



MR. *howar V/S*  
40 y/m

*routine eye checkup*

**Vitals :**

**Chief Complaints :**

**H/O Present Illness :**

**Past History :**

**Investigation :**

**Drug Allergies : (if any)**

**Treatment :**

*BP: 120/70 mm*  
*weight: 67kg*  
*SpO2: 98%*  
*Pulse: 58 bpm*

*my 6/6*  
*6/6 = glasses*

*WCT 12*  
*15*

*my me*  
*me*

*Colour vision - unnormal*

*(BE)*

*Reflexes - normal*

*(BE)*



ENT  
Routine ENT check up  
Ear  
Nose } NAD.  
Throat

Vitals :

Chief Complaints :


H/O Present Illness :

Past History :

Investigation :

Drug Allergies : (if any)

Treatment :

  
13 | 04 | 24



Senior Health Checkup

Dental

10/11/24

Vitals :

Chief Complaints :

O/E

Carious wst 25

H/O Present Illness :

Stain ++ calculus ++

Past History :

Adv

RET & crown wst 25

Investigation :

Drug Allergies : (if any)

Scurvy & po history

Treatment :

↓  
↓





**DEPARTMENT OF MICROBIOLOGY**

Patient Name : Mr. GAURAV VYAS  
MR No : 698526  
Age/Sex : 40 Years 9 Months 23 Days / Male  
Type : OPD  
TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 13/04/2024  
Reporting Date : 15/04/2024  
Sample ID : 271842  
Bill/Req. No. : 25281510  
Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
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**URINE C/S**

NAME OF SPECIMEN	Urine (Uncentrifuged )			
ORGANISM IDENTIFIED	NO ORGANISM GROWN IN CULTURE AFTER 48 HRS OF INCUBATION AT 37 C DEGREE.			Aerobic cultu

Method :

**Note : URINE CULTURE :**

Presence of >105 cfu/ml (100000) in midstream urine sample is considered clinically significant. However in symptomatic compromised or diabetic patients & patients with indwelling catheters, even a smaller count of bacteria may signify infection (10000cfu/ml). Kindly correlate clinically.

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



Sample no.



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MBBS, MD (PATHOLOGY)

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## DEPARTMENT OF HAEMATOLOGY

Patient Name : Mr. GAURAV VYAS

MR No : 698526

Age/Sex : 40 Years 9 Months 23 Days / Male

Type : OPD

TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 13/04/2024

Reporting Date : 13/04/2024

Sample ID : 271842

Bill/Req. No. : 25281510

Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>CBC</b>				
HAEMOGLOBIN	12.5	12 - 16	gm/dL	COLORIMETRY
TOTAL LEUCOCYTE COUNT	7420	4000-11000	/ $\mu$ L	LASER FLOW
<b>DIFFERENTIAL COUNT</b>				
NEUTROPHILS	80	<i>H</i> 40.0 - 70.0	%	FLOW CYTOMETRY
LYMPHOCYTES	16	<i>L</i> 20.0 - 40.0	%	FLOW CYTOMETRY
MONOCYTES	03	3.0 - 8.0	%	FLOW CYTOMETRY
EOSINOPHILS	01	0.5 - 5.0	%	FLOW CYTOMETRY
BASOPHILS	00	0.0 - 2.0	%	FLOW CYTOMETRY
RED BLOOD CELL COUNT	4.31	3.5 - 5.5	millions/ $\mu$ L	ELECTRICAL
PACKED CELL VOLUME	38.2	35.0 - 50.0	%	ELECTRICAL
MEAN CORPUSCULAR VOLUME	88.7	83 - 101	fL	ELECTRICAL
MEAN CORPUSCULAR HAEMOGLOBIN	29.0	27 - 31	Picogrames	CALCULATED
MEAN CORPUSCULAR HB CONC	32.7	<i>L</i> 33 - 37	g/dl	CALCULATED
PLATELET COUNT	121	<i>L</i> 150 - 450	thou/ $\mu$ L	ELECTRICAL
RDW	14.1	11.6 - 14.5	%	CALCULATED
SAMPLE TYPE FOR C.B.C	Whole Blood EDTA			

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



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## DEPARTMENT OF PATHOLOGY

Patient Name : Mr. GAURAV VYAS  
 MR No : 698526  
 Age/Sex : 40 Years 9 Months 23 Days / Male  
 Type : OPD  
 TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 13/04/2024  
 Reporting Date : 13/04/2024  
 Sample ID : 271842  
 Bill/Req. No. : 25281510  
 Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>URINE ROUTINE AND MICROSCOPY</b>				
<b>PHYSICAL CHARACTERISTICS</b>				
QUANTITY	40ml	5 - 100	ml	
COLOUR	Pale Yellow	Pale Yellow		Manual Method
TURBIDITY	Clear	clear		
SPECIFIC GRAVITY	1.030	1.000-1.030		urinometer
PH - URINE	6.0	5.0 - 9.0		PH PAPER
<b>CHEMICAL EXAMINATION-1</b>				
UROBILINOGEN	Negative	NIL		Ehrlich
URINE PROTEIN	Absent	NIL	mg/dl	Protein error indicator
BLOOD	NIL	NIL		
URINE BILIRUBIN	NIL	NIL		
GLUCOSE	NIL	NIL	mg/dL	GOD-POD/Benedicts
URINE KETONE	NIL	NIL		SOD.
<b>MICRO.EXAMINATION</b>				
PUS CELL	2-4	0-5	cells/hpf	Microscopic
RED BLOOD CELLS	Nil	0-2	cells/hpf	
EPITHELIAL CELLS	1-3	0-5	cells/hpf	
CASTS	NIL	NIL	/lpf	
CRYSTALS	NIL	NIL	/Lpf	
OTHER	NIL			
AMORPHOUS URINE	Absent			MicroScopy

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



Sample no.

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**DEPARTMENT OF BIOCHEMISTRY**

**Patient Name** : Mr. GAURAV VYAS

**MR No** : 698526

**Age/Sex** : 40 Years 9 Months 23 Days / Male

**Type** : OPD

**TPA/Corporate** : MEDIWHEEL PVT LTD

**Bill Date** : 13/04/2024

**Reporting Date** : 13/04/2024

**Sample ID** : 271842

**Bill/Req. No.** : 25281510

**Ref Doctor** : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>BLOOD SUGAR FASTING</b>				
PLASMA GLUCOSE FASTING	90	60 - 110	mg/dl	GOD TRINDERS

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



Sample no.

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**DEPARTMENT OF BIOCHEMISTRY**

**Patient Name** : Mr. GAURAV VYAS

**MR No** : 698526

**Age/Sex** : 40 Years 9 Months 23 Days / Male

**Type** : OPD

**TPA/Corporate** : MEDIWHEEL PVT LTD

**Bill Date** : 13/04/2024

**Reporting Date** : 13/04/2024

**Sample ID** : 271842

**Bill/Req. No.** : 25281510

**Ref Doctor** : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>BLOOD SUGAR 2 HR. PP</b>				
BLOOD SUGAR P.P.	113	80 - 150	mg/dl	

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



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**DEPARTMENT OF HAEMATOLOGY**

Patient Name : Mr. GAURAV VYAS

MR No : 698526

Age/Sex : 40 Years 9 Months 23 Days / Male

Type : OPD

TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 13/04/2024

Reporting Date : 13/04/2024

Sample ID : 271842

Bill/Req. No. : 25281510

Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>BLOOD GROUPING AND RH FACTOR</b>				
BLOOD GROUP	"O" RH POSITIVE			ABO/Rh (D) SLIDE

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



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**DEPARTMENT OF HAEMATOLOGY**

**Patient Name** : Mr. GAURAV VYAS

**MR No** : 698526

**Age/Sex** : 40 Years 9 Months 23 Days / Male

**Type** : OPD

**TPA/Corporate** : MEDIWHEEL PVT LTD

**Bill Date** : 13/04/2024

**Reporting Date** : 16/04/2024

**Sample ID** : 271842

**Bill/Req. No.** : 25281510

**Ref Doctor** : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>ESR (WESTERGREN)</b>				
E.S.R .1ST HRS.	12	0 - 20	mm/Hr.	Westergren
SPECIMEN TYPE	WHOLE BLOOD-EDTA			

**Method** : (Capillary photometry)

- Note** :
1. C-Reactive Protein (CRP) is the recommended test in acute inflammatory conditions.
  2. Test conducted on EDTA whole blood at 37C.
  3. ESR readings are auto- corrected with respect to Hematocrit (PCV) values.

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



Sample no.

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## DEPARTMENT OF IMMUNOLOGY

**Patient Name** : Mr. GAURAV VYAS  
**MR No** : 698526  
**Age/Sex** : 40 Years 9 Months 23 Days / Male  
**Type** : OPD  
**TPA/Corporate** : MEDIWHEEL PVT LTD

**Bill Date** : 13/04/2024  
**Reporting Date** : 13/04/2024  
**Sample ID** : 271842  
**Bill/Req. No.** : 25281510  
**Ref Doctor** : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>THYROID PROFILE</b>				
TRI-IODOETHYRONINE (T3)	0.96	0.60 - 1.81	ng/ml	Chemiluminescence
THYROXINE (T4)	6.1	5.01 - 12.45	µg/dL	Chemiluminescence
THYROID STIMULATING HORMONE	4.60	0.5-5.50	µIU/ml	
SPECIMEN TYPE	SERUM			

**Method** : chemiluminescent immunoassay

**Note** : Clinical Significance:

Thyroid function tests (TFTs) is a collective term for blood tests used to check the function of the thyroid. TFTs may be requested if a patient is thought to suffer from hyperthyroidism (overactive thyroid) or hypothyroidism (underactive thyroid), or to monitor the effectiveness of either thyroid-suppression or hormone replacement therapy. It is also requested routinely in conditions linked to thyroid disease, such as atrial fibrillation and anxiety disorder. A TFT panel typically includes thyroid hormones such as thyroid-stimulating hormone (TSH, thyrotropin) and thyroxine (T4), and triiodothyronine (T3) depending on local laboratory policy.

Note: Please correlate with clinical condition

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



Sample no.

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## DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mr. GAURAV VYAS

MR No : 698526

Age/Sex : 40 Years 9 Months 23 Days / Male

Type : OPD

TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 13/04/2024

Reporting Date : 13/04/2024

Sample ID : 271842

Bill/Req. No. : 25281510

Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>LFT (LIVER FUNCTION TEST)</b>				
<b>LFT</b>				
TOTAL BILIRUBIN	0.7	0 - 1.2	mg/dL	DIAZO
DIRECT BILIRUBIN	0.2	0 - 0.4	mg/dL	DIAZO
INDIRECT BILIRUBIN	0.5	0.10 - 0.6	mg/dL	CALCULATED
SGOT (AST)	19	0 - 45	U/L	IFCC WITHOUT
SGPT (ALT)	13	0 - 45	U/L	IFCC WITHOUT
ALKALINE PHOSPHATASE	91	30 - 170	IU/L	MODIFIED IFCC
TOTAL PROTEINS	6.5	6.4 - 8.0	g/dL	BIURET
ALBUMIN	3.7	3.3 - 5.5	g/dL	BCG DYE
GLOBULIN	2.8	2.3 - 4.5	g/dL	CALCULATED
A/G RATIO	1.32	1.1 - 2.2		CALCULATED

SAMPLE TYPE: SERUM

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



Sample no.

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## DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mr. GAURAV VYAS

MR No : 698526

Age/Sex : 40 Years 9 Months 23 Days / Male

Type : OPD

TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 13/04/2024

Reporting Date : 13/04/2024

Sample ID : 271842

Bill/Req. No. : 25281510

Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>KFT (RENAL PROFILE)</b>				
KFT				
SERUM UREA	32	10 - 45	mg/dL	
SERUM CREATININE	0.8	0.4 - 1.4	mg/dL	MODIFIED JAFFES
SERUM URIC ACID	7.0	2.5 - 7.0	mg/dL	URICASE
SERUM SODIUM	139	135 - 150	mmol/L	ISE
SERUM POTASSIUM	4.0	3.5 - 5.5	mmol/L	ISE
SERUM CALCIUM	9.6	8.5 - 10.5	mg/dL	ARSENazo III
SERUM PHOSPHORUS	2.9	2.5 - 4.5	mg/dL	AMMONIUM
SAMPLE TYPE:	SERUM			

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



Sample no.

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## DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mr. GAURAV VYAS

MR No : 698526

Age/Sex : 40 Years 9 Months 23 Days / Male

Type : OPD

TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 13/04/2024

Reporting Date : 13/04/2024

Sample ID : 271842

Bill/Req. No. : 25281510

Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>LIPID PROFILE</b>				
TOTAL CHOLESTEROL	172	0 - 250	mg/dL	CHOD -Trinder
SERUM TRIGLYCERIDES	147	60 - 165	mg/dl	GPO-TRINDER
HDL-CHOLESTEROL	35	30 - 70	mg/dl	DIRECT
LDL	107.6	50 - 135	mg/dl	calculated
LDL CHOLESTEROL/HDL RATIO	<b>3.07</b>	<i>H</i> 1.0 - 3.0	mg/dl	calculated
TOTAL CHOLESTEROL/HDL RATIO	4.91	2.0 - 5.0	mg/dl	calculated

Note : ATP III Guidelines At-A-Glance Quick Desk Reference

Step 1 - Determine lipoprotein levels obtain complete lipoprotein profile after 9- to 12-hour fast.

ATP III Classification of LDL, Total, and HDL Cholesterol (mg/dL):-

LDL Cholesterol Primary Target of Therapy  
 <100 Optimal  
 130-159 Borderline high  
 >190 Very high.

Total Cholesterol  
 <200 Desirable  
 200-239 Borderline high  
 >240 High

HDL Cholesterol  
 <40 Low  
 >60 High

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



Sample no.

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**DEPARTMENT OF IMMUNOLOGY**

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 MR No : 698526  
 Age/Sex : 40 Years 9 Months 23 Days / Male  
 Type : OPD  
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 Sample ID : 271842  
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Test	Result	Bio. Ref. Interval	Units	Method
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**PSA TOTAL**

PROSTATE SPECIFIC ANTIGEN(PSA)	0.63	0.57 - 4.0	ng/ml	Chemiluminescence
SPECIMEN TYPE	SERUM			

Method : chemiluminescent immunoassay

**Note : Clinical Use: -**

An aid in the early detection of Prostate cancer in Male. Follow up and amazement of Prostate cancer patients. Detect metastatic or persistent disease in patients following surgical or medical treatment of Prostate cancer

Note: -

False negative / positive results are observed in patients receiving mouse monoclonal antibodies for diagnosis or therapy. PSA levels may appear consistently elevated / depressed due to the interference by heterophilic antibodies & nonspecific protein binding. PSA values regardless of levels should not be interpreted as absolute evidence of the presence or absence of disease. All values should be correlated with clinical findings and results of other investigations.

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



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NAME	: MR. GAURAV VYAS	DATE	: 13 / 4 / 2024
Age Sex	: 40 Years / Male	Inpatient No	: 698526
PERFORMED BY	: Dr. SACHIN BANSAL	UHID	: 25281510

## TRANS THORACIC ECHO CARDIOGRAPHY REPORT

### MITRAL VALVE

**Morphology** AML: Normal / Thickening / Calcification / Flutter / Vegetation / Non significant Prolapse / SAM

PML: Normal / Thickening / Calcification / Prolapse / Paradoxical Motion / Fixed.  
Subvalvular deformity: Present / Absent

**Doppler** Normal / Abnormal

Mitral Stenosis Present / Absent

Mitral Regurgitation; Absent / Normal / Mild / Trace / Moderate / Severe / Trivial

### TRICUSPID VALVE

**Morphology** Normal / Atresia / Thickening / Calcification / Prolapse / Vegetation / Doming.

**Doppler** Normal / Abnormal

Tricuspid Stenosis : Present / Absent.

Tricuspid Regurgitation; Absent / Normal / Mild / Trace / Moderate / Severe.

### PULMONARY VALVE

**Morphology** Normal / Atresia / Thickening / Calcified / Doming / Vegetation.

**Doppler** Normal / Abnormal.

Pulmonary stenosis : Present / Absent

Pulmonary regurgitation : Present / Absent

### AORTIC VALVE

**Morphology** Normal / Thickened / Mildly / Calcified / Flutter / Vegetation / Restricted / Opening

No. of Cusps 1 / 2 / 3 / 4

**Doppler** Normal / Abnormal

Aortic Stenosis : Present / Absent

Aortic regurgitation : Present / Absent / Mild / Trace



Cert. No. H-2016-0369

(This is only professional opinion and not the diagnosis, please correlate clinically)

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**PARK GROUP OF HOSPITALS** : West Delhi - Gurugram - Faridabad - Sonapat - Panipat - Karnal - Ambala - Patiala - Behror - Jaipur



# Park Hospital

GROUP SUPER SPECIALITY HOSPITAL

<u>Measurements</u>	<u>Normal Values</u>	<u>Measurements</u>	<u>Normal Value</u>
IVSD : 0.9cm	(0.6-1.1cm)	LA : 3.0cm	(1.9-4.0cm)
LVID : 4.4cm	(3.7-5.6cm)	LVOT : 1.4cm	
LVPW : 1.0cm	(0.6-1.1cm)	AORTA : 2.7cm	(2.0-3.7cm)
EF : 55-60%	(55% - 80%)	IVSmotion :	<b>Normal / Flat / Paradoxical</b>

Any Other

## CHAMBERS:-

- LV **Normal** / Enlarged / **Clear** / Thrombus /  
Contraction Normal LV shows concentric LVH, no gradient across LVOT /Inetic / Intra capillary  
Regional wall motion abnormality: **Absent**/ Present
- LA **Normal** /Enlarged / Clear /Thrombus / Myxoma; **LAA: Clear** / Thrombus
- RA **Normal** / **Clear** / Thrombus, Dilated.
- RV **Normal** / Enlarged / **Clear** / Thrombus / Hypertrophied/ Dilated.
- PERICARDIUM **Normal** / Thickening / Calcification / Effusion.

## COMMENTS & SUMMARY:-

- **NORMAL LV FUNCTION**
- **Global LVEF – 55-60%**
- **No RWMA**
- **NO MR / NO AR / NO TR**
- **GOOD RV FUNCTION**
- **No Flow seen across IAS/IVS.**
- **No Thrombus/Mass in any chamber.**
- **No Pericardial Effusion.**

Please correlate clinically

  
Dr. SACHIN BANSAL  
M.D.(Medicine)  
D.M (Cardiology)



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the **health** care providers

the **health** care providers



**DEPARTMENT OF RADIOLOGY**

<b>Patient Name</b>	Mr GAURAV VYAS	<b>Billed Date</b>	: 13/04/2024
<b>Reg No</b>	698526	<b>Reported Date</b>	: 13/04/2024
<b>Age/Sex</b>	40 Years 9 Months 23Days / Male	<b>Req. No.</b>	: 25281510
<b>Type</b>	OPD	<b>Consultant Doctor</b>	: Dr. RMO

**X-RAY CHEST AP/PA**

Bilateral lungs appears normal.

No focal lung lesion seen.

No evidence of free fluid is seen.


Both hila are normal in size, have equal density and bear normal relationship.

The heart and trachea are central in position and no mediastinal abnormality is visible.

The cardiac size is normal for patient age and view.

The domes of the diaphragms are normal in position, and show smooth outline.

To be correlated clinically

  
Dr. ANSHU K. SHARMA  
MBBS, MD  
CONSULTANT RADIOLOGIST

Dr. MANJEET SEHRAWAT  
MBBS, MD, PDCC  
CONSULTANT RADIOLOGIST

ALISHA KHAN  
MEDICAL TRANSCRIPTIONIST

Dr. NEENA SIKKA  
MBBS, DNB  
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RAJNISH SHARMA  
MEDICAL  
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**USG WHOLE ABDOMEN**

The Real time, B mode, gray scale sonography of the abdominal organs was performed.

**LIVER** : The liver is normal in size (13.4cm), shape and echotexture. No evidence of any focal lesion. IHBR is not dilated.

**GALL BLADDER** :The gall bladder is well distended. No evidence any calculus or mass seen.No evidence of pericholecystic fluid is seen.

**BILE DUCT** :The common bile duct is normal in caliber. No evidence of calculus is noted in common bile duct.

**SPLEEN** :The spleen is normal in size (8.7cm) and shape.Its echotexture is homogeneous.No evidence of focal lesion is noted.

**PANCREAS** :The pancreas is normal in size, shape, contours and echotexture.No evidence of solid or cystic mass lesion is noted.MPD is not dilated. No evidence of peripancreatic collection.

**KIDNEYS** : Right kidney measures 9.5 x 4.5 cm. Left kidney measures 8.7 x 4.6 cm. The bilateral kidneys are normal in size and echotexture. Cortico-medullary differentiation is maintained.There is no evidence of obvious calculus or hydronephrosis.

**URINARY BLADDER** :The urinary bladder is well distended.Wall thickness within normal limits.No evidence of calculus is seen.No evidence of mass or diverticulum is noted.

**PROSTATE**: Prostate appears normal in size (volume 19 cc), shape and echotexture. No evidence of ascites or interbowel free fluid is seen.

No evidence of obvious retroperitoneal or mesentric lymphadenopathy is seen.

**Bowel loop distended with gas.**

**IMPRESSION- No obvious abnormalities noted.**

To be correlated clinically

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25mm/s 0.5~25Hz

I 10mm/mV



II



III



10mm/mV



aVR



aVL



SYNC aVF



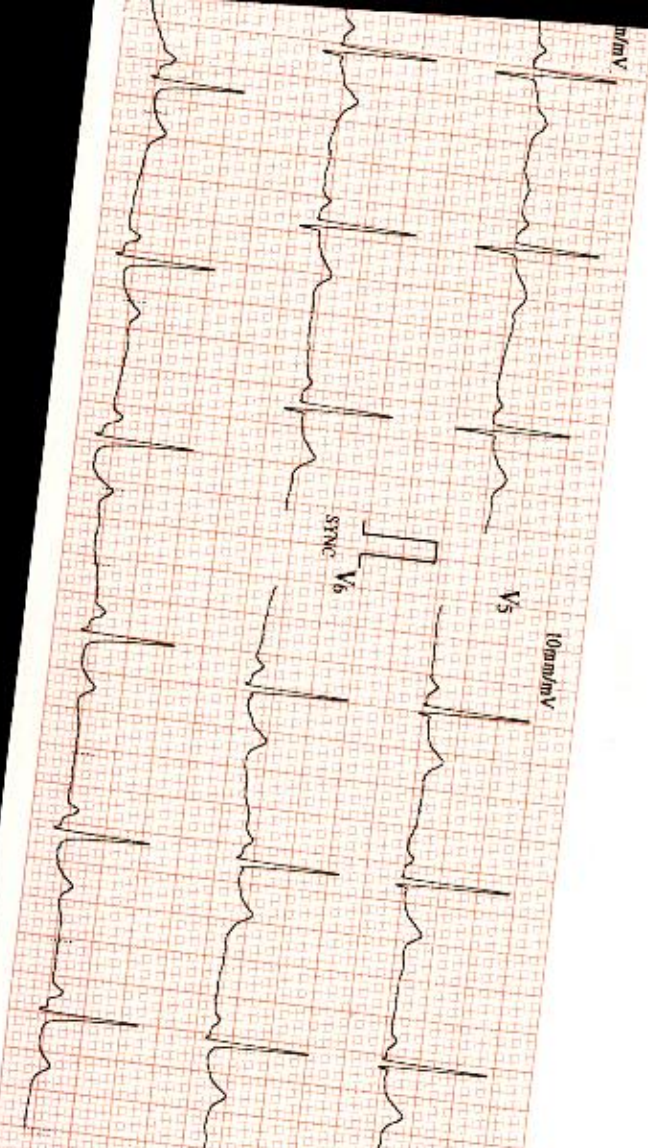
10mm/mV



V2



SYNC



ID : 0002  
 13/04/24 Time - 12:40pm

Name: Gausarvya

Sex : male

Age : 40y

HR	: 62	bpm
P-R	: 957	ms
P-R	: 144	ms
QRS	: 86	ms
QT/QTc	: 375/38.3	ms
P/QTc/T	: 58/66/33	ms
RV5/SV1	: 1.390/0.670	mV
RV5+SV1	: 2.060	mV

----- Sinus Rhythm  
 ----- Unspecified T Abnormality

Unconfirmed Report Verified by: