

ધારકે વડા સુરક્ષાકર્તાને વાપરવા માટે

સુરક્ષા કાર્ડ (સુરક્ષા)

બેંક ઓફ બરોડા, ઝોનલ કાર્યાલય, દક્ષિણ ગુજરાત ઝોન,

સુરજ પ્લાઝા III, સાયગુજ, બરોડા

બરોડા - 390 005 ગુજરાત, ભારત

ફોન 91 265 3966681 ફેક્સ 91 265 3966610

If Found, please return to

Chief Manager (Security)

Bank of Baroda, Zonal Office, South Gujarat Zone,

6th Floor, Suraj Plaza III, Sayajigunj,

Baroda - 390 005 Gujarat India

Phone : 91 265 3966681 Fax : 91 265 3966610

0466

MOLE ON LEFT HAND

જન્મ રજૂ / Blood Group રજૂ કરવા માટે / Identification Marks

PALM



બેંક ઓફ બરોડા
Bank of Baroda



નામ

પ્રશાંત કુમાર

Name

PRASHANT KUMAR

કર્મચારી વૃદ્ધ સં.

E.C. No.

79456

સુરક્ષા કાર્ડ બંધારણ
Issuing Authority

ધારકે વડા સુરક્ષાકર્તાને વાપરવા માટે
Signature of Holder



10mm/mV 25mm/sec \approx 25Hz

BPL CARDIART 6108T

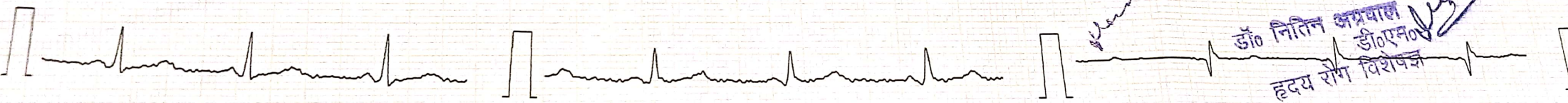
10mm/mV 25mm/sec \approx 25Hz

I

II

III

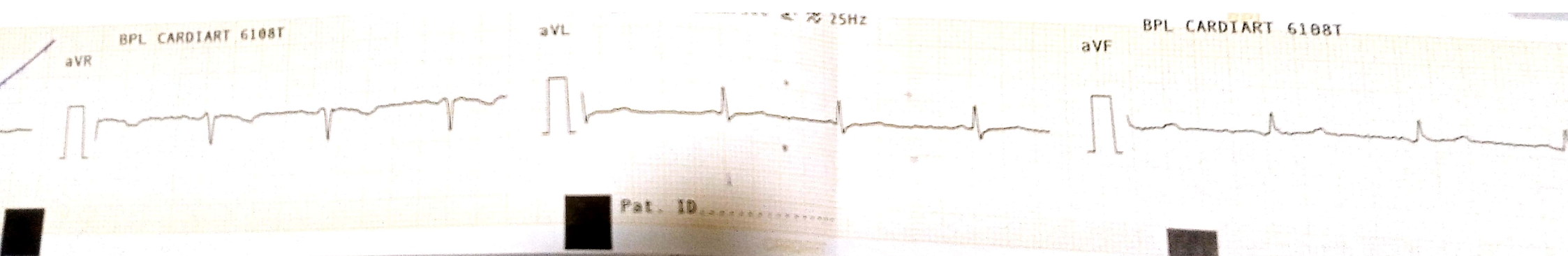
aVR



डॉ० नितिन अग्रवाल
डी०एम०
हृदय रोग विशेषज्ञ

Pat. ID... **Prabant Kumar** 25/03/2023

Pat. ID.....



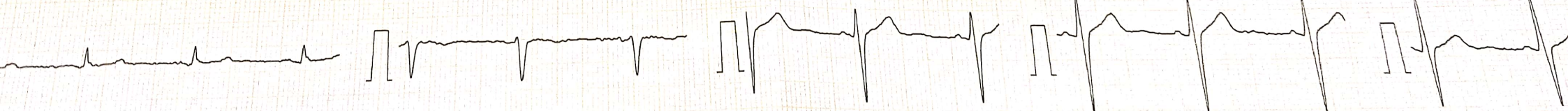
BPL CARDIART 6108T

V1 10mm/mV 25mm/sec 25Hz

V2 BPL CARDIART 6108T

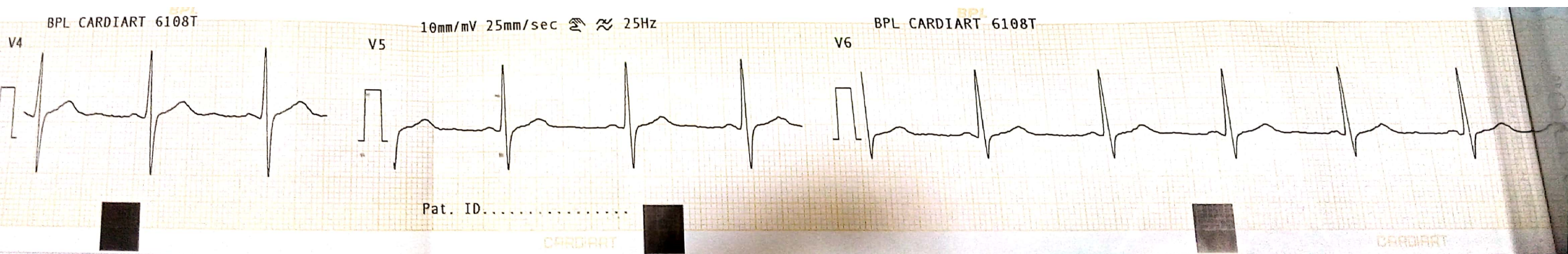
V3 10mm/mV 25mm/sec 25Hz

V4 BPL CARDIART 6108T



Pat. ID. [REDACTED]

Pat. ID. [REDACTED]





MOHAN EYE HOSPITAL
 E-233,247 EWS FLATS, EKTA NAGAR, NEAR SSD PLAZA, BAREILLY-243122
 Ph.: 0581-2311117, M. 8979544422, 7417095527, 8218386879 E-mail: mehbareilly@gmail.com

MOHAN EYE HOSPITAL

Dr. Aditya Tyagi M.B.B.S., DO

Senior Consultant

Directors :

Mr. Ankush Sharma

Mr. Mahesh Pal

Mr. Shivam Mishra

Pharmacist :

Drx. Ankush Sharma
(B.Pharma)

Optometrist

D.R. Opt. Mahesh Pal
B.Sc. Opto.

D.R. Opt. Shivam Mishra
B.Sc. Opto.

D.R. Opt. Anil Kumar Yadav
Opto.

D.R. Opt. Deeksha
Opto.

D.R. Opt. Neetu
B.Sc. Opto.

VA & RL
OK

Colour vision: OK

20P < 17.3mmHg.
17.3mmHg.

fundus: OK

Prashant Kumar 07/5/23

Adv

G. Nymox LP - 35mm eddy 18%

G. Refresh Tears - 35mm eddy 18%

Revision in 3 months

no /
28/2/2023

	RE				LE			
	SPH	CYL	AXIS	VISION	SPH	CYL	AXIS	VISION
Constant								
Distance								
Reading								

Valid : 5 Days





PARAS MRI & ULTRASOUND CENTRE

MOST ADVANCED 32 CHANNEL 3T 3D WHOLE BODY MRI

261, ASHAPURAM, OPP. DR. BASU EYE HOSPITAL, STADIUM ROAD, BAREILLY
• Helpline : 7300761761 • E-mail : parasmriby@gmail.com

REPORT

4D / 5D ULTRASOUND

COLOR DOPPLER

TVS/ TRUS

MUSCULOSKELETAL USG

Date : 25.3.2023
Name : PRASHANT KUMAR 37Y/M
Ref.BY : APPLE CARDIAC CARE

ULTRASOUND WHOLE ABDOMEN

LIVER - Liver is mildly enlarged in size and outline. It shows increased echogenicity. No obvious focal pathology is seen. The intra hepatic biliary radicals are not dilated. PV –normal.

GALL BLADDER -Gall Bladder is normal in size shows few small echogenic polyps seem along posterior wall in body regions largest ~ 3-4mm in size with normal wall thickness with no evidence of calculi. Fat planes between GB and liver are well maintained. The CBD appears normal.

PANCREAS - Pancreas is normal in size and echogenicity. Its outlines are distinct. No obvious focal lesion, calcification or ductile dilatation is seen.

SPLEEN - Spleen is normal in size and echogenicity. There is no evidence of collaterals

KIDNEYS - Both kidneys are normal in position, outline and echogenicity. No calculi are seen on both sides CMD is maintained. No evidence of hydronephrosis is seen on both sides.

URINARY BLADDER -Urinary Bladder is normal in size and outline. There is no evidence of any obvious intraluminal or paramedical pathology. **Wall is not thickened.**

PROSTATE- Normal in size and echotexture.

No evidence of ascites/pleural effusion/ adenopathy is seen. Bowel loops are not dilated. Bilateral iliac fossa appears normal

IMPRESSION:

- ❖ Mild hepatomegaly with grade II fatty changes.
- ❖ Few small GB polyps.

N

Adv- clinical correlation.


Dr. Puja Tripathi

M.B.B.S., M.D.
MBBS, MD (Radiodiagnosis, SGPGL)

NOT VALID FOR MEDICO LEGAL PURPOSE





Voluson™
E6

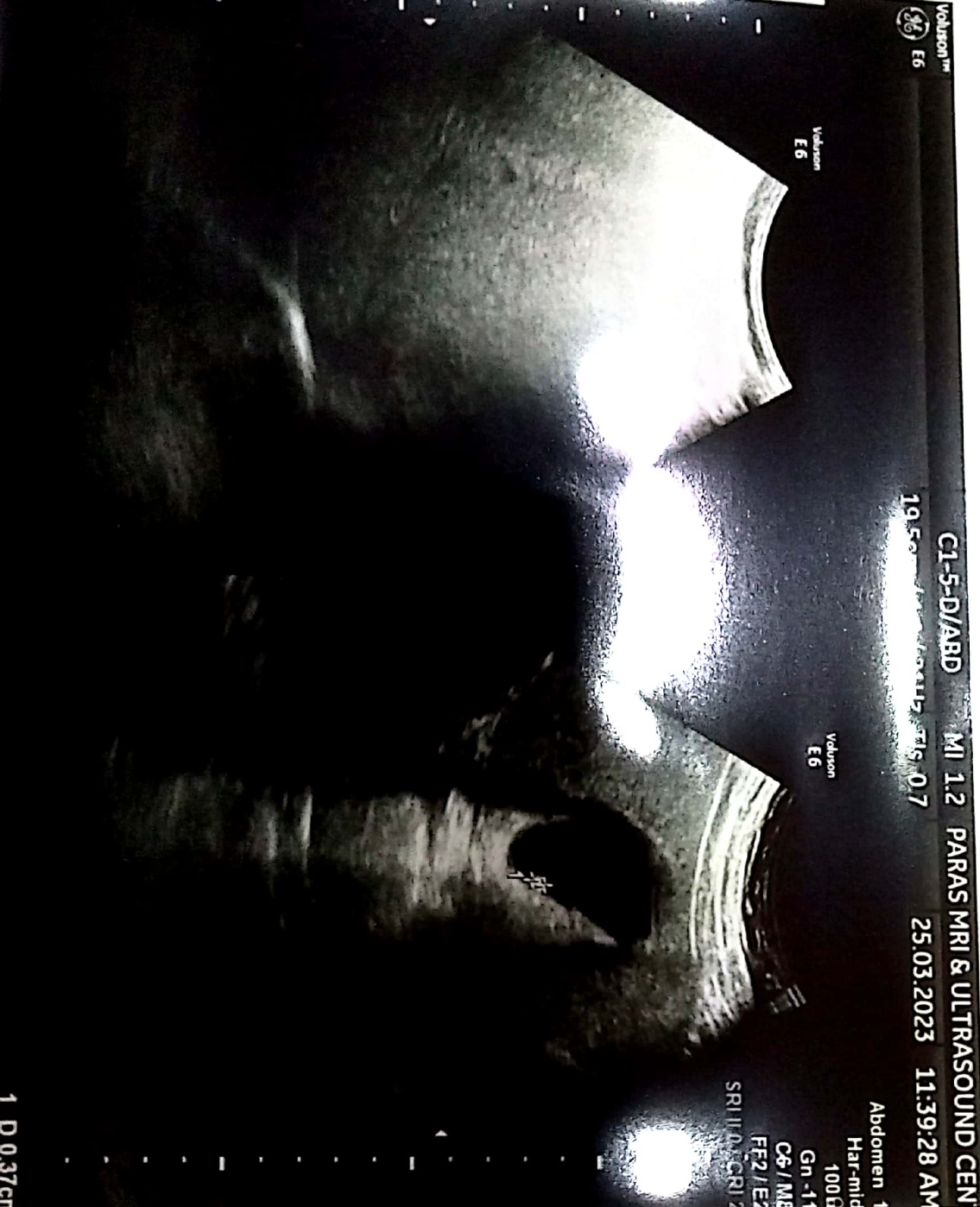
CI-5-D/ABD MI 1.3 PARAS MRI & ULTRASOUND CEN
14.2cm / 1.1 / 28Hz TIs 0.8

25.03.2023 11:40:37 AM

Voluson
E6

Voluson
E6

Abdomen 1
Har-mid
100G
Gn -15
C6 / M8
FF2 / E2
SRII 0 / CRI 2



Voluson™
E6

CI-5-D/ABD MI 1.2 PARAS MRI & ULTRASOUND CEN
19.5cm / 1.1 / 28Hz TIs 0.7

25.03.2023 11:39:28 AM

Voluson
E6

Voluson
E6

Abdomen 1
Har-mid
100G
Gn -11
C6 / M8
FF2 / E2
SRII 0 / CRI 2

1 D 0.37cm

APPLE CARDIAC CARE

A-3 Ekta Nagar (Opp. Care Hospital), Stadium Road, Bareilly

Report



2135 / MR. PRASHANT KUMAR / 37 Yrs / M / 168 Cms / 91 Kg Date: 25-Mar-2023
 Definite Angina /Hypercholestromia/Diabetic/Positive Estrogen/Non-Athlete

Stage	Time	Duration	Speed(mph)	Elevation	METs	Rate	% THR	BP	RPP	PVC	Comments
Supine	00:04	0:04	00.0	00.0	01.0	124					
Standing	00:26	0:22	00.0	00.0	01.0	093	68 %	125/75	155	00	
HV	00:47	0:21	00.0	00.0	01.0	101	55 %	125/75	116	00	
ExStart	01:08	0:21	00.0	00.0	01.0	109	55 %	125/75	126	00	
BRUCE Stage 1	04:08	3:00	01.7	10.0	04.7	146	60 %	125/75	136	00	
BRUCE Stage 2	07:08	3:00	02.5	12.0	07.1	173	80 %	130/80	189	00	
PeakEx	07:09	0:01	02.5	12.0	07.1	173	95 %	135/85	233	00	
Recovery	08:09	1:00	00.0	00.0	01.2	147	95 %	135/85	233	00	
Recovery	09:09	2:00	00.0	00.0	01.0	125	80 %	135/85	198	00	
Recovery	09:25	2:16	00.0	00.0	01.0	127	68 %	130/80	162	00	
Recovery							69 %	130/80	165	00	

Findings :

Exercise Time : 06:01
 Max HR Attained : 173 bpm 95% of Target 183
 Max BP Attained : (Sys) 135/85
 Max WorkLoad Attained : 7.1 Fair response to induced stress
 Max ST Dep Lead & Avg ST Value : avL & -1.2 mm in Recovery
 Duke Treadmill Score : 05.0
 Test Objective : GHDFEWASFSAFD ASSAS
 Test End Reasons : Test Complete, Heart Rate Acheived

mt neg for Ischem

डॉ० नितिन अग्रवाल
 हृदय रोग विशेषज्ञ

[Signature]

Doctor : DR. NITIN AGARWAL

(GEM214191125)(A)Allengers



Reg.NO. : 51
NAME : **Mr. PRASHANT KUMAR**
REFERRED BY : Dr.Nitin Agarwal (D M)
SAMPLE : BLOOD URINE

DATE : **25/03/2023**
AGE : 37 Yrs.
SEX : MALE

<u>TEST NAME</u>	<u>RESULTS</u>	<u>UNITS</u>	<u>BIOLOGICAL REF. RANGE</u>
HAEMATATOLOGY			
COMPLETE BLOOD COUNT (CBC)			
HAEMOGLOBIN	13.2	gm/dl	12.0-18.0
TOTAL LEUCOCYTE COUNT	9,600	/cumm	4,000-11,000
DIFFERENTIAL LEUCOCYTE COUNT(DLC)			
Neutrophils	70	%	40-75
Lymphocytes	27	%	20-45
Eosinophils	03	%	01-08
Monocytes	00	%	01-06
Basophils	00	%	00-02
TOTAL R.B.C. COUNT	4.75	million/cumm	3.5-6.5
P.C.V./ Haematocrit value	39.7	%	35-54
M C V	83.6	fL	76-96
M C H	27.8	pg	27.00-32.00
M C H C	33.2	g/dl	30.50-34.50
PLATELET COUNT	3.35	lacs/mm ³	1.50 - 4.50
E.S.R (WINTROBE METHOD)			
-in First hour	11	mm	00 - 15
BIOCHEMISTRY			
Gamma Glutamyl Transferase (GGT)	24	U/L	7-32
HAEMATATOLOGY			

Report is not valid for medicolegal purpose

Venture of Apple Cardiac Care

A-3, Ekta Nagar, Stadium Road,
(Opp Care Hospital),
Bareilly - 243 122 (U.P.) India
Tel. : 07599031977, 0945888448



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NAME : Mr. PRASHANT KUMAR
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SAMPLE : BLOOD URINE

DATE : 25/03/2023
AGE : 37 Yrs.
SEX : MALE

<u>TEST NAME</u>	<u>RESULTS</u>	<u>UNITS</u>	<u>BIOLOGICAL REF. RANGE</u>
BLOOD GROUP			
Blood Group	A+		
Rh	POSITIVE		
GLYCOSYLATED HAEMOGLOBIN	5.3		
ESTIMATED AVERAGE GLUCOSE	63	mg/dl	70 - 140

EXPECTED RESULTS :

Non diabetic patients : 4.0% to 6.0%
Good Control : 6.0% to 7.0%
Fair Control : 7.0% to -8%
Poor Control : Above 8%

*ADA: American Diabetes Association

The glycosylated hemoglobin assay has been validated as a reliable indicator of mean blood glucose levels for a period of 8-12 week period prior to HBA1C determination. ADA recommends the testing twice a year in patients with stable blood glucose, and quarterly, if treatment changes, or if blood glucose levels are unstable.

METHOD : ADVANCED IMMUNO ASSAY.

	BIOCHEMISTRY	
BLOOD UREA NITROGEN	19	mg/dL. 5 - 25
SERUM CREATININE	0.9	mg/dL. 0.5-1.4

URIC ACID **8.6** mg/dl 3.5-8.0

CLINICAL SIGNIFICANCE:

Analysis of synovial fluid plays a major role in the diagnosis of joint disease.
SERUM SODIUM (Na) **138** m Eq/litre. 135 - 155

Report is not valid for medicolegal purpose



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<u>TEST NAME</u>	<u>RESULTS</u>	<u>UNITS</u>	<u>BIOLOGICAL REF. RANGE</u>
SERUM POTASSIUM (K)	4.0	m Eq/litre.	3.5 - 5.5
SERUM CALCIUM	9.0	mg/dl	8.5 - 10.5
LIVER PROFILE			
SERUM BILIRUBIN	0.8	mg/dL	0.3-1.2
TOTAL	0.5	mg/dL	0.2-0.6
DIRECT	0.3	mg/dL	0.1-0.4
INDIRECT			
SERUM PROTEINS			
Total Proteins	6.8	Gm/dL	6.4 - 8.3
Albumin	4.0	Gm/dL	3.5 - 5.5
Globulin	2.8	Gm/dL	2.3 - 3.5
A : G Ratio	1.43		0.0-2.0
SGOT	40	IU/L	0-40
SGPT	36	IU/L	0-40
SERUM ALK.PHOSPHATASE	74	IU/L	00-115

NORMAL RANGE : BILIRUBIN TOTAL

Premature infants. 0 to 1 day: <8 mg/dL Premature infants. 1 to 2 days: <12 mg/dL Adults: 0.3-1 mg/dL.
 Premature infants. 3 to 5 days: <16 mg/dL Neonates, 0 to 1 day: 1.4-8.7 mg/dL
 Neonates, 1 to 2 days: 3.4-11.5 mg/dL Neonates, 3 to 5 days: 1.5-12 mg/dL Children 6 days to 18 years: 0.3-1.2 mg/dL

COMMENTS-

Total and direct bilirubin determination in serum is used for the diagnosis, differentiation and follow up of jaundice. Elevation of SGPT is found in liver and kidney diseases such as infectious or toxic hepatitis, IM and cirrhosis. Organs rich in SGOT are heart, liver and skeletal muscles. When any of these organs are damaged, the serum SGOT level rises in proportion to the severity of damage. Elevation of Alkaline Phosphatase in serum or plasma is found in hepatitis, biliary obstructions, hyperparathyroidism, steatorrhea and bone diseases.

Report is not valid for medicolegal purpose



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DATE : **25/03/2023**
AGE : 37 Yrs.
SEX : MALE

TEST NAME	RESULTS	UNITS	BIOLOGICAL REF. RANGE
LIPID PROFILE			
SERUM CHOLESTEROL	204	mg/dL.	130 - 200
SERUM TRIGLYCERIDE	222	mg/dL.	30 - 160
HDL CHOLESTEROL	49	mg/dL.	30-70
VLDL CHOLESTEROL	44.4	mg/dL.	15 - 40
LDL CHOLESTEROL	110.60	mg/dL.	00-130
CHOL/HDL CHOLESTEROL RATIO	4.16	mg/dl	
LDL/HDL CHOLESTEROL RATIO	2.26	mg/dl	

INTERPRETATION

TRIGLYCERIDE level > 250mg/dL is associated with an approximately 2-fold greater risk of coronary vascular disease. Elevation of triglycerides can be seen with obesity, medication, fast less than 12 hrs., alcohol intake, diabetes mellitus, and pancreatitis. CHOLESTEROL, its fractions and triglycerides are the important plasma lipids in defining cardiovascular risk factors and in the management of cardiovascular disease. Highest acceptable and optimum values of cholesterol vary with age. Values above 220 mgm/dl are associated with increased risk of CHD regardless of HDL & LDL values. HDL-CHOLESTEROL level <35 mg/dL is associated with an increased risk of coronary vascular disease even in the face of desirable levels of cholesterol and LDL - cholesterol. LDL - CHOLESTEROL & TOTAL CHOLESTEROL levels can be strikingly altered by thyroid, renal and liver disease as well as hereditary factors. Based on total cholesterol, LDL- cholesterol, and total cholesterol/HDL - cholesterol ratio, patients may be divided into the three risk categories.

URINE EXAMINATION

Report is not valid for medicolegal purpose

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APPLE
PATHOLOGY
TRUSTED RESULT

Reg.NO. : 51
NAME : **Mr. PRASHANT KUMAR**
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<u>TEST NAME</u>	<u>RESULTS</u>	<u>UNITS</u>	<u>BIOLOGICAL REF. RANGE</u>
URINE EXAMINATION REPORT			
PHYSICAL EXAMINATION			
pH	6.0		
TRANSPARENCY			
Volume	25	ml	
Colour	Light Yellow		
Appearance	Clear		Nil
Sediments	Nil		
Specific Gravity	1.020		1.015-1.025
Reaction	Acidic		
BIOCHEMICAL EXAMINATION			
UROBILINOGEN	Nil		NIL
BILIRUBIN	Nil		NEGATIVE
URINE KETONE	Nil		NEGATIVE
Sugar	Nil		Nil
Albumin	Nil		Nil
Phosphates	Absent		Nil
MICROSCOPIC EXAMINATION			
Red Blood Cells	Nil	/H.P.F.	
Pus Cells	1-2	/H.P.F.	
Epithelial Cells	0-1	/H.P.F.	
Crystals	NIL		NIL
Casts	NIL	/H.P.F.	
Bacteria	NIL		
Other	NIL		

BIOCHEMISTRY

Report is not valid for medicolegal purpose



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DATE : **25/03/2023**
AGE : 37 Yrs.
SEX : MALE

<u>TEST NAME</u>	<u>RESULTS</u>	<u>UNITS</u>	<u>BIOLOGICAL REF. RANGE</u>
BLOOD SUGAR P.P.	157	mg/dl	80-160

--{End of Report}--

Agarwal

Dr. Shweta Agarwal
MD(Pathology), Apple Pathology
Bareilly (UP)



Venture of Apple Cardiac Care

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DATE : **25/03/2023**
AGE : 37 Yrs.
SEX : MALE

<u>TEST NAME</u>	<u>RESULTS</u>	<u>UNITS</u>	<u>BIOLOGICAL REF. RANGE</u>
BLOOD SUGAR F.	BIOCHEMISTRY 109	mg/dl	60-100

--{End of Report}--

Shweta Agarwal
Dr. Shweta Agarwal
MD(Pathology), Apple Pathology
Bareilly (UP)





MOHAN EYE HOSPITAL

E-233,247 EWS FLATS, EKTA NAGAR, NEAR SSD PLAZA, BAREILLY-243122
Ph.: 0581-2311117, M. 8979544422, 7417095527, 8218386879 E-mail: mehbareilly@gmail.com

Dr. Aditya Tyagi M.B.B.S., DO
Senior Consultant

Directors :

Mr. Ankush Sharma

Mr. Mahesh Pal

Mr. Shivam Mishra

Pharmacist :

Drx. Ankush Sharma
(B.Pharma)

Optometrist

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D.R. Opt. Shivam Mishra
B.Sc. Opto.

D.R. Opt. Anil Kumar Yadav
Opto.

D.R. Opt. Deeksha
Opto.

D.R. Opt. Neetu
B.Sc. Opto.

Vh < 6/6⁻²
6/6

Acc < 0.50 @ 70°
Plane

Colour vision note

IOP < 17.3 mmHg.
17.3 mmHg.

fundus note

Sumit Verma 0746/23

Adv

G. Vcool Plus - 3 times a day 8/11

Review in 3 months.

or
505.

25/3/2023

	RE				LE			
	SPH	CYL	AXIS	VISION	SPH	CYL	AXIS	VISION
Constant	-	0.50	70	6/6	0	0	0	6/6
Distance	/							
Reading	/							

Valid : 5 Days



mohaneyehospital01





॥ ॐ गणेशाय नमः ॥

GANESH DIAGNOSTIC

DR. LOKESH GOYAL

MBBS (KGMU), MD (RADIOLOGY)

CONSULTANT INTERVENTIONAL RADIOLOGIST
FORMER SR. REGISTRAR - APOLLO HOSPITAL, NEW DELHI
LIFE MEMBER OF IRIA

Timings : 9:00 am to 9:00 pm, Sunday 9.00 am to 3.00 pm ☎ 8392957683, 6395228718

MR. PRASHANT KUMAR
DR. NITIN AGARWAL, DM

25-03-2023

REPORT

EXAMINATION PERFORMED: X-RAY CHEST

B/L lung fields are clear

Both of the CP angles are clear.

Both hila show a normal pattern .

Cardiac and mediastinal borders appear normal.

Visualized bony thorax and soft tissue of the chest wall appear normal.

IMPRESSION ---NO SIGNIFICANT ABNORMALITY IS SEEN

Not for medico-legal purpose

DR LOKESH GOYAL
MD
RADIODIAGNOSIS

डिजिटल एक्स-रे, मल्टी स्लाइस
सी. टी. स्कैन सुविधा उपलब्ध है।



NOT VALID FOR
MEDICO LEGAL PURPOSE



Scanned with OKEN Scanner

