



Wey Thunde MRN: 163892 Age 36 Sex M. Date/Time Mob No. Investigations : (Please Tick) CBC **ESR** CRP S-Vit D3 S-Vit B12 **RBS** B Sugar - F/PP HbA1C LFT/KFT INR **RA Factor** Anti CCP HLA B27 Refus wor ANA HIV **HBsAg** Anti HCV Vitals B.P. Dr. Bhawna Garg P.R. MBBS, DIP.GO, PGDHA SPO₂ MEDICAL CO ORDINATOR RJN Apollo Spectra Hospital Temp Reg.No. MP18035 **Medical Illness** Hypertension Diabetes Thyroid Cardiac Disease

RATAN JYOTI NETRALAYA PRIVATE LIMITED

CIN: U85110MP2013PTC030901

Next Appointment/Follow up

Drug Allergies

Registered Office: 18, Vikas Nagar, Near Sai Baba Mandir, Gwalior - 474002

RJN APOLLO SPECTRA HOSPITALS

18, Vikas Nagar, Near Sai Baba Mandir, Gwalior - 474002 Ph. No.: 0751-2454600, 2450500 www.apollospectra.com Registered Vide No. NH/1542/MAR-2016

Signature:





: Mr. PRAVEEN GHUMDE

Age/Gender UHID/MR NO : 36 Y 0 M 0 D /M : ILK.00038809

Visit ID

: ILK.114294

Ref Doctor

: Dr.ARCOFEMI HEALTHCARE LIMITED

Collected

: 08/Mar/2024 09:37AM

Received

: 08/Mar/2024 09:56AM

Reported

: 08/Mar/2024 11:19AM

Status Client Name : Final Report : INSTA

DEPARTMENT OF HEMATOLOGY

COMM CETE DES	OD COOK! CD	/ HAEMOGRAM ,	Wilder Decoration	
Haemoglobin (Hb%)	13.8	gm%	14.0-17.0	Cyanmeth
P.C.V (Hematocrit)	40.9	%	40-54	Cell Counter
RBC Count	4.8	Mill./cu mm	4.00-5.50	Cell Counter
Mean Corpuscular Volume(MCV)	85.1	fL	76-96	Calculated
Mean Corpuscular Hb. (MCH)	28.7	pg	27.0-32.0	Calculated
Mean Corp. Hb. Conc.(MCHC)	33.7	g/dl	30.0-35.0	Calculated
RDW	15.3	%	11-16	Calculated
Total WBC count (TLC)	5,800	/cu mm	4000-11000	Cell Counter

Differential Count by Flowcytometry/Microscopy

Neutrophils	54.2	%	50-70	Cell Counter
Lymphocytes	37.1	%	20-40	
Monocytes	7.2	%	01-10	Cell Counter
Eosinophils	1.2	%	01-06	Cell Counter
Basophils	0.3	%	00-01	Cell Counter

Absolute Leucocyte Count

Neutrophil (Abs.)	3,144	per cumm	2000 - 8000	Calculated
Lymphocyte (Abs.)	2152	per cumm	600-4000	Calculated
Monocyte (Abs.)	417	per cumm	0-600	Calculated
Eosinophil (Abs.)	70	per cumm	40-440	Calculated
Basophils (Abs.)	17	per cumm	0-110	Calculated
Platelet Count	3.00	Lac/cmm	1.50-4.00	Cell Counter

ERYTHI	ROCYTE SEDIN	MENTATION RATE (E	SR)	
Erythrocyte Sedimentation Rate (ESR)	12	mm lst hr.	0-20	Wester Green

Page 1 of 9





DR. ASHOK KUMAR

M.D. (PATH)

RJN Apollo Spectra Hospitals

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DEPARTMENT OF HEMATOLOGY

BLO	OD GROUPING(A,B,O) AND RH FACTOR , v	VHOLE BLOOD EDTA
Blood Grouping	Α	Slide/Tube Agglutination
Rh (D) Type	POSITIVE	Slide/Tube Agglutination

BLOOD PICTURE - PERIPHERAL SMEAR EXAMINATION, WHOLE BLOOD EDTA

RBC'S

: Normocytic Normochromic RBC's.

No cytoplasmic inclusions or hemoparasite seen.

WBC'S

: Normal in number, morphology and distribution. No toxic granules seen.

No abnormal cell seen.

PLATELETS: Adequate on smear.

IMPRESSION; NORMOCYTIC NORMOCHROMIC BLOOD PICTURE.

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DEPARTMENT	OF BIOCHEMISTRY-ROUTINE
------------	-------------------------

Test Name	Result	Unit	Bio. Ref. Range	Method

GLUCOSE - FASTING	(FBS), NA	F PLASMA
--------------------------	-----------	----------

Facting Clusose	94.0	mg/dL	65-110	God - Pod
Fasting Glucose	34.0	mg/uc	05 110	000 .00

Ref. for Biological Reference Intervals: American Diabetic Assiosation.

GLUCOSE, POST PRANDIAL (F	(PP), 2 HOURS (I	POST MEAL),	FLUORIDE PLASMA
---------------------------	------------------	-------------	-----------------

Post Prandial Glucose	108.0	mg/dL	90-140	2hrs. aftergm
1 OSC 1 Tarrara				glucose/lunch

Ref.for Biological Reference Intervals: American Diabetic Assiosation.

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A.K. Rajong

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DEPARTMENT OF BIOCHEMISTRY-ROUTINE					
Test Name	Result	Unit	Bio. Ref. Range	Method	

GLYCOSYLATED	HAEMOGLOBIN	(GHB/HBA1	.C) , WHOLE BLOOD EDTA	
Glycosylated Haemoglobin HbA1c	5.1	%	Normal: <5.7 Pre-Diabetes: 5.7-6.4 Diabetes: 6.5	NEPHELOMETRY
Approximate mean plasma glucose	99.67	- Pr 1	9.	Calculated

Ref.for Biological Reference Intervals: American Diabetes Association.

INTERPRETATION:

The A1C test measures your average blood glucose for the past 2 to 3 months. Diabetes is diagnosed at an A1C of greater than or equal to 6.5%.

Therapeutic goals for glycemic control (ADA)

-Adults:

- Goal of therapy: <7.0% HbA1c
- Action suggested: >8.0% HbA1c

-Pediatric patients:

- Toddlers and preschoolers: <8.5% (but >7.5%)
- School age (6-12 years): <8%
- Adolescents and young adults (13-19 years): <7.5%

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A. Klajonya.

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DEPARTMENT	OF	BIOCHEMISTRY-ROUTINE
------------	----	----------------------

Test Name	Result	Unit	Bio. Ref. Range	Method
	COMPLETE KIDNEY PR	OFILE (RFT/KFT)	, SERUM	
Urea	19.28	mg/dL	13.0-43.0	Urease
Creatinine	0.7	mg/dL	0.5-1.3	Enzymatic
Uric Acid	5.0	mg/dL	3.5-7.2	Urease
Sodium	138.0	Meq/L	135-155	Direct ISE
Potassium	4.2	Meq/L	3.5-5.5	Direct ISE
Chloride	105.0	mmol/L	96-106	Direct ISE
Calcium	9.5	mg/dL	8.6-10.0	OCPC
Phosphorous	3.8	mg/dL	2.5-5.6	PMA Phenol
BUN	9.01	mg/dL	6.0-20.0	Reflect Spectrothoto

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Reported Status

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DEPARTMENT OF	BIOCHEMISTRY-ROUTINE
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Test Name	Result	Unit	Bio. Ref. Range	Method
	LIPID PROI	FILE , SERUM	A	
Type OF Sample	SERUM			
Total Cholesterol	173.0	mg/dl	up to 200	End Point
Total Triglycerides 101.0		mg/dL	Borderline High Risk: 150-199 High Risk: 200-499 Very High Risk: >500	End Point
HDL Cholesterol	43.0	mg/dL	Optimal: >55 Border Line High Risk: 35-55 High Risk:- <35	Reflect Spectrothoto
Non - HDL Cholesterol	130	mg/dL	<130	
LDL Cholesterol	109.8	mg/dL	49-172	Reflect Spectrothoto
VLDL Cholesterol	20.2	mg/dL	5.0-40.0	Reflect Spectrothoto
Chol / HDL Ratio	4.02		Low Risk: 3.3-4.4 Average Risk: 4.5-7.1 Moderate Risk: 7.2- 11.0 High Risk: >11.0	CALCULATED

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A.K. Feet Jr.

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Method

Patient NAME

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Age/Gender UHID/MR NO : 36 Y 0 M 0 D /M : ILK.00038809

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: 08/Mar/2024 09:56AM

Reported

: 08/Mar/2024 12:08PM

Bio. Ref. Range

Status

: Final Report

Client Name : INSTA

Unit

DEPARTMENT	OF	BIOCHEMISTRY-ROUTINE
------------	----	----------------------

Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER	FUNCTION TEST	(LFT) WITH GG	T , SERUM	
Total Bilirubin	0.7	mg/dL	0.2-1.2	Jendrassik-Grof
Direct Bilirubin	0.1	mg/dL	0.0-0.3	Jendrassik-Grof
Indirect Bilirubin	0.6	mg/dL	0.0-0.9	Calculated
SGOT / AST	20.0	U/L	1-30	UV Kinetic (IFCC)
SGPT / ALT	13.0	U/L	1-45	UV Kinetic (IFCC)
Alkaline Phosphatase	44.0	U/L	43-115	PNPP
Gamma Glutaryl Transferase (GGT)	11.0	U/L	0.0-55.0	Reflect Spectrophoto
Total Protein	6.9	g/dl	6.4-8.3	Biuret
Albumin	4.6	g/dL	3.5-5.2	BCG
Globulin	2.3	g.dl	2.0-3.5	Calculated
A/G Ratio	2.00	%	1.0-2.3	Calculated

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Collected

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Received

: 08/Mar/2024 01:04PM

Reported

: 08/Mar/2024 03:06PM

Status Client Name : Final Report

ent Name : INSTA

	DEPARTMENT OF BIO	CHEMISTRY-S	PECIAL	
Test Name	Result	Unit	Bio. Ref. Range	Method

	THYROID PR	OFILE-I, SERUM		
Trilodothyronine Total (TT3)	1.31	ng/dL	0.6-1.8	Chemilluminisence
Thyroxine (TT4)	10.10	μg/dL	4.5-10.9	Chemilluminisence
Thyroid Stimulating Hormone (TSH)	4.250	μIU/ml	0.35-5.50	Chemilluminisence

COMMENT:- Above mentioned reference ranges are standard reference ranges.

AGE RELATED GUIDLINES FOR REFERENCE RANGES FOR TSH

TSH	NEW BORN	INFANT	CHILD	ADULT
(u lu/ml)	0.52-38.9	1.7-9.1	0.7-6.4	0.3-5.6
PREGNENCY R	ELATED GUIDLINES FOR F	REFERENCE RANGE	S FOR TSH	
TSH	1st Trimester	2nd & 3rd Tri	mester	
(u lu/ml)	0.2 - 2.5	0.3 - 3.0		

NOTE: TSH levels are subject to circadian variation, reaching peak levels between 2-4 AM and at a minimum between 6-10 PM. Dose and time of drug intake also influence the test result.

Ultrasensetive kits used.

Serum T3/ FT3 , T4/FT4 and TSH measurements form three components of thyroid screening panel.

- :-Primary hypethyroidism is accompanied by elevated serum T3 & T4 values alongwith depressed TSH level.
- :- Primary hypothyroidism is accompanied by elevated serum T3 & T4 values & elevated serum TSH level.
- :-Normal T3 &T4 levels with high TSH indicate mild / subclinical HYPOTHYROIDISM.
- :-.singhtly elevated T3 levels may be found in pregnancy and in estrogen therapy while depressed levels may be encountered in severe illness, malnutrition, renal failure and during therapy with drugs like propanolol.
- :-Although elevated TSH levels are nearly always indicative of primary hypothyroidism. Rarely they can result from TSH secreting pituitary tumours (seconday hypothyroidism).

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A.K. Reyond

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lient	: N	lam	e	

: INSTA

	DEPARTMENT OF CL	INICAL PATHO	LOGY	
Test Name	Result	Unit	Bio. Ref. Range	Method
rest italife				

CUE - COMPLETE URINE ANALYSIS , URINE

Physical Examination

Colour	STRAW			Visual
Appearance	Clear	(E) /!		Visual
рН	6.5		5.0-7.5	Dipstick
Specific Gravity	1.015		1.002-1.030	Dipstick

Chemical Examination

Albumin Urine/ Protein Urine	NIL	NIL	Dipstick/Heat Test
Glucose Urine	NIL	NIL	Dipstick/Benedict
Urobilinogen	NIL	NIL	Dipstick/Ehrlichs
Ketones	NIL	NIL	Dipstick/Rotheras
Bile Salts	ABSENT	ABSENT	Dipstick
Bile Pigments	ABSENT	ABSENT	Dipstick/Fouchets
Nitrite	ABSENT	ABSENT	Dipstick

Microscopic Examination.

Pus Cells	1-2	/Hpf	0-2	
Epithelial Cells	2-3	Hpf	<10	
RBC	ABSENT	/Hpf	ABSENT	
Casts	ABSENT		ABSENT	
Crystals	ABSENT		ABSENT	
Bacteria	NORMALLY PRESENT		NORMALLY PRESENT	
Budding Yeast Cells	Absent		Absent	

*** End Of Report ***

Page 9 of 9





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ECHO CARDIOGRAPHY REPORT

Patient Name : MR PRAVEEN

Date

: 08/03/2024

AGE & Sex :36yrs/M

Echocardiography was performed on vivid T8

Quality Of Imaging : Adequate Mitral Valve

:Normal

Tricuspid Valve

: Normal

Aortic Valve

: Normal

Pulmonary Valve : Normal Left Atrium

Left Ventricle

: 3.4cms

IVSD

: 1.2 cms

LVPWD: 1.2cms

EDD : 4.6 cms **ESD** : 3.0 cms

EF 60% FS 32%

RWMA

: NO REGIONAL WALL MOTION ABNORMALITY

Right Atrium Right Ventricle

: Normal

Aorta

: Normal : 3.1cms

: Intact

IAS IVS Pulmonary Artery

: Normal

Pericardium

: Normal

SVC, IVC

: Normal

Pulmonary Artery : Normal

Intracardiac Masses: Nil

Doppler

E > A

Conclusion:

NORMAL CARDIAC CHAMBERS DIMENSION. NO REGIONAL WALL MOTION ABNORMALITY NORMAL LV SYSTOLIC FUNCTION, LVEF-60% NORMAL VALVES INTACT SEPTUM NO CLOT /VEGETATION /PERICARDIAL EFFUSION

S.MD (1 (Cardiology) sultant ventional-Cardiology RJN Apollo Spectra Hospitals Reg.No. MP 12056

Consultant Dr. Abhishek sharma (DNB) (Interventional Cardiologist)

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Patient Name flillellu	Age	Sex Date/Time
Investigations : (Please Tick)		Mob No
CBC		
ESR		
CRP	1	
S-Vit D3	yeall in check	cup
S-Vit B12	,	
RBS 01		
B Sugar - F/PP		
HbA1C	0 10	
LFT/KFT	Calc "	
PT	cul- n	
INR	8/110	
RA Factor	Calan n 81th n Go. guzin	
Anti CCP	40.	
HLA B27		
ANA	1	
HIV (1/p -	onal purply	-
HBsAg		
Anti HCV		
Vitals		
B.P.		
P.R.	1	
SPO2	chel sos m/s	
lemp	/	701 VOC 1
		11-
Medical Illness		- 1
Hypertension		M
Diabetes		
Thyroid		
Cardiac Disease		\bigcap
Drug Allergies		
Next Appointment/Follow up		Signature :

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OPHTHALMIC INSTITUTE & RESEARCH CENTRE

Hospital Reg. No.: 071



18, Vikas Nagar, Near Sai Baba Mandir, Gwalior-2 (M.P.) INDIA Tel.: 2423350/51, Web: www.ratanjyotigroup.org, Email:rjneye@gmail.com Opp. Medical College, Gate No. 3 Jhansi-284128 (U.P.) Ph. 0510-2322311 (M) 9109973225

SR.NO.

: 08-March-2024

NAME AGE/SEX : MR PRAVEEN GHUMDE : 36 YRS / MALE

MRD NO. CITY

: R-117952 : GWALIOR

VISION	DISTANCE		NEAR	
VISION	OD	os	OD	OS
UNAIDED	6/36 P	6/36 P		
WITH GLASSES	6/6	6/6 B		
WITH PIN HOLE		6/6		
WITH COLOR				
VISION				

IOP READING TIME OD OD METHOD OS METHOD 16 17 11:24AM

Rx.

EYE

From

To

Instructions

1 LUBREX EYE DROP

10ML/CARBOXYMETHYLCELLULOSE EYE DROPS

IP (0.5% W/V)

ONE DROP 4 TIMES A DAY FOR 30 DAYS

BOTH EYE 8-Mar-2024 6-Apr-2024

2 OLOPAT EYE DROP 5ML (OLOPATADINE

HYDROCHLORIDE OPHTHALMIC SOLUTION IP

0.1% W/V)

ONE DROP 2 TIMES A DAY FOR 30 DAYS

BOTH EYE 8-Mar-2024 6-Apr-2024

TREATMENT PLAN

: - CONTINUE SAME GLASSES

-20-20-20 RULES EXPLAINED

-DO NOT RUB EYES

REFFERED TO

NEXT REVIEW

AS PER DR. ADVISED

DR. JYOTSNA SHARMA

NOTE

: Kindly continue medications as advised for the period advised.

In case of redness or allergy please discontinue and inform the doctor.

Nutritional Advice

: As per treating physician

Instructions

: Patient and Attendant(s) Counselled

Advised medicine may be replaced with a good quality generic medicine.

Speciality Clinics: Comprehensive Ophthalmology Clinic Cataract & IOL Clinic Vitreo Retina & Uvea Clinic Spectacle Removal Clinic (Lasik/Femto Lasik/Phakic Lens) - Cornea Clinic - Glaucoma Clinic - Orbit & Oculoplasty Clinic - Trauma Clinic - Squint Clinic Paediatric Ophthalmology Clinic Low Vision Aid Clinic Contact Lens Clinic

CONSULTATION TIMINGS: MORNING 9:00 A.M. TO 6:00 P.M. (SUNDAY OFF)

केन्द्रीय कर्मचारियों के लिए मान्यता प्राप्त
 कैशलैस इंश्योरेन्स एवं टी.पी.ए. सुविधा उपलब्ध

For Appointment Please Contact: 9111004046

स्वामी विद्यानंद भारती आई बैंक नेब्रदान

करें और करायें इसे अपने परिवार की परम्परा बनायें नेत्रदान के लिए सम्पर्क करें : 9111004044





PATIENT NAME PRAVEEN GHUMDE 36Y/M

REFERRED BY H.C.P

DATE 08/03/2024

INVESTIGATION USG WHOLE ABDOMEN

IMAGING FINDINGS:-

Liver appears normal in size, position, shape and margin. Parenchyma shows increased echogenecities. . The intrahepatic biliary and portal venous radicles appear normal. Hepatic veins and portal vein are normal.

Gall Bladder is well distended. GB wall and lumen content appears normal. No echogenic focus within GB lumen. Visualized CBD is of normal caliber.

Spleen appears normal in size (~ 9.6cm), position, shape, echotexture and margin. No any focal lesion within splenic parenchyma. Splenic vein is normal and undilated.

Pancreas is obscured due to poor window.

Both Kidneys: Measurements are right kidney ~ 9.7x4.3cm and left kidney ~ 9.8x5cm. Both kidneys are normal in position, size, shape, surface, echotexture and cortico-medullary differentiation. Bilateral PC systems are compact. No significant calculus or hydronephrosis on either side. Ureters are undilated on either side

Urinary Bladder is normal in shape, wall and content.

Prostate appears normal in size (~ 15.2cc), shape and echotexture.

No obvious ascites.

OPINION: Features are suggestive of-

Grade I fatty liver

Suggested clinical correlation/Follow up imaging.

DR. SAKSHI CHAWLA (MD RADIODIAGNOSIS)

Disclaimer: The science of radiology is based upon interpretation of shadows of normal and abnormal tissue. This is neither complete nor accurate; hence, findings should always be interpreted in to the light of clinico-pathological correlation. This is a professional opinion, not a diagnosis. Not meant for medico legal purposes. For any kind of typing error, please intimate us within 7 days of reporting.















Patient name	MR. PRAVEEN GHUM	Age/sex	26V/M
Ref. By	163692		36Y/M
	103092	Date	08.03.24

XRAY CHEST

- The lung fields appear clear.
- Bilateral C.P. angles appear clear.
- Cardiac size within normal limits.
- Soft tissue shadow and bony thoracic cage appears normal.

Please correlate clinically.

DR. ANOOP ARYA (SINGHAL)
DMRD, DNB (RADIODIAGNOSIS)

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