

NAME:	Mr. Aniraja Sahoo	UHID:	18804
AGE:	45 yrs	DATE OF HEALTHCHECK:	8/4/2023
GENDER:	Male		

HEIGHT:	169 cm	MARITAL STATUS:	M
WEIGHT:	69.8 kg	NO OF CHILDREN:	2
BMI:	24.1		

C/O: Abdominal Pain - occ.

K/C/O: DM: Ins.

PRESENT MEDICATION: Tab - Metformin 1-0-1.

P/M/H: - No

P/S/H: - No

ALLERGY: - No

PHYSICAL ACTIVITY: Active/ Moderate/ Sedentary

H/A: SMOKING: - Yes

FAMILY HISTORY FATHER: - Ca

ALCOHOL: - Occ.

MOTHER: - DM.

TOBACCO/PAN:

O/E:

LYMPHADENOPATHY:

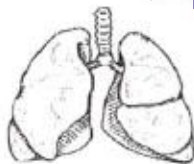
BP: 110/74 PULSE: - 88/min

PALLOR/ICTERUS/CYNOSIS/CLUBBING: - No

TEMPERATURE: SCARS:

OEDEMA: - No

S/E:  
RS:



P/A: - No

CVS: S-C2+

Extremities & Spine: - No

CNS: Corda, unbalanced

ENT:

Skin: - No

Vision:

	Without Glass		With Glass	
	Right Eye	Left Eye	Right Eye	Left Eye
FAR :				
NEAR :				
COLOUR VISION:				

Name: Mr. Anirban Sahoo	Age: 45y	Date of Health check-up: 8.4.2023
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### Findings and Recommendation:

#### Findings:-

HbA1c ↑  
Sugar ↑↑

#### Recommendation:-

- Diet / Exercise  
-

Signature:

Consultant -



**DR. ANIRBAN DASGUPTA**  
MBBS, D.N.B MEDICINE  
DIPLOMA CARDIOLOGY  
MMC-2005/02/0920

**ENT EVALUATION**

<b>Name:</b> Mr. A R SAHU	<b>MR NO:</b>
<b>Age/Gender:</b> 45 / M	<b>Date:</b> 8/4/22

**EAR :**

Tympanic Membrane:

Pre-auricular :-

Pina / EAC:

Mastoid Tuning Fork tests :-

Pure tone audiometry

no ENT complaint

**NOSE :-**

External Nose :-

Anterior Rhinoscopy:-

Post - Nasal space:-

MS

**THROAT :-**

70% scopy :

Tongue / palate / Teeth :-

MS

**NECK :-**

Nodes :-

Thyroid :-

Glands :-

Sleep -Related examination:-

Tongue - Base :-

Palate:-

Uvula:

MS

**INVESTIGATIONS :**

**IMPRESSION:-**



**DR. MANOJ JONDHALE**  
M.S. (ENT) , DNB,FCPS  
Reg. No. 2010/05/1791  
Consultation ENT & Head- Neck Surgeon

• ANDHERI • COLABA • NASHIK • VASHI

## OPHTHALMIC EVALUATION

UHID No.: \_\_\_\_\_ Date: 8/14/23  
 Name: Mr. Arniya Parjari Sahoo Age: 45 Gender:  Male /  Female

Without Correction :

Distance: Right Eye \_\_\_\_\_ Left Eye \_\_\_\_\_

Near : Right Eye \_\_\_\_\_ Left Eye \_\_\_\_\_

With Correction :

Distance: Right Eye 6/6cd Left Eye 6/6cd

Near : Right Eye NC Left Eye NC

	RIGHT					LEFT				
	SPH	CYL	AXIS	PRISM	VA	SPH	CYL	AXIS	PRISM	VA
Distance	<u>-2.75</u>	<u>-1.0</u>	<u>175°</u>			<u>-3.0</u>	<u>-1.0</u>	<u>180°</u>		
Near										

Presbyopia

Colour Vision : \_\_\_\_\_

Anterior Segment Examination : NO (BU)

Pupils : \_\_\_\_\_


Fundus : NO (BU)

Intraocular Pressure : 12 mm Hg (BU)

Diagnosis : pc glasses

Advice : lens

Re-Check on \_\_\_\_\_ (This Prescription needs verification every year)

Dr.   
 (Consultant Ophthalmologist)  
**DR. RUCHIRA SHARMA**  
 M. S. (OPHTH)  
 CONSULTING OPHTHALMOLOGIST  
 & MICRO SURGEON  
 REG. No.: 3262 / 09 / 02

■ Consultation ■ Diagnostics ■ Health Check-Ups ■ Dentistry

## DENTAL CHECKUP

<b>Name:</b> <u>Amiya Sahoo.</u>	<b>MR NO:</b>
<b>Age/Gender :</b> <u>45 / M</u>	<b>Date:</b> <u>8/4/2023</u>

Medical history:  Diabetes  Hypertension

EXAMINATION	UPPER RIGHT	UPPER LEFT	LOWER LEFT	LOWER RIGHT
Calculus & Stains	✓	✓	✓	✓
Mobility				
Caries ( Cavities )				
a) Class 1 (Occlusal)				
b) Class 2 (Proximal)				
c) Class 5 (Cervical)				
Faulty Restoration				
Faulty Crown				
Fractured Tooth				
Root Pieces				
Impacted Tooth				
Missing Tooth				
Existing Denture				

### TREATMENT ADVISED:

TREATMENT	UPPER RIGHT	UPPER LEFT	LOWER LEFT	LOWER RIGHT
Restoration / Filling				
Root Canal Therapy				
Crown				
Extraction				

Oral Prophylaxis:  Scaling & polishing

Orthodontic Advice for Braces:  Yes /  No

Prosthetic Advice to Replace Missing Teeth:  Denture  Bridge  Implant

Oral Habits:  Tobacco  Cigarette  Others since \_\_\_ years

Advice to quit any form of tobacco as it can cause cancer.

Other Findings: NA

- Scaling and polishing - 1800



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Name : Mr. Amiya Ranjan Sahoo Gender : Male Age : 45 Years  
UHID : FVAH 18804. Bill No : Lab No : V-915-23  
Ref. by : SELF Sample Col.Dt : 08/04/2023 09:30  
Barcode No : 1900 Reported On : 08/04/2023 18:25


**TEST RESULTS BIOLOGICAL REFERENCE INTERVAL**

**HAEMOGRAM(CBC,ESR,P/S)-WB (EDTA)**

Haemoglobin(Colorimetric method)	15.8	g/dl	13 - 18
RBC Count (Impedance)	5.18	Millions/cumm.	4 - 6.2
PCV/Haematocrit(Calculated)	48.9	%	35 - 55
MCV:(Calculated)	94.3	fl	78 - 98
MCH:(Calculated)	30.4	pg	26 - 34
MCHC:(Calculated)	32.2	gm/dl	30 - 36
RDW-CV:	15.6	%	11.5 - 16.5
Total Leucocyte count(Impedance)	7880	/cumm.	4000 - 10500
Neutrophils:	62	%	40 - 75
Lymphocytes:	32	%	20 - 40
Eosinophils:	03	%	0 - 6
Monocytes:	03	%	2 - 10
Basophils:	00	%	0 - 2
Platelets Count(Impedance method)	3.19	Lakhs/c.mm	1.5 - 4.5
MPV	8.3	fl	6.0 - 11.0
ESR(Westergren Method)	02	mm/1st hr	0 - 20
Peripheral Smear (Microscopic examination)			
RBCs:	Normochromic, Normocytic		
WBCs:	Normal		
Platelets	Adequate		
Note:	Test Run on 5 part cell counter. Manual diff performed.		

**Sushant Gaikwad**  
Entered By

**Ms Kaveri Gaonkar**  
Verified By

Page 8 of 9  
  
**Dr. Milind Patwardhan**  
M.D(Path)  
Chief Pathologist

End of Report  
Results are to be correlated clinically

Name : Mr. Amiya Ranjan Sahoo      Gender : Male      Age : 45 Years  
UHID : FVAH 18804.      Bill No :      Lab No : V-915-23  
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TEST

RESULTS

**Blood Grouping (ABO & Rh)-WB(EDTA) Serum**

ABO Group:

**:B:**

Rh Type:

**Positive**

Method :


Tube Agglutination (forward and reverse)

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**Anushka Chavan  
Entered By**

**Ms Kaveri Gaonkar  
Verified By**



**Dr. Milind Patwardhan  
M.D(Path)  
Chief Pathologist**

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TEST RESULTS BIOLOGICAL REFERENCE INTERVAL

**HbA1c(Glycosylated Haemoglobin )WB-EDTA**

(HbA1C) Glycosylated Haemoglobin : **6.9** %  
Normal <5.7 %  
Pre Diabetic 5.7 - 6.5 %  
Diabetic >6.5 %  
Target for Diabetes on therapy < 7.0 %  
Re-evaluation of therapy > 8.0 %

Mean Blood Glucose : 151.33 mg/dL

Corelation of A1C with average glucose

A1C (%)	Mean Blood Glucose (mg/dl)
6	126
7	154
8	183
9	212
10	240
11	269
12	298


Method High Performance Liquid Chromatography (HPLC).

**INTERPRETATION**

- \* The HbA1c levels corelate with the mean glucose concentration prevailing in the course of Pts recent history (apprx 6-8 weeks) & therefore provides much more reliable information for glycemia control than the blood glucose or urinary glucose.
- \* This Methodology is better then the routine chromatographic methods & also for the daibetic pts.having HEMOGLBINOPATHIES OR UREMIA as Hb varaints and uremia does not INTERFERE with the results in this methodology.
- \* It is recommended that HbA1c levels be performed at 4 - 8 weeks during therapy in uncontrolled DM pts.& every 3 - 4 months in well controlled daibetics .
- \* Mean blood glucose (MBG) in first 30 days ( 0-30 )before sampling for HbA1c contributes 50% whereas MBG in 90 - 120 days contribute to 10% in final HbA1c levels

Sushant Gaikwad  
Entered By

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Verified By

  
Dr. M. D. Patwardhan  
M.D(Path)  
Chief Pathologist

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UHID : FVAH 18804.      Bill No :      Lab No : V-915-23  
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TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
<b>PLASMA GLUCOSE</b>			
Fasting Plasma Glucose :	<b><u>152</u></b>	mg/dL	Normal < 100 mg/dL Impaired Fasting glucose : 101 to 125 mg/dL Diabetes Mellitus : $\geq$ 126 mg/dL (on more than one occasion) (American diabetes association guidelines 2016)
Post Prandial Plasma Glucose :	<b><u>146</u></b>	mg/dL	Normal < 140 mg/dL Impaired Post Prandial glucose : 140 to 199 mg/dL Diabetes Mellitus : $\geq$ 200 mg/dL (on more than one occasion) (American diabetes association guidelines 2016)

Method : Hexokinase

Vasanti Gondal  
Entered By

Ms Kaveri Gaonkar  
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TEST      RESULTS      UNITS      BIOLOGICAL REFERENCE INTERVAL

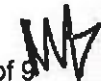
**LFT(Liver Function Tests)-Serum**

S.Total Protein (Biuret method)	7.05	g/dL	6.6 - 8.7
S.Albumin (BCG method)	4.78	g/dL	3.5 - 5.2
S.Globulin (Calculated)	2.27	g/dL	2 - 3.5
S.A/G Ratio:(Calculated)	<b>2.11</b>		0.9 - 2
S.Total Bilirubin (DPD):	0.37	mg/dL	0.1 - 1.2
S.Direct Bilirubin (DPD):	0.14	mg/dL	0.1 - 0.3
S.Indirect Bilirubin (Calculated)	0.23	mg/dL	0.1 - 1.0
S.AST (SGOT)(IFCC Kinetic with P5P):	15	U/L	5 - 40
S.ALT (SGPT) (IFCC Kinetic with P5P):	35	U/L	5 - 41
S.Alk Phosphatase(pNPP-AMP Kinetic):	72	U/L	40 - 129
S.GGT(IFCC Kinetic):	31	U/L	11 - 50

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M.D(Path)  
Chief Pathologist

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TEST RESULTS UNITS BIOLOGICAL REFERENCE INTERVAL

**Lipid Profile- Serum**

S. Cholesterol(Oxidase)	184	mg/dL	Desirable < 200 Borderline:>200-<240 Undesirable:>240
S. Triglyceride(GPO-POD)	167	mg/dL	Desirable < 150 Borderline:>150-<499 Undesirable:>500
S. VLDL:(Calculated)	33.4	mg/dL	Desirable <30
S. HDL-Cholesterol(Direct)	<b>34.6</b>	mg/dL	Desirable > 60 Borderline:>40-<59 Undesirable:<40
S. LDL:(calculated)	116	mg/dL	Desirable < 130 Borderline:>130-<159 Undesirable:>160
Ratio Cholesterol/HDL	<b>5.3</b>		3.5 - 5
Ratio of LDL/HDL	3.4		2.5 - 3.5

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TEST RESULTS UNITS BIOLOGICAL REFERENCE INTERVAL

RFT - Renal Profile-serum

S.Urea(Urease-GLDH)	17.8	mg/dL	10.0 - 45.0
S. Urea Nitrogen( Calculated)	8.3	mg/dL	5 - 20
S.Creatinine(Jaffe's Kinetic)	0.89	mg/dL	0.50 - 1.3
S.Uric Acid(Uricase-POD)	5.3	mg/dL	3.4 - 7.0
S.Total Protein(Biuret)	7.05	g/dL	6.6 - 8.7
S.Albumin(BCG)	4.78	g/dL	3.5 - 5.2
S.Globulin(Calculated)	2.27	g/dL	2 - 3.5
A/G Ratio(Calculated)	<b>2.11</b>		0.9 - 2
S.Sodium(Na) (ISE-Direct)	138	mmol/L	135 - 145
S.Potassium(K) (ISE-Direct)	5.0	mmol/L	3.5 - 5.3
S.Chloride(Cl) (ISE-Direct)	100	mmol/L	95 - 106
S.Calcium(NM-BAPTA)	9.74	mg/dL	8.6 - 10.0
S.Phosphorus(UV Phosphomolybdate)	3.15	mg/dL	2.5 - 4.5

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Chief Pathologist

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**TEST RESULTS UNITS BIOLOGICAL REFERENCE INTERVAL**

**Thyroid (T3,T4,TSH)- Serum**

Total T3 (Tri-iodo Thyronine) (ECLIA)	1.71	nmol/L	1.3 - 3.1 nmol/L
Total T4 (Thyroxine) (ECLIA)	97.27	nmol/L	66 - 181 nmol/L
TSH-Ultrasensitive (Thyroid-stimulating hormone) Method : ECLIA	2.39	□IU/ml	Euthyroid : 0.35 - 5.50 □IU/ml Hyperthyroid : < 0.35 □IU/ml Hypothyroid : > 5.50 □IU/ml

Grey zone values observed in physiological/therapeutic effect.

**Note:**

**T3 :**

1. Decreased values of T3 (T4 and TSH normal) have minimal Clinical significance and not recommended for diagnosis of hypothyroidism.
2. Total T3 and T4 values may also be altered in other conditions due to changes in serum proteins or binding sites ,Pregnancy, Drugs (Androgens,Estrogens,O C pills, Phenytoin) etc. In such cases Free T3 and free T4 give corrected Values.
3. Total T3 may decrease by < 25 percent in healthy older individuals

**T4 :**

1. Total T3 and T4 Values may also be altered in other condition due to changes in serum proteins or binding sites, Pregnancy Drugs (Androgens,Estrogens,O C pills, Phenytoin), Nerphrosis etc. In such cases Free T3 and Free T4 give Corrected values.

**TSH :**

1. TSH Values may be transiently altered because of non thyroidal illness like severe infections,liver disease, renal and heart failure. Severe burns, trauma and surgery etc.
2. Drugs that decrease TSH values e,g L dopa, Glucocorticoids.
3. Drugs that increase TSH values e.g. Iodine,Lithium, Amiodarone

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M.D(Path)

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End of Report  
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TEST	RESULTS	BIOLOGICAL REFERENCE INTERVAL
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**URINE REPORT**

**PHYSICAL EXAMINATION**

QUANTITY	50	mL	
COLOUR	Pale Yellow		
APPEARANCE	Clear		Clear
SEDIMENT	Absent		Absent

**CHEMICAL EXAMINATION(Strip Method)**


REACTION(PH)	6.0	4.6 - 8.0
SPECIFIC GRAVITY	1.015	1.005 - 1.030
URINE ALBUMIN	Absent	Absent
URINE SUGAR(Qualitative)	<b>Trace</b>	Absent
KETONES	Absent	Absent
BILE SALTS	Absent	Absent
BILE PIGMENTS	Absent	Absent
UROBILINOGEN	Normal(<1 mg/dl)	Normal
OCCULT BLOOD	Absent	Absent
Nitrites	Absent	Absent

**MICROSCOPIC EXAMINATION**

PUS CELLS	1 - 2/hpf	0 - 3/hpf
RED BLOOD CELLS	Nil /HPF	Absent
EPITHELIAL CELLS	1 - 2 / hpf	3 - 4/hpf
CASTS	Absent	Absent
CRYSTALS	Absent	Absent
BACTERIA	Absent	Absent

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Dr. Milind Patwardhan  
M.D(Path)  
Page 1 of 1 Chief Pathologist

End of Report  
Results are to be correlated clinically

Amiya, Satoo  
18804

45 Years

Male

08.04.2023 10:19:29

Apollo Clinic  
1st Flr, The Emerald, Sector-12,  
Vashi, Mumbai-400703.

81 bpm  
--/-- mmHg

QRS : 100 ms  
QT/QTcBaz : 346/401 ms  
PR : 148 ms  
P : 104 ms  
RR/PP : 738/740 ms  
P/QRS/T : 48/25/27 degrees

Normal sinus rhythm  
Incomplete right bundle branch block  
Borderline ECG

- I R B B B

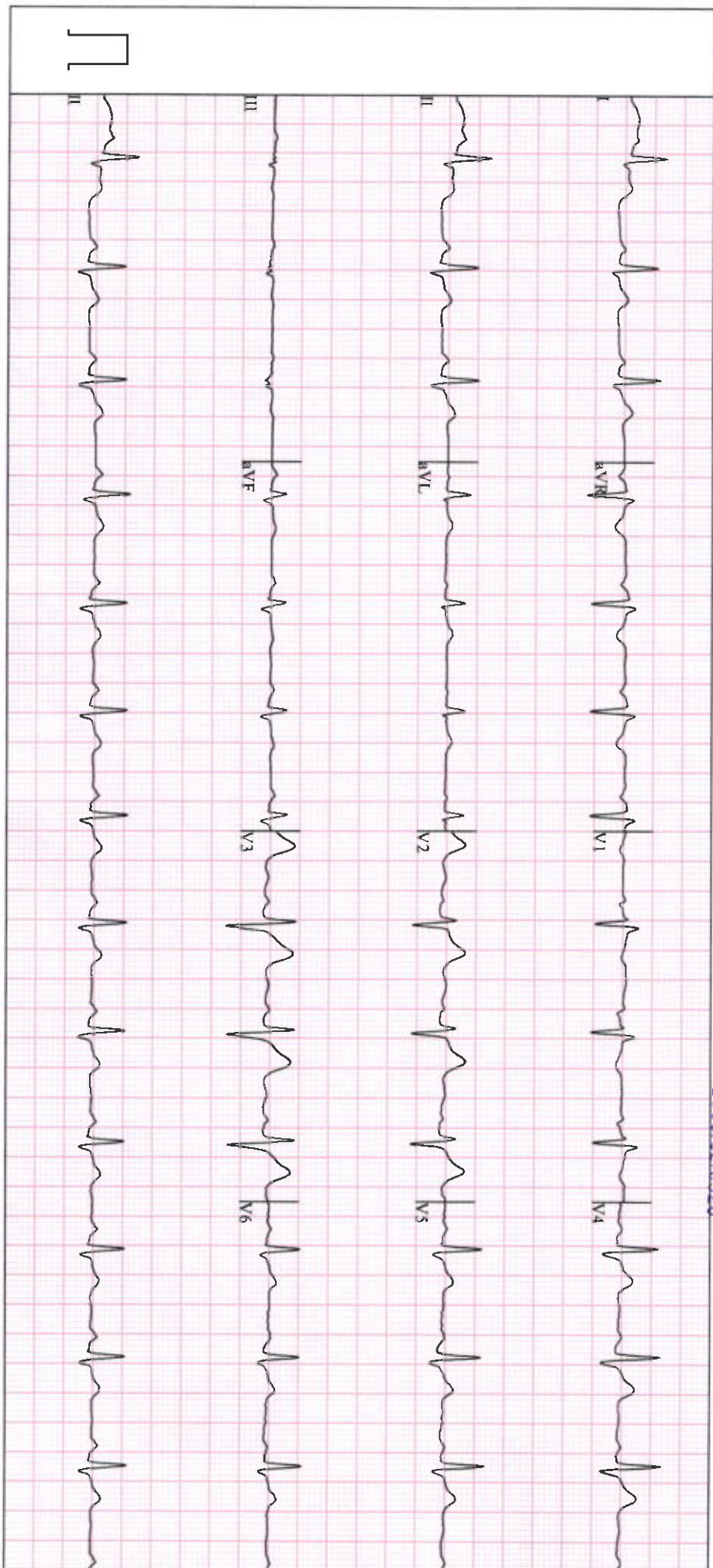
- Correlate clinically

DR. ANIRBAN DASGUPTA

M.S. (S), D.N.B. Medicine

Diploma Cardiology

M.M.C.-2005/02/09920



GE MAC2000

1.1

12SL™ v241

25 mm/s

10 mm/mV

ADS

0.56-20 Hz

50 Hz

Unconfirmed  
4x2.5x3\_25\_R1

1/1

PATIENT'S NAME	AMIYA SAHOO	AGE :- 45Y/M
UHID	18804	DATE :- 08-04-23

**2D Echo and Colour doppler report**

All cardiac chambers are normal in dimension

No obvious resting regional wall motion abnormalities (RWMA)

Interatrial and Interventricular septum – Appears Normal

Valves – Structurally normal

Good biventricular function.

IVC is normal.

Pericardium is normal.

Great vessels - Origin and visualized proximal part are normal.

No coarctation of aorta.

**Doppler study**

Normal flow across all the valves.

No pulmonary hypertension.

No diastolic dysfunction.



**Measurements**

Aorta annulus	19 mm
Left Atrium	33 mm
LVID(Systole)	23 mm
LVID(Diastole)	42 mm
IVS(Diastole)	10 mm
PW(Diastole)	10 mm
LV ejection fraction.	55-60%

**Conclusion**

- Good biventricular function
- No RWMA
- Valves – Structurally normal
- No diastolic dysfunction
- No PAH

*Dasgupta*

**Performed by: Dr. Anirban Dasgupta**  
**D.N.B. Internal Medicine, Diploma Cardiology (PGDCC-IGNOU).**

PATIENT'S NAME	AMIYA R SAHOO	AGE :- 45y/M
UHID NO	18804	10 Apr 2023

X-RAY CHEST PA VIEW

OBSERVATION:

Bilateral lung fields are clear.  
Both hila are normal.  
Bilateral cardiophrenic and costophrenic angles are normal.  
The trachea is central.  
Aorta appears normal.  
The mediastinal and cardiac silhouette are normal.  
Soft tissues of the chest wall are normal.  
Bony thorax is normal.

IMPRESSION:

➤ No significant abnormality seen.



**DR. DISHA MINOCHA**  
**DMRE (RADIOLOGIST)**

PATIENT'S NAME	AMIYA R SAHOO	AGE :- 45y/M
UHID NO	18804	8 Apr 2023

**USG WHOLE ABDOMEN**

**LIVER** is normal in size, shape and shows bright echotexture. No evidence of any focal lesion. The portal vein appears normal & shows normal hepatopetal flow. No evidence of intra-hepatic biliary duct dilatation.

**Gall Bladder** appears well distended with normal wall thickness. There is no calculus or pericholecystic collection or free fluid noted. CBD appears normal.

Visualised parts of head & body of pancreas appear normal. PD is not dilated.

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

Both kidneys are normal in size, shape and echotexture with normal parenchymal reflectivity and maintained cortico-medullary differentiation. No hydronephrosis or calculi or mass seen.

**RIGHT KIDNEY** measures 10.8 x 4.7 cm. **LEFT KIDNEY** measures 10.7 x 5.4 cm.

**Urinary Bladder** is adequately distended; no e/o any obvious wall thickening or mass or calculi seen.

**PROSTATE** is normal in size, shape & echotexture.  
It measures approximately 21 gms.

Visualised bowel loops appear normal. There is no free fluid seen.

**IMPRESSION –**

- **Grade I fatty liver.**
- **No other significant abnormality detected.**

THIS REPORT IS NOT TO BE USED FOR MEDICOLEGAL PURPOSE. THE CONTENTS OF THIS REPORT REQUIRE CLINICAL CO-RELATION BEFORE ANY APPLICATION.



**DR. CHHAYA S. SANGANI**  
**CONSULTANT SONOLOGIST**  
Reg: No. 073826

• ANDHERI • COLABA • NASHIK • VASHI