Dr. Vimmi Goel MBBS, MD (Internal Medicine) Sr. Consultant Non Invasive Cardiology Reg. No. MMC- 2014/01/0113

CN 7499913052



Name :	Mr.	Raybans	prou	eash	Date : 9   12   2	3 ,
Age :	414	Bex: MF Weight	80.2 kg	Height: 170.5 Inc	вмі: 283	
	,		ilee : S.	<b>A</b>	RBS ;	mg/dl
		S	PO2: 97	1.		

## **Dr. Rahul Atara**BDS, MDS (Endodontics) Sr. Consultant Dental Surgeon Reg. No: A-16347



Name: My.	Roghans	Prakash		Date :	09/12/23
Age: 41 438	Sex : M/F We	eight: kg He	ight :inc	ВМІ :	
BP :	mmHg	Pulse :		RBS :	
	Roud	the Dental			mg/dl
PMH- NRH	1				
PDH - H/	a extract	ion & -4	6		
OR-					
- Deeb	Proximal	Caries E	6		
- Missing	5 Hook	76;	Suprograph	ed tooth	c 7/
	todoed .	tooth =	1		
Advice.	++ ;	Calculus +	; Polobility	(Growle	e I) & lowerant
	RCT &	Capping &	71		
	Implan	+ = 7 8	_		
	Osal	Prophylanis			

Dr Tidnyasa





## DEPARTMENT OF PATHOLOGY

**Patient Name** 

: Mr. RAJBANS PRAKASH

Bill No/ UMR No : BIL2324061303/UMR2324030164

Received Dt

:09-Dec-23 09:00 am

Age / Gender : 41 Y(s)/Male

Referred By : Dr. Vimmi Goel MBBS,MD

Report Date :09-Dec-23 11:47 am

## **HAEMOGRAM**

Eosinophils  36.2  20 - 40 %  Flow Cytomicroscop  Monocytes  5.8  2 - 10 %  Flow Cytomicroscop  Flow Cytomicroscop	ometry/Light py
--	---





## DEPARTMENT OF PATHOLOGY

**Patient Name** : Mr. RAJBANS PRAKASH

Bill No/ UMR No : BIL2324061303/UMR2324030164

**Received Dt** :09-Dec-23 09:00 am Age /Gender :41 Y(s)/Male

Referred By : Dr. Vimmi Goel MBBS,MD

**Report Date** :09-Dec-23 11:47 am

			Report Date : 09-De	ec-23 11:47 am
Parameter Absolute Lymphocyte Count Absolute Eosinophil Count Absolute Monocyte Count Absolute Basophil Count PERIPHERAL SMEAR	<u>Specimen</u>	Results 2353 201.5 377 6.5	Biological Reference 1000 - 4800 /cumm 20 - 500 /cumm 200 - 1000 /cumm 0 - 100 /cumm	
RBC  WBC  Platelets		Normochromic Normocytic, Anisocytosis +(Few) As Above		Light microscopy
ESR		Adequate 02	0 - 15 mm/hr	Autor
		*** End Of Re		Automated Westergren's Method

Suggested Clinical Correlation \* If neccessary, Please

Verified By : : 11100245

Test results related only to the item tested.

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Page 2 of 2



## DEPARTMENT OF BIOCHEMISTRY

**Patient Name** : Mr. RAJBANS PRAKASH

BIII No/ UMR No : BIL2324061303/UMR2324030164

**Received Dt** :09-Dec-23 09:00 am Age /Gender :41 Y(s)/Male

Referred By : Dr. Vimmi Goel MBBS,MD

**Report Date** :09-Dec-23 10:48 am

Fasting Plasma Glucose Post Prandial Plasma Glucose Post Prandial Plasma Glucose  87  4 100 mg/dl  GOD/POD,Colorimetric	<u>Parameter</u>			.09-Dec-	23 10:48 am
	Fasting Plasma Glucose Post Prandial Plasma Glucose	Plasma	87	Biological Reference < 100 mg/dl	Method  GOD/POD,Colorimetric
5.3	HbA1c	(11	_		Colorimetric

Non-Diabetic :  $\leq$  5.6 % Pre-Diabetic: 5.7 - 6.4 **HPLC** 

Diabetic : >= 6.5 %

\*\*\* End Of Report \*\*\*

Suggested Clinical Correlation \* If neccessary, Please

Verified By : : 11100245

Test results related only to the item tested.

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SPANV de Signa de Signa de Signa de Signa de Limited 44, Parwana Bhawan, Kingsway, Nagpur - 440 001, Maharashtra, India.

Phone: +91 0712 6789100 CIN: U74999MH2018PTC303510



## CLINICAL DIAGNOSTIC LABORATORY DEPARTMENT OF BIOCHEMISTRY

: Mr. RAJBANS PRAKASH **Patient Name** 

Age /Gender :41 Y(s)/Male

Bill No/ UMR No : BIL2324061303/UMR2324030164

Referred By : Dr. Vimmi Goel MBBS,MD

:09-Dec-23 09:00 am Received Dt

:09-Dec-23 11:06 am Report Date

## LIPID PROFILE

LAI IN I ITO I III				
<u>Parameter</u>	<u>Specimen</u>	Results		<u>Method</u>
Total Cholesterol	Serum	183	< 200 mg/dl	Enzymatic(CHE/CHO/PO D)
Triglycerides		147	< 150 mg/dl	Enzymatic (Lipase/GK/GPO/POD)
HDL Cholesterol Direct		42	> 40 mg/dl	Phosphotungstic acid/mgcl-Enzymatic (microslide)
LDL Cholesterol Direct		110.05	< 100 mg/dl	Enzymatic
VLDL Cholesterol		29	< 30 mg/dl	Calculated
Tot Chol/HDL Ratio		4	3 - 5	Calculation
Intiate therapeutic			Consider Drug therapy	LDC-C
CHD OR CHD risk equivalent		>100	>130, optional at 100-129	<100

Intiate therapeutic		Consider Drug therapy	<u>LDC-C</u>
CHD OR CHD risk equivalent	>100	>130, optional at 100-129	<100
Multiple major risk factors conferring			
10 yrs CHD risk>20%			
Two or more additional major risk	>130	10 yrs risk 10-20 % >130	<130
factors,10 yrs CHD risk <20%		10 yrs risk <10% >160	
No additional major risk or one	>160	>190,optional at 160-189	<160
additional major risk factor			,

\*\*\* End Of Report \*\*\*

Suggested Clinical Correlation \* If neccessary, Please discuss

Verified By:: 11100511

Test results related only to the item tested.

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Dr. PURVA JAISWAL, MBBS,MD,DNB

**CONSULTANT PATHOLOGIST** 

SPANV Medisearch Lifesciences Private Limited

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CIN: U74999MH2018PTC303510



## DEPARTMENT OF BIOCHEMISTRY

**Patient Name** : Mr. RAJBANS PRAKASH

Bill No/ UMR No : BIL2324061303/UMR2324030164

Received Dt :09-Dec-23 09:00 am Age /Gender :41 Y(s)/Male

Referred By : Dr. Vimmi Goel MBBS,MD

	33 23 03.00 am	1	Donat -	III Goel MBBS,MD
<u>Parameter</u>	Specimen	Poswit		23 11:06 am
THYROID PROFILE		<u>Results</u>	<u>Biological Reference</u>	Method
Free T4	Serum	1.38	0.55 - 1.70 ng/ml	Enhanced
ТЅН		1.35	0.80 - 1.70 ng/dl	chemiluminescence
PSA (Total)		0.973	0.50 - 4.80 uIU/ml	Enhanced
	0.427 < 4 ng/ml			chemiluminescence Enhanced
		*** End Of R	Report ***	chemiluminenscence

Suggested Clinical Correlation \* If neccessary, Please

Verified By : : 11100511

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## DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mr. RAJBANS PRAKASH

Bill No/ UMR No : BIL2324061303/UMR2324030164 Received Dt

:09-Dec-23 09:00 am

Age /Gender :41 Y(s)/Male

Referred By : Dr. Vimmi Goel MBBS,MD

	03.00 an			Goel MBBS,MD		
<u>Parameter</u>	Specimen		HOLES BOOK TO BE STORY	23 11:06 am		
RFT	greemen	Result Values	Biological Reference	Method		
Blood Urea				PIREITOG		
Creatinine	Serum	14	19.0 - 43.0 mg/dl	Urease with Indicator		
GFR		0.79	0.66 - 1.25 mg/dl	aye		
Sodium		114.5	····g/ di	Enzymatic ( creatinine amidohydrolase)		
Potassium		139	136 - 145 mmol/L	Calculation by CKD-EPI 2021 Direct ion selective		
		3.73	3.5 - 5.1 mmol/L	electrode Direct ion selective		
LIVER FUNCTION TES	T(LFT)			electrode		
Total Bilirubin Direct Bilirubin Indirect Bilirubin		0.54 <b>0.39</b>	0.2 - 1.3 mg/dl 0.1 - 0.3 mg/dl	Azobilirubin/Dyphylline Calculated		
Alkaline Phosphatase		0.15 <b>162</b>	0.1 - 1.1 mg/dl	Duel wavelength		
SGPT/ALT SGOT/AST		42	38 - 126 U/L 10 - 40 U/L	spectrophotometric pNPP/AMP buffer Kinetic with pyridoxal phosphate Kinetic with pyridoxal		
Serum Total Protein		35	15 - 40 U/L			
Albumin Serum		7.33	6.3 - 8.2 gm/dl	Biuret (Alkaline cupric		
Globulin		3.90	3.5 - 5.0 gm/dl	Bromocresol green Dv		
A/G Ratio		3.43 1.14	2.0 - 4.0 gm/dl	Binding  Calculated		
	:	*** End Of Rep	Ort ***			
		ar Kep	OI C TOTAL			

Suggested Clinical Correlation \* If neccessary, Please discuss

Verified By : : 11100511

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Dr. PURVA JAISWAL, MBBS,MD,DNB SPANV do no section to participate Spivate Limited 44, Parwana Bhawan, Kingsway, Nagpur - 440 001, Maharashtra, India.



## DEPARTMENT OF PATHOLOGY

74 Por Fare : U9-Dec-23 U1:3/ pm	vebol c pare		
200 000 000 000	Dancet Date	: 09-Dec-23 09:11 am	Received Dt
Referred By : Dr. Vimmi Goel MBBS,MD	Referred By	· 0:102040303/01:182324030104	
		Bill No / UMR No : BIL 2324061303 / IMB 2324030164	Bill No/ UMR No
Age / Gender : 41 Y(s)/Male	Age /Gender	- SCIENTING - FRANCISH	acidir Hallid
		· Mr DAIDANN DIACAN	Patient Name

## URINE MICROSCOPY

5										0	
R.B.C. Pus Cells Casts	MICROSCOPIC EXAMINATION	Ketone Bodies Nitrate	Sugar Bilirubin	Specific gravity Urine Protein	Reaction (pH)	CHEMICAL EXAMINATION	Appearance	Colour.	Volume	Parameter PHYSICAL EXAMINATION	
	N N								Urine	Specimen	
0-1 0-4 /hpf 1-2 0-4 /hpf 0-1 0-4 /hpf Absent 0-4 /hpf	Normal	Negative Negative	25mg/dl) Negative Negative	1.020 1.005 - 1.025 1+ (Approx	5.5 4.6 - 8.0		Clear	Pale yellow	30 ml	Results	
Manual	Ehrlich's Reaction	Legal's est Principle	indicator of principal indicator GOD/POD	ion concentration	Indicators					Method	







## DEPARTMENT OF PATHOLOGY

**Patient Name** 

: Mr. RAJBANS PRAKASH

Age /Gender :41 Y(s)/Male

Bill No/ UMR No : BIL2324061303/UMR2324030164

Referred By

:Dr. Vimmi Goel MBBS,MD

**Received Dt** 

:09-Dec-23 09:11 am

**Report Date** 

:09-Dec-23 01:37 pm

**Parameter** Crystals

**Specimen** 

**Results** 

<u>Method</u>

Calcium oxalate crystals are seen.

\*\*\* End Of Report \*\*\*

This is an Amended and Revised Report of BIL2324061303 on 12/9/2023 8:35:03AM

Suggested Clinical Correlation \* If neccessary, Please

Verified By : : 11500028

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Phone: +91 0712 6789100 CIN: U74999MH2018PTC303510







## CLINICAL DIAGNOSTIC LABORATORY **DEPARTMENT OF IMMUNO HAEMATOLOGY**

**Patient Name** 

: Mr. RAJBANS PRAKASH

Age /Gender :41 Y(s)/Male

Bill No/ UMR No : BIL2324061303/UMR2324030164

Referred By : Dr. Vimmi Goel MBBS,MD

Gel Card Method

**Received Dt** 

:09-Dec-23 09:00 am

**Report Date** 

:09-Dec-23 11:42 am

## **BLOOD GROUPING AND RH**

**Parameter BLOOD GROUP.**  Specimen Results

EDTA Whole "A"

Blood & Plasma/ Serum

Rh (D) Typing.

" Positive "(+Ve)

\*\*\* End Of Report \*\*\*

Suggested Clinical Correlation \* If neccessary, Please

Verified By:: 11100245

Test results related only to the item tested.

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## DEPARTMENT OF RADIOLOGY & IMAGING SCIENCE

NAME	RAJBANS PRAKASH	ADIOLOGY & IMAGING STUDY DATE	
AGE/ SEX	41Y / M		09-12-2023 10:13:54
,		HOSPITAL NO.	UMR2324030164
ACCESSION NO.	BIL2324061303-17	MODALITY	DX
REPORTED ON	09-12-2023 13:01		DX
	05 12-2025 15:01	REFERRED BY	Dr. Vimmi Goel

## X-RAY CHEST PA VIEW

Both the lung fields are clear.

Heart and Aorta are normal.

Both hilar shadows appear normal.

Diaphragm domes and CP angles are clear.

Bony cage is normal.

IMPRESSION -

No pleuro-parenchymal abnormality seen.

DR NAVEEN PUGALIA MBBS, MD [076125]

SENIOR CONSULTANT RADIOLOGIST.



PATIENT NAME:	MR. RAJBANS PRAKASH	A 60 M (6 m)	
UMR NO: REF BY		AGE /SEX:	41 YRS/M 2324061303
	2324030164 DR. VIMMI GOEL	BILL NO:	
		DATE:	09/12/2023

## USG WHOLE ABDOMEN

LIVER is mildly enlarged in size and show increase in echotexture.

No evidence of any focal lesion seen. Intrahepatic billiary radicals are not dilated.

PORTAL VEIN and CBD are normal in course and caliber.

GALL BLADDER is physiologically distended. No sludge or calculus seen. Wall thickness is within normal limits.

PANCREAS is normal in shape, size and echotexture.

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

Both KIDNEYS are normal in shape, size and echotexture. No evidence of calculus or hydronephrosis seen. URETERS are not dilated.

BLADDER is partially distended. No calculus or mass lesion seen.

Prostate is normal in size, shape and echotexture. Wt- 17.6 gms.

There is no free fluid or abdominal lymphadenopathy seen.

IMPRESSION:

Mild hepatomegaly with fatty infiltration.

No other significant abnormality seen.

Suggest clinical correlation / further evaluation.

DR NAVEEN PUGALIA. MBBS, MD [076125]

SENIOR CONSULTANT RADIOLOGIST



Patient Name : <u> 2D ECHOCARDIOGRAPHY AND COLOR DOPPLER REPORT</u>

UMR

Date UMR2324030164

ECG Done by : 09/12/2023 : Dr. Vimmi Goel

ECG: NSR, LVH, Minor ST-T changes
Blood pressure: 172/89 mm Hg (Right arm, Supine position)

Impression: <u>Hypertensive Heart Disease</u> IVC is normal in size and collapsing well with respiration No clots or pericardial effusion No pulmonary hypertension Valves are normal E/E' is 9.6 (Borderline filling pressure) Normal LV diastolic function Good LV systolic function, LVEF 70% No RWMA of LV at rest Mild left ventricular hypertrophy Normal chambers dimensions

## Comments:

E/E' is 9.6 (Borderline filling pressure). Sector echocardiography was performed in various conventional views (PLAX, SSAX, AP4 CH and 5 CH views). LV size normal. There is no RWMA of LV seen at rest. Good LV systolic function. LVEF 70%. Normal LV diastolic function. E Velocity is 75 cm/s. A Velocity is 55 cm/s. E/A is 1.4. Valves are normal. No Pulmonary Hypertension. IVC normal in size and collapsing well with respiration. Pericardium is normal. No clots or pericardial effusion seen. E' at medial mitral annulus is 8.8 cm/sec & at lateral mitral annulus is 9.3 cm/sec.

## M Mode echocardiography and dimension:

	Left atrium Aortic root LVIDd LVIDs IVS (d) LVPW (d) LVEF % Fractional Shortening
P.T.0	Normal range (mm) (adults) (children) 19-40 7-37 20-37 7-28 35-55 8-47 23-39 6-28 6-11 4-8 6-11 4-8 6-11 4-8
Dr. Vimmi Goel MD, Sr. Consultant Non-invasive Cardiolo	Observed (mm)  27 26 42 26 12 70% 40%

09-Dec-23 2:08:01 PM	normal P axis, V-rate 50-99 P, P'>60ms, <-0.15mv v1 multiple voltage criteria sT >0.20 mV in V1-V4 £ LVH	Unconfirmed Diagnosis			90	) mm/mV F 50- 0.50-150 Hz W 100B CL P?
MR RAJBANS PRAKASH Male	Sinus rhythm.  Left atrial enlargement.  Left ventricular hypertrophy.  Anterior ST elevation, probably due to LVH.  Baseline wander in lead(s) V1	- ABNORMAL ECG -	awa awa	IA TANKE	E A A A A A A A A A A A A A A A A A A A	Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV
41 Years	Rate       70       Sinn         PR       170       Left         QRSD       94       Ante         QT       382       Base         QTC       413       Base	AXIS P 44 QRS 39 T 87 12 Lead; Standard Placement	<b>A</b>			JI Device: