

PHYSICIAN CONSULTATION

DATE:- 09/07/22,

NAME:- Abhimanyu.

DOB: AGE:- 32 SEX:- Male

HEIGHT:- 165

WEIGHT:- 65 kg

BMI:- ~~24~~ 24

BP READING:- 122/80 mmHg

Heart Rate:- 82/m

Eye Exam :- 6/6.

Ear Exam :- Normal.



Abhimanyu

Pts Name	ABHMANYU SUNDARAM
Date	09-07-2022
Age	32 Yr/male
Ref Doctor	BOB

USG ABDOMEN AND PELVIS

Liver: appears normal in size and shows bright echotexture. No evidence of focal mass lesion seen. Portal vein and CBD appears normal. No evidence of IHBRD.

Gall bladder: Partially distended and appears normal.

Spleen: appears normal in size and normal in echotexture.

Pancreas: appears normal.

Both Kidneys: appears normal in size, shape and echotexture. No evidence of calculus or hydronephrosis on both side. CMD appears maintained. RK: 9.3 x 4.8 cm LK: 8.6 x 4.9 cm.

Urinary bladder: well distended and appears normal.

Prostate: appears normal in size for age (Vol: 15 cc).

No evidence of ascites.

IMPRES SION:

- No significant abnormality detected except for grade 1 fatty liver.

Dr. A. P. Patel

Radiologist



Pts Name	ABHIMANYU KUMAR
Date	09/07/2022
Age	32Yr/MALE
Ref By	BOB

X-Ray Chest pa view

Lungs appear normal.

Heart size and mediastinal shadow appears normal.

Both CP angles appear normal.

Domes of diaphragm and bony thorax appears normal.

Dr. A. P. Pate
Radiologist



2022-07-09 11:44:27 AM

ID: 1059

Name: sundaram, abhimanyu kumar

Age: 32yrs

Sex: Male

Hospital: city plus

Department:

HR :

108 bpm

PR :

130 ms

QRS :

82 ms

QT/QTc :

298/398 ms

P/QRS/T :

74/35/1 deg.

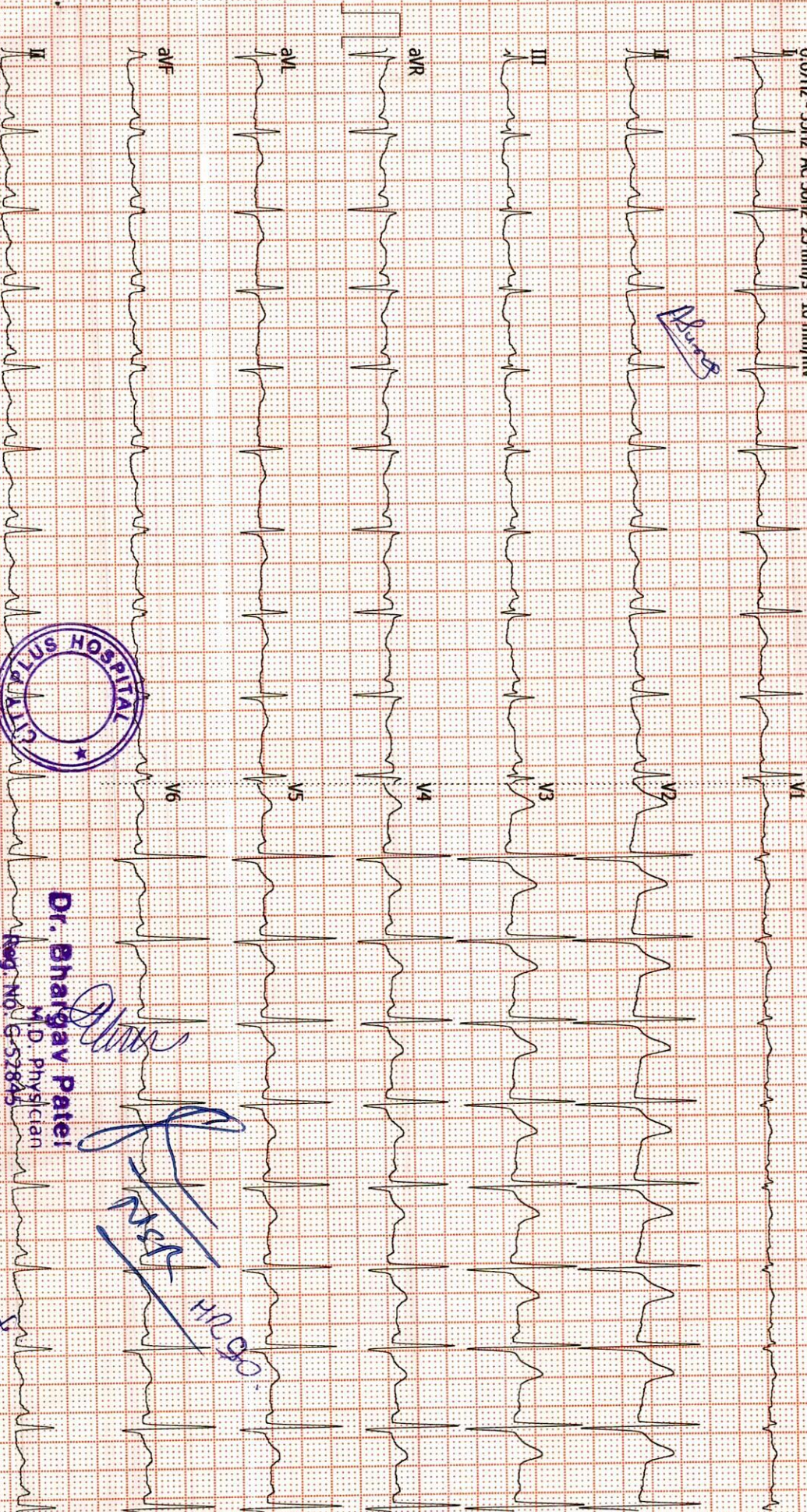
RV5/SVI :

1.166/-0.124 mv

RV5+SV1 :

1.290 mv

0.67Hz - 35Hz AC 50Hz 25 mm/s 10 mm/mV



<< Analysis Result >>
** abnormal ECG **
Sinus tachycardia

Need to be confirmed by doctor. Doctor Name: _____



Dr. Bhargav Patel

M.D. Physician

Reg. No. 6-52845

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 06/07/22

Computerised Stress Test Report

NAME: ABHIMANYU KUMAR SUNDARAM
AGE/GENDER: 32 yrs/MALE

ID: 392
HEIGHT: 165 cm.

Summary report
WEIGHT: 66 Kg.

PROTOCOL: Bruce
DATE/TIME: 09-07-2022 10:58

REF. BY: BOB
SMOKER: Non Smoker

Test Results

Protocol	: Bruce	Max Work load	: 7.57	BMI	: 24
Target HR	: 188(160)bpm	Exer. Time	: 6:36min	Max RPP(1000)	: 29.356
Maximum HR	: 179(95 %) bpm	Recov. Time	: 6:36min	Max BP	: 164/96 mmHg

Reason for termination :
Target heart rate achieved

Indication :
To assess the exercise tolerance capacity

HR Response to Exercise :
Normal appropriate response

BP Response to Exercise :
Resting normal BP - normal response

Overall Impression :
Normal stress test

Comment :
TEST NEGATIVE FOR EXERCISE INDUCIBLE ISCHEMIA

Resting ECG :
Normal

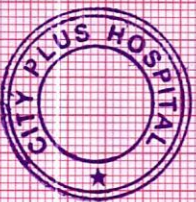
Chest Pain :
None

ST Changes :
None

Arrhythmias :
None

History : THYROIDISM SINCE 2 MONTHS

Medication :
TAB. THYROX 25



[Handwritten Signature]

Dr. Bhargav Patel

M.D. Physician
Reg. No. G-52845

AP

Computerised Stress Test Report

NAME: ABHIMANYU KUMAR SUNDARAM
AGE/GENDER: 32 yrs/MALE

ID: 392
HEIGHT: 165 cm.

Summary report
WEIGHT: 66 Kg.

PROTOCOL: Bruce
DATE/TIME: 09-07-2022 10:58

REF. BY: BOB
SMOKER: Non Smoker

Stage	Time Min:Sec	HR bpm	BP mmHg	Speed (mph)/G	Load METS	RPP 1000	TI	V2	V5
Supine	00:06	91	122/80	0.00/0.0	1.0	11.102	1.2/0.7	2.3/1.9	0.7/0.4
Standing	00:18	85	122/80	0.00/0.0	1.0	10.37	1.3/0.9	2.7/2.1	0.7/0.3
HyperV	00:36	84	122/80	0.00/0.0	1.0	10.248	0.8/0.5	1.6/1.2	0.6/0.4
Exer : 1/7	03:00	149	138/86	1.70/10.0	4.5	20.562	3.0/2.8	3.7/3.4	2.8/2.7
Exer : 2/7	03:00	172	160/92	2.50/12.0	7.0	27.52	3.4/3.1	4.5/4.2	3.4/3.8
Exer : 3/7	00:36	182	164/94	3.40/14.0	7.6	29.848	0.7/3.2	2.0/3.3	1.2/3.4
Peak	06:36	179	164/94	3.40/14.0	7.6	29.356	4.4/4.2	3.4/3.2	3.7/4.8
Recovery	01:00	146	154/90	0.00/0.0	1.0	22.484	5.5/5.0	5.3/4.1	4.9/4.2
Recovery	02:00	129	154/90	0.00/0.0	1.0	19.866	4.8/4.8	6.5/5.6	3.9/3.6
Recovery	03:00	123	138/88	0.00/0.0	1.0	16.974	2.2/2.4	4.7/4.5	1.9/1.9
Recovery	04:00	119	134/86	0.00/0.0	1.0	15.946	1.1/1.3	3.7/3.4	0.7/0.7
Recovery	05:00	112	130/86	0.00/0.0	1.0	14.56	0.2/0.7	1.3/1.2	0.3/0.8
Recovery	06:00	107	126/86	0.00/0.0	1.0	13.482	0.1/0.3	2.0/1.7	0.3/0.5
Recovery	06:36	115	126/84	0.00/0.0	1.0	14.49	0.1/0.5	2.2/1.7	0.4/0.5

ASusd

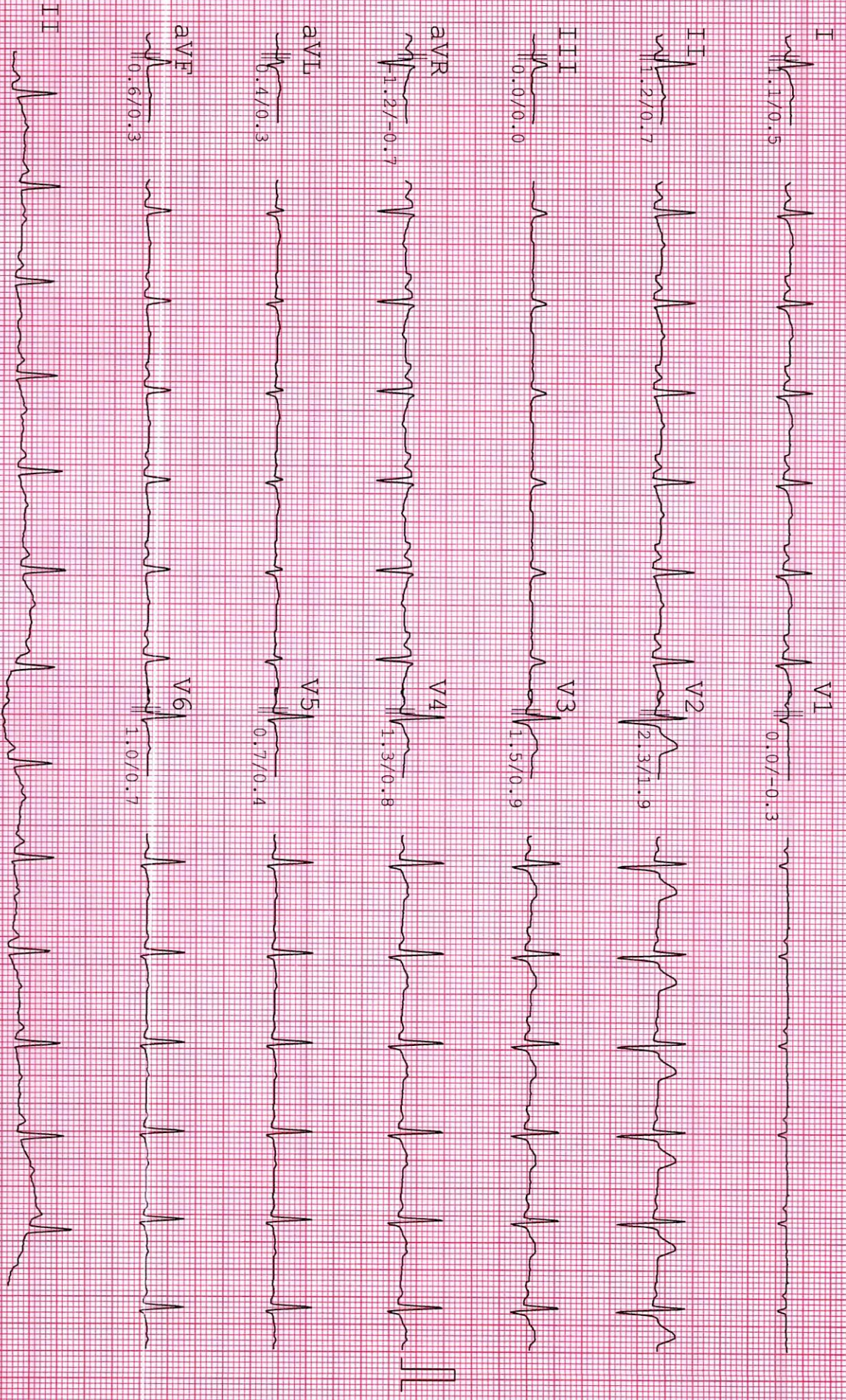
NAME : ABHIMANYU KUMAR
DOB/SEX/AGE : 32 Yrs/MALE
DATE/TIME : 09-07-2022 10:58

ID : 392
BP : 122/80mmHg
HR : 91bpm

PROTOCOL : Bruce
STAGE : Supine
STAGE TIME : 00:06

Linked Median Report
SPEED/GRADE : 0.00/0.0
POST J at 80 msec

GAIN : 1X
STL in mm
SFS in mm/sec



Abhimanyu

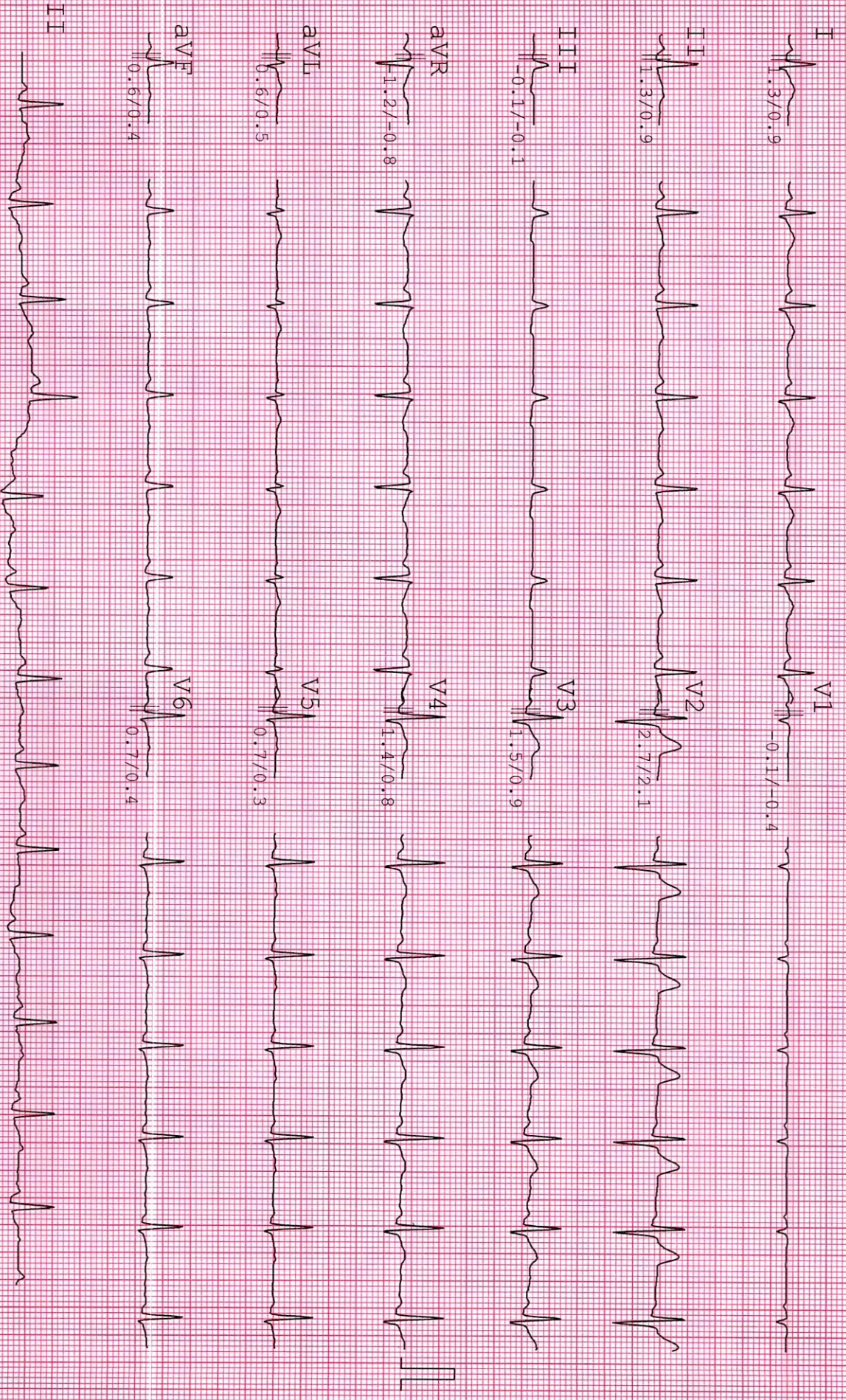
NAME : ABHIMANTU KUMAR
DOB/SEX/AGE : 32 Yrs/MALE
DATE/TIME : 09-07-2022 10:58

ID : 392
BP : 122/80mmHg
HR : 89bpm

PROTOCOL : Bruce
STAGE : Standing
STAGE TIME : 00:18

Linked Median Report
SPEED/GRADE : 0.00/0.0
POST J at 80 msec

GAIN : 1X
STL in mm
SFS in mm/sec



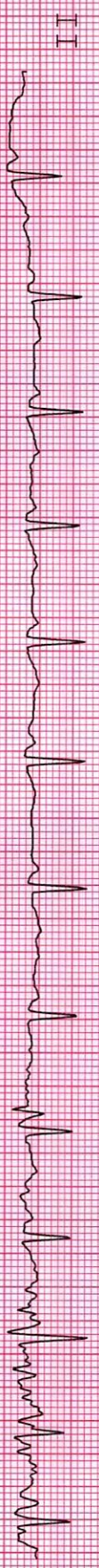
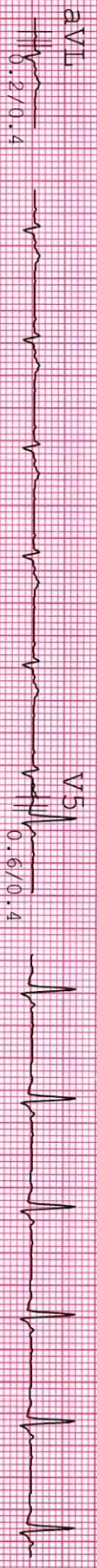
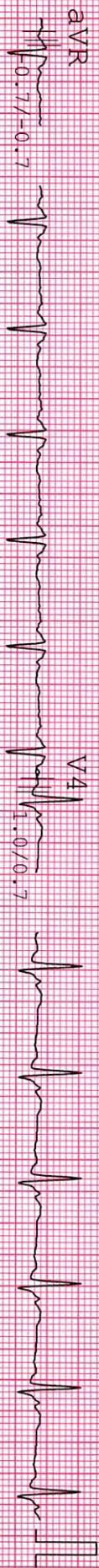
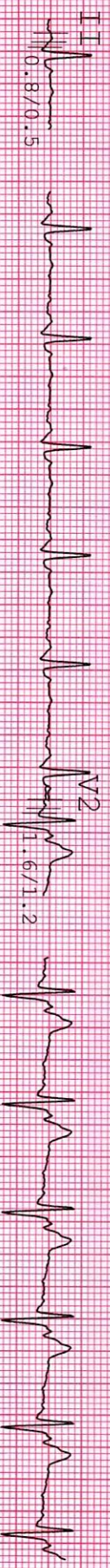
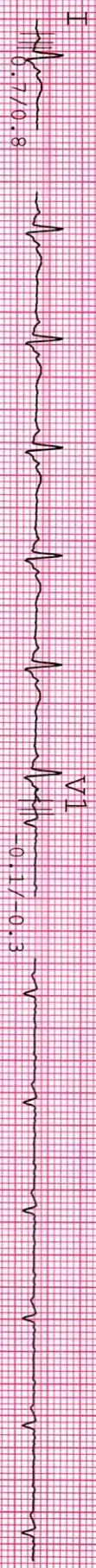
NAME : ABHIMANYU KUMAR
DOB/SEX/AGE : 32 Yrs/MALE
DATE/TIME : 09-07-2022 10:58

ID : 392
BP : 122/80mmHg
HR : 87bpm

PROTOCOL : Bruce
STAGE : HyperV
STAGE TIME : 00:36

Linked Median Report
SPEED/GRADE : 0.00/0.0
POST J at 80 msec

GAIN : 1X
STL in mm
SFS in mm/sec



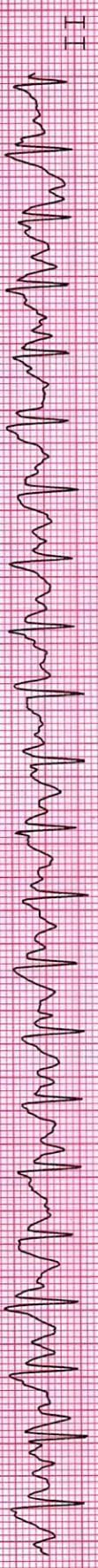
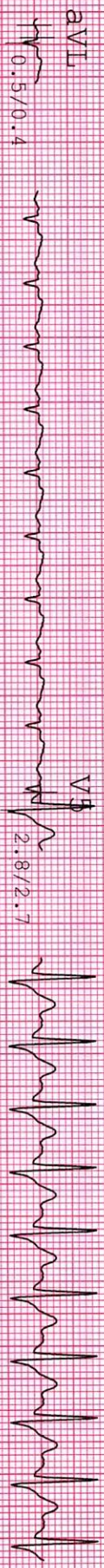
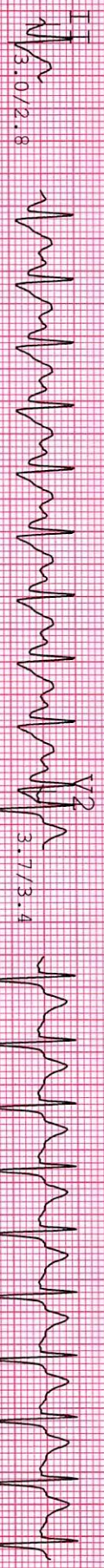
NAME : ABHIMANYU KUMAR
AGE/SEX : 32 yrs/MALE
DATE/TIME : 09-07-2022 10:58

ID : 392
BP : 138/86mmHg
HR : 150bpm

PROTOCOL : Bruce
STAGE : Exer : 1/7
STAGE TIME : 03:00

Linked Median Report
SPEED/GRADE : 1.70/10.0
POST J at 80 msec

GAIN : 1X
STL in mm
STS in mm/sec



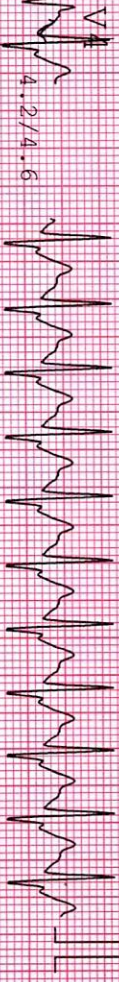
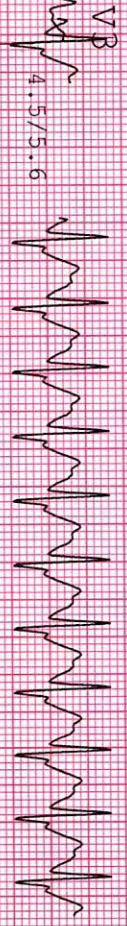
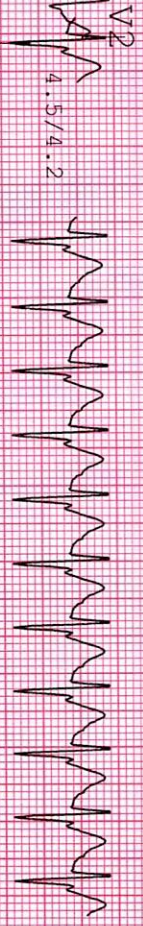
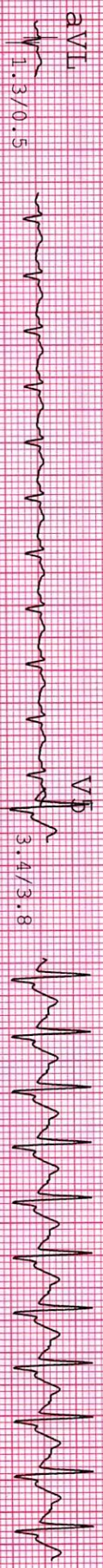
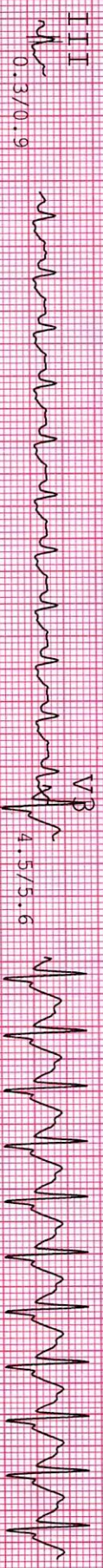
Patient Name: ABHIMANYU KUMAR
Age/Sex: 32 yrs/Male
Date/Time: 09-07-2022 10:58

ID: 392
BP: 160/92mmHg
HR: 171bpm

Protocol: Bruce
Stage: Exer : 2/7
Stage Time: 03:00

Linked Median Report
Speed/Grade: 2.50/12.0
Post J at 80 msec

Gain: 1X
STL in mm
ST5 in mm/sec



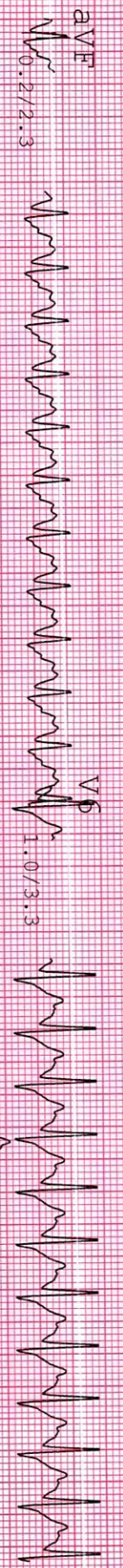
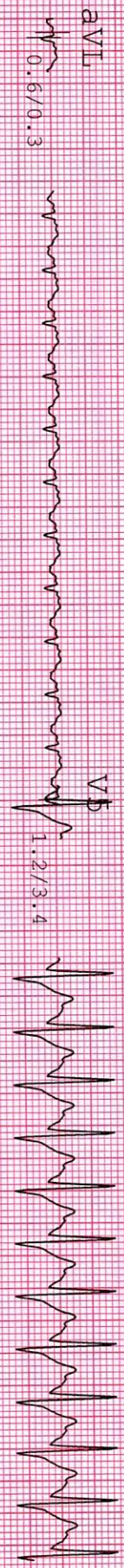
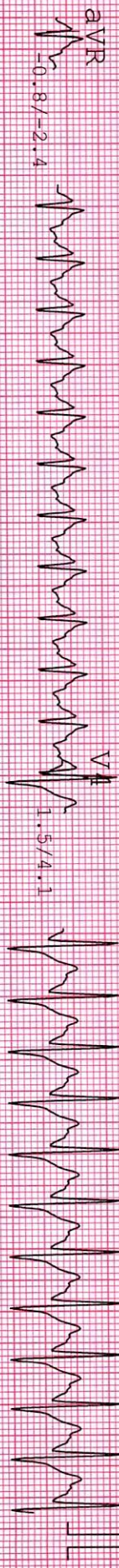
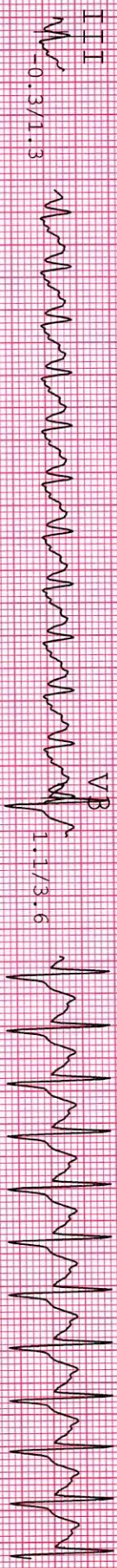
NAME : ABHIMANYU KUMAR
BORN/EXAMER : 32 YRS/MALE
DATE/TIME : 09-07-2022 10:58

ID : 392
BP : 164/94mmHg
HR : 179bpm

PROTOCOL : Bruce
STAGE : Exer : 3/7
STAGE TIME : 00:36

Linked Median Report
SPEED/GRADE : 3.40/14.0
POST J at 80 msec

GAIN : 1X
STL in mm
STS in mm/sec



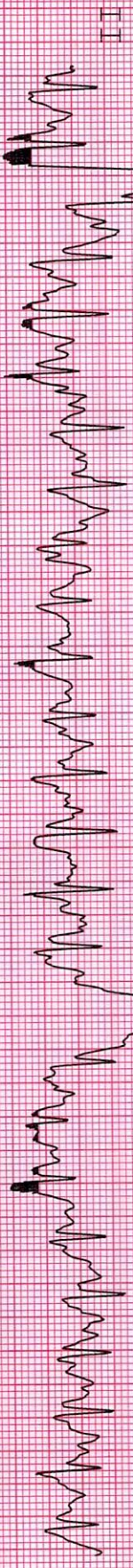
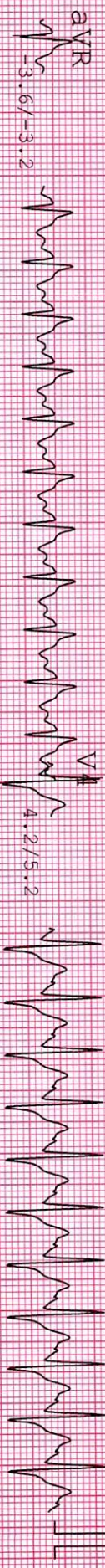
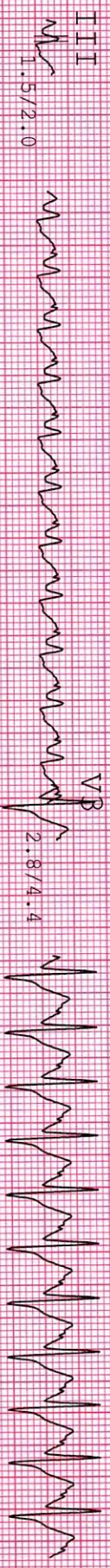
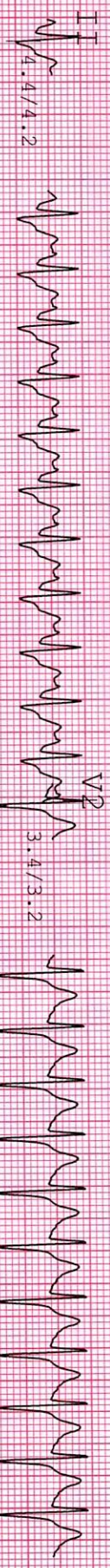
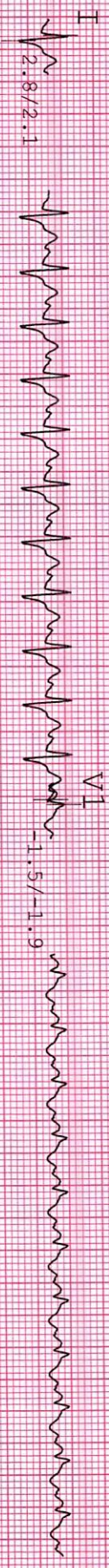
PATIENT NAME : ABHIMANYU KUMAR
AGE/SEX : 32 YRS/MALE
DATE/TIME : 09-07-2022 10:58

ID : 392
BP : 164/94mmHg
HR : 175bpm

PROTOCOL : Bruce
STAGE : Peak
STAGE TIME : 00:06

Linked Median Report
SPEED/GRADE : 3.40/14.0
POST J at 80 msec

GAIN : 1X
STL in mm
STS in mm/sec



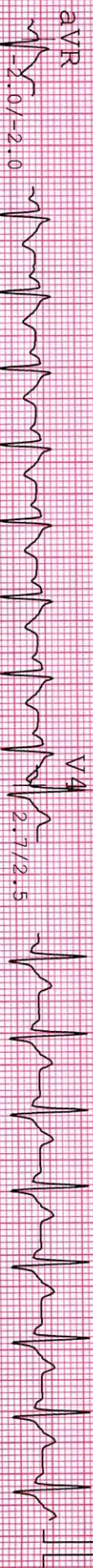
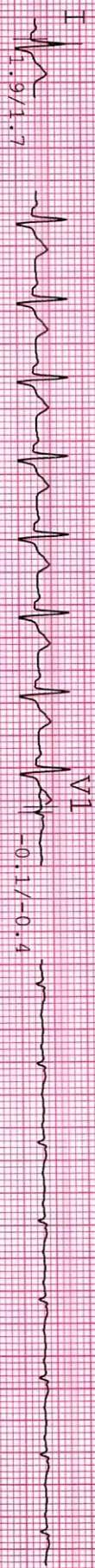
NAME : ABHIMANYU KUMAR
BGR/ENDER : 32 yrs/MALE
DATE/TIME : 09-07-2022 10:58

ID : 392
BP : 138/88mmHg
HR : 121bpm

PROTOCOL : Bruce
STAGE : Recovery
STAGE TIME : 03:00

Linked Median Report
SPEED/GRADE : 0.00/0.0
POST J at 80 msec

GAIN : 1X
STL in mm
SFS in mm/sec



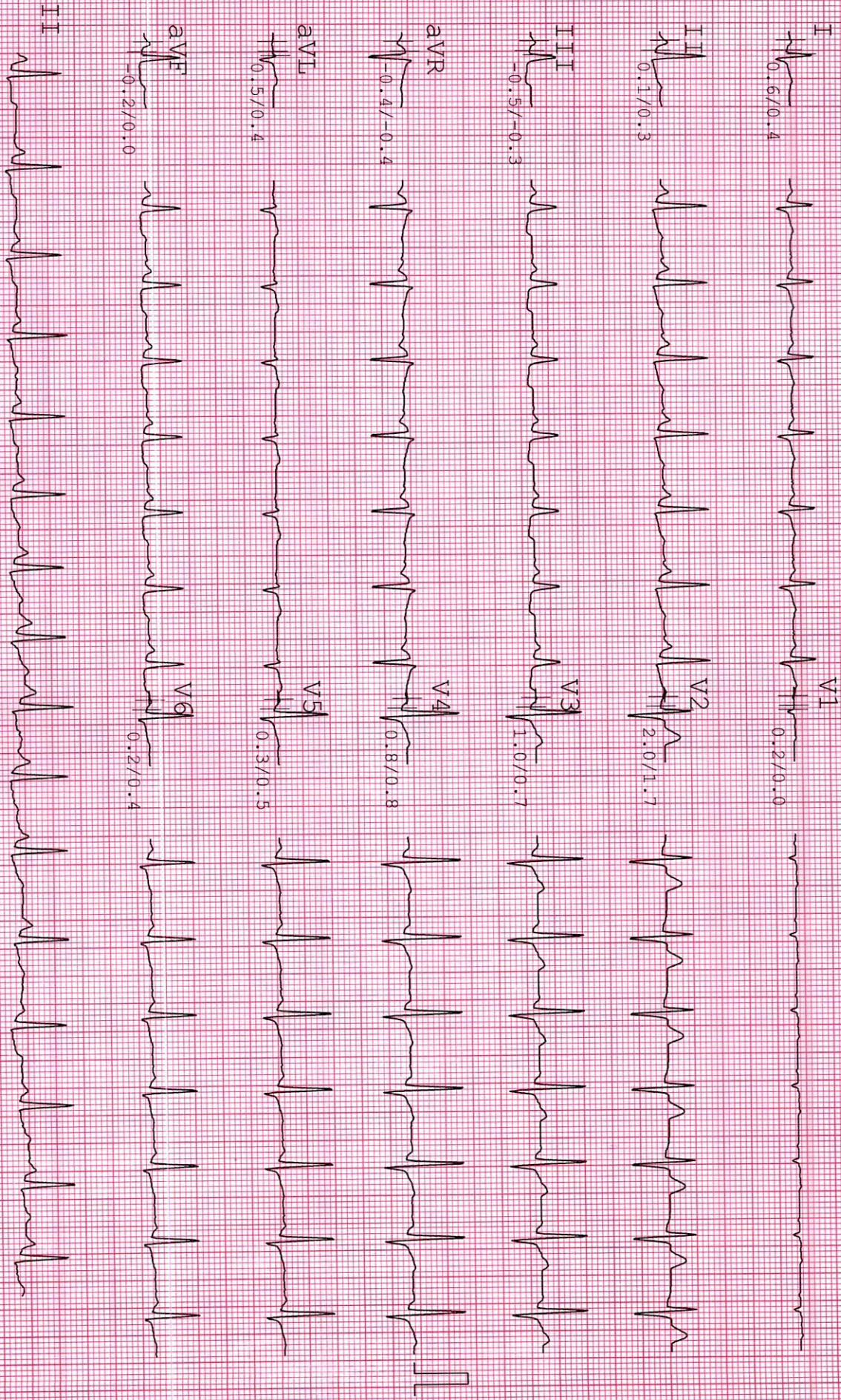
NAME : ABHINAVU KUMAR
AGE/SEX: 32 Yrs/MALE
DATE/TIME : 09-07-2022 10:58

ID : 392
BP : 126/86mmHg
HR : 108bpm

PROTOCOL : Bruce
STAGE : Recovery
STAGE TIME : 06:00

Linked Median Report
SPEED/GRADE : 0.00/0.0
POST J at 80 msec

GAIN : 1X
STL in mm
ST5 in mm/sec

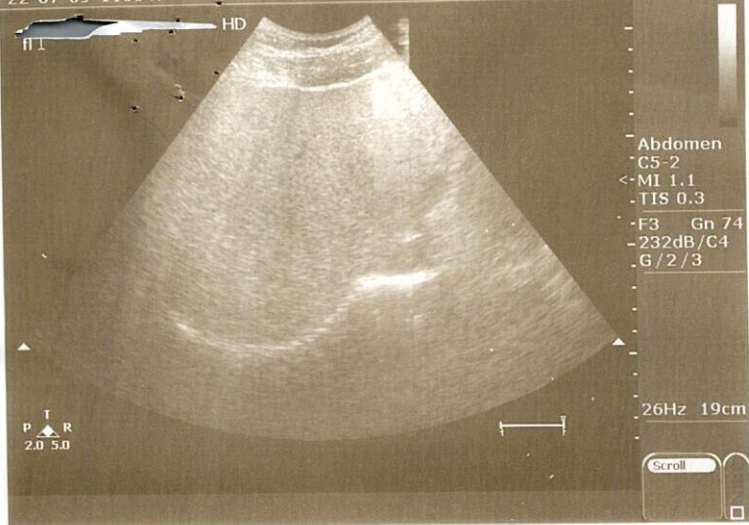


abhimanyu sundaram 32/m,
22-07-09-110647

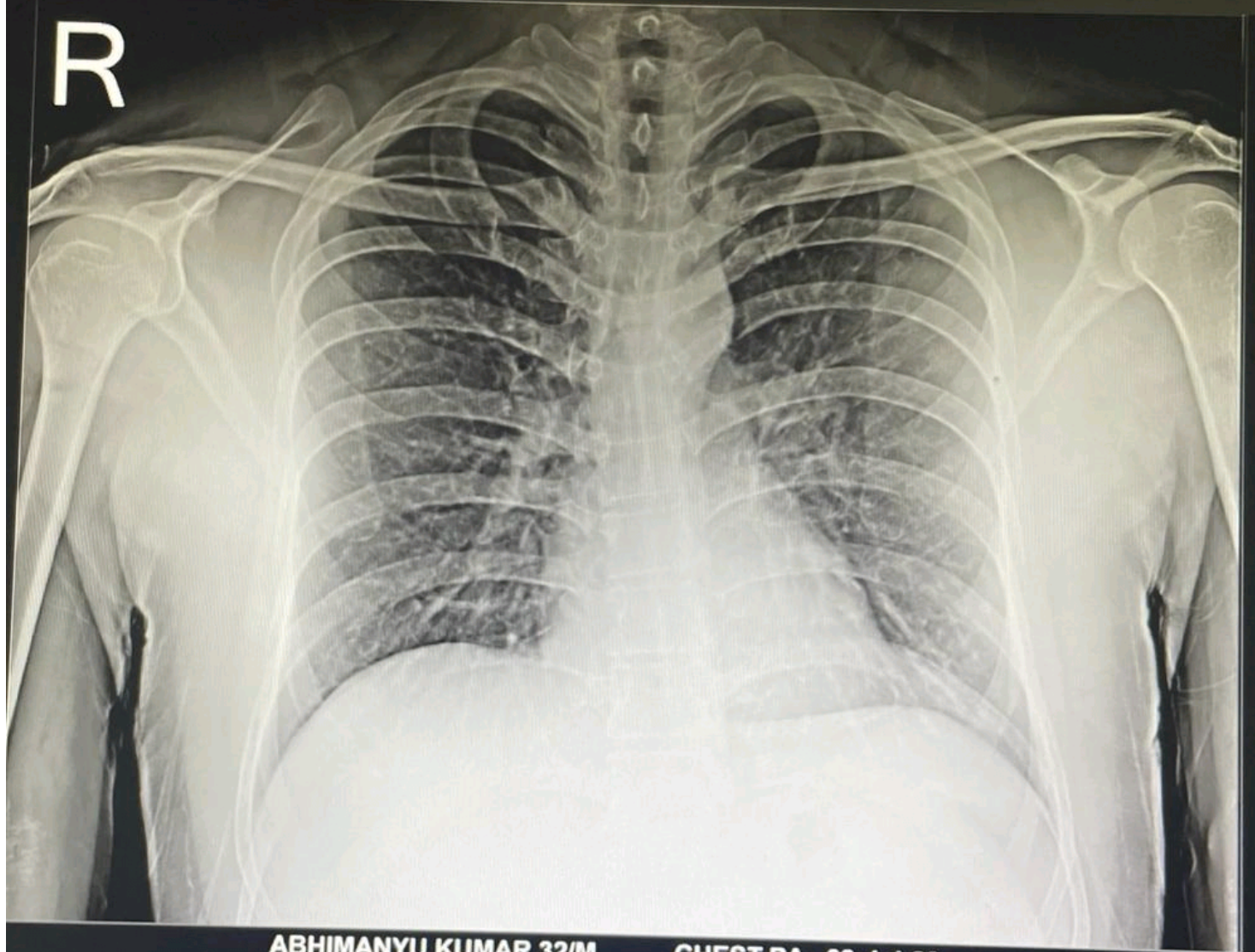
CITY PLUS HOSPITAL

09/07/2022 11:07:02

PHILIPS



R



ABHIMANYU KUMAR 32/M CHEST PA 09-Jul-22
CITY PLUS HOSPITAL, AHMEDABAD.

आयकर विभाग

INCOME TAX DEPARTMENT



भारत सरकार

GOVT. OF INDIA

ABHIMANYU KUMAR SUNDARAM

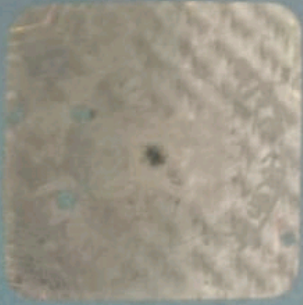
INDRA KANT JHA

22/05/1990

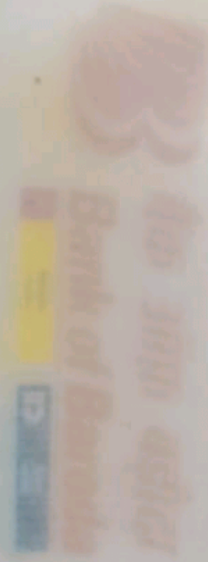
Permanent Account Number

ETOPS9286M

Signature



14032013



नाम

Name

Abhimanyu Kumar Sundaram

कार्यकारी कूट क्र.

Employee Code No. 172043

जारीकर्ता प्राधिकारी

Issuing Authority




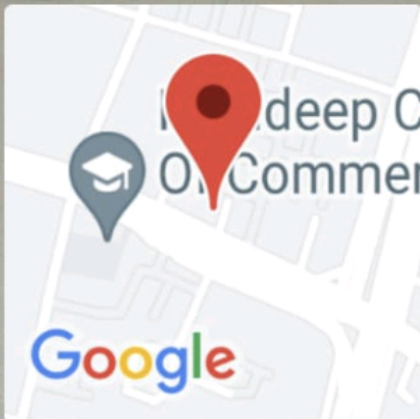
Abhimanyu

धारक के हस्ताक्षर

Signature of Holder



 GPS Map Camera




Ahmedabad, Gujarat, India
Nr. Sola Overbidge, Science City Rd, Sola,
Ahmedabad, Gujarat 380060, India
Lat 23.070654°
Long 72.521431°
09/07/22 09:14 AM




नाम
Name Abhimanyu Kumar Sundaram

कर्मचारी कूट सं.
Employee Code No. 172043


जारीकर्ता प्राधिकारी
Issuing Authority




धारक के हस्ताक्षर
Signature of Holder

Patient Name : Mr. Abhimanyu Kumar Sundaram
Sample No.. : 7771
Referred : Bank Of Baroda

Age/Sex : 32 Years/Male
Registration On:09/07/2022/12:28

THYROID FUNCTIONS

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>NORMAL VALUE</u>
Serum T3 :	1.86	ng/dl	0.6 - 1.80 ng/dl
Serum T4 :	12.0	microgm/dl	5.2 - 12.7microgm/dl
Serum T.S.H :	6.77	microU/ml	0.3 - 4.5 microU/ml

COMMENTS :

TSH levels may be affected by acute illness and drugs like doapamine and gluco corticoids.

Low or undetectable TSH is suggestive of Grave~s disease

TSH between 5.5 to 15.0 with normal T3 T4 indicates impaired thyroid hormone or subclinical hypothyroidism or normal T3 T4 with slightly low TSH suggests subclinical Hyperthyroidism.

TSH suppression does not reflect severity of hyperthyroidism therefore , measurement of FT3 ,FT4 is important.

FreeT3 is first hormone to increase in early Hyperthyroidism.

Only TSH level can prove to be misleading in patients on treatment. Therefore FreeT3 , FreeT4 along with TSH should be checked.

During pregnancy clinically T3 T4 can be high and TSH can be slightly low



Pathologist
DR. P.M.SHAH
G-12779

Patient Name : Mr. Abhimanyu Kumar Sundaram
Sample No.. : 7771
Referred : Bank Of Baroda

Age/Sex : 32 Years/Male
Registration On:09/07/2022/12:28

COMPLETE BLOOD COUNT

<u>Test</u>		<u>Sample :</u>	<u>Result</u>	<u>Unit</u>	<u>Biological Ref. Interval</u>
<u>BLOOD COUNT</u>					
Hemoglobin	colorimetric		<u>5.9</u>	g/dL	13 - 17
R.B.C Count	Electrical impedance		<u>4.05</u>	mill/cmm	4.5 - 5.5
W.B.C Count	Electrical impedance		<u>4.4</u>	10 ³ /uL	4.0 - 10.0
Platelet Count	Electrical impedance		<u>376</u>	10 ³ /uL	150 - 450
<u>DIFFERENTIAL COUNT</u>					
Polymorphs	Microscopic		<u>60</u>	%	60 - 70
Lymphocytes	Microscopic		<u>34</u>	%	20 - 40
Eosinophils	Microscopic		<u>02</u>	%	1 - 6
Monocytes	Microscopic		<u>04</u>	%	2 - 10
Basophils	Microscopic		<u>00</u>	%	0 - 2
<u>BLOOD INDISES</u>					
HCT	Rbc Histogram		<u>21.4</u>	%	40 - 50
MCV	Calculated		<u>52.8</u>	fl	80 - 100
MCH	Calculated		<u>14.6</u>	pg	27 - 32
MCHC	Calculated		<u>27.6</u>	g/dl	32 - 36
RDW-CV	Calculated		<u>18.3</u>	%	10 - 16.5

PERIPHERAL SMEAR EXAMINATION

SMEAR RBC Line 1: Rbc are moderate hypochromic(++),Microcytic(++), Anisopoikilocytes(+),Tear drop(++),Elliptocytes(+).

SMEAR WBC LINE 1: Within Normal Limits.

SMEAR Platelets: Adequate

Impression PS: P/S Suggestive of moderate IDA. Page 2 of 8

SMEAR Parasite: Malarial Parasites not seen.

Pathologist
DR. P.M.SHAH
G-12779

Patient Name : Mr. Abhimanyu Kumar Sundaram
Sample No.. : 7771
Reffered : Bank Of Baroda

Age/Sex : 32 Years/Male
Registration On:09/07/2022/12:28

BLOOD GROUP

<u>Test</u>	<u>Result</u>
BLOOD GROUP	: " B "
RH GROUP	: POSITIVE.



Pathologist
DR. P.M.SHAH
G-12779

Patient Name : Mr. Abhimanyu Kumar Sundaram
Sample No.. : 7771
Reffered : Bank Of Baroda

Age/Sex : 32 Years/Male
Registration On:09/07/2022/12:28

COMPLETE BLOOD CHEMISTRY

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Normal Range</u>
S. Cholesterol	: 182.85	mg/dl	Desirable : < 200 Borderline High : 200 - 239 High : > 240
Serum Triglycerides	: 130.76	mg/dl	Normal : Normal < 150 Borderline : 150 - 199 High : > 200
HDL Cholesterol	: 34.34	mg/dl	40 - 60 mg/dl
Serum LDL Cholesterol (Calculated)	: 122.35	mg/dl	Up to 150
Cholesterol/HDLC Ratio (Calculated)	: 5.32	mg/dl	Up to 5.0
Serum VLDL Cholesterol (Calculated)	: 26.15	mg/dl	Up to 35
LDLC/HDLC Ratio (Calculated)	: 3.56	mg/dl	Up to 3.4
Total Lipid (Calculated)	: 620.3	mg/dl	400 - 1000 mg/dl
S. Bilirubin (Total)	: 0.62	mg/dl	up to 1.2
S. Bilirubin (Direct)	: 0.15	mg/dl	up to 0.2
S. Bilirubin (Indirect)	: 0.47	mg/dl	up to 1.0
SGOT	: 83.82	U/L	up to 40
SGPT	: 175.51	U/L	up to 42
GGT	: 75.03	U/L	12 - 64
S.Alkaline Phosphatase	: 126.31	U/L	40 - 129
Total Proteins	: 6.51	g/dl	6.0 - 8.3
Albumin	: 4.01	g/dl	3.5 - 5.2
Globulins	: 2.5	g/dl	2.4 - 3.7
AGRATIO	: 1.604		



Pathologist
DR. P.M.SHAH
G-12779

Patient Name : Mr. Abhimanyu Kumar Sundaram
Sample No.. : 7771
Reffered : Bank Of Baroda

Age/Sex : 32 Years/Male
Registration On:09/07/2022/12:28

Glycosylated HB - (HBA1C)

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Biological Ref Interval</u>
HBA1C: (Immunturbidimetric)	4.92	%	Normal : <= 5.6 Prediabetes : 5.7 - 6.4 Diabetes : > = 6.5 <u>DIABETES CONTROL CRITERIA</u> 6 - 7 : Near Normal Glycemia < 7 : Goal 7 - 8 : Good Control > 8 : Action Suggested
Mean Blood Glucose:	94.50	mg/dl	

Criteria for the diagnosis of diabetes

1. HbA1c \geq 6.5 *
Or
2. Fasting plasma glucose >126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.
Or
3. Two hour plasma glucose \geq 200mg/dL during an oral glucose tolerance test by using a glucose load containing equivalent of 75 gm anhydrous glucose dissolved in water.
Or.
4. In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose \geq 200 mg/dL. *In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing. American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34;S11.

Limitation of HbA1c

- 1) In patients with Hb variants even analytically correct results do not reflect the same level of glycemic control that would be expected in patients with normal population. 2) Any cause of shortened erythrocyte survival or decreased mean erythrocyte survival or decreased mean erythrocyte age eg. hemolytic diseases, pregnancy, significant recent/chronic blood loss etc. will reduce exposure of RBC to glucose with consequent decrease in HbA1c values. 3) Glycated HbF is not detected by this assay and hence specimens containing high HbF ($>10\%$) may result in lower HbA1c values than expected.

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BLOOD SUGAR LEVEL

Specimen :

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Biological Ref. Interval</u>
Fasting Blood Sugar: (GOD-POD)	107.97	mg/dl	70-110
Post Prandial Blood Glucose: (GOD-POD)	127.26	mg/dl	100 - 150

American Diabetes Association Reference Range :

Normal : < 100 mg/dl

Impaired fasting glucose(Prediabetes) : 100 - 126 mg/dl

Diabetes : >= 126 mg/dl

Conditions that can result in an elevated blood glucose level include: Acromegaly, Acute stress (response to trauma, heart attack, and stroke for instance), Chronic kidney disease, Cushing syndrome, Excessive consumption of food, Hyperthyroidism, Pancreatitis. A low level of glucose may indicate hypoglycemia, a condition characterized by a drop in blood glucose to a level where first it causes nervous system symptoms (sweating, palpitations, hunger, trembling, and anxiety), then begins to affect the brain (causing confusion, hallucinations, blurred vision, and sometimes even coma and death). A low blood glucose level (hypoglycemia) may be seen with: Adrenal insufficiency, Drinking excessive

alcohol, Severe liver disease, Hypopituitarism, Hypothyroidism, Severe infections, Severe heart failure, Chronic kidney (renal) failure, Insulin overdose, Tumors that produce insulin (insulinomas), Starvation.



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URINE EXAMINATION

PHYSICAL :

Colour - **Pale Yellow**
Deposits - **Absent**
Transparency - **Clear**
Reaction - **Acidic**
Sp. Gravity - **1.005**

CHEMICAL :

Albumin - **Absent**
Sugar - **Absent**
Bile Salts - **Absent**
Bile Pigments - **Absent**

MICROSCOPIC: (After centrifugation at 2000 r.p.m. for 5 minutes)

Pus Cells - **Ocassional** /h.p.f.
Red Cells - **Not seen** /h.p.f.
Epithelial Cells - **1 - 2** /h.p.f.
Casts - **Not seen**/l.p.f.
Crystals - **Not seen**
Amorphous - **Not seen**



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Kidney Function Test

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Normal Range</u>
S. Uric Acid:	6.59	mg/dl	3.2 - 7.2 mg/dl
Sr. Creatinine:	0.76	mg/dl	0.6 - 1.2 mg/dl
Urea:	16.71	mg/dl	10 - 50 mg/dl
Bun/Creat Ratio:	10.27		

Intrinsic renal damage (< 40: 1)



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