



CONCLUSION OF HEALTH CHECKUP

ECU Number	: 2780	MR Number	: 23204522	Patient Name	: ANKUR
Age	: 33	Sex	: Male	Height	: 185
Weight	: 96	Ideal Weight	: 79	BMI	: 28.05
Date	: 08/04/2023				

Dr. Manish Mittal

Internal Medicine

Note : General Physical Examination & routine Investigations included in the Health Checkup have certain limitations and may not be able to detect all the latent and asymptomatic diseases.

ECU Number : 2780 MR Number : 23204522 Patient Name: ANKUR
Age : 33 Sex : Male Height : 185
Weight : 96 Ideal Weight : 79 BMI : 28.05
Date : 08/04/2023

Past H/O : P/H/O RETINAL DETACHMENT - 2022.

Present H/O : NO MEDICAL COMPLAINTS AT PRESENT.

Family H/O : MOTHER : HYPERTENSION AND FATHER : DIABETES.

Habits : NO HABITS.

Gen.Exam. : G.C. GOOD

B.P : 138/96 mm Hg

Pulse : 78/MIN REG.

Others : SPO2 : 98 %

C.V.S : NAD

R.S. : NAD

Abdomen : NP

Spleen : NP

Skin : NAD

C.N.S : NAD

Advice :

ECU Number : 2780

MR Number : 23204522

Patient Name : ANKUR

Age : 33

Sex : Male

Height : 185

Weight : 96

Ideal Weight : 79

BMI : 28.05

Date : 08/04/2023

Ophthalmic Check Up :

Right

Left

Ext Exam

Vision Without Glasses

-

-

Vision With Glasses

WITH OWN GL. 6/9 N.5

6/6 N.5

Final Correction

NORMAL

NORMAL

Fundus

NORMAL

Colour Vision

NORMAL

Advice

NIL

Orthopaedic Check Up :

Ortho Consultation

Ortho Advice

ENT Check Up :

Ear

Nose

Throat

Hearing Test

ENT Advice

General Surgery Check Up :

General Surgery

Abdominal Lump

Hernia

External Genitals

PVR

Proctoscopy

Any Other

Surgical Advice



Patient Name : Mr. ANKUR
Gender / Age : Male / 33 Years 1 Months 23 Days
MR No / Bill No. : 23204522 / 241002275
Consultant : Dr. Manish Mittal
Location : OPD

Type : OPD
Request No. : 120546
Request Date : 08/04/2023 09:23 AM
Collection Date : 08/04/2023 10:21 AM
Approval Date : 08/04/2023 03:58 PM

CBC + ESR

Test	Result	Units	Biological Ref. Range
Haemoglobin.			
Haemoglobin	14.9	gm/dL	13 - 17
Red Blood Cell Count (T-RBC)	4.56	mill/cmm	4.5 - 5.5
Hematocrit (HCT)	43.9	%	40 - 50
Mean Corpuscular Volume (MCV)	96.3	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	32.7	pg	27 - 32
MCH Concentration (MCHC)	33.9	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	14.2	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	51.6	fl	39 - 46
Total Leucocyte Count (TLC)			
Total Leucocyte Count (TLC)	7.68	thou/cmm	4 - 10
Differential Leucocyte Count			
Polymorphs	65	%	40 - 80
Lymphocytes	30	%	20 - 40
Eosinophils	2	%	1 - 6
Monocytes	3	%	2 - 10
Basophils	0	%	0 - 2
Polymorphs (Abs. Value)	4.97	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	2.28	thou/cmm	1 - 3
Eosinophils (Abs. Value)	0.16	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.24	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.03	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.3	%	1 - 3 : Borderline > 3 : Significant
Platelet Count			
Platelet Count	139	thou/cmm	150 - 410
Smear evaluation	Adequate		
Remarks	few large platelets seen.		
ESR	5	mm/1 hr	0 - 10

Test results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any final opinion is made. Rectify / Repeat test may be required.

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name	: Mr. ANKUR	Type	: OPD
Gender / Age	: Male / 33 Years 1 Months 23 Days	Request No.	: 120546
MR No / Bill No.	: 23204522 / 241002275	Request Date	: 08/04/2023 09:23 AM
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CBC + ESR

Immature Granulocyte (IG) count is a useful early marker of infection or inflammation, even when other markers are normal. It is an early and rapid discrimination of bacterial from viral infections. It is also increased in patients on steroid therapy / chemotherapy or haematological malignancy. High IG is always pathological; except in pregnancy and neonates of < 7 days.
Method : HB by Non-Cyanide Hemoglobin analysis method. HCT by RBC pulse height detection method. RBC, TLC & PLC are by Particle Count by Electrical Impedance in Cell Counter. Optical Platelets by Fluorescent + Laser Technology. MCV, MCH, MCHC, RDW (CV & SD) are calculated parameter. DLC by Flowcytometry method using semi-conductor Laser+Smear verification. ESR on Ves metic 20, comparable to Westergrens method and in accordance to ICSH reference method.

--- End of Report ---

Dr. Sejal Odedra
M.D.Pathology

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / retest may be requested.

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mr. ANKUR
Gender / Age : Male / 33 Years 1 Months 23 Days
MR No / Bill No. : 23204522 / 241002275

Type : OPD
Request No. : 120546
Request Date : 08/04/2023 09:23 AM
Collection Date : 08/04/2023 10:21 AM
Approval Date : 08/04/2023 03:47 PM

Consultant : Dr. Manish Mittal
Location : OPD

Haematology

Test	Result	Units	Biological Ref. Range
Blood Group			
ABO system	B		
Rh system.	Positive		

By Gel Technology / Tube Agglutination Method
Note :

This blood group has been done with new sensitive Gel Technology using both Forward and Reverse Grouping Card with Autocontro
- This method check's group both on Red blood cells and in Serum for "ABO" group.

--- End of Report ---

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Location : OPD
Type : OPD
Request No. : 120546
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Approval Date : 08/04/2023 03:57 PM

Fasting Plasma Glucose

Test	Result	Units	Biological Ref. Range
Fasting Plasma Glucose			
Fasting Plasma Glucose	100	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	117	mg/dL	70 - 140

By Hexokinase method on RXL Dade Dimension

----- End of Report -----

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HbA1c (Glycosylated Hb)

Test	Result	Units	Biological Ref. Range
HbA1c (Glycosylated Hb)			
Glycosylated Hemoglobin (HbA1c)	5.8	%	
estimated Average Glucose (e AG) *	119.76	mg/dL	

(Method:

By Automated HPLC analyser on D-10 Biorad. NGSP Certified, US-FDA approved, Traceable to IFCC reference method.

* Calculated valued for past 60 days, derived from HbA1c %, based on formula recommended by the A1c - Derived Average Glucose study from ADA and EASD funded The ADAG trial.

Guidelines for Interpretation:

Indicated Glycemic control of previous 2-3 months

HbA1c%	e AG (mg/dl)	Glycemic control
> 8	> 183	Action suggested...High risk of developing long-term complications. Action suggested, depends on individual patient circumstances
7 - 8	154 - 183	Good
< 7	< 154	Goal...Some danger of hypoglycemic reaction in type I Diabetics. Some Glucose intolerant individuals and Sub-Clinical diabetics may demonstrate (elevated) HbA1c in this area.
6 - 7	126 - 154	Near Normal
< 6	< 126	Nondiabetic level)

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Complete Lipid Profile

Test	Result	Units	Biological Ref. Range
Complete Lipid Profile			
Appearance	Hazy		
Triglycerides	315	mg/dL	1 - 150
<i>(By Lipase / Glycerol dehydrogenase on RXL Dade Dimension)</i>			
< 150 Normal			
150-199 Borderline High			
200-499 High			
> 499 Very High)			
Total Cholesterol	195	mg/dL	1 - 200
<i>(By enzymatic colorimetric method on RXL Dade Dimension)</i>			
<200 mg/dL - Desirable			
200-239 mg/dL - Borderline High			
> 239 mg/dL - High)			
HDL Cholesterol	21	mg/dL	40 - 60
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension)</i>			
< 40 Low			
> 60 High)			
Non HDL Cholesterol (calculated)	174	mg/dL	1 - 130
<i>(Non- HDL Cholesterol)</i>			
< 130 Desirable			
139-159 Borderline High			
160-189 High			
> 191 Very High)			
LDL Cholesterol	115	mg/dL	1 - 100
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension)</i>			
< 100 Optimal			
100-129 Near / above optimal			
130-159 Borderline High			
160-189 High			
> 189 Very High)			
VLDL Cholesterol (calculated)	63	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	5.48		2.1 - 3.5
T. Ch./HDL Ch. Ratio	9.29		3.5 - 5
<i>(Recent NECP / ATP III Guidelines / Classification (mg/dl) :)</i>			

--- End of Report ---

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 Location : OPD Approval Date : 08/04/2023 03:47 PM

Liver Function Test (LFT)

Test	Result	Units	Biological Ref. Range
Bilirubin			
Bilirubin - Total	0.59	mg/dL	0 - 1
Bilirubin - Direct	0.12	mg/dL	0 - 0.3
Bilirubin - Indirect	0.47	mg/dL	0 - 0.7
<i>(By Diazotized sulfanilic acid on RXL Dade Dimension.)</i>			
Aspartate Aminotransferase (SGOT/AST)	66	U/L	15 - 40
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alanine Aminotransferase (SGPT/ALT)	156	U/L	16 - 63
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alkaline Phosphatase	130	U/L	53 - 128
<i>(BY PNPP AMP method on RXL Dade Dimension.)</i>			
Gamma Glutamyl Transferase (GGT)	37	U/L	15 - 85
<i>(By IFCC method on RXL Dade Dimension.)</i>			
Total Protein			
Total Proteins	7.94	gm/dL	6.4 - 8.2
Albumin	3.95	gm/dL	3.4 - 5
Globulin	3.99	gm/dL	3 - 3.2
A : G Ratio	0.99		1.1 - 1.6
<i>(By Biuret endpoint and Bromocresol purple method on RXL Dade Dimension.)</i>			

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Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea <i>(By Urease Kinetic method on RXL Dada Dimension)</i>	26	mg/dL	10 - 45
Creatinine <i>(By Modified Kinetic Jaffe Technique)</i>	0.77	mg/dL	0.9 - 1.3
Estimate Glomerular Filtration rate <i>(Ref. range : > 60 ml/min for adults between age group of 18 to 70 yrs. EGFR Calculated by IDMS Traceable MDRD Study equation. Reporting of eGFR can help facilitate early detection of CKD. By Modified Kinetic Jaffe Technique)</i>	More than 60		
Uric acid <i>(By Uricase / Catalase method on RXL Siemens)</i>	7.4	mg/dL	3.4 - 7.2

— End of Report —

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 Request No. : 120546
 Request Date : 08/04/2023 09:23 AM
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 Approval Date : 08/04/2023 03:22 PM

Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
Triiodothyronine (T3)	1.38	ng/ml	
<i>(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)</i>			
<i>Reference interval (ng/ml)</i>			
1 - 3 days	: 0.1 - 7.4		
1-11 months	: 0.1 - 2.45		
1-5 years	: 0.1 - 2.7		
6-10 years	: 0.9 - 2.4		
11-15 years	: 0.8 - 2.1		
16-20 years	: 0.8 - 2.1		
Adults (20 - 50 years)	: 0.7 - 2.0		
Adults (> 50 years)	: 0.4 - 1.8		
Pregnancy (in last 5 months)	: 1.2 - 2.5		
<i>(Reference : Tietz - Clinical guide to laboratory test, 4th edition)</i>			
Thyroxine (T4)	6.20	mcg/dL	
<i>(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)</i>			
<i>Reference interval (mcg/dL)</i>			
1 - 3 days	: 11.8 - 22.6		
1- 2 weeks	: 9.8 - 16.6		
1 - 4 months	: 7.2 - 14.4		
4 - 12 months	: 7.8 - 16.5		
1-5 years	: 7.3 - 15.0		
5 - 10 years	: 6.4 - 13.3		
10 - 20 years	: 5.6 - 11.7		
Adults / male	: 4.6 - 10.5		
Adults / female	: 5.5 - 11.0		
Adults (> 60 years)	: 5.0 - 10.7		
<i>(Reference : Tietz - Clinical guide to laboratory test, 4th edition)</i>			
Thyroid Stimulating Hormone (US-TSH)	2.78	microlU/ml	
<i>(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)</i>			
<i>Reference interval (microlU/ml)</i>			
Infants (1-4 days)	: 1.0 - 39		
2-20 weeks	: 1.7 - 9.1		
5 months - 20 years	: 0.7 - 6.4		
Adults (21 - 54 years)	: 0.4 - 4.2		
Adults (> 55 years)	: 0.5 - 8.9		
<i>Pregnancy :</i>			
1st trimester	: 0.3 - 4.5		
2nd trimester	: 0.5 - 4.6		
3rd trimester	: 0.8 - 5.2		
<i>(Reference : Tietz - Clinical guide to laboratory test, 4th edition)</i>			

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— End of Report —

Dr. Sejal Odedra
M.D.Pathology



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Gender / Age	: Male / 33 Years 1 Months 23 Days	Request No.	: 120546
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Consultant	: Dr. Manish Mittal	Collection Date	: 08/04/2023 10:21 AM
Location	: OPD	Approval Date	: 08/04/2023 04:02 PM

Urine routine analysis (Auto)

Test	Result	Units	Biological Ref. Range
Physical Examination			
Quantity	30	mL	
Colour	Pale Yellow		
Appearance	Turbid (Slight)		
Chemical Examination (By Reagent strip method)			
pH	6.0		
Specific Gravity	>=1.030		
Protein	2+ R/C	gm/dL	0 - 5
Glucose	Negative	mg/dL	0 - 5
Ketones	Negative		0 - 5
Bilirubin	Negative		Negative
Urobilinogen	Negative		Negative (upto 1)
Blood	1+		Negative
Leucocytes	Negative		Negative
Nitrite	Negative		Negative
Microscopic Examination (by Microscopy after Centrifugation at 2000 rpm for 10 min or on fully automated Sysmex urine sedimentation analyzer UF4000)			
Red Blood Cells	1 - 5	/hpf	0 - 2
Leucocytes	0 - 1	/hpf	0 - 5
Epithelial Cells	0 - 1	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil	/hpf	Nil
Mucus	Present	/hpf	Absent
Organism	Absent		

— End of Report —

Dr. Sejal Odedra
M.D.Pathology



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DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 23204522 Report Date : 08/04/2023
Request No. : 190060358 08/04/2023 9:23 AM
Patient Name : Mr. ANKUR
Gender / Age : Male / 33 Years 1 Months 23 Days

ADVANCED DIGITAL SOLUTIONS

- Computer Radiography
- Ultra Sensitive Colour Doppler
- Ultra High Resolution Sonography
- Multi-Detector CT Scan
- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

X-Ray Chest AP

Both lung fields are clear.
Both costophrenic sinuses appear clear.
Heart size is normal.
Hilar shadows show no obvious abnormality.
Aorta is normal.

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
 • NOT VALID FOR MEDICO-LEGAL PURPOSES
 • CLINICAL CORRELATION RECOMMENDED

Dr. Priyanka Patel, MD
Consultant Radiologist





DEPARTMENT OF DIAGNOSTIC RADIOLOGY

ADVANCED DIGITAL SOLUTIONS

- Computer Radiography
- Ultra Sensitive Colour Doppler
- Ultra High Resolution Sonography
- Multi-Detector CT Scan
- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

Patient No. : 23204522 Report Date : 08/04/2023
Request No. : 190060319 08/04/2023 9:23 AM
Patient Name : Mr. ANKUR
Gender / Age : Male / 33 Years 1 Months 23 Days

USG : Screening for Abdomen (excluding Pelvis) Or Upper Abdomen

Liver is normal in size and increased in echopattern. No mass lesion identified. The hepatic veins are clear and patent. PV patent. No dilated IHBR. Gall bladder is well distended and shows no obvious abnormality. Common bile duct measures 4 mm in diameter. Pancreas shows no obvious abnormality. Tail obscured. Spleen is normal in size and echopattern.

Both kidneys are normal in shape and position. Normal echogenicity and cortico medullary differentiation is noted. No hydronephrosis or mass lesion seen.

	RIGHT	LEFT
Renal length :	118 mm.	116 mm.
A.P. :	56 mm.	58 mm.

Prostate appears normal in size and volume is ~ 15cc.
Prostate measures 30mm x 26mm x 36mm.

Urinary bladder is well distended and appears normal.
No ascites.

COMMENT:

Fatty liver.

Kindly correlate clinically

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
 • NOT VALID FOR MEDICO-LEGAL PURPOSES
 • CLINICAL CORRELATION RECOMMENDED

Priyanka
Dr. Priyanka Patel, MD
Consultant Radiologist



Patient No. : 23204522 Report Date : 08/04/2023
Request No. : 190060365 08/04/2023 9.23 AM
Patient Name : Mr. ANKUR

Gender / Age : Male / 33 Years 1 Months 23 Days


Echo Color Doppler

MITRAL VALVE : NORMAL
AORTIC VALVE : TRILEAFLET, NORMAL
TRICUSPID VALVE : NORMAL, NO TR,
PULMONARY VALVE : NORMAL
LEFT ATRIUM : NORMAL
AORTA : NORMAL
LEFT VENTRICLE : NORMAL, NO REGIONAL WALL MOTION ABNORMALITY,
LVEF=60%
RIGHT ATRIUM : NORMAL
RIGHT VENTRICLE : NORMAL
I.V.S. : INTACT
I.A.S. : INTACT
PULMONARY ARTERY : NORMAL
PERICARDIUM : NORMAL

COLOUR/DOPPLER FLOW MAPPING : NO LV diastolic dysfunction
NO MR, TR, NO PAH

FINAL CONCLUSION:

1. ALL CARDIAC CHAMBERS ARE NORMAL IN DIMENSIONS
2. NO REGIONAL WALL MOTION ABNORMALITY AT REST
3. NORMAL LV SYSTOLIC FUNCTION, LVEF=60%
4. NORMAL VALVES
5. NO LV DIASTOLIC DYSFUNCTION
6. NO AR, MR, TR, NO PULMONARY HYPERTENSION , (IVC COLLAPSING)
7. NO PERICARDIAL EFFUSION, CLOT VEGETATION.

 Dr. KILLOL KANERIA MD, DM
Consultant Cardiologist

Name: Ankur -
Patient ID: 23204522

08.04.2023 09:59:21
Standard 12-Lead

Date of birth: 17-02-1990
Gender: Male
Height:
Weight:
Ethnicity: Undefined
Facemaker: Unknown

Visit ID:
Room:
Medication:
Order ID:
Ord. prov:
Ord. prot:

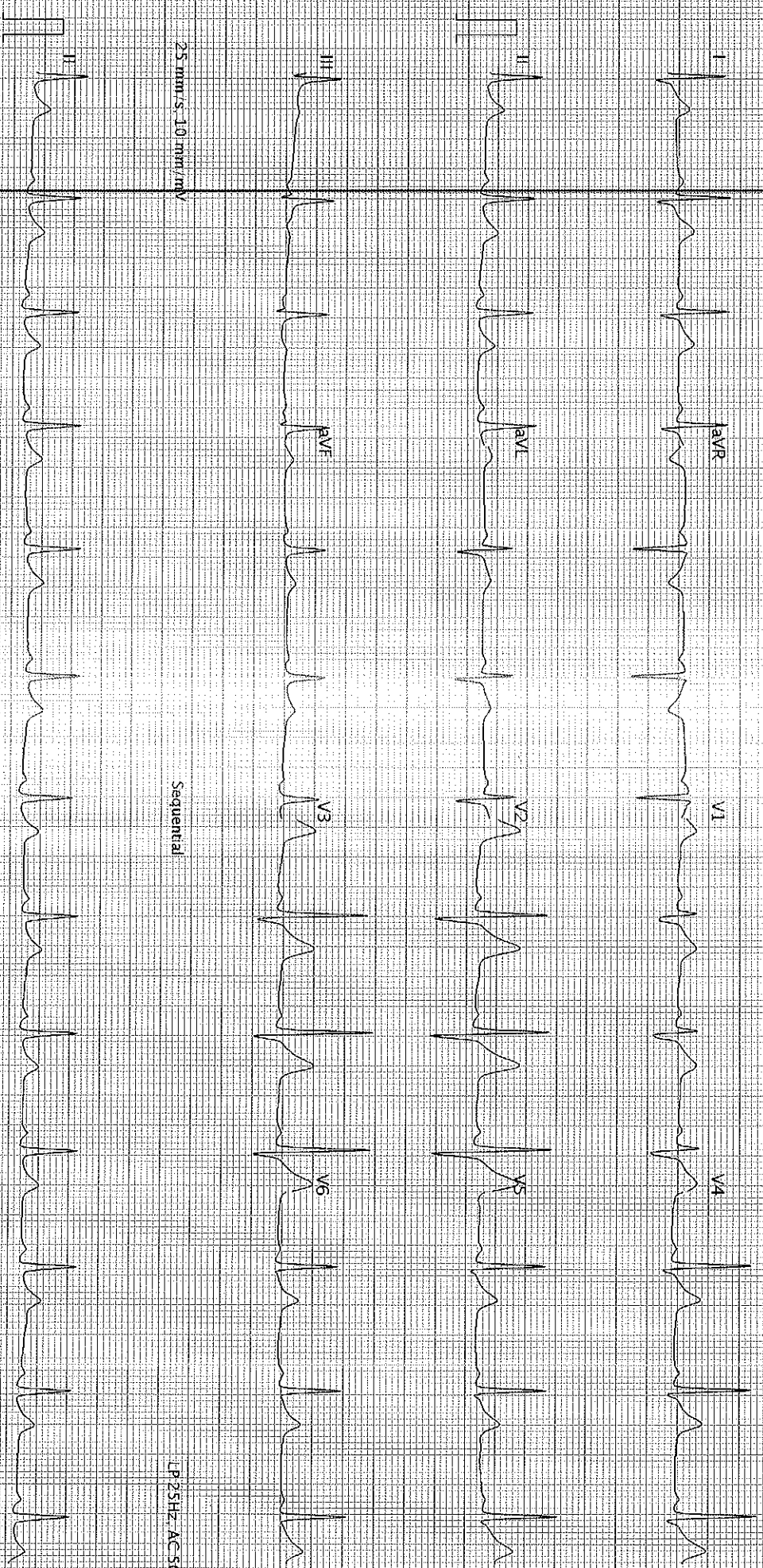
HR: 75 bpm
P axis: 30°
QRS axis: 46°
T axis: 28°

RR: 79.7 ms
P: 104 ms
PR: 134 ms
QRS: 93 ms
QT: 347 ms
QTcB: 389 ms

Sinus rhythm
Normal electrical axis
Nonspecific ST abnormality (elevation)
Otherwise normal ECG
Unconfirmed report

Otherwise normal

Normal



25 mm/s, 10 mm/mV

Sequential

LP 25Hz AC 50Hz

25 mm/s, 10 mm/mV

LP 25Hz AC 50Hz

AI 1926212-0 (0080911030)

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