

Name : Mr. SIDDHARTHA TALUKDAR (34 /M)

Date : 24/02/2023

Address : 70, C ROY PATH, PO-SHYAMNAGAR, SAI APPRT, NORTH 24 PARGANAS, NORTH
24 PARGANAS, WEST BENGAL, INDIA

Examined by :

UHID : AMHL.0002097933

Package : MEDI WHEEL FULL BODY HCK - MALE (BELOW 40 YRS WITH
TMT/ECHO)

AHC No : AMHLAH168137



CHIEF COMPLAINTS

Snoring

PRESENT KNOWN ILLNESS

No history of - Diabetes mellitus,
Hypertension,
Dyslipidemia, Thyroid
disorder



DRUG ALLERGY

NO KNOWN ALLERGY

:25/02/2023



SYSTEMIC REVIEW

Cardiovascular system

- Nil Significant

Respiratory system

- Nil Significant

Gastrointestinal system

- Nil Significant

Genitourinary system

- Nil Significant

Central nervous system

- Nil Significant

Eyes

- Nil Significant

ENT

- Nil Significant



Past medical history

Past medical history - nil significant



Personal history

Marital status - Married

No. of children - 1
Diet - Non Vegetarian
Alcohol - consumes alcohol
occasionally
Smoking - Yes
Type - Cigarette
Frequency - occasional
Chews tobacco - No
Physical activity - Mild



Family history

Father - has expired
Mother - alive
Brothers - 1
Diabetes - mother
Hypertension - mother
Coronary artery
disease - none
Cancer - None

PHYSICAL EXAMINATION



General

Build - obese
Height - 163
Weight - 87
BMI - 32.74
Pallor - No
Oedema - no



Cardiovascular system

Heart rate (Per minute) - 102
Rhythm - Regular
- B.P. Sitting
Systolic(mm of Hg) - 110
Diastolic(mm of Hg) - 70
Heart sounds - S1S2+

Respiratory system

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Breath sounds - Normal vesicular breath sounds

 **Abdomen**

Organomegaly - No

Tenderness - No

 **Central nervous system**

- No neurological deficit

Printed By : Benazir Begaum

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COMPLETE HAEMOGRAM PROFILE

Test Name	Result	Unit	Level	Range
Hemoglobin	17.0	g/dl	●	13.0-17.0
RBC COUNT	5.66 *	Million/ ul	●	4.5-5.5
Hematocrit - Hct:	50.8	%	●	41-53
MCV	89.8	fl	●	83-101
MCH	30.1	pg	●	27-32
MCHC	33.5	%	●	31.5-34.5
RDW	15.9 *	%	●	11.8-14.0
WBC Count	11900 *	/cu mm	●	4000-10000
Platelet Count	2.96	lacs/cu mm	●	1.5-4.0
Neutrophils	63	%	●	40-80
Lymphocytes	28	%	●	20-40
Monocytes	07	%	●	2-10
Eosinophils	02	%	●	01-06
Basophils	00	%	●	0-0
RBC:	Normocytic Normochromic cells			
Platelets:	Adequate.			
ERYTHROCYTE SEDIMENTATION RATE (ESR)	04	mm/1st hr	●	0-15

URINE ROUTINE AND MICROSCOPY

Test Name	Result	Unit	Level	Range
Volume:	30	mL		
Colour:	Pale Straw			
Appearance	Clear			
Specific Gravity	1.005			
pH:	6.0			
Albumin:	Not Detected			
Glucose	Not Detected			
Ketone:	Not Detected			
Bile Pigments	Not Detected			
RBC	Nil	/hpf		
Pus Cells	Occasional/hpf			
Epithelial Cells	Occasional/hpf			

Casts: Not Found
 Crystals: Not Found
 Note: Biological reference interval
 RBC- 0-2/hpf
 Pus Cell - 0-5/hpf.

URINE SUGAR - POST PRANDIAL (QUALITATIVE)

Test Name	Result	Unit	Level	Range
URINE GLUCOSE(POST PRANDIAL)	Nil			

URINE SUGAR- FASTING(QUALITATIVE)

Test Name	Result	Unit	Level	Range
URINE GLUCOSE(FASTING)	Nil			

BLOOD GROUPING AND TYPING (ABO AND RH)

Test Name	Result	Unit	Level	Range
ABO Group:	O			
Rh (D) Type:	POSITIVE			

LIVER FUNCTION TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
ALT(SGPT) - SERUM	53 *	U/L	●	10-40
ALBUMIN - SERUM	4.2	g/dL	●	3.5-5.1
ALKALINE PHOSPHATASE - SERUM	133 *	U/L	●	53-128
AST (SGOT) - SERUM	28	U/L	●	10-42
BILIRUBIN TOTAL - SERUM	0.7	mg/dL	●	0.0-1.0

LIPID PROFILE TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
CHOLESTEROL - SERUM	277 *	mg/dL	●	0-200

CREATININE - SERUM

Test Name	Result	Unit	Level	Range
CREATININE - SERUM	0.9	mg/dL	●	0.9-1.3

● Within Normal Range ● Borderline High/Low ● Out of Range

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LIVER FUNCTION TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM	131 *	U/L	●	7-64

GLUCOSE - PLASMA (FASTING)

Test Name	Result	Unit	Level	Range
GLUCOSE - PLASMA (FASTING)	94	mg/dL	●	70-99

GLUCOSE - PLASMA (POST PRANDIAL)

Test Name	Result	Unit	Level	Range
GLUCOSE - PLASMA (POST PRANDIAL)	103	mg/dL	●	70-140

HBA1C (GLYCOSYLATED HAEMOGLOBIN)-WHOLE BLOOD

Test Name	Result	Unit	Level	Range
HBA1C (GLYCOSYLATED HAEMOGLOBIN)-WHOLE BLOOD	5.5	%	●	Nondiabetic : 4 - 5.6 % Prediabetics : 5.7 - 6.4% Diabetes : >= 6.5% ADA Therapeutic goal : <7%

LIPID PROFILE TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
HDL CHOLESTEROL - SERUM	54	mg/dL	●	30-70
LDL CHOLESTEROL -SERUM	193 *	mg/dL	●	Optimal: <100
VLDL CHOLESTEROL - SERUM (Calculated)	30	mg/dL	●	0-35

LIVER FUNCTION TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
PROTEIN TOTAL - SERUM	7.7	g/dL	●	6.4-8.3
GLOBULIN: (CALCULATED) - SERUM	3.5	g/dL	●	1.8-3.6

THYROID PROFILE - I(T3,T4 AND TSH)

Test Name	Result	Unit	Level	Range
TOTAL T3: TRI IODOTHYRONINE - SERUM	1.0	ng/ml	●	0.8-2
TOTAL T4: THYROXINE - SERUM	7.6	µg/dL	●	5.1-14.1

LIPID PROFILE TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
TRIGLYCERIDES - SERUM	201 *	mg/dL	●	0-150

THYROID PROFILE - I(T3,T4 AND TSH)

Test Name	Result	Unit	Level	Range
TSH: THYROID STIMULATING HORMONE - SERUM	2.9	µIU/mL	●	0.270-4.200

URIC ACID - SERUM

Test Name	Result	Unit	Level	Range
URIC ACID - SERUM	6.7	mg/dL	●	3.5-7.2

LIVER FUNCTION TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
BILIRUBIN CONJUGATED (DIRECT) - SERUM	0.1	mg/dL	●	0.0-0.2

BUN (BLOOD UREA NITROGEN)

Test Name	Result	Unit	Level	Range
BUN (BLOOD UREA NITROGEN)	8.0	mg/dL	●	7.0-18.0

LIVER FUNCTION TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
A/G - RATIO	1.2		●	1.0-2.0

ECG

SINUS RHYTHM.
COMPLETE RIGHT BUNDLE BRANCH BLOCK.
MILD LEFT AXIS DEVIATION.

TREADMILL TEST / STRESS TEST

● Within Normal Range ● Borderline High/Low ● Out of Range

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STRESS TEST IS NEGATIVE FOR PROVOCABLE MYOCARDIAL ISCHAEMIA.

ULTRASOUND SCREENING WHOLE ABDOMEN

* Grade-I fatty liver.

Dr. ARJUN ROY
DNB RESIDENT
In consultation with

X-RAY CHEST PA

Chest skiagram does not reveal any significant abnormality.

INVESTIGATIONS NOT DONE / NOT YET REPORTED / NOT PART OF PACKAGE(LAB,RADIOLOGY & CARDIOLOGY)

Haematology

STOOL ROUTINE

 Within Normal Range  Borderline High/Low  Out of Range

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Printed By :

AHC Physician / Consultant Internal Medicine

Note :- The Health Check-up examinations and routine investigations have certain limitations and may not be able to detect all the diseases. Any new or persisting symptoms should be brought to the attention of the Consulting Physician. Additional tests, consultations and follow up may be required in some cases.