

### HEALTH CHECK UP

Name : Krishna Kumar

Date : 6/1/23

Age : 41y

Sex : Male / Female

Marital status : Married / Single

**PERSONAL HISTORY**

Habits : Smoking / Tobacco & Snuff / <sup>or</sup> Alcohol

Drug allergy if any : Dust Allergy

Medical : Nil

Surgical : Nil

Height 173 cm Weight 80 Kg. BP. 130/80mmHg Pulse 74mt

Vision : Rt. 6/12 Lt. 6/12 With Spectacles ..... Rt. 6/12 Lt. 6/12

Colour Vision : Normal / ~~Abnormal~~ Near Vision ALG-BC

**FAMILY HISTORY**

Father ..... Mother ..... Siblings .....

CVS : Heart Sound ..... Normal Murmurs ..... Absent Thrills ..... Absent

RS : Rate ..... /mt Breath sounds ..... Normal Adventitious ..... Absent

ABDOMEN : Tenderness ..... Absent Rigidity ..... Absent Bowel sound ..... Normal

Liver ..... NAD Kidney ..... NAD Hernia ..... Absent

CNS : Cranial Nerves ..... NAD Sensory System ..... NAD Motor System ..... NAD

ENT ..... NAD

Remarks

Dr. Bharti Jeswani  
MBBS

Dr. Seema Kale  
MBBS, MD

Dr. S. K. Suri  
MBBS

Dr. Meenakshi  
MBBS

HOME SAMPLE COLLECTION FACILITY AVAILABLE

Patient Name : Mr. Krishna Kumar	MR No	: FRAJ0000
Age/Sex : 41Y/M	Visit No	: FRAJOPV
Pres Doctor :	Bill Date	: 06.11.2023
Ref.by :	Report Date	: 06.11.2023

**ULTRASOUND WHOLE ABDOMEN**

**LIVER:** Liver is normal in shape, size and echotexture. No focal intra-hepatic lesion detected. Intra-hepatic biliary radicals are not dilated. Portal vein is normal in calibre.

**GALL BLADDER:** Gall bladder is well visualised. Its wall thickness is normal. No calculus or mass lesion is seen in gall bladder.

**PANCREAS:** Pancreas appears normal in size and echopattern.

**SPLEEN:** Spleen appears normal in size and echopattern.

**KIDNEYS:** Both kidneys are normal in position, size and outline. Right kidney measures ~ 9 x 4.8 cm, Left kidney measures ~ 9.8 x 5 cm. Cortico-medullary differentiation of both kidneys is maintained. Central sinus echoes are compact. No calculus / hydronephrosis seen.

Visualised parts of retroperitoneum do not show any lymphadenopathy.

**URINARY BLADDER:** Urinary bladder is well distended and shows clear contents.

**PROSTATE:** Prostate is normal in shape, size and echotexture.

No free fluid detected.

**IMPRESSION:- NORMAL STUDY**

To be correlate clinically .



**Dr. Anisha Gupta**  
Consultant Radiologist.

**Disclaimer:** Renal calculi less than 5mm could be missed on an Ultrasound. NCCT KUB is the modality of choice for the same.

**DEPARTMENT OF LABORATORY MEDICINE**

Name: MR. KRISHNA KUMAR      Age: 41 Yrs.      Sex: Male  
 Date: 06/11/2023      Home Coll. Dt/Time      Ref. No. 20-21/5911  
 Refd. by:      Reporting Date/Time 06/11/2023      Srl. No. 1004

**HAEMATOLOGY TEST REPORT**

Test Name	Observed Value Value	Unit	Bio. Reference Range
<b>Blood Group -ABO</b> Tube Agglutination : EDTA	"O"		
<b>Blood Group Rh</b> Tube agglutination : EDTA	Positive		
<b><u>Haemogram (CBC,P/s,RBC indices)</u></b>			
Hb ( Haemoglobin ) Non cyanide analysis : EDTA	* 11.5	gm/dl	13.0 - 17.0
PCV / Haematocrit RBC pulse height detect : EDTA	* 36.7	%	40 - 50
ESR Westergren's Method : Citrate	16	mm/1st hr.	0 - 20
TLC DC detection method : EDTA	7,200	/cumm.	4000 - 10000
Platelet Count DC detection method : EDTA	1.69	Lakh/cmm	1.5 - 4.1
RBC Count DC detection method : EDTA	* 4.4	Millions/cmm	4.5 - 5.5
MCV(Derived)	81.7	fL	77 - 98
MCH(Derived)	* 26.0	pg	27 - 32
MCHC(Derived)	31.5	gm/dl	31.5 - 34.5
<b><u>Differential Leucocyte Count</u></b>			
Neutrophil	65	%	40 - 70
Lymphocytes	31	%	20 - 40
Eosinophil	02	%	01 - 06
Monocytes	02	%	02 - 10
<b>Peripheral Smear (Microscopy)</b>			

• CLINICAL CORRELATION IS ESSENTIAL FOR FINAL DIAGNOSIS. **Page 1** OF THE TESTS RESULTS ARE UNEXPECTED PLEASE CONTACT THE LABORATORY.  
 • ALL THE CONGENITAL ANOMALIES IN THE FETUS MAY NOT BE DIAGNOSED IN ULTRASONOGRAPHY. • THIS REPORT IS NOT VALID FOR MEDICOLEGAL PURPOSE.

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**MSMF UAM NO. : DL11E0021531**



**DEPARTMENT OF LABORATORY MEDICINE**

Name	MR. KRISHNA KUMAR	Age	41 Yrs.	Sex	Male
Date	06/11/2023	Home Coll. Dt/Time		Ref. No.	20-21/5911
Refd. by.		Reporting Date/Time	06/11/2023	Srl. No.	1004

**PERIPHERAL SMEAR** - RBC's show mild anisopoikilocytosis RBC's are predominantly normocytic normochromic. Few target cells seen .Leucocyte counts are within normal limits. Platelets are normal in number & morphology.No immature cells or haemoparasite detected.

**IMPRESSION: NORMOCYTIC ANEMIA.**  
\*\*\*\*\* End of Report \*\*\*\*\*

Technician / Technologist

  
**Dr. Prashant Purwar**  
Consultant Pathologist

**DEPARTMENT OF LABORATORY MEDICINE**



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Refd. by.		Reporting Date/Time	06/11/2023	Srl. No.	1004

**PROFILE**

Merilyzer AutoQuant 400

Test Name	Observed Value	Unit	Bio. Reference Range
HbA1C (Glycosylated Haemoglobin)			
HbA1C (Glycosylated Haemoglobin)	5.6	%	4.2 - 6.0
Boronate affinity assay ; EDTA			
	Good Control : 6.0-7.0.		
	Bad Control : 7.0-8.0.		
	Poor Control : >8.		

\*\*\*\*\* End of Report \*\*\*\*\*


  
**Technician / Technologist**

  
**Dr. Prashant Purwar**  
**Consultant Pathologist**



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**BIOCHEMISTRY TEST REPORT**

Merilyzer AutoQuant 400

Test Name	Observed Value	Unit	Bio. Reference Range
Blood Sugar (Glucose)-Fasting Sample - Fluoride, Method:GOD-POD.	99	mg /dl	70 - 110
Blood Sugar (Glucose)-Post Prandial Sample: Sodium Fluoride; Method/Technology: GOD-PODMethod, End Point.	140	mg/dl	70 - 140

\*\*\*\*\* End of Report \*\*\*\*\*

Technician / Technologist

  
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 Consultant Pathologist

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**DEPARTMENT OF LABORATORY MEDICINE**

Name MR. KRISHNA KUMAR Age 41 Yrs. Sex Male  
 Date 06/11/2023 Home Coll. Dt/Time Ref. No. 20-21/5911  
 Refd. by. Reporting Date/Time 06/11/2023 Srl. No. 1004

**Lipid Profile-serum**

Test Name	Observed Value	Unit	Bio. Reference Range
Cholesterol-serum Sample- Plain; Method-CHOD-PAP	220	mg/dL	120 - 240
Triglycerides-serum Sample- Plain; Method- GPO-PAP	* 304	mg/dL	50 - 200
HDL-Cholesterol-serum Sample- Plain; Method-Direct	* 59.2	mg/dL	30 - 50
VLDL-Cholesterol-serum Derived	* 60.8	mg/dL	10 - 40
LDL(Cholesterol)-serum Sample- Plain; Method-Direct/Calculated	100.0	mg/dL	60 - 100
Cholesterol / HDL Ratio-serum Derived	3.7		0.0 - 4.5

**LFT( Liver Function Test**

Bilirubin (Total)-serum Sample: Plain; Method/Technology: Diazo Method, Photometry.	0.86	mg/dl	0.1 - 1.3
Bilirubin (Direct)-serum Sample: Plain, Method / Technology: Diazo Method, Photometry.	0.15	mg/dl	0.0 - 0.3
Indirect Bilirubin - serum Derived	0.71	mg/dl	0.0 - 1.1
SGOT (AST)-serum Sample: Plain, Method / Technology: IFCC without Pyridoxal Phosphate/Kinetic.	34.6	IU/L	0 - 35
SGPT (ALT)-serum Sample: Plain, Method / Technology: IFCC without Pyridoxal Phosphate/Kinetic.	38.2	IU/L	0 - 45



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Refd. by.		Reporting Date/Time	06/11/2023	Srl. No.	1004
Alkaline Phosphatase-serum	96.2	U/L		30 - 117	
Sample: Plain; Method/Technology: AMP Buffer/Kinetic.					
G G T P - serum	42.8	U/L		10.0 - 50.0	
Sample: plain; Method / Technology: Szaz Method/Photometry.					
Protein Total - serum	7.3	gm/dl		5.8 - 8.0	
Sample: Plain; Method / Technology: Buret Method / Photometry					
Albumin-serum	4.5	gm/dl		3.7 - 5.2	
Sample: Plain; Method/Technology: BCG Method, Photometry.					
Globulin-serum	2.8	gm/dl		2.5 - 3.5	
Derived					
A/G Ratio-serum	1.6			1.2 - 2.0	
Derived					

\*\*\*\*\* End of Report \*\*\*\*\*

Technician / Technologist

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 Consultant Pathologist

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MSME UAM NO. - DI 11E0021531



**DEPARTMENT OF LABORATORY MEDICINE**


Name MR. KRISHNA KUMAR Age 41 Yrs. Sex Male  
 Date 06/11/2023 Home Coll. Dt/Time Ref. No. 20-21/5911  
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**KFT - Renal Profile-serum**

Blood Urea Sample: Plain; Method/Technology: Urease, Photometry.	14.6	mg /dl	10 - 50
Creatinine-serum Sample: Plain; Technology/Method: Jaffe Kinetic, Photometry.	0.97	mg/dl	0.5 - 1.3
Uric Acid-serum Sample: Plain; Method/Technology: Uricase Enzymatic, Photometry.	6.4	mg/dl	3.5 - 7.2
Sodium (Na <sup>+</sup> ) - serum ISE	140.9	mmol/L	136.0 - 142.0
Potassium (K <sup>+</sup> ) - serum ISE	4.1	mmol/L	3.8 - 5.0
Chloride(Cl <sup>-</sup> ) - serum ISE	98.7	mmol/L	95.0 - 103.0
Calcium-serum Sample: Plain; Method/Technology: OCPC Method, Photometry.	9.3	mg/dl	9.2 - 11.0
Phosphorus-serum Sample: Plain; Method / Technology: Molybdate UV, Photometry.	3.1	mg/dl	2.3 - 4.7
Albumin-serum Sample: Plain; Method/Technology: BCG Method, Photometry.	4.5	gm/dl	3.7 - 5.2

\*\*\*\*\* End of Report \*\*\*\*\*

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 Consultant Pathologist

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**DEPARTMENT OF LABORATORY MEDICINE**

Name **MR. KRISHNA KUMAR** Age **41 Yrs.** Sex **Male**  
 Date **06/11/2023** Home Coll. Dt/Time Ref. No. **20-21/5911**  
 Refd. by. Reporting Date/Time **06/11/2023** Srl. No. **1004**

**IMMUNOLOGY - SEROLOGY TEST REPORT**

Test Name	Observed Value Value	Unit	Bio. Reference Range
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**PROSTATE SPECIFIC ANTIGEN ( PSA )**  
**Technique : ELFA**

RESULT : **0.51** ng/ml

Normal range : **0.0 - 4.0** ng/ml

Serum prostate specific antigen (PSA) concentrations are elevated above 4.0 ng/ml in 28% of men with benign prostatic hyperplasia, 58% of men with organ confined prostate cancer and 80% of men with extensive prostate cancer, but in less than 8% of normal healthy men over 50 yrs of age. After radical prostatectomy, serum PSA levels are (< 0.2 ng/ml), 93% of patients with undetectable serum PSA concentrations have no clinical tumour recurrence.

Free PSA as a percent of Total PSA

Probability of carcinoma prostate when Total PSA is 4.1 - 10 ng / ml


- > 26	8 %
20 - 25	16 %
15 - 20	20 %
10 - 15	28 %
0 - 10	56 %

**Comments:-**

- 1 False negative / positive results are observed in patients receiving mouse monoclonal antibodies for diagnosis or therapy.
- 2 PSA total and free levels may appear consistently elevated / depressed due to the interference by heterophilic antibodies and nonspecific protein binding.
- 3 Results obtained with different assay kits cannot be used interchangeably.
- 4 All results should be correlated with clinical findings and results of other investigations.

\*\*\*\*\* End of Report \*\*\*\*\*

Technician / Technologist

  
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 Consultant Pathologist

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MSME UAM NO. : DL11E0021531

Patient Name	: Mr. Krishna Kumar	MR No	: FRAJ.0000238133
Age/Sex	: 40 Y/M	Visit No	: FRAJOPV113688
Pres Doctor	:	Bill Date	:06-11-2023 04:33
Ref.by	: SELF	Report Date	: 06-11-2023 17:36

**X-RAY CHEST PA VIEW**

- Both lungs fields do not show any active parenchymal lesion.
- Both costophrenic angles are normal.
- B/L hila appear normal in size & density.
- Both domes of diaphragm are normal.
- Cardiac silhouette appears normal.
- Visualised soft tissues and bony cage appear normal.

**IMPRESSION:- NORMAL STUDY.**

To be correlate clinically.



**DR. ANISHA GUPTA**  
**MBBS, DNB RADIOLOGIST**  
**RADIOLOGIST**



Name : MR KRISHNA KUMAR  
Ref

Age/sex: 41YRS/ M  
Date 06/11/2023

**TMT (Tread Mill / Stress Test)**

**Result :** The pre exercise ECG was normal with no significant ST-T segment changes. During peak exercise & recovery there were no significant ST-T change seen. Person could exercise for 07 min. 34 sec on the Bruce protocol & achieved a workload of 10.38 mets.

He/She attained a peak heart rate of 173 beats/minute which is 96 % of the predicted maximum heart rate. The exercise was terminated owing to THR. There was no classical angina and no arrhythmia. Clinically the blood pressure response was normal [150/80] and there was no S3 S4 gallop in the recovery period.

**IMPRESSION: -** NORMAL EXERCISE TOLERANCE.  
NORMAL HEMODYNAMIC RESPONSE.  
TMT IS NEGATIVE FOR PROVOCABLE  
ISCHAEMIA



Dr. SEEMA KALE MD  
SEN. PHYSICIAN

Mr. KRISHNA KUMAR  
Age/Sex : 41/M

Ref by :  
Indication1 :  
Indication2 :  
Indication3 :

ID : 91  
H/W : /  
Recorded : 6-11-2023 12:15

1014ZA,  
RAJOURI GARDEN

TREADMILL TEST SUMMARY REPORT  
Protocol: BRUCE

History:  
Medication1 :  
Medication2 :  
Medication3 :

PHASE	PHASE TIME	STAGE TIME	SPEED (Km./Hr.)	GRADE (%)	H.R. (BPM)	B.P. (mmHg)	RPP X100	II	ST LEVEL (mm) V2	V5
STAGE 1	1:29	1:29	2.70	10.00	126	130/80	163	0.4	1.0	0.3
STAGE 2	4:15	2:44	4.00	12.00	145	140/80	203	0.4	1.3	0.2
STAGE 3	7:09	2:44	5.40	14.00	165	150/80	247	-0.2	1.1	-0.8
STAGE 4	7:31	0:14	6.70	16.00	172	150/80	258	0.1	1.4	-0.9
PEAK EXER	7:34	0:17			173	150/80	259	0.0	1.5	-0.8

RESULTS

Exercise Duration : 7.34 Minutes  
Max Heart Rate : 173 bpm  
Max Blood Pressure : 150/80 mmHg  
Max Work Load : 10.38 METS  
Reason of Termination :

IMPRESSIONS

GOOD EFFORT TOLERANCE. NORMAL IONOTROPIC AND CHRONOTROPIC RESPONSE  
NO ANGINA/ARRHYTHMIA/SLV DYSFUNCTION. NO SIGNIFICANT ST CHANGES AT PEAK OF TEST  
TEST IS NEGATIVE FOR EXERCISE INDUCED REVERSABLE ISCHEMIA

THE APOLLO CLINIC  
Rajouri Garden  
Dr. Seema Kale  
MBBS, MD  
DMC Reg. No. 14927  
DR SEEMA KALE



Mr. KRISHNA KUMAR

I.D. : 91

AGE/SEX : 41/M

RECORDED : 6-11-2023 12:15

RATE : 111 BPM

B.P. : 120/80 mmHg

1014ZA;

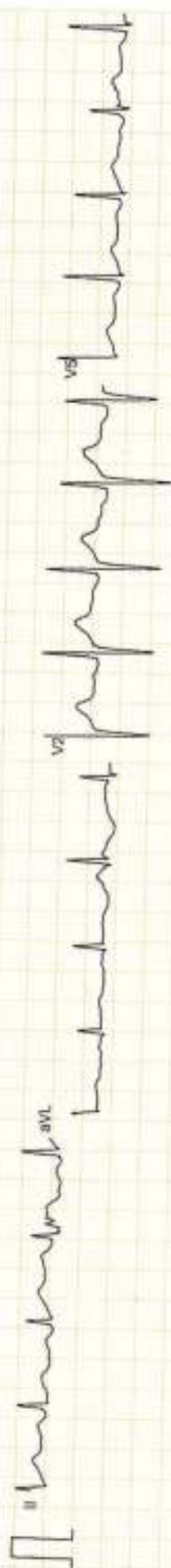
SUPINE

PRETEST



ST @ 10mm/mV  
80ms PostJ

RAW E.C.G.



aVR

aVL

aVF

V1

V2

V3

V4

V5

V6