

NAME:	Mr. Hemantkumar Tilwari	UHID:	
AGE:	33	DATE OF HEALTHCHECK:	11-10-2023
GENDER:	M		

HEIGHT:	177	MARITAL STATUS:	M
WEIGHT:	67.7	NO OF CHILDREN:	
BMI:	21.4		

C/O: -

K/C/O: -

PRESENT MEDICATION: - NO

P/M/H: - NO

P/S/H: - NO

ALLERGY: - NO

PHYSICAL ACTIVITY: Active/ Moderate/ Sedentary

H/A: SMOKING:

FAMILY HISTORY FATHER: - NO

ALCOHOL:

MOTHER: - NO

TOBACCO/PAN:

O/E:

LYMPHADENOPATHY:

BP: 120/80 PULSE: - 88/min

PALLOR/ICTERUS/CYNOSIS/CLUBBING: - NO

TEMPERATURE: 37 SCARS:

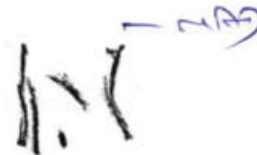
OEDEMA:

S/E:

RS:



P/A:



CVS: - NO

Extremities & Spine: - NO

ENT: - NO

CNS: - NO

Skin: - NO

Vision:

	Without Glass		With Glass	
	Right Eye	Left Eye	Right Eye	Left Eye
FAR :				
NEAR :				
COLOUR VISION:				

Name: Mr. Himanshu Tiwari | Age: 33 | Date of Health check-up: 11/10/2023

Findings and Recommendation:

Findings:-

HbA1c ↑

Recommendation:-

Duct / Diabetes mellitus
F -

Signature:

Consultant -



DR. ANIRBAN DASGUPTA
MBBS, D.N.B MEDICINE
DIPLOMA CARDIOLOGY
MMC-2005/02/0920

OPHTHALMIC EVALUATION

UHID No.: _____

Date: 11/10/23

Name: HIMANSHU TIWARI Age: 33y Gender: Male/Female

Without Correction :

Distance: Right Eye 6/6 Left Eye 6/6

Near : Right Eye N-6 Left Eye N-6

With Correction :

Distance: Right Eye _____ Left Eye _____

Near : Right Eye _____ Left Eye _____

	RIGHT					LEFT				
	SPH	CYL	AXIS	PRISM	VA	SPH	CYL	AXIS	PRISM	VA
Distance										
Near										

Colour Vision : (PBE) - WNL

Anterior Segment Examination : (BE) - WNL

Pupils : (PBE) - WNL

Fundus : (PBE) - WNL

Undil
Intraocular Pressure : _____

Diagnosis : (BE) - WNL

Advice : _____

Re-Check on _____ (This Prescription needs verification every year)

Dr. Sagorika Dey
(Consultant Ophthalmologist)

DR. SAGORIKA DEY
MBBS, DOMS

REGN NO: 2008/04/1182

■ Consultation ■ Diagnostics ■ Health Check-Ups ■ Dentistry

DENTAL CHECKUP

Name: Mr. Himanshu Tiwari	MR NO:
Age/Gender : 33 yrs / M	Date: 11/10/23

Medical history: Diabetes Hypertension NRH

EXAMINATION	UPPER RIGHT	UPPER LEFT	LOWER LEFT	LOWER RIGHT
Calculus & Stains	✓	✓	✓	✓
Mobility				
Caries (Cavities)				
a) Class 1 (Occlusal)		26, 28		
b) Class 2 (Proximal)				
c) Class 5 (Cervical)				
Faulty Restoration				
Faulty Crown				
Fractured Tooth				
Root Pieces				
Impacted Tooth				
Missing Tooth				
Existing Denture				

TREATMENT ADVISED:

TREATMENT	UPPER RIGHT	UPPER LEFT	LOWER LEFT	LOWER RIGHT
Restoration / Filling		26, 28		
Root Canal Therapy				
Crown				
Extraction				

Oral Prophylaxis: Scaling & polishing
 Orthodontic Advice for Braces: Yes / No
 Prosthetic Advice to Replace Missing Teeth: Denture Bridge Implant
 Oral Habits: Tobacco Cigarette Others since ___ years
 Advice to quit any form of tobacco as it can cause cancer.

Other Findings: _____

Handwritten Signature


• ANDHERI • COLABA • NASHIK • VASHI

Name : Mr. Himanshu Tiwari Gender : Male Age : 33 Years
 UHID : FVAH 8809. Bill No : Lab No : V-850-23
 Ref. by : SELF Sample Col.Dt : 11/10/2023 08:10
 Barcode No : 1075 Reported On : 11/10/2023 17:43

TEST	RESULTS	BIOLOGICAL REFERENCE INTERVAL
HAEMOGRAM(CBC,ESR,P/S)-WB (EDTA)		
Haemoglobin(Colorimetric method)	14 g/dl	13 - 18
RBC Count (Impedance)	4.90 Millions/cumm.	4 - 6.2
PCV/Haematocrit(Calculated)	43.5 %	35 - 55
MCV:(Calculated)	88.8 fl	78 - 98
MCH:(Calculated)	28.5 pg	26 - 34
MCHC:(Calculated)	32.1 gm/dl	30 - 36
RDW-CV:	12.9 %	11.5 - 16.5
Total Leucocyte count(Impedance)	7260 /cumm.	4000 - 10500
Neutrophils:	43 %	40 - 75
Lymphocytes:	39 %	20 - 40
Eosinophils:	14 %	0 - 6
Monocytes:	04 %	2 - 10
Basophils:	00 %	0 - 2
Platelets Count(Impedance method)	2.02 Lakhs/c.mm	1.5 - 4.5
MPV	9.1 fl	6.0 - 11.0
ESR(Westergren Method)	05 mm/1st hr	0 - 20
Peripheral Smear (Microscopic examination)		
RBCs:	Normochromic, Normocytic	
WBCs:	Eosinophilia	
Platelets	Adequate	
Note:	Test Run on 5 part cell counter. Manual diff performed.	

Tejal Dighe
Entered By

Ms Kaveri Gaonkar
Verified By

Page 3 of  Dr. Milind Patwardhan
M.D(Path)
Chief Pathologist

End of Report
Results are to be correlated clinically

Name : Mr. Himanshu Tiwari Gender : Male Age : 33 Years
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TEST

RESULTS

Blood Grouping (ABO & Rh)-WB(EDTA) Serum

ABO Group:

:B:

Rh Type:

Positive

Method :

Matrix gel card method (forward and reverse)

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TEST RESULTS BIOLOGICAL REFERENCE INTERVAL

HbA1c(Glycosylated Haemoglobin)WB-EDTA

(HbA1C) Glycosylated Haemoglobin : 5.9 % Normal <5.7 %
Pre Diabetic 5.7 - 6.5 %
Diabetic >6.5 %
Target for Diabetes on therapy < 7.0 %
Re-evaluation of therapy > 8.0 %

Mean Blood Glucose : 122.63 mg/dL

Corelation of A1C with average glucose

A1C (%)	Mean Blood Glucose (mg/dl)
6	126
7	154
8	183
9	212
10	240
11	269
12	298


Method High Performance Liquid Chromatography (HPLC).

INTERPRETATION

- * The HbA1c levels corelate with the mean glucose concentration prevailing in the course of Pts recent history (apprx 6-8 weeks) & therefore provides much more reliable information for glycemia control than the blood glucose or urinary glucose.
- * This Methodology is better then the routine chromatographic methods & also for the daibetic pts.having HEMOGLBINOPATHIES OR UREMIA as Hb varaints and uremia does not INTERFERE with the results in this methodology.
- * It is recommended that HbA1c levels be performed at 4 - 8 weeks during therapy in uncontrolled DM pts.& every 3 - 4 months in well controlled daibetics .
- * Mean blood glucose (MBG) in first 30 days (0-30)before sampling for HbA1c contributes 50% whereas MBG in 90 - 120 days contribute to 10% in final HbA1c levels

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TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
PLASMA GLUCOSE			
Fasting Plasma Glucose :	95	mg/dL	Normal < 100 mg/dL Impaired Fasting glucose : 101 to 125 mg/dL Diabetes Mellitus : \geq 126 mg/dL (on more than one occasion) (American diabetes association guidelines 2016)
Post Prandial Plasma Glucose :	89	mg/dL	Normal < 140 mg/dL Impaired Post Prandial glucose : 140 to 199 mg/dL Diabetes Mellitus : \geq 200 mg/dL (on more than one occasion) (American diabetes association guidelines 2016)

Method : Hexokinase

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Page 2 of 9

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TEST RESULTS UNITS BIOLOGICAL REFERENCE INTERVAL

LIPID PROFILE - Serum

S. Cholesterol(Oxidase)	164	mg/dL	Desirable < 200 Borderline:>200-<240 Undesirable:>240
S. Triglyceride(GPO-POD)	69	mg/dL	Desirable < 150 Borderline:>150-<499 Undesirable:>500
S. VLDL:(Calculated)	13.8	mg/dL	Desirable <30
S. HDL-Cholesterol(Direct)	43.0	mg/dL	Desirable > 60 Borderline:>40-<59 Undesirable:<40
S. LDL:(calculated)	107.2	mg/dL	Desirable < 130 Borderline:>130-<159 Undesirable:>160
Ratio Cholesterol/HDL	3.8		3.5 - 5
Ratio of LDL/HDL	2.5		2.5 - 3.5

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Page 6 of 9

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TEST RESULTS UNITS BIOLOGICAL REFERENCE INTERVAL

LFT(Liver Function Tests)-Serum

S.Total Protein (Biuret method)	7.06	g/dL	6.6 - 8.7
S.Albumin (BCG method)	4.49	g/dL	3.5 - 5.2
S.Globulin (Calculated)	2.57	g/dL	2 - 3.5
S.A/G Ratio:(Calculated)	1.75		0.9 - 2
S.Total Bilirubin (DPD):	0.48	mg/dL	0.1 - 1.2
S.Direct Bilirubin (DPD):	0.20	mg/dL	0.1 - 0.3
S.Indirect Bilirubin (Calculated)	0.28	mg/dL	0.1 - 1.0
S.AST (SGOT)(IFCC Kinetic with P5P):	15	U/L	5 - 40
S.ALT (SGPT) (IFCC Kinetic with P5P):	13	U/L	5 - 41
S.Alk Phosphatase(pNPP-AMP Kinetic):	82	U/L	40 - 129
S.GGT(IFCC Kinetic):	13	U/L	11 - 50

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TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
Kidney screening test-Serum			
S.Urea(Urease-GLDH)	23.0	mg/dL	10.0 - 45.0
S. Urea Nitrogen(Calculated)	10.73	mg/dL	5 - 20
S.Creatinine(Jaffe's Kinetic)	0.86	mg/dL	0.50 - 1.3
S.Uric Acid(Uricase-POD)	4.7	mg/dL	3.4 - 7.0

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TEST RESULTS UNITS BIOLOGICAL REFERENCE INTERVAL

Thyroid (T3,T4,TSH)- Serum

Total T3 (Tri-iodo Thyronine) (ECLIA)	1.84	nmol/L	1.3 - 3.1 nmol/L
Total T4 (Thyroxine) (ECLIA)	75.24	nmol/L	66 - 181 nmol/L
TSH-Ultrasensitive (Thyroid-stimulating hormone) Method : ECLIA	2.05	□IU/ml	Euthyroid : 0.35 - 5.50 □IU/ml Hyperthyroid : < 0.35 □IU/ml Hypothyroid : > 5.50 □IU/ml

Grey zone values observed in physiological/therapeutic effect.

Note:

T3 :

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) etc. In such cases Free T3 and free T4 give corrected Values.
3. Total T3 may decrease by < 25 percent in healthy older individuals

T4 :

1. Total T3 and T4 Values may also be altered in other condition due to changes in serum proteins or binding sites, Pregnancy Drugs (Androgens,Estrogens,O C pills, Phenytoin), Nerphrosis etc. In such cases Free T3 and Free T4 give Corrected values.

TSH :

1. TSH Values may be transiently altered because of non thyroidal illness like severe infections,liver disease, renal and heart failure. Severe burns, trauma and surgery etc.
2. Drugs that decrease TSH values e,g L dopa, Glucocorticoids.
3. Drugs that increase TSH values e.g. Iodine,Lithium, Amiodarone

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Page 8 of 9 Chief Pathologist

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TEST RESULTS BIOLOGICAL REFERENCE INTERVAL

URINE REPORT

PHYSICAL EXAMINATION

QUANTITY	40	mL	
COLOUR	Pale Yellow		
APPEARANCE	Clear		Clear
SEDIMENT	Absent		Absent

CHEMICAL EXAMINATION(Strip Method)


REACTION(PH)	6.0		4.6 - 8.0
SPECIFIC GRAVITY	1.005		1.005 - 1.030
URINE ALBUMIN	Absent		Absent
URINE SUGAR(Qualitative)	Absent		Absent
KETONES	Absent		Absent
BILE SALTS	Absent		Absent
BILE PIGMENTS	Absent		Absent
UROBILINOGEN	Normal(<1 mg/dl)		Normal
OCCULT BLOOD	Absent		Absent
Nitrites	Absent		Absent

MICROSCOPIC EXAMINATION

PUS CELLS	1 - 2/hpf		0 - 3/hpf
RED BLOOD CELLS	Nil /HPF		Absent
EPITHELIAL CELLS	2 - 3 /hpf		3 - 4/hpf
CASTS	Absent		Absent
CRYSTALS	Absent		Absent
BACTERIA	Absent		Absent

Anushka Chavan
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Ms Kaveri Gaonkar
Verified By


Dr. Milind Patwardhan
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Chief Pathologist

End of Report
Results are to be correlated clinically

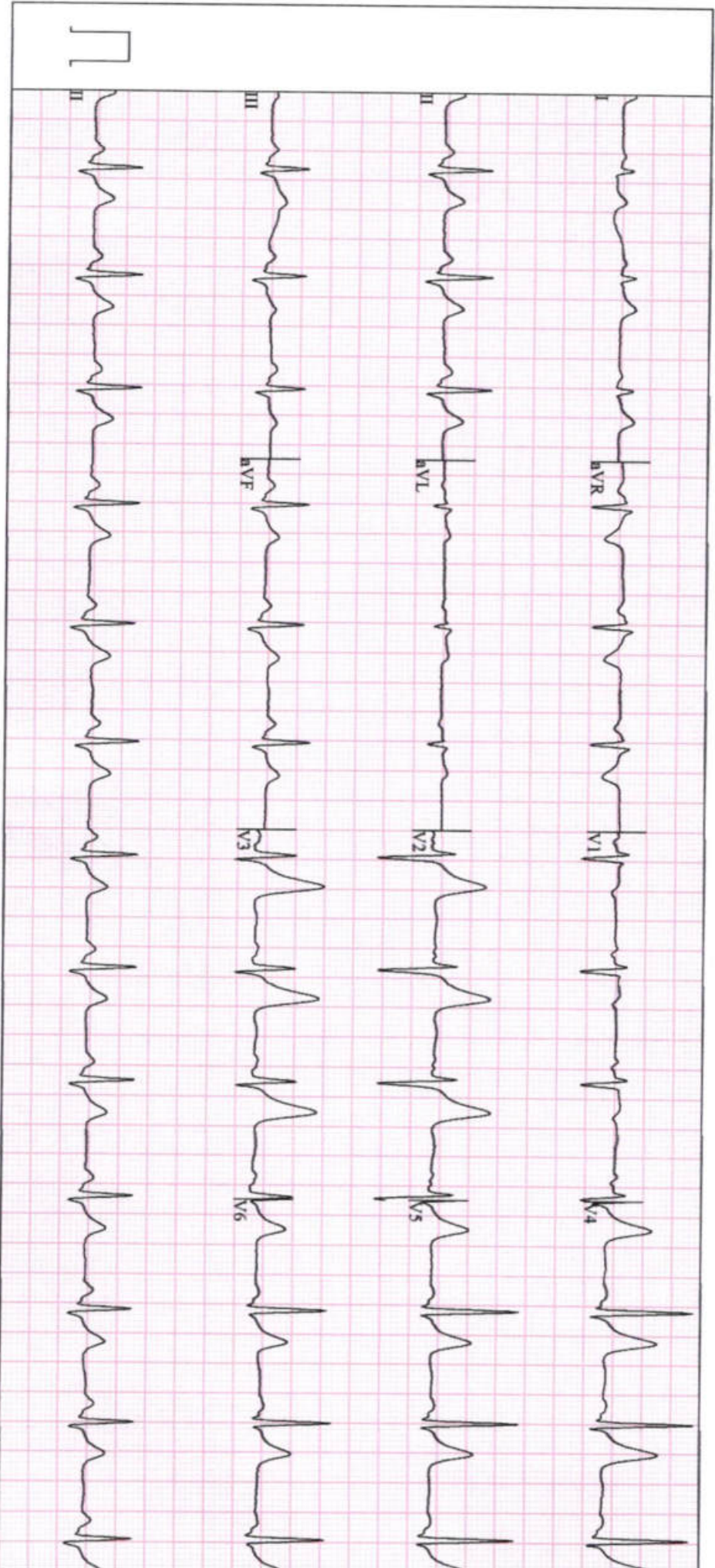
QRS : 92 ms
QT/QTc/Baz : 338 / 385 ms
PR : 134 ms
P : 102 ms
RR/PP : 770 / 769 ms
P/QRS/T : 72 / 75 / 56 degrees

Normal sinus rhythm
Normal ECG

W A C

NORMAL ECG

DR. ANIRBAN DASGUPTA
M.B.B.S., D.N.B. Medicine
Diploma Cardiology
MMC-2005/02/0920



PATIENT'S NAME	HIMANSHU TIWARI	AGE :- 33Y/M
UHID	8809	DATE :- 11-10-23

2D Echo and Colour Doppler Report

All cardiac chambers are normal in dimension

No obvious resting regional wall motion abnormalities (RWMA)

Interatrial and Interventricular septum – Appears Normal

Valves – Structurally normal

Trivial TR

Good biventricular function.

IVC is normal.

Pericardium is normal.

Great vessels - Origin and visualized proximal part are normal.

No coarctation of aorta.

Doppler study

Normal flow across all the valves.

No pulmonary hypertension.

No diastolic dysfunction.

Measurements

Aorta annulus	18 mm
Left Atrium	29 mm
LVID(Systole)	17 mm
LVID(Diastole)	40 mm
IVS(Diastole)	09 mm
PW(Diastole)	10 mm
LV ejection fraction.	55-60%

Conclusion

- Good biventricular function
- No RWMA
- Valves – Structurally normal
- No diastolic dysfunction
- No PAH

Anirban Dasgupta

Performed by: Dr. Anirban Dasgupta
D.N.B. Internal Medicine, Diploma Cardiology (PGDCC-IGNOU).

PATIENT'S NAME	HIMANSHU TIWARI	AGE :- 33 Y/M
UHID	8809	DATE :- .11 Oct. 23

X-RAY CHEST PA VEIW

OBSERVATION:

Bilateral lung fields are clear.
Both hila are normal.
Bilateral cardiophrenic and costophrenic angles are normal.
The trachea is central.
Aorta appears normal.
The mediastinal and cardiac silhouette are normal.
Soft tissues of the chest wall are normal.
Bony thorax is normal.

IMPRESSION:

- No significant abnormality seen.



DR. DISHA MINOCHA
DMRE (RADIOLOGIST)

PATIENT'S NAME	HIMANSHU TIWARI	AGE :- 33y/M
UHID NO	8809	11 Oct 2023

USG WHOLE ABDOMEN

LIVER is normal in size, shape and echotexture .No evidence of any focal lesion. The portal vein appears normal & shows normal hepatopetal flow. No evidence of intra-hepatic biliary duct dilatation.

Gall Bladder appears well distended with normal wall thickness. There is no calculus or pericholecystic collection or free fluid noted. CBD appears normal.

Visualised parts of head & body of pancreas appear normal. PD is not dilated.

SPLEEN is normal in size and echotexture. No focal lesion seen. SV is normal.

Both kidneys are normal in size, shape and echotexture with normal parenchymal reflectivity and maintained cortico-medullary differentiation. No hydronephrosis or calculi or mass seen.
RIGHT KIDNEY measures 9.3 x 4.0 cm. **LEFT KIDNEY** measures 10.7 x 4.6 cm.

Urinary Bladder is adequately distended; no e/o any obvious wall thickening or mass or calculi seen.

PROSTATE is normal in size, shape & echotexture. It measures approximately 13 gms.

Visualised bowel loops appear normal. There is no free fluid seen.

IMPRESSION –

- **No significant abnormality detected.**

THIS REPORT IS NOT TO BE USED FOR MEDICOLEGAL PURPOSE.THE CONTENTS OF THIS REPORT REQUIRE CLINICAL CO-RELATION BEFORE ANY APPLICATION.



DR. DISHA MINOCHA
DMRE (RADIOLOGIST)