



**BHAILAL AMIN
GENERAL HOSPITAL**

ESTD. 1964



CONCLUSION OF HEALTH CHECKUP

ECU Number	: 10381	MR Number	: 23232717	Patient Name	: RAKESH KUMAR
Age	: 40	Sex	: Male	Height	: 164
Weight	: 57.3	Ideal Weight	: 62	BMI	: 21.3
Date	: 22/03/2024				

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.





BHAILAL AMIN GENERAL HOSPITAL



ECU Number : 10381 MR Number : 23232717 Patient Name : RAKESH KUMAR
Age : 40 Sex : Male Height : 164
Weight : 57.3 Ideal Weight : 62 BMI : 21.3
Date : 22/03/2024

Past H/O : K/C/O DM - NOT TAKING MEDICATIONS.

Present H/O : NO MEDICAL COMPLAIN AT PRESENT

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

Habits : NO
Gen.Exam. : G.C.GOOD
B.P : 116/80
Pulse : 78
Others : SPO2 98 %
C.V.S : NAD
R.S. : NAD
Abdomen : NP
Spleen : NP
Skin : NAD
C.N.S : NAD
Advice :



ECU Number : 10381
Age : 40
Weight : 57.3
Date : 22/03/2024

MR Number : 23232717
Sex : Male
Ideal Weight : 62

Patient Name : RAKESH KUMAR
Height : 164
BMI : 21.3

Ophthalmic Check Up :

Right

Left

Ext Exam

NORMAL

Vision Without Glasses

6/6

6/6

Vision With Glasses

N.6 + 0.75 D SPH

N.6 + 0.75 D SPH

Final Correction

-

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. RAKESH KUMAR
 Gender / Age : Male / 40 Years 6 Months 17 Days
 MR No / Bill No. : 23232717 / 242093923
 Consultant : Dr. Manish Mittal
 Location : OPD
 Type : OPD
 Request No. : 210878
 Request Date : 22/03/2024 09:53 AM
 Collection Date : 22/03/2024 10:04 AM
 Approval Date : 22/03/2024 02:18 PM

CBC + ESR

Test	Result	Units	Biological Ref. Range
Haemoglobin.			
Haemoglobin	15.7	gm/dL	13 - 17
Red Blood Cell Count (T-RBC)	5.36	mill/cmm	4.5 - 5.5
Hematocrit (HCT)	49.5	%	40 - 50
Mean Corpuscular Volume (MCV)	92.4	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	29.3	pg	27 - 32
MCH Concentration (MCHC)	31.7	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	13.9	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	47.3	fl	39 - 46
Total Leucocyte Count (TLC)			
Total Leucocyte Count (TLC)	9.72	thou/cmm	4 - 10
Differential Leucocyte Count			
Polymorphs	71	%	40 - 80
Lymphocytes	19	%	20 - 40
Eosinophils	5	%	1 - 6
Monocytes	5	%	2 - 10
Basophils	0	%	0 - 2
Polymorphs (Abs. Value)	6.87	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	1.79	thou/cmm	1 - 3
Eosinophils (Abs. Value)	0.53	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.49	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
Platelet Count			
Platelet Count	157	thou/cmm	150 - 410
Remarks	This is counter generated CBC Report, smear review is not done		
ESR	9	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 firm diagnosis is made. Request / report may require re-confirmation.

365 Days./ 24 Hours Laboratory Services

Home Collection Facility Available
(Mon To Sat 8:00 am to 5:00 pm)



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DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mr. RAKESH KUMAR
Gender / Age : Male / 40 Years 6 Months 17 Days
MR No / Bill No. : 23232717 / 242093923
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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. Ameet Soni
MD (Path)

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DEPARTMENT OF LABORATORY MEDICINE

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Approval Date : 22/03/2024 03:46 PM

Haematology

Test	Result	Units	Biological Ref. Range
Blood Group			
ABO system	O		
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 ---

Dr. Ameer Soni
MD (Path)

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Fasting Plasma Glucose

Test	Result	Units	Biological Ref. Range
Fasting Plasma Glucose	203	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	324	mg/dL	70 - 140
Remarks	on tab		

By Hexokinase method on EXL Dade Dimension

---- End of Report ----

Dr. Ameer Soni
MD (Path)

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Patient Name : Mr. RAKESH KUMAR
 Gender / Age : Male / 40 Years 6 Months 17 Days
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HbA1c (Glycosylated Hb)

Test	Result	Units	Biological Ref. Range
HbA1c (Glycosylated Hb)			
Glycosylated Hemoglobin (HbA1c)	9.1	%	
estimated Average Glucose (e AG) *	214.47	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 ----

Dr. Ameer Soni
MD (Path)

Patient Name : **MR. RAKESH KUMAR**

Gender / Age : Male / 40 Years 6 Months 17 Days

MR No / Bill No. : 23232717 / 242093923

Consultant : Dr. Manish Mittal

Location : **OPD**Type : **OPD**Request No. : **210878**

Request Date : 22/03/2024 09:53 AM

Collection Date : 22/03/2024 10:04 AM

Approval Date : 22/03/2024 01:12 PM

Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea <i>(Done by Endpoint/Colorimetric - Urease on Vitros 5600)</i>	28	mg/dL	10 - 45
BUN	13.08	mg/dL	5 - 21
Creatinine <i>(By Modified Kinetic Jaffe Technique)</i>	0.67	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>(Done by Colorimetric - Uricase, Peroxidase on Vitros 5600)</i>	4.8	mg/dL	3.4 - 7.2

--- End of Report ---

Dr. Ameer Soni
MD (Path)



Patient Name : Mr. RAKESH KUMAR
 Gender / Age : Male / 40 Years 6 Months 17 Days
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 Consultant : Dr. Manish Mittal
 Location : OPD

Type : OPD
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Complete Lipid Profile

Test	Result	Units	Biological Ref. Range
Complete Lipid Profile			
Appearance	Clear		
Triglycerides (Done by Lipase /Glycerol kinase on Vitros 5600 < 150 Normal 150-199 Borderline High 200-499 High > 499 Very High)	134	mg/dL	1 - 150
Total Cholesterol (Done by Colorimetric - Cholesterol Oxidase, esterase, peroxidase on Vitros 5600. <200 mg/dL - Desirable 200-239 mg/dL - Borderline High > 239 mg/dL - High)	202	mg/dL	1 - 200
HDL Cholesterol (Done by Colorimetric: non HDL precipitation method PTA/MgCl ₂ on Vitros 5600 < 40 Low > 60 High)	48	mg/dL	40 - 60
Non HDL Cholesterol (calculated) (Non- HDL Cholesterol < 130 Desirable 139-159 Borderline High 160-189 High > 191 Very High)	154	mg/dL	1 - 130
LDL Cholesterol (Done by Enzymatic (Two Step CHE/CHO/POD) on Vitros 5600 < 100 Optimal 100-129 Near / above optimal 130-159 Borderline High 160-189 High > 189 Very High)	144	mg/dL	1 - 100
VLDL Cholesterol (calculated)	26.8	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	3		2.1 - 3.5
T. Ch./HDL Ch. Ratio (Recent NECP / ATP III Guidelines / Classification (mg/dl) :)	4.21		3.5 - 5

---- End of Report ----

Dr. Ameer Soni
MD (Path)



Patient Name : Mr. RAKESH KUMAR
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Liver Function Test (LFT)

Test	Result	Units	Biological Ref. Range
Bilirubin			
Bilirubin - Total	0.72	mg/dL	0 - 1
Bilirubin - Direct	0.14	mg/dL	0 - 0.3
Bilirubin - Indirect	0.58	mg/dL	0 - 0.7
<i>(Done by Dual Wavelength - Reflectance Spectrophotometry on Vitros 5600)</i>			
Aspartate Aminotransferase (SGOT/AST)	26	U/L	15 - 40
<i>(Done by Multipoint Rate Colorimetric with P-5-P on Vitros 5600)</i>			
Alanine Aminotransferase (SGPT/ALT)	38	U/L	16 - 63
<i>(Done by Multipoint-Rate/Colorimetric with P-5-P (pyridoxa-5-phosphate) on Vitros 5600)</i>			
Alkaline Phosphatase	97	U/L	53 - 128
<i>(Done by Multipoint-Rate - p-nitrophenyl Phosphate, AMP buffer on Vitros 5600)</i>			
Gamma Glutamyl Transferase (GGT)	55	U/L	15 - 85
<i>(Done by Multipoint Rate - L-γ-glutamyl-p-nitroanilide on Vitros 5600)</i>			
Total Protein			
Total Proteins	6.89	gm/dL	6.4 - 8.2
Albumin	4.19	gm/dL	3.4 - 5
Globulin	2.7	gm/dL	3 - 3.2
A : G Ratio	1.55		1.1 - 1.6
<i>(Done by Biuret endpoint and Bromocresol green method on vitros 5600.)</i>			

---- End of Report ----

Dr. Ameer Soni
MD (Path)



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DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mr. RAKESH KUMAR
Gender / Age : Male / 40 Years 6 Months 17 Days
MR No / Bill No. : 23232717 / 242093923
Consultant : Dr. Manish Mittal
Location : OPD

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Request No. : 210878
Request Date : 22/03/2024 09:53 AM
Collection Date : 22/03/2024 10:04 AM
Approval Date : 22/03/2024 03:26 PM

Thyroid Hormone Study

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 / repeat test may be requested.

Test	Result	Units	Biological Ref. Range
Triiodothyronine (T3) (Done by CLIA based method on automated immunoassay Vitros 5600. Reference interval (ng/ml) 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 (Reference : Tietz - Clinical guide to laboratory test, 4th edition))	1.34	ng/ml	
Thyroxine (T4) (Done by CLIA based method on automated immunoassay Vitros 5600. Reference interval (mcg/dL) 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 (Reference : Tietz - Clinical guide to laboratory test, 4th edition))	8.39	mcg/dL	
Thyroid Stimulating Hormone (US-TSH) (Done by CLIA based method on automated immunoassay Vitros 5600. Reference interval (microIU/ml) 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 (Reference : Tietz - Clinical guide to laboratory test, 4th edition))	1.26	microIU/ml	

--- End of Report ---

Dr. Ameer Soni
MD (Path)



Patient Name : Mr. RAKESH KUMAR
 Gender / Age : Male / 40 Years 6 Months 17 Days
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 Consultant : Dr. Manish Mittal
 Location : OPD

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PSA (Prostate Specific Antigen)

Test	Result	Units	Biological Ref. Range
Total PSA	0.571	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 ----

Dr. Ameer Soni
MD (Path)



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Urine routine analysis (Auto)

Test	Result	Units	Biological Ref. Range
Physical Examination			
Quantity	30	mL	
Colour	Pale Yellow		
Appearance	Clear		
Chemical Examination (By Reagent strip method)			
pH	5.5		4.6 - 8.0
Specific Gravity	1.031		1.005 - 1.030
Protein	Negative		Negative
Glucose	1+ (R/C)		Negative
Ketones	Negative		Negative
Bilirubin	Negative		Negative
Urobilinogen	Negative		Negative (upto 1)
Blood	Negative		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	1 - 5	/hpf	0 - 5
Epithelial Cells	1 - 5	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil	/hpf	Nil
Mucus	Absent	/hpf	Absent
Organism	Absent		

Reference : Wallach`s Interpretation to laboratory test, 10th edition

---- End of Report ----

Dr. Ameer Soni
MD (Path)



- Computerized Radiography
- Ultra Sensitive Colour Doppler
- Ultra High Resolution Sonography
- Multi-Detector CT Scan
- Magnetic Resonance Imaging (MRI)
- Mammography
- Interventional Radiology
- Digital Subtraction Angiography (DSA)
- Foetal Echocardiography
- Echocardiography
- 4D USG & Doppler

DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 23232717 Report Date : 22/03/2024
 Request No. : 190109401 22/03/2024 9.53 AM
 Patient Name : Mr. RAKESH KUMAR
 Gender / Age : Male / 40 Years 6 Months 17 Days

X-Ray Chest AP

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

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

Dr. Sharad Rungta, M.D DNB

Consultant Radiologist





Computerized Radiography
Ultra Sensitive Colour Doppler
Ultra High Resolution Sonography
Multi-Detector CT Scan
Magnetic Resonance Imaging (MRI)
Mammography
Interventional Radiology
Digital Subtraction Angiography (DSA)
Foetal Echocardiography
Echocardiography
4D USG & Doppler

DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 23232717 Report Date : 22/03/2024
 Request No. : 190109419 22/03/2024 9.53 AM
 Patient Name : **Mr. RAKESH KUMAR**
 Gender / Age : Male / 40 Years 6 Months 17 Days

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

Liver is normal in size and echopattern. No mass lesion identified. The hepatic veins are clear and patent.No dilated IHBR. Portal vein is patent.

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.

No ascites.

COMMENT:

• No obvious abnormality seen.

Kindly correlate clinically.

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

Dr. Priyanka Patel, MD.
 Consultant Radiologist



See



Patient No. : 23232717 Report Date : 22/03/2024
Request No. : 190109430 22/03/2024 9.53 AM
Patient Name : Mr. RAKESH KUMAR
Gender / Age : Male / 40 Years 6 Months 17 Days

Echo Doppler Screening

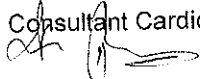
MITRAL VALVE : NORMAL
AORTIC VALVE : TRILEAFLET, NORMAL
TRICUSPID VALVE : NORMAL, TRACE TR, NO PAH
PULMONARY VALVE : NORMAL
LEFT ATRIUM : NORMAL
AORTA : NORMAL
LEFT VENTRICLE : NORMAL, NO REGIONAL WALL MOTION ABNORMALITY,
LVEF=60%
RIGHT ATRIUM : NORMAL
RIGHT VENTRICLE : NORMAL
I.V.S. : INTACT
I.A.S.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

COLOUR/DOPPLER FLOW MAPPING : Trace 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 E/O LV DIASTOLIC DYSFUNCTION
6. NO AR, MR, TRACE TR, NO PULMONARY HYPERTENSION, (IVC COLLAPSING)
7. NO PERICARDIAL EFFUSION, CLOT VEGETATION.

Dr. V C CHAUHAN
Consultant Cardiologist



Name: Rakesh Kumar -
Patient ID: Ecu/23232717

22.03.2024 10:24:52
Standard 12-Lead

BHAIJAL AMIN GENERAL HOSPITAL

Age: 040Y
Gender: Male
Ref. phys:

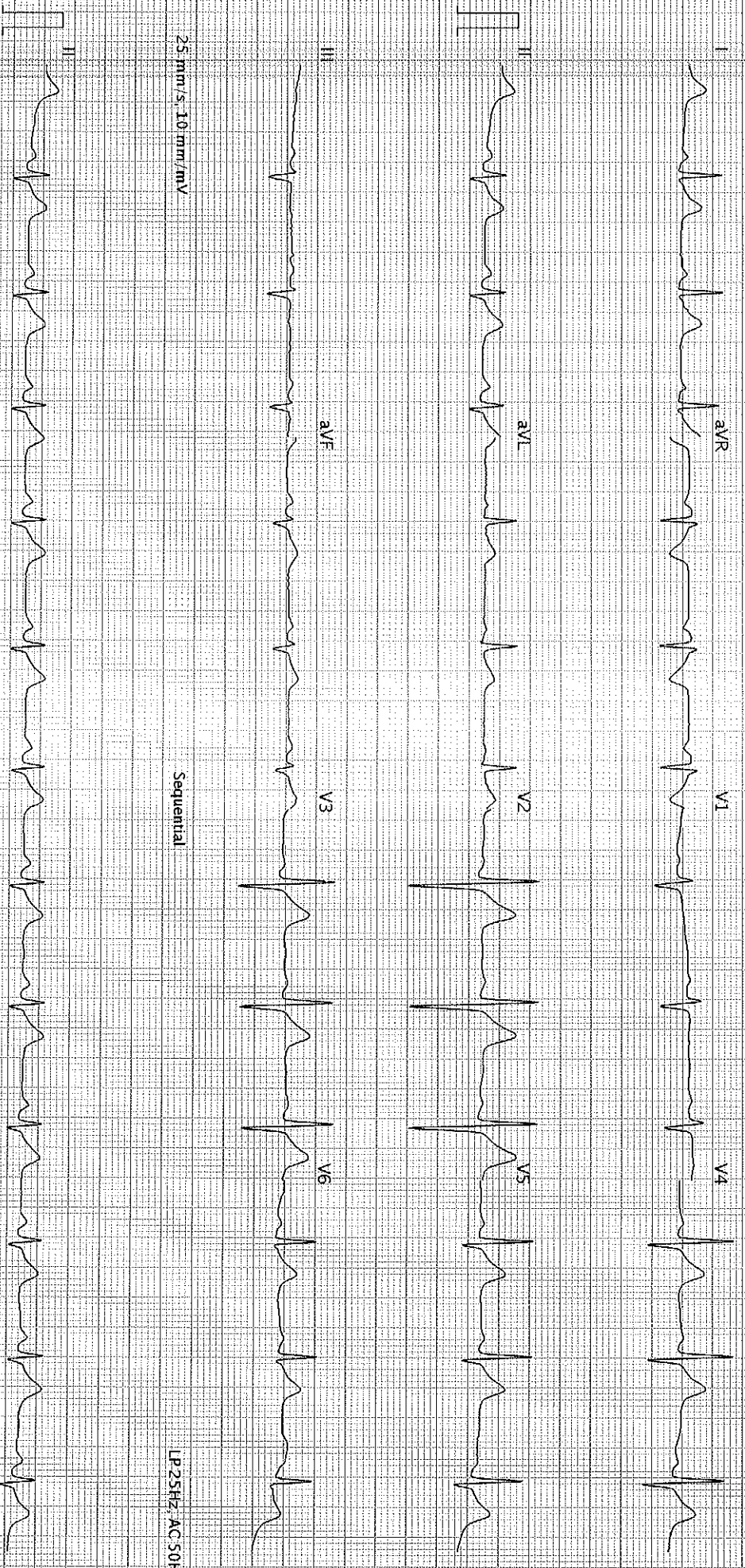
HR: 76 bpm
RR: 793 ms
P: 110 ms
PR: 154 ms
P axis: 40°
QRS axis: 11°
T axis: 26°

Unconfirmed report

QTcB: 389 ms
QT: 346 ms
QRS: 87 ms

Remark:

pw



25 mm/s, 10 mm/mV

Sequential

LP25Hz AC50Hz

25 mm/s, 10 mm/mV

AT 102 G2 I 2.0 (1080:011030)

BHAIJAL AMIN GENERAL HOSPITAL - Printed on 22-03-2024 10:06

LP25Hz AC50Hz

SCHILLER

Part No. 2157048M <& 0123

0.90

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