



HEALTH CHECK-UP SUMMARY

Race Course Road, Vadodara

|                      |                 |
|----------------------|-----------------|
| Name:MR MUKUL MUKESH |                 |
| SH No: 298289        | Date:07 08 2024 |
| Age: 39              | Gender:MALE     |

ASSESSMENT:

- OVER WEIGHT(26.57)
- K/C/O:DIABETES SINCE 2 YEARS ON REGULAR MEDICATION
- C/O:CHEST PAIN(3 DAYS BEFORE),NECK PAIN,BACKACHE,CONSTIPATION
- P/H/O HOSPITALIZATION:DENGUE(2011)(3-4 DAYS)
- F/H/O:DIABETES(FATHER,MOTHER,SISTER),HYPOTHYROIDISM(MOTHER),LUNG INFECTION(MOTHER)
- O/E-B.P:80\50
- PRODUCTIVE COUGH OF WHITE COLOR+
- ABDOMINAL DISTENSION,FLATUS +
- URINARY INCONTINECNE +
- BORDERLINE HIGH RBC COUNT(5.57 MILLION/CMM),BORDERLINE HIGH HEMATOCRIT(50),LOW PLATELET COUNT(136000),HIGH MPV(14.60)
- HIGH A/G RATIO(1.80)
- HIGH FBS(158),FATING URINE GLUCOSE PRESENT(+++),FASTING URINE KETONE(PRESENT)(TRACE),HIGH POST PRANDIAL GLUCOSE(217),POSTPRANDIAL GLUCOSE(PRESENT)(++++),HIGH HBA1C(8.60)HIGH TRIGLYCERIDE(395),LOW HDL CHOLESTEROL(39),HIGH VLDL(79)
- URINE R/M:GLUCOSE:PRESENT(+++)
- USG ABDOMEN AND PELVIS :MILD FATTY LIVER,RIGHT RENAL CONCRETIONS,MILD URINARY BLADDER WALL THICKENING WITH ECHOES.ADV URINE ROUTINE MICROSCOPY TO RULE OUT CYSTITIS

ADVISED:

- PLENTY OF LIQUIDS
- ANTI DIABETIC & LOW FAT DIET
- AVOID OUT SIDE FOOD AND WATER
- REGULAR EXERCISE.
- REGULAR BLOOD SUGAR MONITORING AND CONTROL
- REPEAT LIPID PROFILE AFTER 3 MONTH
- OPHTHALMOLOGIST ADVICE : FOLLOW ADVICIE
- ORTHOPEDIC CONSULTATION
- ENT ADVICE:FOLLOW ADVICE
- UROLOGIST CONSULTATION
- CARDIOLOGIST CONSULTATION
- PHYSICIAN CONSULTATION

**Sterling Addlife India Limited**  
Unit-Sterling Hospital Vadodara  
Race Course Circle, (West)  
VADODARA - 390 007.

**DR.JAY S PANDIT**

**Hospital Address:** Sterling Hospitals, Race Course Road, Opp. Inox Cinema Hari Nagar, Circle, Prevention & Rehabilitation Dept  
Vadodara – 390007, Gujarat, India | Call: 0265-6144111, 0265-2354455, 98 98 98 78 78  
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Sterling Hospital, Sterling Hospital Road, Memnagar, Ahmedabad-380052, Gujarat, India





### HEALTH CHECK UP MEDICAL EXAMINATION

Name : Mr. Anupul Mishra Employee ID : \_\_\_\_\_  
Company Name : Medi Wheel Age : 39 Sex :  M /  F  
Height : 169 cms. Weight : 75.9 Kgs BMI : 26.52 Blood Group : \_\_\_\_\_  
Name of HO / Registrar taking History : Dr. Jay. S. Panigrahi

Allergies :  None  Yes (If Yes, describe)

| Drugs/Food/Latex/Dyes/Contrast/Other ..... | Reaction |
|--|----------|
| 1.   |          |
| 2.   |          |
| 3.   |          |

**Chief Complaints :**  
clo - chest pain (3 Days before)  
neck pain  
- Bachache

**Physical Examination :**  
**Vital Signs :**  
Temp : Afebrile °F SPO<sub>2</sub> : 99 Pulse : 79 /min R/R : 18 /min B.P. : 80/50 mm Hg

**Past History :**

|                                  |   |
|----------------------------------|---|
| If Hypertension, since           | If Diabetes, since <u>2yr</u>   |
| On Medication 1).....            | On Medication 1).....   |
| 2).....                          | 2).....   |
| 3).....                          | 3).....   |
| If Ischaemic Heart Disease since | Under Treatment Dr. ....  |
| On Medication 1).....            | If Tuberculosis, When .....   |
| 2).....                          | Any Other P/H .....   |
| 3).....                          | .....   |
| Under Treatment of Dr. ....      | Any Other Medication .....  |
| Any Intervention done .....      | .....   |
| P/H of Operation                 | P/H of Hospitalization .....  |
| Diagnosis : .....                | Diagnosis : <u>Dorsal</u>   |
| Name of Operation : .....        | Year : <u>2011</u>  |
| Year of Operation : .....        | Duration : <u>3 days</u>  |
| Others .....                     | Blood Transfusion History : Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| .....                            | Year : .....  |

**Family History :** (Specify : F-Father, M-Mother, B-Brother, S-Sister)

(Pl. Circle whichever is applicable e.g. If Father has h/o 10 yrs then, Yes / No F/10 yrs)

|               |  |                       |   |
|---------------|--|-----------------------|---|
| Hypertension  | Yes/No <input checked="" type="checkbox"/> No  | Asthma                | Yes/No <input checked="" type="checkbox"/> No   |
| Heart Disease | Yes/No <input checked="" type="checkbox"/> No  | Stroke                | Yes/No <input checked="" type="checkbox"/> No   |
| Diabetes      | <input checked="" type="checkbox"/> Yes/No <input checked="" type="checkbox"/> No <b>F(M)S</b> | Arthritis/Gout        | Yes/No <input checked="" type="checkbox"/> No   |
| Tuberculosis  | Yes/No <input checked="" type="checkbox"/> No  | Cancer                | Yes/No <input checked="" type="checkbox"/> No   |
| Epilepsy      | Yes/No <input checked="" type="checkbox"/> No  | Other Chronic disease | Yes/No <input checked="" type="checkbox"/> No <b>hypothyroidism M<br/>hmg infection M</b> |

**Personal History :**

|              |                     |                 |   |                                    |
|--------------|---------------------|-----------------|---|------------------------------------|
| Diet         | <b>Mixed</b>        | Smoking         | Yes/No <input checked="" type="checkbox"/> No | since <b>1st day</b> 3/day per day |
| Appetite     | <b>Reg. abn</b>     | Alcohol         | Yes/No <input checked="" type="checkbox"/> No | since <b>10th day</b> 2/mo (freq.) |
| Sleep        | <b>Reg. abn</b>     | Drugs           | Yes/No <input checked="" type="checkbox"/> No | since ..... / ..... (freq.)        |
| Micturition  | <b>Reg. abn</b>     | Tobacco         | Yes/No <input checked="" type="checkbox"/> No | since ..... / ..... (freq.)        |
| Bowel Habits | <b>Constipation</b> | Any other habit |   |                                    |

**FOR FEMALES :**

 Obstetric History : L.D. .... **NA**

Abortion : .....

Others : .....

**General Examination :**

- Anemia  
  Cyanosis  
  Jaundice  
  Generalized Lymphadenopathy  
  Pedal oedema

**General Examination :**

 .....  
 .....  
 .....

**Head :**  NSF

Injuries (Specify if any) : .....

**Eyes :**  NSF

- Vision :  Normal    Blurred    Double    Colour Blind
- Pupils :  Normal    Abnormal
- Other :  Inflammation    Pain    Itching    Discharge    No complaint

Remarks (if any) :

**Ears :**  NSF

- Deaf    Yes    No   • Pain    Yes    No   • Discharge    Yes    No
- Dizziness    Yes    No

**Nose :**  NSF

- Nosebleed    Yes    No   • Congestion    Yes    No   • Sinus problem    Yes    No

**Mouth :**  NSF

- Lesion    Yes    No
- Dental Hygiene    Good    Poor   Bleeding gums    Yes    No
- Sense of taste    Yes    No

Throat/Neck :  NSF

- Swollen glands  Yes  No      Stiffness  Yes  No      Dysphagia  Yes  No

*neck pain*

**SYSTEMIC EXAMINATION**

Neurological :  NSF

- Headache  Yes  No
- Memory changes  Yes  No
- Dizziness  Yes  No
- Syncope  Yes  No
- Seizures  Yes  No
- Paralysis  Yes  No if yes  R  L
- Cooperative  Yes  No
- Anxiety  Yes  No
- Depression  Yes  No
- Suicidal attempt  Yes  No
- Any psychiatric illness *No*
- Oriented  Yes  No if disoriented, to  Person  Place  Time
- Reaction:  Brisk  Sluggish  No response
- LOC :  Alert  Confused  Sedated
- Speech :  Clear  Slurred

Respiratory :  NSF

- Lung sounds : *AEB clear*
- Dyspnoea :  None  With activity  At rest  Lying down  Retractions
  - Cough :  None  Non-productive  Productive - colour: *white*
  - Hemoptysis:  Yes  No
  - Night Sweats :  Yes  No
  - Cyanosis :  Yes  No      Where .....

Cardiovascular :  NSF

- Chest discomfort  Yes  No *chest pain (T)*
- Oedema  Yes  No      Location : .....  Pitting  Non-pitting

Extremities-Musculoskeletal :  NSF

- Skin :  Warm  Cool  Dry  Firm  Flaccid  Colour
- Extremities : Tingling  Yes  No      • Weakness  Yes  No      Deformity  Yes  No
- Joints : Pain  Yes  No      • Stiffness  Yes  No
- Uses :  Walker  Wheelchair  None

Gastrointestinal :  NSF

- Appetite  Good  Poor
- Nausea  Yes  No
- Vomiting  Yes  No
- Distension  Yes  No
- Heartburn  Yes  No
- Flatus  Yes  No
- Pain  Yes  No
- Rectal Bleeding  Yes  No
- Colostomy  Yes  No
- Ileostomy  Yes  No

**Bowel**

- Diarrhoea  Constipation  Incontinence  Blood in stool  None
- Pain  Yes  No      Place .....
- Frequency of stool *3-4 times daily*      Hemorrhoids  Yes  No
- Interventions :  None      • Laxatives  Yes  No      Type ..... Frequency .....

**Genitorurinary :**  NSF

Colour of Urine  Pale yellow  Frequency  8-5 / day

Pain  Yes  No      Burning  Yes  No      Itching  Yes  No  
 Urgency  Yes  No      Incontinence  Yes  No  
 Nocturia  Yes  No      Urostomy  Yes  No  
 History of calculi  Yes  No      History of UTI  Yes  No  
 Foleys Catheter  Yes  No      Date of Insertion \_\_\_\_\_

**Reproductive :**  NA  NSF

LMP \_\_\_\_\_ Regular / Irregular \_\_\_\_\_  
 Dysmenorrhea  Yes  No      Amenorrhea  Yes  No      if yes, Duration \_\_\_\_\_  
 Menopausal  Yes  No      if yes, Duration \_\_\_\_\_  
 Vaginal discharge  Yes  No      Itching  Yes  No

**Breasts**  NA  NSF  
 Breast Feeding  Yes  No      Lumps  Yes  No

**Positive Finding & Advice**

.....  
 .....  
 .....  
 .....

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 Race Course Circle, (West)  
 VADODARA - 390 007.

Sign and Stamp of Medical Officer

**Sterling Hospital**  
Racecourse Road

**EMERGENCY HELPLINE**

**992 444 9972**  
0265 - 61 44 111

**Sterling Hospital**  
Bhayli

**EMERGENCY HELPLINE**

**908 1000 557**  
0265 - 61 23 333



OPHTHALMIC CHECK-UP

SIGNIFICANT HISTORY:

PAST HISTORY:

Refractive Error: |  
Any Surgery: | NAD  
Color Blind: |  
Diabetes: | yes  
Hypertension: |  
Any Treatment: |

EXAMINATION OF EYES:

Right Eye:                      Left Eye:  
Distant Vision without Glasses:    — 6/6 —                      6/6 —  
Distant Vision with Glasses:        —                      —  
Near Vision without Glasses:        — 17/6 —                      17/6 —  
Near Vision with Glasses:            —                      —  
Intraocular Pressure:                —                      —  
Anterior Segment:                    —                      —  
Fundus:                                 —                      —

PRESCRIPTION OF GLASSES:

|         | RIGHT  |          |      | LEFT   |          |      |
|---------|--------|----------|------|--------|----------|------|
|         | Sphere | Cylinder | Axis | Sphere | Cylinder | Axis |
| Distant | -      | -        | -    | -      | -        | ---  |
| Near    | -      | --       | -    | -      | --       | --   |

Type of glass:

ADVICE:    · fit optical moly; caley  
                  · flap @ moly

**DR TARAL SHAH**  
(OPHTHALMOLOGIST)

**Sterling Addlife India Limited**  
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VADODARA - 390 007.  
**DR KUNTAL SHAH**  
(OPHTHALMOLOGIST)





EAR, NOSE & THROAT CHECK-UP

COMPLAINTS:

- NO, (P) Ears, nose and throat

EXAMINATION OF EARS:

Local Examination:

- info

Tympanic Membrane:

(R) - normal (L) normal  
(R) - normal (L) normal

EXAMINATION OF NOSE:

Local Examination:

- info

THROAT & LARYNX:

- info

LARYNGOSCOPIC EXAMINATION:

- info

ad  
~~Admission~~

7/7 true true  
←→

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**DR. NAVNIT MAKWANA**  
ENT SURGEON





Passport No :

**LABORATORY TEST REPORT**


| Patient Information                      | Sample Information                  | Location Information                                      |
|--|-------------------------------------|---|
| Name : <b>Mr. Mukul Mukesh .</b>         | Lab Id : <b>082407500658</b>        | Pt. Type : Sterling Hospital Vadodara Health Checkup      |
| Sex/Age : <b>Male / 39 Y</b> 17-Apr-1985 | Registration on : 07-Aug-2024 09:10 | Location : Main BNo./                                     |
| Ref. Id : 298289 / 2804659               | Collected at : SAWPL                | Approved on : 07-Aug-2024 16:42 Status : Final            |
| Ref. By : Dr. RMO . STERLING...          | Collected on : 07-Aug-2024 09:23    | Printed On : 07-Aug-2024 16:43                            |
|  | Sample Type : Serum                 | Process At : 75 – Sterling Hospital, Race course (Vadodar |

**Thyroid Function Tests**

| Test  | Result | Unit   | Biological Ref. Interval |
|---|--------|--------|--------------------------|
| T3, total (Triiodothyronine)<br><i>CLIA</i> | 1.32   | ng/mL  | 0.58 - 1.59              |
| T4, total (Thyroxine)<br><i>CLIA</i>        | 9.82   | µg/dl  | 4.87 - 11.72             |
| TSH (3rd Gen.)<br><i>Chemiluminescence</i>  | 2.0140 | µIU/mL | 0.4001 - 4.049           |

| TSH                       | T3/FT3                 | T4/FT4                 | Suggested interpretation of Thyroid function tests pattern   |
|---------------------------|------------------------|------------------------|--|
| Within range              | Decreased              | Within range           | Isolated low T3 often seen in elderly & associated Non-Thyroid illness. In elderly the drop in T3 level can be up to 25%.  |
| Raised                    | Within Range           | Within Range           | Isolated High TSH Especially in the range of 4.7 to 15 mIU/ml is commonly associated with physiological & Biological TSH Variability; Subclinical Autoimmune Hypothyroidism; Intermediate T4 therapy for hypothyroidism; Recovery phase after Non-Thyroidal illness. |
| Raised                    | Decreased              | Decreased              | Chronic Autoimmune Thyroiditis; Post thyroidectomy, post radioiodine; Hypothyroid phase of transient thyroiditis.  |
| Raised or within range    | Raised                 | Raised or within range | Interfering antibodies to thyroid hormones (anti-TPO antibodies); Intermediate T4 therapy of T4 overdose; Drug Interference-Amiodarone, Heparin, Beta blocker, steroids, anti-epileptics.  |
| Decreased                 | Raised or within range | Raised or within range | Isolated Low TSH – Especially in the range of 0.1 to 0.4 often seen in elderly & associated with Non-Thyroidal illness; Subclinical Hyperthyroidism; Thyroxine ingestion.  |
| Decreased                 | Decreased              | Decreased              | Central Hypothyroidism; Non-Thyroidal illness; Recent treatment for Hypothyroidism (TSH remains suppressed).   |
| Decreased                 | Raised                 | Raised                 | Primary Hyperthyroidism (Graves' disease), Multinodular goitre Toxic nodule; Transient thyroiditis: postpartum, Silent (lymphocytic), Post viral (granulomatous, subacute, DeQuervain'a) Gestational thyrotoxicosis hyperemesis gravidarum.                          |
| Decreased or within range | Raised                 | Within range           | T3 toxicosis; Non-Thyroidal illness.   |

Reference: Wallach's Interpretation of Diagnostic by Mary Williamson, 10th edition, 2015.


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| Ref. By : Dr. RMO . STERLING...          | Collected on : 07-Aug-2024 09:23    | Printed On : 07-Aug-2024 16:43                               |
|  | Sample Type : Serum                 | Process At : 75 – Sterling Hospital, Race course (Vadodar    |

**Liver Function Test**

| Test  | Result        | Unit  | Biological Ref. Interval |
|---|---------------|-------|--------------------------|
| <b>ALT (SGPT)</b><br><i>UV with P5P, IFCC</i>                                 | 46.0          | U/L   | 0 - 50                   |
| <b>AST (SGOT)</b><br><i>UV with P5P</i>                                       | 33.0          | U/L   | 17 - 59                  |
| <b>GGT (Gamma Glutamyl Transferase)</b><br><i>L-γ-Glytamyl-p-nitroanilide</i> | 55.0          | U/L   | 15 - 73                  |
| <b>Alkaline Phosphatase</b><br><i>PNPP, AMP Buffer, IFCC</i>                  | 89.0          | U/L   | 38 - 126                 |
| <b>Total Bilirubin</b><br><i>Azobilirubin chromophores</i>                    | 1.30          | mg/dL | 0.2 - 1.3                |
| <b>Conjugated Bilirubin</b><br><i>Cationic Mordant Binding</i>                | 0.10          | mg/dL | 0.0 - 0.3                |
| <b>Unconjugated Bilirubin</b><br><i>Cationic Mordant Binding</i>              | 1.10          | mg/dL | 0.0 - 1.1                |
| <b>Delta Bilirubin</b><br><i>Calculated</i>                                   | 0.10          | mg/dL | 0.0 - 0.2                |
| <b>Total Protein</b><br><i>Copper tartrate to colour complex</i>              | 7.00          | g/dL  | 6.3 - 8.2                |
| <b>Albumin</b><br><i>Bromocresol Green Method</i>                             | 4.50          | g/dL  | 3.5 - 5.0                |
| <b>Globulin</b><br><i>Calculated</i>  | 2.50          | g/dL  | 2.3 - 3.5                |
| <b>A/G Ratio</b><br><i>Calculated</i>   | <b>H 1.80</b> |       | <b>1.3 - 1.7</b>         |


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|---------------------|---------------------------|--------------------|---------------------|----------------------|--|
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| Ref. By             | : Dr. RMO . STERLING...   | Collected on       | : 07-Aug-2024 09:23 | Printed On           | : 07-Aug-2024 16:43                              |
|                     |                           | Sample Type        | : Whole blood       | Process At           | : 75 – Sterling Hospital, Race course (Vadodar   |

**MEDI WHEEL FULL BODY ANNUAL PLUS**
**Complete Blood Count**

| Test                                    | Method                | Result               | Unit        | Biological Ref. Interval |
|---|-----------------------|----------------------|-------------|--------------------------|
| Hemoglobin                              | Colorimetric          | 16.2                 | g/dL        | 13.0 - 16.5              |
| RBC Count                               | Electrical impedance  | H 5.57               | million/cmm | 4.5 - 5.5                |
| Hematocrit                              | Calculated            | H 50.0               | %           | 40 - 49                  |
| MCV                                     | Derived               | 89.7                 | fL          | 83 - 101                 |
| MCH                                     | Calculated            | 29.2                 | pg          | 27.1 - 32.5              |
| MCHC                                    | Calculated            | 32.5                 | g/dL        | 32.5 - 36.7              |
| RDW CV                                  | Calculated            | 13.50                | %           | 11.6 - 14                |
| <b>Total WBC and Differential Count</b> |                       |                      |             |                          |
| WBC count                               | SF Cube cell analysis | 9240                 | /cmm        | 4000 - 10000             |
| <b>Differential Count</b>               |                       |                      |             |                          |
| Neutrophils                             | Microscopic           | 68                   | % 40 - 80   | 6283 /cmm 2000 - 6700    |
| Lymphocytes                             | Microscopic           | 24                   | % 20 - 40   | 2218 /cmm 1000 - 3000    |
| Eosinophils                             | Microscopic           | 03                   | % 1 - 6     | 277 /cmm 20 - 500        |
| Monocytes                               | Microscopic           | 05                   | % 2 - 10    | 462 /cmm 200 - 1000      |
| Basophils                               | Microscopic           | 00                   | % 0 - 2     | 0 /cmm 0 - 100           |
| <b>Platelet Count</b>                   |                       |                      |             |                          |
| Platelet Count                          | Electrical impedance  | 136000               | /cmm        | 150000 - 410000          |
| MPV                                     | Calculated            | 14.60                | fL          | 7.5 - 10.3               |
| Platelets Morphology                    |                       | Borderline Adequate. |             |                          |

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|  | Sample Type : Whole blood           | Process At : 75 – Sterling Hospital, Race course (Vadodar |

**MEDI WHEEL FULL BODY ANNUAL PLUS**
**Complete Blood Count**

| Test                                    | Result | Unit   | Biological Ref. Interval |
|---|--------|--------|--------------------------|
| <b>Erythrocytes Sedimentation Rate</b>  |        |        |                          |
| ESR <small>Capillary photometry</small> | 1      | mm/1hr | 0 - 14                   |

**Differential Count**
**Absolute Count**

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**MEDI WHEEL FULL BODY ANNUAL PLUS**
**Blood Group**

| Test   | Result   | Unit | Biological Ref. Interval |
|--|----------|------|--------------------------|
| <b>ABO Type</b><br><i>Tube Agglutination</i> | "B"      |      |                          |
| <b>Rh (D) Type</b>                           | Positive |      |                          |

  
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M.D ( Pathology ) [G-18341]

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Passport No :

**LABORATORY TEST REPORT**


| Patient Information                      | Sample Information                                 | Location Information                                      |
|--|--|---|
| Name : <b>Mr. Mukul Mukesh .</b>         | Lab Id : <b>082407500658</b>                       | Pt. Type : Sterling Hospital Vadodara Health Checkup      |
| Sex/Age : <b>Male / 39 Y</b> 17-Apr-1985 | Registration on : 07-Aug-2024 09:10                | Location : Main BNo./                                     |
| Ref. Id : 298289 / 2804659               | Collected at : SAWPL                               | Approved on : 07-Aug-2024 13:44 Status : Final            |
| Ref. By : Dr. RMO . STERLING...          | Collected on : 07-Aug-2024 09:23                   | Printed On : 07-Aug-2024 16:43                            |
|  | Sample Type : Serum, Urine, Fluoride plasma, Urine | Process At : 75 – Sterling Hospital, Race course (Vadodar |

**MEDI WHEEL FULL BODY ANNUAL PLUS**

| Test  | Result          | Unit  | Biological Ref. Interval |
|---|-----------------|-------|--------------------------|
| <b>Fasting Blood Glucose</b><br><i>GOD-POD</i>      | H 158.0         | mg/dL | 74 - 100                 |
| <b>Fasting Urine Glucose</b><br><i>GOD-POD</i>      | Present (+++)   |       | Absent                   |
| <b>Fasting Urine Ketone</b><br><i>Nitroprusside</i> | Present (Trace) |       | Absent                   |
| <b>Postprandial Blood Glucose</b><br><i>GOD-POD</i> | H 217.0         | mg/dL | 70 - 140                 |
| <b>Postprandial Urine Glucose</b><br><i>GOD-POD</i> | Present(++++)   |       | Absent                   |
| <b>Rechecked</b>                                    |                 |       |                          |
| <b>Postprandial Urine Ketone</b>                    | Absent          |       | Absent                   |
| <b>Rechecked</b>                                    |                 |       |                          |

|             | Fasting Blood Glucose* | Postprandial Blood Glucose # | Random Blood Glucose |
|-------------|------------------------|------------------------------|----------------------|
| Normal      | < 100 mg/dL            | < 140 mg/dL                  | < 140 mg/dL          |
| Prediabetic | 100 – 125 mg/dL        | 140 – 199 mg/dL              | 140 – 199 mg/dL      |
| Diabetic    | >/=126 mg/dL           | >/= 200 mg/dl                | >/= 200 mg/dl        |

\* Fasting is defined as no caloric intake for more than 8 hours

# The test should be performed as described by the WHO, using a glucose load containing the equivalent of 75 g anhydrous glucose dissolved in water.

**Criteria for Diagnosis of Diabetes:**

1. Fasting blood glucose (FPG)  $\geq$  126 mg/dL
2. Two-hour blood glucose (2-h OGTT) = 200 mg/dL
3. HbA1c values (A1c)  $\geq$  6.5%
4. Random plasma glucose  $\geq$  200 mg/dL

(With symptoms of hyperglycemia or hyperglycemic crisis)

In the absence of unequivocal hyperglycemia, diagnosis of DM using A1C, FPG or 2-h OGTT requires two abnormal test results from the same sample or in two separate samples.

**References:**

1. American diabetes association. Standards of medical care in diabetes 2024
2. National Library of Medicine – National Institute of Health (USA) – Diabetes Mellitus
3. World Health Organization – Factsheet on Diabetes – Prevention and treatment


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| Patient Information                      | Sample Information  | Location Information   |
|--|---|--|
| Name : <b>Mr. Mukul Mukesh .</b>         | Lab Id : <b>082407500658</b>  | Pt. Type : Sterling Hospital Vadodara Health Checkup<br>Main |
| Sex/Age : <b>Male / 39 Y</b> 17-Apr-1985 | Registration on : 07-Aug-2024 09:10                                 | Location : BNo./   |
| Ref. Id : 298289 / 2804659               | Collected at : SAWPL  | Approved on : 07-Aug-2024 13:44 Status : Final               |
| Ref. By : Dr. RMO . STERLING...          | Collected on : 07-Aug-2024 09:23                                    | Printed On : 07-Aug-2024 16:43                               |
|  | Sample Type : Serum,<br>Urine, Fluoride<br><del>plasma, Urine</del> | Process At : 75 – Sterling Hospital, Race course (Vadodar    |

**MEDI WHEEL FULL BODY ANNUAL PLUS**
  
**Dr. C. Shrinivasan..**

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| Name : <b>Mr. Mukul Mukesh .</b>         | Lab Id : <b>082407500658</b>        | Pt. Type : Sterling Hospital Vadodara Health Checkup        |
| Sex/Age : <b>Male / 39 Y</b> 17-Apr-1985 | Registration on : 07-Aug-2024 09:10 | Location : Main BNo./                                       |
| Ref. Id : 298289 / 2804659               | Collected at : SAWPL                | Approved on : 07-Aug-2024 13:03 Status : Final              |
| Ref. By : Dr. RMO . STERLING...          | Collected on : 07-Aug-2024 09:23    | Printed On : 07-Aug-2024 16:43                              |
|  | Sample Type : Whole blood           | Process At : 75 – Sterling Hospital, Race course (Vadodara) |

**MEDI WHEEL FULL BODY ANNUAL PLUS**
**HbA1c (Glycosylated Hemoglobin) by HPLC**

| Test               | Result        | Unit  | Biological Ref. Interval   |
|--------------------|---------------|-------|--|
| HbA1c              | H <b>8.60</b> | %     | For Screening:<br>Diabetes: $\geq 6.5\%$ ;<br>Pre-Diabetes: 5.7 - 6.4%;<br>Non-Diabetes: $< 5.7\%$ |
| Mean Blood Glucose | 200.12        | mg/dL | For Diabetic Patient:<br>Poor Control : $> 7.0\%$ ;<br>Good Control : 6.0-7.0%                     |

**Description:**

- Total haemoglobin A1c is continuously synthesized in the red blood cell through its 120 days life span. The concentration of HbA1c in the cell reflects the average blood glucose concentration it encounters.
- The level of HbA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose concentration over an extended time period and remains unaffected by short-term fluctuations in blood glucose levels.
- The measurement of HbA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half life of a red blood cell is sixty days, HbA1c has been accepted as a measurement which reflects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months.
- It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures.

**HbA1c assay Interferences:**

Erroneous values might be obtained from samples with abnormally elevated quantities of other Haemoglobins as a result of either their simultaneous elution with HbA1c (HbF) or differences in their glycation from that of HbA (HbS).

**Reference:** American diabetes association. Standards of medical care in diabetes 2024


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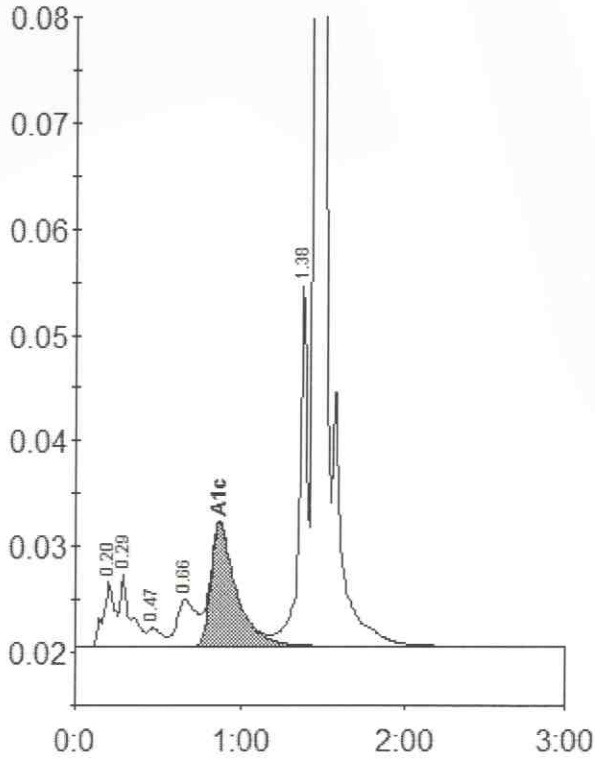




# Patient report

# Sterling HOSPITALS

Bio-Rad DATE: 07/08/2024  
 ID: TIME: 01:21 PM  
 S/N: #DJ8G550303 Software version: 4.30-2  
 Sample ID: 082407500658  
 Injection date: 07/08/2024 01:21 PM  
 Injection #: 7 Method: HbA1c  
 Rack #: --- Rack position: 7



Peak table - ID: 082407500658

| Peak        | R.time | Height  | Area    | Area % |
|-------------|--------|---------|---------|--------|
| A1a         | 0.20   | 6163    | 28958   | 1.6    |
| A1b         | 0.29   | 6897    | 30379   | 1.7    |
| F           | 0.47   | 1701    | 11142   | 0.6    |
| LA1c/CHb-1  | 0.66   | 4436    | 35793   | 2.0    |
| A1c         | 0.87   | 11671   | 122947  | 8.6    |
| P3          | 1.38   | 34073   | 119549  | 6.6    |
| A0          | 1.45   | 527322  | 1468628 | 80.8   |
| Total Area: |        | 1817396 |         |        |

| Concentration: | %   |
|----------------|-----|
| A1c            | 8.6 |







Passport No :

**LABORATORY TEST REPORT**


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|--|-------------------------------------|--|
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| Sex/Age : <b>Male / 39 Y</b> 17-Apr-1985 | Registration on : 07-Aug-2024 09:10 | Location : BNo./   |
| Ref. Id : 298289 / 2804659               | Collected at : SAWPL                | Approved on : 07-Aug-2024 11:10 Status : Final               |
| Ref. By : Dr. RMO . STERLING...          | Collected on : 07-Aug-2024 09:23    | Printed On : 07-Aug-2024 16:43                               |
|  | Sample Type : Serum                 | Process At : 75 – Sterling Hospital, Race course (Vadodar    |

**MEDI WHEEL FULL BODY ANNUAL PLUS**
**Lipid Profile**

| Test  | Result  | Unit  | Biological Ref. Interval   |
|---|---------|-------|--|
| <b>Cholesterol</b><br><i>Cholesterol oxidase – Peroxidase</i> | 190.0   | mg/dL | Desirable : <200<br>Borderline High : 200-239<br>High : >240   |
| <b>Triglyceride</b><br><i>Ezymatic (Lipase/GK/GPa/POD)</i>    | H 395.0 | mg/dL | Normal : <150<br>Borderline : 150-199<br>High : 200-499<br>Very High : >500  |
| <b>HDL Cholesterol</b><br><i>PTA/MgCl<sub>2</sub></i>         | L 39.0  | mg/dL | Low: <40.0<br>High: >60.0  |
| <b>Direct LDL</b><br><i>Direct measured</i>                   | 88.00   | mg/dL | Optimal: <100<br>Near to above Optimal:<br>100–129<br>Borderline High: 130-159<br>High: 160–189<br>Very High: =190 |
| <b>VLDL</b><br><i>Calculated</i>                              | H 79.00 | mg/dL | 15 - 35  |
| <b>CHOL/HDL Ratio</b><br><i>Calculated</i>                    | 4.9     |       | Up to 5.0  |
| <b>dLDL/HDL Ratio</b><br><i>Calculated</i>                    | 2.3     |       | Up to 3.5  |

**Remarks:** \* Sample Appearance : Opalescent.


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| Sex/Age : <b>Male / 39 Y</b> 17-Apr-1985 | Registration on : 07-Aug-2024 09:10 | Location : BNo./   |
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| Ref. By : Dr. RMO . STERLING...          | Collected on : 07-Aug-2024 09:23    | Printed On : 07-Aug-2024 16:43                               |
|  | Sample Type : Serum                 | Process At : 75 – Sterling Hospital, Race course (Vadodar    |

**MEDI WHEEL FULL BODY ANNUAL PLUS**

| Test   | Result | Unit  | Biological Ref. Interval |
|--|--------|-------|--------------------------|
| <b>Uric Acid</b><br><i>Uricase</i>                           | 4.60   | mg/dL | 3.5 - 8.5                |
| <b>Blood Urea Nitrogen</b><br><i>Calculated</i>              | 13.55  | mg/dL | 9.0 - 20.0               |
| <b>Urea</b><br><i>Urease, Colorimetric</i>                   | 29.0   | mg/dL | 19.3 - 43.0              |
| <b>Creatinine, serum</b><br><i>Creatinine Amidohydrolase</i> | 0.80   | mg/dL | 0.66 - 1.25              |
| <b>BUN Creatinine Ratio</b><br><i>Calculated</i>             | 16.94  |       |                          |
| <b>Urea Creatinine Ratio</b><br><i>Calculated</i>            | 36.25  |       |                          |


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| Patient Information                      | Sample Information                  | Location Information                                      |
|--|-------------------------------------|---|
| Name : <b>Mr. Mukul Mukesh .</b>         | Lab Id : <b>082407500658</b>        | Pt. Type : Sterling Hospital Vadodara Health Checkup      |
| Sex/Age : <b>Male / 39 Y</b> 17-Apr-1985 | Registration on : 07-Aug-2024 09:10 | Location : Main BNo./                                     |
| Ref. Id : 298289 / 2804659               | Collected at : SAWPL                | Approved on : 07-Aug-2024 10:35 Status : Final            |
| Ref. By : Dr. RMO . STERLING...          | Collected on : 07-Aug-2024 09:23    | Printed On : 07-Aug-2024 16:43                            |
|  | Sample Type : Urine                 | Process At : 75 – Sterling Hospital, Race course (Vadodar |

**MEDI WHEEL FULL BODY ANNUAL PLUS**
**URINE ROUTINE EXAMINATION**

| Test  | Result               | Unit | Biological Ref. Interval |
|---|----------------------|------|--------------------------|
| <b>Physical &amp; Chemical (Dip strip) examination</b>    |                      |      |                          |
| Colour  | Pale Yellow          |      | Pale Yellow              |
| pH<br><i>Double indicator</i>                             | 5.5                  |      | 5.5 - 7.0                |
| Specific Gravity<br><i>Polyelectrolyte based reaction</i> | 1.020                |      | 1.015 - 1.025            |
| Protein<br><i>Protein error of indicators</i>             | Absent               |      | Absent                   |
| <b>Glucose</b><br><i>GOD-POD</i>                          | <b>Present (+++)</b> |      | <b>Absent</b>            |
| Ketone<br><i>Nitroprusside</i>                            | Present (Trace)      |      | Absent                   |
| Blood<br><i>Peroxidase like reaction</i>                  | Absent               |      | Absent                   |
| Bilirubin<br><i>Diazo reaction</i>                        | Absent               |      | Absent                   |
| Leucocytes<br><i>Esterase reaction</i>                    | Absent               |      | Absent                   |
| Nitrite<br><i>p-arsanilic acid to diazonium compound</i>  | Absent               |      | Absent                   |
| <b>Microscopic Examination</b>                            |                      |      |                          |
| Erythrocytes (RBCs)                                       | Absent               | /hpf | 0 - 2                    |
| Pus Cells   | Occasional           | /hpf | 0 - 5                    |
| Epithelial Cells  | Scanty               | /hpf |                          |
| Crystals  | Absent               |      | Absent                   |
| Casts   | Absent               |      | Absent                   |
| Bacteria  | Absent               |      | Absent                   |
| Amorphous Material  | Absent               |      | Absent                   |
| Yeast   | Absent               |      | Absent                   |

----- End Of Report -----


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|-------------|----------------------|--------------|--------------------------|
| Patient Id  | : RCR-298289         | Patient Name | : MUKUL MUKESH           |
| Age         | : 39Y 3M 21D         | Sex          | : Male                   |
| Ref. Doctor | : DR. RMO . STERLING | Study Date   | : 07 Aug 2024 - 10:29 AM |

### RADIOGRAPH CHEST PA

Both lungs and CP angles appear clear.  
Mediastinal shadow and hilar region appear normal.  
Cardiac shadow appears normal.  
Both domes of diaphragm show normal position and contour.  
Bony thorax under vision appears normal.

### IMPRESSION

No significant abnormality detected.

**Dr. Palak Nandolia**  
Consultant Radiologist



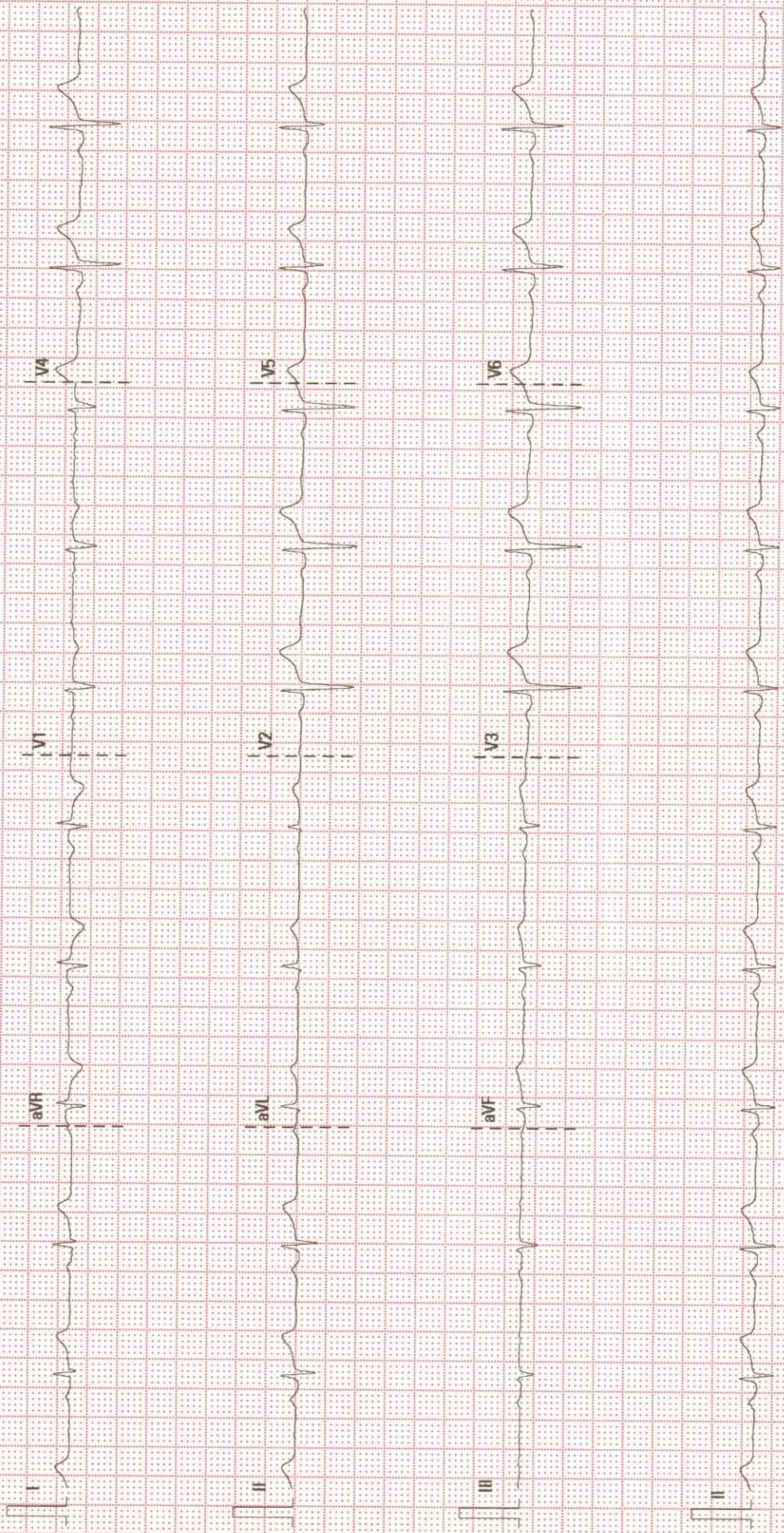
07-08-2024 09:16:44 AM

ID: 2024080709155487  
Name: MR. MUKUL MUKESH  
Age: 39 Years  
Gender: Male

Vent. Rate 64 bpm  
PR Interval 182 ms  
QRS Duration 76 ms  
QT/QTc Interval 386/393 ms  
P/QRS/T Axes 43/-19/35 deg  
QTc:Hodges

Sinus rhythm  
Normal ECG

Unconfirmed Diagnosis





# 2D ECHOCARDIOGRAPHY REPORT



Race Course Road, Vadodara

Name: Mrs. MUKUL MUKESH  
Age: 39 Years  
Sex: F  
Date: 07-Aug-2024

Ref By: HCP  
Study: 2D Echo

## M-MODE:

|     |      |       |      |
|-----|------|-------|------|
| IVS | 09mm | LVDD  | 46mm |
| PW  | 10mm | LVDS  | 24mm |
| LA  | 33mm | LV EF | 60 % |

## DOPPLER STUDY:

|           |               |
|-----------|---------------|
| MITRAL    | E 1.01 A 0.39 |
| AORTIC    | 1.20          |
| TRICUSPID | N             |
| PULMONARY | N             |

## CONCLUSION :

- NORMAL SIZED CHAMBERS
- NORMAL LV SYSTOLIC FUNCTION LVEF 60 %
- NO RWMA AT REST
- NO DIASTOLIC DYSFUNCTION
- NORMAL RV SIZE AND FUNCTION
- ALL VALVES ARE NORMAL
- NO CLOT OR VEGETATION
- NO PERICARDIAL EFFUSION
- NORMAL IVC

Dr. KAUSHIK TRIVEDI, MD  
Consultant interventional Cardiologist

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|             |                      |              |                          |
|-------------|----------------------|--------------|--------------------------|
| Patient Id  | : RCR-298289         | Patient Name | : . MUKUL MUKESH         |
| Age         | : 39Y 3M 21D         | Sex          | : Male                   |
| Ref. Doctor | : DR. RMO . STERLING | Study Date   | : 07 Aug 2024 - 11:37 AM |

**ULTRASOUND OF ABDOMEN AND PELVIS**

**Liver is normal in size (14 cm) and shows bright echotexture- mild fatty infiltration.** No focal lesion seen. No IHBR dilatation. **Portal vein** (11.7 mm) and **CBD** (4.5 mm) appears normal.

**Gall bladder** distended and shows normal wall thickness. No evidence of calculus or mass lesion seen. Visualized **pancreas** appears normal.

**Spleen** appears normal in size (11.9 cm) and shows normal echotexture. No focal lesion seen.

**Right kidney** measures 9.7 x 5.1 cm. There is no evidence of scarring, hydronephrosis. **Tiny concretions at lower pole- 3-4 mm.** Normal cortical echogenicity and cortico-medullary differentiation are maintained.

**Left kidney** measures 12.5 x 6.8 cm. There is no evidence of scarring, hydronephrosis or calculi. Normal cortical echogenicity and cortico-medullary differentiation are maintained.

**Urinary bladder is well distended and shows mild wall thickening (~ 5 mm). Floating echoes are seen within bladder.** No calculus or mass lesion is seen.

**Prostate** measures ~ 26 cc and appears normal in echotexture. No focal mass is seen. No evidence of ascites seen.

**IMPRESSION**

- **Mild fatty liver.**
- **Right renal concretions.**
- **Mild urinary bladder wall thickening with echoes. Adv urine routine microscopy to rule out cystitis.**

**Dr. Palak Nandolia**  
Consultant Radiologist

