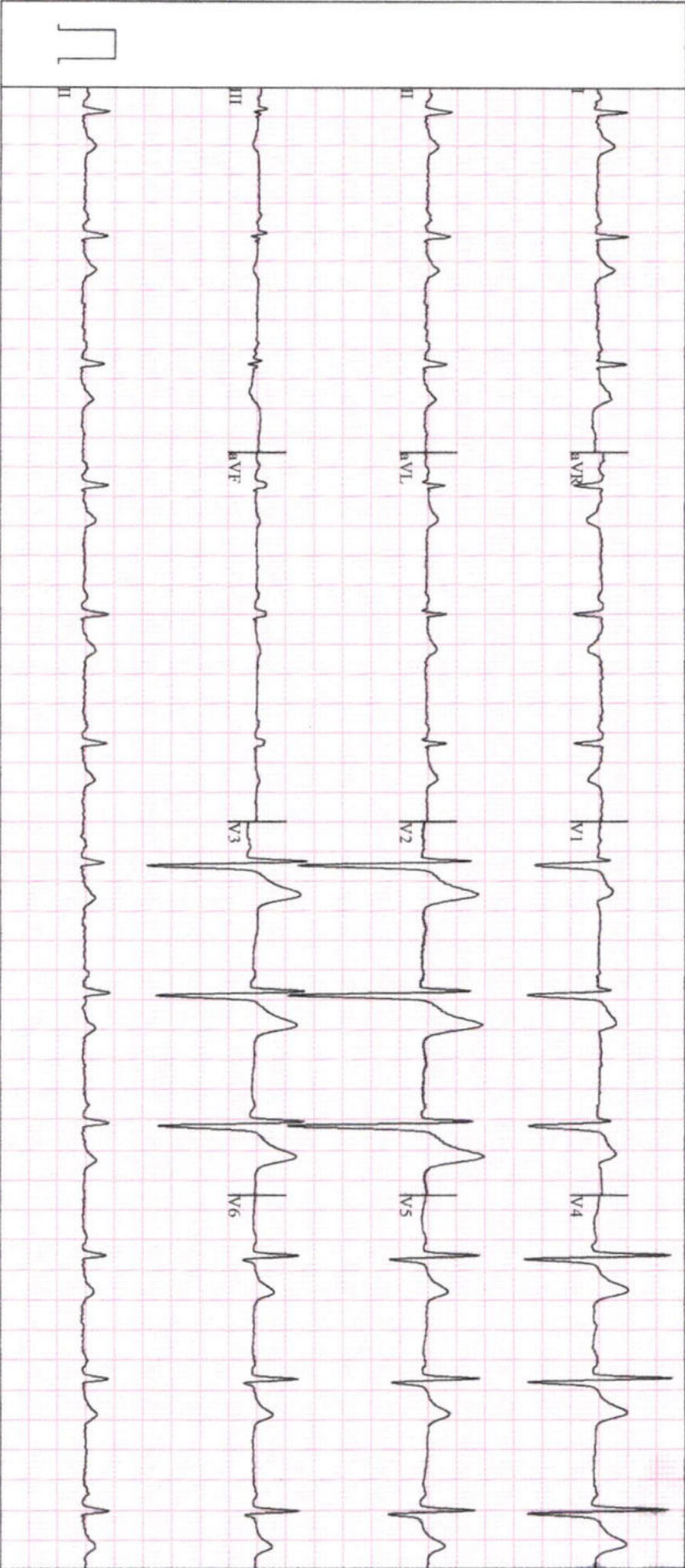
04.04.2023 9:59:59
THE APOLLO CLINIC
COLABA
MUMBAI-400001

QRS : 82 ms
QT / QTcBaz : 354 / 382 ms
PR : 138 ms
P : 94 ms
RR / PP : 858 / 857 ms
P / QRS / T : 27 / 30 / 10 degrees

Normal sinus rhythm
Normal ECG

M. Sundeep Amberkar
DR. SUNDEEP AMBERKAR
M.D.F.C.P.S. DIP. ECHO
Consultant Cardiologist
Reg. No. 87773

70 bpm
--/-- mmHg



GE MACC2000

1.1

12SL™ v241

25 mm/s

10 mm/mV

ADS

0.56-20 Hz

50 Hz

Unconfirmed
4x2.5x3_25_R1

1/1

NAME : MR. RAMESH RAMAVATH
AGE/SEX : 33 YEARS / MALE **MR NO : 1716**
REF. BY : ARCOFEMI **DATE : 04/04/2023**

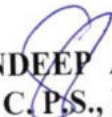
2D ECHOCARDIOGRAPHY AND COLOR DOPPLER STUDY

2D ECHOCARDIOGRAPHY FINDINGS :

1. No LV Dilatation. No LV Wall Hypertrophy.
2. No Significant LV RWMA seen at rest.
3. Good LV Systolic function. LVEF appears to be 60 %.
4. No LV Diastolic Dysfunction. Normal LVEDP.
5. Structurally normal all cardiac valves. No PAH
6. Normal sized LA / RA/ RV with good RV contractility. No Hepatic Congestion.
7. IAS and IVS appear intact.
8. No obvious clot seen.
9. No vegetations or pericardial effusion.
10. Normal Sinus Rhythm.

IMPRESSION

Normal all Cardiac chambers.
Normal LV systolic function.
No LV DD. Normal LVEDP.
Normal valves. No PAH.
No Clots / Vegetations/Pericardial effusion.
Normal Sinus Rhythm.


DR SUNDEEP AMBERKAR
M.D., F. C. P.S., Dip. Echo.

APOLLO CLINIC (COLABA)

Name: RAMESH RAMAVATH
MRN: 23-04-04-111135

Study Date: 04/04/2023 11:11
Gender: Male

Cardiac

Dimension

MMode

IVSd (MM): 1.15 cm	IVSs (MM): 1.51 cm
LVIDd (MM): 4.32 cm	LVIDs (MM): 2.97 cm
LVPWd (MM): 1.11 cm	LVPWs (MM): 1.67 cm

AoR Diam (MM): 2.38 cm	AV Cusp Sep: 1.75 cm
LA Dimen (MM): 3.17 cm	

EDV (MM-Teich): 84.1 ml	EF (MM-Teich): 59.3 %
ESV (MM-Teich): 34.3 ml	FS (MM-Teich): 31.2 %
IVS/LVPW (MM): 1.04	IVS % (MM): 31.0 %
LA/Ao (MM): 1.33	LV Mass (Cubed): 171 grams
LVPW % (MM): 50.0 %	

Aortic Valve

Doppler

AV Vmax: 131 cm/s	LVOT VTI: 13.0 cm
AV Max PG: 6.90 mmHg	LVOT Vmax: 94.5 cm/s
	LVOT Max PG: 3.57 mmHg
	LVOT Vmean: 46.7 cm/s
	LVOT Mean PG: 1.14 mmHg

Mitral Valve

MV E-F Slope: 8.98 cm/s
 MV E-F Time: 0.234 sec
 MV E-F Dist: 2.10 cm
 MV EPSS: 0.397
 cm

Doppler

MV Peak A Vel: 59.0 cm/s
 MV Peak A PG: 1.39
 mmHg

MV Peak E Vel: 82.5 cm/s (Avg.)
 MV Peak E PG: 2.72 mmHg
 (Avg.)
 MV Dec Slope: 404 cm/s²
 MV Dec Slope Time: 0.202 sec
 MV DS P1/2t: 59.7 msec

MV Peak E Vel: 82.5 cm/s (Avg.)
 MV Peak E PG: 2.72 mmHg
 (Avg.)

MV E/A: 1.40

Tricuspid Valve

Doppler

TR Vmax: 213 cm/s (Avg.)
 TR Max PG: 18.2 mmHg
 (Avg.)

Pulm Valve

Doppler

PI End Dias Vel: 171 cm/s	PV Vmax: 119 cm/s
PI End Dias PG: 11.7 mmHg	PV Max PG: 5.67 mmHg

Interpretation Summary

Comments

Patient Name : Mr. Ramesh Ramavath

Age : 33 yrs

Ref. By : Arcofemi

MR No : AF001001718

Sex : Male

Date : 04-04-2023

X-RAY CHEST PA VIEW

The lungs are clear.

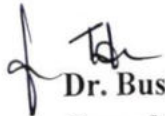
Heart size is normal.

Mild unfolding of aorta.

Pleural spaces are clear.

Bilateral costophrenic angles are clear.

Bony thorax and soft tissues are unremarkable.



Dr. Bushra Rasool
Consultant Radiologist

Patient Name : Mr. Ramesh Ramavath
Age : 33 yrs
Ref. By : Arcofemi

MR No : AF001001718
Sex : Male
Date : 04-04-2023

ULTRASOUND OF ABDOMEN AND PELVIS

LIVER: It is normal in size and shape. It measures 13.1 cm. The parenchyma shows normal homogeneous echo-texture. No focal lesion seen. Intra-hepatic biliary and portal radicles are normal. The main portal vein is normal.

GALL BLADDER: is partially distended. **Two polyps are noted approx measuring 7.2 mm and 3.9 mm.** No peri-cholic abnormality seen. The common bile duct is normal. No evidence of choledocholithiasis seen.

PANCREAS: It is normal in size and echotexture. No focal lesion seen. No peri-pancreatic collection noted. The main pancreatic duct is normal.

SPLEEN: It is normal in size and echotexture. Splenic vein is normal.

BOTH KIDNEYS: Both kidneys are normal in size, shape and position. The parenchyma shows normal echo-texture. Cortico-medullary differentiation is well maintained.

Right kidney measures 9.9 x 5.1 cm. **Mid pole calcification.**

Left kidney measures 10.9 x 5.3 cm.

No evidence of calculus or hydronephrosis seen.

URINARY BLADDER: It is adequately distended. The margins are smooth. No vesical mass or calculus seen.

PROSTATE: is normal in size and shape. The parenchyma is normal. It measures 3.1 x 3.2 x 3.2 cm. The weight measures approx 17.4 cc.

No ascitis or lymphadenopathy noted.

IMPRESSION:

- POLYPS IN GALL BLADDER.
- NO OTHER SIGNIFICANT ABNORMALITY IS SEEN.


Dr. Bushra Rasool
Consultant Radiologist

Note: *USG examinations have their limitations due to patient body habitus and bowel gas. Bowel abnormalities may not be detected on sonography. This document is not valid for medico-legal purpose.*