

Patient Name Mr Venudra Yadav MRN : 153020 Age 32 Sex M Date/Time 29/05/23

Mob No.

Investigations : (Please Tick)

- CBC
- ESR
- CRP
- S-Vit D3
- S-Vit B12
- RBS
- B Sugar - F/PP
- HbA1C
- LFT/KFT
- PT
- INR
- RA Factor
- Anti CCP
- HLA B27
- ANA
- HIV
- HBsAg
- Anti HCV

H - 173
W - 84
BP - 134/75
P - 74

Vitals

- P.R.
- SPO2
- Temp

Medical Illness

- Hypertension
- Diabetes
- Thyroid
- Cardiac Disease
- Drug Allergies

Next Appointment/Follow up

Signature :

Patient NAME : Mr. VIRENDRA YADAV	Collected : 29/Sep/2023 10:27AM
Age/Gender : 32 Y 0 M 0 D /M	Received : 29/Sep/2023 10:48AM
UHID/MR NO : ILK.00034177	Reported : 29/Sep/2023 11:21AM
Visit ID : ILK.99120	Status : Final Report
Ref Doctor : Dr.ARCOFEMI HEALTHCARE LIMITED	Client Name : INSTA

DEPARTMENT OF HEMATOLOGY

COMPLETE BLOOD COUNT- CBC / HAEMOGRAM , WHOLE BLOOD EDTA

Haemoglobin (Hb%)	15.2	gm%	14.0-17.0	Cyanmeth
P.C.V (Hematocrit)	44.3	%	40-54	Cell Counter
RBC Count	5.3	Mill./cu mm	4.00-5.50	Cell Counter
Mean Corpuscular Volume(MCV)	83.8	fL	76-96	Calculated
Mean Corpuscular Hb. (MCH)	28.7	pg	27.0-32.0	Calculated
Mean Corp. Hb. Conc.(MCHC)	34.2	g/dl	30.0-35.0	Calculated
RDW	12.5	%	11-16	Calculated
Total WBC count (TLC)	8,000	/cu mm	4000-11000	Cell Counter

Differential Count by Flowcytometry/Microscopy

Neutrophils	55.5	%	50-70	Cell Counter
Lymphocytes	34.7	%	20-40	
Monocytes	6.2	%	01-10	Cell Counter
Eosinophils	3.3	%	01-06	Cell Counter
Basophils	0.3	%	00-01	Cell Counter

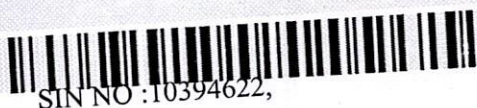
Absolute Leucocyte Count

Neutrophil (Abs.)	4,440	per cumm	2000 - 8000	Calculated
Lymphocyte (Abs.)	2776	per cumm	600-4000	Calculated
Monocyte (Abs.)	496	per cumm	0-600	Calculated
Eosinophil (Abs.)	264	per cumm	40-440	Calculated
Basophils (Abs.)	24	per cumm	0-110	Calculated
Platelet Count	2.60	Lac/cmm	1.50-4.00	Cell Counter

ERYTHROCYTE SEDIMENTATION RATE (ESR)

Erythrocyte Sedimentation Rate (ESR)	28	mm 1st hr.	0-20	Wester Green
--------------------------------------	----	------------	------	--------------

Page 1 of 9



SIN NO : 10394622,

A.K. Rajan

DR. ASHOK KUMAR
M.D. (PATH)

RJN Apollo Spectra Hospitals

18, Vikas Nagar, Near Sai Baba Temple, Gwalior - 474009 (M.P.) Ph.: 0751-2454600, Mob.: 8269663137, Email: ipc.rjn@gmail.com

- 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.
- In case of disparity test may be repeated immediately. • This report is not valid for medico legal purpose.

Patient NAME : Mr. VIRENDRA YADAV	Collected : 29/Sep/2023 10:27AM
Age/Gender : 32 Y O M 0 D /M	Received : 29/Sep/2023 10:48AM
UHID/MR NO : ILK.00034177	Reported : 29/Sep/2023 11:21AM
Visit ID : ILK.99120	Status : Final Report
Ref Doctor : Dr.ARCOFEMI HEALTHCARE LIMITED	Client Name : INSTA

DEPARTMENT OF HEMATOLOGY**BLOOD GROUPING(A,B,O) AND RH FACTOR , WHOLE BLOOD EDTA**

Blood Grouping	A		Slide/Tube Agglutination
Rh (D) Type	POSITIVE		Slide/Tube Agglutination

BLOOD PICTURE - PERIPHERAL SMEAR EXAMINATION , WHOLE BLOOD EDTA

BC'S : Normocytic Normochromic RBC's.
No cytoplasmic inclusions or hemoparasite seen.

WBC'S : Normal in number , morphology and distribution. No toxic granules seen.
No abnormal cell seen.

PLATELETS : Adequate on smear .

IMPRESSION ; NORMOCYTIC NORMOCHROMIC BLOOD PICTURE

**DR. ASHOK KUMAR**
M.D. (PATH)

Patient NAME : Mr. VIRENDRA YADAV	Collected : 29/Sep/2023 10:27AM
Age/Gender : 32 Y 0 M 0 D /M	Received : 29/Sep/2023 10:48AM
UHID/MR NO : ILK.00034177	Reported : 29/Sep/2023 11:43AM
Visit ID : ILK.99120	Status : Final Report
Ref Doctor : Dr.ARCOFEMI HEALTHCARE LIMITED	Client Name : INSTA

DEPARTMENT OF BIOCHEMISTRY-ROUTINE

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

GLUCOSE - FASTING (FBS) , NAF PLASMA

Fasting Glucose	79.0	mg/dL	65-110	God - Pod
-----------------	------	-------	--------	-----------

Ref.for Biological Reference Intervals: American Diabetic Assiosation.

GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) , FLUORIDE PLASMA

Post Prandial Glucose	108.0	mg/dL	90-140	2hrs. after...gm glucose/lunch
-----------------------	-------	-------	--------	-----------------------------------

Ref.for Biological Reference Intervals: American Diabetic Assiosation.



SIN NO :10394622,

A.K. Rajong

DR. ASHOK KUMAR
M.D. (PATH)

Patient NAME : Mr. VIRENDRA YADAV	Collected : 29/Sep/2023 10:27AM
Age/Gender : 32 Y 0 M 0 D /M	Received : 29/Sep/2023 10:48AM
UHID/MR NO : ILK.00034177	Reported : 29/Sep/2023 11:43AM
Visit ID : ILK.99120	Status : Final Report
Ref Doctor : Dr.ARCOFEMI HEALTHCARE LIMITED	Client Name : INSTA

DEPARTMENT OF BIOCHEMISTRY-ROUTINE

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

GLYCOSYLATED HAEMOGLOBIN (GHB/HBA1C) , WHOLE BLOOD EDTA

Glycosylated Haemoglobin HbA1c	5.8	%	Normal: <5.7 Pre-Diabetes: 5.7-6.4 Diabetes: 6.5	NEPHELOMETRY
Approximate mean plasma glucose	119.47			Calculated

Ref.for Biological Reference Intervals: American Diabetes Association.

INTERPRETATION:

The A1C test measures your average blood glucose for the past 2 to 3 months. Diabetes is diagnosed at an A1C of greater than or equal to 6.5%.

Therapeutic goals for glycemc control (ADA)

-Adults:

- Goal of therapy: <7.0% HbA1c
- Action suggested: >8.0% HbA1c

-Pediatric patients:

- Toddlers and preschoolers: <8.5% (but >7.5%)
- School age (6-12 years): <8%
- Adolescents and young adults (13-19 years): <7.5%



SIN NO :10394622,

A.K. Rajong

DR. ASHOK KUMAR
M.D. (PATH)

Patient NAME : Mr. VIRENDRA YADAV	Collected : 29/Sep/2023 10:27AM
Age/Gender : 32 Y 0 M 0 D /M	Received : 29/Sep/2023 10:48AM
UHID/MR NO : ILK.00034177	Reported : 29/Sep/2023 11:43AM
Visit ID : ILK.99120	Status : Final Report
Ref Doctor : Dr.ARCOFEMI HEALTHCARE LIMITED	Client Name : INSTA

DEPARTMENT OF BIOCHEMISTRY-ROUTINE

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

COMPLETE KIDNEY PROFILE (RFT/KFT) , SERUM

Urea	16.78	mg/dL	13.0-43.0	Urease
Creatinine	0.7	mg/dL	0.5-1.3	Enzymatic
Uric Acid	6.4	mg/dL	3.5-7.2	Urease
Sodium	136.0	Meq/L	135-155	Direct ISE
Potassium	4.2	Meq/L	3.5-5.5	Direct ISE
Chloride	104.0	mmol/L	96-106	Direct ISE
Calcium	9.8	mg/dL	8.6-10.0	OCPC
Phosphorous	2.8	mg/dL	2.5-5.6	PMA Phenol
BUN	7.84	mg/dL	6.0-20.0	Reflect Spectrophoto



A.K. Rajan

DR. ASHOK KUMAR
M.D. (PATH)

Patient NAME : Mr. VIRENDRA YADAV	Collected : 29/Sep/2023 10:27AM
Age/Gender : 32 Y O M O D /M	Received : 29/Sep/2023 10:48AM
UHID/MR NO : ILK.00034177	Reported : 29/Sep/2023 11:43AM
Visit ID : ILK.99120	Status : Final Report
Ref Doctor : Dr.ARCOFEMI HEALTHCARE LIMITED	Client Name : INSTA

DEPARTMENT OF BIOCHEMISTRY-ROUTINE

Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
Type OF Sample	SERUM			
Total Cholesterol	212.0	mg/dl	up to 200	End Point
Total Triglycerides	144.0	mg/dL	Borderline High Risk : 150-199 High Risk: 200-499 Very High Risk: >500	End Point
HDL Cholesterol	42.0	mg/dL	Optimal: >55 Border Line High Risk: 35-55 High Risk:- <35	Reflect Spectrothoto
Non - HDL Cholesterol	170	mg/dL	<130	
LDL Cholesterol	141.2	mg/dL	49-172	Reflect Spectrothoto
VLDL Cholesterol	28.8	mg/dL	5.0-40.0	Reflect Spectrothoto
Chol / HDL Ratio	5.05		Low Risk : 3.3-4.4 Average Risk : 4.5-7.1 Moderate Risk : 7.2-11.0 High Risk : >11.0	CALCULATED



SIN NO :10394622,

A.K. Rajong

DR. ASHOK KUMAR
M.D. (PATH)

Patient NAME	: Mr. VIRENDRA YADAV
Age/Gender	: 32 Y 0 M 0 D /M
UHID/MR NO	: ILK.00034177
Visit ID	: ILK.99120
Ref Doctor	: Dr.ARCOFEMI HEALTHCARE LIMITED

Collected	: 29/Sep/2023 10:27AM
Received	: 29/Sep/2023 10:48AM
Reported	: 29/Sep/2023 11:43AM
Status	: Final Report
Client Name	: INSTA

DEPARTMENT OF BIOCHEMISTRY-ROUTINE

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

LIVER FUNCTION TEST (LFT) WITH GGT , SERUM

Total Bilirubin	0.7	mg/dL	0.2-1.2	Jendrassik-Grof
Direct Bilirubin	0.1	mg/dL	0.0-0.3	Jendrassik-Grof
Indirect Bilirubin	0.6	mg/dL	0.0-0.9	Calculated
SGOT / AST	25.0	U/L	1-30	UV Kinetic (IFCC)
SGPT / ALT	36.0	U/L	1-45	UV Kinetic (IFCC)
Alkaline Phosphatase	90.0	U/L	43-115	PNPP
Gamma Glutaryl Transferase (GGT)	24.0	U/L	0.0-55.0	Reflect Spectrophoto
Total Protein	7.9	g/dl	6.4-8.3	Biuret
Albumin	4.6	g/dL	3.5-5.2	BCG
Globulin	3.3	g.dl	2.0-3.5	Calculated
A/G Ratio	1.39	%	1.0-2.3	Calculated



A.K. Rajan

DR. ASHOK KUMAR
M.D. (PATH)

Patient NAME : Mr. VIRENDRA YADAV	Collected : 29/Sep/2023 10:27AM
Age/Gender : 32 Y 0 M 0 D /M	Received : 29/Sep/2023 02:30PM
UHID/MR NO : ILK.00034177	Reported : 29/Sep/2023 02:36PM
Visit ID : ILK.99120	Status : Final Report
Ref Doctor : Dr.ARCOFEMI HEALTHCARE LIMITED	Client Name : INSTA

DEPARTMENT OF BIOCHEMISTRY-SPECIAL

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

THYROID PROFILE-I , SERUM

Trilodothyronine Total (TT3)	0.98	ng/dL	0.6-1.8	Chemilluminescence
Thyroxine (TT4)	8.23	µg/dL	4.5-10.9	Chemilluminescence
Thyroid Stimulating Hormone (TSH)	1.868	µIU/ml	0.35-5.50	Chemilluminescence

COMMENT :- Above mentioned reference ranges are standard reference ranges.

AGE RELATED GUIDELINES FOR REFERENCE RANGES FOR TSH

TSH	NEW BORN	INFANT	CHILD	ADULT
(u lu/ml)	0.52-38.9	1.7-9.1	0.7-6.4	0.3-5.6

PREGNENCY RELATED GUIDELINES FOR REFERENCE RANGES FOR TSH

TSH	1st Trimester	2nd & 3rd Trimester
(u lu/ml)	0.2 - 2.5	0.3 - 3.0

NOTE: TSH levels are subject to circadian variation, reaching peak levels between 2-4 AM and at a minimum between 6-10 PM. Dose and time of drug intake also influence the test result.

Ultrasensitive kits used.

Serum T3/ FT3 , T4/FT4 and TSH measurements form three components of thyroid screening panel.

- Primary hypothyroidism is accompanied by elevated serum T3 & T4 values alongwith depressed TSH level.
- Primary hypothyroidism is accompanied by elevated serum T3 & T4 values & elevated serum TSH level.
- Normal T3 & T4 levels with high TSH indicate mild / subclinical HYPOTHYROIDISM.
- singly elevated T3 levels may be found in pregnancy and in estrogen therapy while depressed levels may be encountered in severe illness, malnutrition, renal failure and during therapy with drugs like propranolol .
- Although elevated TSH levels are nearly always indicative of primary hypothyroidism. Rarely they can result from TSH secreting pituitary tumours (secondary hyperthyroidism).



SIN NO : 10394622,

A.K. Rajong

DR. ASHOK KUMAR
M.D. (PATH)

Patient NAME	: Mr. VIRENDRA YADAV
Age/Gender	: 32 Y 0 M 0 D /M
UHID/MR NO	: ILK.00034177
Visit ID	: ILK.99120
Ref Doctor	: Dr.ARCOFEMI HEALTHCARE LIMITED

Collected	: 29/Sep/2023 10:27AM
Received	: 29/Sep/2023 10:48AM
Reported	: 29/Sep/2023 12:53PM
Status	: Final Report
Client Name	: INSTA

DEPARTMENT OF CLINICAL PATHOLOGY

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

CUE - COMPLETE URINE ANALYSIS , URINE

Physical Examination

Colour	YELLOW			Visual
Appearance	Clear			Visual
pH	7.0		5.0-7.5	Dipstick
Specific Gravity	1.015		1.002-1.030	Dipstick

Chemical Examination

Albumin Urine/ Protein Urine	NIL		NIL	Dipstick/Heat Test
Glucose Urine	NIL		NIL	Dipstick/Benedict
Urobilinogen	NIL		NIL	Dipstick/Ehrlichs
Ketones	NIL		NIL	Dipstick/Rotheras
Bile Salts	ABSENT		ABSENT	Dipstick
Bile Pigments	ABSENT		ABSENT	Dipstick/Fouchets
Nitrite	ABSENT		ABSENT	Dipstick

Microscopic Examination.

Pus Cells	2-3	/Hpf	0-2	
Epithelial Cells	1-2	Hpf	<10	
RBC	ABSENT	/Hpf	ABSENT	
Casts	ABSENT		ABSENT	
Crystals	ABSENT		ABSENT	
Bacteria	NORMALLY PRESENT		NORMALLY PRESENT	
Budding Yeast Cells	Absent		Absent	

*** End Of Report ***



SIN NO :10394622,

A.K. Rajong

DR. ASHOK KUMAR
M.D. (PATH)

ECHO CARDIOGRAPHY REPORT

Patient Name : Mr VIRENDRA YADAV
Date : 29/09/2023

AGE & Sex :32yrs /M

Echocardiography was performed on vivid T8

Quality Of Imaging : Adequate

Mitral Valve : Normal
Tricuspid Valve : Normal
Aortic Valve : Normal
Pulmonary Valve : Normal
Left Atrium : 3.4cms
Left Ventricle :
IVSD : 1.2 cms LVPWD : 1.2cms
EDD : 4.9 cms EF 60%
ESD : 3.0 cms FS 32%

RWMA : NO REGIONAL WALL MOTION ABNORMALITY
Right Atrium : Normal
Right Ventricle : Normal
Aorta : 3.1cms
IAS IVS : Intact
Pulmonary Artery : Normal
Pericardium : Normal
SVC, IVC : Normal
Pulmonary Artery : Normal
Intracardiac Masses : Nil
Doppler : E > A

Conclusion :

NORMAL CARDIAC CHAMBERS DIMENSION .
NO REGIONAL WALL MOTION ABNORMALITY
NORMAL LV SYSTOLIC FUNCTION , LVEF-60%
NORMAL VALVES
INTACT SEPTUM
NO CLOT /VEGETATION /PERICARDIAL EFFUSION

Dr. Abhishek Sharma
MBBS,MD (Medicine) DNB (Cardiology)
Consultant Interventional Cardiology
RJN Apollo Spectra Hospitals
Reg.No. MP 12056

Consultant

Dr. Abhishek sharma (DNB)
(Interventional Cardiologist)



RATAN JYOTI NETRALAYA

OPHTHALMIC INSTITUTE & RESEARCH CENTRE

Hospital Reg. No. : 071



॥ सर्वेन्द्रियाणाम् नयनम् प्रधानम् ॥

18, Vikas Nagar, Near Sai Baba Mandir, Gwalior-2 (M.P.) INDIA Tel. : 2423350/51, Web : www.ratanjyotigroup.org, Email : rjneye@gmail.com
Opp. Medical College, Gate No. 3 Jhansi-284128 (U.P.) Ph. 0510-2322311 (M) 9109973225

SR.NO. : 1881511 DATE : 29-September-2023
NAME : MR VIRENDRA YADAV MRD NO. : R-106259
AGE/SEX : 32 YRS / MALE CITY : Jhansi

AHC

VISION	DISTANCE		NEAR	
	OD	OS	OD	OS
UNAIDED	6/6	6/6	N6	N6
WITH GLASSES				
WITH PIN HOLE				
WITH COLOR				
VISION				

IOP READING				
TIME	OD	OD METHOD	OS	OS METHOD
2:18PM	15		14	

INVESTIGATION :

S.IGE
AEC (ABSOLUTE ESONOPHIL COUNT)
S. VITAMIN-D

Rx.	EYE	From	To	Instructions
1 OLOPAT MAX EYE DROP 5ML (OLOPATADINE HYDROCHLORIDE OPHTHALMIC SOLUTION IP 0.7% W/V) ONE DROP 1 TIMES A DAY FOR 30 DAYS	BOTH	29-Sep-2023	28-Oct-2023	EYE
2 LOTEPRD EYE DROP 5ML (LOTPREDNOL ETABONATE OPHTHALMIC SOLUTION 0.5%W/V) ONE DROP 4 TIMES A DAY FOR 7 DAYS	BOTH	29-Sep-2023	5-Oct-2023	EYE
ONE DROP 3 TIMES A DAY FOR 7 DAYS	BOTH	6-Oct-2023	12-Oct-2023	EYE
ONE DROP 2 TIMES A DAY FOR 7 DAYS	BOTH	13-Oct-2023	19-Oct-2023	EYE
ONE DROP 1 TIMES A DAY FOR 7 DAYS	BOTH	20-Oct-2023	26-Oct-2023	EYE
3 MAXMOIST ULTRA EYE DROPS ONE DROP 4 TIMES A DAY FOR 30 DAYS	BOTH	29-Sep-2023	28-Oct-2023	EYE

TREATMENT PLAN : - MEDS AS ADV
-AVOID DUST & WEAR PROTECTIVE EYE GLASSES
- AVOID RUBBING EYES
- COLD COMPRESSES 2-3 TIMES/DAY

REFERRED TO :

DR. SHRIKANT THAPAK
Reg.No MP-140005

Speciality Clinics : ▪ Comprehensive Ophthalmology Clinic ▪ Cataract & IOL Clinic ▪ Vitreo Retina & Uvea Clinic ▪ Spectacle Removal Clinic (Lasik/Femto Lasik/Phakic Lens) ▪ Cornea Clinic ▪ Glaucoma Clinic ▪ Orbit & Oculoplasty Clinic ▪ Trauma Clinic ▪ Squint Clinic ▪ Paediatric Ophthalmology Clinic ▪ Low Vision Aid Clinic ▪ Contact Lens Clinic

CONSULTATION TIMINGS : MORNING 9:00 A.M. TO 6:00 P.M. (SUNDAY OFF)

- केन्द्रीय कर्मचारियों के लिए मान्यता प्राप्त ● कैशलेस इश्योरेन्स एवं टी.पी.ए. सुविधा उपलब्ध
- For Appointment Please Contact : 9111004046

स्वामी विद्यानंद भारती आई बैंक
नेत्रदान
करें और करायेँ इसे अपने परिवार की परम्परा बनायेँ
नेत्रदान के लिए सम्पर्क करें : 9111004044

PATIENT NAME - VIRENDRA YADAV 32 Y/M
REFERRED BY - H.C.P
DATE - 29/09/2023
INVESTIGATION - USG WHOLE ABDOMEN

IMAGING FINDINGS:-

Liver appears normal in size, position, shape and margin. Parenchyma shows increased echogenicities. The intrahepatic biliary and portal venous radicles appear normal. Hepatic veins and portal vein are normal.

Gall Bladder is well distended. GB wall and lumen content appears normal. No echogenic focus within GB lumen. Visualized **CBD** is of normal caliber.

Spleen appears normal in size (~ 9.9 cm), position, shape, echotexture and margin. No any focal lesion within splenic parenchyma. Splenic vein is normal and undilated.

Visualized pancreas appears normal in size, shape and echotexture. Pancreatic duct is not dilated. No USG evidence of obvious measurable focal lesion.

Both Kidneys: Measurements are right kidney ~ 10.5x4.2 cm and left kidney ~ 10.1x5.2 cm. Both kidneys are normal in position, size, shape, surface, echotexture and cortico-medullary differentiation. Bilateral PC systems are compact. No significant calculus or hydronephrosis on either side. Ureters are undilated on either side.

Urinary Bladder is normal in shape, wall and content.

Prostate appears normal in size (~ 13.1 cc), shape and echotexture.

No obvious ascites.

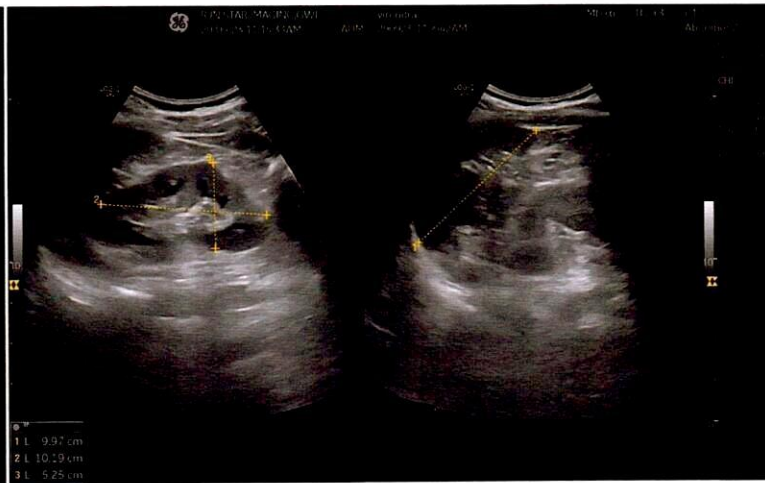
OPINION:- Features are suggestive of-

- **Grade I fatty liver.**

Suggested clinical correlation/Follow up imaging.

DR. SAKSHI CHAWLA
(MD RADIODIAGNOSIS)

Disclaimer: The science of radiology is based upon interpretation of shadows of normal and abnormal tissue. This is neither complete nor accurate; hence, findings should always be interpreted in to the light of clinico-pathological correlation. This is a professional opinion, not a diagnosis. Not meant for medico legal purposes. For any kind of typing error, please intimate us within 7 days of reporting.



Patient Name Nimendra yadav MRN : Age 34 Sex M Date/Time 29/09/23

Mob No.

Investigations : (Please Tick)

- CBC
- ESR
- CRP
- S-Vit D3
- S-Vit B12
- RBS
- B Sugar - F/PP O/E
- HbA1C
- LFT/KFT
- PT
- INR
- RA Factor
- Anti CCP
- HLA B27
- ANA
- HIV
- HBsAg
- Anti HCV N/A

Health checkup

- Calculus +1
- Stones +1
- Gen. glycolysis

Vitals

- B.P.
- P.R.
- SPO2
- Temp fe

Oral prophylaxis

Medical Illness

- Hypertension
- Diabetes
- Thyroid
- Cardiac Disease
- Drug Allergies

Cholera SOS m/w
- 1-1-

Next Appointment/Follow up

Signature :



32 Years

virendra
Male

29-Sep-23 1:04:38 PM

Rate 77 . Sinus rhythm.....normal P axis, V-rate 50- 99
. Baseline wander in lead(s) V2

PR 139
QRSD 87
QT 377
QTc 427

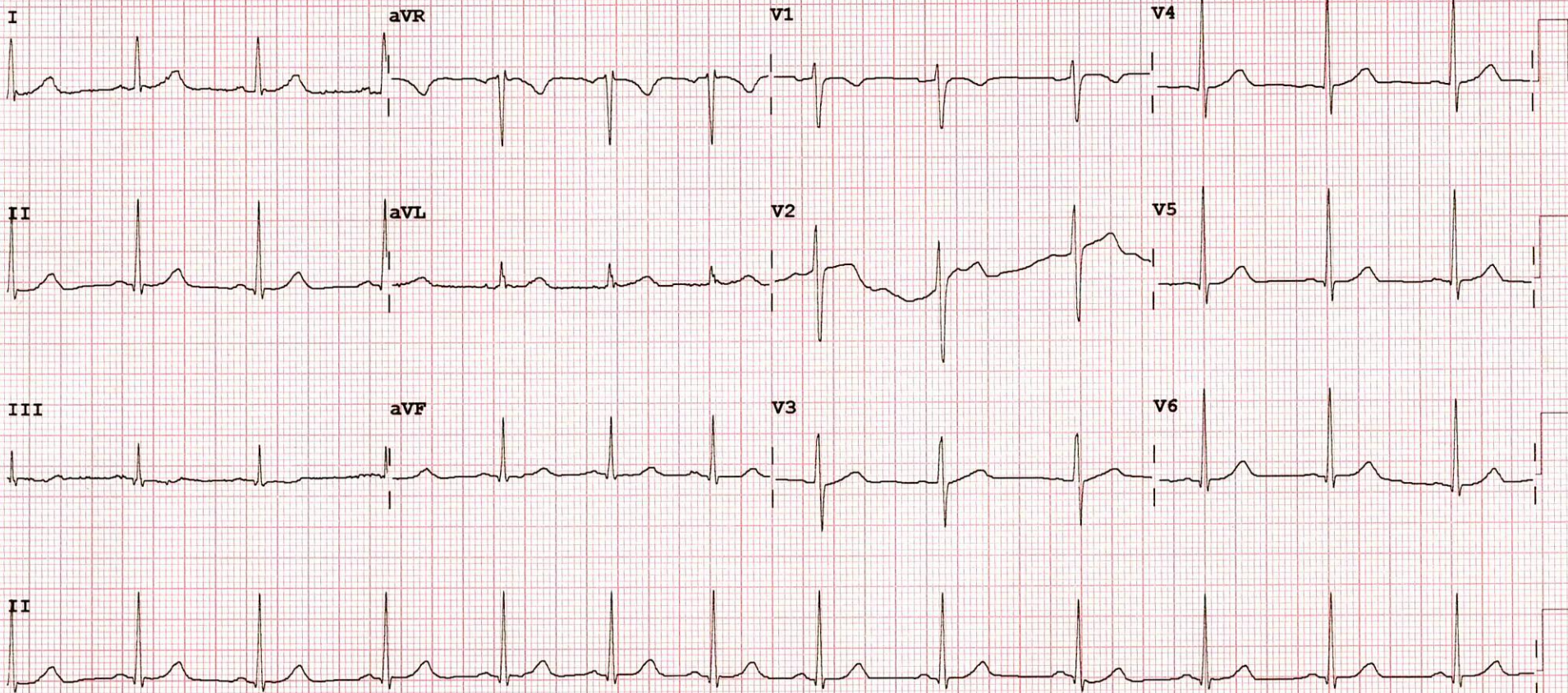
--AXIS--

P 52
QRS 33
T 21

- NORMAL ECG -

12 Lead; Standard Placement

Unconfirmed Diagnosis



Device:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 60~ 0.15-100 Hz

PH100B CL

P?

Patient name	MR VIRENDRA YADAV	Age/sex	32 Y/M
Ref. By	153020	Date	29.09.23

XRAY CHEST

- The lung fields appear clear.
- Bilateral C.P. angles appear clear.
- Cardiac size within normal limits.
- Soft tissue shadow and bony thoracic cage appears normal.

Please correlate clinically.

DR. ANOOP ARYA (SINGHAL)
DMRD, DNB (RADIODIAGNOSIS)

RATAN JYOTI NETRALAYA PRIVATE LIMITED

CIN : U85110MP2013PTC030901
Registered Office : 18, Vikas Nagar, Near Sai Baba Mandir, Gwalior - 474002

RJN APOLLO SPECTRA HOSPITALS

18, Vikas Nagar, Near Sai Baba Mandir, Gwalior - 474002
Ph. No.: 0751-2454600, 2450500 www.apollospectra.com
Registered Vide No. NH/1542/MAR-2016

BENGALURU | CHENNAI | DELHI | GWALIOR | HYDERABAD | JAIPUR | KANPUR | MUMBAI | PUNE