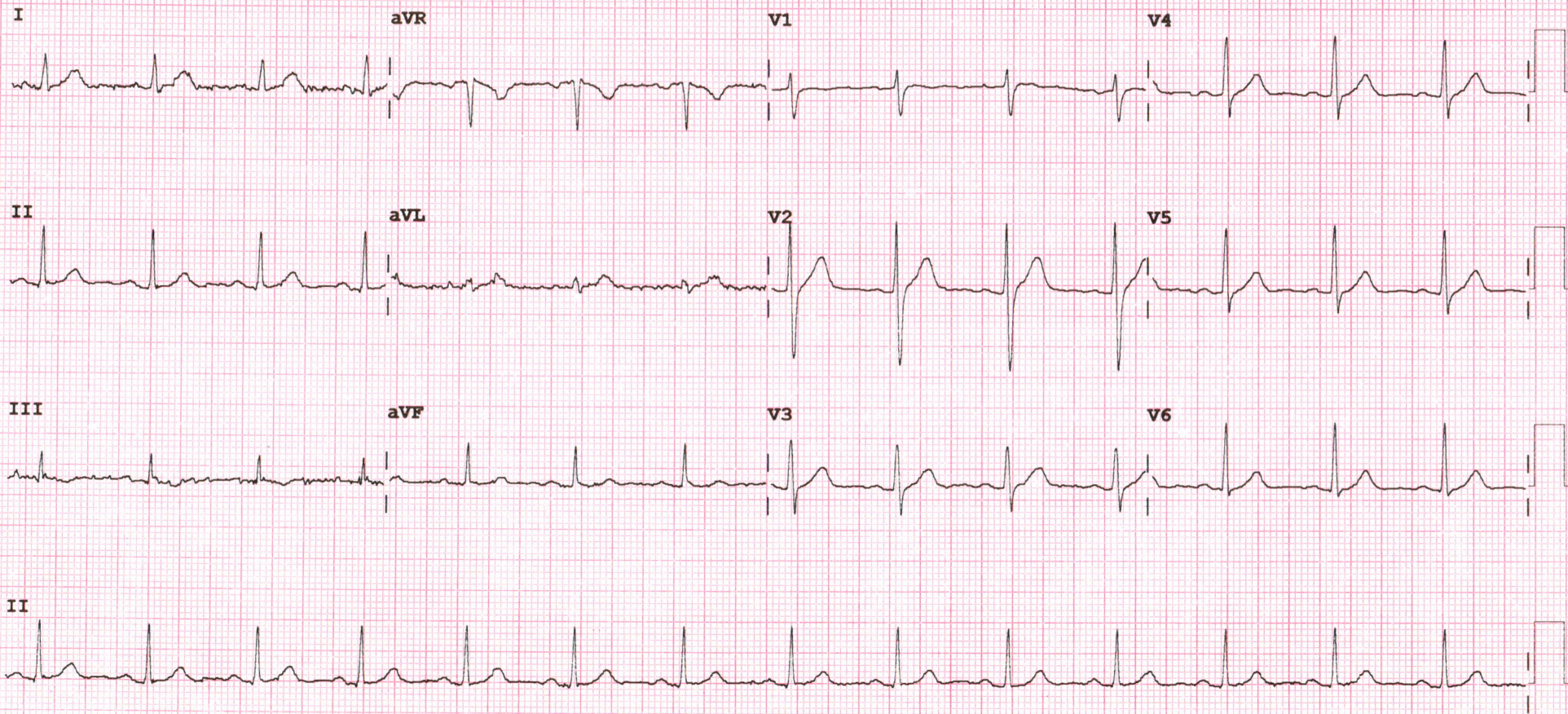


Rate 85
PR 168
QRSD 88
QT 340
QTc 405

--AXIS--

P 43
QRS 49
T 18

12 Lead; Standard Placement



Device:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 50~ 0.50-150 Hz W

PH09

P?



2D-ECHOCARDIOGRAPHY AND COLOR DOPPLER REPORT

NAME: KALYAN SINGH

AGE/SEX: 34 YRS/MALE

DATE: 29/03/2024

REF BY: DIRECT

OBSERVATION:

- NORMAL LV SIZE AND NORMAL LV SYSTOLIC FUNCTION. LVEF = 60% (VISUAL).
- NO RWMA AT REST.
- NORMAL LV DIASTOLIC DYSFUNCTION.
- TRIVIAL MR. NO MS.
- NO AR. NO AS.
- TRIVIAL TR. NO PAH.
- NORMAL SIZED LA, RA & RV WITH NORMAL RV SYSTOLIC FUNCTION.
- NORMAL SIZED MPA, RPA & LPA.
- INTACT IAS & IVS.
- NO E/O INTRACARDIAC CLOT/VEGETATION/PE.
- NORMAL IVC.
- NORMAL PERICARDIUM.

LA: 34MM

AO: 22MM

IVS: 12/14MM

LVPW: 11/13MM

LVID: 43/22MM

CONCLUSION:

- NORMAL LV/RV SIZE AND SYSTOLIC FUNCTION.
- NO RWMA AT REST.
- LVEF = 60% (VISUAL).

DR.NIRAV BHALANI
[CARDIOLOGIST]

DR.ARVIND SHARMA
[CARDIOLOGIST]



PATIENT NAME: KALYAN SINGH	
AGE/SEX: 32 YRS/M	DATE: Friday, 29 March 2024

CHEST X-RAY (PA)

Both lung fields appear normal.

Both hila appear normal

Bilateral costo-phrenic angles appear grossly clear

Mediastinum and cardiac shadow appear normal

Bony thorax appears unremarkable

No evidence of free gas under domes of diaphragm

IMPRESSION:

- NO SIGNIFICANT ABNORMALITY NOTED IN LUNG FIELDS
- NORMAL CARDIAC SHADOW

DR SHARAD RUNGTA (MD & DNB)
CONSULTANT RADIOLOGIST

Not all pathologies can be detected on ultrasound in each scan. Further radiographic evaluation is suggested if required.



PATIENT NAME: KALYAN SINGH

AGE/SEX: 32 YRS/M

DATE: Friday, 29 March 2024

ULTRASOUND OF ABDOMEN & PELVIS

LIVER appears normal in size and shows normal parenchymal echogenicity. No evidence of focal lesion. No evidence of dilated IHBR or portal vein. CBD appears normal.

GALL BLADDER is distended. No e/o wall thickening, pericholecystic edema or calculus within.

VISUALIZED PART OF PANCREAS appears normal. MPD is WNL.

SPLEEN appears normal in size and shows normal parenchymal echogenicity. No evidence of focal lesion.

BOTH KIDNEYS appear normal in size and position.

Show normal cortical echogenicity. Corticomedullary differentiation is maintained.

Left kidney shows 10 mm sized simple cyst at upper pole. No calculus or hydronephrosis on either side.

URINARY BLADDER is full. Mucosal surface appears smooth with no e/o obvious wall thickening or calculus within.

PROSTATE appears normal in size. No evidence of focal lesion noted.

BOWEL LOOPS appear normal and show normal peristalsis

No evidence of LYMPHADENOPATHY noted.

No evidence of ASCITES or PLEURAL EFFUSION noted.

IMPRESSION:


- Left renal cortical cyst.

DR SHARAD RUNGTA (MD & DNB)

CONSULTANT RADIOLOGIST

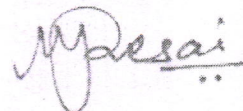
Not all pathologies can be detected on ultrasound in each scan. Further radiographic evaluation is suggested if required.



Patient Name : Kalyan Singh	Sample No. : 20240314828 
Patient ID : 20240309248	Visit No. : OPD20240329441
Age / Sex : 34y/Male	Call. Date : 29/03/2024 10:01
Consultant : DR SAURABH JAIN	S. Coll. Date : 29/03/2024 13:17
Ward : -	Report Date : 29/03/2024 16:59

CBC, ESR

Investigation	Result	Normal Value
Hemoglobin :	14.2 gm/dl	13.5 to 18.0 gm/dl
P.C.V. :	43.3 %	42.0 to 52.0 %
M.C.V. :	92.1 fL	78 to 100 fL
M.C.H. :	30.2 pg	27 to 31 pg
M.C.H.C. :	32.8 g/dl	32 to 36 g/dl
RDW :	12.9 %	11.5 to 14.0 %
RBC Count :	4.7 X 10 ⁶ /cumm	4.7 to 6.0 X 10 ⁶ /cumm
Polymorphs :	64 %	38 to 70 %
Lymphocytes :	32 %	15 to 48 %
Eosinophils :	2 %	0 to 6 %
Monocytes :	2 % [L]	3 to 11 %
Basophils :	0 %	0.0 to 1.0 %
Total :	100	< 100 > 100
WBC Count :	6600 /cmm	4000 to 10000 /cmm
Platelets Count :	190000 /cmm	1,50,000 to 4,50,000 /cmm
ESR - After One Hour :	15 mm/hr [H]	1 to 13 mm/hr



Dr. Mehul Desai
M.B.D.C.P
Reg.No.G-9521



Patient Name : Kalyan Singh

Sample No. : 20240314828



Patient ID : 20240309248

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Ward : -

Report Date : 29/03/2024 16:59

Blood Group

Investigation	Result	Normal Value
BLOOD GROUP :		
ABO	O	
Rh	Positive	

RENAL FUNCTION TEST

Investigation	Result	Normal Value
Creatinine :	0.7 mg/dl	0.6 - 1.4 mg/dl
Urea :	30 mg/ dl	13 - 45 mg/dl
Uric Acid :	4.9 mg/dl	3.5 - 7.2 mg/dl
Calcium :	9.1 mg/dl	8.5 - 10.5

Dr.Mehul Desai
M.B.D.C.P
Reg.No.G-9521





Patient Name : Kalyan Singh

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Ward : -

Report Date : 29/03/2024 16:59

Lipid Profile

Investigation

Result

Normal Value

Sample :

Fasting

Sample Type :

Normal

Cholesterol (Chol) :

141 mg/dl

Low risk : < 200

Moderate risk : 200 - 239

High risk : > or = 240

Triglyceride :

210 mg/dl [H]

Normal : < 200.0

High : 200 - 499

Very High : > or = 500

HDL Cholesterol :

31 mg/dl [L]

Low risk : >or = 60 mg/dL

High risk : Up to 35 mg/dL

LDL :

68 mg/dl [L]

131.0 to 159.0(N)

< 130.0(L)

> 159.0(H)

VLDL :

42 mg/dl [H]

Up to 0 to 34 mg/dl

LDL/HDL Ratio :

2.19

Low risk : 0.5 to 3.0

Moderate risk : 3.0 to 6.0

Elevted level high > 6.0

Total Chol / HDL Ratio :

4.55

Low Risk : 3.3 to 4.4

Average Risk : 4.4 to 7.1

Moderate Risk : 7.1 to 11.0

High Risk : > 11.0

Total Lipids :

682 mg/dl

400 to 700 mg/dl

Note :- Lipemic samples give high triglyceride value and falsely low LDL value.

Dr. Mehul Desai
M.B.D.C.P
Reg.No.G-9521





Patient Name : Kalyan Singh

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S. Coll. Date : 29/03/2024 13:17

Ward : -

Report Date : 29/03/2024 16:59

LFT (Liver Function Test)

Investigation	Result	Normal Value
Total Bilirubin :	0.8 mg/dl	0.2 to 1.0 mg/dl
Direct Bilirubin :	0.4 mg/dl	0.0 to 0.2 mg/dl
Indirect Bilirubin :	0.4 mg/dl	0.0 to 0.8 mg/dl
AST (SGOT) :	16 U/L	5 to 34 U/L
ALT (SGPT) :	31 U/L	0 to 55 U/L
Total Protein (TP) :	6.9 g/dL	6.4 to 8.3, g/dl
Albumin (ALB) :	4.3 g/dl	3.5 to 5.2 g/dl
Globulin :	2.6 g/dl	2.3 to 3.5 g/dl
A/G Ratio :	1.65	
Alkaline Phosphatase (ALP) :	102 U/L	40 to 150 U/L
GAMMA GT. :	14 U/L	7 to 35 U/L

Dr. Mehul Desai
M.B.D.C.P
Reg.No.G-9521

CONDITIONS OF REPORTING

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6. Results relate only to the sample tested. Result of laboratory tests may vary from laboratory to laboratory and also in some parameters from time to time for the same patient; may be due to physiological variations, different methodology, technology & its limitations etc.
7. A requested test might not be performed in case of following reasons: a) Insufficient quantity of specimen (inadequate collection/spillage in transit) b) Specimen quality unacceptable (hemolyzed/clotted/lipemic etc) c) Incorrect specimen type d) Incorrect identity of specimen. In above mentioned circumstances it is expected that a fresh specimen will be sent for the purpose of the reporting on the same parameter.
8. In unanticipated circumstances (non-availability of kits, instrument breakdown & natural calamities) tests may not be reported as per schedule. However USL(B), LLP, will ensure that the delay is minimized.
9. The sex of the fetus will not be revealed as per the Prenatal Diagnostic Technique (Regulation and Prevention of Misuse Act, 1994)
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11. It is mandatory to send Biopsy/Histopathology specimen in 10% formalin.
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15. Subject to Baroda Jurisdiction only.

GENERAL PRINCIPLES OF LABORATORY TESTING & LABORATORY REFERENCE RANGES

1. Under the best of circumstances, no test is having 100% sensitivity & 100% specificity. In the majority of laboratory parameters, the combination of short-term physiologic variation & analytical error/technological limitations are sufficient to render the interpretation of single determinations difficult especially when the concentrations are in borderline range. Any particular laboratory test result may be misleading (not correlating with clinical findings) for large varieties of reasons, regardless of high quality of laboratory, such results should be rechecked. If indicated new specimen should be submitted.
2. Reference ranges (biological reference interval) vary from one laboratory to another and with age, sex, race, size, physiologic status (e.g. pregnancy & lactation) that apply to the particular patient. Reference values represent the statistical data for 95% of the population; values outside these ranges do not necessarily represent disease. Result may still be within the reference range but be elevated above the patient's baseline, which is why serial testing is important in a number of conditions.
3. The effects of drugs on laboratory test values must never be overlooked. Laboratory values in elderly must be interpreted in light of many factors that affects "normal" values in this group.
4. Negative laboratory test results do not necessarily rule out a clinical diagnosis.

TEAM OF DOCTORS

<p>Dr. Rakesh Shah MD (Path), DCP Dr. Vishal Jhaveri, DCP Dr. Hetal Parikh MD (Path) FRCPATH (UK) Dr. Mitesh Rathwa MD (Path) Dr. Shreyas Nisarta MD (Path) Dr. Vaishali Bhatt, DCP Dr. Manjari Bhabhor DCP</p>	<p>Dr. Girish Gupta, MD (Path) Dr. Ankit Jhaveri, MD (Path) Dr. Rachna Parekh DCP Dr. Priya Mangukiyaa MD (Microbiology) Dr. Varsha Raimalani, PhD Dr. Nehal Tiwari MD (Path) Dr. Usha Amliyar DCP</p>
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OUR UNITS

- a) Aayu Path Lab (Tarsali) - 93762224836, 7043940202
- b) Puraak Hi-Tech Lab (Nizampura) - 7229046350, 9377559900
- c) Dr. Jhaveri Laboratory (Akota) - 0265-2329428, 9998724579
- d) Dr. Jhaveri Laboratory (Polo Ground) - 0265-2424335, 9725282172
- e) Jhaveri Advanced Path Lab (Subhanpura)
- f) Jhaveri Advanced Path Lab (Waghodiya road)



Unipath Specialty Laboratory (Baroda) LLP, Platinum Complex, Opp. HDFC Bank, Nr. Radio Krishna chaurasta, AKRFA, Vadodra - 390020
Phone: 0265-2354435 / 2326260 | Mobile: 7228805500 / 8155028222 | Email: info.baroda@unipathlp.in
Home Visit / OPD Reception : 9998724579



TEST REPORT

Reg. No. : 40301017404 Reg. Date : 29-Mar-2024 12:19 Collected On : 29-Mar-2024 12:19
Name : Mr. KALYAN SINGH Approved On : 29-Mar-2024 14:32
Age : 34 Years Gender : Male Ref. No. : Dispatch At :
Ref. By : Tele No. :
Location : SAVITA SUPERSPECIALTY HOSPITAL @ WAGHODIYA ROAD

Test Name	Results	Units	Bio. Ref. Interval
THYROID FUNCTION TEST			
T3 (triiodothyronine) <i>Method:CLIA</i>	0.98	ng/mL	0.6 - 1.81
T4 (Thyroxine) <i>Method:CLIA</i>	6.90	µg/dL	4.5 - 12.6
TSH (ultra sensitive) <i>Method:CLIA</i>	2.635	µIU/mL	0.55 - 4.78
Sample Type:Serum			

Comments:
Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulate the thyroid gland to synthesize and secrete T3 and T4. Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

- TSH levels During Pregnancy :**
- First Trimester : 0.1 to 2.5 µIU/mL
 - Second Trimester : 0.2 to 3.0 µIU/mL
 - Third trimester : 0.3 to 3.0 µIU/mL

Reference : Carl A.Burtis,Edward R.Ashwood,David E.Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Edition. Philadelphia: WB Saunders,2012:2170

----- End of Report -----


This is an electronically authenticated report. Test done from collected sample.

Printed On: 29-Mar-2024 14:33

We are open 24 x 7 & 365 days

Dr. Vishal Jhaveri
M.B.B.S, D.C.P
Reg. G-13041
LLP Identification Number: AAN-8932
Page 1 of 1




Patient Name :	Kalyan Singh	Sample No. :	20240314828 
Patient ID :	20240309248	Visit No. :	OPD20240329441
Age / Sex :	34y/Male	Call. Date :	29/03/2024 10:01
Consultant :	DR SAURABH JAIN	S. Coll. Date :	29/03/2024 13:17
Ward :	-	Report Date :	29/03/2024 17:08

Urine R/M

Investigation	Result	Normal Value
Quantity - :	20 ml	
Colour - :	Pale Yellow	
Reaction (pH) :	5.0	4.6-8.0
Turbidity :	Clear	
Deposit :	Absent	Absent
Sp.Gravity :	1.020	1.005-1.010
Protein :	Absent	Absent
Glucose :	Absent	Absent
Bile Salts :	Absent	Absent
Bile pigments :	Absent	Absent
Ketones :	Absent	Absent
Urobilinogen :	Absent	
Blood :	Absent	Absent
Pus Cells :	Absent /hpf	0-5/hpf
Red Blood Cells :	Absent /hpf	Absent
Epithelial Cells :	0-1 /hpf	

Dr.Mehul Desai
M.B.D.C.P
Reg.No.G-9521



Patient Name :	Kalyan Singh	Sample No. :	20240314828 
Patient ID :	20240309248	Visit No. :	OPD20240329441
Age / Sex :	34y/Male	Call. Date :	29/03/2024 10:01
Consultant :	DR SAURABH JAIN	S. Coll. Date :	29/03/2024 13:17
Ward :	-	Report Date :	29/03/2024 17:25

FBS & PPBS

Investigation	Result	Normal Value
Blood Sugar (FBS) :	88 mg/dl	74 - 100 mg/dl
Urine Sugar (FUS) :	Nil	
Blood Sugar (PP2BS) :	96 mg/dl	70 to 120 mg/dl
Urine Sugar (PP2US) :	Nil	

HBA1C

Investigation	Result	Normal Value
Glycosylated Hb :	5.9 %	Near Normal Glycemia : 6 to 7 Excellent Control : 7 to 8 Good Control : 8 to 9 Fair Control : 9 to 10 Poor Control : > 10
Average Plasma Glucose of Last 3 Months :	122.63	

Dr.Mehul Desai
M.B.D.C.P
Reg.No.G-9521



Examination by Ophthalmologist

Name: KALYAN SINGH

Reg. No: 20230309248

Age/ Sex: 34EMALE

DOE: 29/03/2024

N4

Medical History:

N4

Examination of Eye: Right LEFT

External Examination:

Anti seg Examination:

Schiot Tonometry IOP:

Fundus:

Without Glass Distant Vision: 6.16 6.16

Near Vision: N6 N6

With Glass Distant Vision:

Near Vision:

Colour Vision (With Ishihara Chart):

Impression:

Advice:

Signature: _____





Examination by Physician

Name: KALYAN SINGH

Reg. No: 20230309248

Age/ Sex: 34/♂ MALE

DOE: 29/03/2024

Physical Examination

Height: 167 cm Weight: 84 kg BMI: 30.11

Temperature: N Pulse: 82 BP: 124 / 72 SpO2 - 98%

Chief Complaints:

NO complaint

Past History:

NAD

Examination:

General Examination:

NAD

Systemic Examination:

NAD

Investigation:

RBS _____

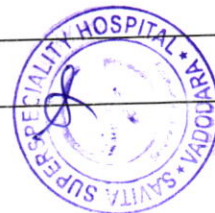
ECG _____

Others _____

Advice: T. Supradyn o-to

(30)

Signature _____



Health Check up Booking Confirmed Request(bobE17765),Package Code-PKG10000474, Beneficiary Code-252238

Wellness : Mediwheel : New Delhi <wellness@mediwheel.in>

Tue 26-03-2024 14:30

To:kalyan.singh@bankofbaroda.com <kalyan.singh@bankofbaroda.com>

Cc:Customer Care :Mediwheel : New Delhi <customercare@mediwheel.in>



Mediwheel
...Your wellness partner

011-41195959

Dear **MR. SINGH KALYAN**,

We are pleased to confirm your health checkup booking request with the following details.

Hospital Package Name : Mediwheel Full Body Health Checkup Male Below 40

Patient Package Name : Mediwheel Full Body Health Checkup Male Below 40

Name of Diagnostic/Hospital : Savita Superspeciality Hospital

Address of Diagnostic/Hospital- Parivar Char Rasta, Dabhoi - Waghodia Ring Rd, Sarthi Nagar 2, Kendranagar, Vadodara - 390019

City : Vadodara

State : Gujarat

Pincode : 390019

Appointment Date : 29-03-2024

Confirmation Status : Booking Confirmed

Preferred Time : 8:30am

Booking Status : Booking Confirmed

Member Information		
Booked Member Name	Age	Gender
MR. SINGH KALYAN	34 year	Male

Note - Please note to not pay any amount at the center.

Instructions to undergo Health Check:

- Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
- During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
- Bring urine sample in a container if possible (containers are available at the Health Check centre).
- Please bring all your medical prescriptions and previous health medical records with you.
- Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.