

**CONCLUSION OF HEALTH CHECKUP**

HCP Number : 11986	MR Number : 23239200	Patient Name: RAM GULAM PASWAN
Age : 54 Years	Sex : Male	Height : 163 Cms
Weight : 58.9 Kgs	Ideal Weight : 61	BMI : 22.17
Date : 20/05/2024		

DM  
Dyslipidemic

VLL - Monoglyca

Total Anomaly M  
1-0-1  
TBP P.Dan

dy size modification

Template CT  
done

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.



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ESTD. 1964



HCP Number : 11986                      MR Number : 23239200                      Patient Name: RAM GULAM PASWAN  
Age : 54 Years                              Sex : Male                                      Height : 163 Cms  
Weight : 58.9 Kgs                              Ideal Weight : 61                              BMI : 22.17  
Date : 20/05/2024

Past H/O : NO P/H/O ANY MAJOR ILLNESS

Present H/O : NO MEDICAL COMPLAINS AT PRESENT

Family H/O : NO F/H/O ANY MAJOR ILLNESSES

Habits : NO HABITS  
Gen.Exam. : G.C.GOOD  
B.P : 130/80  
Pulse : 72  
Others : SPO2 98 %  
C.V.S : NAD  
R.S. : NAD  
Abdomen : NP  
Spleen : NP  
Skin : NAD  
C.N.S : NAD  
Advice :



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Sex : Male  
Ideal Weight : 61

Patient Name: RAM GULAM PASWAN  
Height : 163 Cms  
BMI : 22.17

**Ophthalmic Check Up :**

**Right**

**Left**

Ext Exam

NIL

Vision Without Glasses

+0.50+1.0 D SPH ! 168

0.50-1.0 ! 110 ADD+2.5

Vision With Glasses

NA

NA

Final Correction

NA

NA

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. RAM GULAM PASWAN  
Gender / Age : Male / 54 Years 8 Months 24 Days  
MR No / Bill No. : 23239200 / 251013320  
Consultant : Dr. Manish Mittal  
Location : OPD

Type : OPD  
Request No. : 229220  
Request Date : 20/05/2024 08:03 AM  
Collection Date : 20/05/2024 08:05 AM  
Approval Date : 20/05/2024 03:53 PM

## CBC + ESR

Test	Result	Units	Biological Ref. Range
<b>Haemoglobin.</b>			
Haemoglobin	14.6	gm/dL	13 - 17
Red Blood Cell Count (T-RBC)	<b>5.92</b>	mill/cmm	4.5 - 5.5
Hematocrit (HCT)	45.7	%	40 - 50
Mean Corpuscular Volume (MCV)	<b>77.2</b>	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	<b>24.7</b>	pg	27 - 32
MCH Concentration (MCHC)	31.9	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	<b>15.5</b>	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	42.3	fl	39 - 46
<b>Total Leucocyte Count (TLC)</b>			
Total Leucocyte Count (TLC)	7.73	thou/cmm	4 - 10
<b>Differential Leucocyte Count</b>			
Polymorphs	78	%	40 - 80
Lymphocytes	<b>14</b>	%	20 - 40
Eosinophils	2	%	1 - 6
Monocytes	6	%	2 - 10
Basophils	0	%	0 - 2
Polymorphs (Abs. Value)	6.05	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	1.02	thou/cmm	1 - 3
Eosinophils (Abs. Value)	0.20	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.42	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.04	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.4	%	1 - 3 : Borderline > 3 : Significant
<b>Platelet Count</b>			
Platelet Count	<b>148</b>	thou/cmm	150 - 410
Smear evaluation	Adequate		
Remarks	Few large platelets seen .		
ESR	6	mm/1 hr	0 - 12

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 final report is issued. For more information, please contact the laboratory.



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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 by Fluorescent flow cytometry using a semi-conductor laser and hydrodynamic focusing in dedicated channels. 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 ESL-30, comparable to Westergrens method and in accordance to ICSH reference method.

---- End of Report ----

Dr. Ameer Soni  
MD (Path)

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mr. RAM GULAM PASWAN  
Gender / Age : Male / 54 Years 8 Months 24 Days  
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**Haematology**

Test	Result	Units	Biological Ref. Range
<b>Blood Group</b>			
ABO system	A		
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 Autocontrol. This method checks group both on Red blood cells and in Serum for "ABO" group.

---- End of Report ----

Dr. Rakesh Vaidya  
MD (Path). DCP.

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DEPARTMENT OF LABORATORY MEDICINE

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**Fasting Plasma Glucose**

Test	Result	Units	Biological Ref. Range
<b>Fasting Plasma Glucose</b>			
Fasting Plasma Glucose	<b>309</b>	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	<b>346</b>	mg/dL	70 - 140

By Hexokinase method on EXL Dade Dimension

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

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**HbA1c (Glycosylated Hb)**

Test	Result	Units	Biological Ref. Range
<b>HbA1c (Glycosylated Hb)</b>			
Glycosylated Hemoglobin (HbA1c)	9.2	%	
estimated Average Glucose (e AG) *	217.34	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)

--- End of Report ---

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**Complete Lipid Profile**

Test	Result	Units	Biological Ref. Range
<b>Complete Lipid Profile</b>			
Appearance	Clear		
Triglycerides <i>(Done by Lipase /Glycerol kinase on Vitros 5600)</i>	<b>152</b>	mg/dL	1 - 150
<i>&lt; 150 Normal 150-199 Borderline High 200-499 High &gt; 499 Very High</i>			
Total Cholesterol <i>(Done by Colorimetric - Cholesterol Oxdase, esterase, peroxidase on Vitros 5600.)</i>	193	mg/dL	1 - 200
<i>&lt;200 mg/dL - Desirable 200-239 mg/dL - Borderline High &gt; 239 mg/dL - High</i>			
HDL Cholesterol <i>(Done by Colorimetric: non HDL precipitation method PTA/MgCl2 on Vitros 5600)</i>	<b>37</b>	mg/dL	40 - 60
<i>&lt; 40 Low &gt; 60 High</i>			
Non HDL Cholesterol (calculated)	<b>156</b>	mg/dL	1 - 130
<i>Non- HDL Cholesterol &lt; 130 Desirable 139-159 Borderline High 160-189 High &gt; 191 Very High</i>			
LDL Cholesterol <i>(Done by Enzymatic (Two Step CHE/CHO/POD ) on Vitros 5600)</i>	<b>139</b>	mg/dL	1 - 100
<i>&lt; 100 Optimal 100-129 Near / above optimal 130-159 Borderline High 160-189 High &gt; 189 Very High</i>			
VLDL Cholesterol (calculated)	<b>30.4</b>	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	<b>3.76</b>		2.1 - 3.5
T. Ch./HDL Ch. Ratio	<b>5.22</b>		3.5 - 5
<i>(Recent NECP / ATP III Guidelines / Classification (mg/dl) :)</i>			

--- End of Report ---

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**Liver Function Test (LFT)**

Test	Result	Units	Biological Ref. Range
<b>Bilirubin</b>			
Bilirubin - Total	1.00	mg/dL	0 - 1
Bilirubin - Direct	0.25	mg/dL	0 - 0.3
Bilirubin - Indirect	<b>0.75</b>	mg/dL	0 - 0.7
<i>(Done by Dual Wavelength - Reflectance Spectrophotometry on Vitros 5600)</i>			
Aspartate Aminotransferase (SGOT/AST)	17	U/L	15 - 40
<i>(Done by Multipoint Rate Colorimetric with P-5-P on Vitros 5600)</i>			
Alanine Aminotransferase (SGPT/ALT)	<b>15</b>	U/L	16 - 63
<i>(Done by Multipoint-Rate/Colorimetric with P-5-P (pyridoxa-5-phosphate) on Vitros 5600)</i>			
Alkaline Phosphatase	<b>124</b>	U/L	56 - 119
<i>(Done by Multipoint-Rate - p-nitrophenyl Phosphate, AMP buffer on Vitros 5600)</i>			
Gamma Glutamyl Transferase (GGT)	27	U/L	15 - 85
<i>(Done by Multipoint Rate - L-glutamyl-p-nitroanilide on Vitros 5600)</i>			
<b>Total Protein</b>			
Total Proteins	7.25	gm/dL	6.4 - 8.2
Albumin	4.40	gm/dL	3.4 - 5
Globulin	<b>2.85</b>	gm/dL	3 - 3.2
A : G Ratio	1.54		1.1 - 1.6
<i>(Done by Biuret endpoint and Bromocresol green method on vitros 5600.)</i>			

---- End of Report ----

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MD (Path). DCP.



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Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea <i>(Done by Endpoint/Colorimetric - Urease on Vitros 5600)</i>	31	mg/dL	10 - 45
BUN	14.49	mg/dL	5 - 21
Creatinine <i>(By Modified Kinetic Jaffe Technique)</i>	0.73	mg/dL	0.9 - 1.3
Estimate Glomerular Filtration rate <i>(Ref. range : &gt; 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>(Done by Colorimetric - Uricase, Peroxidase on Vitros 5600)</i>	6.1	mg/dL	3.4 - 7.2

--- End of Report ---

Dr. Rakesh Vaidya  
MD (Path), DCP.

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Patient Name : Mr. RAM GULAM PASWAN  
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## Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
Triiodothyronine (T3) <i>(Done by CLIA based method on automated immunoassay Vitros 5600.)</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 - 99 years) : 1.07 - 1.85 Pregnancy (in last 5 months) : 1.2 - 2.5 <i>(Reference : Tietz - Clinical guide to laboratory test, 4th edition )</i>	1.15	ng/ml	
Thyroxine (T4) <i>(Done by CLIA based method on automated immunoassay Vitros 5600.)</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 (20-99 years) : 5.91 - 12.98 <i>(Reference : Tietz - Clinical guide to laboratory test, 4th edition )</i>	9.18	mcg/dL	
Thyroid Stimulating Hormone (US-TSH) <i>(Done by CLIA based method on automated immunoassay Vitros 5600.)</i> <i>Reference interval (microIU/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 (20-99 years) : 0.4001 - 4.049 Pregnancy : 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>	2.31	microIU/ml	

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--- End of Report ---

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DEPARTMENT OF LABORATORY MEDICINE

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**PSA (Prostate Specific Antigen)**

Test	Result	Units	Biological Ref. Range
Total PSA	0.375	ng/ml	0 - 4

(Method : Done by CLIA based method on automated immunoassay Vitros 5600.)

Remark :

Age related reference range for interpretation :

< 40 yrs : 0.21 - 1.72

40 - 49 yrs : 0.27 - 2.19

50 - 59 yrs : 0.27 - 3.42

60 - 69 yrs : 0.27 - 6.16

≥ 69 yrs : 0.21 - 6.77

TPSA may be raised usually mildly in benign prostatic conditions like hyperplasia. Typically 30 % of BPH may show values between 4-10 and 7 % between 10-40.

In Prostatic Malignancy 43 % show values below 4

21 % between 4 to 10

20 % between 10 to 40 &

16 % above 40)

--- End of Report ---

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MD (Path), DCP.

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**Urine routine analysis (Auto)**

Test	Result	Units	Biological Ref. Range
<b>Physical Examination</b>			
Quantity	30	mL	
Colour	Pale Yellow		
Appearance	Clear		
<b>Chemical Examination (By Reagent strip method)</b>			
pH	5.0		4.6 - 8.0
Specific Gravity	<b>1.042</b>		1.005 - 1.030
Protein	Trace R/C		Negative
Glucose	3+ R/C		Negative
Ketones	Negative		Negative
Bilirubin	Negative		Negative
Urobilinogen	Negative		Negative (upto 1)
Blood	Negative		Negative
Leucocytes	Negative		Negative
Nitrite	Negative		Negative
<b>Microscopic Examination (by Microscopy after Centrifugation at 2000 rpm for 10 min or on fully automated Sysmex Urine sedimentation analyzer UF4000)</b>			
Red Blood Cells	0 - 1	/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	Absent	/hpf	Absent
Organism	Absent		

---- End of Report ----



Dr. Ameet Soni  
MD (Path)



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- Foetal Echocardiography
- Echocardiography
- 4D USG & Doppler

**DEPARTMENT OF DIAGNOSTIC RADIOLOGY**

Patient No. : 23239200      Report Date : 20/05/2024  
 Request No. : 190118658      20/05/2024 8.03 AM  
 Patient Name : Mr. RAM GULAM PASWAN  
 Gender / Age : Male / 54 Years 8 Months 24 Days

**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.

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

Dr. Priyanka Patel, MD.

Consultant Radiologist



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**DEPARTMENT OF DIAGNOSTIC RADIOLOGY**

Patient No. : 23239200      Report Date : 20/05/2024  
Request No. : 190118659      20/05/2024 8.03 AM  
Patient Name : Mr. RAM GULAM PASWAN  
Gender / Age : Male / 54 Years 8 Months 24 Days

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

Liver is normal in size and echopattern. **~55X47mm echogenic lesion is seen in right lobe of liver p/o hemangioma.** The hepatic veins are clear and patent. PV patent. No dilated IHBR.

**Gall bladder is well distended and shows 2mm polyp.** Common bile duct is not dilated.

Pancreas shows no obvious abnormality. Tail obscured.  
Spleen is normal 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.  
No ascites.

**COMMENT:**

- **Echogenic lesion in liver p/o hemangioma.--Adv: CT liver triphasic for confirmation.**
- **GB polyp.**

**Kindly correlate clinically**

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

**Dr. Priyanka Patel, MD.**

Consultant Radiologist





Eee



Patient No. : 23239200      Report Date : 20/05/2024  
Request No. : 190118664      20/05/2024 8.03 AM  
Patient Name : Mr. RAM GULAM PASWAN  
Gender / Age : Male / 54 Years 8 Months 24 Days

### Echo Doppler Screening

MITRAL VALVE : TRIVIAL MR , NO MS  
AORTIC VALVE : TRILEAFLET, NORMAL , NO AR , NO AS  
TRICUSPID VALVE : NORMAL, TRIVIAL TR, NO PAH  
PULMONARY VALVE : NORMAL  
LEFT ATRIUM : NORMAL  
AORTA : NORMAL  
LEFT VENTRICLE : CONCENTRIC LVH+, 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 : Grade I diastolic dysfunction  
TRIVIAL TR, MR, NO PAH

### FINAL CONCLUSION:

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

Dr.KILLOL KANERIA MD, DM  
Consultant Cardiologist



Name: Mr. ram g paswan  
Patient ID: Ecu/ 23239200

20:05:2024 07:59:32  
Standard 12-Lead

BHABHA AMIN GENERAL HOSPITAL

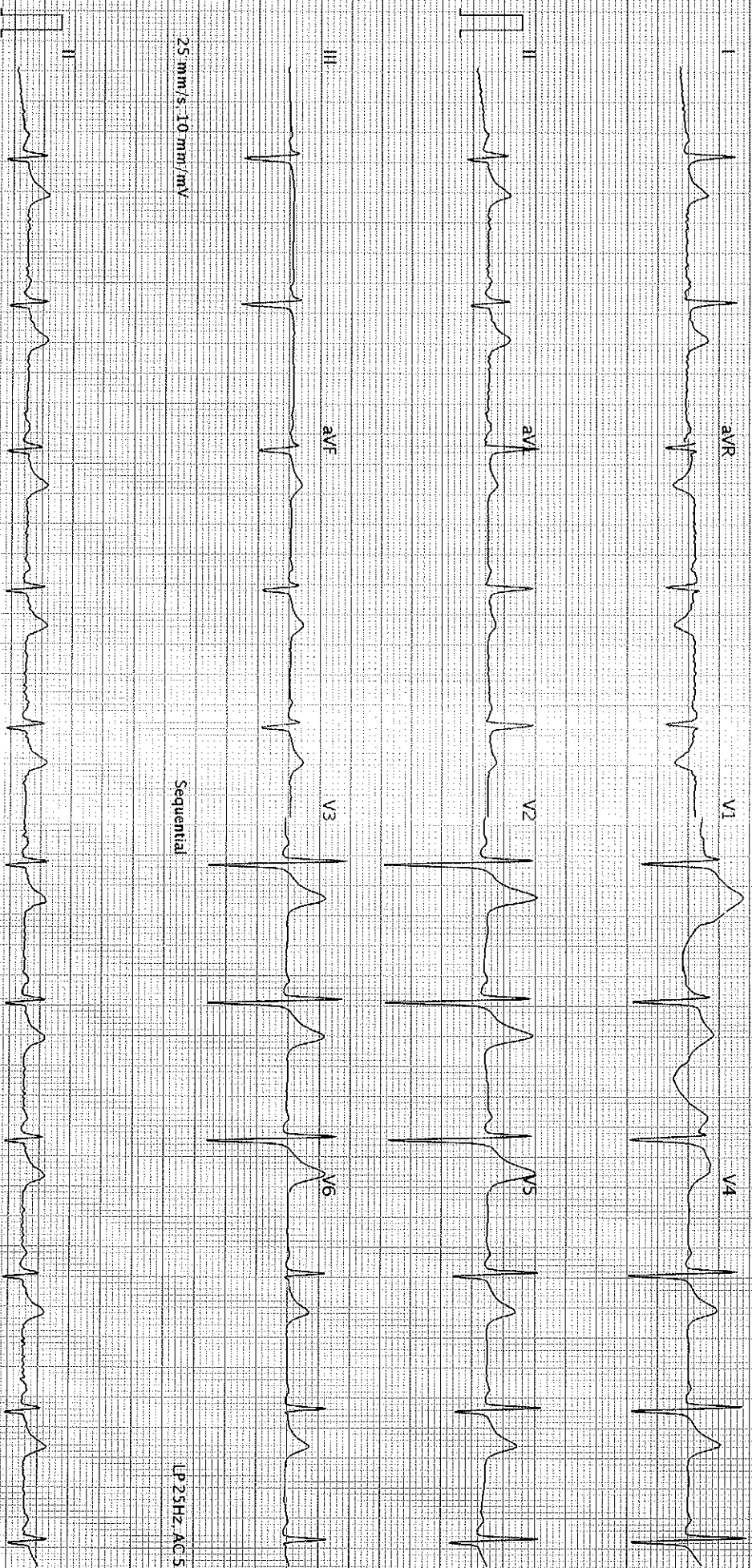
Age: 054Y  
Gender: Male  
Ref. phys.:  
Paramaker: Unknown

HR: 65 bpm  
RR: 92/4 ms  
P: 104 ms  
PR: 146 ms  
P axis: 30°  
QRS axis: -19°  
T axis: 30°  
QTc: 402 ms

Unconfirmed report

Remark:

*rw*



25 mm/s, 10 mm/mV  
AT 102 G2 1.2.0 (1080 011030)

BHABHA AMIN GENERAL HOSPITAL - Printed on 20:05:2024 07:59:47

SCHILLER

Part No.2:57068W (G 013)

S 80

LP25HZ, AC 50HZ

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