

Patient Name : Mr.SAMIVEL T	Collected : 24/Aug/2024 09:59AM
Age/Gender : 44 Y 1 M 22 D/M	Received : 24/Aug/2024 12:22PM
UHID/MR No : SALW.0000088539	Reported : 24/Aug/2024 01:57PM
Visit ID : CANNOPV419458	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E31758	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	13.7	g/dL	13-17	Spectrophotometer
PCV	40.90	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.75	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	86.1	fL	83-101	Calculated
MCH	28.8	pg	27-32	Calculated
MCHC	33.4	g/dL	31.5-34.5	Calculated
R.D.W	12.8	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,700	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	55.2	%	40-80	Electrical Impedance
LYMPHOCYTES	32.3	%	20-40	Electrical Impedance
EOSINOPHILS	4	%	1-6	Electrical Impedance
MONOCYTES	7.4	%	2-10	Electrical Impedance
BASOPHILS	1.1	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4250.4	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2487.1	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	308	Cells/cu.mm	20-500	Calculated
MONOCYTES	569.8	Cells/cu.mm	200-1000	Calculated
BASOPHILS	84.7	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.71		0.78- 3.53	Calculated
PLATELET COUNT	311000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	22	mm/hour	0-15	Capillary photometry
PERIPHERAL SMEAR				

METHODOLOGY : Microscopic.

RBC MORPHOLOGY : Predominantly normocytic normochromic RBC's noted.

Page 1 of 16



Dr THILAGA
M.B.B.S,M.D(Pathology)
Consultant Pathologist



SIN No:CAG240805105

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WBC MORPHOLOGY : Normal in number, morphology and distribution. No abnormal cells seen.

PLATELETS : Adequate in number.

PARASITES : No haemoparasites seen.

IMPRESSION : Normocytic normochromic blood picture.

NOTE/ COMMENT : Please correlate clinically.



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ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	A			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination

PLEASE NOTE THIS SAMPLE HAS BEEN TESTED ONLY FOR ABO MAJOR GROUPING AND ANTI D ONLY.



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	201	mg/dL	70-100	HEXOKINASE

Comment:

As per American Diabetes Guidelines, 2023

Fasting Glucose Values in mg/dL	Interpretation
70-100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes
<70 mg/dL	Hypoglycemia

Note:


- 1.The diagnosis of Diabetes requires a fasting plasma glucose of > or = 126 mg/dL and/or a random / 2 hr post glucose value of > or = 200 mg/dL on at least 2 occasions.
2. Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	255	mg/dL	70-140	HEXOKINASE

Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other. Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.

Test Name	Result	Unit	Bio. Ref. Interval	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				



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HBA1C, GLYCATED HEMOGLOBIN	9.9	%	HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	237	mg/dL	Calculated


Comment:

Reference Range as per American Diabetes Association (ADA) 2023 Guidelines:

REFERENCE GROUP	HBA1C %
NON DIABETIC	<5.7
PREDIABETES	5.7 – 6.4
DIABETES	≥ 6.5
DIABETICS	
EXCELLENT CONTROL	6 – 7
FAIR TO GOOD CONTROL	7 – 8
UNSATISFACTORY CONTROL	8 – 10
POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

- HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- Trends in HbA1C values is a better indicator of Glycemic control than a single test.
- Low HbA1C in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.
- Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present.
- In cases of Interference of Hemoglobin variants in HbA1C, alternative methods (Fructosamine) estimation is recommended for Glycemic Control
 - A: HbF >25%
 - B: Homozygous Hemoglobinopathy.
 (Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)



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Test Name	Result	Unit	Bio. Ref. Interval	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	248	mg/dL	<200	CHO-POD
TRIGLYCERIDES	79	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	45	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	203	mg/dL	<130	Calculated
LDL CHOLESTEROL	187.2	mg/dL	<100	Calculated
VLDL CHOLESTEROL	15.8	mg/dL	<30	Calculated
CHOL / HDL RATIO	5.51		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	< 0.01		<0.11	Calculated

Comment:

Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220

Measurements in the same patient can show physiological and analytical variations.

NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.



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Test Name	Result	Unit	Bio. Ref. Interval	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.52	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.42	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	18	U/L	<50	UV with P5P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	23.0	U/L	<50	IFCC Without Pyridoxal phosphate Activation
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	1.3		<1.15	Calculated
ALKALINE PHOSPHATASE	70.00	U/L	30-120	IFCC AMP Buffer
PROTEIN, TOTAL	7.30	g/dL	6.6-8.3	Biuret
ALBUMIN	4.20	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.10	g/dL	2.0-3.5	Calculated
A/G RATIO	1.35		0.9-2.0	Calculated

Comment:

LFT results reflect different aspects of the health of the liver, i.e., hepatocyte integrity (AST & ALT), synthesis and secretion of bile (Bilirubin, ALP), cholestasis (ALP, GGT), protein synthesis (Albumin) Common patterns seen:

1. Hepatocellular Injury:

*AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.
 *ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI. Disproportionate increase in AST, ALT compared with ALP. AST: ALT (ratio) – In case of hepatocellular injury AST: ALT > 1 In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilson’s diseases, Cirrhosis, but the increase is usually not >2.

2. Cholestatic Pattern:

*ALP – Disproportionate increase in ALP compared with AST, ALT. ALP elevation also seen in pregnancy, impacted by age and sex. *Bilirubin elevated- predominantly direct , To establish the hepatic origin correlation with elevated GGT helps.

3. Synthetic function impairment:

*Albumin- Liver disease reduces albumin levels, Correlation with PT (Prothrombin Time) helps.



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4. Associated tests for assessment of liver fibrosis - Fibrosis-4 and APRI Index.

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Age/Gender : 44 Y 1 M 22 D/M	Received : 24/Aug/2024 01:05PM
UHID/MR No : SALW.0000088539	Reported : 24/Aug/2024 03:08PM
Visit ID : CANNOPV419458	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E31758	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.91	mg/dL	0.72 – 1.18	JAFFE METHOD
UREA	19.00	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	8.9	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.10	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	9.30	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.80	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	137	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.9	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	102	mmol/L	101–109	ISE (Indirect)
PROTEIN, TOTAL	7.30	g/dL	6.6-8.3	Biuret
ALBUMIN	4.20	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.10	g/dL	2.0-3.5	Calculated
A/G RATIO	1.35		0.9-2.0	Calculated



DR. R. SRIVATSAN
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SIN No:CAG240805104

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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	36.00	U/L	<55	IFCC



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DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324


Test Name	Result	Unit	Bio. Ref. Interval	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-iodothyronine (T3, TOTAL)	1.58	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	10.03	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	6.650	µIU/mL	0.34-5.60	CLIA

Comment:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 – 3.0
Third trimester	0.3 – 3.0

- TSH is a glycoprotein hormone secreted by the anterior pituitary. TSH activates production of T3 (Triiodothyronine) and its prohormone T4 (Thyroxine). Increased blood level of T3 and T4 inhibit production of TSH.
- TSH is elevated in primary hypothyroidism and will be low in primary hyperthyroidism. Elevated or low TSH in the context of normal free thyroxine is often referred to as sub-clinical hypo- or hyperthyroidism respectively.
- Both T4 & T3 provides limited clinical information as both are highly bound to proteins in circulation and reflects mostly inactive hormone. Only a very small fraction of circulating hormone is free and biologically active.
- Significant variations in TSH can occur with circadian rhythm, hormonal status, stress, sleep deprivation, medication & circulating antibodies.

TSH	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	N	N	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement Therapy.
N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy
Low	N	N	N	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism
Low	N	High	High	Thyroiditis, Interfering Antibodies



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DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma



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DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM	0.300	ng/mL	0-4	CLIA

The normal reference PSA for the decadal age group of 40-49 years is 0-2.5 ng/mL



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Age/Gender : 44 Y 1 M 22 D/M	Received : 24/Aug/2024 02:32PM
UHID/MR No : SALW.0000088539	Reported : 24/Aug/2024 05:03PM
Visit ID : CANNOPV419458	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E31758	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	YELLOW		PALE YELLOW	Scattering of light
TRANSPARENCY	CLEAR		CLEAR	Scattering of light
pH	5.5		5-7.5	Bromothymol Blue
SP. GRAVITY	1.020		1.002-1.030	Refractometric
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	POSITIVE+		NEGATIVE	GOD-POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	Diazonium Salt
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	Sodium nitro prusside
UROBILINOGEN	NORMAL		NORMAL (0.1-1.8mg/dl)	Diazonium salt
NITRITE	NEGATIVE		NEGATIVE	Sulfanilic acid
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Diazonium salt
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	1	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1	/hpf	< 10	Microscopy
RBC	0	/hpf	0-2	Microscopy
CASTS	NEGATIVE	/lpf	0-2 Hyaline Cast	Microscopy
CRYSTALS	NEGATIVE	/hpf	Occasional-Few	Microscopy

Comment:

All urine samples are checked for adequacy and suitability before examination. All abnormal chemical examination are rechecked and verified by manual methods.

Microscopy findings are reported as an average of 10 high power fields.



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Patient Name : Mr.SAMIVEL T	Collected : 24/Aug/2024 09:59AM
Age/Gender : 44 Y 1 M 22 D/M	Received : 24/Aug/2024 04:41PM
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DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE GLUCOSE(POST PRANDIAL)	POSITIVE (++++)		NEGATIVE	Dipstick



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SIN No:CAG240805110

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Age/Gender : 44 Y 1 M 22 D/M	Received : 24/Aug/2024 02:32PM
UHID/MR No : SALW.0000088539	Reported : 24/Aug/2024 04:29PM
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DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE GLUCOSE(FASTING)	POSITIVE (+)		NEGATIVE	Dipstick

*** End Of Report ***



Dr THILAGA
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SIN No:CAG240805111

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Collected : 24/Aug/2024 09:59AM
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Reported : 24/Aug/2024 04:29PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

TERMS AND CONDITIONS GOVERNING THIS REPORT

The reported results are for information and interpretation of the referring doctor or such other medical professionals, who understand reporting units, reference ranges and limitations of technologies.

Laboratories not be responsible for any interpretation whatsoever.

It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of the particulars have been cleared out by the patient or his / her representative at the point of generation of said specimen.

The reported results are restricted to the given specimen only. Results may vary from lab to lab and from time to time for the same parameter for the same patient.

Assays are performed in accordance with standard procedures, The reported results are dependent on individual assay methods / equipment used and quality of specimen received.

This report is not valid for medico legal purposes.



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Consultant Pathologist



SIN No:CAG240805111

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Patient Name	: Mr. SAMIVEL T	Age	: 44Yrs 1Mths 25Days
UHID	: SALW.0000088539	OP Visit No.	: CANNOPV419458
Printed On	: 26-08-2024 06:02 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 22E31758		

DEPARTMENT OF RADIOLOGY

ULTRASOUND WHOLE ABDOMEN

Liver is normal in size and shows increase echotexture
Intra and extra hepatic biliary passages are not dilated.

Gall bladder - A calculus measuring ~ 7.4mm noted in the gall bladder. Wall thickness appear normal.

Pancreas and spleen appear normal.

Spleen measures 8.9cm.

Portal and splenic veins appear normal. No evidence of ascites or lymphadenopathy.

Diaphragmatic movements are satisfactory.

There is no evidence of sub diaphragmatic pathology or pleural effusion.

Right kidney measures 10.1 x 3.7cms **A cyst measuring ~ 1.6 x 1.5cm upper pole of right kidney.**

Left kidney measures 10.0 x 5.1cms

Both kidneys show normal echopattern with no evidence of calculi or calyceal dilatation.

Prostate measures 2.5 x 2.9 x 2.9cm volume 11cc and shows normal echopattern.

Seminal vesicles appear normal.

Bladder is normal in contour.

IMPRESSION:

*FATTY LIVER -GRADE -I

*CHOLELITHIASIS.

*RIGHT SIMPLE RENAL CYST.

---End Of The Report---

Dr.A R RAGHUL

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Radiology

Patient Name	: Mr. SAMIVEL T	Age	: 44Yrs 1Mths 23Days
UHID	: SALW.0000088539	OP Visit No.	: CANNOPV419458
Printed On	: 24-08-2024 07:55 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 22E31758		

DEPARTMENT OF CARDIOLOGY

2D ECHO COLOR DOPPLER

DIMENSIONS:

AO (ed) 2.8 CM
LA (es) 3.3 CM
LVID (ed) 4.2 CM
LVID (es) 3.1 CM
IVS (Ed) 0.9 CM
LVPW (Ed) 1.0 CM
EF 70%
% FD 40%

MORPHOLOGICAL DATA :

MITRAL VALVE NORMAL
AML NORMAL
PML NORMAL
AORTIC VALVE NORMAL
TRICUSPID VALVE NORMAL
PULMONARY VALVE NORMAL
RIGHT VENTRICLE NORMAL
INTER ATRIAL SEPTUM INTACT
INTER VENTRICULAR
SEPTUM INTACT
PULMONARY ARTERY NORMAL
AORTA NORMAL
RIGHT ATRIUM NORMAL
LEFT ATRIUM NORMAL

LEFT VENTRICLE NORMAL

PERICARDIUM NORMAL

DOPPLER STUDIES MITRAL INFLOW :

VALVE VELOCITY (m / sec)

PULMONARY VALVE 0.9

AORTIC VALVE 1.0

TRICUSPID VALVE 0.8

MITRAL VALVE : E WAVE : 0.7

MITRAL VALVE : A WAVE : 0.9

IMPRESSION :

NO RWMA

NORMAL LEFT VENTRICULAR FUNCTION (EF -70%)

NORMAL CARDIAC CHAMBERS & VALVES

GRADE I DIASTOLIC DYSFUNCTION

TRIVIAL TRICUSPID REGURGITATION

NO PAH / CLOT / PE .

DONE BY :

Ms. VITHYASREE. VS

---End Of The Report---

Dr. RAKESH GOPAL

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Cardiology

Patient Name	: Mr. SAMIVEL T	Age	: 44Yrs 1Mths 24Days
UHID	: SALW.0000088539	OP Visit No.	: CANNOPV419458
Printed On	: 24-08-2024 01:24 PM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 22E31758		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA VIEW

Lung fields are clear.

Cardio thoracic ratio is normal.

Apices, costo and cardio phrenic angles are free.

Cardio vascular shadow and hila show no abnormal feature.

Bony thorax shows no significant abnormality.

Domes of diaphragm are well delineated.

IMPRESSION:

***NO SIGNIFICANT ABNORMALITY DETECTED.**

---End Of The Report---

Dr. PRAVEENA T

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Radiology

Patient Name	: Mr. SAMIVEL T	Age	: 44Yrs 1Mths 23Days
UHID	: SALW.0000088539	OP Visit No.	: CANNOPV419458
Printed On	: 24-08-2024 10:26 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22E31758		

DEPARTMENT OF CARDIOLOGY

Observation :-

1. Heart rate is 62 beats per minutes.

Impression:

EARLY REPOLARIZATION .

---End Of The Report---

Dr. ARULNITHI AYYANATHAN

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Cardiology

Location:
Order Number:
Visit:
Indication:
Medication 1:
Medication 2:
Medication 3:

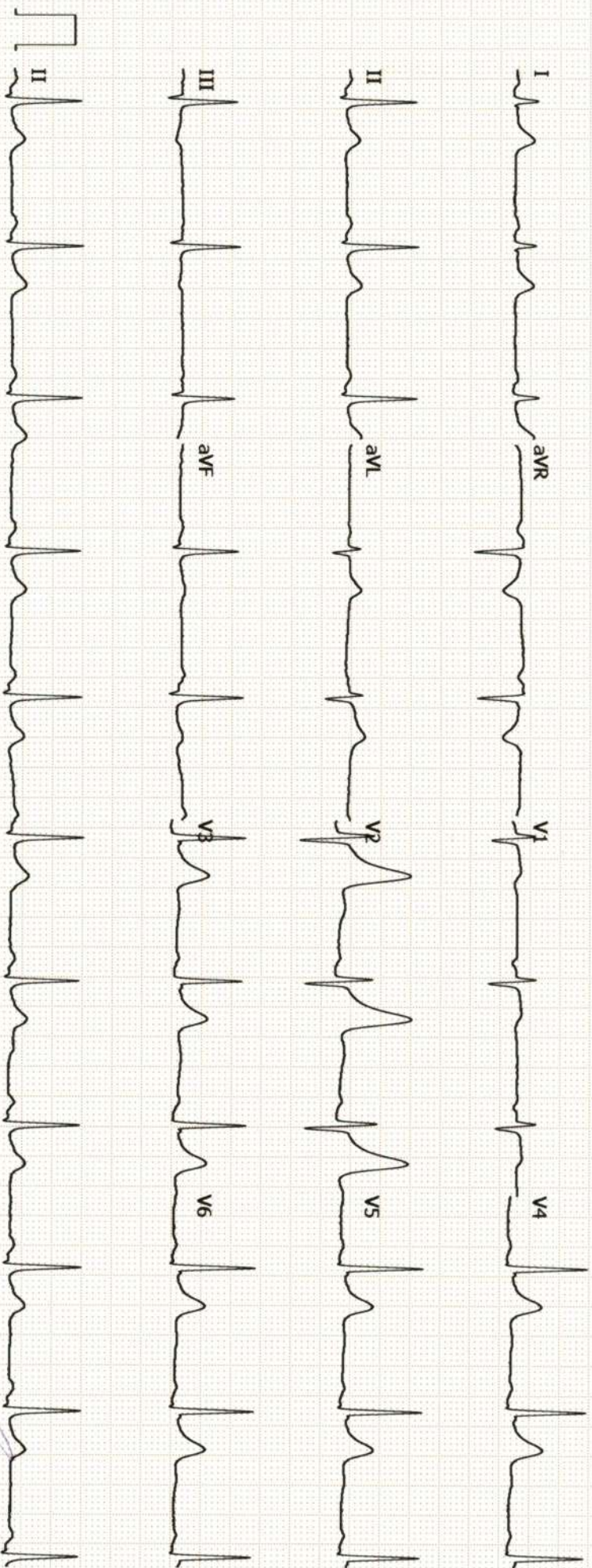
Room:

62 bpm
-- / -- mmHg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 82 ms
QT / QTcBaz : 392 / 397 ms
PR : 168 ms
P : 120 ms
RR / PP : 970 / 967 ms
P / QRS / T : 50 / 71 / 23 degrees

ECG
RPR
GMR



Name: <u>Saminel T</u>	Date: <u>29/8/24</u> Regn. No: <u>88539</u>
Occupation: _____	Ref. Physician: _____
Age: <u>24y</u> Sex: Male <input checked="" type="checkbox"/> Female <input type="checkbox"/>	Copies to: _____
Address: _____	_____
Tel. No: _____	_____

REPORT ON OPHTHALMIC EXAMINATION

HISTORY: Existing glass worn past 2 years.

PRESENT COMPLAINT: Reading only + 1.00 Ng

ON EXAMINATION	RE	LE
Ocular Movements :		
Anterior Segment :		
Intra-Ocular-Pressure :	<u>Free</u>	<u>Free</u>
Visual Acuity: D.V. :		
Without Glass :	<u>N</u>	<u>N</u>
With Glass :	<u>6/6^p</u>	<u>6/6^p</u>
N.V. :		
Visual Fields :		
Fundus :	<u>Ng</u>	<u>Ng</u>
Impression :	<u>Free</u>	<u>Free</u>
Advice :		
Colour Vision :	<u>N</u>	<u>N</u>

OPTOMETRIST

Saminel T

Mr. Samivel.T

44/M

24/8/24

Height:	Weight:	BMI:	Waist Circum:
Temp:	Pulse:	Resp:	B.P:

General Examination / Allergies History

R₆

Adv. OPG

Adv. extraction of 8 | ↓ LA.

Adv. oral prophylaxis

Dr. Sanjane

9500022046

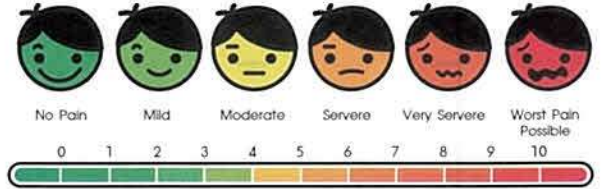
Follow up date:



Doctor Signature & Stamp

ENT check up

29/8/24



Samirel

44/M

Height :	Weight :	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P :

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

No complaints


O/E - DSR & HT

Follow up date:

Doctor Signature

8:59

बैंक ऑफ बड़ोदा
Bank of Baroda



नाम : T. SAMIVEL
Name

कर्मचारी कूट क्र : 88322
E.C. No.

[Signature]
जारीकर्ता प्राधिकारी
Issuing Authority

[Signature]
धारक के हस्ताक्षर
Signature of Holder

SALW - 88539
OAR - 105983

[Signature]
90434 61841

विज्ञान - पर निम्नलिखित स्वी-चिह्न

बैंक ऑफ बड़ोदा (सुरक्षा)
बैंक ऑफ बड़ोदा, बड़ोदा कॉर्पोरेट सेंटर
सी-26, जी-ब्लॉक, बांद्रा-कुर्ला कॉम्प्लेक्स, मुंबई-400 051, भारत
फोन: 91 22 6698 5196, फैक्स 91 22 2652 5747

If found, please return to:
Asst. General Manager (Security)
Bank of Baroda, Baroda Corporate Centre
C-26, G-Block, Bandra-Kurla Complex
Mumbai 400051, India
Phone: 91 22 6698 5196, Fax: 91 22 2652 5747

रक्त समूह / Blood Group : A1.+ve
पहचान चिह्न / Identification Marks - A mole near right ear

CASE RECORD

Name: <u>Mr. Santvel S</u>	Date: <u>24/6/20</u>
Occupation: _____	UHID No.: <u>88539</u>
Age: <u>47</u> Sex: <u>Female</u>	OP / Company: <u>Arceem</u>
Address: _____	Ref. Physician: <u>Dr. Anush</u>
Tel No: _____	

Consultant :

ARC

OK

① ↑ FBS / ↑ PPBS
HbA1c = 9.9%

R/H/O DM (NOT ON med) 1 yr

② DLP

③ ↑ TSH = 6.650

History :

Chief Complaints : (If pain is present. please describe location, character, score etc.)

2) % LUQ pain (+) x 1 yr
(sudden onset) - pricking type

④ Urine = glu +

⑤ GI - RL
Cholelithiasis

⑥ Simple renal cyst

History of Present illness :

Adv

① To get Diabetologist consult to start OHA

② T. Rosuvastatin 20mg
0-0-1
x 3 months

③ To get Gastro-epi
sui

④ Low carb / Low fat diet
Reg. physical exercise

Apollo Medical Centre
No. 30, F-Block, 2nd Avenue,
Anna Nagar East, Chennai-600 102
Tel: 044-26224505, Mobile: 7358392880
Toll No. 1800 500 7788

21 97
95
w

Physical Examination

General :

Build

Height 167

Weight 73

Anaemia

Icterus

Cyanosis

Clubbing

Oedema

Glands

ENT :

CVS : Heart Rate & Rhythm

B.P. : Supine

120/70

68

Sitting

Standing

Chest Shape

Heart Sounds

Murmurs

Thrills

RS : Rate & Type

Breath Sounds

Abdomen : Appearance

Liver

Spleen

Tenderness

Bowel sounds

(N)

Fluid

Genitals :

CNS : Cranial Nerves

Sensors SYstem

Motor System

Reflexes

Fundus

Skin :

Extremities :