Apollo

TOUCHING LIVES

Apollo Clinic
VASHI

MEDICAL SUMMARY

NAME:	Mr. Shharad Paul,	UHID:	
AGE:	34	DATE OF HEALTHCHECK:	27-1-2024
GENDER:	M		

HEIGHT:	165	MARITAL STATUS:	M
WEIGHT:	71.8	NO OF CHILDREN:	1
BMI:	26.4		

C/O: - Dry Cough, Sore throat

K/C/O:

PRESENT MEDICATION: — No

P/M/H: - No

P/S/H: - No

ALLERGY: - NO

PHYSICAL ACTIVITY: Active/ Moderate/ Sedentary

H/A: SMOKING: } NAD
ALCOHOL:
TOBACCO/PAN:

FAMILY HISTORY FATHER: - DM
MOTHER: - DM

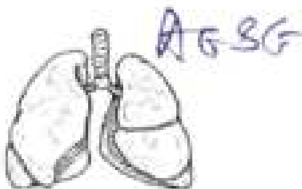
O/E:

BP: 110/70 PULSE: - 94/min

TEMPERATURE: N SCARS:

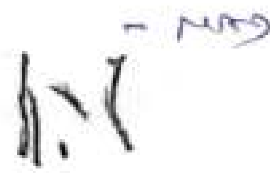
LYMPHADENOPATHY: } NAD
PALLOR/ICTERUS/CYNOSIS/CLUBBING:
OEDEMA:

S/E:
RS:



AEBE

P/A: - NAD



CVS: S1S2+

Extremities & Spine: - NAD

ENT: } NAD
Skin:

CNS: Conscious, Oriented

Vision:

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

• ANDHERI • COLABA • NASHIK • VASHI

Vashi : M/S. Indira Health & Lifestyle Pvt. Ltd. The Emerald, 1st Floor, Plot No. 195, Sector - 12, Besides Neel Siddhi Tower, Vashi - Navi Mumbai - 400703.
Tel.: (022) - 2788 1322 / 23 / 24 8291490000 • Email: apolloclinicvashi@gmail.com

Name:	Age:	Date of Health check-up:

Findings and Recommendation:

Findings:-

CBC – Lymphocytosis

HBA1C 5.9% Prediabetes

High fasting BloodSugar levels

Dyslipidemia – Total Chol – 223mg/dl

TGs – 191mg/dl / high

Uric acid levels high

USG – gr I fatty liver

Rest reports WNL

Recommendation:-

Consult Physician

DR. PRADNYA P. DANI (M.B.B.S.) Reg. No. 67...

Signature:

Consultant –

Apollo

Apollo Clinic VASHI

OPHTHALMIC EVALUATION

UHID No.: ________ Date: 27/1/24

Name: Mr Sharad Age 34. Gender: Male/Female

Without Correction:

Distance: Right Eye 6/6 Left Eye 6/6

Near : Right Eye N6 Left Eye N6

With Correction:

Distance: Right Eye ________ Left Eye ________

Near : Right Eye ________ Left Eye ________

	RIGHT					LEFT				
	SPH	CYL	AXIS	PRISM	VA	SPH	CYL	AXIS	PRISM	VA
Distance										
Near										

Colour Vision: NAD (BE)

Anterior Segment Examination:

Pupils: NAD (BE)

Fundus:

Intraocular Pressure: 14 mm Hg (BE)

Diagnosis:

Advice:

Re-Check on 6 mths (This Prescription needs verification every year)

Dr. ________
(Consulting Ophthalmologist)

DR. RUCHIRA SHARMA
M. S. (OPHTH)
CONSULTING OPHTHALMOLOGIST
& MICRO SURGEON
REG. No.: 3262 / 09/ 02

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VASHI

ENT EVALUATION

Name: Sharad	MR NO:
Age/Gender:	Date:

EAR :
Tympanic Membrane: (N)
Pre- auricular :- (N)
Pina / EAC:
Mastoid Tunning Fork tests :-
Pure tone audiometry

(N) B/L TM intact

NOSE :-
External Nose :- No deformity
Anterior Rhinoscopy:- Mucosa - (N)
Post – Nasal space:- Normal

THROAT :-
70% scopy :
Tongue / palate / Teeth :-

Dry cough (+)
(N) normal.

NECK :-
Nodes :-
Thyroid :-
Glands :-

Sleep –Related examination:-
Tongue – Base :-
Palate:-
Uvula:

NAD

INVESTIGATIONS : Duonase Nasal Spray 2/0 - 0 - 2/0 x 7 days

IMPRESSION:-

APOLLO CLINIC
First Floor, Sec-1
Plot No. 195/B Vashi,
Navi Mumbai - 03.

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Apollo Clinic VASHI

Name	: Mr. Sharad Pal	Gender	: Male	Age	: 34 Years
UHID	: FVAH 10389.	Bill No	:	Lab No	: V-3556-23
Ref. by	: SELF	Sample Col.Dt	: 27/01/2024 08:20		
Barcode No	: 5826	Reported On	: 27/01/2024 19:04		

HAEMOGRAM(CBC,ESR,P/S)-WB (EDTA)

TEST	RESULTS		BIOLOGICAL REFERENCE INTERVAL
Haemoglobin(Colorimetric method)	15.8	g/dl	13 - 18
RBC Count (Impedance)	5.55	Millions/cumm.	4 - 6.2
PCV/Haematocrit(Calculated)	47.1	%	35 - 55
MCV:(Calculated)	85	fl	78 - 98
MCH:(Calculated)	28.4	pg	26 - 34
MCHC:(Calculated)	33.4	gm/dl	30 - 36
RDW-CV:	13.8	%	11.5 - 16.5
Total Leucocyte count(Impedance)	4930	/cumm.	4000 - 10500
Neutrophils:	48	%	40 - 75
Lymphocytes:	**44**	%	20 - 40
Eosinophils:	03	%	0 - 6
Monocytes:	05	%	2 - 10
Basophils:	00	%	0 - 2
Platelets Count(Impedance method)	1.81	Lakhs/c.mm	1.5 - 4.5
MPV	9.2	fl	6.0 - 11.0
ESR(Westergren Method)	10	mm/1st hr	0 - 20
Peripheral Smear (Microscopic examination)			
RBCs:	Normochromic,Normocytic		
WBCs:	Lymphocytosis		
Platelets	Adequate		
Note:	Test Run on 5 part cell counter. Manual diff performed.		

Neha More
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. Sharad Pal	Gender	: Male	Age	: 34 Years
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TEST	RESULTS
Blood Grouping (ABO & Rh)-WB(EDTA) Serum	
ABO Group:	**:B:**
Rh Type:	**Positive**
Method :	Matrix gel card method (forward and reverse)
------	---------------------------

Pooja Surve
Entered By

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Chief Pathologist

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TEST	RESULTS		BIOLOGICAL REFERENCE INTERVAL
HbA1c(Glycosylated Haemoglobin)WB-EDTA			
(HbA1C) Glycosylated Haemoglobin :	5.9	%	Normal <5.7 % Pre Diabetic 5.7 - 6.5 % Diabetic >6.5 % Target for Diabetes on therapy < 7.0 % Re-evalution of therapy > 8.0 %
Mean Blood Glucose :	122.63	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

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PLASMA GLUCOSE

TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
Fasting Plasma Glucose :	**113**	mg/dL	Normal < 100 mg/dL Impaired Fasting glucose : 101 to 125 mg/dL Diabetes Mellitus : >= 126 mg/dL (on more than one occasion) (American diabetes association guidlines 2016)
Post Prandial Plasma Glucose :	140	mg/dL	Normal < 140 mg/dL Impaired Post Prandial glucose : 140 to 199 mg/dL Diabetes Mellitus : >= 200 mg/dL (on more than one occasion) (American diabetes association guidlines 2016)

Method : Hexokinase

Alsaba Shaikh
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TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
LIPID PROFILE - Serum			
S. Cholesterol(Oxidase)	223	mg/dL	Desirable < 200 Borderline:>200-<240 Undesirable:>240
S. Triglyceride(GPO-POD)	**191**	mg/dL	Desirable < 150 Borderline:>150-<499 Undesirable:>500
S. VLDL:(Calculated)	38.2	mg/dL	Desirable <30
S. HDL-Cholesterol(Direct)	**32.6**	mg/dL	Desirable > 60 Borderline:>40-<59 Undesirable:<40
S. LDL:(calculated)	152.2	mg/dL	Desirable < 130 Borderline:>130-<159 Undesirable:>160
Ratio Cholesterol/HDL	**6.8**		3.5 - 5
Ratio of LDL/HDL	**4.7**		2.5 - 3.5

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LFT(Liver Function Tests)-Serum

TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
S.Total Protein (Biuret method)	7.40	g/dL	6.6 - 8.7
S.Albumin (BCG method)	4.50	g/dL	3.5 - 5.2
S.Globulin (Calculated)	2.9	g/dL	2 - 3.5
S.A/G Ratio:(Calculated)	1.55		0.9 - 2
S.Total Bilirubin (DPD):	0.80	mg/dL	0.1 - 1.2
S.Direct Bilirubin (DPD):	0.27	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):	35	U/L	5 - 40
S.ALT (SGPT) (IFCC Kinetic with P5P):	**65**	U/L	5 - 41
S.Alk Phosphatase(pNPP-AMP Kinetic):	46	U/L	40 - 129
S.GGT(IFCC Kinetic):	23	U/L	11 - 50

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TEST	RESULTS		BIOLOGICAL REFERENCE INTERVAL
	BIOCHEMISTRY		
S.Urea(Urease Method)	31.1	mg/dl	10.0 - 45.0
BUN (Calculated)	14.51	mg/dL	5 - 20
S.Creatinine(Jaffe's Method)	1.07	mg/dl	0.50 - 1.3
BUN / Creatinine Ratio	13.56		9:1 - 23:1
S.Uric Acid(Uricase Method)	**7.1**	mg/dl	3.4 - 7.0

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TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
	Thyroid (T3,T4,TSH)- Serum		
Total T3 (Tri-iodo Thyronine) (ECLIA)	2.05	nmol/L	1.3 - 3.1 nmol/L
Total T4 (Thyroxine) (ECLIA)	120.6	nmol/L	66 - 181 nmol/L
TSH-Ultrasensitive (Thyroid-stimulating hormone) Method : ECLIA	2.32	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 hypothyrodism.
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	**Ms Kaveri Gaonkar**	**Dr. Milind Patwardhan**
Entered By	**Verified By**	M.D(Path) **Chief Pathologist**

End of Report

Results are to be correlated clinically

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URINE REPORT

TEST	RESULTS		BIOLOGICAL REFERENCE INTERVAL
PHYSICAL EXAMINATION			
QUANTITY	30	mL	
COLOUR	Pale Yellow		
APPEARANCE	Clear		Clear
SEDIMENT	Absent		Absent
CHEMICAL EXAMINATION(Strip Method)			
REACTION(PH)	6.0		4.6 - 8.0
SPECIFIC GRAVITY	1.005		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)
Chief Pathologist

End of Report
Results are to be correlated clinically

Shharad, Pal
10389

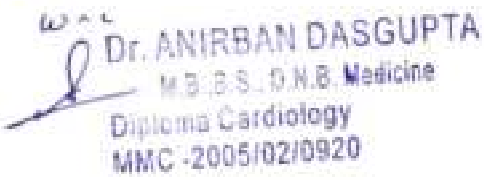
34 Years Male

27.01.2024 8:51:54
Apollo Clinic
1st Flr.The Emerald.Sector-12.
Vashi, Mumbai-400703

61 bpm
-- / -- mmHg

QRS	:	84 ms
QT / QTcBaz	:	418 / 420 ms
PR	:	186 ms
P	:	102 ms
RR / PP	:	976 / 983 ms
P / QRS / T	:	48 / 36 / 24 degrees

Normal sinus rhythm
Normal ECG



I aVR V1 V4
II aVL V2 V5
III aVF V3 V6
II

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: SHHARAD, PAL
Patient ID: 10389
Height:
Weight:

DOB: 03.01.1990
Age: 34yrs
Gender: Male
Race: Asian

Study Date: 27.01.2024
Test Type: Treadmill Stress Test
Protocol: BRUCE

Referring Physician: --
Attending Physician: DR.ANIRBAN DASGUPTA
Technician: Anita Gaikwad

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	00:18	0.00	0.00	69	110/70	
	STANDING	00:14	0.00	0.00	68		
	HYPERV.	00:15	0.00	0.00	71		
	WARM-UP	00:12	0.60	0.00	70		
EXERCISE	STAGE 1	03:00	1.70	10.00	100	120/70	
	STAGE 2	03:00	2.50	12.00	122	120/80	
	STAGE 3	03:00	3.40	14.00	157	150/80	
	STAGE 4	00:31	4.20	16.00	166		
RECOVERY		01:04	0.00	0.00	131	160/80	

The patient exercised according to the BRUCE for 9:31 min:s, achieving a work level of Max. METS: 11.70. The resting heart rate of 68 bpm rose to a maximal heart rate of 169 bpm. This value represents 90 % of the maximal, age-predicted heart rate. The resting blood pressure of 110/70 mmHg , rose to a maximum blood pressure of 160/80 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.

Dasgupta

Dr. ANIRBAN DASGUPTA
M.B.B.S., D.N.B. Medicine
Diploma Cardiology
MMC-2005/02/0920

PATIENT'S NAME	SHHARAD PAL	AGE :- 34YRS/M
UHID NO	10389	27 Jan 2024

DIGITAL RADIOGRAPH OF CHEST (PA VIEW)

ROTATION+

The lung fields are clear.

Heart and aorta appears normal.

Both hila appear normal.

Both costo-phrenic angles are clear.

Visualized bony thorax appears normal.

IMPRESSION: NO SIGNIFICANT ABNORMALITY IS DETECTED IN CURRENT RADIOGRAPH.

Clinico-haematological correlation is recommended.

Thanking you for the referral,
With regards,

DR. SIDDHI PATIL
Cons. Radiologist

PATIENT'S NAME	SHHARAD PAL	AGE :-34 y/M
UHID NO	10389	27 Jan 2024

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 9.9 x 4.1 cm. **LEFT KIDNEY** measures 10.3 x 5.0 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 approximately 18 gms.

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 REQURE CLINICAL CO-RELATION BEFORE ANY APPLICATION.

DR. DISHA MINOCHA
DMRE (RADIOLOGIST)