

Hosp. Reg. No.: TMC - Zone C - 386

INDUSTRIAL HEALTH SERVICES

14/10/2em

mr. favirdre teken

Ciclo Hypothyrodine Took Homesputy S.

ECG. ONS

4 he cen Jenne



S-1, Vedant Complex, Vartak Nagar, Thane (W) 400 606
E: ohs.svh@gmail.com W: www.siddhivinayakhospitals.org T.: 022 - 2588 3531



Hosp. Reg. No.: TMC - Zone C - 386

INDUSTRIAL HEALTH SERVICES

OPTHAL CHECK UP SCREENING

NAME OF EMPLOYEE

RAVINDRA TEKAM

AGE

24

DATE -

14.10.2023

Spects: With Glasses

| | RT Eye | Lt Eye |
|------------------|--------|--------|
| NEAR | N/6 | N/6 |
| DISTANT | 6/6 | 6/9 |
| Color Blind Test | NORMAL | |















ECHOCARDIOGRAM

| NAME | MR. RAVINDRA TEKAM | |
|---------------------|---------------------------------------|--|
| AGE/SEX | 33 YRS/M | |
| REFERRED BY | SIDDHIVINAYAK HOSPITAL | |
| DOCTOR | DR. ANANT MUNDE, DNB, DM (CARDIOLOGY) | |
| DATE OF EXAMINATION | 14/10/2023 | |

2D/M-MODE ECHOCARDIOGRAPHY

| <u>CHAMBERS</u> : |
|--|
| LEFT ATRIUM: Normal |
| LEFT VENTRICLE: Normal |
| RWMA: No |
| Contraction: Normal |
| RIGHT ATRIUM: Normal |
| RIGHT VENTRICLE: Normal |
| RWMA: No |
| Contraction: Normal |
| |
| SEPTAE: |
| IAS: Intact |
| IVS: Intact |
| VENACAVAE: |
| SVC: Normal |
| IVC: Normal and collapsing >20% with respiration |
| PERICARDIUM: Normal |
| |

MEASUREMENTS:

| AORTA | A | LEFT VENTR | ICLE STUDY | RIGHT VENTR | ICLE STUDY |
|-----------------------|-------------------|-------------|-------------------|--------------|-------------------|
| PARAMETER | OBSERVED VALUE | PARAMETER | OBSERVED VALUE | PARAMETER | OBSERVED VALUE |
| Aortic annulus | 22 mm | Left atrium | 37 mm | Right atrium | mm |
| Aortic sinus | mm | LVIDd | 51.6 mm | RVd (Base) | mm |
| Sino-tubular junction | mm | LVIDs | 33.0 mm | RVEF | % |
| Ascending aorta | mm | IVSd | 7.9 mm | TAPSE | mm |
| Arch of aorta | mm | LVPWd | 7.9 mm | MPA | mm |
| Desc. thoracic aorta | mm | LVEF | 65 % | RVOT | mm |
| Abdominal aorta | mm | LVOT | mm | IVC | 15.2 mm |









Imaging Department

Name - Mr. Ravindra Tekam Age - 33 Y/M

Ref by Dr.- Siddhivinayak Hospital Date 14/10/2023

USG ABDOMEN & PELVIS

Clinical details: - Routine

The Liver is normal in size and shows normal echogenicity. There is no obvious abnormal focal lesion seen. There is no IHBR dilatation seen in both the lobes of the liver.

The CBD and the Portal vein appear normal.

The Gall bladder is well distended & appears normal. No calculi or filling defects are seen. No evidence of Pericholecystic collection. The wall thickness is normal.

Right Kidney measures 8. 8 x 4.0 cm & appears normal in shape and position. There is no evidence of hydronephrosis or any calculi seen. Cortico-medullary differentiation is maintained.

Left Kidney measures $10.0 \times 4.3 \text{ cm}$ & appears normal in shape and position. There is no evidence of hydronephrosis or any calculi seen. Cortico-medullary differentiation is maintained.

The Pancreas is normal in size & shows homogenous echopattern. It shows no focal lesion. The Spleen is mildly enlarged in size (12.8cm) with homogenous echotexture. The urinary bladder is adequately distended and appears normal. There is no evidence of any obvious calculi or any mass lesion seen. Both Uretero-vesical junctions appear clear. No abnormal intraluminal lesion noted.

Prostate appears normal in size. The echotexture pattern is normal. There is no obvious focal lesion seen.

No free fluid or obvious lymphadenopathy is seen in abdomen and pelvis.

IMPRESSION:

Mild Splenomegaly.

Adv.: Clinical and lab correlation.

DR. MOHAMMAD SOHAIB

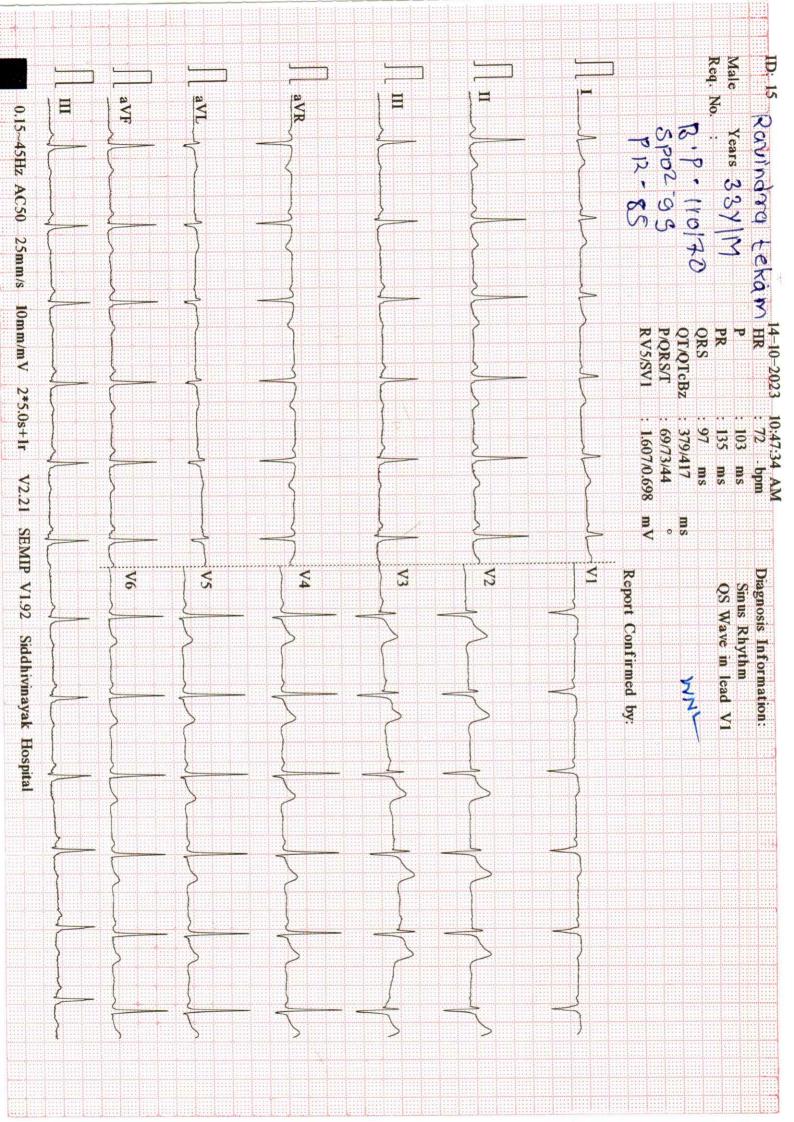
MBBS; DMRE

CONSULTANT RADIOLOGIST

Note: The above report represents interpretation of various radiographic / sonographic shadows, and hence has its own limitations. This report has to be co-related clinic-pathologically by the referring / physician and it does NOT represent the sole diagnosis. Second opinion is always advisable.

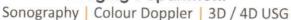








Imaging Department





| Name - Mr. Ravindra Tekam | Age - 33 Y/M |
|----------------------------------|-------------------|
| Ref by Dr Siddhivinayak Hospital | Date - 14/10/2023 |

X- Ray chest (PA VIEW)

No obvious active parenchymal lesion seen in both lungs.

Cardiac and aortic shadows appear normal

No evidence of pleural of effusion is seen.

Both domes of diaphragm appear normal.

No obvious bony lesion is seen.

IMPRESSION:

· No significant abnormality seen.

Adv.: Clinical and lab correlation.

DR. MOHAMMAD SOHAIB

MBBS; DMRE

CONSULTANT RADIOLOGIST

Note: The above report represents interpretation of various radiographic / sonographic shadows, and hence has its own limitations. This report has to be co-related clinic-pathologically by the referring / physician and it does NOT represent the sole diagnosis.







: 14/10/2023 10:44 am Name : Mr. RAVINDRA TEKAM Collected On

Lab ID. : 170953

: 15/10/2023 6:43 pm Reported On Age/Sex : 33 Years / Male

: SIDDHIVINAYAK HOSPITAL CGHS /ESIS / Ref By

Report Status : INTERIM

Received On

. 14/10/2023 10:54 am

*LIPID PROFILE

| TEST NAME | RESULTS | UNIT | REFERENCE RANGE |
|---|---------|-------|--|
| TOTAL CHOLESTEROL (CHOLESTEROL OXIDASE,ESTERASE,PEROXIDA SE) | 161.0 | mg/dL | Desirable blood cholesterol: - <200 mg/dl. Borderline high blood cholesterol: - 200 - 239 mg/dl. High blood cholesterol: - >239 mg/dl. |
| S.HDL CHOLESTEROL (DIRECT MEASURE - PEG) | 36.3 | mg/dL | Major risk factor for heart :<30 mg/dl. Negative risk factor for heart disease: >=80 mg/dl. |
| S. TRIGLYCERIDE (ENZYMATIC, END POINT) | 115.1 | mg/dL | Desirable level: <161 mg/dl. High:>= 161 - 199 mg/dl. Borderline High:200 - 499 mg/dl. Very high:>499mg/dl. |
| VLDL CHOLESTEROL (CALCULATED VALUE) | 23 | mg/dL | UPTO 40 |
| S.LDL CHOLESTEROL (CALCULATED VALUE) | 102 | mg/dL | Optimal:<100 mg/dl. Near Optimal: 100 - 129 mg/dl. Borderline High: 130 - 159 mg/dl. High: 160 - 189mg/dl. Very high:>= 190 mg/dl. |
| LDL CHOL/HDL RATIO (CALCULATED VALUE) | 2.81 | | UPTO 3.5 |
| CHOL/HDL CHOL RATIO (CALCULATED VALUE) | 4.44 | | <5.0 |

Above reference ranges are as per ADULT TREATMENT PANEL III recommendation by NCEP (May 2015).

Result relates to sample tested, Kindly correlate with clinical findings.

Checked By pooja jadhav

DR. SMITA RANVEER. M.B.B.S.M.D. Pathology(Mum) **Consultant Histocytopathologist**

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COMPLETE BLOOD COUNT

| TEST NAME | RESULTS | UNIT | REFERENCE RANGE |
|---------------------------|-----------------|----------|-----------------|
| HEMOGLOBIN | 12.2 | gm/dl | 13 - 18 |
| HEMATOCRIT (PCV) | 36.6 | % | 42 - 52 |
| RBC COUNT | 5.00 | x10^6/uL | 4.70 - 6.50 |
| MCV | 73 | fl | 80 - 96 |
| MCH | 24.4 | pg | 27 - 33 |
| MCHC | 33 | g/dl | 33 - 36 |
| RDW-CV | 13.9 | % | 11.5 - 14.5 |
| TOTAL LEUCOCYTE COUNT | 4890 | /cumm | 4000 - 11000 |
| DIFFERENTIAL COUNT | | | |
| NEUTROPHILS | 57 | % | 40 - 80 |
| LYMPHOCYTES | 34 | % | 20 - 40 |
| EOSINOPHILS | 02 | % | 0 - 6 |
| MONOCYTES | 07 | % | 2 - 10 |
| BASOPHILS | 00 | % | 0 - 1 |
| PLATELET COUNT | 247000 | / cumm | 150000 - 450000 |
| MPV | 10.5 | fl | 6.5 - 11.5 |
| PDW | 16.3 | % | 9.0 - 17.0 |
| PCT | 0.260 | % | 0.200 - 0.500 |
| RBC MORPHOLOGY | Normocytic Norm | ochromic | |
| WBC MORPHOLOGY | Normal | | |
| PLATELETS ON SMEAR | Adequate | | |

Method: EDTA Whole Blood- Tests done on Automated Six Part Cell Counter.RBC and Platelet count by Electric Impedance ,WBC by SF Cube method and Differential by flow cytometry . Hemoglobin by Cyanide free reagent for hemoglobin test (Colorimetric Method). Rest are calculated parameters.

Result relates to sample tested, Kindly correlate with clinical findings.

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/ Male

: Mr. RAVINDRA TEKAM Name

Collected On : 14/10/2023 10:44 am

Report Status

Lab ID. : 170953

. 14/10/2023 10:54 am Received On

Age/Sex : 33 Years Reported On : 15/10/2023 6:43 pm

: SIDDHIVINAYAK HOSPITAL CGHS /ESIS / Ref By

: INTERIM

| HEMATOLOG |
|-----------|
|-----------|

| TEST NAME | RESULTS | UNIT | REFERENCE RANGE | |
|------------|---------|---------|-----------------|--|
| <u>ESR</u> | | | | |
| ESR | 25 | mm/1hr. | 0 - 20 | |

METHOD - WESTERGREN

Result relates to sample tested, Kindly correlate with clinical findings.

Checked By pooja_jadhav

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. 14/10/2023 10:54 am Received On Lab ID. : 170953

Reported On : 15/10/2023 6:43 pm Age/Sex : 33 Years / Male

: INTERIM **Report Status** : SIDDHIVINAYAK HOSPITAL CGHS /ESIS Ref By

URINE ROUTINE EXAMINATION

| | URINE ROUTINE EXAMINATION | | | | |
|---------------------------------|-----------------------------|-------|-----------------|--|--|
| TEST NAME | RESULTS | UNIT | REFERENCE RANGE | | |
| URINE ROUTINE EXAMINATI | <u>ION</u> | | | | |
| PHYSICAL EXAMINATION | | | | | |
| VOLUME | 20 ml | | | | |
| COLOUR | Pale Yellow | Text | Pale Yellow | | |
| APPEARANCE | Clear | | CLEAR | | |
| CHEMICAL EXAMINATION | | | | | |
| REACTION | Acidic | | Acidic | | |
| (methyl red and Bromothymol | blue indicator) | | | | |
| SP. GRAVITY | 1.020 | | 1.005 - 1.022 | | |
| (Bromothymol blue indicator) | | | | | |
| PROTEIN | Absent | | Absent | | |
| (Protein error of PH indicator) | | | | | |
| BLOOD | Absent | | Absent | | |
| (Peroxidase Method) | | | | | |
| SUGAR | Absent | | Absent | | |
| (GOD/POD) | | | | | |
| KETONES | Absent | | Absent | | |
| (Acetoacetic acid) | | | | | |
| BILE SALT & PIGMENT | Absent | | Absent | | |
| (Diazonium Salt) | | | | | |
| UROBILINOGEN | Absent | | Normal | | |
| (Red azodye) | | | | | |
| LEUKOCYTES | Absent | Text | Absent | | |
| (pyrrole amino acid ester diazo | | | | | |
| NITRITE | Absent | | Negative | | |
| (Diazonium compound With tet | rahydrobenzo quinolin 3-phe | enol) | | | |
| MICROSCOPIC EXAMINATIO | | | | | |
| RED BLOOD CELLS | Absent | Text | Absent | | |
| PUS CELLS | 1-2 | / HPF | 0 - 5 | | |
| EPITHELIAL | 0-2 | / HPF | 0 - 5 | | |
| CASTS | Absent | | | | |
| | | | | | |

Checked By

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URINE ROUTINE EXAMINATION

| TEST NAME | RESULTS | UNIT | REFERENCE RANGE |
|--------------------|---|------|-----------------|
| CRYSTALS | Absent | | |
| BACTERIA | Absent | | Absent |
| YEAST CELLS | Absent | | Absent |
| ANY OTHER FINDINGS | Absent | | |
| REMARK | Result relates to sample tested. Kindly correlate with clinical findings. | | |

Result relates to sample tested, Kindly correlate with clinical findings.

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HAEMATOLOGY

UNIT REFERENCE RANGE **TEST NAME RESULTS**

BLOOD GROUP

SPECIMEN WHOLE BLOOD EDTA & SERUM

* ABO GROUP 'A'

POSITIVE RH FACTOR

Method: Slide Agglutination and Tube Method (Forward grouping & Reverse grouping)

Result relates to sample tested, Kindly correlate with clinical findings.

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*BIOCHEMISTRY

| TEST NAME | RESULTS | UNIT | REFERENCE RANGE |
|--------------------------|---|---------------------|---------------------|
| BLOOD UREA | 26.4 | mg/dL | 19 - 45 |
| (Urease UV GLDH Kinetic) | | | |
| BLOOD UREA NITROGEN | 12.34 | mg/dL | 5 - 20 |
| (Calculated) | | | |
| S. CREATININE | 1.00 | mg/dL | 0.6 - 1.4 |
| (Enzymatic) | | | |
| S. URIC ACID | 7.50 | mg/dL | 3.5 - 7.2 |
| (Uricase) | | | |
| S. SODIUM | 138.7 | mEq/L | 137 - 145 |
| (ISE Direct Method) | | | |
| S. POTASSIUM | 4.38 | mEq/L | 3.5 - 5.1 |
| (ISE Direct Method) | | | |
| S. CHLORIDE | 106.6 | mEq/L | 98 - 110 |
| (ISE Direct Method) | | | |
| S. PHOSPHORUS | 3.14 | mg/dL | 2.5 - 4.5 |
| (Ammonium Molybdate) | | | |
| S. CALCIUM | 9.60 | mg/dL | 8.6 - 10.2 |
| (Arsenazo III) | | | |
| PROTEIN | 7.46 | g/dl | 6.4 - 8.3 |
| (Biuret) | | | |
| S. ALBUMIN | 4.06 | g/dl | 3.2 - 4.6 |
| (BGC) | 2.40 | 7.11 | 10.25 |
| S.GLOBULIN | 3.40 | g/dl | 1.9 - 3.5 |
| (Calculated) | 1.10 | | 0 2 |
| A/G RATIO | 1.19 | | 0 - 2 |
| calculated NOTE | DIOCHEMICTRY T | ECT DONE ON ELLIV A | LITOMATED (EM 200) |
| INOTE | BIOCHEMISTRY TEST DONE ON FULLY AUTOMATED (EM 200) ANALYZER. | | |

Result relates to sample tested, Kindly correlate with clinical findings.

Checked By

pooja_jadhav

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Name : Mr. RAVINDRA TEKAM **Collected On** : 14/10/2023 10:44 am

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Age/Sex : 33 Years / Male Reported On : 15/10/2023 6:43 pm

: SIDDHIVINAYAK HOSPITAL CGHS /ESIS / Ref By

Report Status : INTERIM

Peripheral smear examination

TEST NAME RESULTS

SPECIMEN RECEIVED Whole Blood EDTA

RBC Normocytic Normochromic

WBC Total leucocyte count is normal on smear.

> Neutrophils:56 % Lymphocytes:35 % Monocytes:07 % Eosinophils:02 % Basophils:00 % Adequate on smear.

PLATELET HEMOPARASITE No parasite seen.

Result relates to sample tested, Kindly correlate with clinical findings.

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LIVER FUNCTION TEST

| TEST NAME | RESULTS | UNIT | REFERENCE RANGE | |
|--------------------------------|---------|-------|-----------------|--|
| TOTAL BILLIRUBIN | 0.67 | mg/dL | 0.0 - 2.0 | |
| (Method-Diazo) | | | | |
| DIRECT BILLIRUBIN | 0.32 | mg/dL | 0.0 - 0.4 | |
| (Method-Diazo) | | | | |
| INDIRECT BILLIRUBIN | 0.35 | mg/dL | 0 - 0.8 | |
| Calculated | | | | |
| SGOT(AST) | 15.8 | U/L | 0 - 37 | |
| (UV without PSP) | | | | |
| SGPT(ALT) | 16.8 | U/L | UP to 40 | |
| UV Kinetic Without PLP (P-L-P) | | | | |
| ALKALINE PHOSPHATASE | 56.0 | U/L | 53 - 128 | |
| (Method-ALP-AMP) | | | | |
| S. PROTIEN | 7.46 | g/dl | 6.4 - 8.3 | |
| (Method-Biuret) | | | | |
| S. ALBUMIN | 4.06 | g/dl | 3.5 - 5.2 | |
| (Method-BCG) | | | | |
| S. GLOBULIN | 3.40 | g/dl | 1.90 - 3.50 | |
| Calculated | | | | |
| A/G RATIO | 1.19 | | 0 - 2 | |
| Calculated | | | | |

Result relates to sample tested, Kindly correlate with clinical findings.

Checked By pooja_jadhav

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. 14/10/2023 10:54 am Received On Lab ID. 170953

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BIOCHEMISTRY

| TEST NAME | RESULTS | UNIT | REFERENCE RANGE | | | |
|----------------------------|---------|-------|-----------------|--|--|--|
| GAMMA GT | 19.0 | U/L | 13 - 109 | | | |
| BLOOD GLUCOSE FASTING & PP | | | | | | |
| BLOOD GLUCOSE FASTING | 91.2 | mg/dL | 70 - 110 | | | |
| BLOOD GLUCOSE PP | 104.4 | mg/dL | 70 - 140 | | | |

Method (GOD-POD). DONE ON FULLY AUTOMATED ANALYSER (EM200).

- 1. Fasting is required (Except for water) for 8-10 hours before collection for fasting speciman. Last dinner should consist of bland diet.
- 2. Don't take insulin or oral hypoglycemic agent until after fasting blood sample has been drawn

INTERPRETATION

- Normal glucose tolerance: 70-110 mg/dl

- Impaired Fasting glucose (IFG): 110-125 mg/dl

- Diabetes mellitus : >=126 mg/dl

POSTPRANDIAL/POST GLUCOSE (75 grams)

- Normal glucose tolerance: 70-139 mg/dl - Impaired glucose tolerance: 140-199 mg/dl

- Diabetes mellitus : >=200 mg/dl

CRITERIA FOR DIAGNOSIS OF DIABETES MELLITUS

- Fasting plasma glucose >=126 mg/dl
- Classical symptoms +Random plasma glucose >=200 mg/dl
- Plasma glucose >=200 mg/dl (2 hrs after 75 grams of glucose)
- Glycosylated haemoglobin > 6.5%

GLYCOCELATED HEMOGLOBIN (HBA1C)

| HBA1C (GLYCOSALATED | 4.00 | % | Hb A1c |
|------------------------------|------|-------|----------------------------|
| HAEMOGLOBIN) | | | > 8 Action suggested |
| | | | < 7 Goal |
| | | | < 6 Non - diabetic level |
| AVERAGE BLOOD GLUCOSE (A. B. | 68.1 | mg/dL | NON - DIABETIC : <=5.6 |
| G.) | | | PRE - DIABETIC : 5.7 - 6.4 |
| | | | DIABETIC: >6.5 |

METHOD Particle Enhanced Immunoturbidimetry

Checked By

pooja jadhav

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^{***}Any positive criteria should be tested on subsequent day with same or other criteria.



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BIOCHEMISTRY

UNIT REFERENCE RANGE **TEST NAME RESULTS**

HbA1c: Glycosylated hemoglobin concentration is dependent on the average blood glucose concentration which is formed progressively and irreversibly over a period of time and is stable till the life of the RBC/erythrocytes. Average Blood Glucose (A.B.G) is calculated value from HbA1c: Glycosylated hemoglobin concentration in whole Blood. It indicates average blood sugar level over past three months.

Result relates to sample tested, Kindly correlate with clinical findings.

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