



**DEPARTMENT OF LABORATORY**

**NAVI MUMBAI**

**Patient Name** : Mr. NARAYAN VIDYADHAR SAHU **Age /Gender** : 48 Y(s)/Male  
**Bill No/ UMR No** : NMBC64127/NMU0049386 **Referred By** : Dr. DMO  
**Received Dt** : 29-Mar-24 09:39 am **Report Date** : 29-Mar-24 12:34 pm

**FINAL REPORT**

<u>Parameter</u>	<u>Specimen</u>	<u>Result Values</u>	<u>Biological Reference</u>	<u>Method</u>
<b>COMPLETE BLOOD COUNT</b>				
<b>RBC</b>				
R B C COUNT	Blood	4.73	4.5 - 5.5 $10^6/\mu\text{L}$	
HEMOGLOBIN		14.3	13.0 - 17.0 g/dl	
PCV/HCT		43.8	40 - 50 %	
MCV		93	36 - 46 %	
MCH			83 - 101 fl	
MCHC		30.2	83 - 101 fl	
RDW(cv)		32.6	27 - 32 pg	
		14.9	31.5 - 34.5 g/dL	
			11.6 - 14.0 %	
<b>PLATELETS</b>				
PLATELET COUNT	Blood	207	150 - 400 $10^3/\mu\text{L}$	
MPV		10.0	7.5 - 11.5 fl	
<b>WBC</b>				
TC (TOTAL LEUCOCYTE COUNT)	Blood	7.1	4.0 - 11.0 $10^3/\mu\text{l}$	
<b>DIFFERENTIAL COUNT</b>				
NEUTROPHILS	Blood	68	40 - 80 %	
LYMPHOCYTES		20	20 - 40 %	
MONOCYTES		06	02 - 10 %	
EOSINOPHILS		06	00 - 06 %	
BASOPHILS		00	00 - 01 %	
ESR	CITRATED BLOOD	47	0 - 10 mm/1st hour	WESTERGREN`S METHOD

\*\*\* End Of Report \*\*\*





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<b>Received Dt</b> : 29-Mar-24 09:39 am	<b>Report Date</b> : 29-Mar-24 02:03 pm

**FINAL REPORT**

<u>Parameters</u>	<u>Specimen</u>	<u>Result</u>	<u>Biological Reference Intervals</u>	<u>Method</u>
<b>SERUM ELECTROLYTES</b>				
SERUM SODIUM		143	136 - 145 mmol/L	ISE INDIRECT
SERUM POTASSIUM		5.1	3.5 - 5.1 mmol/L	ISE INDIRECT
SERUM CHLORIDES		106	98 - 107 mmol/L	ISE INDIRECT
<b>BUN / CREATININE RATIO</b>				
BUN (Blood Urea Nitrogen.)		11	7.0 - 21.0 mg/dL	Calculated
SERUM CREATININE		0.93	0.8 - 1.3 mg/dL	
BUN / CREATININE RATIO		11.83	10 - 20	
<b>LFT(LIVER FUNCTION TEST)</b>				
TOTAL BILIRUBIN		0.3	< 1.2 mg/dL	Method : Diazo Method
DIRECT BILIRUBIN		0.1	<= 0.20 mg/dL	Method: Diazo Method
INDIRECT BILIRUBIN		0.2	<= 1.0 mg/dL	
SGPT (ALT)		15	<= 41 U/L	Method : UV without P5P
SGOT (AST)		20	<= 40 U/L	
ALKALINE PHOSPHATASE (ALP)		131	40 - 129 U/L	Method : PNPP, AMP Buffer - IFCC Ref.
TOTAL PROTEINS		9.0	35 - 105 U/L	Method : Biuret method
SERUM ALBUMIN		4.5	6.0 - 8.0 g/dL	Method : Bromcresol Green (BCG)
GLOBULINS		4.5	3.5 - 5.2 g/dL	
A/G RATIO		1.0	2.5 - 3.5 g/dL	
GAMMA GLUTAMYL TRANSFERASE(GGT)		58	1.2 - 2.5	Method : G-glutamyl-carboxy-nitr oanilide - IFCC Ref.
			10 - 71 U/L	
<b>BUN(BLOOD UREA NITROGEN)</b>				
BUN (Blood Urea Nitrogen.)		11	7.0 - 21.0 mg/dL	Calculated
<b>TOTAL PROTEIN</b>				
TOTAL PROTEINS		9.1	6.0 - 8.0 g/dL	Method : Biuret method
<b>LIPID PROFILE</b>				
TOTAL CHOLESTEROL		207	Desirable : : < 200 mg/dL Borderline High : : 200 - 239 mg/dL High risk : > 240 mg/dL	METHOD : Enzymatic colorimetric
HDL CHOLESTEROL		43	Low : : < 40 mg/dL High : : > 60 mg/dL	Homogeneous enzymatic colorimetric





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<b>Bill No/ UMR No</b> : NMBC64127/NMU0049386	<b>Referred By</b> : Dr. DMO
<b>Received Dt</b> : 29-Mar-24 09:39 am	<b>Report Date</b> : 29-Mar-24 02:58 pm

<u>Parameters</u>	<u>Specimen</u>	<u>Result</u>	<u>Biological Reference In</u>	<u>Method</u>
LDL CHOLESTEROL		140	Optimal : - < 100 mg/dL Near Optimal : 100 - 129 mg/dL Borderline High : 130 - 159 mg/dL High : 160 - 189 mg/dL Very High : - > 190 mg/dL	Direct-Enzymatic colorimetric
VLDL SERUM TRYGLYCERIDES		31 155	< 150 mg/dL Borderline High : 150 - 199 mg/dL High : 200 - 499 mg/dL	
CHO/HDL RATIO		4.81	Normal : - < 3.5 High Risk : - > 5.0	
LDL/HDL RATIO		3.26		
SERUM URIC ACID		8.1	3.4 - 7.0 mg/dL	uricase
<b>PSA (PROSTATE SPECIFIC ANTIGEN).</b>				
PROSTATE SPECIFIC ANTIGEN (PSA)		0.481	0 - 4.0 ng/mL	Method : ECLIA
<b>T3,T4 AND TSH</b>				
T3		105.3	70 - 204 ng/dL	Method : ECLIA
T4		7.17	5.1 - 14.1 ug/dL	Method : ECLIA
TSH (THYROID STIMULATING HORMONE)		0.647	0.270 - 4.20 uIU/mL	Method : ECLIA
<b>FBS (FASTING BLOOD GLUCOSE WITH URINE GLUCOSE)</b>				
FASTING BLOOD GLUCOSE		98	Normal Range : 70 - 99 mg/dL	Hexokinase
<b>PLBS (POST LUNCH BLOOD SUGAR WITH URINE SUGAR)</b>				
PLBS (POST LUNCH BLOOD GLUCOSE)		95	110 - 180 mg/dL	Hexokinase
<b>HBA1C (GLYCOSYLATED HAEMOGLOBIN)</b>				
HBA1C		5.8	< 5.7 Normal Prediabetic 5.7 - 6.4 & > / = 6.5 Diabetic %	TINIA
MPG (Mean Plasma Glucose)		120	Excellent Control : 90 - 120 mg/dL Good Control : 121 - 150 mg/dL	

\*\*\* End Of Report \*\*\*





# MEDICOVER HOSPITALS

## DEPARTMENT OF LABORATORY

NAVI MUMBAI

**Patient Name** : Mr. NARAYAN VIDYADHAR SAHU  
**Age / Gender** : 48 Y(s)/Male  
**Bill No/ UMR No** : NMBC64127/NMU0049386  
**Referred By** : Dr. DMO  
**Received Dt** : 29-Mar-24 09:40 am  
**Report Date** : 30-Mar-24 09:41 am

**Parameters**                      **Specimen**      **Result**                      **Biological Reference In Method**

**Lab Incharge**

**Dr. VISHAL MEHROTRA, MD Pathology**  
Consultant Pathologist

Verified By : : 026979

Test results related only to the item tested.

No part of the report can be reproduced without written permission of the laboratory.



<b>Patient ID:</b>	<b>NMU0049386</b>	<b>Patient Name:</b>	<b>NARAYAN VIDYADHAR SAHU</b>
<b>Age:</b>	<b>48 Years</b>	<b>Sex:</b>	<b>M</b>
<b>Accession Number:</b>	<b>NMBC64127</b>	<b>Modality:</b>	<b>US</b>
<b>Referring Physician:</b>	<b>DR.DMO</b>	<b>Study:</b>	<b>USG ABDOMEN WHOLE</b>
<b>Study Date:</b>	<b>29-Mar-2024</b>	<b>Study Time:</b>	<b>09:46:32</b>

### USG WHOLE ABDOMEN

LIVER is normal in size, normal in shape and echotexture. No evidence of any focal lesion. The portal vein appears normal & shows normal hepatopetal flow. No evidence of intra-hepatic biliary duct dilatation.

Gall Bladder appears partially distended with normal wall thickness. There is no obvious calculus or pericholecystic collection or free fluid noted. CBD appears normal.

Visualised parts of head & body of pancreas appear normal. PD is not dilated.

SPLEEN is normal in size and echotexture. No focal lesion seen. SV is normal.

Both kidneys are normal in size, shape and echotexture with normal parenchymal reflectivity and maintained cortico-medullary differentiation. No hydronephrosis or calculi or mass seen.

Urinary Bladder is adequately distended; no e/o wall thickening or mass or calculi seen. Post-void residue is not significant.

PROSTATE is normal in size, shape & echotexture.

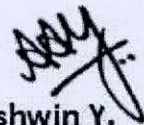
Visualised bowel loops appear normal. There is no free fluid seen.

*NB:- This scan does not rule out all pathologies related to bowel and appendix.*

### **IMPRESSION** –

- **No significant abnormality detected.**

THIS REPORT IS NOT TO BE USED FOR MEDICOLEGAL PURPOSE. THE CONTENTS OF THIS REPORT REQUIRE CLINICAL CO-RELATION BEFORE ANY APPLICATION.



**Dr. Ashwin Y.**  
M.D. (Radio-Diagnosis)

<b>Patient ID:</b>	<b>NMU0049386</b>	<b>Patient Name:</b>	<b>NARAYAN VIDYADHAR SAHU</b>
<b>Age:</b>	<b>48 Years</b>	<b>Sex:</b>	<b>M</b>
<b>Accession Number:</b>	<b>NMBC64127</b>	<b>Modality:</b>	<b>DX</b>
<b>Referring Physician:</b>	<b>DR.DMO</b>	<b>Study:</b>	<b>CHEST</b>
<b>Study Date:</b>	<b>29-Mar-2024</b>		

**X RAY CHEST PA VIEW**

Prominent markings are seen in bilateral lung fields.  
The frontal cardiac dimensions are normal.  
The pleural spaces are clear.  
Both hilar shadows are normal in position and density.  
No diaphragmatic abnormality is seen.  
The soft tissues and bony thorax are normal.



**Dr. Ashwin Y.**  
M.D. (Radio-Diagnosis)

48 Years Male

MSR  
MSRB  
MSRB  
h

Rate 111 Sinus tachycardia.....rate> 99  
PR 141 Biatrial enlargement.....P>80ms,<-0.15mV V1 &>0.30mV 2 lds  
QRSD 100 RSR' in V1 or V2, probably normal variant.....small R' only  
QT 326  
QTc 443

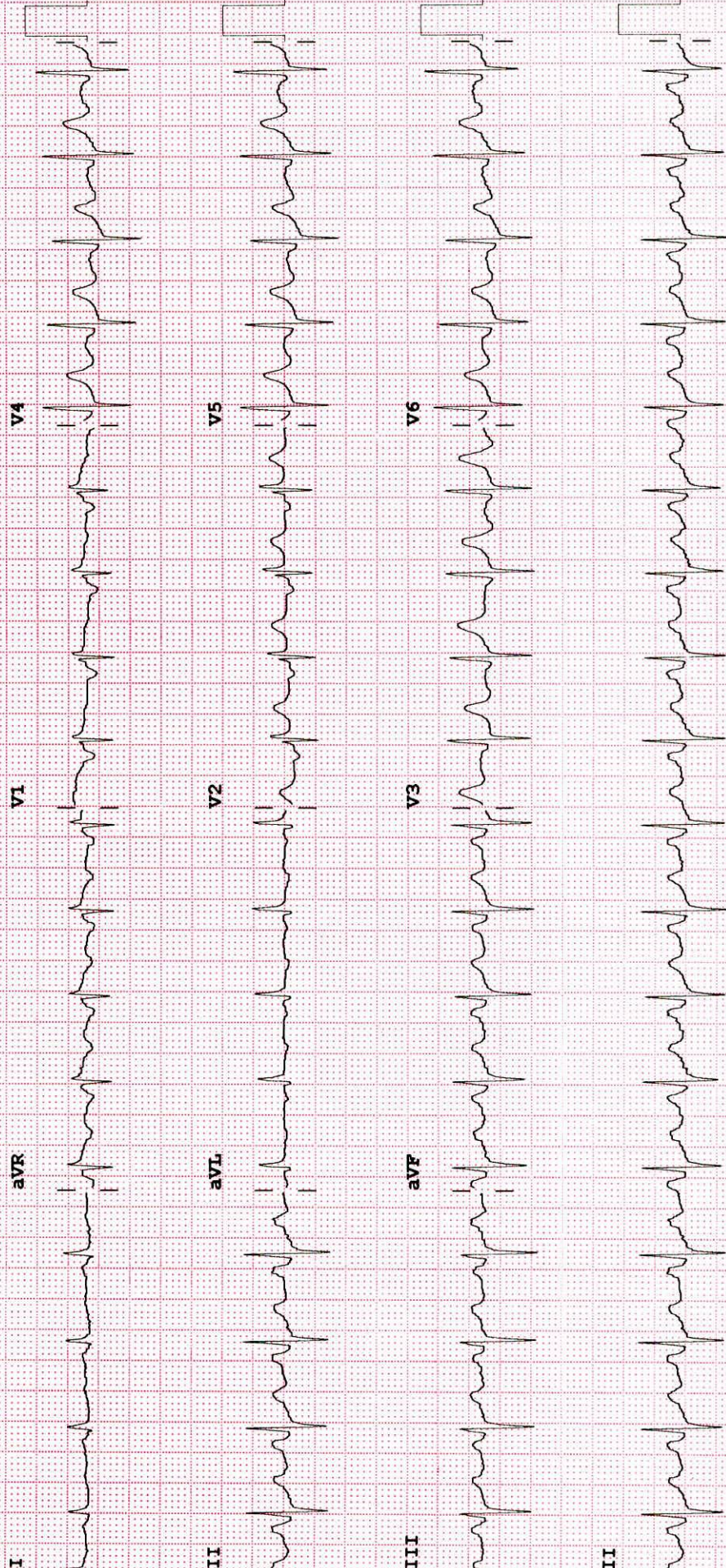
--AXIS--

P 79  
QRS -8  
T 87

12 Lead; Standard Placement

- ABNORMAL ECG -

Unconfirmed Diagnosis



Device:

Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV

F 60~ 0.50~ 40 Hz W

100B CL

P?



**MEDICOVER**  
HOSPITALS

NAVI MUMBAI

Mr. Narayan Sahu,

S/B :- Dr. Mandira Kamble

O/E :- Stain<sup>d</sup> calculus<sup>m</sup>

Grossly decayed  $\bar{c}$   $\frac{1}{2}$

Advice :- Surgical extraction  $\bar{c}$   $\frac{1}{2}$

oral prophylaxis

M. Kamble

**Dr. Mandira Sushil Kamble**  
MDS in Conservative Dentistry And Endodontics  
Reg. No. A-43262







# DEPARTMENT OF OPHTHALMOLOGY

# MEDICOVER HOSPITALS

DATE: 29/03/24

PATIENT NAME: Mr. Narayan Sahu

AGE / SEX: NAVI MUMBAI

UMR NO: NMU 00 49386

48/m

	RE	LE
VA (DISTANCE)	e/g <u>eng</u>	c/c <u>eng</u>
VA (NEAR)	NG (CB) <u>eng</u>	NC <u>eng</u>
COLOUR VISION	Normal	Normal.

		SPHERE	CYLINDER	AXIS	VA	
MRx	O D Ⓡ	plano	_____		e/g	<u>Acorn</u> + 1.75 - NC
	O S Ⓛ	plano	_____		c/c	+ 1.75 - NC

### HISTORY :

- No h/o HT / DM / Thyroid.

- h/o RHD on ft :- 10 years.

- h/o spectacle use :- last 6 months for near.

### OCULAR FINDINGS :

(BE) - Ant seg WNL.

(undilated) Disc  $< \begin{matrix} 0.1 \\ 0.2 \end{matrix}$

### ADVICE:

Refresh Tears e/d q/d 1777 X 1 month.

AP  
COR. ANUSAREE VANWARY



**MEDICAL HEALTH CHECK- UP ASSESMENT FORM**

NAME : Mr / Mrs ✓ Nargan. Jagan

DATE: 29/3/24

AGE : 48 yrs

SEX: Male / Female

NMU: NMU000 49386

DOCTOR'S NAME:

Health- Package

TEMP :	<u>97F</u>	° f	BP :	<u>137/91</u>	mmHg
PULSE :	<u>100</u>	b/m	HEIGHT :	<u>158.5</u>	cm
RR :	<u>22</u>	b/m	WEIGHT :	<u>65.6</u>	kg
SPO2 :	<u>98 %</u>	<u>LA</u>	HGT:	<u>—</u>	

**REMARK:**