





NAME:	MR. NAVNERT MISHRA	UHID:	221116	
AGE:	31 44	Date of Health Check:	04/04/23	
GENDER:	Male.	Date of Post Consultation		

Height:	178 cm	Marital status:	
Weight:	68-K9	No. of Children:	

c/o: _ no fresh complaints

K/C/O:

Present Medication

P/M/H: ~ M

P/S/H: - 15.

гг/A: Smoking - 🔎

Alcohol - Oce .

Tobacco/Pan - Lo

Family History: Father - en (4400m)

Mother - ex (+4 prom-

O/E:

BP: 110 Downoon Pulse: Follow

Temperature: Norm Scars: N

Lymphadenopathy:

Pallor/Icterus/Cynosis/Clubbing:

Oedema:

S/E:

RS: AGSG

cvs: 5 820

CNS: DO

Spor gay

P/A: -Sof

10

Extremities &Spine:

ENT:

Skint onso-

sion :	Withou	t Glass	With 0	ilass
	Right Eye	Left Eye	Right Eye	Left Eye
Far				
Near				
Colour Vision				
Advise				

Apollo Clinic, Andheri (East)

Licenses - Indira Health And Lifestyle Private Limited.





"Xtrium", Ground Floor, Next to Holy Family Church, Andheri - Kurla Road, Chakala, Andheri (East), Mumbai - 400 093. Tel.: +91 22 46105555, Mob.: 98200 87235 E: andherieast@apolloclinic.com



Name : Mr. Navneet Mishra Gender : Male Age : 31 Years

UHID : AM10.221116 Bill No : ACR128782 Lab No: A-368-12

Ref. by : SELF Sample Col.Dt : 04/04/2023 09:55

Barcode No : 1353 Reported On : 04/04/2023 14:22

TEST RESULTS BIOLOGICAL REFERENCE INTERVAL

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

Haemoglobin(Colorimetric method)	16.9	g/dl	13 - 18
RBC Count (Impedance)	5.35	Millions/cumm.	4 - 6.2
PCV/Haematocrit(Calculated)	50	%	35 - 55
MCV:(Calculated)	93.4	fl	78 - 98
MCH:(Calculated)	31.7	pg	26 - 34
MCHC:(Calculated)	33.9	gm/dl	30 - 36
RDW-CV:	12.6	%	11.5 - 16.5
Total Leucocyte count(Impedance)	6160	/cumm.	4000 - 10500
Neutrophils:	58	%	40 - 75
Lymphocytes:	34	%	20 - 40
Eosinophils:	03	%	0 - 6
Monocytes:	05	%	2 - 10
Basophils:	00	%	0 - 2
Platelets Count(Impedance method)	2.26	Lakhs/c.mm	1.5 - 4.5
MPV	7.4	fl	6.0 - 11.0
ESR(Westergren Method)	05	mm/1st hr	0 - 20
Peripheral Smear (Microscopic examination) RBCs:	Normochromic	,Normocytic	
WBCs:	Normal		

Adequate

Sushant Gaikwad Entered By

Platelets

Note:

Ms Kaveri Gaonkar Verified By

Test Run on 5 part cell counter. Manual diff performed.

End of Report Results are to be correlated clinically





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: 1353

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: 04/04/2023 19:39

TEST

RESULTS

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

ABO Group:

:B:

Rh Type:

Positive

Method:

Tube Agglutination (forward and reverse)

Anushka Chavan Entered By

Ms Kaveri Gaonkar Verified By

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UNITS

BIOLOGICAL REFERENCE INTERVAL

GLUCOSE PLASMA

Fasting Plasma Glucose:

99

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:

80

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

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HbA1c(Glycosylated Haemoglobin)WB-EDTA

(HbA1C) Glycosylated Haemoglobin :

4.9

%

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:

mg/dL

Corelation of A1C with average glucose

A1C (%)	Mean Blood Glucose (mg/dl)
	126
6	
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

* 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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LFT(Liver Function Tests)-Serum

S.Total Protein (Biuret method)	8.38	g/dL	6.6 - 8.7
S.Albumin (BCG method)	5.20	g/dL	3.5 - 5.2
S.Globulin (Calculated)	3.18	g/dL	2 - 3.5
S.A/G Ratio:(Calculated)	1.64		0.9 - 2
S.Total Bilirubin (DPD):	0.88	mg/dL	0.1 - 1.2
S.Direct Bilirubin (DPD):	0.31	mg/dL	0.1 - 0.3
S.Indirect Bilirubin (Calculated)	0.57	mg/dL	0.1 - 1.0
S.AST (SGOT)(IFCC Kinetic with P5P):	38	U/L	5 - 40
S.ALT (SGPT) (IFCC Kinetic with P5P):	44	U/L	5 - 41
S.Alk Phosphatase(pNPP-AMP Kinetic):	134	U/L	40 - 129
S.GGT(IFCC Kinetic):	11	U/L	11 - 50

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BIOLOGICAL REFERENCE INTERVAL

DET	- Da	nal D	POFIL	e-serum
PC F I	- 14.6	ııaı r	10111	e-ser um

	RFT - Rena	i Profile-serum	
S.Urea(Urease-GLDH)	15.3	mg/dL	10.0 - 45.0
S. Urea Nitrogen(Calculated)	7.14	mg/dL	5 - 20
S.Creatinine(Jaffe's Kinetic)	0.73	mg/dL	0.50 - 1.3
S.Uric Acid(Uricase-POD)	6.8	mg/dL	3.4 - 7.0
S.Total Protein(Biuret)	8.38	g/dL	6.6 - 8.7
S.Albumin(BCG)	5.20	g/dL	3.5 - 5.2
S.Globulin(Calculated)	3.18	g/dL	2 - 3.5
A/G Ratio(Calculated)	1.64		0.9 - 2
S.Sodium(Na) (ISE-Direct)	140	mmol/L	135 - 145
S.Potassium(K) (ISE-Direct)	4.8	mmol/L	3.5 - 5.3
S.Chloride(CI) (ISE-Direct)	101	mmol/L	95 - 106
S.Calcium(NM-BAPTA)	10.0	mg/dL	8.6 - 10.0
S.Phosphorus(UV Phosphomolybdate)	2.65	mg/dL	2.5 - 4.5

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Lipid Profile- Serum

S. Cholesterol(Oxidase)

195

mg/dL

Desirable < 200

Borderline:>200-<240

Undesirable:>240

S. Triglyceride(GPO-POD)

mg/dL

Desirable < 150

Borderline:>150-<499

Undesirable:>500

S. VLDL:(Calculated)

23.8

56

119

mg/dL

Desirable <30

S. HDL-Cholesterol(Direct)

mg/dL

Desirable > 60

Borderline:>40-<59

Undesirable: <40

S. LDL:(calculated)

115.2

mg/dL

Desirable < 130

Borderline:>130-<159

Undesirable:>160

Ratio Cholesterol/HDL

3.5

3.5 - 5

Ratio of LDL/HDL

2.1

2.5 - 3.5

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Thyroid (T3,T4,TSH)- Serum

Total T3 (Tri-iodo Thyronine) (ECLIA)

1.97

nmol/L

1.3 - 3.1 nmol/L

Total T4 (Thyroxine) (ECLIA)

(Thyroid-stimulating hormone)

89.95

nmol/L

66 - 181 nmol/L

TSH-Ultrasensitive

Method: ECLIA

1.79

μlU/ml

Euthyroid: 0.35 - 5.50 μlU/ml

Hyperthyroid: < 0.35 µIU/ml

Hypothyroid: > 5.50 µIU/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

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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. lodine, Lithium, Amiodarone

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TEST RESULTS BIOLOGICAL REFERENCE INTERVAL

URINE REPORT

PHYSICAL EXAMINATION

QUANTITY 20 mL

COLOUR Pale Yellow

APPEARANCE Clear Clear SEDIMENT Absent Absent

CHEMICAL EXAMINATION(Strip Method)

REACTION(PH) 7.0 4.6 - 8.0

SPECIFIC GRAVITY 1.015 1.005 - 1.030

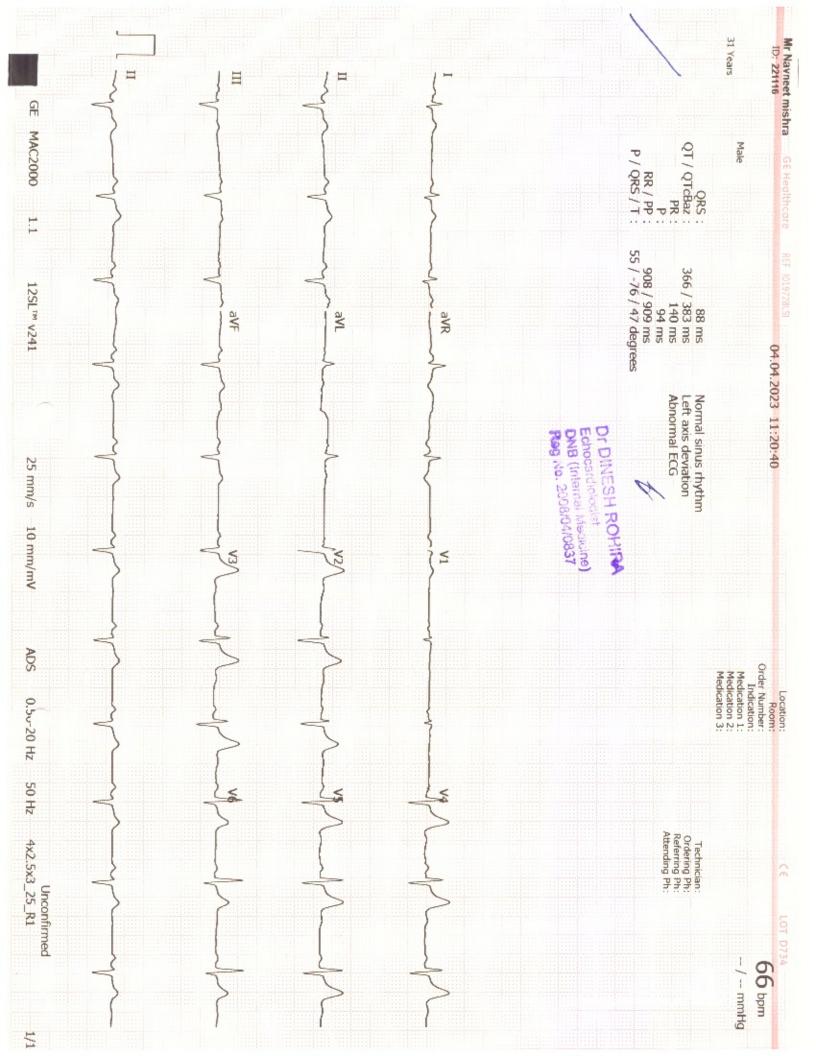
Absent Absent URINE ALBUMIN Absent URINE SUGAR(Qualitative) Absent Absent Absent KETONES Absent BILE SALTS Absent BILE PIGMENTS Absent Absent Normal UROBILINOGEN Normal(<1 mg/dl) Absent OCCULT BLOOD Absent Absent Nitrites Absent

MICROSCOPIC EXAMINATION

0 - 3/hpf 2 - 4 / hpf PUS CELLS Nil/ hpf Absent RED BLOOD CELLS 3 - 4/hpf 1 - 2 / hpf EPITHELIAL CELLS Absent Absent CASTS Absent Absent CRYSTALS Absent Absent BACTERIA

Shweta Unavane Entered By Ms Kaveri Gaonkar Verified By

End of Report
Results are to be correlated clinically







Name : Mr Navneet Mishra Gender : Male Age : 31 Years

UHID : AM10.0000221116 Bill No : ACR128782 Lab No :

Ref. by : Self Date : 04-Apr-2023 Time : 12:37 PM

Echo (Color Doppler)

DIMENSIONS	VALUES (RANGE)	DIMENSIONS	VALUES (RANGE
AO (ed)	25mm	IVS (ed)	9mm
LA (es)	32mm	LVPW (ed)	9mm
RVID (ed)	20mm	EF	60%
LVID (ed)	45mm	EPSS	3mm
LVID (es)	26mm		

MORPHOLOGICAL DATA

Mitral Valve

AML Normal

PML Normal

Aortic Valve Normal

Tricuspid Valve Normal

Pulmonary Valve Normal

Right Ventricle Normal

Left ventricle Normal

Left ventricle Normal
Interatrial Septum Intact

Interventricular Septum Intact
Pulmonary Artery Normal

Aorta Normal



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DEPARTMENT OF CARDIO Clinic Expertise. Closer to you.

Name : Mr Navneet Mishra Gender : Male Age : 31

UHID : AM10.0000221116 Bill No : ACR128782 Lab No :

Ref. by : Self Date : 04-Apr-2023 Time : 12:37 PM

Right Atrium Normal

Left Atrium Normal

LV - RWMA Normal

LV - FUNCTION Normal

Pericardium Normal

Doppler Studies Normal

IMPRESSION: Normal LV and RV Systolic Function LVEF=60%



Dr. Dinesh Rohira Consultant - D.N.B. (Medicine)



Licensee: Indira Health And Lifestyle Private Limited.



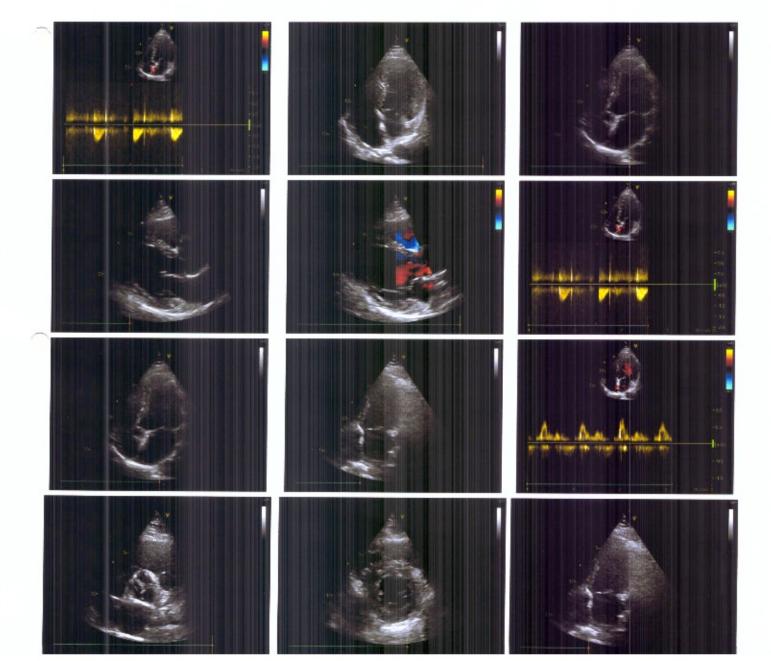
Apollo Clinic

Xtrim Ground Floor, Next to Holy Family Church,
Andheri (E).

Patient ID: 2023Ap0021 Name: MR NAVNEET MISHRA

Sex: M

Date: 04-Apr-2023





RADIOLOGY AND IMAGING Ultrasound

Name

: Mr Navneet Mishra

Gender: Male

Age

: 31 Years

UHID

: AM10.0000221116

Bill No : ACR128782 Lab No :

Ref. by

: Self

: 04-Apr-2023 Time

: 01:00 PM

Ultrasound Whole Abdomen (Male)

LIVER: Liver is normal in size and echotexture. No focal intra-hepatic lesion detected. Intra-hepatic biliary radicals are not dilated. Portal vein and CBD appear normal in calibre.

GALL BLADDER: Physiologically well distended Gall bladder is seen with normal wall thickness. No evidence of any calculus or abnormal mass lesion seen.

PANCREAS: Pancreas is normal in size and echotexture.

SPLEEN: Spleen is normal in size & echotexture.

Aorta and IVC appear normal in course and calibre.

KIDNEYS: Both Kidneys are normal in size, position, have smooth outlines and show a uniform parenchymal echogenicity. The cortico-medullary ratio is well maintained. There is no evidence of any calculi or Pelvi-calyceal dilatation seen on either side. No abnormal focal mass lesions seen.

Rk: 10.9 x 4.3 cms Lk: 10.9 x 4.8 cms

The Urinary Bladder is well distended. Its walls show a smooth outline. There is no evidence of any intraluminal or perivesical abnormality.

PROSTATE: Prostate is normal in size and echo-texture. No focal lesion seen.

No free fluid or lymphadenopathy seen.

IMPRESSION : Normal sonography of abdomen and pelvis

Dr. Anagha Shetty Consultant Radiologist

Apollo Clinic
Xtrim Ground Floor,Next to Holy Family Church,
Andheri (E).

Patient ID: 221116

Name: NAVNEET MISHRA

Sex: M

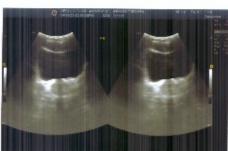
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RADIOLOGY AND IMAGING



Radiology

Name : Mr Navneet Mishra

Gender: Male

Age : 31 Years

UHID

: AM10.0000221116

Bill No : ACR128782 Lab No :

Ref. by

: Self

Date :

: 04-Apr-2023 Time

: 02:37 PM

Xray Chest PA

Both lung fields do not reveal any significant pulmonary parenchymal lesion.

Both costophrenic and cardiophrenic angles are clear.

Both hila appear normal.

Cardiac size is within normal limits.

Both the domes of diaphragm appear normal in contour and position.

Visualised bony thorax and dorsal spine appear normal.

IMPRESSION: Normal x-ray chest.

Note: Findings in Chest Xray are affected by many factors. Any findings on Chest Xray need to be confirmed by Chest CT.

Dr. Anagha Shetty Consultant Radiologist

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APOLLO CLINIC

Andheri - East

Date 04/04/23

Patient Name MR. NAVNEET MISHRA

Age 31 y s Sex M.

Complaints:

Doynen 6.

Visual Acuity :

Distant - Unaided

RE

616

LE

6/6

Near Vision

NG

NB

Slit Lamp Examination:

(se Als-wn.

Application Tonometry:

Applanation:

(M) on-0:3 Mac-Recurya.

Colour Vision:

Normal

Fundus Examination through undilated pupil:

Media -

Cup / Disc Ratio -

Shape -

Colour -

Margins -

Macula -

Vessels -

Periphery -

Impression: (Ne) war

B (BO) locally

D Refresh Lean eyedrop

2 transfday x Imts

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Reg No. 2009

APOLLO CLINIC

Andheri - East

		Date 6/4/2013
ent Name Navneet	MISHR	Age 31 Sex M
Ears -	For ENT Check	c - Up
Tympanic Membrane -	0	
	0	6
Tunning Fork Test -		
Rinnes -	+	7
Weber -	—	
Nose -	0	
Throat -	O	
Remarks -	Con	

B

Jr. Anita Babtiwale
M.S. (ENT) DLO
Consultant ENT Surgeon
Rean. No. 2009/10/3551

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DENTAL EXAMINATION

Scaling & Polishing : _____

Fillings :____ Root Canal:

Extraction : _____

Replacement of Missing Teeth :_____

Any other Remarks :_____

Doctor's Sign & Stamp:

Findings and Recommendation:

recommendati

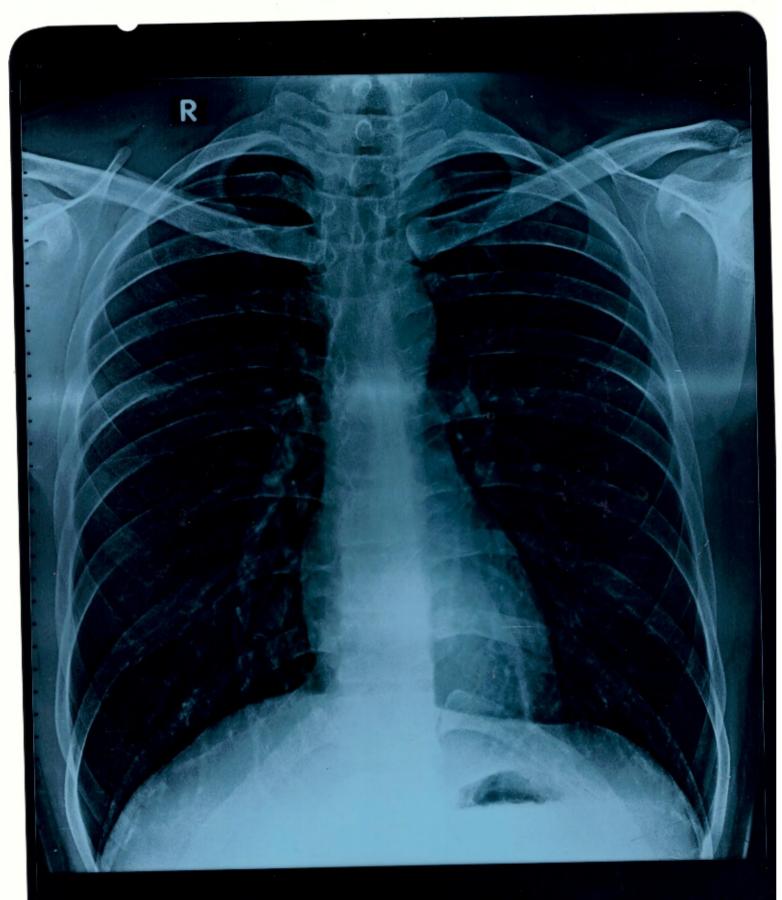
resignificant abnomably detected

Recombi

- Jallow regular diet & eneretse

Signature:

Consultant - Internal Medicine



221116 MR. NAVNEET MISHRA 31Y-M CHEST PA 04-Apr-23

APOLLO CLINIC