

Mr Ashay Shukla 38M

14/08/2021

Routine health checkup

BP: 110/70

PR: 78/4

PTMC +17

Uric acid -

Urea & CrMo

Rb: Bilirubin Cal

WBCs

PTA (P)

CRP

Dental checkup

HbA1c

PH: Not significant

NO MO: DM 1 + 1 + 1 + 1 (CONT)

July

PPBS - 173 u/g

Urine Sugar (+ + +)

U-1 = wnl

74 - 215

Cholesterol - 162

RF - (N)

HbA1c - 6.33 (N)

PPBS - 112 u/g

78H - wnl

PSA - 0.56 (B)

Chol: wnl

WBCs: (N)

U-1 -

P-7 - 0

Imp<sup>o</sup> no significant medical  
comorbidity noted clinically

↓  
Lidly

AD

- Diet control

- Regular Exercise

Lidly

**PATIENT'S NAME: ABHAY SHUKLA 30YR M**  
**REFERRED BY: DR A SIDDIQUI**  
**MRD NO: USG ABD HELTH CHECKUP 29230**

**STUDY TIME: 14-08-21**  
**REPORT TIME: 14/08/21 11:43 AM**  
**PRINT TIME: 14/08/21 5:38 PM**

**STUDY: USG OF THE ABDOMEN**

**INDICATION:** Routine Health check up. No complaints otherwise.  
**COMPARISON:** None.

**OBSERVATIONS:**  
Liver is mildly enlarged measuring 166 mm in craniocaudal extent. Normal parenchymal echogenicity is noted. No obvious focal lesion is seen. Intrahepatic biliary radicles are not dilated.

Spleen is normal in size. No focal lesion is seen.

Pancreas appears normal in size and echopattern. Pancreatic duct is not dilated. No obvious pancreatic parenchymal calcifications are seen either.

Gall bladder is well distended. No calculus is seen. Wall thickness is normal. CBD is normal.

Portal vein is normal. IVC and aorta are unremarkable

Both kidneys are normal in size, shape, position and echogenicity. Corticomedullary differentiation is maintained. No focal lesion is noted. No evidence of calculus or hydronephrosis is noted.

Urinary bladder is collapsed. Prostate cannot be commented upon.

No free fluid is seen. No significant lymphadenopathy is seen.

**CONCLUSION:**  
*Mild hepatomegaly.*

**DR NEERAJ GAUTAM**  
**DNB RADIODIAGNOSIS**  
**CONSULTANT RADIOLOGIST**





PATIENT NAME : MR.ABHAY SHUKLA  
UHID NO. : 29230  
AGE / SEX : 30 Y Male  
CONSULTANT : DR ANIS SIDDIQUI

RECEIPT NO. : PAC/11  
SAMPLE RECEIVED ON / AT : 14/08/2021 10:15AM  
SAMPLE REPORTED ON / AT : 14/08/2021 03:30PM

**COMPLETE BLOOD COUNT(CBC)**

**RBC**

Haemoglobin (HB)	15.6	gm%	12 - 17mg/dl
Haematocrit (HCT)	45.2	%	40 - 55
RBC Count	5.35	millions/cumm	4.5 - 6
MCV	84.5	fL	78 - 92
MCH	29.2	pg	27 - 32
MCHC	34.5	g/dl	32 - 36
RDW-CV	14.1	%	11 - 16

**WBC.**

Total Leucocyte Count (TLC)	9800		4000 -11000
-----------------------------	------	--	-------------

**Differential Leucocyte Count (DLC)**

Neutrophils	60	%	40 - 75
Lymphocytes	33	%	20 - 40
Monocytes	04	%	0 - 8
Eosinophils	03	%	1 - 7%
Basophils	00	%	0 - 1

**PLATELETS**

PLT Count	2.12	lakhs/cmm	1.0 - 4.0
MPV	9.7	fl	8 - 11

**Advice**

The test results are to be used for help in diagnosing/treating medical diseases & not for forensic applications. These result cannot be used fo medico-legal purposes. These reported results are for the information of referring clinical only.

Test Done By MEDONIC M-SERIES Fully Automatic.



Test Done By  
Senior Technologist  
SATYANARAYAN SINGH



Report Checked By  
Technician




Pathologist  
Dr. D. Prashant  
M.D. (Pathologist)




PATIENT NAME : MR.ABHAY SHUKLA	RECEIPT NO. : PAC/11
UHID NO. : 29230	SAMPLE RECEIVED ON / AT : 14/08/2021 10:15AM
AGE / SEX : 30 Y Male	SAMPLE REPORTED ON / AT : 14/08/2021 03:30PM
CONSULTANT : DR ANIS SIDDIQUI	

BIO CHEMISTRY			
TEST	RESULT	UNIT	REF. RANGE
<b>BSPP</b>	173 ✓		<140 mg/dl
Urine SUGAR(PP)	Present (+++) ✓		ABSENT
<b>GGT(GAMMA GT)</b>			
GGT(GAMMA GT)	53.1	U/L	<55
<b>LFT(Liver Function Test )</b>			
Bilirubin - Total	0.94	mg/dl	0.2 - 1.3
Bilirubin - Direct	0.39	mg/dl	Adult : 0.0 - 0.4 Neonatal : - 0.0 - 0.6
Bilirubin (Indirect)	0.55	mg/dl	Adult : 0.0 - 0.9 Neonatal : 0.6 - 10.5
Total Proteins	7.67	g/dl	6.4 - 8.3 g/dl
Albumin	4.53	g/dl	3.5 - 5.2 g/dl
Globulin	3.14	g/dl	2.3 - 3.6
A/G Ratio	1.44		1.10 - 2.20
Alkaline Phosphatase	112	U/L	4 - 15 Yrs 54 - 369 20 - 59 Yrs 53-128 >60 Yrs 56 - 119
SGOT (AST)	33	U/L	upto 35 U/L
SGPT (ALT)	68	U/L	upto 45 U/L
The test results are to be used for help in diagnosing/treating medical diseases & not for forensic applications. These result cannot be used fo medico-legal purposes. These reported results are for the information of referring clinical only.			

  
**Test Done By**  
Senior Technologist  
**SATYANARAYAN SINGH**

  
**Report Checked By**  
Technician

  
**Pathologist**  
Dr. D. Prashant  
M.D. (Pathologist)



PATIENT NAME : MR.ABHAY SHUKLA	RECEIPT NO. : PAC/11
UHID NO. : 29230	SAMPLE RECEIVED ON / AT : 14/08/2021 10:15AM
AGE / SEX : 30 Y Male	SAMPLE REPORTED ON / AT : 14/08/2021 03:30PM
CONSULTANT : DR ANIS SIDDIQUI	

### Lipid Profile

Total Cholesterol	162	mg/dl	Desirable : <200 Borderline : 200 - 239 High : >= 240
Triglycerides	215	mg/dl	Normal:<161 High : 161 - 199 Hypertriglyceridemic : 200 - 499 Very High : > 499
<i>Note: The National Cholesterol Education Program Adult Treatment Panel III ((NCEP-ATP III) report.</i>			
HDL Cholesterol	37	mg/dl	35.3 - 79.5
LDL Cholesterol	82	mg/dl	60 - 165
<i>Note: The National Cholesterol Education Program Adult Treatment Panel III ((NCEP-ATP III) report.</i>			
VLDL Cholesterol	43	mg/dl	20 - 50
Total Cholesterol/HDL Ratio	4.38		0 - 5.1
LDLC/HDLC Ratio	2.22		2.5 - 3.5

#### Correlates with Lipid Profile:

1. Fasting state: Fasting should begin 12 to 14 Hrs before the sample collection. This includes all beverages, although water is permitted. No alcohol should be taken 24 before sample collection.
2. Drugs: Cholesterol and Triglyceride lowering agents. Please repeat with fresh sample if clinically indicated.

The test has been performed on fully-Automated Biochemistry Analyser "ERBA EM 200"


### KFT(KIDNEY FUNCTION TEST)

Urea	15	mg/dL	15 - 45
Serum Creatinine	0.85	mg/dl	0.70 - 1.40 mg/dL
Uric Acid	6.6	mg/dL	3.5 - 7.2

Test Done By MICRO LAB 300 Fully Automatic.

  
Test Done By  
Senior Technologist  
SATYANARAYAN SINGH

  
Report Checked By  
Technician

  
Pathologist  
Dr. D. Prashant  
M.D. (Pathologist)



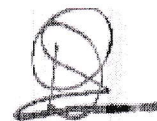
PATIENT NAME : MR.ABHAY SHUKLA	RECEIPT NO. : PAC/11
UHID NO. : 29230	SAMPLE RECEIVED ON / AT : 14/08/2021 10:15AM
AGE / SEX : 30 Y Male	SAMPLE REPORTED ON / AT : 14/08/2021 03:30PM
CONSULTANT : DR ANIS SIDDIQUI	

CLINICAL PATHOLOGY			
TEST	RESULT	UNIT	REF. RANGE
<b>URINE SUGAR(F)</b>			
Urine Sugar (Fasting)	Nil		ABSENT




**Test Done By**  
Senior Technologist  
**SATYANARAYAN SINGH**

**Report Checked By**  
Technician



**Pathologist**  
**Dr. D. Prashant**  
M.D. (Pathologist)



PATIENT NAME : MR.ABHAY SHUKLA  
UHID NO. : 29230  
AGE / SEX : 30 Y Male  
CONSULTANT : DR ANIS SIDDIQUI

RECEIPT NO. : PAC/11  
SAMPLE RECEIVED ON / AT : 14/08/2021 10:15AM  
SAMPLE REPORTED ON / AT : 14/08/2021 03:30PM

**HAEMATOTOLOGY**

TEST	RESULT	UNIT	REF. RANGE
<b>HbA1c (Glycosalated Haemoglobin)</b>			
<b>HbA1C-Glycosalated Haemoglobin</b>	6.33	%	4 to 6% Non-diabetic 6 to 7% Excellent control 7 to 8% fair to good control 8 to 10% Unsatisfactory control Above 10% poor Control

The test results are to be used for help in diagnosing/treating medical diseases & not for forensic applications. These result cannot be used fo medico-legal purposes. These reported results are for the information of referring clinical only.

*The test has been performed on fully-Automated Biochemistry Analyser "ERBA EM 200"*

ESR **25** mm at 1hr up to 15 mm (1 hr)

**Blood Group**

ABO Group A Rh Positive  
SLIDE METHOD.

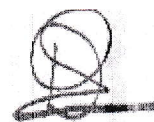
The test results are to be used for help in diagnosing/treating medical diseases & not for forensic applications. These result cannot be used fo medico-legal purposes. These reported results are for the information of referring clinical only.

Machine Footer



Test Done By  
Senior Technologist  
SATYANARAYAN SINGH

Report Checked By  
Technician



Pathologist  
Dr. D. Prashant  
M.D. (Pathologist)



PATIENT NAME : MR.ABHAY SHUKLA  
UHID NO. : 29230  
AGE / SEX : 30 Y Male  
CONSULTANT : DR ANIS SIDDIQUI

RECEIPT NO. : PAC/11  
SAMPLE RECEIVED ON / AT : 14/08/2021 10:15AM  
SAMPLE REPORTED ON / AT : 14/08/2021 03:30PM

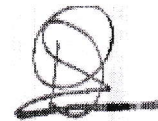
**PATHOLOGY**

TEST	RESULT	UNIT	REF. RANGE
BSF (Fasting Sample Required)	112		<110 mg/dl




Test Done By  
Senior Technologist  
**SATYANARAYAN SINGH**

Report Checked By  
Technician



Pathologist  
**Dr. D. Prashant**  
M.D. (Pathologist)



PATIENT NAME : MR.ABHAY SHUKLA  
UHID NO. : 29230  
AGE / SEX : 30 Y Male  
CONSULTANT : DR ANIS SIDDIQUI

RECEIPT NO. : PAC/11  
SAMPLE RECEIVED ON / AT : 14/08/2021 10:15AM  
SAMPLE REPORTED ON / AT : 14/08/2021 03:30PM

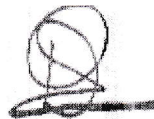
**ROUTINE URINE ANALYSIS TEST**

TEST	RESULT	UNIT	REF. RANGE
<b>Urine Routine ANALYSIS TEST</b>			
<b><u>General Examination</u></b>			
Volume	20	ml	10 - 50
Colour	Pale Yellow		Pale Yellow
Appearance	Clear		Clear
pH	6.0		5.5 - 8.0
<b><u>Chemical Examination</u></b>			
Urine Protein(Albumin)	Absent	g/L	Absent
Urine Glucose(Sugar)	Absent	mmol/L	Absent
Urine Ketons(Acetone)	Absent	mmol/L	Absent
Specific Gravity	1.010		
<b><u>Microscopic Examination</u></b>			
Pus cells	1-2	/hpf	<5
RBC (Urine)	Nil	/hpf	Nil
Epithelial cell	0-1		0-4
Casts	Absent		Absent
Crystals	Absent		Absent

The test results are to be used for help in diagnosing/treating medical diseases & not for forensic applications. These result cannot be used fo medico-legal purposes. These reported results are for the information of referring clinical only.

  
**Test Done By**  
Senior Technologist  
**SATYANARAYAN SINGH**


  
**Report Checked By**  
Technician

  
**Pathologist**  
Dr. D. Prashant  
M.D. (Pathologist)

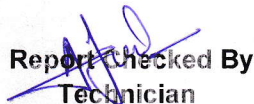


PATIENT NAME : MR.ABHAY SHUKLA	RECEIPT NO. : PAC/11
UHID NO. : 29230	SAMPLE RECEIVED ON / AT : 14/08/2021 10:15AM
AGE / SEX : 30 Y Male	SAMPLE REPORTED ON / AT : 14/08/2021 03:30PM
CONSULTANT : DR ANIS SIDDIQUI	

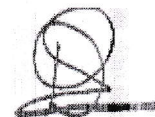
THYROID HORMONES			
TEST	RESULT	UNIT	REF. RANGE
<b>THYROID HORMONES</b>			
T3 ( Triiodothyronine )	1.10	ng/ml	0.5 - 2.0
<i>Remarks:1. Decreased values of T3 (T4 and TSH normal) have minimal clinical significance and not recommended for diagnosis of hypothyroidism 2. Total T3 and T4 values may also be altered in other conditions due to changes in serum proteins or binding sites, pregnancy, Drugs (Androgens, Estrogens, O C pills Phenytoin), Nephrosis etc.</i>			
T4 (Thyroxine)	11.72	µg/dl	4.4 - 10.8
<i>Remark:1. Total T3 and T4 values may also be altered in other conditions due to changes in serum proteins or binding sites, pregnancy, Drugs (Androgens, Estrogens, O C pills, Phenytoin), Nephrosis etc.</i>			
TSH	2.41	µIU/ml	0.39- 6.16 µIU/ml
<i>Remarks:1. 4.51 to 15 µIU/ml - Suggested clinical co-relation or repeat the test with new sample as physiological factors can give falsely high TSH. 2. TSH values may be transiently altered because of non thyroidal illness like severe infection, liver disease, renal and heart failure, severe burns, trauma and surgery etc. 3. Drugs that decreases TSH values e.g. L-dopa, Glucocorticoids Drugs that increases TSH values e.g. Iodine, Lithium, Amiodarone.</i>			
METHOD - ELISA ACCUBIND			



**Test Done By**  
Senior Technologist  
**SATYANARAYAN SINGH**



**Report Checked By**  
Technician



**Pathologist**  
**Dr. D. Prashant**  
M.D. (Pathologist)



PATIENT NAME : MR.ABHAY SHUKLA  
UHID NO. : 29230  
AGE / SEX : 30 Y Male  
CONSULTANT : DR ANIS SIDDIQUI


RECEIPT NO. : PAC/11  
SAMPLE RECEIVED ON / AT : 14/08/2021 10:15AM  
SAMPLE REPORTED ON / AT : 14/08/2021 03:30PM

**TUMOR MARKERS**

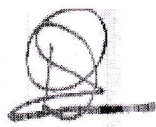
TEST	RESULT	UNIT	REF. RANGE
<b>PSA (Total)</b>	0.54	ng/mL	> 4.00
<i>The instrument for ichroma test calculate the test result automatically and displays PSA concentration of the test sample in terms of ng/mL</i>			

Test done by ichroma



  
**Test Done By**  
Senior Technologist  
**SATYANARAYAN SINGH**

  
**Report Checked By**  
Technician

  
**Pathologist**  
Dr. D. Prashant  
M.D. (Pathologist)



**PATIENT'S NAME: ABHAY SHUKLA 30YR M**  
**REFERRED BY: DR A SIDDIQUI**  
**MRD NO: XR CHEST 29230 DI 11 OPD**

**STUDY TIME: 14-08-21**  
**REPORT TIME: 14/08/21 4:25 PM**  
**PRINT TIME: 14/08/21 4:30 PM**

**STUDY: XRAY OF THE CHEST PA VIEW**

**INDICATION:** Routine Health check up. No complaints otherwise.

**COMPARISON:** None.

**OBSERVATIONS & CONCLUSION:**

NO ACUTE BONY PATHOLOGY IS SEEN.

NO PULMONARY INFILTRATE, COLLASPE OR CONSOLIDATION, EFFUSION, OR PNEUMOTHORAX IS SEEN.

TRACHEA IS IN MIDLINE.

NO CARDIOMEGALY IS SEEN.

THE SOFT TISSUES DEMONSTRATE NO ACUTE PATHOLOGY.

**DR NEERAJ GAUTAM**  
**DNB RADIODIAGNOSIS**  
**CONSULTANT RADIOLOGIST**





**EYE EXAMINATION**

**NAME: -** Mr. Abhay Shukla  
**AGE/SEX** 30 YIM

**DATE:-** 14/08/21

**1. EXAMINATION OF EYES : (BY OPHTHALMOLOGIST)**

EXTRENAL, EXAMINATION				
SQUINT				
NYSTAGMUS				
COLOUR VISION				
FUDUS				
INDIVIDUAL COLOUR IDENTIFICATION				
DISTANT VISION				
NEAR VISION				
NIGHT BLINDNESS				
	SPH	CYL	AXIS	ADD
RIGHT				
LEFT				

**REMARK :-**

(SIGN.) 





**WE CARE**  
**SUPER SPECIALITY HOSPITAL**  
 (A UNIT OF SYNERGY HEALTH TECH)  
**State of The Art Trauma Centre**

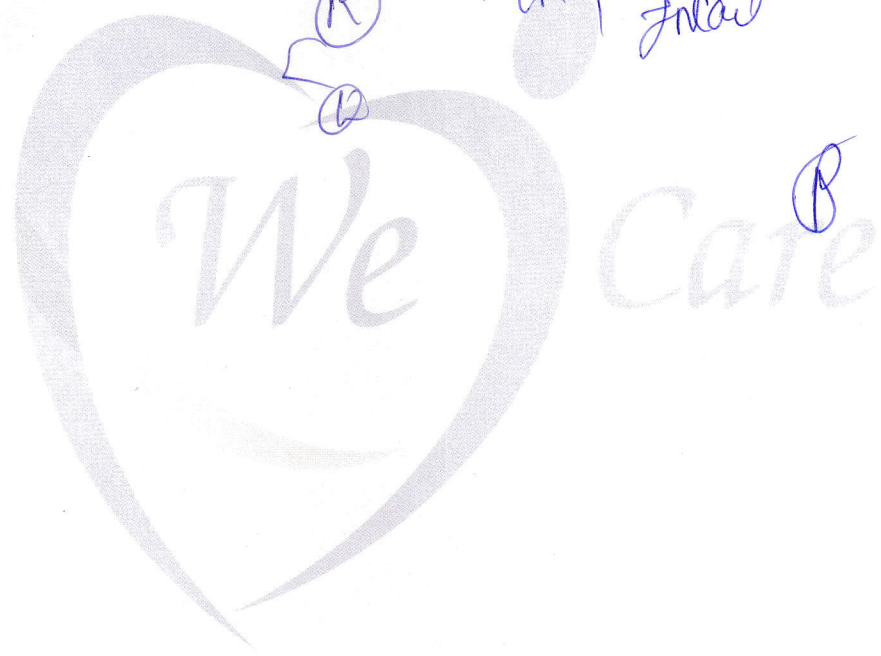
**DR. P. NANWANI**  
 MBBS, MS(ENT)  
 Reg.No-CGMC-4179/2012  
 Ph. : 9827881201  
 Email-prashantnanwani@yahoo.com

12/10/21

Abhay      30y/m

- No complaint -  
 - came for medical checkup

OPD :      ~~ENT~~      Jntal -  
 (R)      ENT Jntal -  
 (L)



Ⓟ

NAME MR. ABHAY SHUKLA

AGE 30 YR/M

REF BY: DR. A SIDDIQUI

DATE: 14/08/2021

## ECHOCARDIOGRAPHY

### M-MODE

<u>MEASUREMENT</u>	<u>PT'S VALUE</u>	<u>NORMAL VALUE</u>
AO	25.7 mm	20-37 mm
LA	31.7 mm	19-40 mm
IVS (d)	7.8 mm	6-11 mm
LVID (d)	45.0 mm	35-50 mm
LVPW (d)	11.0 mm	6-11 mm
LVID (S)	32.6 mm	23-39 mm
EF	60%	

### 2 D ECHO & CFI

CHAMBERS	-	NORMAL
VALVES	-	NORMAL
SEPTAE	-	IVS / IAS Intact
RWMA	-	NO RWMA PRESENT AT REST.
EF	-	60%

CLOT / VEGETATION/ PERICARDIAL EFFUSION – NILL.



<u>VALVE</u> <u>(mmHg)</u>	<u>REGURGITATION</u>	<u>GRADIENT</u>
Mitral Valve	NILL	Not Significant
Aortic Valve	NILL	Not Significant
Tricuspid Valve	NILL	Not Significant
Pulmonary Valve	NILL	Not Significant

**PULSE WAVE DOPPLER**

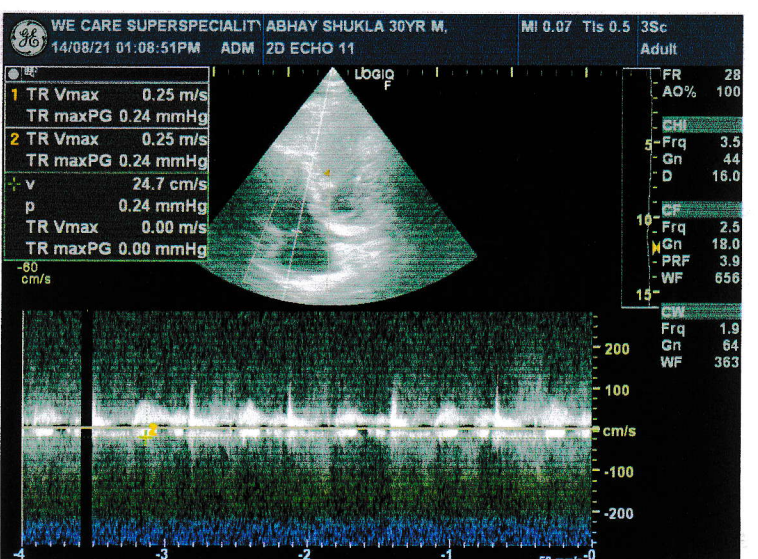
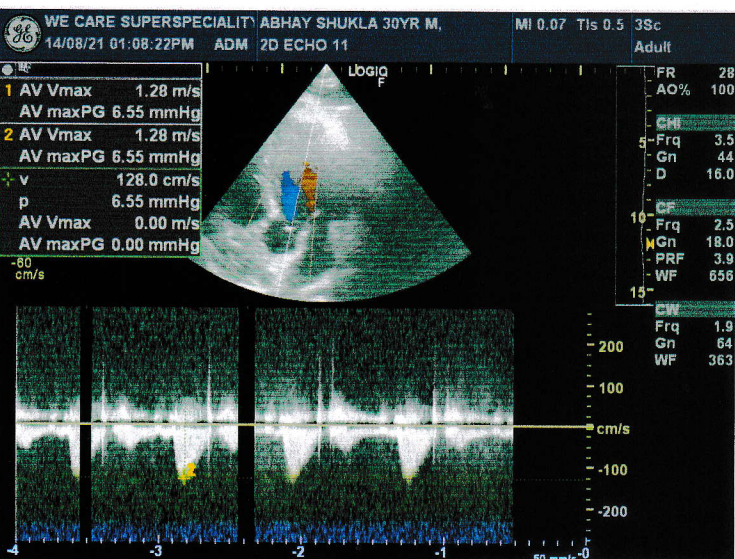
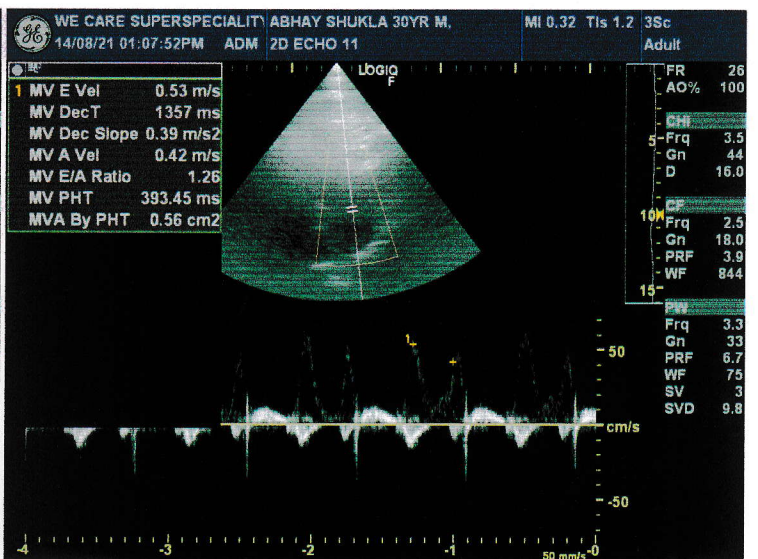
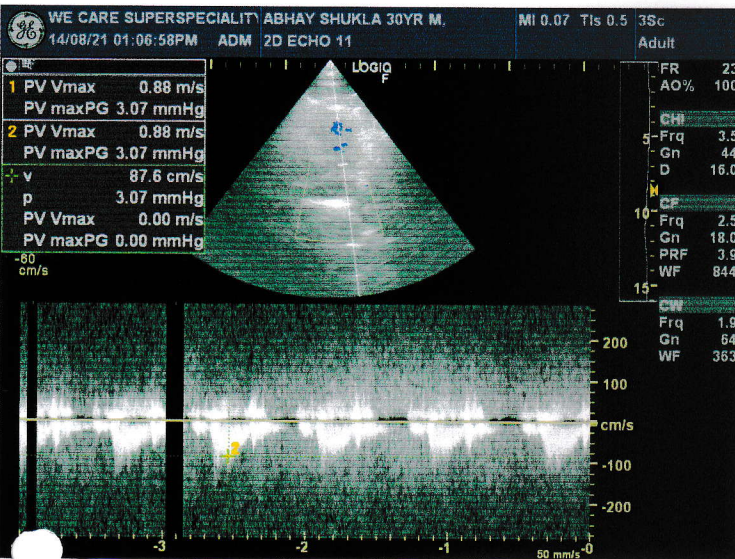
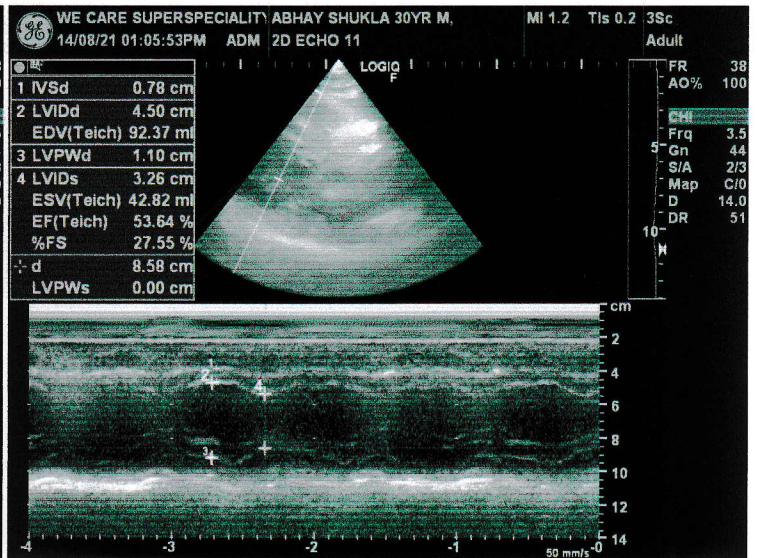
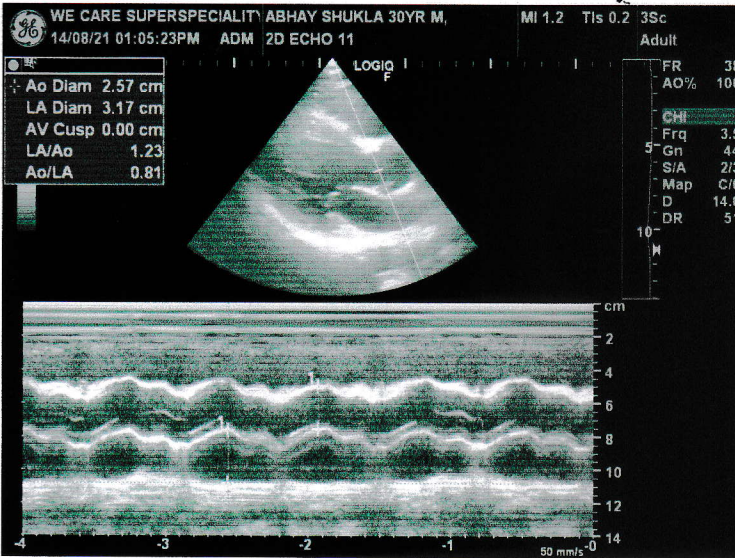
- Mitral Valve inflow shows E Wave < A Wave .

**I M P R E S S I O N .**

- NO RWMA PRESENT AT REST,
  - NORMAL BIVENTRICULAR SYSTOLIC FUNCTION.
  - GLOBAL LVEF 60%.
  - NO AS/MS/TR/AR/NO MR.
- NO INTRACARDIAC CLOT, VEGETATION.

  
**Dr. ANIS SIDDIQUI (MD, PGCCDM)**







ID: 29214

14-08-2021 09:50:06 AM

Male Years

*m Abney Student 30 ym*

Diagnosis Information:

Sinus rhythm

\*\*\*Normal ECG\*\*\*

HR : 69 bpm

PR : 91 ms

QRS : 124 ms

QT/QTc : 99 ms

QT/QTc : 381/409 ms

P/QRS/T : 11/10/-1 °

RV5/SV1 : 0.982/0.703 mV

Report Confirmed by:

