

MR No. 148188 Patient Name Mr Ayay K Sharma Age 31 Sex M Date 29/07/23

H 181

W 75

BP 120/70

P 75

BMI - 23

Reports over

  
**Dr. Bhawna Garg**  
MBBS, DIP.GO, PGDHA  
MEDICAL CO ORDINATOR  
RJN Apollo Spectra Hospital  
Reg.No. MP18035

Patient NAME : Mr. AJAY KUMAR SHARMA	Collected : 29/Jul/2023 08:45AM
Age/Gender : 31 Y 0 M 0 D /M	Received : 29/Jul/2023 09:08AM
UHID/MR NO : ILK.00032078	Reported : 29/Jul/2023 10:17AM
Visit ID : ILK.92486	Status : Final Report
Ref Doctor : Dr.ARCOFEMI HEALTHCARE LIMITED	Client Name : INSTA

**DEPARTMENT OF HEMATOLOGY**

**COMPLETE BLOOD COUNT- CBC / HAEMOGRAM , WHOLE BLOOD EDTA**

Haemoglobin (Hb%)	14.7	gm%	14.0-17.0	Cyanmeth
P.C.V (Hematocrit)	43.3	%	40-54	Cell Counter
RBC Count	4.3	Mill./cu mm	4.00-5.50	Cell Counter
Mean Corpuscular Volume(MCV)	<b>101.4</b>	fL	76-96	Calculated
Mean Corpuscular Hb. (MCH)	<b>34.4</b>	pg	27.0-32.0	Calculated
Mean Corp. Hb. Conc.(MCHC)	33.9	g/dl	30.0-35.0	Calculated
RDW	15.7	%	11-16	Calculated
Total WBC count (TLC)	5,200	/cu mm	4000-11000	Cell Counter

**Differential Count by Flowcytometry/Microscopy**

Neutrophils	53.7	%	50-70	Cell Counter
Lymphocytes	37.2	%	20-40	
Monocytes	5.6	%	01-10	Cell Counter
Eosinophils	3.3	%	01-06	Cell Counter
Basophils	0.2	%	00-01	Cell Counter

**Absolute Leucocyte Count**

Neutrophil (Abs.)	2,805	per cumm	2000 - 8000	Calculated
Lymphocyte (Abs.)	1946	per cumm	600-4000	Calculated
Monocyte (Abs.)	292	per cumm	0-600	Calculated
Eosinophil (Abs.)	172	per cumm	40-440	Calculated
Basophils (Abs.)	10	per cumm	0-110	Calculated
Platelet Count	1.50	Lac/cmm	1.50-4.00	Cell Counter

**ERYTHROCYTE SEDIMENTATION RATE (ESR)**

Erythrocyte Sedimentation Rate (ESR)	6	mm 1st hr.	0-20	Wester Green
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SIN NO :10372488,10372588,



**DR. ASHOK KUMAR**  
M.D. (PATH)

Patient NAME : Mr. AJAY KUMAR SHARMA  
Age/Gender : 31 Y O M O D /M  
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**DEPARTMENT OF HEMATOLOGY**

**BLOOD GROUPING(A,B,O) AND RH FACTOR , WHOLE BLOOD EDTA**

Blood Grouping	B			Slide/Tube Agglutination
Rh (D) Type	NEGATIVE			Slide/Tube Agglutination

**BLOOD PICTURE - PERIPHERAL SMEAR EXAMINATION , WHOLE BLOOD EDTA**

**RBC** : RBCs. are predominantly Macrocytic type.

No cytoplasmic inclusions or hemoparasite seen.

**WBC** : Normal in number , morphology and distribution. No toxic granules seen.

No abnormal cell seen.

**PLATELETS** : Adequate on smear.

**IMPRESSION** : MACROCYTIC BLOOD PICTURE.



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*(Signature)*

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**DEPARTMENT OF BIOCHEMISTRY-ROUTINE**

Test Name	Result	Unit	Bio. Ref. Range	Method
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**GLUCOSE - FASTING (FBS) , NAF PLASMA**

Fasting Glucose	84.0	mg/dL	65-110	God - Pod
Ref.for Biological Reference Intervals: American Diabetic Assiosation.				

**GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) , FLUORIDE PLASMA**

Post Prandial Glucose	99.0	mg/dL	90-140	2hrs. after...gm glucose/lunch
Ref.for Biological Reference Intervals: American Diabetic Assiosation.				



*A.K. Rajong*

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**DEPARTMENT OF BIOCHEMISTRY-ROUTINE**

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>GLYCOSYLATED HAEMOGLOBIN (GHB/HBA1C) , WHOLE BLOOD EDTA</b>				
Glycosylated Haemoglobin HbA1c	4.9	%	Normal: <5.7 Pre-Diabetes: 5.7-6.4 Diabetes: 6.5	NEPHELOMETRY
Approximate mean plasma glucose	93.93			Calculated

Ref.for Biological Reference Intervals: American Diabetes Association.

**INTERPRETATION:**

The A1C test measures your average blood glucose for the past 2 to 3 months. Diabetes is diagnosed at an A1C of greater than or equal to 6.5%.

Therapeutic goals for glycemic control (ADA)

-Adults:

- Goal of therapy: <7.0% HbA1c
- Action suggested: >8.0% HbA1c

-Pediatric patients:

- Toddlers and preschoolers: <8.5% (but >7.5%)
- School age (6-12 years): <8%
- Adolescents and young adults (13-19 years): <7.5%



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**DEPARTMENT OF BIOCHEMISTRY-ROUTINE**

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>COMPLETE KIDNEY PROFILE (RFT/KFT) , SERUM</b>				
Urea	15.77	mg/dL	13.0-43.0	Urease
Creatinine	0.8	mg/dL	0.5-1.3	Enzymatic
Uric Acid	6.3	mg/dL	3.5-7.2	Urease
Sodium	140.0	Meq/L	135-155	Direct ISE
Potassium	4.4	Meq/L	3.5-5.5	Direct ISE
Chloride	106.0	mmol/L	96-106	Direct ISE
Calcium	9.6	mg/dL	8.6-10.0	OCPC
Phosphorous	3.4	mg/dL	2.5-5.6	PMA Phenol
BUN	7.37	mg/dL	6.0-20.0	Reflect Spectrothoto



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**DR. ASHOK KUMAR**  
M.D. (PATH)

**RJN Apollo Spectra Hospitals**

18, Vikas Nagar, Near Sai Baba Temple, Gwalior - 474009 (M.P.) Ph.: 0751-2454600, Mob.: 8269663137, Email: ipc.rjn@gmail.com

• Results may vary from lab to lab and from time to time for the same parameter for the same patient • Assays are performed in accordance with standard procedures.  
• In case of disparity test may be repeated immediately. • This report is not valid for medico legal purpose.

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**DEPARTMENT OF BIOCHEMISTRY-ROUTINE**

Test Name	Result	Unit	Bio. Ref. Range	Method
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**LIPID PROFILE , SERUM**

Type OF Sample	SERUM			
Total Cholesterol	150.0	mg/dl	up to 200	End Point
Total Triglycerides	143.0	mg/dL	Borderline High Risk : 150-199 High Risk: 200-499 Very High Risk: >500	End Point
HDL Cholesterol	32.0	mg/dL	Optimal: >55 Border Line High Risk: 35-55 High Risk:- <35	Reflect Spectrothoto
Non - HDL Cholesterol	118	mg/dL	<130	
LDL Cholesterol	89.4	mg/dL	49-172	Reflect Spectrothoto
VLDL Cholesterol	28.6	mg/dL	5.0-40.0	Reflect Spectrothoto
Chol / HDL Ratio	4.69		Low Risk : 3.3-4.4 Average Risk : 4.5-7.1 Moderate Risk : 7.2-11.0 High Risk : >11.0	CALCULATED




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M.D. (PATH)

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 Visit ID : ILK.92486  
 Ref Doctor : Dr.ARCOFEMI HEALTHCARE LIMITED

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**DEPARTMENT OF BIOCHEMISTRY-ROUTINE**

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIVER FUNCTION TEST (LFT) WITH GGT , SERUM</b>				
Total Bilirubin	0.7	mg/dL	0.2-1.2	Jendrassik-Grof
Direct Bilirubin	0.1	mg/dL	0.0-0.3	Jendrassik-Grof
Indirect Bilirubin	0.6	mg/dL	0.0-0.9	Calculated
SGOT / AST	<b>38.0</b>	U/L	1-30	UV Kinetic (IFCC)
SGPT / ALT	<b>46.0</b>	U/L	1-45	UV Kinetic (IFCC)
Alkaline Phosphatase	47.0	U/L	43-115	PNPP
Gamma Glutaryl Transferase (GGT)	25.0	U/L	0.0-55.0	Reflect Spectrophoto
Total Protein	6.8	g/dl	6.4-8.3	Biuret
Albumin	4.4	g/dL	3.5-5.2	BCG
Globulin	2.4	g/dl	2.0-3.5	Calculated
A/G Ratio	1.83	%	1.0-2.3	Calculated




**DR. ASHOK KUMAR**  
**M.D. (PATH)**



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Visit ID : ILK.92486  
Ref Doctor : Dr.ARCOFEMI HEALTHCARE LIMITED

Collected : 29/Jul/2023 08:45AM  
Received : 29/Jul/2023 09:54AM  
Reported : 29/Jul/2023 01:37PM  
Status : Final Report  
Client Name : INSTA

**DEPARTMENT OF BIOCHEMISTRY-SPECIAL**

Test Name	Result	Unit	Bio. Ref. Range	Method
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**THYROID PROFILE-I , SERUM**

Trilodothyronine Total (TT3)	1.19	ng/dL	0.6-1.8	Chemilluminescence
Thyroxine (TT4)	10.35	µg/dL	4.5-10.9	Chemilluminescence
Thyroid Stimulating Hormone (TSH)	1.050	µIU/ml	0.35-5.50	Chemilluminescence

**COMMENT :-** Above mentioned reference ranges are standard reference ranges.

**AGE RELATED GUIDELINES FOR REFERENCE RANGES FOR TSH**

TSH	NEW BORN	INFANT	CHILD	ADULT
(u IU/ml)	0.52-38.9	1.7-9.1	0.7-6.4	0.3-5.6

**PREGNANCY RELATED GUIDELINES FOR REFERENCE RANGES FOR TSH**

TSH	1st Trimester	2nd & 3rd Trimester
(u IU/ml)	0.2 - 2.5	0.3 - 3.0

**NOTE :** TSH levels are subject to circadian variation, reaching peak levels between 2-4 AM and at a minimum between 6-10 PM. Dose and time of drug intake also influence the test result.

**Ultrasensitive kits used.**

Serum T3/ FT3 , T4/FT4 and TSH measurements form three components of thyroid screening panel.

- :-Primary hypothyroidism is accompanied by elevated serum T3 & T4 values alongwith depressed TSH level.
- :- Primary hypothyroidism is accompanied by elevated serum T3 & T4 values & elevated serum TSH level.
- :-Normal T3 &T4 levels with high TSH indicate mild / subclinical HYPOTHYROIDISM.
- :-singly elevated T3 levels may be found in pregnancy and in estrogen therapy while depressed levels may be encountered in severe illness, malnutrition, renal failure and during therapy with drugs like propranolol .
- :-Although elevated TSH levels are nearly always indicative of primary hypothyroidism. Rarely they can result from TSH secreting pituitary tumours ( seconday hyperthyroidism).



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Age/Gender : 31 Y 0 M 0 D /M  
UHID/MR NO : ILK.00032078  
Visit ID : ILK.92486  
Ref Doctor : Dr.ARCOFEMI HEALTHCARE LIMITED

Collected : 29/Jul/2023 08:45AM  
Received : 29/Jul/2023 09:08AM  
Reported : 29/Jul/2023 10:56AM  
Status : Final Report  
Client Name : INSTA

**DEPARTMENT OF CLINICAL PATHOLOGY**

Test Name	Result	Unit	Bio. Ref. Range	Method
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**CUE - COMPLETE URINE ANALYSIS , URINE**

**Physical Examination**

Colour	PALE YELLOW			Visual
Appearance	Clear			Visual
pH	6.0		5.0-7.5	Dipstick
Specific Gravity	1.010		1.002-1.030	Dipstick

**Chemical Examination**

Albumin Urine/ Protein Urine	NIL		NIL	Dipstick/Heat Test
Glucose Urine	NIL		NIL	Dipstick/Benedict
Urobilinogen	NIL		NIL	Dipstick/Ehrlichs
Ketones	NIL		NIL	Dipstick/Rotheras
Bile Salts	ABSENT		ABSENT	Dipstick
Bile Pigments	ABSENT		ABSENT	Dipstick/Fouchets
Nitrite	ABSENT		ABSENT	Dipstick

**Microscopic Examination.**

Pus Cells	2-3	/Hpf	0-2	
Epithelial Cells	1-2	Hpf	<10	
RBC	ABSENT	/Hpf	ABSENT	
Casts	ABSENT		ABSENT	
Crystals	ABSENT		ABSENT	
Bacteria	NORMALLY PRESENT		NORMALLY PRESENT	
Budding Yeast Cells	Absent		Absent	

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



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*A.K. Rajong*

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M.D. (PATH)

Patient NAME : Mr. AJAY KUMAR SHARMA  
Age/Gender : 31 Y 0 M 0 D /M  
UHID/MR NO : ILK.00032078  
Visit ID : ILK.92519  
Ref Doctor : Dr.ARCOFEMI HEALTHCARE LIMITED

Collected : 29/Jul/2023 12:49PM  
Received : 29/Jul/2023 01:12PM  
Reported : 29/Jul/2023 02:02PM  
Status : Final Report  
Client Name : INSTA

**DEPARTMENT OF BIOCHEMISTRY-ROUTINE**

Test Name	Result	Unit	Bio. Ref. Range	Method
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**POST LUNCH URINE SUGAR , URINE**

Post Lunch Urine Sugar	NIL			
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**\*\*\* End Of Report \*\*\***



SIN NO :10372488,10372588,

*A.K. Rajong*

**DR. ASHOK KUMAR**  
M.D. (PATH)

## ECHO CARDIOGRAPHY REPORT

Patient Name : Mr. AJAY KUMAR SHARMA      AGE & Sex :- 31years / M  
Date of Billing : 29/07/2023

*Echocardiography was performed on GE LOGIX T 8.*

*Quality Of Imaging: Adequate*

Mitral Valve : Normal  
Tricuspid Valve : Normal  
Aortic Valve : Normal  
Pulmonary Valve : Normal  
Left Atrium : 3.4 cms  
Left Ventricle :      IVSD : 1.2 cms      LVPWD : 1.2 cms  
   EDD : 4.7 cms      EF 60 %  
   ESD : 2.9 cms      FS 32 %

RWMA : NO REGIONAL WALL MOTION ABNORMALITY  
Right Atrium : Normal  
Right Ventricle : Normal  
Aorta : 3.1 cms  
I A S I V S : Intact  
Pulmonary Artery : Normal  
Pericardium : Normal  
SVC, IVC : Normal  
Pulmonary Artery : Normal  
Intracardiac Masses : Nil

Doppler : E > A

Conclusion :

NORMAL CARDIAC CHAMBERS DIMENSION  
NO REGIONAL WALL MOTION ABNORMALITY  
NORMAL LV SYSTOLIC FUNCTION , LVEF-60 %  
NORMAL VALVES  
INTACT SEPTUM  
NO CLOT /VEGETATION/PERICARDIAL EFFUSION

*Dr. Abhishek Sharma*  
MBBS,MD (Medicine) DNB (Cardiology)  
Consultant Interventional-Cardiology  
RJN Apollo Spectra Hospitals  
Consultant.No. MP 12056

**Dr. Abhishek sharma (DNB)**  
(Interventional Cardiologist)

# RJN APOLLO SPECTRA HOSPITAL, GWALIOR

## NORMAL DIET PLAN

(Normal Carb. /Low Fat /NORMAL PROTEIN (0.8 gm/kg Body wt/Day)

Time	Food / Beverage
6:00-7:00	Hot Water + Lemon + After Walking 30 Minut
7:00-7:00Am	Green Tea + Biscuits
8:00-8:30	Daalia+Veg Brown Bread+ Sujji Made Breakfast/Veg Dalia+Veg Brown Bread S/Veg Oats/Corn Flaks /Salad+Sprouts/Besan, moong dal Cheela
11:00-12:00	Daal+Rice + Seasonal Vegetable+ Chapati (1-2 without Butter)+Salad + Raiyta ( Louki Kheera)
2:00-3:00	Veg + Fruit Salad
4:00-4:30	Green Tea + Biscuits
6:00-7:00	Vegetable Soup/Tomato Soup/Coconut Water
8:00-9:00	Daal + Seasonal Vegetable+ Daliya +Salad / Veg Khichadi
10:00	Hot Water + Walking 20 Minut
NOTE:	
	Water Intake 3 - 4 Litter Perday Compulsary
	Avoid junk food ,cold drinks , Sweets , Makhhan, Butter,Malayi, Puri, Paratha etc
	Don't Skip Break fast

DIETICIAN: Dt. Archana Tiwari

*Atten*  
3/7/23

MR No. .... Patient Name Ajay Kumar Sharma Age 31y Sex M Date 29/9/23  
Mob No. ....

**Investigations : (Please Tick)**

- CBC
- ESR
- CRP
- S-Vit D3
- S-Vit B12
- RBS
- B Sugar - F/PP
- HbA1C
- LFT/KFT
- PT
- INR
- RA Factor
- Anti CCP
- HLA B27
- ANA
- HIV
- HBsAg
- Anti HCV

Health check up  
o/e → Ear (L) ] EAC - clear  
TM - intact  
Ext - NS  
None (AIR) Seht Millin  
Mucosa @  
Patent Adenoid  
Throat - Tonal @ in throat  
fer  
ODH good  
PPA - clear  
No Adenoid ENT Intact

**Vitals**

- B.P.
- R.
- SPO2
- Temp

**Medical Illness**

- Hypertension
- Diabetes
- Thyroid
- Cardiac Disease
- Drug Allergies

**Next Appointment/Follow up**

Signature :

*[Signature]*  
Dr. Sunil Gupta  
MS (ENT)  
Reg. No. MP13378  
RJN Apollo Spectra Hospitals

MR No. .... Patient Name Ajay Kumar Age 31 Sex F Date 29/7/23

Health Checkup.

O/R

- Restorations  $\bar{7}$   $\frac{7}{1}$
- Calculus  $n$
- Stems  $n$

I/A-

oral prophylaxis.

R.

Check ups M/W

$i \rightarrow j$   $\int + 7 \text{ day}$

1  
2



# RATAN JYOTI NETRALAYA

OPHTHALMIC INSTITUTE & RESEARCH CENTRE

Hospital Reg. No. : 071



॥ सर्वेन्द्रियाणाम् नयनम् प्रधानम् ॥

18, Vikas Nagar, Near Sai Baba Mandir, Gwalior-2 (M.P.) INDIA Tel. : 2423350/51, Web : www.ratanjyotigroup.org, Email : rjneye@gmail.com  
Opp. Medical College, Gate No. 3 Jhansi-284128 (U.P.) Ph. 0510-2322311 (M) 9109973225

SR.NO. : 1869819

NAME : MR AJAY KUMAR SHARMA

AGE/SEX : 31 YRS / MALE

DATE : 29-July-2023

MRD NO. : R-101809

CITY : MORENA

VISION	DISTANCE		NEAR	
	OD	OS	OD	OS
UNAIDED	6/6	6/6	N6	N6
WITH GLASSES				
WITH PIN HOLE				
WITH COLOR				
VISION				

IOP READING				
TIME	OD	OD METHOD	OS	OS METHOD
10:03AM	15		16	

Rx.	EYE	From	To	Instructions
1 MOXIEYE GEL 5ML ONE DROP 4 TIMES A DAY FOR 15 DAYS	BOTH EYE	29-Jul-2023	12-Aug-2023	
2 ECOTEARS HA EYE DROP (SODIUM HYALURONATE 0.1% CMC 0.5% ERYTHRITOL GLYCERIN OPHTHALMIC SOLUTION) ONE DROP 4 TIMES A DAY FOR 60 DAYS	BOTH EYE	29-Jul-2023	26-Sep-2023	

TREATMENT PLAN : -PERIODICAL FOLLOW UP .

REFERRED TO :

DR. SHRANKANT THAPAK

Reg.No MP - 140005

NEXT REVIEW : 29-Jan-2024 10:26AM OR EARLIER IN CASE OF ANY PROBLEM

NOTE : Kindly continue medications as advised for the period advised.  
In case of redness or allergy please discontinue and inform the doctor.

Nutritional Advice : As per treating physician

Instructions : Patient and Attendant(s) Counselling

Advised medicine may be replaced with a good quality generic medicine.

**Speciality Clinics :** ▪ Comprehensive Ophthalmology Clinic ▪ Cataract & IOL Clinic ▪ Vitreo Retina & Uvea Clinic ▪ Spectacle Removal Clinic (Lasik/Femto Lasik/Phakic Lens) ▪ Cornea Clinic ▪ Glaucoma Clinic ▪ Orbit & Oculoplasty Clinic ▪ Trauma Clinic ▪ Squint Clinic ▪ Paediatric Ophthalmology Clinic ▪ Low Vision Aid Clinic ▪ Contact Lens Clinic

CONSULTATION TIMINGS : MORNING 9:00 A.M. TO 6:00 P.M. (SUNDAY OFF)

● केंद्रीय कर्मचारियों के लिए मान्यता प्राप्त ● कौशलैस इंश्योरेन्स एवं टी.पी.ए. सुविधा उपलब्ध

● For Appointment Please Contact : 9111004046

स्वामी विद्यानंद भारती आई बैंक

**नेत्रदान**

करें और करायें इसे अपने परिवार की परम्परा बनायें  
नेत्रदान के लिए सम्पर्क करें : 9111004044



PATIENT NAME - AJAY KUMAR SHARMA 31Y/M  
REFERRED BY - H.C.P  
DATE - 29/07/2023  
INVESTIGATION - USG WHOLE ABDOMEN

**IMAGING FINDINGS:-**

**Liver** appears normal in size, position, shape, echotexture and margin. Parenchyma shows increased echogenicities. The intrahepatic biliary and portal venous radicles appear normal. Hepatic veins and portal vein are normal.

**Gall Bladder** is well distended. GB wall and lumen content appears normal. No echogenic focus within GB lumen. Visualized **CBD** is of normal caliber.

**Spleen** appears normal in size (~12cm), position, shape, echotexture and margin. No any focal lesion within splenic parenchyma. Splenic vein is normal and undilated.

**Pancreas** is well visualized, appears normal in size, shape and echotexture. Pancreatic duct is not dilated. No USG evidence of obvious measurable focal lesion.

**Both Kidneys:** Measurements are right kidney ~9.8x4.4cm and left kidney ~10.6x5cm. Both kidneys are normal in position, size, shape, surface, echotexture and cortico-medullary differentiation. Bilateral PC systems are compact. No significant calculus or hydronephrosis on either side. Ureters are undilated on either side.

**Urinary Bladder** is minimally distended

**Prostate** appears grossly normal in size, shape and echotexture.

No obvious ascites.

**OPINION:- Features are suggestive of-**

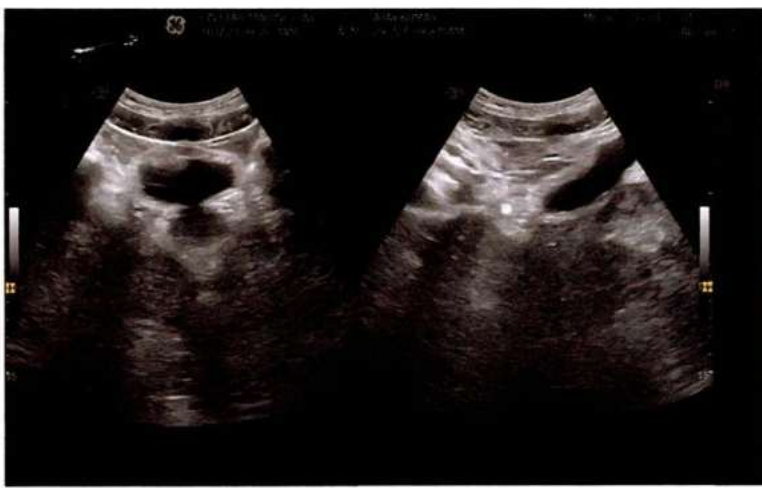
- **Grade I Fatty liver.**

**Suggested clinical correlation/Follow up imaging.**



**DR. SAKSHI CHAWLA**  
**(MD RADIODIAGNOSIS)**

Disclaimer: The science of radiology is based upon interpretation of shadows of normal and abnormal tissue. This is neither complete nor accurate; hence, findings should always be interpreted in to the light of clinico-pathological correlation. This is a professional opinion, not a diagnosis. Not meant for medico legal purposes. For any kind of typing error, please intimate us within 7 days of reporting.



<b>Patient name</b>	<b>MR AJAY KUMAR SHARMA</b>	<b>Age/sex</b>	<b>31 Y/M</b>
<b>Ref. By</b>	<b>148188</b>	<b>Date</b>	<b>29.07.23</b>

## **XRAY CHEST**

- The lung fields appear clear.
- Bilateral C.P. angles appear clear.
- Cardiac size within normal limits.
- Soft tissue shadow and bony thoracic cage appears normal.

*Please correlate clinically.*

**DR. ANOOP ARYA (SINGHAL)**  
**DMRD, DNB (RADIODIAGNOSIS)**

148188

ajay kumar sharma

31 Years

Male

29-Jul-23 10:40:55 AM

Rate 73 . Sinus rhythm.....normal P axis, V-rate 50- 99

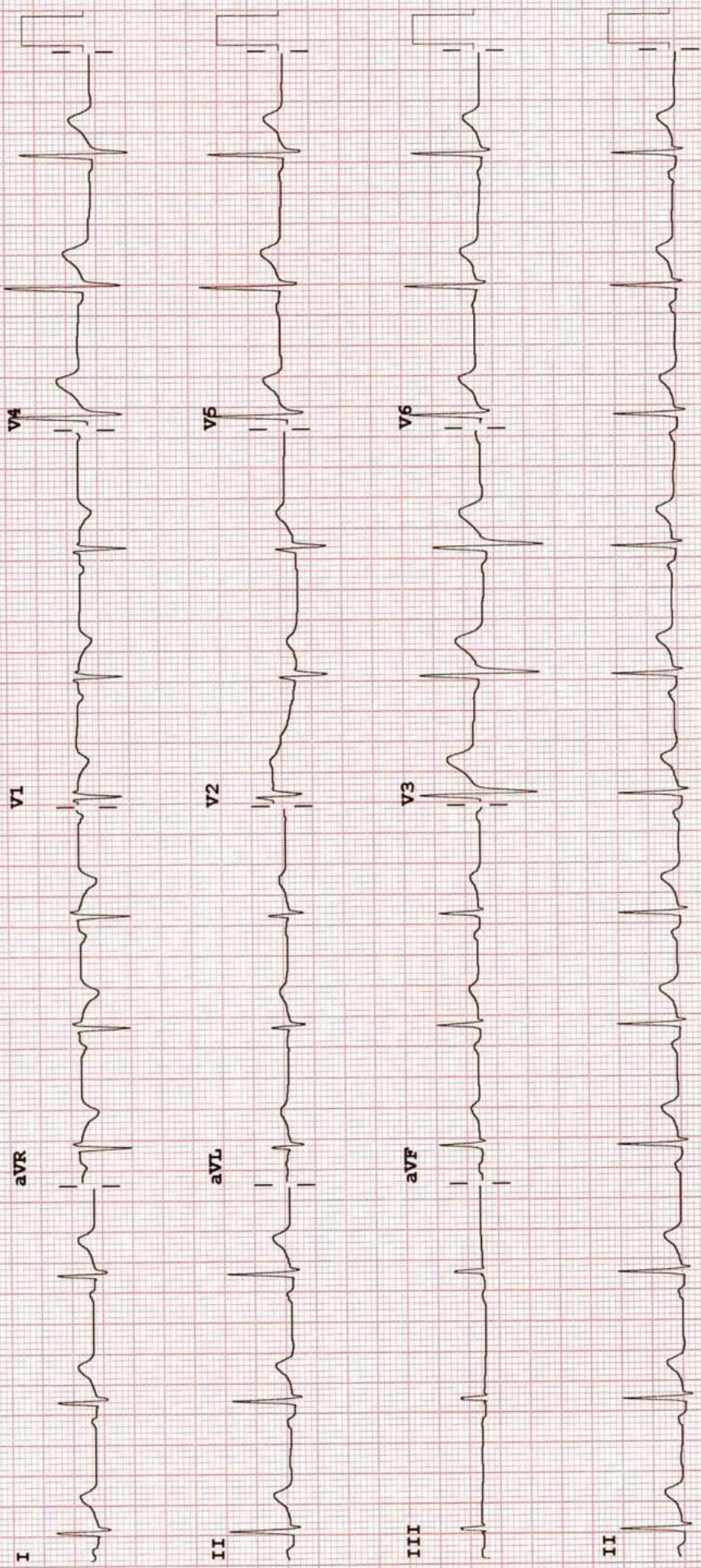
PR 162  
QRS 87  
QT 367  
QTc 405

--AXIS--  
P 48  
QRS 61  
T 33

12 Lead; Standard Placement

- NORMAL ECG -

Unconfirmed Diagnosis



Device:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 60~ 0.15-100 Hz

PH100B CL

P?