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LIFE'S ON

TMT INVESTIGATION REPORT

Patient Name	: Mr. Vinod KUMAR	Location	: Ghaziabad
Age/Sex	: 49Year(s)/male	Visit No	: V0000000001-GHZB
MRN No	:MH010752397	Order Date	: 02/02/2023
Ref. Doctor	: HCP	Report Date	: 02/02/2023

Protocol : Bruce
Duration of exercise : 6min 41sec
Reason for termination : THR achieved
Blood Pressure (mmHg) : Baseline BP : 120/70mmHg
Peak BP : 124/78mmHg

MPHR : 171BPM
85% of MPHR : 145BPM
Peak HR Achieved : 155BPM
% Target HR : 90%
METS : 7.3METS

STAGE	TIME (min)	H.R (bpm)	BP (mmHg)	SYMPTOMS	ECG CHANGES	ARRHYTHMIA
PRE- EXC.	0:00	56	120/70	Nil	No ST changes seen	Nil
STAGE 1	3:00	114	126/70	Nil	No ST changes seen	Nil
STAGE 2	3:00	149	134/70	Nil	No ST changes seen	Nil
STAGE 3	0:41	150	140/70	Nil	No ST changes seen	Nil
RECOVERY	3:52	95	130/70	Nil	No ST changes seen	Nil

COMMENTS:

- No ST changes in base line ECG.
- No ST changes during exercise and recovery.
- Normal chronotropic response.
- Normal blood pressure response.
- Fair effort tolerance.

IMPRESSION:

Treadmill test is **negative** for exercise induced reversible myocardial ischemia.

Dr. Bhupendra Singh
MD, DM (CARDIOLOGY),FACC
Sr. Consultant Cardiology

Dr. Abhishek Singh
MD, DNB (CARDIOLOGY),MNAMS
Sr.Consultant Cardiology

Dr. Sudhanshu Mishra
MD
Cardiology Registrar

ID:

2-Feb-2023 10:08:07

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vinod kumar

49years
Male Caucasian

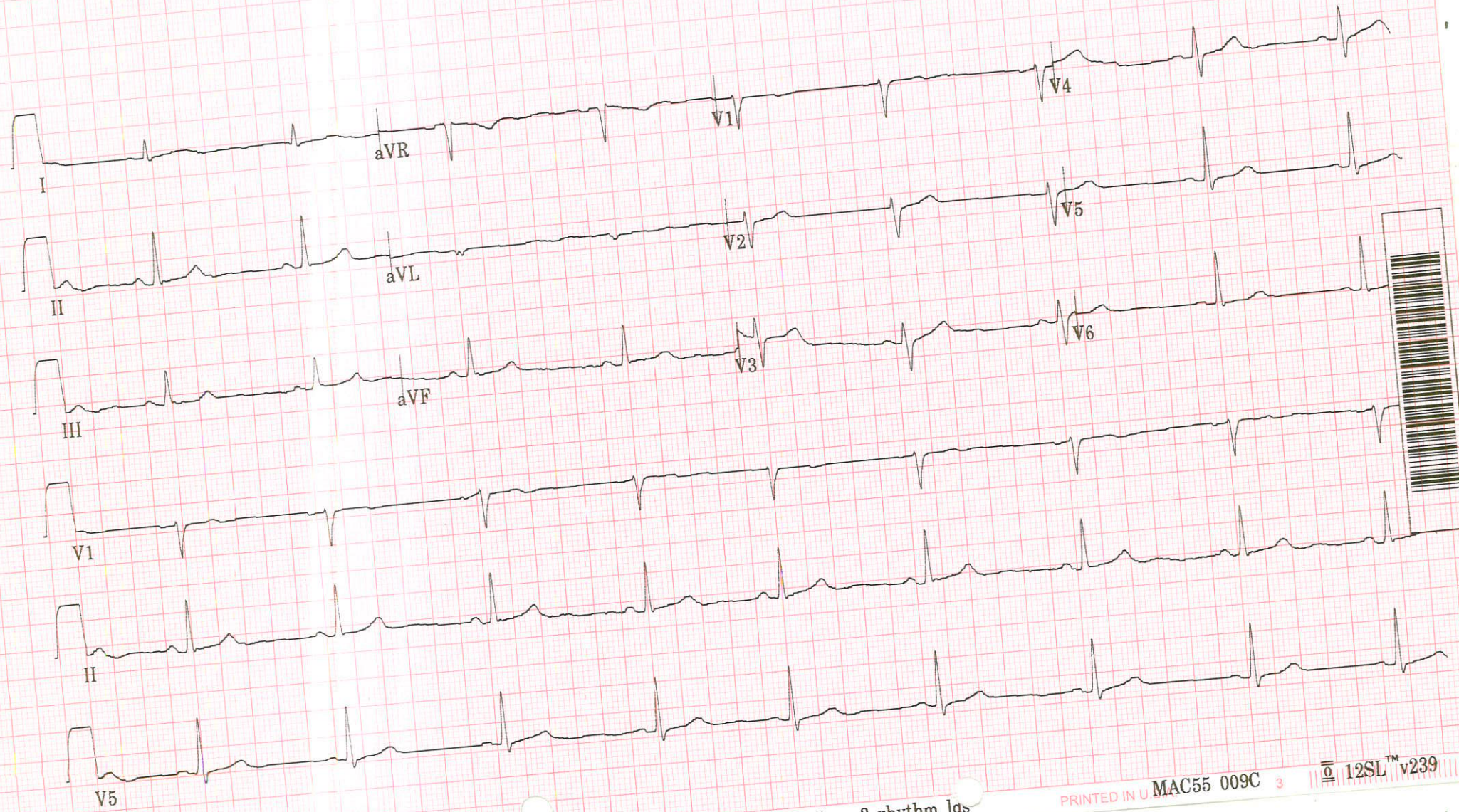
Vent. rate	54 bpm
PR interval	148 ms
QRS duration	82 ms
QT/QTc	422/400 ms
P-R-T axes	71 73 63

Sinus bradycardia
Otherwise normal ECG

Technician:
Test ind:

Referred by:

Unconfirmed



Vital Signs™ 4 by 2.5s + 3 rhythm las

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RADIOLOGY REPORT

Name	Vinod KUMAR	**Modality**	US
Patient ID	MH010752397	**Accession No**	R5110539
Gender/Age	M / 49Y 23D	**Scan Date**	02-02-2023 10:36:03
Ref. Phys	Dr. HEALTH CHECK MGD	**Report Date**	**02-02-2023 11:16:44**

USG ABDOMEN & PELVIS

FINDINGS

LIVER: appears normal in size (measures 147 mm) and shape but shows diffuse increase in liver echotexture, in keeping with diffuse grade I fatty infiltration. Rest normal.
SPLEEN: Spleen is normal in size (measures 82 mm), shape and echotexture. Rest normal.
PORTAL VEIN: Appears normal in size and measures 11.5 mm.
COMMON BILE DUCT: Appears normal in size and measures 4.5 mm.
IVC, HEPATIC VEINS: Normal.
BILIARY SYSTEM: Normal.
GALL BLADDER: Well distended with normal walls (~1.4mm). Its lumen shows a single mobile calculus within measuring 15.2 mm. Rest normal.
PANCREAS: Pancreas is normal in size, shape and echotexture. Rest normal.
KIDNEYS: Bilateral kidneys are normal in size, shape and echotexture. Cortico-medullary differentiation is maintained. Rest normal.
Right Kidney: measures 97 x 41 mm. It shows a concretion measuring 3.2 mm at mid calyx.
Left Kidney: measures 115 x 49 mm.
PELVI-CALYCEAL SYSTEMS: Compact.
NODES: Not enlarged.
FLUID: Nil significant.
URINARY BLADDER: Urinary bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.
PROSTATE: Prostate is normal in size, shape and echotexture. It measures 37 x 28 x 26 mm with volume 14 cc. Rest normal.
SEMINAL VESICLES: Normal.
BOWEL: Visualized bowel loops appear normal.

IMPRESSION

-Cholelithiasis.
-Diffuse grade I fatty infiltration in liver.
-Right renal concretion.

Recommend clinical correlation.

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RADIOLOGY REPORT

Name	Vinod KUMAR	**Modality**	US
Patient ID	MH010752397	**Accession No**	R5110539
Gender/Age	M / 49Y 23D	**Scan Date**	02-02-2023 10:36:03
Ref. Phys	Dr. HEALTH CHECK MGD	**Report Date**	**02-02-2023 11:16:44**

Dr. Monica Shekhawat, MBBS,DNB,
Consultant Radiologist,Reg No MCI 11 10887

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RADIOLOGY REPORT

Name	Vinod KUMAR	**Modality**	DX
Patient ID	MH010752397	**Accession No**	R5110538
Gender/Age	M / 49Y 23D	**Scan Date**	02-02-2023 09:47:32
Ref. Phys	Dr. HEALTH CHECK MGD	**Report Date**	**02-02-2023 10:05:28**

XR- CHEST PA VIEW

FINDINGS:
LUNGS: Normal.
TRACHEA: Normal.
CARINA: Normal.
RIGHT AND LEFT MAIN BRONCHI: Normal.
PLEURA: Normal.
HEART: Normal.
RIGHT HEART BORDER: Normal.
LEFT HEART BORDER:Normal.
PULMONARY BAY: Normal.
PULMONARY HILA: Normal.
AORTA: Normal.
THORACIC SPINE: Normal.
OTHER VISUALIZED BONES: Normal.
VISUALIZED SOFT TISSUES: Normal.
DIAPHRAGM:Normal.
VISUALIZED ABDOMEN: Normal.
VISUALIZED NECK: Normal.

IMPRESSION:
No significant abnormality noted.
Recommend clinical correlation.

Dr. Monica Shekhawat, MBBS,DNB,
Consultant Radiologist,Reg No MCI 11 10887

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LIFE'S ON

LABORATORY REPORT

Name	:	MR VINOD KUMAR	**Age**	:	49 Yr(s) Sex :Male
Registration No	:	MH010752397	**Lab No**	:	32230200617
Patient Episode	:	H18000000189	**Collection Date**	:	02 Feb 2023 13:59
Referred By	:	HEALTH CHECK MGD	**Reporting Date**	:	02 Feb 2023 15:25
Receiving Date	:	02 Feb 2023 14:36			

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL

Test Name	Result	Unit	Biological Ref. Interval
TOTAL PSA, Serum (ECLIA)	0.923	ng/mL	[<2.500]

Note : PSA is a glycoprotein that is produced by the prostate gland. Normally, very little PSA is secreted in the blood. Increases in glandular size and tissue damage caused by BPH, prostatitis, or prostate cancer may increase circulating PSA levels.

Caution : Serum markers are not specific for malignancy, and values may vary by method.

Immediate PSA testing following digital rectal examination, ejaculation, prostate massage urethral instrumentation, prostate biopsy may increase PSA levels.

Some patients who have been exposed to animal antigens, may have circulating anti-animal antibodies present. These antibodies may interfere with the assay reagents to produce unreliable results.

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LIFE'S ON

LABORATORY REPORT

Name	:	MR VINOD KUMAR	**Age**	:	49 Yr(s) Sex :Male
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Patient Episode	:	H18000000189	**Collection Date :**		02 Feb 2023 13:59
Referred By	:	HEALTH CHECK MGD	**Reporting Date :**		02 Feb 2023 15:25
Receiving Date	:	02 Feb 2023 14:36			

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
THYROID PROFILE, Serum			
T3 - Triiodothyronine (ECLIA)	0.99	ng/ml	[0.70-2.04]
T4 - Thyroxine (ECLIA)	5.73	micg/dl	[4.60-12.00]
Thyroid Stimulating Hormone (ECLIA)	2.540	µIU/mL	[0.340-4.250]

Note : TSH levels are subject to circadian variation, reaching peak levels between 2-4.a.m.and at a minimum between 6-10 pm.Factors such as change of seasons hormonal fluctuations,Ca or Fe supplements,high fibre diet,stress and illness affect TSH results.

* References ranges recommended by the American Thyroid Association

1) Thyroid. 2011 Oct;21(10):1081-125.PMID .21787128

2) http://www.thyroid-info.com/articles/tsh-fluctuating.html

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

Dr. Neelam Singal
CONSULTANT BIOCHEMISTRY

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LIFE'S ON

LABORATORY REPORT

Name	:	MR VINOD KUMAR	**Age**	:	49 Yr(s) Sex :Male
Registration No	:	MH010752397	**Lab No**	:	202302000151
Patient Episode	:	H18000000189	**Collection Date :**		02 Feb 2023 09:35
Referred By	:	HEALTH CHECK MGD	**Reporting Date :**		02 Feb 2023 10:34
Receiving Date	:	02 Feb 2023 10:55			

HAEMATOLOGY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
COMPLETE BLOOD COUNT (AUTOMATED)		SPECIMEN-EDTA Whole Blood	
RBC COUNT (IMPEDENCE)	5.15	millions/cu mm	[4.50-5.50]
HEMOGLOBIN	14.4	g/dl	[13.0-17.0]
Method:cyanide free SLS-colorimetry			
HEMATOCRIT (CALCULATED)	42.3	%	[40.0-50.0]
MCV (DERIVED)	**82.1 #**	**fL**	**[83.0-101.0]**
MCH (CALCULATED)	28.0	pg	[27.0-32.0]
MCHC(CALCULATED)	34.0	g/dl	[31.5-34.5]
RDW CV% (DERIVED)	13.6	%	[11.6-14.0]
Platelet count	161	x 10^3 cells/cumm	[150-400]
MPV(DERIVED)	12.7		
WBC COUNT(TC)(IMPEDENCE)	4.79	x 10^3 cells/cumm	[4.00-10.00]
DIFFERENTIAL COUNT (VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	50.7	%	[40.0-80.0]
Lymphocytes	38.8	%	[17.0-45.0]
Monocytes	6.1	%	[2.0-10.0]
Eosinophils	3.8	%	[2.0-7.0]
Basophils	0.6	%	[0.0-2.0]
ESR	30.0 #	/1sthour	[0.0-

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Name	:	MR VINOD KUMAR	**Age**	:	49 Yr(s) Sex :Male
Registration No	:	MH010752397	**Lab No**	:	202302000151
Patient Episode	:	H18000000189	**Collection Date**	:	02 Feb 2023 10:55
Referred By	:	HEALTH CHECK MGD	**Reporting Date**	:	02 Feb 2023 13:15
Receiving Date	:	02 Feb 2023 10:55			

CLINICAL PATHOLOGY

ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

MACROSCOPIC DESCRIPTION		
Colour	PALE YELLOW	(Pale Yellow - Yellow)
Appearance	CLEAR	
Reaction[pH]	5.0	(4.6-8.0)
Specific Gravity	1.015	(1.003-1.035)
CHEMICAL EXAMINATION		
Protein/Albumin	Negative	(NEGATIVE)
Glucose	NOT DETECTED	(NIL)
Ketone Bodies	NegativeKetone BodiesNegative	(NEGATIVE)
Urobilinogen	Normal	(NORMAL)

MICROSCOPIC EXAMINATION(Automated/Manual)		
Pus Cells	1-2 /hpf	(0-5/hpf)
RBC	NIL	(0-2/hpf)
Epithelial Cells	NIL /hpf	
CASTS	NIL	
Crystals	NIL	
OTHERS	NIL	

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LABORATORY REPORT

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Patient Episode	:	H18000000189	**Collection Date :**		02 Feb 2023 09:35
Referred By	:	HEALTH CHECK MGD	**Reporting Date :**		02 Feb 2023 17:37
Receiving Date	:	02 Feb 2023 10:55			

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Glycosylated Hemoglobin			
Specimen: EDTA			
HbA1c (Glycosylated Hemoglobin)	6.1 #	%	[0.0-5.6]
Method: HPLC			
			As per American Diabetes Association(ADA
			HbA1c in %
			Non diabetic adults >= 18years <5.7
			Prediabetes (At Risk)5.7-6.4
			Diagnosing Diabetes >= 6.5
Estimated Average Glucose (eAG)	128	mg/dl	

Comments : HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long term glycemic control.

Serum LIPID PROFILE

Serum TOTAL CHOLESTEROL	224 #	mg/dl	[<200]
			Moderate risk:200-239
			High risk:>240
TRIGLYCERIDES (GPO/POD)	102	mg/dl	[<150]
			Borderline high:151-199
			High: 200 - 499
			Very high:>500
HDL- CHOLESTEROL	55.0	mg/dl	[35.0-65.0]
Method : Enzymatic Immunoimhibition			
VLDL- CHOLESTEROL (Calculated)	20	mg/dl	[0-35]
CHOLESTEROL, LDL, DIRECT	149.0 #	mg/dl	[<120.0]
			Near/
Above optimal-100-129			
			Borderline High:130-159
			High Risk:160-189

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BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
T.Chol/HDL.Chol ratio(Calculated)	4.1		<4.0 Optimal 4.0-5.0 Borderline >6 High Risk
LDL.CHOL/HDL.CHOL Ratio(Calculated)	2.7		<3 Optimal 3-4 Borderline >6 High Risk

Note:
Reference ranges based on ATP III Classifications.

KIDNEY PROFILE

Specimen: Serum			
UREA	21.6	mg/dl	[15.0-40.0]
Method: GLDH, Kinatic assay			
BUN, BLOOD UREA NITROGEN	10.1	mg/dl	[8.0-20.0]
Method: Calculated			
CREATININE, SERUM	0.86	mg/dl	[0.70-1.20]
Method: Jaffe rate-IDMS Standardization			
URIC ACID	5.1	mg/dl	[4.0-8.5]
Method:uricase PAP			
SODIUM, SERUM	138.7	mmol/L	[136.0-144.0]
POTASSIUM, SERUM	4.04	mmol/L	[3.60-5.10]
SERUM CHLORIDE	105.7	mmol/l	[101.0-111.0]
Method: ISE Indirect			
eGFR (calculated)	101.8	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 to1.73 sq.m BSA and is not applicable to individuals below 18 years.

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BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL

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.

LIVER FUNCTION TEST

BILIRUBIN - TOTAL *Method: D P D*	0.48	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT *Method: DPD*	0.11	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN(SERUM) *Method: Calculation*	**0.37 #**	**mg/dl**	**[0.10-0.30]**
TOTAL PROTEINS(SERUM) *Method: BIURET*	7.60	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) *Method: BCG*	4.29	g/dl	[3.50-5.20]
GLOBULINS (SERUM) *Method: Calculation*	3.30	gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO *Method: Calculation*	1.30		[1.00-2.50]
AST(SGOT) (SERUM) *Method: IFCC W/O P5P*	24.00	U/L	[0.00-40.00]
ALT(SGPT) (SERUM) *Method: IFCC W/O P5P*	40.00	U/L	[17.00-63.00]
Serum Alkaline Phosphatase *Method: AMP BUFFER IFCC)*	82.0	IU/L	[32.0-91.0]

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Receiving Date	:	02 Feb 2023 10:55			

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
GGT	44.0		[7.0-50.0]

Blood Group & Rh Typing (Agglutination by gel/tube technique) Specimen-Blood

Blood Group & Rh typing B Rh(D) Negative

Technical note:
ABO grouping and Rh typing is done by cell and serum grouping by microplate / gel technique.

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

Dr. Charu Agarwal
Consultant Pathologist

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LABORATORY REPORT

Name	:	MR VINOD KUMAR	**Age**	:	49 Yr(s) Sex :Male
Registration No	:	MH010752397	**Lab No**	:	202302000152
Patient Episode	:	H18000000189	**Collection Date**	:	02 Feb 2023 09:35
Referred By	:	HEALTH CHECK MGD	**Reporting Date**	:	02 Feb 2023 13:14
Receiving Date	:	02 Feb 2023 09:35			

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
GLUCOSE-Fasting			
Specimen: Plasma			
GLUCOSE, FASTING (F)	113.0 #	mg/dl	[70.0-110.0]
Method: Hexokinase			

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

Dr. Charu Agarwal
Consultant Pathologist

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LABORATORY REPORT

Name	:	MR VINOD KUMAR	**Age**	:	49 Yr(s) Sex :Male
Registration No	:	MH010752397	**Lab No**	:	202302000153
Patient Episode	:	H18000000189	**Collection Date :**		02 Feb 2023 13:33
Referred By	:	HEALTH CHECK MGD	**Reporting Date :**		02 Feb 2023 15:19
Receiving Date	:	02 Feb 2023 13:33			

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL

PLASMA GLUCOSE

Specimen:Plasma

GLUCOSE, POST PRANDIAL (PP), 2 HOURS	114.0	mg/dl	[80.0-140.0]

Method: Hexokinase

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

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

Dr. Alka Dixit Vats
Consultant Pathologist

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