

Name :MR	ATUL	SHENDRE			Date : <u>08/07</u> /2	3
)	-		Height : 174 / in	c BMI:	26:2	
BP: 130/80	mmHg	Pulse : 80/ SP02; 99'/	<i>ന്</i> bpm	RBS : _		mg/dl

SPANV Medisearch Lifesciences Private Limited 44, Parwana Bhawan, Kingsway, Nagpur - 440 001, Maharashtra, India. Phone: +91 0712 6789100 CIN: U74999MH2018PTC303510

CIN: U74999MH2018PTC303510

Dr. Rahul Atara
BDS, MDS (Endodontics)
Reg. No: A-16347

# KIMS-KINGSWAY HOSPITALS

Name: Mr. Atul Shenche	Date : 08/07/23
Age : 28 y 25 Sex : M/F Weight :kg Height :inc	
BP : mmHg Pulse :bpm	RBS :mg/dl
Routine Dental Checkup	
PMH- NRH	
PDM - NRH	
$O/\epsilon$	
- Calculus +++	
Advise - Oral Prophylanis	

Do- Tidnyaba



#### DEPARTMENT OF PATHOLOGY

Patient Name	: Mr. ATUL SHENDRE	Age /Gen
Bill No/ UMR No	: BIL2324022339/UMR2324011283	Referred
Received Dt	:08-Jul-23 09:59 am	Report Da

 Age /Gender
 : 28 Y(s)/Male

 Referred By
 : Dr. Vimmi Goel MBBS,MD

 Report Date
 : 08-Jul-23
 12:32 pm

#### HAEMOGRAM

Parameter	Specimen	Results	<b>Biological Reference</b>	Method
Haemoglobin	Blood	14.6	13.0 - 17.0 gm%	Photometric
Haematocrit(PCV)		42.2	40.0 - 50.0 %	Calculated
RBC Count		4.82	4.5 - 5.5 Millions/cumm	Photometric
Mean Cell Volume (MCV)		87	83 - 101 fl	Calculated
Mean Cell Haemoglobin (MCH)		30.3	27 - 32 pg	Calculated
Mean Cell Haemoglobin Concentration (MCHC)		34.6	31.5 - 35.0 g/l	Calculated
RDW		13.5	11.5 - 14.0 %	Calculated
Platelet count		350	150 - 450 10^3/cumm	Impedance
WBC Count		7400	4000 - 11000 cells/cumm	Impedance
DIFFERENTIAL COUNT				
Neutrophils		61.0	50 - 70 %	Flow Cytometry/Light microscopy
Lymphocytes		32.3	20 - 40 %	Flow Cytometry/Light
Eosinophils		3.0	1 - 6 %	microscopy Flow Cytometry/Light
Monocytes		3.6	2 - 10 %	microscopy Flow Cytometry/Light
Basophils		0.1	0 - 1 %	microscopy Flow Cytometry/Light
Absolute Neutrophil Count		4514	2000 - 7000 /cumm	microscopy Calculated

Page 1 of 2



### DEPARTMENT OF PATHOLOGY

Patient Name	: Mr. ATUL SHENDR	E	Age /Gender	:28 Y(s)/M	ale
Bill No/ UMR No	: BIL2324022339/U	MR2324011283			Goel MBBS,MD
Received Dt	:08-Jul-23 09:59 a	m	Report Date		
Parameter Absolute Lymphocyte	Specime		Biological	Reference	
		2390.2	1000 - 4800 /cui	mm	Calculated
Absolute Eosinophil (		222	20 - 500 /cumm		Calculated
Absolute Monocyte C	ount	266.4	200 - 1000 /cum	m	Calculated
Absolute Basophil Co	unt	7.4	0 - 100 /cumm		Calculated
PERIPHERAL SME	AR				Conculated
RBC		Normochromic Normocytic			
Platelets		Adequate			
ESR		07	0-15 mm/hr		Automated
		*** End Of Re	port ***		Westergren's Method

Suggested Clinical Correlation \* If neccessary, Please discuss

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Page 2 of 2

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## DEPARTMENT OF BIOCHEMISTRY

				- CHENISIK		
Patient Name	: Mr. ATL	JL SHENDRE		Aso /Condo		
Bill No/ UMR No	: BIL232	4022339/UMR	2324011283	Age /Gender		
Received Dt		23 09:58 am				i Goel MBBS,MD
				Report Date	:08-Jul-23	3 11:40 am
Parameter		<b>Specimen</b>	Results	Biological Re	ference	Mathad
Fasting Plasma Gluco	se	Plasma	95	< 100 mg/dl	rerence	Method
GLYCOSYLATED	HAEMO	OGLOBIN (H	BA1C)			GOD/POD,Colorimetric
HbA1c			4.8	Non-Diabetic : Pre-Diabetic : % Diabetic : >==	5.7 - 6.4	HPLC
			*** End Of Re	eport ***		

Suggested Clinical Correlation \* If neccessary, Please discuss Verified By : : 11100731

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## DEPARTMENT OF BIOCHEMISTRY

				Prochemizit	{Y	
Patient Name	: Mr. AT	UL SHENDRE				
Bill No/ UMR No				Age /Gender	:28 Y(s)/M	ale
Received Dt		-23 12:27 pm		Referred By	Dr. Vimmi	Goel MBBS,MD
		20 12.27 pm		Report Date	:08-Jul-23	
<u>Parameter</u> Post Prandial Plasma <b>Interpretatior</b> Clinical Decision	n: Value F R II	Tasting =/> Random/2H	98 Guidelines 2 ellites If, 126 mg/dl rs.OGTT=/>; sting = 100-	200 mg/di		<u>Method</u> GOD/POD, Colorimetric

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

Suggested Clinical Correlation \* If neccessary, Please discuss

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## DEPARTMENT OF BIOCHEMISTRY

10				
Patient Name	: Mr. ATUL SHENDRE		Age /Gender :28 Y(s)/M	
Bill No/ UMR No	: BIL2324022339/UMF	2324011283	Bart and a second s	1
Received Dt	:08-Jul-23 09:59 am			i Goel MBBS,MD
	1		Report Date :08-Jul-23	11:51 am
LIPID PROFI	LE			
Parameter	Specimen	Results		
Total Cholesterol	Serum	171	< 200 mg/dl	Method Enzymatic(CHE/CHO/PO
Triglycerides		89	< 150 mg/dl	D) Enzymatic
HDL Cholesterol Dire	ct	40	> 40 mg/dl	(Lipase/GK/GPO/POD) Phosphotungstic acid/mgcl-Enzymatic
LDL Cholesterol Dire	ct	106.33	< 100 mm / II	(microslide)
VLDL Cholesterol		18	< 100 mg/dl	Enzymatic
Tot Chol/HDL Ratio		4	< 30 mg/dl	Calculated
		4	3 - 5	Calculation
Intiate therapeutic			Consider Drug therapy	LDC-C
CHD OR CHD risk eq Multiple major risk fa 10 yrs CHD risk>209	actors conferring	>100	>130, optional at 100-129	<100
Two or more additior factors,10 yrs CHD ri		>130	10 yrs risk 10-20 % >130	<130
No additional major r additional major risk	isk or one	>160	10 yrs risk <10% >160 >190,optional at 160-189	<160

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

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CONSULTANT MICROBIOLOGIST



## DEPARTMENT OF BIOCHEMISTRY

Patient Name	: Mr. ATUL SHENDRE		
Bill No / LIMP N		Age /Gender	:28 Y(s)/Male
	<b>o</b> :BIL2324022339/UMR2324011283		Dr. Vimmi Goel MBBS,MD
Received Dt	:08-Jul-23 09:59 am		
		Report Date	:08-Jul-23 11:51 am
THYROID F	ROFILE		
Parameter	•		

T3	<b>Specimen</b> Serum	1.20	<u>Biological Reference</u> 0.55 - 1.70 ng/ml	Method
Free T4		1.71	0.80 - 1.70 ng/dl	Enhanced chemiluminescence Enhanced
TSH		3.26	0.50 - 4.80 uIU/ml	Chemiluminescence Enhanced
		*** End Of Rep	Dort ***	chemiluminescence

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## DEPARTMENT OF BIOCHEMISTRY

		and the second		
Patient Name	: Mr. ATUL SHENDRE		Age /Gender :28 Y(s)/	
BIII NO/ UMR NO	: BIL2324022339/UMR2	324011283	Defense i m	
Received Dt	: 08-Jul-23 09:59 am	i i i i i i i i i i i i i i i i i i i		ni Goel MBBS,MD
	20 00100 am		Report Date :08-Jul-2	3 11:51 am
<u>Parameter</u>	<u>Specimen</u>	Result Values	<b>Biological Reference</b>	
RFT			<u>Elorogical Reference</u>	<u>Method</u>
Blood Urea	Serum	16	19.0 - 43.0 mg/dl	Urease with indicator
Creatinine		0.85	0.66 - 1.25 mg/dl	dye Enzymatic ( creatinine
GFR		121.4		amidohydrolase)
Sodium		138	136 - 145 mmol/L	Calculation by CKD-EPI 2021
Potassium		4.22	3.5 - 5.1 mmol/L	Direct ion selective electrode
LIVER FUN	CTION TEST(LFT)		5.5 - 5.1 mmol/L	Direct ion selective electrode
Total Bilirubin				
Direct Bilirubin		0.59	0.2 - 1.3 mg/dl	Azobilirubin/Dyphylline
Indirect Bilirub	nin	0.12 0.47	0.1 - 0.3 mg/dl	Calculated
Alkaline Phosp	bataco	0.17	0.1 - 1.1 mg/dl	Duel wavelength
SGPT/ALT	sidtase	98	38 - 126 U/L	spectrophotometric pNPP/AMP buffer
SGOT/AST		41	10-40 U/L	Kinetic with pyridoxal
		38	15 - 40 U/L	phosphate
Serum Total	Protein	8.02	-	Kinetic with pyridoxal phosphate
Albumin Seru	m		6.3 - 8.2 gm/dl	Biuret (Alkaline cupri
Globulin		4.66	3.5 - 5.0 gm/dl	sulphate) Bromocresol green D
A/G Ratio		3.36 1.39	2.0 - 4.0 gm/	Binding Calculated
		*** End Of	5	

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

Suggested Clinical Correlation \* If neccessary, Please discuss Verified By : : 11100026

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Phone: +91 0712 6789100 CIN: U74999MH2018PTC303510



## DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mr. ATUL SHENDRE Age /Gender : 28 Y(s)/Male Bill No/ UMR No : BIL2324022339/UMR2324011283 Referred By : Dr. Vimmi Goel MBBS, MD **Received Dt** :08-Jul-23 12:27 pm Report Date :08-Jul-23 01:34 pm

## URINE SUGAR

<u>Parameter</u> Urine Glucose

<u>Result Values</u> Negative \*\*\* End Of Report \*\*\*

Suggested Clinical Correlation \* If neccessary, Please

Verified By : : 11100354

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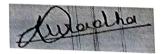
#### DEPARTMENT OF PATHOLOGY

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Patient Name	: Mr. ATUL SHENI	DRE	Age /Gender	:28 Y(s)/M	ale
Bill No/ UMR No	/ UMR No : BIL2324022339/UMR2324011283		<b>Referred By</b>	Dr. Vimmi Goel MBBS,MD	
Received Dt	:08-Jul-23 10:2	2 am	Report Date	:08-Jul-23	
Parameter	Specin	nen Results			Method
URINE MICROS	СОРҮ				
PHYSICAL EXAM	NATION				
Volume	Urine	30 ml			
Colour.		Pale vellow			
Appearance		Clear			
CHEMICAL EXAM	NATION				
Reaction (pH)	Urine	6.5	4.6 - 8.0		Indicators
pecific gravity		1.015	1.005 - 1.025		ion concentration
Jrine Protein		Negative			protein error of pH indicator
Sugar		Negative			GOD/POD
Hilirubin		Negative			Diazonium
letone Bodies		Negative			Legal's est Principle
litrate		Negative			
Jrobilinogen		Normal			Ehrlich's Reaction
IICROSCOPIC EX	AMINATION				
pithelial Cells	Urine	0-1	0-4 /hpf		Manual
.B.C.		2-4	0-4 /hpf		Manual
us Cells asts		2-4	0-4 /hpf		Manual
		Absent			Manual
rystals		Absent			Manual
SF(URINE SUG	AR FASTING)				
rine Glucose	Urine	Negative			
		*** End Of R	aport ***		GOD/POD

Suggested Clinical Correlation \* If neccessary, Please discuss Verified By : : 11100354

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# DEPARTMENT OF IMMUNO HAEMATOLOGY

Patient Name			NO HAEMATO	JLOGY	
	: Mr. ATUL SHENDRE : BIL2324022339/UMR2324011283		Age /Gender	: 28 Y(s)/Male : Dr. Vimmi Goel MBBS,MD	
			<b>Referred By</b>		
	:08-Jul-23 09:59 am		Report Date	:08-Jul-23 12:15 pm	
DECOD GROU	PING AND RH				
<u>Parameter</u> BLOOD GROUP.	<b>Specimen</b> EDTA Whole	<b>Results</b> " B "			
-	Blood & Plasma/ Serum	5		Gel Card Method	
Rh (D) Typing.	Scrutt	" Positive "(+Ve)			
		*** End Of Re			

Suggested Clinical Correlation \* If neccessary, Please discuss

Verified By : : 11100245

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Dr. Anuradha Deshmukh, MBBS,MD CONSULTANT MICROBIOLOGIST



#### DEPARTMENT OF RADIOLOGY & IMAGING SCIENCE

NAME	ATUL SHENDRE	STUDY DATE	08-07-2023 11:24:07
AGE/ SEX	28Y10M24D / M	HOSPITAL NO.	UMR2324011283
ACCESSION NO.	ВП.2324022339-9	MODALITY	DX
REPORTED ON	08-07-2023 12:17	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.

1

DR. ASAWARI. S. LAUTRE MBBS (KEM HOSPITAL), MD RADIODIAGNOSIS (TMH MUMBAI) CONSULTANT RADIOLOGIST.

SPANV Medisearch Lifesciences Private Limited N.B : This is only a professional opinion and not the final diagnosis. Radiological investigations are subject to variations due to the final diagnosis of the second due to the subject to variations due to the second due to the subject to variations due to the second due to the sec 44, Parwana Bhawan, Kingsway, Nagpur - 440 001, Maharashtra, India. 3510



NAME OF PATIENT	MR. ATUL SHENDRE	AGE & SEX	28 YRS/M
UMR NO	2324011283	AGE & SEA	20 110/11
	2324011283	BILL NO	2324022339
REF BY	DR. VIMMI GOEL		
	SHI VIIIIII GOEL	DATE	08/07/2023

#### USG WHOLE ABDOMEN

LIVER is normal in shape, size and 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 stones or sludge seen within it. Wall thickness is within normal limits.

PANCREAS is normal in shape, size and echotexture.

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

Both KIDNEYS are normal in shape, size and echotexture. Mild to moderate dilatation of pelvicalyceal noted on right side. Also dilatation of right upper ureter noted an echogenic shadow seen at lower calyceal region into possibility of calculus. No evidence of calculus or hydronephrosis seen.

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

Prostate is normal in size, shape and echotexture.

There is no free fluid or abdominal lymphadenopathy seen.

IMPRESSION: Hydronephrosis right side. Advice CT urography for further evaluation and confirmation.

Dr.R.R. KHANDELWAL SENIOR CONSULTANT MD RADIO DIAGNOSIS [MMC-55870]

# *EXAMPLE AND COLOR DOPPLER REPORT*

Patient Name : Mr. Atul Shendre Age : 28 years / Male UMR : UMR2324011283 Date : 08/07/2023 Done by : Dr. Vimmi Goel ECG : NSR, WNL Blood pressure: 130/80 mm Hg (Right arm, Supine position)

#### Impression:

LV is on higher side LA is mildly dilated No RWMA of LV at rest Good LV systolic function, LVEF 59% Normal LV diastolic function E/A is 1.6 E/E' is 5.5 (Normal filling pressure) Valves are normal No pulmonary hypertension IVC is normal in size and collapsing well with respiration No clots or pericardial effusion

#### Comments:

(1

Sector echocardiography was performed in various conventional views (PLAX, SSAX, AP4 CH and 5 CH views). LV is on higher side. LA is mildly dilated. There is no RWMA of LV seen at rest. Good LV systolic function. LVEF 59%. Normal LV diastolic function. E Velocity is 100 cm/s, A Velocity is 62 cm/s. E/A is 1.6. Valves are normal. No Pulmonary Hypertension. IVC normal in size and collapsing well with respiration. Pericardium is normal. No clots or pericardial effusion seen.

 $E^\prime$  at medial mitral annulus is 13.9 cm/sec & at lateral mitral annulus is 22.2 cm/sec.  $E/E^\prime$  is 5.5 (Average).

#### M Mode echocardiography and dimension:

Left atrium Aortic root LVIDd LVIDs IVS (d) LVPW (d) LVEF % Fractional Shortening

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 ~ 60% ~60%

Observed (mm)

40 25 52 36 09 09 59% 31% **Dr. Vimmi Goel** 

Р.Т.О

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MD, Sr. Consultant

Non-invasive Cardiology

