

### CONCLUSION OF HEALTH CHECKUP

ECU Number : 2531	MR Number : 21038323	Patient Name: JITESH A SHETH
Age : 36	Sex : Male	Height : 181
Weight : 83	Ideal Weight : 80	BMI : 25.34
Date : 25/03/2023		

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.



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GENERAL HOSPITAL**



ECU Number : 2531                      MR Number : 21038323                      Patient Name: JITESH A SHETH  
Age : 36                                      Sex : Male                                      Height : 181  
Weight : 83                                      Ideal Weight : 80                                      BMI : 25.34  
Date : 25/03/2023

Past H/O : H/O :- ACL RECONSTRUCTION:- 2003

Present H/O : NO COMPLAIN MEDICAL AT PRESENT

Family H/O : FATHER: DIABETES, IHD(S/P CABG)  
MOTHER: THYROID

Habits : NO HABITS

Gen.Exam. : G.C.GOOD

B.P : 128/88 mm Hg

Pulse : 87/MIN REG

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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**GENERAL HOSPITAL**

ESTD. 1964



ECU Number : 2531  
Age : 36  
Weight : 83  
Date : 25/03/2023

MR Number : 21038323  
Sex : Male  
Ideal Weight : 80

Patient Name: JITESH A SHETH  
Height : 181  
BMI : 25.34

**Ophthalmic Check Up :**

**Right**

**Left**

Ext Exam

NIL

Vision Without Glasses

6/6 N.5

6/6 N.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. JITESH A SHETH  
 Gender / Age : Male / 37 Years 10 Months 16 Days  
 MR No / Bill No. : 21038323 / 231074838  
 Consultant : Dr. Manish Mittal  
 Location : OPD

Type : OPD  
 Request No. : 115238  
 Request Date : 25/03/2023 08:28 AM  
 Collection Date : 25/03/2023 08:39 AM  
 Approval Date : 25/03/2023 02:41 PM

**CBC + ESR**

Test	Result	Units	Biological Ref. Range
<b>Haemoglobin.</b>			
Haemoglobin	13.8	gm/dL	13 - 17
Red Blood Cell Count (T-RBC)	<b>4.39</b>	mill/cmm	4.5 - 5.5
Hematocrit (HCT)	<b>39.7</b>	%	40 - 50
Mean Corpuscular Volume (MCV)	90.4	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	31.4	pg	27 - 32
MCH Concentration (MCHC)	<b>34.8</b>	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	11.9	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	40.0	fl	39 - 46
<b>Total Leucocyte Count (TLC)</b>			
Total Leucocyte Count (TLC)	6.38	thou/cmm	4 - 10
<b>Differential Leucocyte Count</b>			
Polymorphs	55	%	40 - 80
Lymphocytes	40	%	20 - 40
Eosinophils	1	%	1 - 6
Monocytes	4	%	2 - 10
Basophils	0	%	0 - 2
Polymorphs (Abs. Value)	3.46	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	2.51	thou/cmm	1 - 3
Eosinophils (Abs. Value)	<b>0.07</b>	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.31	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.03	thou/cmm	0.02 - 0.1
Immature Granulocytes	1.3	%	1 - 3 : Borderline > 3 : Significant
<b>Platelet Count</b>			
Platelet Count	303	thou/cmm	150 - 410
Smear evaluation	Adequate		
ESR	8	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 opinion is made. Recheck / repeat may be requested.

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name	: Mr. JITESH A SHETH	Type	: OPD
Gender / Age	: Male / 37 Years 10 Months 16 Days	Request No.	: 115238
MR No / Bill No.	: 21038323 / 231074838	Request Date	: 25/03/2023 08:28 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 metric 20, comparable to Westergrens method and in accordance to ICSH reference method.

---- End of Report ----


Dr. Rakesh Vaidya  
MD (Path). DCP.

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mr. JITESH A SHETH  
Gender / Age : Male / 37 Years 10 Months 16 Days  
MR No / Bill No. : 21038323 / 231074838  
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**Haematology**

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

---- End of Report ----

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**HbA1c (Glycosylated Hb)**

Test	Result	Units	Biological Ref. Range
<b>HbA1c (Glycosylated Hb)</b>			
Glycosylated Heamoglobin (HbA1c)	5.1	%	
estimated Average Glucose (e AG) *	99.67	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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DEPARTMENT OF LABORATORY MEDICINE

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**Fasting Plasma Glucose**

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>Biological Ref. Range</u>
<i>Fasting Plasma Glucose</i>			
Fasting Plasma Glucose	87	mg/dL	70 - 110
Post Prandial 2-Hr. Plasma Glucose	95	mg/dL	70 - 140

By Hexokinase method on RXL Dade Dimesion

---- End of Report ----

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**Renal Function Test (RFT)**

Test	Result	Units	Biological Ref. Range
Urea <i>(By Urease Kinetic method on RXL Dade Dimension)</i>	15	mg/dL	10 - 45
Creatinine <i>(By Modified Kinetic Jaffe Technique)</i>	<b>0.82</b>	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>(By Uricase / Catalase method on RXL Siemens)</i>	<b>3.0</b>	mg/dL	3.4 - 7.2

---- End of Report ----

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**Liver Function Test (LFT)**

Test	Result	Units	Biological Ref. Range
<b>Bilirubin</b>			
Bilirubin - Total	0.26	mg/dL	0 - 1
Bilirubin - Direct	0.07	mg/dL	0 - 0.3
Bilirubin - Indirect	0.19	mg/dL	0 - 0.7
<i>(By Diazotized sulfanilic acid on RXL Dade Dimension.)</i>			
Aspartate Aminotransferase (SGOT/AST)	20	U/L	15 - 40
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alanine Aminotransferase (SGPT/ALT)	47	U/L	16 - 63
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alkaline Phosphatase	111	U/L	53 - 128
<i>(BY PNPP AMP method on RXL Dade Dimension.)</i>			
Gamma Glutamyl Transferase (GGT)	77	U/L	15 - 85
<i>(By IFCC method on RXL Dade Dimension.)</i>			
<b>Total Protein</b>			
Total Proteins	7.99	gm/dL	6.4 - 8.2
Albumin	4.30	gm/dL	3.4 - 5
Globulin	3.69	gm/dL	3 - 3.2
A : G Ratio	1.17		1.1 - 1.6
<i>(By Biuret endpoint and Bromocresol purple method on RXL Dade Dimension.)</i>			

---- End of Report ----

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## Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
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## Triiodothyronine (T3)

1.43

ng/ml

(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)

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 - 50 years) : 0.7 - 2.0  
 Adults (> 50 years) : 0.4 - 1.8  
 Pregnancy (in last 5 months) : 1.2 - 2.5

(Reference : Tietz - Clinical guide to laboratory test, 4th edition ))

## Thyroxine (T4)

6.67

mcg/dL

(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)

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 / male : 4.6 - 10.5  
 Adults / female : 5.5 - 11.0  
 Adults (> 60 years) : 5.0 - 10.7

(Reference : Tietz - Clinical guide to laboratory test, 4th edition ))

## Thyroid Stimulating Hormone (US-TSH)

5.11

microIU/ml

(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)

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 (21 - 54 years) : 0.4 - 4.2  
 Adults (> 55 years) : 0.5 - 8.9  
 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 ))

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.

---- End of Report ----

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 Gender / Age : Male / 37 Years 10 Months 16 Days Request No. : 115238  
 MR No / Bill No. : 21038323 / 231074838 Request Date : 25/03/2023 08:28 AM  
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 Location : OPD Approval Date : 25/03/2023 01:57 PM

**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	6.0		
Specific Gravity	1.010		
Protein	Negative	gm/dL	0 - 5
Glucose	Negative	mg/dL	0 - 5
Ketones	Negative		0 - 5
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 ----

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Consultant	: Dr. Manish Mittal	Collection Date	: 25/03/2023 08:39 AM
Location	: OPD	Approval Date	: 25/03/2023 02:42 PM

**Stool Routine**

Test	Result	Units	Biological Ref. Range
<b>Physical Examination (Stool)</b>			
Colour	Brown		
Consistency	Semi-Solid		
Mucus.	Absent		
Blood.	Absent		
<b>Chemical Examination</b>			
Reaction	Acidic		
Occult Blood	Negative		
<b>Microscopic Examination</b>			
Ova	Absent		
Cyst.	Absent		
Trophozoites	Absent		
Red Blood Cells.	Absent	/hpf	
Pus Cells	Absent	/hpf	
Epithelial Cells	Absent		
Fat	Absent		

(Method : Manual + Chemical (Occult Blood by Peroxidase like activity of Haemoglobin) + Microscopy)

Test Note :

- Stool Occult Blood test needs to be tested on three consecutive samples for proper interpretation.

- For 72 hours prior to Occult Blood test, patient should not take following items: Red meat, fish, poultry, turnips, horseradish, cauliflower, spinach, broccoli, bananas, black grapes, plums etc., drugs like aspirin, NSAIDs, anticoagulants, reserpine, iodine and high dose of Vitamin C.)

---- End of Report ----

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**Complete Lipid Profile**

Test	Result	Units	Biological Ref. Range
<b>Complete Lipid Profile</b>			
Appearance	Clear		
Triglycerides	74	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	52	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)	143	mg/dL	1 - 130
<i>(Non- HDL Cholesterol)</i>			
	< 130 Desirable		
	139-159 Borderline High		
	160-189 High		
	> 191 Very High		
LDL Cholesterol	<b>137</b>	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)	14.8	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	2.63		2.1 - 3.5
T. Ch./HDL Ch. Ratio	3.75		3.5 - 5
<i>(Recent NECP / ATP III Guidelines / Classification (mg/dl) :)</i>			



---- End of Report ----

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**DEPARTMENT OF DIAGNOSTIC RADIOLOGY**

Patient No. : 21038323      Report Date : 25/03/2023  
Request No. : 190058334      25/03/2023 8.28 AM  
Patient Name : Mr. JITESH A SHETH  
Gender / Age : Male / 37 Years 10 Months 16 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

*Prerna C Hasani*

**Dr. Prerna C Hasani, MD**  
Consultant Radiologist





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- Ultra High Resolution Sonography
- Multi-Detector CT Scan
- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

Patient No. : 21038323      Report Date : 25/03/2023  
 Request No. : 190058319      25/03/2023 8.28 AM  
 Patient Name : Mr. JITESH A SHETH  
 Gender / Age : Male / 37 Years 10 Months 16 Days

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

Liver is normal in size and normal 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.

Prostate appears normal in size and volume is ~ 13 cc. Prostate measures 27mm x 34mm x 27mm.

Urinary bladder is well distended and appears normal.

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

*Hasani*

**Dr.Perna C Hasani, MD**  
Consultant Radiologist



H-2015-0297

MC-3004

E-2021-0537




Patient No. : 21038323      Report Date : 25/03/2023  
Request No. : 190058373      25/03/2023 8.28 AM  
Patient Name : Mr. JITESH A SHETH  
Gender / Age : Male / 37 Years 10 Months 16 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 : NO LV diastolic dysfunction  
FLOW MAPPING : NO AR, 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: Jitesh sheth -  
Patient ID: 21036323

25.03.2023 08:36:04  
Standard 12-Lead

Date of birth: 10.05.1985  
Gender: Male  
Height:   
Weight:   
Ethnicity: Undefined  
Pacemaker: Unknown

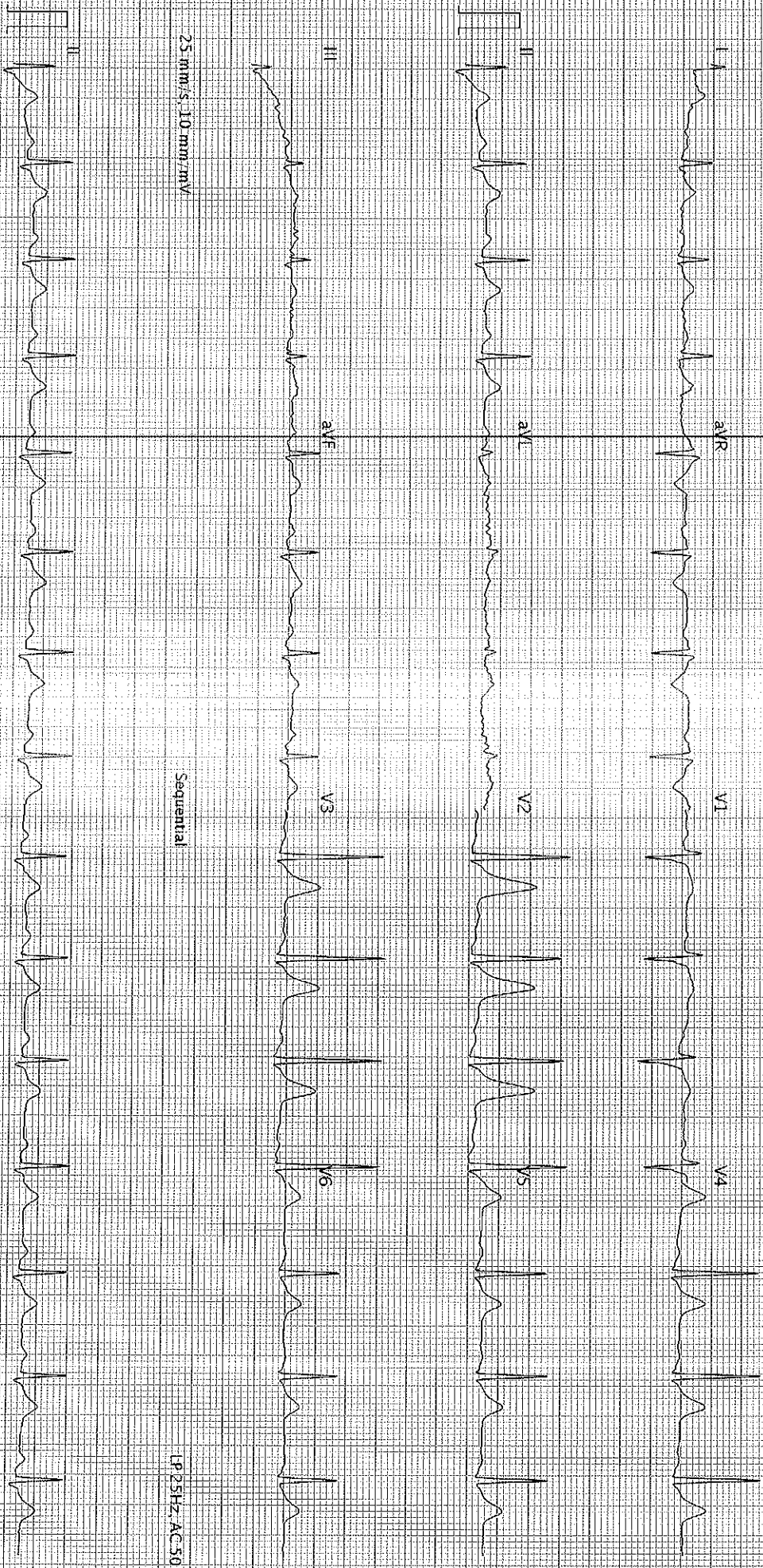
Visit ID:   
Room:   
Medication:   
Order ID:   
Ord. prov.:   
Ord. prol.:   
HR: 88 bpm  
P axis: 58°  
QRS axis: 62°  
T axis: 49°

RR:   
P: 67.8 ms  
PR: 157 ms  
QR: 89 ms  
QT: 337 ms  
QTcB: 409 ms  
Sinus rhythm  
Normal electrical axis  
R/S transition shift to right  
Otherwise normal ECG  
Unconfirmed report

Indication:  
Remark:

Otherwise normal

*ECG*



25 mm/s, 10 mm/mV

Sequential

IP 25Hz, AC 50Hz

25 mm/s, 10 mm/mV

IP 25Hz, AC 50Hz

AT 1026212.0 (1080.011030)

Printed on 25.03.2023 08:38:17

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SCHILLER

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