



Where Healing & Care Comes Naturally

# APEX HOSPITALS KANDIVALI

*A Superspeciality Hospital*

CASHLESS  
FACILITY

Akurli Road, Next to Lodha Woods, Lokhandwala Township,  
Near Mahindra Gate No. 4, Kandivali (E), Mumbai 400101.

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Tele.:

022-62747000 ( 100 Lines)

## PHYSICIAN CONSULTATION

**PRESENT COMPLAINT :**

**PAST MEDICAL / SURGICAL HISTORY:**

**GENERAL EXAMINATION:**

PULSE

BP:

BMI

APETITE:

THIRST:

STOOL:

URINE:

SLEEP:

SKIN:

NAILS:

HABITAT:

**SYSTEMIC EXAMINATION:**

**RESPIRATORY EXAMINATION:**

**CARDIOVASCULAR EXAMINATION:**

**ABDOMINAL EXAMINATION:**

**GYNACOLOGY / OBST HISTORY ( FOR FEMALE):**

**OPHTHAL EXAMINATION:**

FAR VISION:

NEAR VISION:

COLOUR VISION:

**ENT EXAMINATION:**

EAR: MASTOID TUNNIG FORK TEST:

NOSE: EXT NOSE/ POST NASAL SPACE:

THROAT: TOUNGE/ PALATE/ TEETH:

NECK: NODES/ THYROID/TEETH:

**DENTAL EXAMINATION:**

DECAY/ CRIES IF ANY:

PLAQUE IF ANY:

GUMS:

PHYSICIAN NAME

PHYSICIAN SIGNATURE



अपेक्स हॉस्पिटल्स कांदिवाली

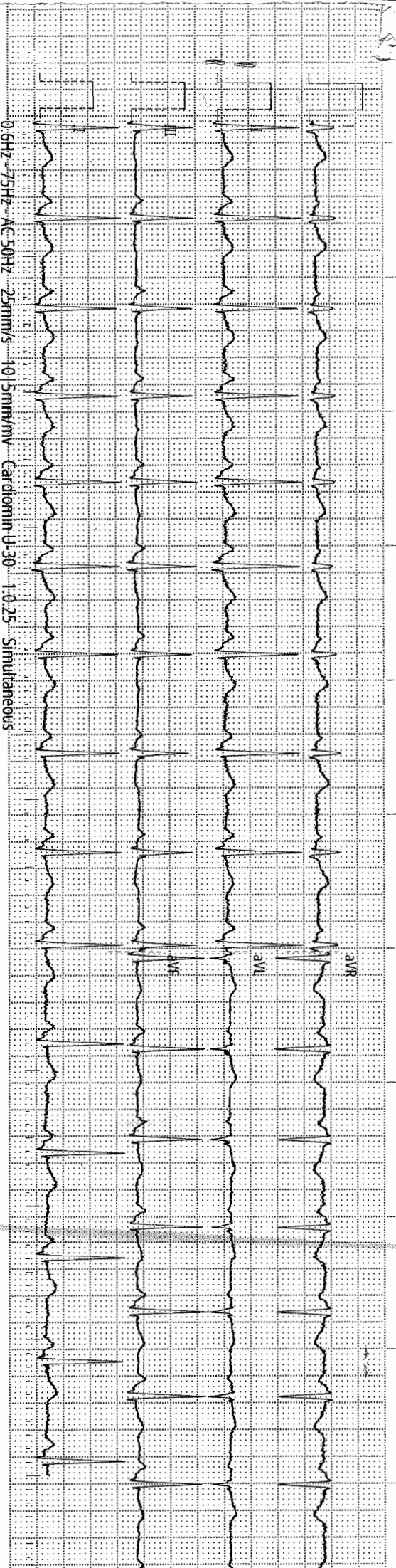
Name

MR. Sadeep

Date

9/03/18

0.5Hz-75Hz AC 50Hz 25mm/s 10/5mm/mv Cardiomin-U-30 1:0:25 Simultaneous



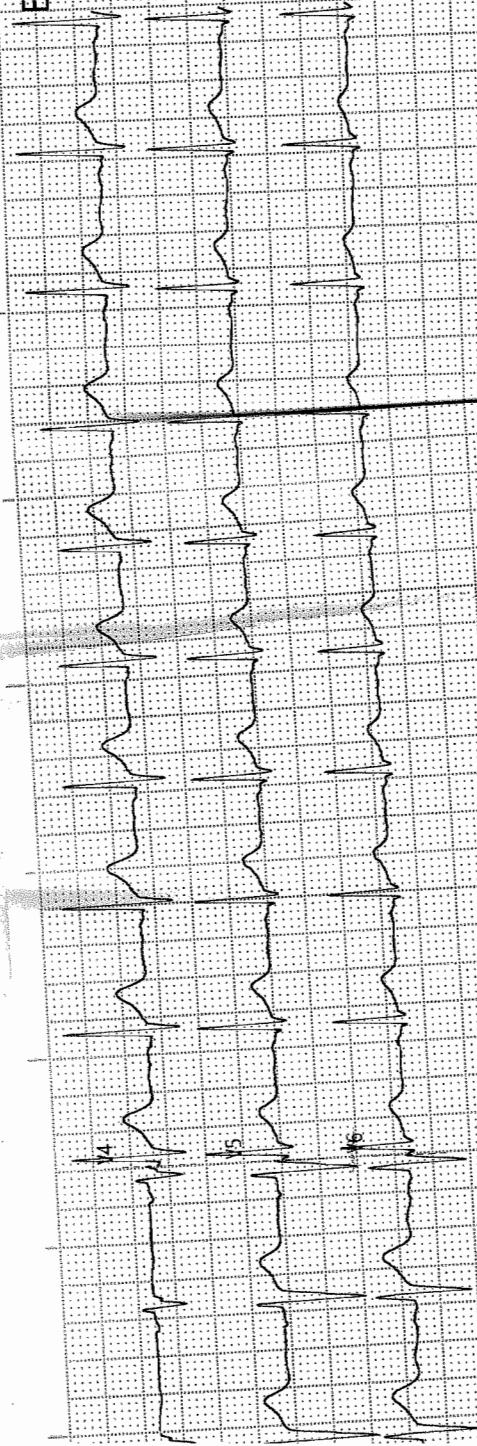
Date 9/03/24 Time \_\_\_\_\_ Age 35y Gender Male

Sondeef

35y M 10:30

ECG report  
ID : 20240309100531  
Name : Sondeef  
Gender :  
Age :  
Dept :  
Bed No :

HR : 85 bpm  
PR : 130 ms  
QRS : 96 ms  
QT/QTc : 352/396 ms  
P/QRS/T : 70/78/40°  
RV5/SV1 : 1.85/0.913 mV  
RV5+SV1 : 2.770 mV



# APEX HOSPITAL

## KANDIVALI

**MR SANDEEP CHOUDHARY**

ID : 8920  
 DATE : 09-03-2024  
 AGE/SEX : 35 / M  
 HT/WT : 171 / 68  
 REF. BY : APEX HOSPITAL

**TREADMILL TEST REPORT**

PROTOCOL : Bruce  
 HISTORY :  
 INDICATION :  
 MEDICATION :

PHASE	TOTAL TIME	STAGE TIME	SPEED Km/Hr	GRADE %	H.R. bpm	B.P. mmHg	RPP x100
HYPERVENT		0:3			78	140 / 80	109
Stage 1	2:55	2:55	2.7	10	115	140 / 90	161
Stage 2	5:55	2:55	4	12	133	140 / 90	186
Stage 3	8:55	2:55	5.4	14	145	150 / 90	217
Stage 4	11:55	2:55	6.7	16	195	150 / 90	292
PK-EXERCISE	12:11	0:11	8	18	197	150 / 90	295
RECOVERY	12:55	0:29			176	150 / 90	264
RECOVERY	12:55	0:29			176	150 / 90	264
RECOVERY	13:20	0:54			159	150 / 90	238

**RESULTS**

EXERCISE DURATION : 12:11 MAX WORK LOAD  
 MAX HEART RATE : 197 bpm 106 % of target heart rate 185 bpm  
 MAX BLOOD PRESSURE : 150 / 90 mm Hg

REASON OF TERMINATION :

BP RESPONSE :

ARRHYTHMIA :

H.R. RESPONSE :

**IMPRESSIONS**

Test is negative for inducible  
 Ischaemia

**DR. VIVEK AGARWAL**  
 DM CARDIOLOGIST  
 DNB CARDIOLOGIST  
 ICCPR  
 MD MEDICAL M388

Technician : 44

2008/03/15



# APEX HOSPITAL

MR SANDEEP CHOUDHARY

I.D. 8920

Age 35/M

Date 09-03-2024

RATE 78bpm

B.P. 140/80

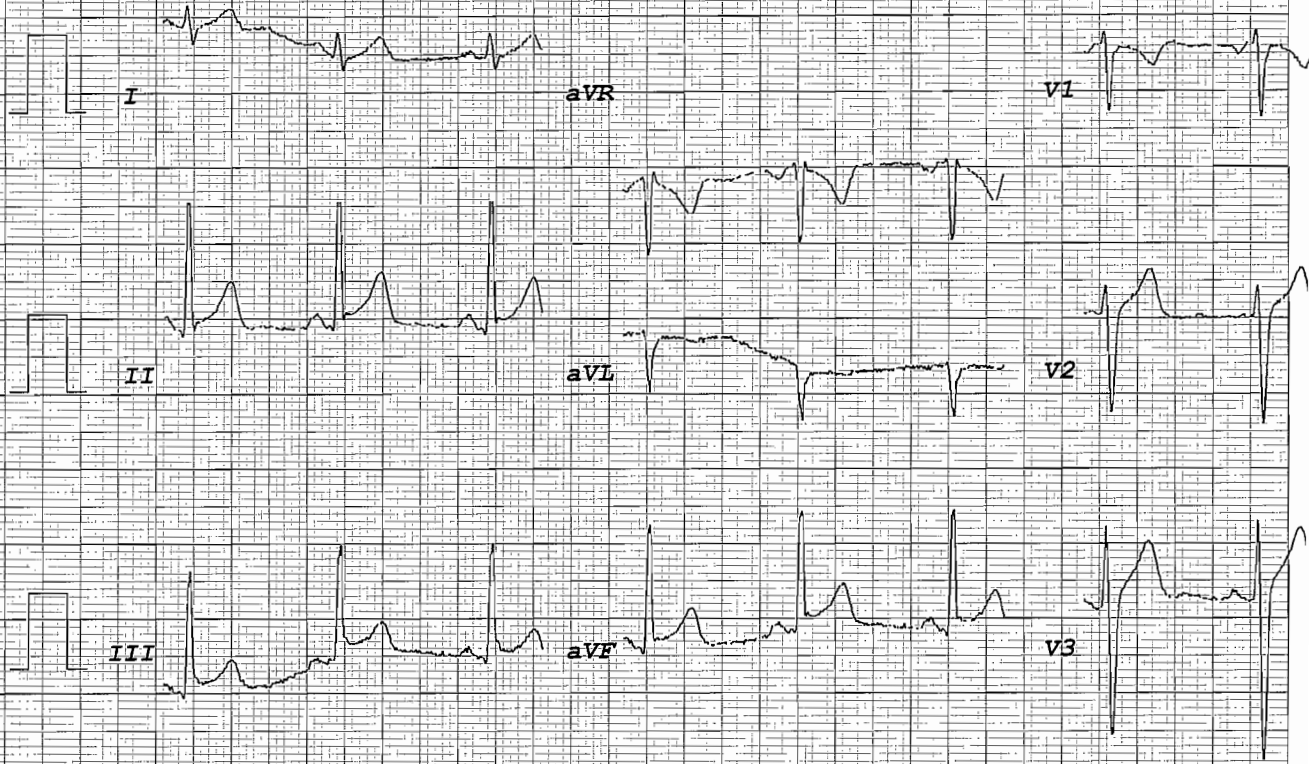
PRETEST

HYPERVERT

ST @ 10mm

80ms Post

PHASE TIME 0:03



Base Corrected

UNI-EM, Indore Tel: +91-731-4030035, Fax:

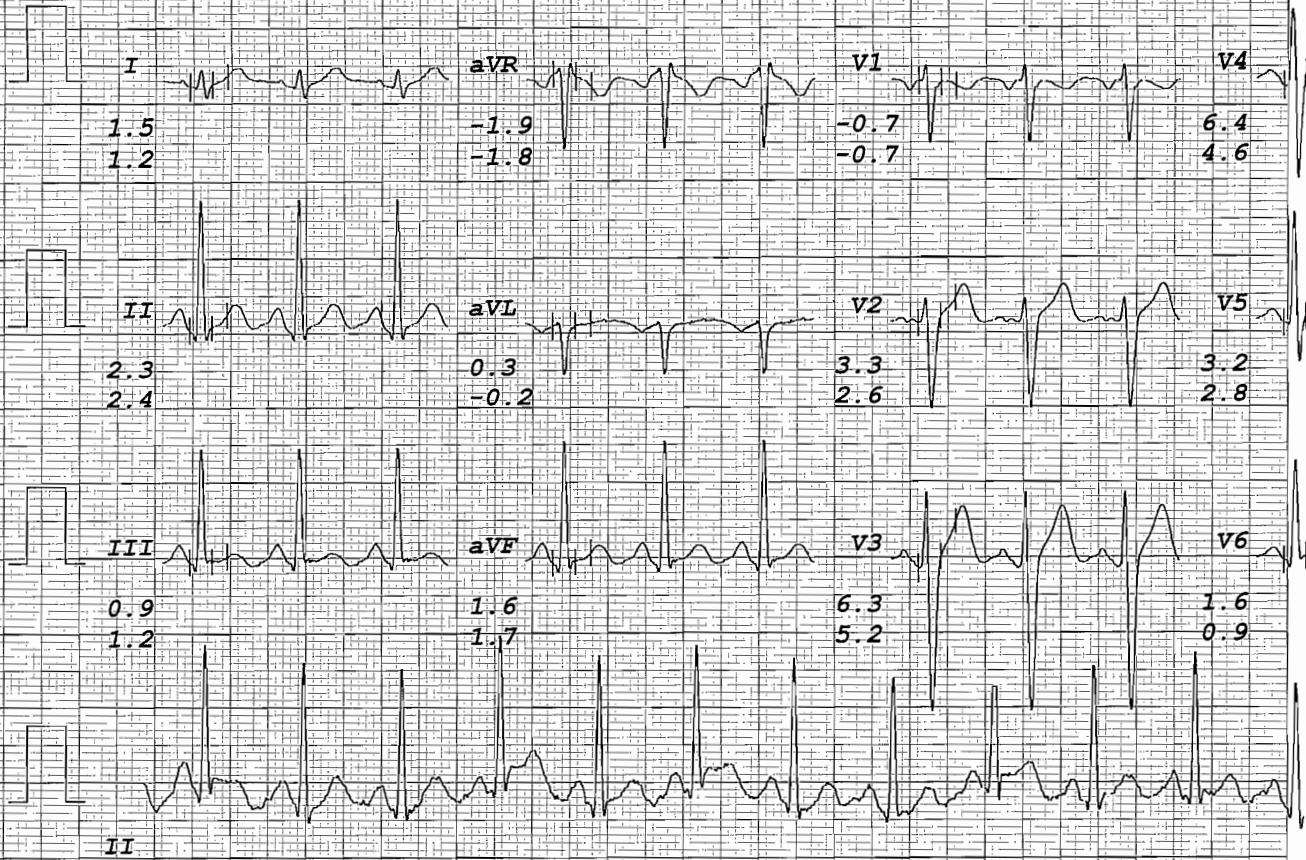
# APEX HOSPITAL

MR SANDEEP CHOUDHARY  
 I.D. 8920  
 Age 35/M  
 Date 09-03-2024

RATE 115bpm  
 B.P. 140/90

Bruce  
 Stage 1  
 TOTAL TIME 2:55  
 PHASE TIME 2:55

ST @ 10mm/  
 80ms Post  
 Speed 2.  
 SLOPE 10



Base Corrected

UNI-EM, Indore. Tel. : +91-731-4030035, Fax:

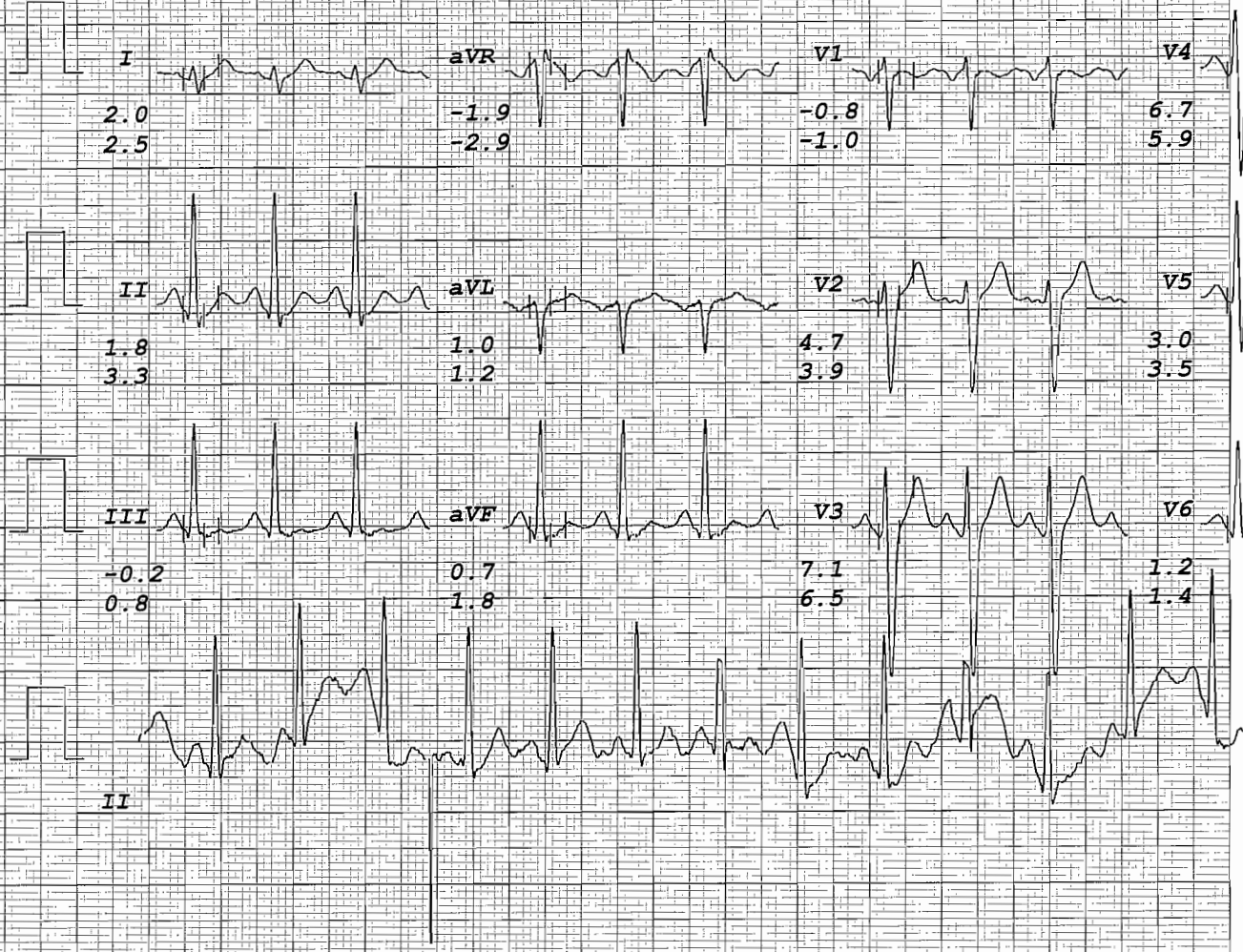
# APEX HOSPITAL

MR SANDEEP CHOUDHARY  
I.D. 8920  
Age 35/M  
Date 09-03-2024

RATE 133bpm  
B.P. 140/90

Bruce  
Stage 2  
TOTAL TIME 5:55  
PHASE TIME 2:55

ST @ 10mm  
80ms Post  
Speed 4 k  
SLOPE 12



Base Corrected

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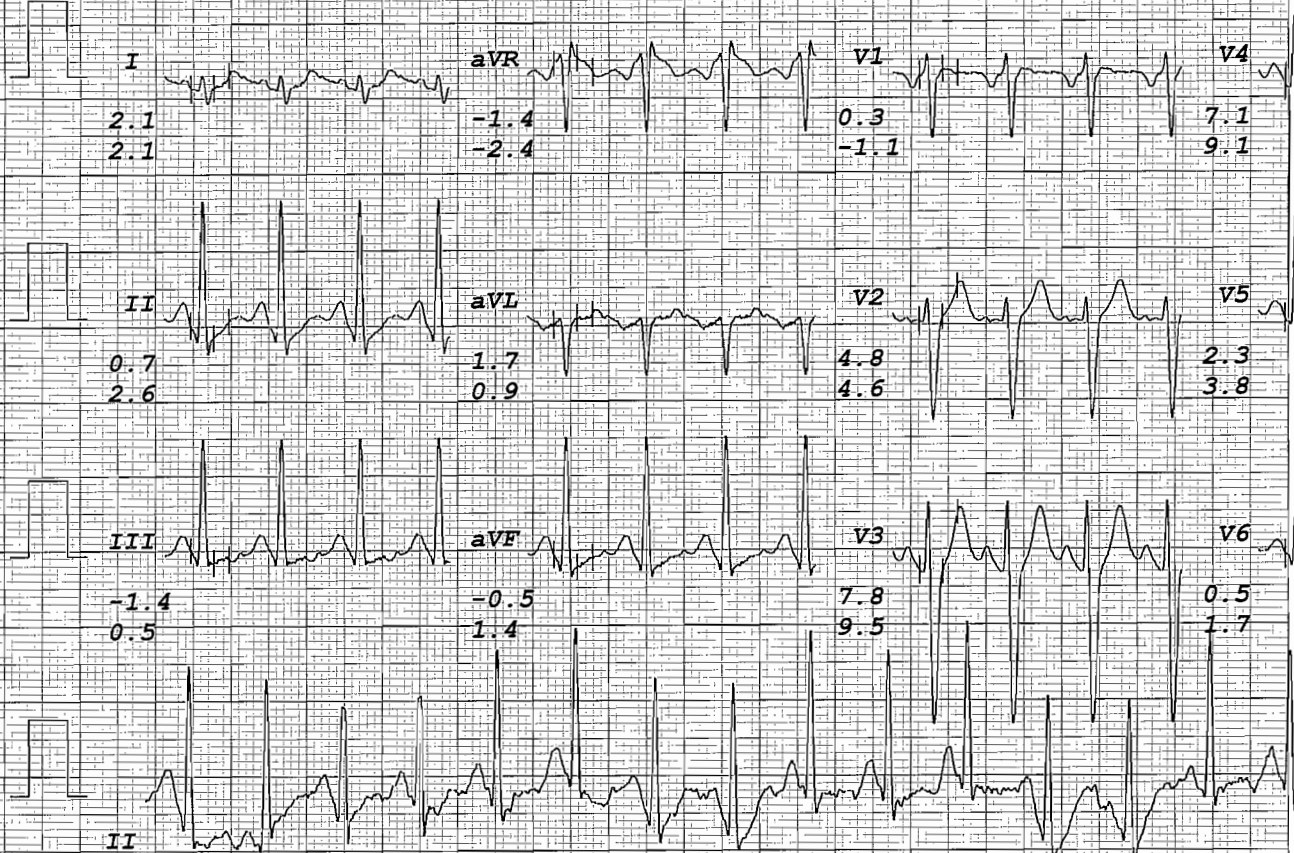
# APEX HOSPITAL

MR SANDEEP CHOUDHARY  
I.D. 8920  
Age 35/M  
Date 09-03-2024

RATE 144bpm  
B.P. 150/90

Bruce  
Stage 3  
TOTAL TIME 8:55  
PHASE TIME 2:55

ST @ 10mm  
80ms Pos  
Speed 5.4  
SLOPE 14



Base Corrected

UNI-EM, Indore. Tel. : +91-231-4030035, Fax:

# APEX HOSPITAL

MR SANDEEP CHOUDHARY

I.D. 8920

Age 35/M

Date 09-03-2024

RATE 195bpm

B.P. 150/90

Bruce

Stage 4

TOTAL TIME 11:55

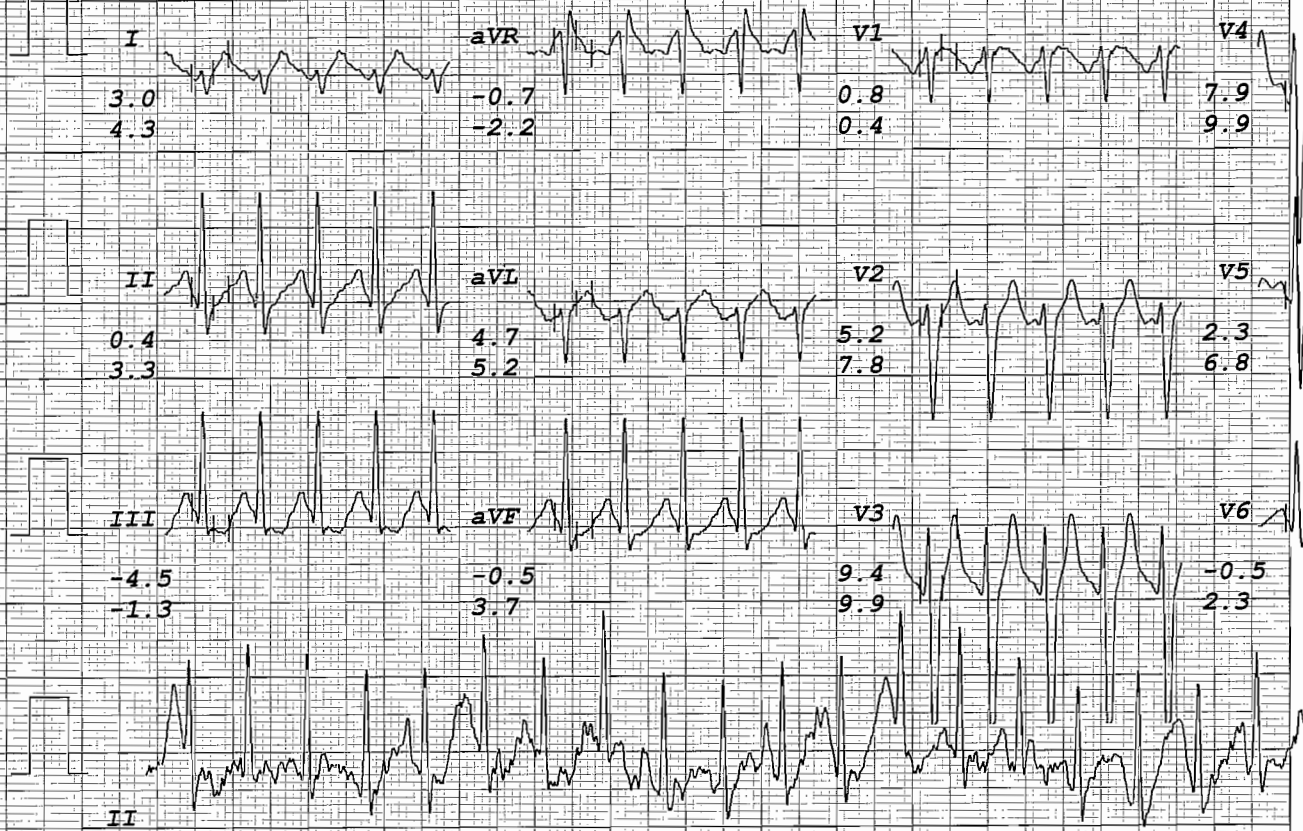
PHASE TIME 2:55

ST @ 10mm

80ms Post

Speed 6.

SLOPE 16



Base corrected

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# APEX HOSPITAL

MR SANDEEP CHOUDHARY

I.D. 8920

Age 35/M

Date 09-03-2024

RATE 176bpm

B.P. 150/90

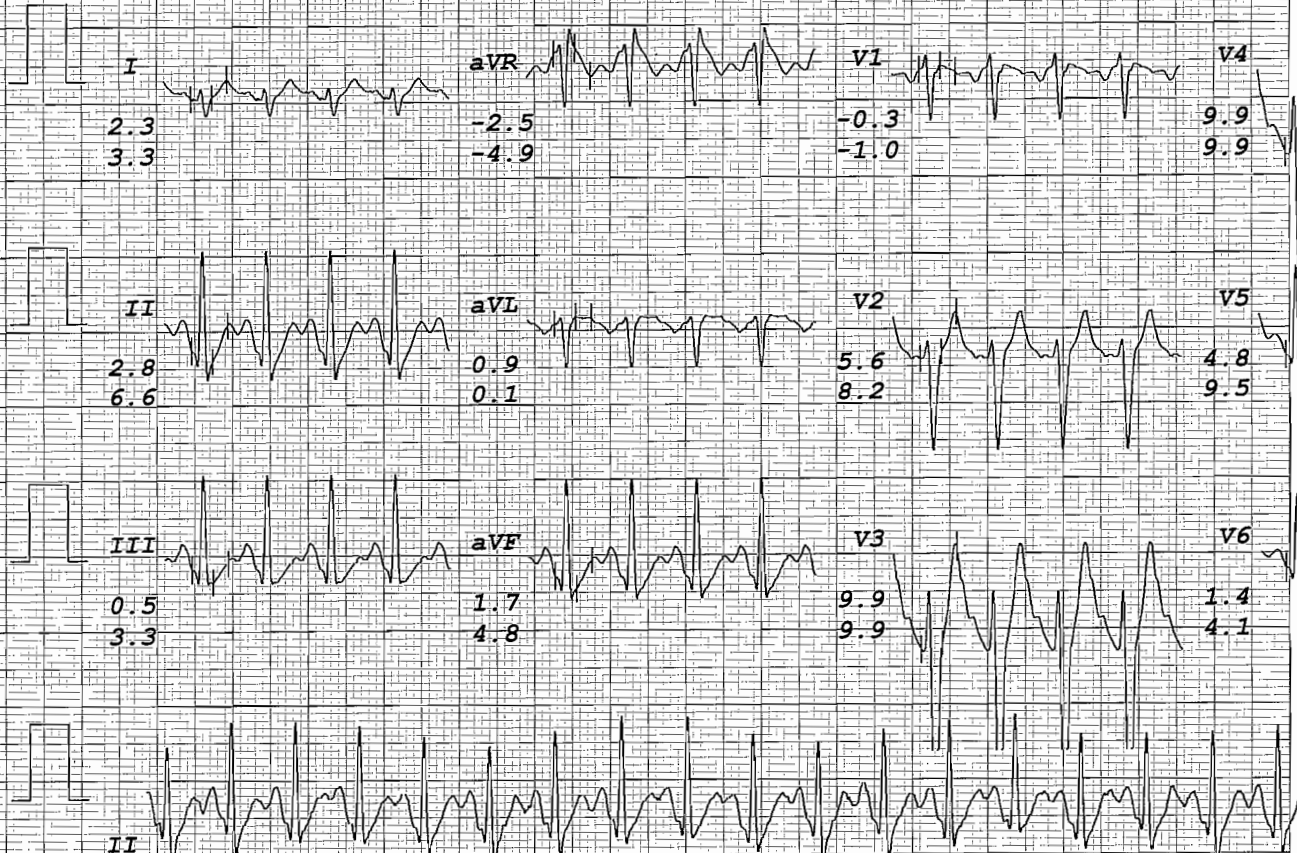
Bruce

RECOVERY

TOTAL TIME 12:55

PHASE TIME 0:29

ST @ 10mm/  
80ms Post



Base Corrected

UNI-EM, Indore. Tel. : +91-731-4030035, Fax:

acompu@india



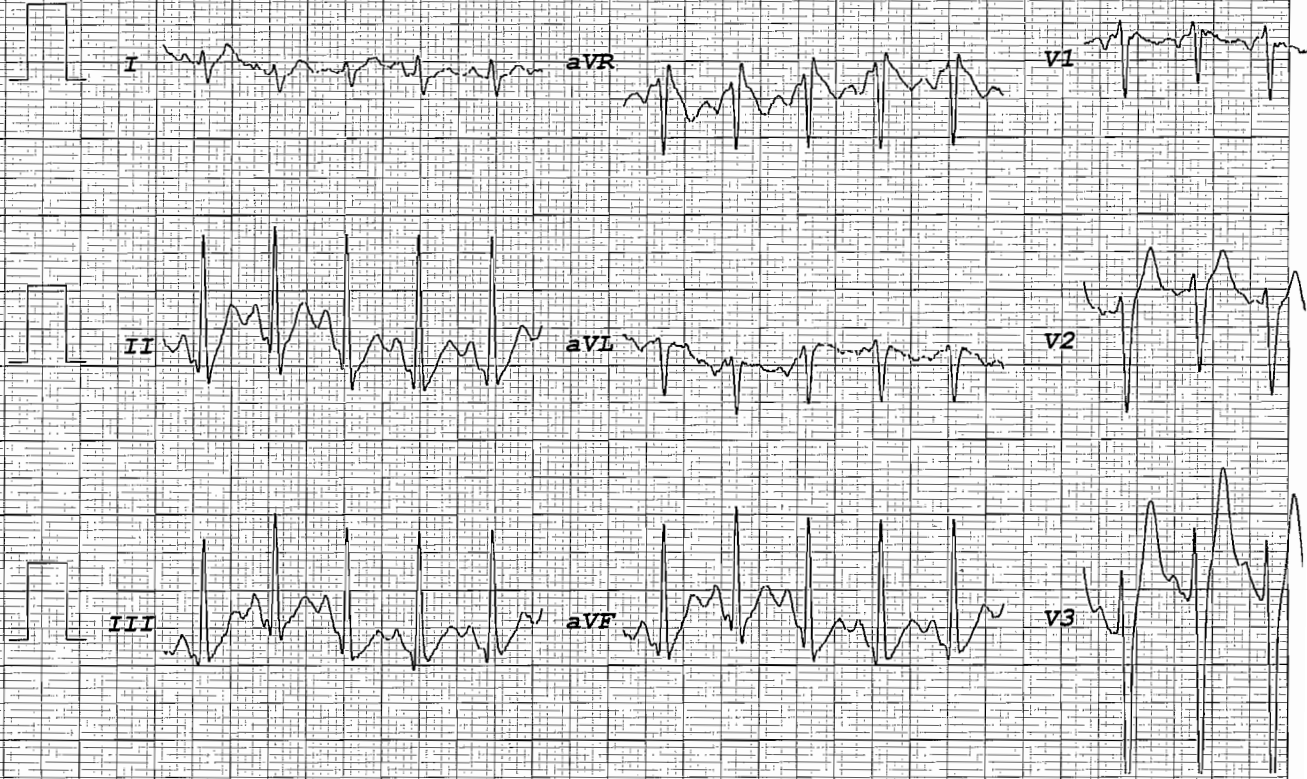
# APEX HOSPITAL

MR SANDEEP CHOUDHARY  
I.D. 8920  
Age 35/M  
Date 09-03-2024

RATE 159bpm  
B.P. 150/90

Bruce  
RECOVERY  
TOTAL TIME 13:20  
PHASE TIME 0:54

ST @ 10mm  
80ms Post



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Patient Id : PVD18323-24/71463      Sample ID : 24032668  
Patient : MR SANDEEP CHOUDHARY      Reg. Date : 09/03/2024  
Age/sex : 35 Yrs/ Male      Report Date : 09/03/2024  
Center : APEX HOSPITALS KANDIVALI      Case No. :  
Ref. By : Self



### IMMUNOASSAY

Test Description	Result	Unit	Biological Reference Range
<b>TOTAL T3 T4 TSH (TFT)</b>			
T3 (Triiodothyronine)	126.14	ng/dl	83-200  For Pregnant females: First Trim: 104.8 - 229.8 2nd Trim: 128.9 - 262.3 Third trim : 135.4 - 261.7
T4 (Thyroxine)	8.25	ug/dL	5.13 - 14.10  For Pregnant females: First Trim : 7.33 - 14.8 Second Trim : 7.93 - 16.1 Third Trim : 6.95 - 15.7
TSH(Thyroid Stimulating Hormone)	1.96	uIU/ml	0.27 - 4.20


Method : ECLIA

#### INTERPRETATION

TSH	T3 / FT3	T4 / FT4	Suggested Interpretation for the Thyroid Function Tests Pattern
Within Range	Decreased	Within Range	• Isolated Low T3-often seen in elderly & associated Non-Thyroidal illness. In elderly the drop in T3 level can be upto 25%.
Raised	Within Range	Within Range	• Isolated High TSH especially in the range of 4.7 to 15 mIU/ml is commonly associated with Physiological & Biological TSH Variability. • Subclinical Autoimmune Hypothyroidism • Intermittent T4 therapy for hypothyroidism • Recovery phase after Non-Thyroidal illness"
Raised	Decreased	Decreased	• Chronic Autoimmune Thyroiditis • Post thyroidectomy, Post radiolodine • Hypothyroid phase of transient thyroiditis"
Raised or within Range	Raised	Raised or within Range	• Interfering antibodies to thyroid hormones (anti-TPO antibodies) • Intermittent T4 therapy or T4 overdose • Drug interference- Amiodarone, Heparin, Beta blockers, steroids, anti-epileptics"
Decreased	Raised or within Range	Raised or within Range	• Isolated Low TSH -especially in the range of 0.1 to 0.4 often seen in elderly & associated with Non-Thyroidal illness • Subclinical Hyperthyroidism • Thyroxine ingestion"
Decreased	Decreased	Decreased	• Central Hypothyroidism • Non-Thyroidal illness • Recent treatment for Hyperthyroidism (TSH remains suppressed)"
Decreased	Raised	Raised	• Primary Hyperthyroidism (Graves' disease), Multinodular goitre, Toxic nodule • Transient thyroiditis: Postpartum, Silent (lymphocytic), Postviral (granulomatous, subacute, DeQuervain's), Gestational thyrotoxicosis with hyperemesis gravidarum"
Decreased or within Range	Raised	Within Range	• T3 toxicosis • Non-Thyroidal illness

-----End Of Report-----

**Term & Conditions\*** Test processed at Pathvision Central Processing Laboratory- Dahisar west Mumbai-68 Individual laboratory investigations are never conclusive but should be used along with other relevant clinical examinations to achieve final diagnosis. Any discrepancy with clinical condition the referring doctor or patient must report in 24hr of sample collection and get test redone. Partial reproduction of this report is not permitted The test report is not valid for Medico-legal purpose.

  
DR. SANDEEP B. PORWAL  
MBBS MD (Path) Mumbai  
MMC Reg no 2001031640



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## DEPARTMENT OF LABORATORY SCIENCES

<b>Patient Name</b>	Mr. SANDEEP CHOUDHARY	<b>LabNo</b>	14692	
<b>UHID/IP No</b>	150009602 / 11188	<b>Sample Date</b>	09/03/2024 11:16AM	
<b>Age/Gender</b>	35 Yrs/Male	<b>Receiving Date</b>	09/03/2024 11:35AM	
<b>Bed No/Ward</b>	OPD	<b>Report Date</b>	09/03/2024 7:14PM	
<b>Prescribed By</b>	Dr. Rajmangal Maurya	<b>Report Status</b>	Final	

## BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
<b>RFT (RENAL FUNCTION TEST)</b>				
Sample: Serum				
Creatinine	1.0	mg/dl	0.70 - 1.50	Jaffes
UREA	20.27	mg/dl	15 - 50	CDC Urease,Colorimetric
BUN - Blood Urea Nitrogen	9.47	mg/dl	7 - 20	
Calcium	9.2	mg/dl	8.6 - 10.5	Arsenazo III
Uric Acid	6.0	mm/hr	3.5 - 8.5	URICASE-PEROXIDASE
Phosphorus	3.9	mg/dl	2.5 - 5.0	Phosphomolybdate Reduction
Sodium	141.0	mEq/L	135 - 146	ISE Direct
Potassium	4.9	mEq/L	3.5 - 5.5	ISE Direct
Chloride	104.0	mEq/L	98 - 108	ISE Direct
Protein Total	6.9	gm/dl	6.00 - 8.00	Biuret
Albumin	3.8	gm/dl	3.20 - 5.00	Bromocresol Green (BCG)
Globulin	3.10	gm/dl	1.80 - 3.50	Calculated Value
A/G Ratio (Albumin/Globulin Ratio)	1.23		1.00 - 2.50	Calculated Value

--End Of Report--

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<b>Bed No/Ward</b>	OPD	<b>Report Date</b>	09/03/2024 7:14PM	
<b>Prescribed By</b>	Dr. Rajmangal Maurya	<b>Report Status</b>	Final	

## CLINICAL PATHOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
<b>URINE ROUTINE</b>				
Sample: Urine				
<b>PHYSICAL EXAMINATION</b>				
Quantity	30	ml		
Color	Pale Yellow			
Appearance	Slightly Hazy			Clear
Specific Gravity	1.020		1.010 - 1.025	
<b>CHEMICAL EXAMINATION</b>				
pH	6.0		4.5 - 8.5	
Protein	Absent			
Glucose	Absent			
Ketone	Absent			
Occult Blood	Absent			
Bile Salt	Absent			Absent
Bile Pigment	Absent			Absent
<b>MICROSCOPIC EXAMINATION</b>				
Pus Cells	1-2/hpf			
RBCs	Absent			
Epithelial Cells	1-2/hpf			
Crystals	Absent			Absent
Casts	Absent			Absent
Bacteria	Absent			Absent
Yeast Cells	Normal		Normal	
Amorphous Deposit	Absent			
Others	Absent			

--End Of Report--

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<b>Prescribed By</b>	Dr. Rajmangal Maurya	<b>Report Status</b>	Final	

## HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
<b>COMPLETE BLOOD COUNT(CBC) EDTA WHOLE BLOOD</b>				
Sample: W. B. EDTA				
Haemoglobin Estimation (Hb)	17.5	gm/dl	13.5 - 18.0	SLS- Hb Method
RBC Count (Red Blood Cell)	5.47	10 <sup>6</sup> /uL	4.70 - 6.00	
PCV (Haematocrit)	49.0	%	40.0 - 50.0	
MCV	89.58	fl	78 - 100	Calculated
MCH	<b>31.99 H</b>	pg	27 - 31	Calculated
MCHC	35.71	gm/dl	30 - 36	Calculated
RDW	12.3	%	11.0 - 16.0	Calculated
Total Leukocyte Count (TLC)	6400	cells/cu.mm	4000.0 - 10500.0	
Neutrophil %	56	%	40 - 80	
Lymphocyte %	40	%	20 - 40	
Eosinophil %	02	%	0 - 6	
Monocytes %	02	%	1 - 12	
Basophil %	00	%	0 - 2	
Absolute Neutrophil Count (ANC)	3584	/cu.mm	2000 - 7000	Calculated
Absolute Lymphocyte Count	2560	/cu.mm	1000 - 3000	Calculated
Absolute Eosinophil Count (AEC)	128	/cu.mm	20 - 500	Calculated
Absolute Monocyte Count	<b>128 L</b>	/cu.mm	200 - 1000	Calculated
Absolute Basophil Count	0.00	/cu.mm		CALCULATED
WBCs Morphology	Within normal limits.			
RBCs Morphology	Normocytic Normochromic.			
Platelet Count	164	10 <sup>3</sup> /uL	150 - 400	DC Detection
Platelets Morphology	Adequate on smear			
MPV	<b>13.6 H</b>	fl	7 - 12	

--End Of Report--

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<b>Bed No/Ward</b>	OPD	<b>Report Date</b>	09/03/2024 7:14PM	
<b>Prescribed By</b>	Dr. Rajmangal Maurya	<b>Report Status</b>	Final	

## HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
<b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b>				
Sample: W. B. EDTA				
SR (Erythrocyte Sed.Rate)	<b>22 H</b>	mm/hr	< 15	Westergren

--End Of Report--

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<b>Prescribed By</b>	Dr. Rajmangal Maurya	<b>Report Status</b>	Final	

## IMMUNO-HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
<b>BLOOD GROUPING</b>				
Sample: W. B. EDTA				
Blood Group (ABO and Rh)	"B" Rh Positive			SLIDE METHOD

--End Of Report--

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<b>Prescribed By</b>	Dr. Rajmangal Maurya	<b>Report Status</b>	Final	

## BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
<b>GLUCOSE (PP)</b>				
Sample: Fl. Plasma				
Blood Sugar(2 Hours PP)	95.99	mg/dl	70 - 140	Glucose Oxidase,Hydrogen Peroxide
Urine PP Sugar	Absent		Absent	
Urine PP Ketone	Absent		Absent	

Note: An individual may show higher fasting glucose level in comparison to post prandial glucose level due to following reasons :  
The glycaemic index and response to food consumed, Changes in body composition, Increased insulin response and sensitivity, Alimentary hypoglycemia, Renal glycosuria, Effect of oral hypoglycaemics & Insulin treatment.

<b>GLUCOSE (FASTING)</b>				
Sample: Fl. Plasma				
Glucose (Fasting Blood Sugar / FBS)	105.0	mg/dl	70 - 110	Glucose Oxidase,Hydrogen Peroxide
Urine Fasting Sugar	Absent		Absent	
Urine Fasting Ketone	Absent		Absent	

--End Of Report--

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Laboratory Management System | New Laboratories

## DIAGNOSTIC

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Patient Id : PVD18323-24/71463	Sample ID : 24032668
Patient : MR SANDEEP CHOUDHARY	Reg. Date : 09/03/2024
Age/sex : 35 Yrs/ Male	Report Date : 09/03/2024
Center : APEX HOSPITALS KANDIVALI	Case No. :
Ref. By : Self	



### HBA1C-GLYCOSYLATED HAEMOGLOBIN

Test Description	Result	Unit	Biological Reference Range
HbA1c- (EDTA WB)	5.2	%	< 5.6 Non-diabetic 5.7-6.4 Pre-diabetic > 6.5 Diabetic
Estimated Average Glucose (eAG)	102.54	mg/dL	
Method : HPLC-Biorad D10-USA			

#### INTERPRETATION

- HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
- HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
- Trends in HbA1c are a better indicator of diabetic control than a solitary test.
- Low glycosylated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
- To estimate the eAG from the HbA1C value, the following equation is used:  $eAG(mg/dl) = 28.7 * A1c - 46.7$
- Interference of Haemoglobinopathies in HbA1c estimation.
  - For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
  - Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status
  - Heterozygous state detected (D10/ Tosho G8 is corrected for HbS and HbC trait).
- In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control.
  - Excellent Control - 6 to 7 %
  - Fair to Good Control - 7 to 8 %
  - Unsatisfactory Control - 8 to 10 %
  - and Poor Control - More than 10 %.

**Note :** Haemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy

DR. SANDEEP B. PORWAL  
MBBS MD (Path) Mumbai  
MMC Reg no 2001031640





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## DEPARTMENT OF LABORATORY SCIENCES

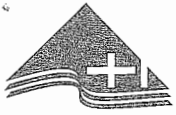
<b>Patient Name</b>	Mr. SANDEEP CHOUDHARY	<b>LabNo</b>	14692	
<b>UHID/IP No</b>	150009602 / 11188	<b>Sample Date</b>	09/03/2024 11:16AM	
<b>Age/Gender</b>	35 Yrs/Male	<b>Receiving Date</b>	09/03/2024 11:35AM	
<b>Bed No/Ward</b>	OPD	<b>Report Date</b>	09/03/2024 7:14PM	
<b>Prescribed By</b>	Dr. Rajmangal Maurya	<b>Report Status</b>	Final	

## BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
<b>LIPID PROFILE SERUM</b>				
Sample: Serum				
Cholesterol-Total	158.0	mg/dl	< 200.00	Cholesterol Oxidase,Esterase,Peroxidase
Triglycerides	85.0	mg/dl	< 150	Enzymatic End point
HDL Cholesterol	49.0	mg/dl	40.00 - 60.00	Phosphotungstat
VLDL Cholesterol	17.00	mg/dl	6.00 - 38.00	Calculated Value
LDL Cholesterol	92.00	mg/dl	< 100.00	Calculated Value
Cholesterol Total : HDL Cholesterol Ratio	<b>3.22 L</b>		3.50 - 5.00	Calculated Value
LDL Cholesterol : HDL Cholesterol Ratio	<b>1.88 L</b>		2.50 - 3.50	Calculated Value

--End Of Report--

**Dr. SANDEEP B PORWAL**  
MBBS MD (Path) Mumbai



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<b>Patient Name</b>	Mr. SANDEEP CHOUDHARY	<b>LabNo</b>	14692	
<b>UHID/IP No</b>	150009602 / 11188	<b>Sample Date</b>	09/03/2024 11:16AM	
<b>Age/Gender</b>	35 Yrs/Male	<b>Receiving Date</b>	09/03/2024 11:35AM	
<b>Bed No/Ward</b>	OPD	<b>Report Date</b>	09/03/2024 7:14PM	
<b>Prescribed By</b>	Dr. Rajmangal Maurya	<b>Report Status</b>	Final	

## BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
<b>LIVER FUNCTION TEST (LFT) SERUM</b>				
Sample: Serum				
Bilirubin Total (TBil)	0.88	mg/dl	0.30 - 1.30	Diphyline Diazonium Salt
Bilirubin Direct (Dbil)	0.45	mg/dl	0.00 - 0.50	
Bilirubin indirect	0.43	mg/dl	0 - 1	
SGPT (ALT)	34.90	U/L	5 - 40	IFCC modified
SGOT (AST)	26.18	U/L	5 - 40	IFCC modified
Protein Total	6.9	gm/dl	6.00 - 8.00	Biuret
Albumin	3.8	gm/dl	3.20 - 5.00	Bromocresol Green (BCG)
Globulin	3.10	gm/dl	1.80 - 3.50	Calculated Value
A/G Ratio (Albumin/Globulin Ratio)	1.23		1.00 - 2.50	Calculated Value
Alkaline Phosphatase	64.68	IU/L	42 - 140	
GGTP (GAMMA GT)	35.0	IU/L	15.0 - 72.0	UV Kinetic IFCC

--End Of Report--

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MR. sandeep choudhary 35/m

BP - 130/90 mmHg

Pulse - 84/min

SpO2 - 97%

Height - 171 cm

weight - 67.9 kg

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Akurli Road, Next To Lodha Woods,  
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Gate No. 4, Kandivali (E), Mumbai - 101.

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918124

Mr. Sandeep Chaudhary

Age - 35yr male.

○ Ophthal  
Measr.

Ⓡ eye - Clear.

Ⓛ eye - N-6.

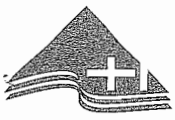
Distance -

Ⓡ eye - 0.18

Ⓛ eye - 0.30.

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# APEX HOSPITALS KANDIVALI DIAGNOSTIC

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Tele.:  
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<b>Patient Name:</b>	Mr. SANDEEP CHOUDHARY	M /35 Yrs
<b>Ref. by:</b>	MEDIWHEEL HEATHCARE	Date: -09 /03/2024

## SONOGRAPHY OF ABDOMEN AND PELVIS

**TECHNIQUE:** Real time, B mode, gray scale sonography of the abdominal and pelvic organs was performed with convex transducer.

**LIVER:** The liver is normal in size (13.1 cm), shape and has smooth margins. The hepatic parenchyma shows homogeneous echotexture without solid or cystic mass lesion or calcification. No evidence of intrahepatic biliary radical dilatation.

**PORTAL VEIN:** It measures 10 mm in transverse diameter.

**GALL BLADDER:** The gall bladder is well distended. There is no evidence of calculus, wall thickening or pericholecystic collection.

**COMMON BILE DUCT:** The visualised common bile duct is normal in caliber. No evidence of calculus is seen in the common bile duct. Terminal common bile duct is obscured due to bowel gas artifacts.

**PANCREAS:** The head and part of body of pancreas is normal in size, shape, contours and echo texture. Rest of the pancreas is obscured due to bowel gas artifacts.

**SPLEEN:** The spleen measures 11.1 cm and is normal in size and shape. Its echotexture is homogeneous.

**KIDNEYS:**

Right kidney	Left kidney
10.9 x 5.3 cm	10 x 5.3 cm

The kidneys are normal in size and have smooth renal margins. Cortical echotexture is normal. The central echo complex does not show evidence of hydronephrosis. No evidence of hydroureter or calculi, bilaterally.

**URINARY BLADDER:** The urinary bladder is well distended. It shows uniformly thin walls and sharp mucosa. No evidence of calculus is seen. No evidence of mass or diverticulum is noted.

.....Continue On Page 2



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**PROSTATE:** It measures about 3 x 3 x 3.8 cm; volume is 13 gm. The prostate gland shows well defined and smooth margins. The prostatic echotexture is normal and homogeneous.

There is no ascites. There is no obvious evidence of significant lymphadenopathy.

Bowel loops are not dilated and reveal normal peristalsis. No abnormal bowel wall thickening seen.

## IMPRESSION:

- No significant abnormality is seen.

Thanks for the reference.

With regards,

Dr. Ravi Kumar, MD







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## DEPARTMENT OF RADIOLOGY

<b>Patient Name</b>	Mr. SANDEEP CHOUDHARY	<b>LabNo</b>	14692
<b>UHID/IP No</b>	150009602 / 11188	<b>Order Date</b>	09/03/2024 11:16AM
<b>Age/Gender</b>	35 Yrs/Male	<b>Receiving Date</b>	09/03/2024 11:52AM
<b>Bed No/Ward</b>	OPD	<b>Report Date</b>	09/03/2024 5:29PM
<b>Prescribed By</b>	Dr. Rajmangal Maurya	<b>Report Status</b>	Final



### DIGITAL X-RAY CHEST PA VIEW

The lung on either side shows equal translucency and exhibit normal vasculature

The pleural spaces are normal.

Both hila are normal in size, have equal density and bear normal relationship.

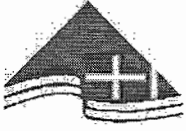
The cardiac size is normal.

Trachea is central in position and no mediastinal abnormality is visible.

Bony thorax is normal.

--End Of Report--

**Dr. SAUMIL PANDYA**  
MD, D.N.B, RADIOLOGIST



# Apex Hospitals Kandivali

Akuri Rd., Near Lodha Woods & Mahindra Gate no.4,  
Lokhandwala Township, Kandivali (E), Mumbai – 400101.  
Contact No.:-022-62747000

Website:-www.apexgroupofhospitals.com

Email:-info@apexhospitals.in

GST No.:-27AACFN8496M1ZG



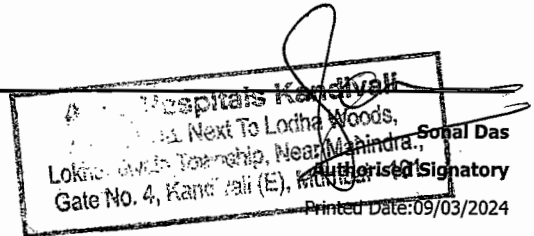
## Credit Bill OP

Reg No : 150009602	Bill No : OPCR2324/273	Payer : MEDIWHEEL(ARCOFEMI HEALTHCARE)
Patient Name : Mr. SANDEEP CHOUDHARY	Bill Date Time : 09/03/2024 11:16AM	Presc. Doctor : Dr. Raimanlal Maurva
Gender/Age : Male/35 Yr 2 Mth 25 Days	Lab No : 14692	Referred By : Self
Contact No : 8928625827	Address : 306 SUNDARAM 4B RAHEJA COMPLEX MALAD EAST MUMBAI , MUMBAI, MAHARASHTRA, INDIA, - 400097	

SNo.	Particulars	Rate (₹)	Unit	Total	Disc.	Net Amt	Pat Amt	Payer Amt
1	MEDIWHEEL FULL BODY ANNUAL PLUS (Dr. Apex Hospitals)	2520.00	1.00	2520.00	0.00	2520.00	0.00	2520.00
<b>Details Of Package</b>								
2	ECG (Dr. Apex Hospitals)							
3	STRESS TEST (TMT) (Dr. Vivek Kamalkumar Agarwal)							
4	DIETICIAN CHARGES (Dr. Mrinali Dwivedi)							
5	OPD CONSULTATION (Dr. Rajmangal Maurya)							
5	RFT (RENAL FUNCTION TEST) (Dr. SANDEEP B PORWAL)							
7	T3 + T4 + TSH (Dr. SANDEEP B PORWAL)							
3	URINE ROUTINE (Dr. SANDEEP B PORWAL)							
3	COMPLETE BLOOD COUNT(CBC) EDTA WHOLE BLOOD (Dr. SANDEEP B PORWAL)							
10	ERYTHROCYTE SEDIMENTATION RATE (ESR) (Dr. SANDEEP B PORWAL)							
11	BLOOD GROUPING (Dr. SANDEEP B PORWAL)							
12	GLUCOSE (PP) (Dr. SANDEEP B PORWAL)							
13	GLUCOSE (FASTING) (Dr. SANDEEP B PORWAL)							
14	GLYCOCYLATED HEMOGLOBIN (HBA1C) (Dr. SANDEEP B PORWAL)							
15	LIPID PROFILE SERUM (Dr. SANDEEP B PORWAL)							
16	LIVER FUNCTION TEST (LFT) SERUM (Dr. SANDEEP B PORWAL)							
17	VISION TEST (EYE CHECK UP) (Dr. Rajmangal Maurya)							
18	BMI (BOODY MASS INDEX) (Dr. Apex Hospitals)							
19	USG ABD & PELVIS (Dr. RAVI RAMESH CHANDRA KUMAR)							
20	X RAY CHEST PA (Dr. SAUMIL PANDYA)							

Gross Amount	2520.00
Round Off Amount	
Net Amount	2520.00
Payer Amount	2520.00
Patient Amount	0.00
Amt Received (Rs.)	0.00
Balance Amount	2520.00

Varration :



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