

Dr. Vimmi Goel  
MBBS, MD (Internal Medicine)  
Sr. Consultant Non Invasive Cardiology  
Reg. No: MMC-2014/01/0113

Preventive Health Check up  
KIMS Kingsway Hospitals  
Nagpur  
Phone No.: 7499913052



Name: Mr. Rajkumar Sarpate Date: 8/3/24

Age: 54 y Sex: M Weight: 68.4 kg Height: 162.3 inc BMI: 26.0

BP: 200/107 mmHg Pulse: 68/m bpm RBS: \_\_\_\_\_ mg/dl

SPO2: 99%

54/M

- Dyslipidemia
- LDL - 152
- 2D - HHD  
LVEF 62%
- FH - Mother HT

O/E

JVP°

Ch  
ly  
P/A | N.

STOP TOBACCO

Admission - Pr.  
2/3/24/11 Mr. willing

Pr's sign.

Adv.

- Renal Doppler
- Diet, walking

1. T. Telma <sup>CT</sup> ~~AM~~ 1 \_\_\_\_\_  
(40 + ~~5~~ 6.25)
2. T. Telma (40 \* \_\_\_\_\_  
- AM + 5)
3. T. Roseday 10 \* \_\_\_\_\_  
A/D

- Daily BP monitoring
- R/A 2d on 11/3/24

Dr. Vimmi Goel  
MBBS, MD  
Sr. Consultant Non Invasive Cardiology

Baner of Banaraj



**KIMS - Kingsway Hospitals**  
(A Unit of SPANV Medisearch Lifesciences Pvt. Ltd.)  
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Maharashtra, India - 440001.

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**DEPARTMENT OF OPHTHALMOLOGY**  
**OUT PATIENT ASSESSMENT RECORD**

<b>RAJKUMAR SHALIKRAM SARPATE</b> 54Y(S) 0M(S) 0D(S)/M UMR2324039829 9096792420	<b>CONSULT DATE</b> : 08-03-2024 <b>CONSULT ID</b> : OPC2324122672 <b>CONSULT TYPE</b> : <b>VISIT TYPE</b> : NORMAL <b>TRANSACTION TYPE</b> : CASH	<b>DR. ASHISH PRAKASHCHANDRA KAMBLE</b> <b>MBBS, MS, FVRS, FICO</b> CONSULTANT <b>DEPT OPHTHALMOLOGY</b>
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**VITALS**

**Temp** : **Pulse** : **BP (mmHg)** : **spO2** : **Pain Score** : **Height** :  
- °F - /min - %RA - /10 - cms  
**Weight** : **BMI** :  
- kgs -

**CHIEF COMPLAINTS**

ROUTINE CHECK UP

(RE) Mature  
cataract

**NOTES**

**GLASS PRESCRIPTION :-**  
**DISTANCE VISION**

EYE	SPH	CYL	AXIS	VISION
RIGHT EYE	00	00	00	HMPR
LEFT EYE	+0.50	00	00	6/6

(L) mild NPAR  
+ toxoplasmosis  
scar

**REVIEW**

**NEAR ADDITION**  
Follow up Date Surgery Date Anaesthetists Surgeons Surgeries  
22-03-2024

**RIGHT EYE** +2.25D NA

Advice

**Dr. Ashish Prakashchandra Kamble**  
MBBS, MS, FVRS, FICO  
Consultant

**LEFT EYE** +2.25D N6

(RE)

phaco  
+ mono focus

Printed On : 08-03-2024 14:26:28

**REMARK-**

Bscan  
AScan

Advice  
- RTV  
- HBSAG  
- RFS

10L  
one



**CLINICAL DIAGNOSTIC LABORATORY**

**DEPARTMENT OF PATHOLOGY**

<b>Patient Name</b> : Mr. RAJKUMAR SHALIKRAM SARPATE	<b>Age /Gender</b> : 54 Y(s)/Male
<b>Bill No/ UMR No</b> : BIL2324083289/UMR2324039829	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 08-Mar-24 09:49 am	<b>Report Date</b> : 08-Mar-24 11:35 am

**HAEMOGRAM**

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Haemoglobin	Blood	16.6	13.0 - 17.0 gm%	Photometric
Haematocrit(PCV)		48.4	40.0 - 50.0 %	Calculated
RBC Count		<b>5.61</b>	4.5 - 5.5 Millions/cumm	Photometric
Mean Cell Volume (MCV)		86	83 - 101 fl	Calculated
Mean Cell Haemoglobin (MCH)		29.6	27 - 32 pg	Calculated
Mean Cell Haemoglobin Concentration (MCHC)		34.4	31.5 - 35.0 g/l	Calculated
RDW		14.0	11.5 - 14.0 %	Calculated
Platelet count		269	150 - 450 10 <sup>3</sup> /cumm	Impedance
WBC Count		6900	4000 - 11000 cells/cumm	Impedance

**DIFFERENTIAL COUNT**

Neutrophils	55.9	50 - 70 %	Flow Cytometry/Light microscopy
Lymphocytes	37.6	20 - 40 %	Flow Cytometry/Light microscopy
Eosinophils	3.1	1 - 6 %	Flow Cytometry/Light microscopy
Monocytes	3.3	2 - 10 %	Flow Cytometry/Light microscopy
Basophils	0.1	0 - 1 %	Flow Cytometry/Light microscopy
Absolute Neutrophil Count	3857.1	2000 - 7000 /cumm	Calculated



**CLINICAL DIAGNOSTIC LABORATORY**  
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<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Absolute Lymphocyte Count		2594.4	1000 - 4800 /cumm	Calculated
Absolute Eosinophil Count		213.9	20 - 500 /cumm	Calculated
Absolute Monocyte Count		227.7	200 - 1000 /cumm	Calculated
Absolute Basophil Count		6.9	0 - 100 /cumm	Calculated
<b><u>PERIPHERAL SMEAR</u></b>				
RBC		Normochromic Normocytic		
WBC		As Above		
Platelets		Adequate		
<b>ESR</b>		03	0 - 20 mm/hr	Automated Westergren's Method
*** End Of Report ***				

Suggested Clinical Correlation \* If necessary, Please discuss

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Page 2 of 2

**Dr. GAURI HARDAS, MBBS,MD**  
**CONSULTANT PATHOLOGIST**



**CLINICAL DIAGNOSTIC LABORATORY**

**DEPARTMENT OF BIOCHEMISTRY**

**Patient Name** : Mr. RAJKUMAR SHALIKRAM SARPATE **Age / Gender** : 54 Y(s)/Male  
**Bill No/ UMR No** : BIL2324083289/UMR2324039829 **Referred By** : Dr. Vimmi Goel MBBS,MD  
**Received Dt** : 08-Mar-24 09:48 am **Report Date** : 08-Mar-24 11:35 am

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Fasting Plasma Glucose	Plasma	100	< 100 mg/dl	GOD/POD,Colorimetric
Post Prandial Plasma Glucose		119	< 140 mg/dl	GOD/POD, Colorimetric
<b>GLYCOSYLATED HAEMOGLOBIN (HBA1C)</b>				
HbA1c		5.5	Non-Diabetic : <= 5.6 % Pre-Diabetic : 5.7 - 6.4 % Diabetic : >= 6.5 %	HPLC

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

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**Dr. GAURI HARDAS, MBBS,MD**

**CONSULTANT PATHOLOGIST**

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Phone: +91 0712 6789100

CIN: U74999MH2018PTC303510



**CLINICAL DIAGNOSTIC LABORATORY  
DEPARTMENT OF BIOCHEMISTRY**

<b>Patient Name</b> : Mr. RAJKUMAR SHALIKRAM SARPATE	<b>Age /Gender</b> : 54 Y(s)/Male
<b>Bill No/ UMR No</b> : BIL2324083289/UMR2324039829	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
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**LIPID PROFILE**

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Method</u>
Total Cholesterol	Serum	<b>262</b> < 200 mg/dl	Enzymatic(CHE/CHO/PO D)
Triglycerides		<b>201</b> < 150 mg/dl	Enzymatic (Lipase/GK/GPO/POD)
HDL Cholesterol Direct		<b>58</b> > 40 mg/dl	Phosphotungstic acid/mgcl-Enzymatic (microslide)
LDL Cholesterol Direct		<b>152.45</b> < 100 mg/dl	Enzymatic
VLDL Cholesterol		<b>40</b> < 30 mg/dl	Calculated
Tot Chol/HDL Ratio		<b>5</b> 3 - 5	Calculation

<u>Intiate therapeutic</u>	<u>Consider Drug therapy</u>	<u>LDC-C</u>
CHD OR CHD risk equivalent	>100 >130, optional at 100-129	<100
Multiple major risk factors conferring 10 yrs CHD risk>20%		
Two or more additional major risk factors,10 yrs CHD risk <20%	>130 10 yrs risk 10-20 % >130 10 yrs risk <10% >160	<130
No additional major risk or one additional major risk factor	>160 >190,optional at 160-189	<160

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

Suggested Clinical Correlation \* If necessary, Please discuss

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**Dr. GAURI HARDAS, MBBS,MD  
CONSULTANT PATHOLOGIST**



**CLINICAL DIAGNOSTIC LABORATORY**

**DEPARTMENT OF BIOCHEMISTRY**

**Patient Name** : Mr. RAJKUMAR SHALIKRAM SARPATE **Age /Gender** : 54 Y(s)/Male  
**Bill No/ UMR No** : BIL2324083289/UMR2324039829 **Referred By** : Dr. Vimmi Goel MBBS,MD  
**Received Dt** : 08-Mar-24 09:49 am **Report Date** : 08-Mar-24 11:35 am

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
<b>THYROID PROFILE</b>				
T3	Serum	1.22	0.55 - 1.70 ng/ml	Enhanced chemiluminescence
Free T4		0.97	0.80 - 1.70 ng/dl	Enhanced Chemiluminescence
TSH		2.78	0.50 - 4.80 uIU/ml	Enhanced chemiluminescence
PSA (Total)		0.756	< 4 ng/ml	Enhanced chemiluminescence

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

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**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF BIOCHEMISTRY**

**Patient Name** : Mr. RAJKUMAR SHALIKRAM SARPATE **Age /Gender** : 54 Y(s)/Male  
**Bill No/ UMR No** : BIL2324083289/UMR2324039829 **Referred By** : Dr. Vimmi Goel MBBS,MD  
**Received Dt** : 08-Mar-24 09:49 am **Report Date** : 08-Mar-24 11:35 am

**LIVER FUNCTION TEST(LFT)**

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Total Bilirubin	Serum	0.55	0.2 - 1.3 mg/dl	Azobilirubin/Dyphylline
Direct Bilirubin		<b>0.01</b>	0.1 - 0.3 mg/dl	Calculated
Indirect Bilirubin		0.54	0.1 - 1.1 mg/dl	Dual wavelength spectrophotometric pNPP/AMP buffer
Alkaline Phosphatase		79	38 - 126 U/L	Kinetic with pyridoxal 5 phosphate
SGPT/ALT		24	10 - 40 U/L	Kinetic with pyridoxal 5 phosphate
SGOT/AST		24	15 - 40 U/L	Biuret (Alkaline cupric sulphate)
Serum Total Protein		7.98	6.3 - 8.2 gm/dl	Bromocresol green Dye Binding
Albumin Serum		4.67	3.5 - 5.0 gm/dl	Calculated
Globulin		3.31	2.0 - 4.0 gm/dl	
A/G Ratio		1.4		

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

Suggested Clinical Correlation \* If necessary, Please discuss

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**CONSULTANT PATHOLOGIST**





**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF BIOCHEMISTRY**

**Patient Name** : Mr. RAJKUMAR SHALIKRAM SARPATE    **Age /Gender** : 54 Y(s)/Male  
**Bill No/ UMR No** : BIL2324083289/UMR2324039829    **Referred By** : Dr. Vimmi Goel MBBS,MD  
**Received Dt** : 08-Mar-24 09:49 am    **Report Date** : 08-Mar-24 11:35 am

**RFT**

<u>Parameter</u>	<u>Specimen</u>	<u>Result Values</u>	<u>Biological Reference</u>	<u>Method</u>
Blood Urea	Serum	24	19.0 - 43.0 mg/dl	Urease with indicator dye
Creatinine		0.9	0.66 - 1.25 mg/dl	Enzymatic ( creatinine amidohydrolase)
GFR		101.5	>90 mL/min/1.73m square.	Calculation by CKD-EPI 2021
Sodium		140	136 - 145 mmol/L	Direct ion selective electrode
Potassium		4.85	3.5 - 5.1 mmol/L	Direct ion selective electrode

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

Suggested Clinical Correlation \* If neccessary, Please discuss

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**Dr. GAURI HARDAS, MBBS,MD**  
**CONSULTANT PATHOLOGIST**



**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF BIOCHEMISTRY**

**Patient Name** : Mr. RAJKUMAR SHALIKRAM SARPATE    **Age /Gender** : 54 Y(s)/Male  
**Bill No/ UMR No** : BIL2324083289/UMR2324039829    **Referred By** : Dr. Vimmi Goel MBBS,MD  
**Received Dt** : 08-Mar-24 12:01 pm    **Report Date** : 08-Mar-24 01:56 pm

**URINE SUGAR**

**Parameter**  
**Urine Glucose**  
**NOTE:**

**Result Values**

Negative  
urine sugar post meal  
\*\*\* End Of Report \*\*\*

Suggested Clinical Correlation \* If necessary, Please discuss

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**Dr. GAURI HARDAS, MBBS,MD**  
**CONSULTANT PATHOLOGIST**



**CLINICAL DIAGNOSTIC LABORATORY  
DEPARTMENT OF PATHOLOGY**

<b>Patient Name</b> : Mr. RAJKUMAR SHALIKRAM SARPATE	<b>Age / Gender</b> : 54 Y(s)/Male
<b>Bill No/ UMR No</b> : BIL2324083289/UMR2324039829	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 08-Mar-24 10:24 am	<b>Report Date</b> : 08-Mar-24 11:44 am

**URINE MICROSCOPY**

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Method</u>
<b><u>PHYSICAL EXAMINATION</u></b>			
Volume	Urine	30 ml	
Colour.		Pale yellow	
Appearance		Clear	Clear
<b><u>CHEMICAL EXAMINATION</u></b>			
Reaction (pH)		5	4.6 - 8.0
Specific gravity		1.015	1.005 - 1.025
Urine Protein		Negative	Negative
Sugar		Negative	Negative
Bilirubin		Negative	Negative
Ketone Bodies		Negative	Negative
Nitrate		Negative	Negative
Urobilinogen		Normal	Normal
<b><u>MICROSCOPIC EXAMINATION</u></b>			
Epithelial Cells		0-1	0 - 4 /hpf
R.B.C.		Absent	0 - 4 /hpf
Pus Cells		0-1	0 - 4 /hpf
Casts		Absent	Absent



**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF PATHOLOGY**

**Patient Name** : Mr. RAJKUMAR SHALIKRAM SARPATE    **Age / Gender** : 54 Y(s)/Male  
**Bill No/ UMR No** : BIL2324083289/UMR2324039829    **Referred By** : Dr. Vimmi Goel MBBS,MD  
**Received Dt** : 08-Mar-24 10:24 am    **Report Date** : 08-Mar-24 11:44 am

**Method**

**Parameter**

**Specimen    Results**

Crystals

Absent

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

Suggested Clinical Correlation \* If necessary, Please discuss

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Page 2 of 2

**Dr. GAURI HARDAS, MBBS,MD**  
**CONSULTANT PATHOLOGIST**



**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF IMMUNO HAEMATOLOGY**

**Patient Name** : Mr. RAJKUMAR SHALIKRAM SARPATE    **Age /Gender** : 54 Y(s)/Male  
**Bill No/ UMR No** : BIL2324083289/UMR2324039829    **Referred By** : Dr. Vimmi Goel MBBS,MD  
**Received Dt** : 08-Mar-24 09:49 am    **Report Date** : 08-Mar-24 12:56 pm

**BLOOD GROUPING AND RH**

**Parameter**  
**BLOOD GROUP.**

**Specimen**    **Results**  
EDTA Whole    " O "  
Blood &  
Plasma/  
Serum

Gel Card Method

**Rh (D) Typing.**

" Positive "(+Ve)

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

Suggested Clinical Correlation \* If necessary, Please discuss

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**Dr. GAURI HARDAS, MBBS,MD**  
**CONSULTANT PATHOLOGIST**

**DEPARTMENT OF RADIOLOGY & IMAGING SCIENCE**

NAME	RAJKUMAR SHALIKRAMSARPATE	STUDY DATE	08-03-2024 11:39:31
AGE/SEX	54Y 1D / M	HOSPITAL NO.	UMR2324039829
ACCESSION NO.	BIL2324083289-17	MODALITY	DX
REPORTED ON	08-03-2024 12:57	REFERRED BY	Dr. Vimmi Goel

**X-RAY CHEST PA VIEW**

Both the lung fields are clear.

Heart and Aorta are normal.

Both hilar shadows appear normal.

Diaphragm domes and CP angles are clear.

Bony cage is normal.

**IMPRESSION -**

No pleuro-parenchymal abnormality seen.



**S. NAVEEN PUGALIA**  
MBBS, MD [076125]  
SENIOR CONSULTANT RADIOLOGIST.

PATIENT NAME:	MR. RAJKUMAR SARPATE	AGE /SEX:	54 YRS/M
UMR NO:	2324039829	BILL NO:	2324083289
REFERRED BY	DR. VIMMI GOEL	DATE	08/03/2024

**USG ABDOMEN AND PELVIS**

LIVER is normal in size and echotexture.

No evidence of any focal lesion seen. Intrahepatic billiary radicals are not dilated.  
PORTAL VEIN and CBD are normal in course and caliber.

GALL BLADDER is physiologically distended. No stones or sludge seen within it.  
Wall thickness is within normal limits.

Visualized head and body of PANCREAS is normal in shape, size and echotexture.

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

Both KIDNEYS are normal in shape, size and echotexture.

**Two cortical cysts are noted in mid and lower pole of left kidney, largest measures 1.3 x 1.0 cm.**

No evidence of calculus or hydronephrosis seen.

URETERS are not dilated.

URINARY BLADDER is partially distended. No calculus or mass lesion seen.

Prostate is normal in size, shape and echotexture.

There is no free fluid or abdominal lymphadenopathy seen.

**IMPRESSION:**

**No significant visceral abnormality seen.**

**Suggest clinical correlation.**



**DR POONAM CHIDDARWAR**  
**MBBD, MD**  
**Consultant Radiologist**

**2D ECHOCARDIOGRAPHY AND COLOR DOPPLER REPORT**

Patient Name : Mr. Rajkumar Shaligram Sarpate  
 Age : 54 years / Male  
 UMR : UMR2324039829  
 Date : 08/03/2024  
 Done by : Dr. Vimmi Goel  
 ECG : NSR, LVH  
 Blood pressure: 200/107 mm Hg (Right arm, Supine position)  
 BSA : 1.75 m<sup>2</sup>

**Impression: Hypertensive Heart Disease**

**Normal LV dimensions**  
**LA is on higher side**  
**Mild left ventricular hypertrophy**  
**No RWMA of LV at rest**  
**Good LV systolic function, LVEF 62%**  
**Normal LV diastolic function (? Pseudonormal)**  
**E/A is 1.0**  
**E/E' is 14.2 (Mildly elevated filling pressure)**  
**Valves are normal**  
**Trivial MR**  
**No pulmonary hypertension**  
**IVC is normal in size and collapsing well with respiration**  
**No clots or pericardial effusion**

**Comments:**

Sector echocardiography was performed in various conventional views (PLAX, SSAX, AP4 CH and 5 CH views). LV size normal. LA is on higher side. Mild left ventricular hypertrophy. There is no RWMA of LV seen at rest. Good LV systolic function. LVEF 62%. Normal LV diastolic function (? Pseudonormal). E Velocity is 127 cm/s, A Velocity is 115 cm/s. E/A is 1.0. Valves are normal. Trivial MR. No Pulmonary Hypertension. IVC normal in size and collapsing well with respiration. Pericardium is normal. No clots or pericardial effusion seen. E' at medial mitral annulus is 7.9 cm/sec & at lateral mitral annulus is 10.5 cm/sec. E/E' is 14.2 (Mildly elevated filling pressure).

**M Mode echocardiography and dimension:**

	Normal range (mm)		Observed (mm)
	(adults)	(children)	
Left atrium	19-40	7-37	38
Aortic root	20-37	7-28	26
LVIDd	35-55	8-47	38
LVIDs	23-39	6-28	28
IVS (d)	6-11	4-8	12
LVPW (d)	6-11	4-8	12
LVEF %	~ 60%	~60%	12
Fractional Shortening			62%
			32%

P.T.O

  
**Dr. Vimmi Goel**  
**MD, Sr. Consultant**  
**Non-invasive Cardiology**



Rate 78 . Sinus rhythm.....normal P axis, V-rate 50- 99  
 PR 142 . Consider right atrial enlargement.....P >0.24mV limb lead  
 QRSD 93 . Abnormal inferior Q waves.....Qs add to 80 ms in II III aVF  
 QT 384 . ST elev, probable normal early repol pattern.....ST elevation, age<55  
 QTc 438

PAC DEPT.

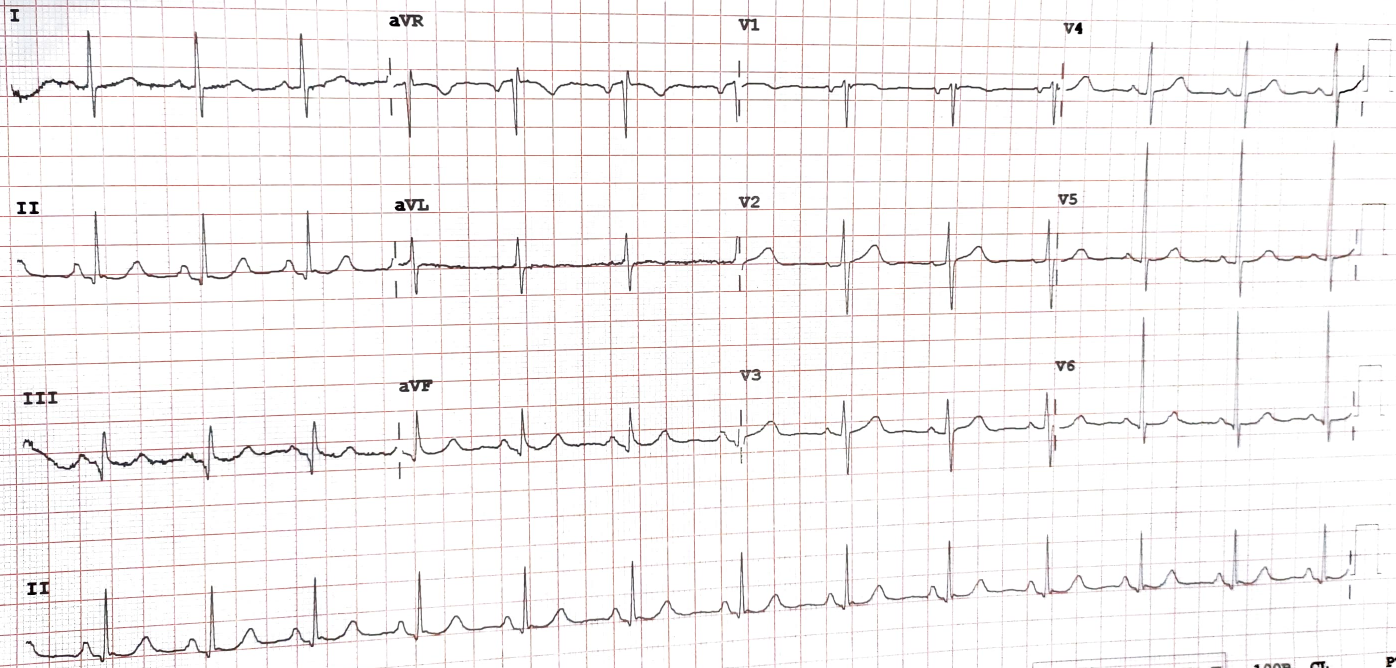
--AXIS--

P 71  
 QRS 55  
 T 57

- BORDERLINE ECG -

12 Lead; Standard Placement

Unconfirmed Diagnosis



F 50~ 0.50-150 Hz W 100B CL P?

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

PHILIPS

REORDER M3706A

94