



Mr. Jakkhar Bhag. 38 y/m

NO W/O HTN/DM

O/E

BP- 100/60 mmHg

PR- 72/min

SpO₂- 98% RA

Act

R/V 2 reports/sec

CNS
EVS
R/S
PIA

|

NNL



Cert. No. H-2016-0369

Cert. No. MC-4830

(This is only professional opinion and not the diagnosis, please correlate clinically)

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Mr. Takhar Bhag
38yrs/M

① o/e - Root stump 24
Stain ++, calculus ++

Adv: ① Sealing & polishing
② Extⁿ 24



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671594

MR. JAWAR BHAG SINGH
38y/M

Routine eyes checkup

VN { - GIG
 - GIG unaddled
NV { - NG
 - NG

Colour Vision - Normal BE

Fundus Examination - WNL



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Mr. Jashwan · Bhag



Park Hospital
GROUP SUPER SPECIALITY HOSPITAL

38/11
9/2/23



For medical exam

Ear.



Throat - NAD

Nose - mild DNS (+) to R

Res NAD



Σ
9/2/23

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DEPARTMENT OF PATHOLOGY

Patient Name : Mr. JAKHAR BHAG SINGH
MR No : 671594
Age/Sex : 38 Years 5 Months / Male
Type : OPD
TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 09/02/2023
Reporting Date : 09/02/2023
Sample ID : 97824
Bill/Req. No. : 24038707
Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
URINE ROUTINE AND MICROSCOPY				
PHYSICAL CHARACTERSTICS				
QUANTITY	30ml	5 - 100	ml	Vishal
COLOUR	Pale Yellow	Pale Yellow		
TURBIDITY	Clear	clear		
SPECIFIC GRAVITY	1.015	1.000-1.030		urinometer
PH	Acidic	Acidic/Alkaline		PH PAPER
CHEMICAL EXAMINATION-1				
UROBILINOGEN	NIL	NIL		Ehrlich
URINE PROTEIN	NIL	NIL	mg/dl	Protein error indicator
BLOOD	NIL	NIL		
GLUCOSE	NIL	NIL	mg/dL	GOD-POD/Benedicts
URINE KETONE	NIL	NIL		SOD.
MICRO.EXAMINATION				
PUS CELL	2-4	0-5	cells/hpf	Microscopic
RED BLOOD CELLS	Nil	0-2	cells/hpf	
EPITHELIAL CELLS	1-2	0-5	cells/hpf	
CASTS	nil	NIL	/lpf	
CRYSTALS	NIL	NIL	/hpf	
OTHER	nil			

***** END OF THE REPORT *****



Sample no.

Dr. SONIA KUMARI
MBBS, MD (PATHOLOGY) Gold medalist

Dr. PRADIP KUMAR
Consultant (Microbiology)

Dr. NISHA TIWARI
MBBS, MD (Microbiology)

USER NM : SHOABPA166



Cert. No. H-2016-0389 Cert. No. MC-4830

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DEPARTMENT OF PATHOLOGY

Patient Name : Mr. JAKHAR BHAG SINGH
MR No : 671594
Age/Sex : 38 Years 5 Months / Male
Type : OPD
TPA/Corporate : MEDIWHEEL PVT LTD
Ref Doctor : Dr.RMO

Bill Date : 09/02/2023 1.08 PM
Sample Col Dt/Tm : 09/02/2023 01:24 pm
Sample Rec Dt/Tm : 09/02/2023 01:24 pm
Reporting Date : 2023-02-09 00:29:02
Sample ID : 97824
Bill/Req. No. : 24038707

Test	Result	Bio. Ref. Interval	Units	Method
BLOOD SUGAR FASTING				
PLASMA GLUCOSE FASTING	93	60 - 110	mg/dl	GOD TRINDERS

***** END OF THE REPORT *****



Dr. PRADIP KUMAR
Consultant (Microbiology)

Dr. SONIA KUMARI
MD Pathology (Gold Medalist)

Dr. NISHA TIWARI
MBBS, MD (Microbiology)
USER NM ARUN



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MR No : 671594
Age/Sex : 38 Years 5 Months / Male
Type : OPD
TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 09/02/2023
Reporting Date : 09/02/2023
Sample ID : 97624
Bill/Req. No. : 24038707
Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
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BLOOD GROUPING AND RH FACTOR

BLOOD GROUP	"A" RH POSITIVE	MATRIX GEL
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***** END OF THE REPORT *****



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Consultant (Microbiology)

Dr. NISHA TIWARI
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USER NM ARUN



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DEPARTMENT OF PATHOLOGY

Patient Name : Mr. JAKHAR BHAG SINGH
 MR No : 671594
 Age/Sex : 38 Years 5 Months / Male
 Type : OPD
 TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 09/02/2023
 Reporting Date : 09/02/2023
 Sample ID : 97824
 Bill/Req. No. : 24038707
 Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
CBC				
HAEMOGLOBIN	15.2	12 - 16	gm/dL	COLORIMETRY
TOTAL LEUCOCYTE COUNT	6100	4000-11000	/ μ L	ELECTRICAL
DIFFERENTIAL COUNT				
NEUTROPHILS	50	40.0 - 80.0	%	FLOW CYTOMETRY
LYMPHOCYTES	45	20.0 - 40.0	%	FLOW CYTOMETRY
MONOCYTES	03	2.0 - 10.0	%	FLOW CYTOMETRY
EOSINOPHILS	02	0.0 - 5.0	%	FLOW CYTOMETRY
BASOPHILS	00	0.0 - 2.0	%	FLOW CYTOMETRY
RED BLOOD CELL COUNT	4.9	3.5 - 5.5	millions/ μ L	ELECTRICAL
PACKED CELL VOLUME	49.2	35.0 - 50.0	%	ELECTRICAL
MEAN CORPUSCULAR VOLUME	98.8	83 - 101	fL	ELECTRICAL
MEAN CORPUSCULAR HAEMOGLOBIN	30.5	27 - 31	Picograms	CALCULATED
MEAN CORPUSCULAR HB CONC	30.9	33 - 37	g/dl	CALCULATED
PLATELET COUNT	210	150 - 450	thou/ μ L	ELECTRICAL
RDW	12.2	11.6 - 14.5	%	CALCULATED
SPECIMEN TYPE	WHOLE BLOOD-EDTA			

***** END OF THE REPORT *****



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DEPARTMENT OF PATHOLOGY

Patient Name : Mr. JAKHAR BHAG SINGH
MR No : 671594
Age/Sex : 38 Years 5 Months / Male
Type : OPD
TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 09/02/2023
Reporting Date : 09/02/2023
Sample ID : 9782415
Bill/Req. No. : 24038707
Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
ESR (WESTERGREN)				
E.S.R. - II HR.	15		mm II Hr.	Westergren

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DEPARTMENT OF PATHOLOGY

Patient Name : Mr. JAKHAR BHAG SINGH
MR No : 671594
Age/Sex : 38 Years 5 Months / Male
Type : OPD
TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 09/02/2023
Reporting Date : 09/02/2023
Sample ID : 97824
Bill/Req. No. : 24038707
Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
THYROID PROFILE				
TRI-IODOTHYRONINE (T3)	1.58	0.60 - 1.81	ng/ml	Chemiluminescence
THYROXINE (T4)	8.9	5.01 - 12.45	µg/dL	Chemiluminescence
THYROID STIMULATING HORMONE	1.15	0.5-5.50 ,	µIU/ml	
SPECIMEN TYPE	SERUM			
Method : chemiluminescent immunoassay				

Note : Clinical Significance:

Thyroid function tests (TFTs) is a collective term for blood tests used to check the function of the thyroid. TFTs may be requested if a patient is thought to suffer from hyperthyroidism (overactive thyroid) or hypothyroidism (underactive thyroid), or to monitor the effectiveness of either thyroid-suppression or hormone replacement therapy. It is also requested routinely in conditions linked to thyroid disease, such as atrial fibrillation and anxiety disorder. A TFT panel typically includes thyroid hormones such as thyroid-stimulating hormone (TSH, thyrotropin) and thyroxine (T4), and triiodothyronine (T3) depending on local laboratory policy.

Note: Please correlate with clinical condition

***** END OF THE REPORT *****



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TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 09/02/2023
Reporting Date : 09/02/2023
Sample ID : 97824
Bill/Req. No. : 24038707
Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
LFT (LIVER FUNCTION TEST)				
LFT				
TOTAL BILIRUBIN	0.5	0 - 1.2	mg/dL	DIAZO
DIRECT BILIRUBIN	0.2	0 - 0.4	mg/dL	DIAZO
INDIRECT BILIRUBIN	0.3	0.10 - 0.6	mg/dL	CALCULATED
SGOT (AST)	26	0 - 45	U/L	IFCC WITHOUT
SGPT (ALT)	43	0 - 45	U/L	IFCC WITHOUT
ALKALINE PHOSPHATASE	89	30 - 170	IU/L	MODIFIED IFCC
TOTAL PROTEINS	6.8	6.4 - 8.0	g/dL	BIURET
ALBUMIN	4.2	3.3 - 5.5	g/dL	BCG DYE
GLOBULIN	2.6	2.3 - 4.5	g/dL	CALCULATED
A/G RATIO	1.62	1.1 - 2.2		CALCULATED
SPECIMEN TYPE	SERUM			

***** END OF THE REPORT *****



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DEPARTMENT OF PATHOLOGY

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 MR No : 671594
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 Type : OPD
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Bill Date : 09/02/2023
 Reporting Date : 09/02/2023
 Sample ID : 97824
 Bill/Req. No. : 24038707
 Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
KFT (RENAL PROFILE)				
KFT				
SERUM UREA	21	10 - 45	mg/dL	UREASE-GLDH
SERUM CREATININE	1.1	0.4 - 1.4	mg/dL	MODIFIED JAFFES
SERUM URIC ACID	6.2	2.5 - 7.0	mg/dL	URICASE
SERUM SODIUM	137	136 - 148	mmol/L	ISE
SERUM POTASSIUM	4.0	3.5 - 5.5	meq/l	ISE
SERUM CALCIUM	8.8	8.5 - 10.5	mg/dL	ARSENazo III
SERUM PHOSPHORUS	2.4	L 2.5 - 4.5	mg/dL	AMMONIUM
SPECIMEN TYPE	SERUM			

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Test	Result	Bio. Ref. Interval	Units	Method
LIPID PROFILE				
LIPID PROFILE				
TOTAL CHOLESTEROL	178	0 - 250	mg/dL	CHOD -Trinder
SERUM TRIGLYCERIDES	124	60 - 165	mg/dl	GPO-TRINDER
HDL-CHOLESTEROL	52	30 - 70	mg/dl	DIRECT
VLDL CHOLESTEROL	24	6 - 32	mg/dL	calculated
LDL	102	50 - 135	mg/dl	calculated
LDL CHOLESTEROL/HDL RATIO	1.9	1.0 - 3.0	mg/dL	calculated
TOTAL CHOLESTEROL/HDL RATIO	3.4	2.0 - 5.0	mg/dl	calculated
SPECIMEN TYPE	SERUM			

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Sample ID : 97824
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Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
PSA TOTAL				
PROSTATE SPECIFIC ANTIGEN(PSA)	0.36	L 0.57 - 4.0	ng/ml	Chemiluminescence
SPECIMEN TYPE	SERUM			
Method : chemiluminescent immunoassay				

Note : Clinical Use: -

An aid in the early detection of Prostate cancer in Male. Follow up and amazement of Prostate cancer patients. Detect metastatic or persistent disease in patients following surgical or medical treatment of Prostate cancer

Note: -

False negative / positive results are observed in patients receiving mouse monoclonal antibodies for diagnosis or therapy. PSA levels may appear consistently elevated / depressed due to the interference by heterophilic antibodies & no specific protein binding. PSA values regardless of levels should not be interpreted as absolute evidence of the presence or absence of disease. All values should be correlated with clinical findings and results of other investigations.

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MBBS, MD (Microbiology)

USER NM DINESH



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Cert. No. MC-4839

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NAME	: MR. JAKHAR BHAG SINGH	DATE	: 9 / 2 / 2023
Age Sex	: 38 Years / Male	Inpatient No	:
PERFORMED BY	: Dr. ELA MADAAN	BILL NO.	: 24038707

TRANS THORACIC ECHO CARDIOGRAPHY REPORT

MITRAL VALVE

Morphology AML: Normal / Thickening / Calcification / Flutter / Vegetation / Non significant Prolapse / SAM
PML: Normal / Thickening / Calcification / Prolapse / Paradoxical Motion / Fixed.
Subvalvular deformity: Present / Absent

Doppler Normal / Abnormal
Mitral Stenosis Present / Absent
Mitral Regurgitation; Absent / Normal / Mild / Trace / Moderate / Severe.

TRICUSPID VALVE

Morphology Normal / Atresia / Thickening / Calcification / Prolapse / Vegetation / Doming.
Doppler Normal / Abnormal
Tricuspid Stenosis: Present / Absent.
Tricuspid Regurgitation: Absent / Mild / Trace / Moderate

PULMONARY VALVE

Morphology Normal / Atresia / Thickening / Calcified / Doming / Vegetation.
Doppler Normal / Abnormal.
Pulmonary stenosis: Present / Absent
Pulmonary regurgitation: Present / Absent

AORTIC VALVE

Morphology Normal / Thickened / Mildly / Calcified / Flutter / Vegetation / Restricted / Opening
No. of Cusps 1 / 2 / 3 / 4
Doppler Normal / Abnormal
Aortic Stenosis : Present / Absent
Aortic regurgitation : Present / Absent / Mild / Trace



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<u>Measurements</u>	<u>Normal Values</u>	<u>Measurements</u>	<u>Normal Value</u>
IVSD : 1.0cm	(0.6-1.1cm)	LA : 3.2cm	(1.9-4.0cm)
LVID : 5.0cm	(3.7-5.6cm)	LVOT : 1.4cm	
LVPW : 0.8cm	(0.6-1.1cm)	AORTA : 3.0cm	(2.0-3.7cm)
EF : 55%	(55% - 80%)	IVSmotion :	Normal / Flat / Paradoxical
Any Other			

CHAMBERS:-

LV Normal / Enlarged / Clear / Thrombus /
 Contraction Normal LV shows concentric LVH, no gradient across LVOT / Inetic / Intra capillary
 Regional wall motion abnormality: Absent/ Present

LA Normal / Enlarged / Clear / Thrombus / Myxoma; **LAA: Clear** / Thrombus

RA Normal / Clear / Thrombus, Dilated.

RV Normal / Mildly Dilated / Enlarged / Clear / Thrombus / Hypertrophied/
PERICARDIUM Normal / Thickening / Calcification / Effusion.

COMMENTS & SUMMARY:-

- All Cardiac Chamber Dimensions are within normal limits.
- Global LVEF 55%
- No RWMA
- NORMAL LV FUNCTION
- NO MR / NO AR
- TRACE TR
- GOOD RV FUNCTION
- IAS/IVS. No Flow seen across IAS/IVS.
- No Thrombus/Mass in any chamber.
- No Pericardial Effusion.

Please correlate clinically

Dr. ELA MADAAN
 MBBS, PGDCC
 Fellowship in non Invasive
 Cardiology



Cert. No. H-2015-0369 Cert. No. MC - 4530

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DEPARTMENT OF RADIOLOGY

Patient Name	Mr JAKHAR BHAG SINGH	Billed Date	: 09/02/2023	1:08 PM
Reg No	671594	Reported Date	: 09/02/2023	
Age/Sex	38 Years 5 Months / Male	Req. No.	: 24038707	
Type	OPD	Consultant Doctor	: Dr. RMO	

X-RAY CHEST AP/PA

X-RAY CHEST P.A. VIEW

Bilateral lungs appears normal.
 No focal lung lesion seen.
 No evidence of free fluid is seen.
 Both hila are normal in size, have equal density and bear normal relationship.
 The heart and trachea are central in position and no mediastinal abnormality is visible.
 The cardiac size is normal for patient age and view.
 The domes of the diaphragms are normal in position, and show smooth outline.
 To be correlated clinically

Dr. ANSHU K. SHARMA
MBBS, MD
CONSULTANT RADIOLOGIST

Dr. MANJEET SEHRAWAT
MBBS, MD, PDCC
CONSULTANT RADIOLOGIST



Dr. NEENA SIKKA
MBBS, DNB
CONSULTANT RADIOLOGIST

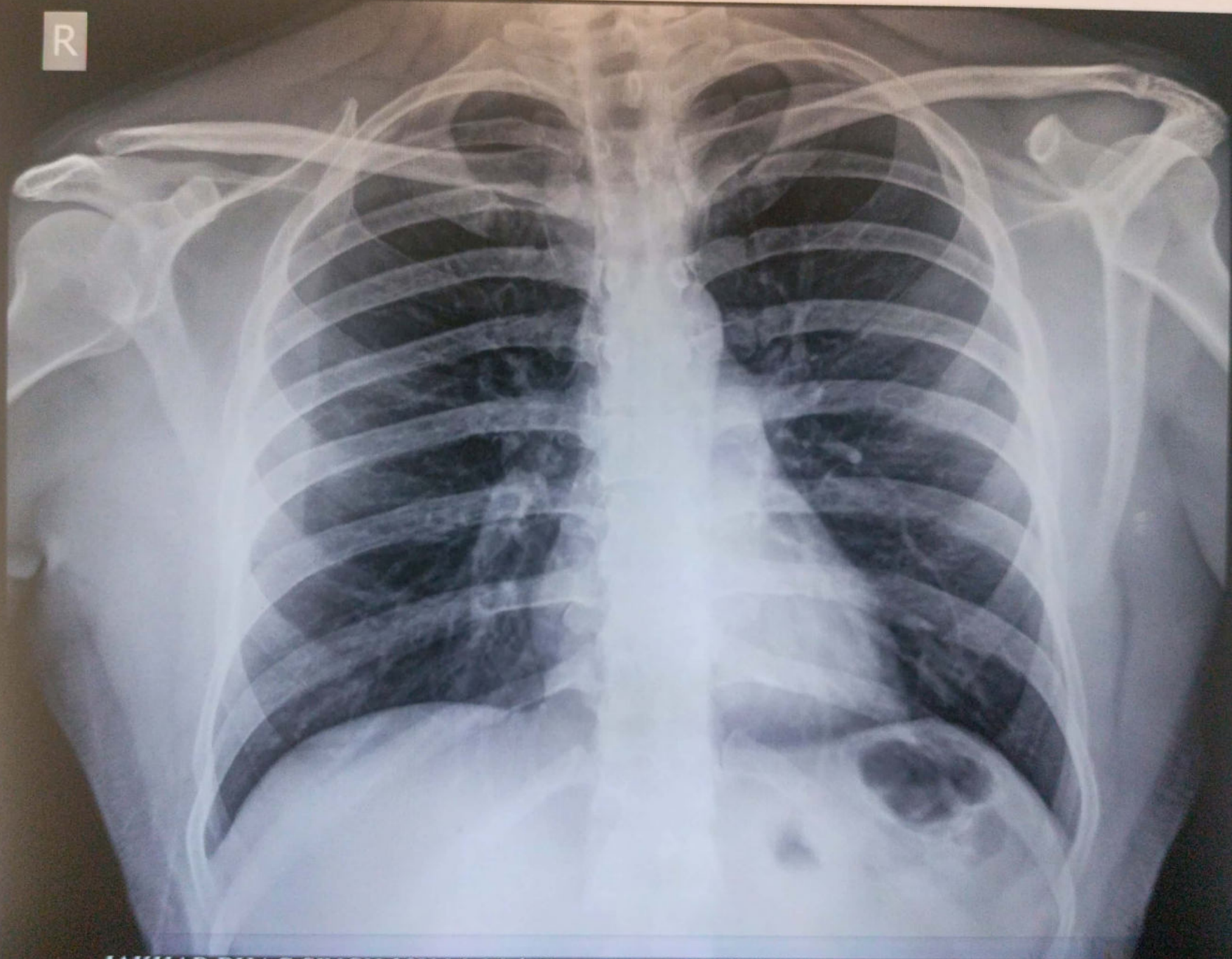


(This is only professional opinion and not the diagnosis, please correlate clinically)

Q Block, South City -II, Sohna Road, Sector-47, Gurgaon, Haryana
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PARK GROUP OF HOSPITALS : West Delhi • Gurugram • Faridabad • Sonapat • Panipat • Karnal • Ambala • Patiala • Behror • Jaipur

R



JAKHAR BHAG SINGH 38Y M Mal Chest PA REQ24038707 2/9/2023 1:04:34 PM
PARK HOSPITAL, SOUTH CITY II, GURGAON, HARYANA



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USG WHOLE ABDOMEN

The Real time, B mode, gray scale sonography of the abdominal organs was performed.

LIVER : The liver is normal in size, 14.2 **with fatty infiltration**. No evidence of any focal lesion. IHBR is not dilated.

GALL BLADDER :The gall bladder is well distended. No evidence any calculus or mass seen.No evidence of pericholecystic fluid is seen.

BILE DUCT :The common bile duct is normal in caliber. No evidence of calculus is noted in common bile duct.

SPLEEN :The spleen is normal in size 7.8 cm and shape.Its echotexture is homogeneous.No evidence of focal lesion is noted.

PANCREAS :The pancreas is normal in size, shape, contours and echotexture.No evidence of solid or cystic mass lesion is noted.MPD is not dilated. No evidence of peripancreatic collection.

KIDNEYS :The bilateral kidneys are normal in size and echotexture. Cortico-medullary differentiation is maintained.There is no evidence of obvious calculus or hydronephrosis.

URINARY BLADDER :The urinary bladder is well distended.Wall thickness within normal limits.No evidence of calculus is seen.No evidence of mass or diverticulum is noted.

PROSTATE: Prostate appears normal in shape, size and echotexture.

No evidence of ascites or interbowel free fluid is seen.
No evidence of obvious retroperitoneal or mesentric lymphadenopathy is seen.

IMPRESSION- Fatty liver grade-I

To be correlated clinically

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Cert. No. H-2016-0369 Cert. No. MC - 4930

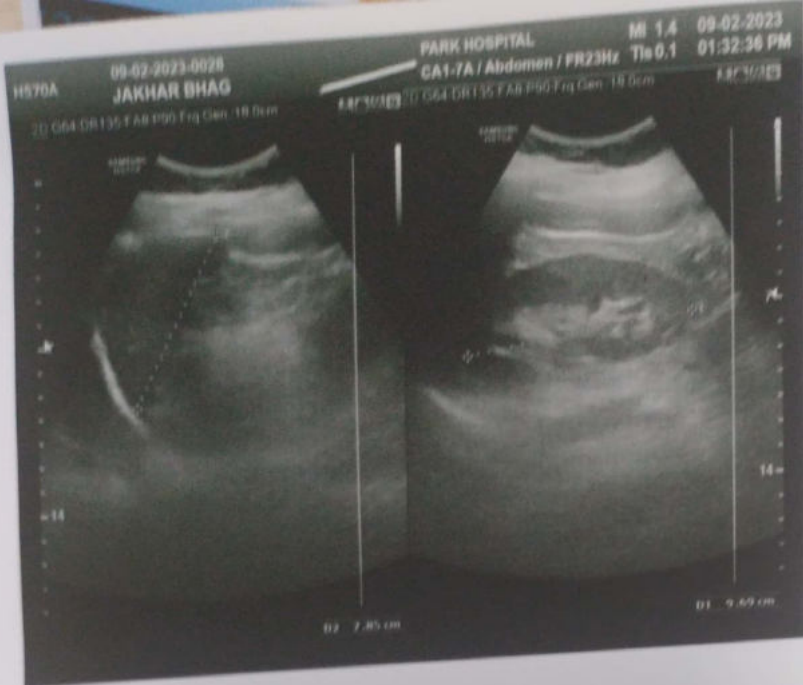
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10mm/mV

10mm/mV

ID : 0001

HR : 66 bpm

R-R : 904 ms

P-R : 172 ms

Name: *Bhargat Singh Jakkh*

QRS : 11

QT/QTc : 363/381 ms

Sex : *male*

P/QRS/T : 45/76/42

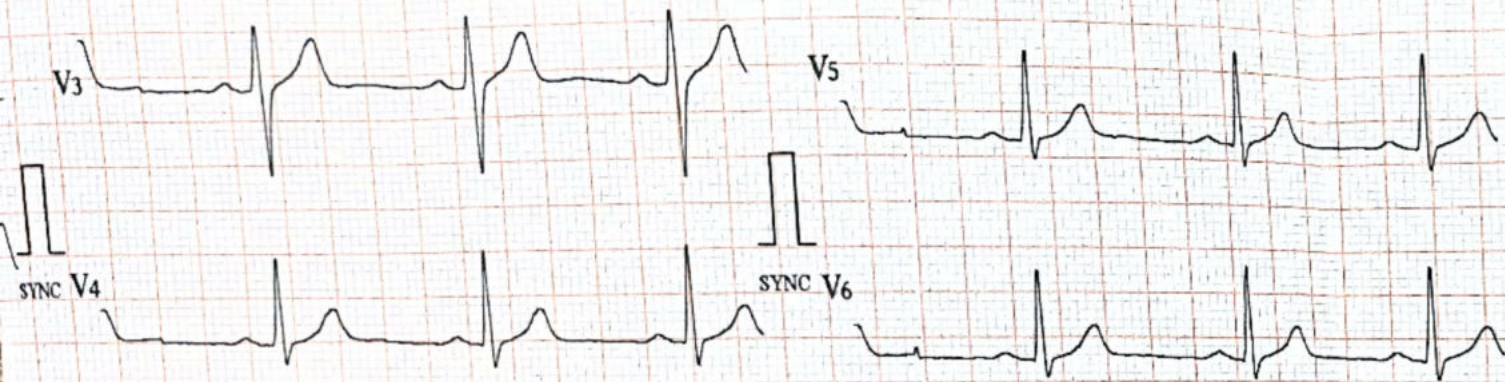
RV5/SV1 : 1.050/0.470 mV

Age : *38/*

RV5+SV1 : 1.520 mV

9/2/23

----- Sinus Rhythm
----- T Abnormality (Flat T)

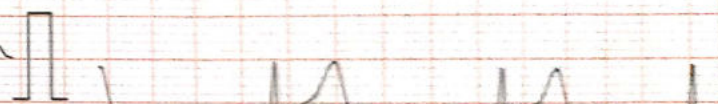
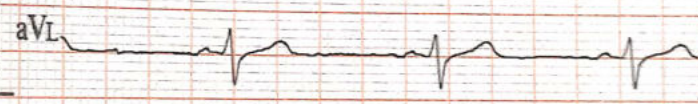
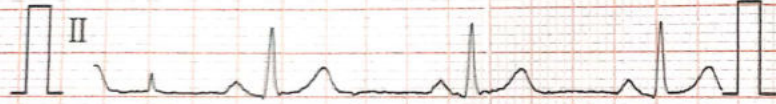


Unconfirmed report Verified by:

25mm/s 0.5-25Hz
10mm/mV

10mm/mV

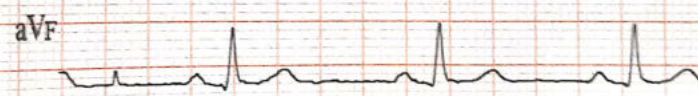
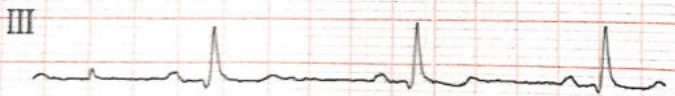
10mm/mV



SYNC

SYNC

SYNC V2



ECG-1203 V2.000(BIOS:V0.000/AMP:V1.001) 2016-00-00 00:00