

NAME:	Mr. Anesh Chavhan	UHID:	5151
AGE:	37 YRS	DATE OF HEALTHCHECK:	23/12/23
GENDER:	Male		

HEIGHT:	169 cm	MARITAL STATUS:	M
WEIGHT:	76.3 kg	NO OF CHILDREN:	2
BMI:	26.7		

C/O: - No.

K/C/O: Hypertension, Dyslipidemia  
PRESENT MEDICATION: Tab Thyronorm 80,  
1 Leno,  
Tab Subramoni,  
thrice a wk

P/M/H: - No

P/S/H: - No

ALLERGY: - Dust ✓

PHYSICAL ACTIVITY: Active/ Moderate/ Sedentary

H/A: SMOKING: - Occ

FAMILY HISTORY FATHER: -

ALCOHOL: - Occ

MOTHER: - DM, HTN

TOBACCO/PAN:

O/E:

LYMPHADENOPATHY:

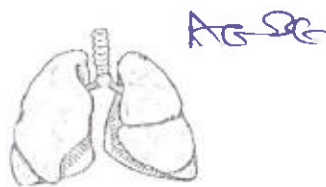
BP: 110/70 PULSE: 74/min

PALLOR/ICTERUS/CYNOSIS/CLUBBING: - NAD

TEMPERATURE: - SCARS:

OEDEMA:

S/E:  
RS:



P/A:



CVS: - NAD

Extremities & Spine: - NAD

ENT:

CNS: - Normal, Orientable

Skin: - NAD

Vision:

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

• ANDHERI • COLABA • NASHIK • VASHI



**OPHTHALMIC EVALUATION**

UHID No.: \_\_\_\_\_

Date: 25/12/23

Name: Ayushi Chatterjee Age: 37 Gender: (Male) Female

Without Correction :

Distance: Right Eye 6/18 Left Eye 6/18  
Near : Right Eye N.C Left Eye N.C

With Correction :

Distance: Right Eye 6/6 Left Eye 6/6  
Near : Right Eye N.C Left Eye N.C

	RIGHT					LEFT				
	SPH	CYL	AXIS	PRISM	VA	SPH	CYL	AXIS	PRISM	VA
Distance	/	-1.00	180	/	6/6	-0.50	-0.50	135	/	6/6
Near										

Colour Vision: (Normal)

Anterior Segment Examination: \_\_\_\_\_

Pupils: \_\_\_\_\_

Fundus: \_\_\_\_\_

Intraocular Pressure: 12

Diagnosis: \_\_\_\_\_

Advice: \_\_\_\_\_

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

**DR. SHETH NIKET PRASHANT**  
M.B.B.S D.O.M.S  
Regn. No 2008/10/364 Dr. \_\_\_\_\_  
(Consultant Ophthalmologist)

■ Consultation ■ Diagnostics ■ Health Check-Ups ■ Dentistry

## DENTAL CHECKUP

<b>Name:</b> Mr. Ashesh Chatterjee	<b>MR NO:</b>
<b>Age/Gender :</b> 37/M	<b>Date:</b> 23/2

Medical history:  Diabetes  Hypertension  \_\_\_\_\_

EXAMINATION	UPPER RIGHT	UPPER LEFT	LOWER LEFT	LOWER RIGHT
Calculus& Stains				
Mobility				
Caries ( Cavities )				
a)Class 1 (Occlusal)				
b)Class 2 (Proximal)				
c)Class 5 (Cervical)				
Faulty Restoration				
Faulty Crown				
Fractured Tooth				
Root Pieces				
Impacted Tooth			8	8
Missing Tooth				
Existing Denture				

**TREATMENT ADVISED:**

TREATMENT	UPPER RIGHT	UPPER LEFT	LOWER LEFT	LOWER RIGHT
Restoration / Filling				
Root Canal Therapy				
Crown				
Extraction			8	8

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: NA

*[Signature]*

Name : Mr. Ashesh Chatterjee Gender : Male Age : 37 Years  
UHID : FVAH 5151. Bill No : Lab No : V-1773-23  
Ref. by : SELF Sample Col.Dt : 23/02/2023 09:15  
Barcode No : 6469 Reported On : 23/02/2023 19:17

TEST RESULTS BIOLOGICAL REFERENCE INTERVAL

CBC (Complete Blood Count)-WB (EDTA)

Haemoglobin(Colorimetric method)	15.7	g/dl	13 - 18
RBC Count (Impedance)	5.20	Millions/cumm.	4 - 6.2
PCV/Haematocrit(Calculated)	47.1	%	35 - 55
MCV:(Calculated parameter)	90.7	fl	78 - 98
MCH:(Calculated parameter)	30.2	pg	26 - 34
MCHC:(Calculated parameter)	33.3	gm/dl	30 - 36
RDW-CV:	13.5	%	11.5 - 16.5
Total Leucocyte count(Impedance)	6580	/cumm.	4000 - 10500
Neutrophils:	51	%	40 - 75
Lymphocytes:	39	%	20 - 40
Eosinophils:	06	%	0 - 6
Monocytes:	04	%	2 - 10
Basophils:	00	%	0 - 2
Platelets Count(Impedance method)	2.03	Lakhs/c.mm	1.5 - 4.5
MPV	9.5	fl	6.0 - 11.0
Peripheral Smear (Microscopic examination)			
RBCs:	Normochromic, Normocytic		
WBCs:	Normal		
Platelets	Adequate		
Note:	Test Run on 5 part cell counter.		

Vasanti Gondal  
Entered By

Ms Kaveri Gaonkar  
Verified By

Page 2 of 4  
  
Dr. Milind Patwardhan  
M.D(Path)  
Chief Pathologist

End of Report  
Results are to be correlated clinically

Name : Mr. Ashesh Chatterjee Gender : Male Age : 37 Years  
UHID : FVAH 5151. Bill No : Lab No : V-1773-23  
Ref. by : SELF Sample Col.Dt : 23/02/2023 09:15  
Barcode No : 6469 Reported On : 23/02/2023 19:17

TEST RESULTS BIOLOGICAL REFERENCE INTERVAL

**ESR(Westergren Method)**

**Erythrocyte Sedimentation Rate:-** 03 mm/1st hr 0 - 20

**Vasanti Gondal**  
Entered By

**Ms Kaveri Gaonkar**  
Verified By



**Dr. Milind Patwardhan**  
M.D(Path)  
Chief Pathologist

End of Report  
*Results are to be correlated clinically*

Name : Mr. Ashesh Chatterjee Gender : Male Age : 37 Years  
UHID : FVAH 5151. Bill No : Lab No : V-1773-23  
Ref. by : SELF Sample Col.Dt : 23/02/2023 09:15  
Barcode No : 6469 Reported On : 23/02/2023 19:17

TEST


RESULTS

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

ABO Group: :O:  
Rh Type: **Positive**  
Method : Tube Agglutination (forward and reverse)

Shweta Unavane  
Entered By

Ms Kaveri Gaonkar  
Verified By



Dr. Milind Patwardhan  
M.D(Path)  
Chief Pathologist

End of Report  
*Results are to be correlated clinically*

Name : Mr. Ashesh Chatterjee Gender : Male Age : 37 Years  
 UHID : FVAH 5151. Bill No : Lab No : V-1773-23  
 Ref. by : SELF Sample Col.Dt : 23/02/2023 09:15  
 Barcode No : 6469 Reported On : 23/02/2023 19:17

TEST RESULTS BIOLOGICAL REFERENCE INTERVAL

**HbA1c(Glycosylated Haemoglobin )WB-EDTA**

(HbA1C) Glycosylated Haemoglobin : 5.1 %  
 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 : 99.67 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

Vasanti Gondal  
 Entered By

Ms Kaveri Gaonkar  
 Verified By

  
 Dr. M. D. Patwardhan  
 Page 4 of 11  
 M.D(Path)  
 Chief Pathologist

End of Report  
 Results are to be correlated clinically


Name : Mr. Ashesh Chatterjee Gender : Male Age : 37 Years  
UHID : FVAH 5151. Bill No : Lab No : V-1773-23  
Ref. by : SELF Sample Col.Dt : 23/02/2023 09:15  
Barcode No : 6469 Reported On : 23/02/2023 19:17

TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
<b>PLASMA GLUCOSE</b>			
Fasting Plasma Glucose :	87	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 :	96	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

Alsaba Shaikh  
Entered By

Ms Kaveri Gaonkar  
Verified By

  
Dr. Milind Patwardhan  
M.D(Path)  
Chief Pathologist

Page 9 of 11

End of Report  
Results are to be correlated clinically



Name : Mr. Ashesh Chatterjee Gender : Male Age : 37 Years  
UHID : FVAH 5151. Bill No : Lab No : V-1773-23  
Ref. by : SELF Sample Col.Dt : 23/02/2023 09:15  
Barcode No : 6469 Reported On : 23/02/2023 19:17


TEST RESULTS UNITS BIOLOGICAL REFERENCE INTERVAL

**Lipid Profile- Serum**

S. Cholesterol(Oxidase)	158	mg/dL	Desirable < 200 Borderline:>200-<240 Undesirable:>240
S. Triglyceride(GPO-POD)	152	mg/dL	Desirable < 150 Borderline:>150-<499 Undesirable:>500
S. VLDL:(Calculated)	30.4	mg/dL	Desirable <30
S. HDL-Cholesterol(Direct)	<u>37.1</u>	mg/dL	Desirable > 60 Borderline:>40-<59 Undesirable:<40
S. LDL:(calculated)	90.5	mg/dL	Desirable < 130 Borderline:>130-<159 Undesirable:>160
Ratio Cholesterol/HDL	4.3		3.5 - 5
Ratio of LDL/HDL	<u>2.4</u>		2.5 - 3.5

-----  
Alsaba Shaikh  
Entered By

Ms Kaveri Gaonkar  
Verified By

Page 5 of 7  
  
Dr. Milind Patwardhan  
M.D(Path)  
Chief Pathologist

End of Report  
Results are to be correlated clinically


Name : Mr. Ashesh Chatterjee Gender : Male Age : 37 Years  
UHID : FVAH 5151. Bill No : Lab No : V-1773-23  
Ref. by : SELF Sample Col.Dt : 23/02/2023 09:15  
Barcode No : 6469 Reported On : 23/02/2023 19:17

TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
<b>LFT(Liver Function Tests)-Serum</b>			
S.Total Protein (Biuret method)	6.90	g/dL	6.6 - 8.7
S.Albumin (BCG method)	4.74	g/dL	3.5 - 5.2
S.Globulin (Calculated)	2.16	g/dL	2 - 3.5
S.A/G Ratio:(Calculated)	<b>2.19</b>		0.9 - 2
S.Total Bilirubin (DPD):	0.77	mg/dL	0.1 - 1.2
S.Direct Bilirubin (DPD):	0.24	mg/dL	0.1 - 0.3
S.Indirect Bilirubin (Calculated)	0.53	mg/dL	0.1 - 1.0
S.AST (SGOT)(IFCC Kinetic with P5P):	25	U/L	5 - 40
S.ALT (SGPT) (IFCC Kinetic with P5P):	32	U/L	5 - 41
S.Alk Phosphatase(pNPP-AMP Kinetic):	87	U/L	40 - 129
S.GGT(IFCC Kinetic):	28	U/L	11 - 50

-----  
Alsaba Shaikh  
Entered By

Ms Kaveri Gaonkar  
Verified By

Page 6 of 11



Dr. Milind Patwardhan  
M.D(Path)  
Chief Pathologist

End of Report  
Results are to be correlated clinically

Name : Mr. Ashesh Chatterjee Gender : Male Age : 37 Years  
UHID : FVAH 5151. Bill No : Lab No : V-1773-23  
Ref. by : SELF Sample Col.Dt : 23/02/2023 09:15  
Barcode No : 6469 Reported On : 23/02/2023 19:17

TEST	RESULTS	BIOLOGICAL REFERENCE INTERVAL
	<b>BIOCHEMISTRY</b>	
S.Urea(Urease Method)	25.6 mg/dl	10.0 - 45.0
BUN (Calculated)	11.94 mg/dL	5 - 20
S.Creatinine(Jaffe's Method)	0.89 mg/dl	0.50 - 1.3
BUN / Creatinine Ratio	13.42	9:1 - 23:1
S.Uric Acid(Uricase Method)	4.9 mg/dl	3.4 - 7.0

Alsaba Shaikh  
Entered By

Ms Kaveri Gaonkar  
Verified By



Dr. Milind Patwardhan  
M.D(Path)  
Chief Pathologist

End of Report  
Results are to be correlated clinically

Name : Mr. Ashesh Chatterjee Gender : Male Age : 37 Years  
UHID : FVAH 5151. Bill No : Lab No : V-1773-23  
Ref. by : SELF Sample Col.Dt : 23/02/2023 09:15  
Barcode No : 6469 Reported On : 23/02/2023 19:17

TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
<b>Thyroid (T3,T4,TSH)- Serum</b>			
Total T3 (Tri-iodo Thyronine) (ECLIA)	1.80	nmol/L	1.3 - 3.1 nmol/L
Total T4 (Thyroxine) (ECLIA)	114.4	nmol/L	66 - 181 nmol/L
TSH (Thyroid-stimulating hormone) (ECLIA)	2.79	□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

Alsaba Shaikh  
Entered By

Ms Kaveri Gaonkar  
Verified By



Dr. Milind Patwardhan  
M.D(Path)

Chief Pathologist

End of Report  
Results are to be correlated clinically

Name : Mr. Ashesh Chatterjee      Gender : Male      Age : 37 Years  
UHID : FVAH 5151.      Bill No :      Lab No : V-1773-23  
Ref. by : SELF      Sample Col.Dt : 23/02/2023 09:15  
Barcode No : 6469      Reported On : 23/02/2023 19:17

TEST      RESULTS      BIOLOGICAL REFERENCE INTERVAL

**Vitamin D(25-OH Cholecalciferol)-Serum**


25 Hydroxy (OH) vit D by ECLIA      **18.59**      ng/ml      Deficiency : Less then 12  
insufficiency : 12 - 30  
Sufficiency : 30 - 70  
Toxicity : More then 70

Vitamin D is a fat soluble vitamin and exists in two main forms as cholecalciferol (vitamin D3) which is synthesized in skin from 7-dehydrocholesterol in response to sunlight exposure & Ergocalciferol (vitamin D2) present mainly in dietary sources. Both cholecalciferol & Ergocalciferol are converted to 25(OH)vitamin D in liver. Testing for 25(OH)vitamin D is recommended as it is the best indicator of vitamin D nutritional status as obtained from sunlight exposure & dietary intake.

For diagnosis of vitamin D deficiency it is recommended to have clinical correlation with serum 25(OH)vitamin D, serum calcium, serum PTH & serum alkaline phosphatase. During monitoring of oral vitamin D therapy - suggested testing of serum 25(OH)vitamin D is after 12 weeks or 3 mths of treatment. However, the required dosage of vitamin D supplements & time to achieve sufficient vitamin D levels show significant seasonal (especially winter) & individual variability depending on age, body fat, sun exposure, physical activity, genetic factors (especially variable vitamin D receptor responses), associated liver or renal disease, malabsorption syndromes and calcium or magnesium deficiency influencing the vitamin D metabolism. Vitamin D toxicity is known but very rare. Kindly correlate clinically, repeat with fresh sample if indicated.

Alsaba Shaikh  
Entered By

Ms Kaveri Gaonkar  
Verified By



Dr. Milind Patwardhan  
M.D(Path)  
Chief Pathologist

End of Report  
Results are to be correlated clinically

Name : Mr. Ashesh Chatterjee Gender : Male Age : 37 Years  
 UHID : FVAH 5151. Bill No : Lab No : V-1773-23  
 Ref. by : SELF Sample Col.Dt : 23/02/2023 09:15  
 Barcode No : 6469 Reported On : 23/02/2023 19:17

TEST RESULTS BIOLOGICAL REFERENCE INTERVAL

**URINE REPORT**

**PHYSICAL EXAMINATION**

QUANTITY	60	mL	
COLOUR	Pale Yellow		
APPEARANCE	Clear		Clear
SEDIMENT	Absent		Absent

**CHEMICAL EXAMINATION(Strip Method)**

REACTION(PH)	5.0	4.6 - 8.0
SPECIFIC GRAVITY	1.010	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	Occasional	0 - 3/hpf
RED BLOOD CELLS	Nil /HPF	Absent
EPITHELIAL CELLS	Occasional	3 - 4/hpf
CASTS	Absent	Absent
CRYSTALS	Absent	Absent
BACTERIA	Absent	Absent

Anushka Chavan  
Entered By

Ms Kaveri Gaonkar  
Verified By



Dr. Milind Patwardhan  
M.D(Path)

Page 8 of Chief Pathologist

End of Report  
Results are to be correlated clinically

Ashesh, Chatterjee  
5151

37 Years Male

23.02.2023 12:03:16  
Apollo Clinic  
1st Flr, The Emerald, Sector-12,  
Vashi, Mumbai-400703.

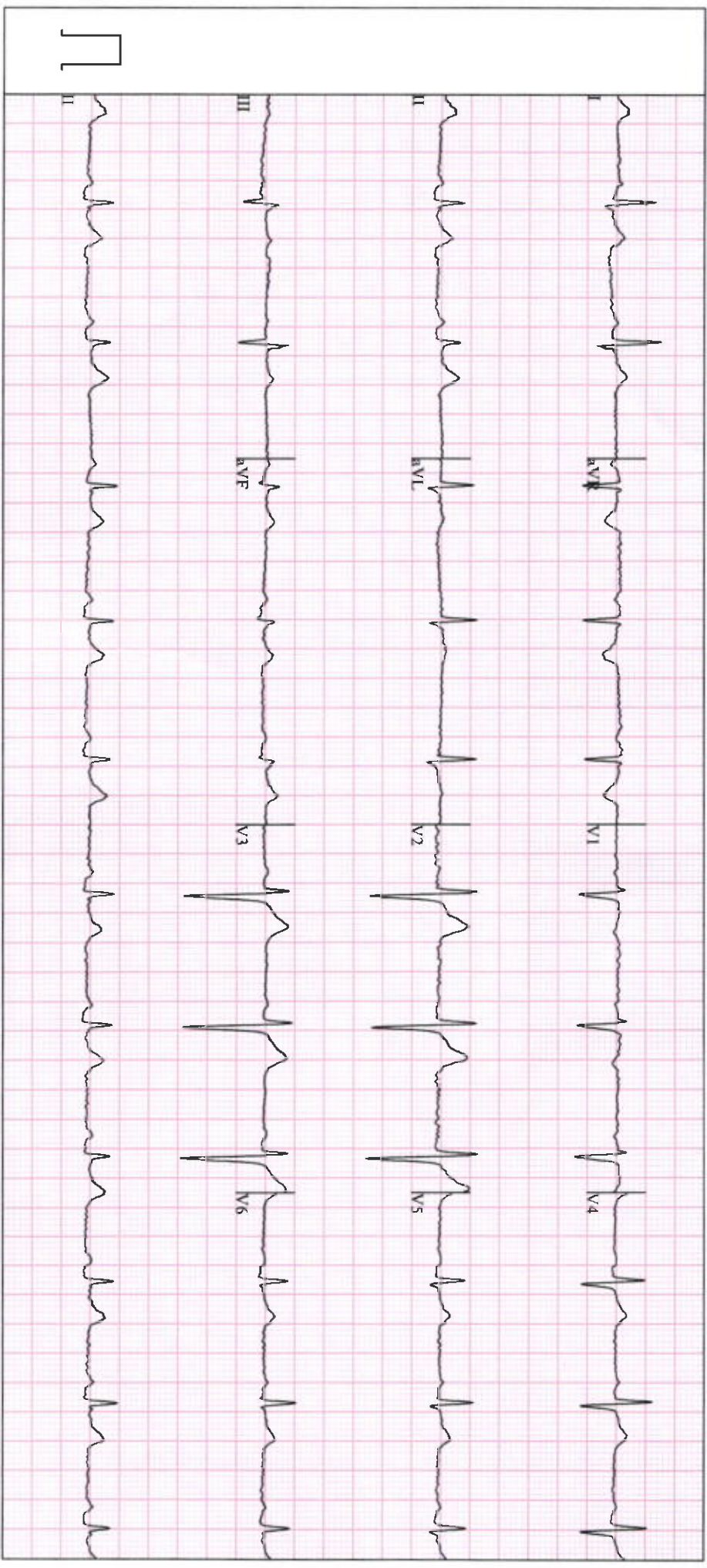
# NORMAL ECG

66 bpm  
--/-- mmHg

QRS : 88 ms  
QT / QTcBaz : 366 / 383 ms  
PR : 160 ms  
P : 84 ms  
RR / PP : 902 / 909 ms  
P / QRS / T : 51 / 23 / 52 degrees

Normal sinus rhythm  
Normal ECG

*Normal*  
**Dr. RISHI A. BHARGAVA**  
MD, DM (Cardiology)  
CONSULTANT CARDIOLOGIST  
Reg. No.: 2019/020494



GE MAC2000

1.1

12SL™ v241

25 mm/s

10 mm/mV

ADS

0.56-20 Hz

50 Hz

Unconfirmed  
4x2.5x3\_25\_R1

1/1

Apollo Clinic  
The Emerald, Plot No-195/B, Sector-12,  
Neel Siddhi Towers, Vashi-400703

Station  
Telephone:

## EXERCISE STRESS TEST REPORT

Patient Name: ASHESH, CHATTERJEE  
Patient ID: 05151  
Height:  
Weight:

DOB: 20.05.1985  
Age: 37yrs  
Gender: Male  
Race: Asian

Study Date: 23.02.2023  
Test Type: Treadmill Stress Test  
Protocol: BRUCE

Referring Physician: --  
Attending Physician: DR. RISHI BHARGAVA  
Technician: Anita Galkwad

Medications:  
NIL

Medical History:  
NIL

Reason for Exercise Test:  
Screening for CAD

### Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	00:04	0.00	0.00	69	110/80	
	STANDING	00:19	0.00	0.00	67		
	HYPERV.	00:15	0.00	0.00	70		
	WARM-UP	00:05	0.00	0.00	68		
EXERCISE	STAGE 1	01:32	1.70	10.00	102	120/80	
	STAGE 2	01:52	2.50	12.00	116	130/80	
	STAGE 3	02:23	3.40	14.00	157	140/80	
RECOVERY		01:06	0.00	0.00	118	150/90	

The patient exercised according to the BRUCE for 5:46 min:s, achieving a work level of Max. METS: 10.10. The resting heart rate of 69 bpm rose to a maximal heart rate of 157 bpm. This value represents 85 % of the maximal, age-predicted heart rate. The resting blood pressure of 110/80 mmHg, rose to a maximum blood pressure of 150/90 mmHg. The exercise test was stopped due to Target heart rate achieved.

### Interpretation

Summary: Resting ECG: normal.  
Functional Capacity: normal.  
HR Response to Exercise: appropriate.  
BP Response to Exercise: normal resting BP - appropriate response.  
Chest Pain: none.  
Arrhythmias: none.  
ST Changes: none.  
Overall impression: Normal stress test.

### Conclusions

TMT IS NEGATIVE FOR INDUCIBLE MYOCARDIAL ISCHAEMIA AT THE WORKLOAD ACHIEVED.

Physician-DR. RISHI BHARGAVA

Dr. RISHI A. BHARGAVA  
MD, DM (Cardiology)  
CONSULTANT CARDIOLOGIST  
Reg. No.: 2019/02/0494



PATIENT'S NAME	ASHESH CHATTERJEE	AGE :- 37y/M
UHID NO	5151	23 Feb 2023

**X-RAY CHEST PA VIEW**

**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	ASHESH CHATTERJEE	AGE :- 37y/M
UHID NO	5151	23 Feb 2023

**USG WHOLE ABDOMEN**

**LIVER** is normal in size, shape and shows bright 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 10.7 x 4.6 cm. **LEFT KIDNEY** measures 11.0 x 4.8 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 (Vol: 17gms)

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

**IMPRESSION** –

- **Grade I fatty liver.**
- **No other 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. CHHAYA S. SANGANI**  
**CONSULTANT SONOLOGIST**  
**Reg: No. 073826**

• ANDHERI • COLABA • NASHIK • VASHI

Name: Mr. Ashesh Chatterjee Age: 57y Date of Health check-up: 23/2/23

### Findings and Recommendation:

#### Findings:-

Vit D = 18.59 (deficient)

#### Recommendation:-

- D-Rise tablet 60x with one a week x 4 weeks.
- Sunlight exposure.

Signature:  
Consultant -



Dr. Shrutilaya  
JR. SHRUTILAYA AYYAGARI  
MD MEDICINE  
Reg. No. 2018/05/2514