



### CONCLUSION OF HEALTH CHECKUP

ECU Number : 7558

Age : 31

Weight : 94.3

Date : 09/12/2023

MR Number : 23220773

Sex : Male

Ideal Weight : 70

Patient Name: SINHA SAXSENA

Height : 174

BMI : 31.15

*Fatty Liver  
Hypothyroidism*

*D  
Fibroscan ✓*

*By Jyoti Mehta*

*✓ Total Thyroxine 2mg  
1-0-0*

*BBF*

*D/L  
T/L a/h  
Jyoti*

Dr. Manish Mittal

Internal Medicine

Note : General Physical Examination & routine Investigations included in the Health Checkup have certain limitations and may not be able to detect all the latent and asymptomatic diseases.





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ESTD. 1964



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MR Number : 23220773

Patient Name : SINHA SAXSENA

Age : 31

Sex : Male

Height : 174

Weight : 94.3

Ideal Weight : 70

BMI : 31.15

Date : 09/12/2023

Past H/O : NO P/H/O ANY MAJOR ILLNESS

Present H/O : NO ANY PRESENT COMPLAINTS.

Family H/O : MOTHER : HYPOTHYROIDISM

Habits : NO HABITS

Gen.Exam. : G.C.GOOD

B.P : 114/78

Pulse : 82

Others : SPO2 98 %

C.V.S : NAD

R.S. : NAD

Abdomen : NP

Spleen : NP

Skin : NAD

C.N.S : NAD

Advice :





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BMI : 31.15

## Ophthalmic Check Up :

Right

Left

Ext Exam

NIL

Vision Without Glasses

NA

NA

Vision With Glasses

6/6 N.5

6/6 N.5

Final Correction

.

.

Fundus

NORMAL

Colour Vision

NORMAL

Advice

NIL

## Orthopaedic Check Up :

Ortho Consultation

Ortho Advice

## ENT Check Up :

Ear

Nose

Throat

Hearing Test

ENT Advice

## General Surgery Check Up :

General Surgery

Abdominal Lump

Hernia

External Genitals

PVR

Proctoscopy

Any Other

Surgical Advice





Patient Name : Mr. SINHA SAXSENA  
 Gender / Age : Male / 31 Years 11 Months 10 Days  
 MR No / Bill No. : 23220773 / 242057913  
 Consultant : Dr. Manish Mittal  
 Location : OPD

Type : OPD  
 Request No. : 180744  
 Request Date : 09/12/2023 08:33 AM  
 Collection Date : 09/12/2023 08:48 AM  
 Approval Date : 09/12/2023 02:40 PM

**CBC + ESR**

Test	Result	Units	Biological Ref. Range
<b>Haemoglobin.</b>			
Haemoglobin	13.0	gm/dL	11.5 - 15.5
Red Blood Cell Count (T-RBC)	4.65	mill/cmm	4.5 - 5.5
Hematocrit (HCT)	40.8	%	40 - 50
Mean Corpuscular Volume (MCV)	87.7	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	28.0	pg	27 - 32
MCH Concentration (MCHC)	31.9	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	<b>15.0</b>	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	<b>47.5</b>	fl	39 - 46
<b>Total Leucocyte Count (TLC)</b>			
Total Leucocyte Count (TLC)	5.78	thou/cmm	4 - 10
<b>Differential Leucocyte Count</b>			
Polymorphs	64	%	40 - 80
Lymphocytes	26	%	20 - 40
Eosinophils	05	%	1 - 6
Monocytes	05	%	2 - 10
Basophils	00	%	0 - 2
Polymorphs (Abs. Value)	3.75	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	1.53	thou/cmm	1 - 3
Eosinophils (Abs. Value)	0.23	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.24	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.03	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.3	%	1 - 3 : Borderline > 3 : Significant
<b>Platelet Count</b>			
Platelet Count	162	thou/cmm	150 - 410
Remarks	This is counter generated CBC Report, smear review is not done		
ESR	<b>16</b>	mm/1 hr	0 - 10

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any clinical decision is made. Request / Order may be repeated.

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Patient Name : Mr. SINHA SAXSENA  
Gender / Age : Male / 31 Years 11 Months 10 Days  
MR No / Bill No. : 23220773 / 242057913  
Consultant : Dr. Manish Mittal  
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### CBC + ESR

Immature Granulocyte (IG) count is a useful early marker of infection or inflammation, even when other markers are normal. It is an early and rapid discrimination of bacterial from viral infections. It is also increased in patients on steroid therapy / chemotherapy or haematological malignancy. High IG is always pathological; except in pregnancy and neonates of < 7 days.  
Method : HB by Non-Cyanide Hemoglobin analysis method. HCT by RBC pulse height detection method. RBC, TLC & PLC are by Particle Count by Electrical Impedance in Cell Counter by Fluorescent flow cytometry using a semi-conductor laser and hydrodynamic focusing in dedicated channels. Optical Platelets by Fluorescent + Laser Technology. MCV, MCH, MCHC, RDW (CV & SD) are calculated parameter. DLC by Flowcytometry method using semi-conductor Laser+Smear verification.

on ESL-30, comparable to Westergrens method and in accordance to ICSH reference method.

---- End of Report ----

Dr. Ameer Soni  
MD (Path)

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mr. SINHA SAXSENA Type : OPD  
Gender / Age : Male / 31 Years 11 Months 10 Days Request No. : 180744  
MR No / Bill No. : 23220773 / 242057913 Request Date : 09/12/2023 08:33 AM  
Consultant : Dr. Manish Mittal Collection Date : 09/12/2023 08:48 AM  
Location : OPD Approval Date : 09/12/2023 12:41 PM

**Haematology**

Test	Result	Units	Biological Ref. Range
<b>Blood Group</b>			
ABO system	A		
Rh system.	Positive		

By Gel Technology / Tube Agglutination Method

Note :

- This blood group has been done with new sensitive Gel Technology using both Forward and Reverse Grouping Card with Autocontrol
- This method checks group both on Red blood cells and in Serum for "ABO" group.

--- End of Report ---

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**Fasting Plasma Glucose**

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>Biological Ref. Range</u>
<i>Fasting Plasma Glucose</i>			
Fasting Plasma Glucose	89	mg/dL	70 - 110
Post Prandial 2 Hr.Plasma Glucose	113	mg/dL	70 - 140

Rv Hexokinase method on EXL Dade Dimension

---- End of Report ----

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**HbA1c (Glycosylated Hb)**

Test	Result	Units	Biological Ref. Range
<b>HbA1c (Glycosylated Hb)</b>			
Glycosylated Hemoglobin (HbA1c)	5.0	%	
estimated Average Glucose (e AG) *	96.8	mg/dL	

(Method:

By Automated HPLC analyser on D-10 Biorad. NGSP Certified, US-FDA approved, Traceable to IFCC reference method.

\* Calculated value for past 60 days, derived from HbA1c %, based on formula recommended by the A1c - Derived Average Glucose study from ADA and EASD funded The ADAG trial.

Guidelines for Interpretation:

Indicated Glycemic control of previous 2-3 months

HbA1c%	e AG (mg/dl)	Glycemic control
> 8	> 183	Action suggested...High risk of developing long-term complications. Action suggested, depends on individual patient circumstances
7 - 8	154 - 183	Good
< 7	< 154	Goal...Some danger of hypoglycemic reaction in type I Diabetics. Some Glucose intolerant individuals and Sub-Clinical diabetics may demonstrate (elevated) HbA1c in this area.
6 - 7	126 - 154	Near Normal
< 6	< 126	Nondiabetic level)

---- End of Report ----

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MD (Path)





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**Complete Lipid Profile**

Test	Result	Units	Biological Ref. Range
<b>Complete Lipid Profile</b>			
Appearance	Clear		
Triglycerides	137	mg/dL	1 - 150
<i>(Done by Lipase /Glycerol kinase on Vitros 5600)</i>			
< 150 Normal			
150-199 Borderline High			
200-499 High			
> 499 Very High			
Total Cholesterol	155	mg/dL	1 - 200
<i>(Done by Colorimetric - Cholesterol Oxidase, esterase, peroxidase on Vitros 5600.)</i>			
<200 mg/dL - Desirable			
200-239 mg/dL - Borderline High			
> 239 mg/dL - High			
HDL Cholesterol	<b>36</b>	mg/dL	40 - 60
<i>(Done by Colorimetric: non HDL precipitation method PTA/MgCl2 on Vitros 5600)</i>			
< 40 Low			
> 60 High			
Non HDL Cholesterol (calculated)	119	mg/dL	1 - 130
<i>(Non- HDL Cholesterol)</i>			
< 130 Desirable			
139-159 Borderline High			
160-189 High			
> 191 Very High			
LDL Cholesterol	<b>104</b>	mg/dL	1 - 100
<i>(Done by Enzymatic (Two Step CHE/CHO/POD) on Vitros 5600)</i>			
< 100 Optimal			
100-129 Near / above optimal			
130-159 Borderline High			
160-189 High			
> 189 Very High			
VLDL Cholesterol (calculated)	27.4	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	2.89		2.1 - 3.5
T. Ch./HDL Ch. Ratio	4.31		3.5 - 5
<i>(Recent NECP / ATP III Guidelines / Classification (mg/dl) :)</i>			

---- End of Report ----

Dr. Ameet Soni  
MD (Path)



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**Liver Function Test (LFT)**

Test	Result	Units	Biological Ref. Range
<b>Bilirubin</b>			
Bilirubin - Total	<b>1.37</b>	mg/dL	0 - 1
Bilirubin - Direct	0.21	mg/dL	0 - 0.3
Bilirubin - Indirect	1.16	mg/dL	0 - 0.7
<i>(Done by Dual Wavelength - Reflectance Spectrophotometry on Vitros 5600)</i>			
Aspartate Aminotransferase (SGOT/AST)	24	U/L	15 - 40
<i>(Done by Multipoint Rate Colorimetric with P-5-P on Vitros 5600)</i>			
Alanine Aminotransferase (SGPT/ALT)	50	U/L	16 - 63
<i>(Done by Multipoint-Rate/Colorimetric with P-5-P (pyridoxa-5-phosphate) on Vitros 5600)</i>			
Gamma Glutamyl Transferase (GGT)	21	U/L	15 - 85
<i>(Done by Multipoint Rate - L-γ-glutamyl-p-nitroanilide on Vitros 5600)</i>			
<b>Total Protein</b>			
Total Proteins	7.42	gm/dL	6.4 - 8.2
Albumin	3.84	gm/dL	3.4 - 5
Globulin	3.58	gm/dL	3 - 3.2
A : G Ratio	1.07		1.1 - 1.6
<i>(Done by Biuret endpoint and Bromocresol green method on vitros 5600.)</i>			

---- End of Report ----

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Consultant : Dr. Manish Mittal  
Location : OPD

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Approval Date : 09/12/2023 02:53 PM

Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea (Done by Endpoint/Colorimetric - Urease on Vitros 5600)	29	mg/dL	10 - 45
Creatinine (By Modified Kinetic Jaffe Technique)	1.10	mg/dL	0.9 - 1.3
Estimate Glomerular Filtration rate (Ref. range : > 60 ml/min for adults between age group of 18 to 70 yrs. EGFR Calculated by IDMS Traceable MDRD Study equation. Reporting of eGFR can help facilitate early detection of CKD. By Modified Kinetic Jaffe Technique)	More than 60		
Uric acid (Done by Colorimetric - Uricase, Peroxidase on Vitros 5600)	6.0	mg/dL	3.4 - 7.2

— End of Report —

Dr. Ameer Soni  
MD (Path)

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Patient Name : Mr. SINHA SAXSENA  
 Gender / Age : Male / 31 Years 11 Months 10 Days  
 MR No / Bill No. : 23220773 / 242057913  
 Consultant : Dr. Manish Mittal  
 Location : OPD

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 Request No. : 180744  
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 Approval Date : 09/12/2023 12:58 PM

## Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
Triiodothyronine (T3)	1.50	ng/ml	
<i>(Done by CLIA based method on automated immunoassay Vitros 5600.)</i>			
<i>Reference interval (ng/ml)</i>			
1 - 3 days	: 0.1 - 7.4		
1-11 months	: 0.1 - 2.45		
1-5 years	: 0.1 - 2.7		
6-10 years	: 0.9 - 2.4		
11-15 years	: 0.8 - 2.1		
16-20 years	: 0.8 - 2.1		
Adults (20 - 50 years)	: 0.7 - 2.0		
Adults (> 50 years)	: 0.4 - 1.8		
Pregnancy (in last 5 months)	: 1.2 - 2.5		
<i>(Reference : Tietz - Clinical guide to laboratory test, 4th edition )</i>			
Thyroxine (T4)	11.49	mcg/dL	
<i>(Done by CLIA based method on automated immunoassay Vitros 5600.)</i>			
<i>Reference interval (mcg/dL)</i>			
1 - 3 days	: 11.8 - 22.6		
1- 2 weeks	: 9.8 - 16.6		
1 - 4 months	: 7.2 - 14.4		
4 - 12 months	: 7.8 - 16.5		
1-5 years	: 7.3 - 15.0		
5 - 10 years	: 6.4 - 13.3		
10 - 20 years	: 5.6 - 11.7		
Adults / male	: 4.6 - 10.5		
Adults / female	: 5.5 - 11.0		
Adults (> 60 years)	: 5.0 - 10.7		
<i>(Reference : Tietz - Clinical guide to laboratory test, 4th edition )</i>			
Thyroid Stimulating Hormone (US-TSH)	6.76	microIU/ml	
<i>(Done by CLIA based method on automated immunoassay Vitros 5600.)</i>			
<i>Reference interval (microIU/ml)</i>			
Infants (1-4 days)	: 1.0 - 39		
2-20 weeks	: 1.7 - 9.1		
5 months - 20 years	: 0.7 - 6.4		
Adults (21 - 54 years)	: 0.4 - 4.2		
Adults (> 55 years)	: 0.5 - 8.9		
<i>Pregnancy :</i>			
1st trimester	: 0.3 - 4.5		
2nd trimester	: 0.5 - 4.6		
3rd trimester	: 0.8 - 5.2		
<i>(Reference : Tietz - Clinical guide to laboratory test, 4th edition )</i>			

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--- End of Report ---

Dr. Ameer Soni  
MD (Path)



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 Gender / Age : Male / 31 Years 11 Months 10 Days  
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**Urine routine analysis (Auto)**

Test	Result	Units	Biological Ref. Range
<b>Physical Examination</b>			
Quantity	30	mL	
Colour	Pale Yellow		
Appearance	Clear		
<b>Chemical Examination (By Reagent strip method)</b>			
pH	6.0		
Specific Gravity	>=1.030		
Protein	Negative	gm/dL	0 - 5
Glucose	Negative	mg/dL	0 - 5
Ketones	Negative		0 - 5
Bilirubin	Negative		Negative
Urobilinogen	Negative		Negative (upto 1)
Blood	Negative		Negative
Leucocytes	Negative		Negative
Nitrite	Negative		Negative
<b>Microscopic Examination (by Microscopy after Centrifugation at 2000 rpm for 10 min or on fully automated Sysmex urine sedimentation analyzer UF4000)</b>			
Red Blood Cells	0 - 1	/hpf	0 - 2
Leucocytes	0 - 1	/hpf	0 - 5
Epithelial Cells	0 - 1	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil	/hpf	Nil
Mucus	Absent	/hpf	Absent
Organism	Absent		

--- End of Report ---

Dr. Rakesh Vaidya  
MD (Path). DCP.



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- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

Patient No. : 23220773      Report Date : 09/12/2023  
Request No. : 190091976      09/12/2023 8.33 AM  
Patient Name : Mr. SINHA SAXSENA  
Gender / Age : Male / 31 Years 11 Months 10 Days

**X-Ray Chest AP**

Both lung fields are clear.  
Both costophrenic sinuses appear clear.  
Heart size is normal.  
Hilar shadows show no obvious abnormality.  
Aorta is normal.

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES  
• NOT VALID FOR MEDICO-LEGAL PURPOSES  
• CLINICAL CORRELATION RECOMMENDED

**Dr. Sharad Rungta, M.D DNB**  
Consultant Radiologist





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- Foetal Echocardiography
- Echocardiography

Patient No. : 23220773      Report Date : 09/12/2023  
Request No. : 190091989      09/12/2023 8.33 AM  
Patient Name : Mr. SINHA SAXSENA  
Gender / Age : Male / 31 Years 11 Months 10 Days

**USG : Screening for Abdomen (excluding Pelvis) Or Upper Abdomen**

**Liver is normal in size and increased in echopattern.** No mass lesion identified. The hepatic veins are clear and patent. PV patent. No dilated IHBR. Gall bladder is partially distended and shows no obvious abnormality. Common bile duct is not dilated.

Pancreas shows no obvious abnormality. Tail obscured. Spleen is normal size and echopattern.

Both kidneys are normal in shape and position. Normal echogenicity and cortico medullary differentiation is noted. No hydronephrosis or mass lesion seen.

No ascites.

**COMMENT:**

- Grade- I Fatty liver.
- No other abnormality.

*Kindly correlate clinically*

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES  
 • NOT VALID FOR MEDICO-LEGAL PURPOSES  
 • CLINICAL CORRELATION RECOMMENDED

**Dr. Ravij Patel, M.D (RADIO  
DIAGNOSIS)**  
Consultant Radiologist



Patient No. : 23220773      Report Date : 09/12/2023  
Request No. : 190092009      09/12/2023 8.33 AM  
Patient Name : **Mr. SINHA SAXSENA**  
Gender / Age : Male / 31 Years 11 Months 10 Days

### Echo Color Doppler

MITRAL VALVE : NORMAL, NO MR, NO MS  
AORTIC VALVE : NORMAL, NO AR, NO AS  
TRICUSPID VALVE : NORMAL, TRIVIAL TR, NO PAH  
PULMONARY VALVE : NORMAL  
LEFT ATRIUM : NORMAL  
AORTA : NORMAL  
LEFT VENTRICLE : NORMAL LV SIZE AND SYSTOLIC FUNCTION LVEF -- 65%, NO RESTING REGIONAL WALL MOTION ABNORMALITY  
RIGHT ATRIUM : NORMAL  
RIGHT VENTRICLE : NORMAL  
I.V.S. : INTACT  
I.A.S. : INTACT  
PULMONARY ARTERY : NORMAL  
PERICARDIUM : NORMAL  
COLOUR/DOPPLER FLOW MAPPING : NO MR // AR, TRIVIAL TR, NO PAH

### FINAL CONCLUSION:

1. NORMAL SIZED ALL CARDIAC CHAMBERS, NO LVH
2. NORMAL LV SYSTOLIC FUNCTION, LVEF -- 65%
3. NO REGIONAL WALL MOTION ABNORMALITY
4. NORMAL DIASTOLIC FUNCTION
5. NORMAL RIGHT HEART SIZE AND RV PRESSURES
6. NORMAL CARDIAC VALVES, NO MITRAL // AORTIC STENOSIS
7. NO PERICARDIAL EFFUSION, CLOT OR VEGETATION SEEN, SR+.

  
Dr. KILLOL KANERIA, D.M., CARD.

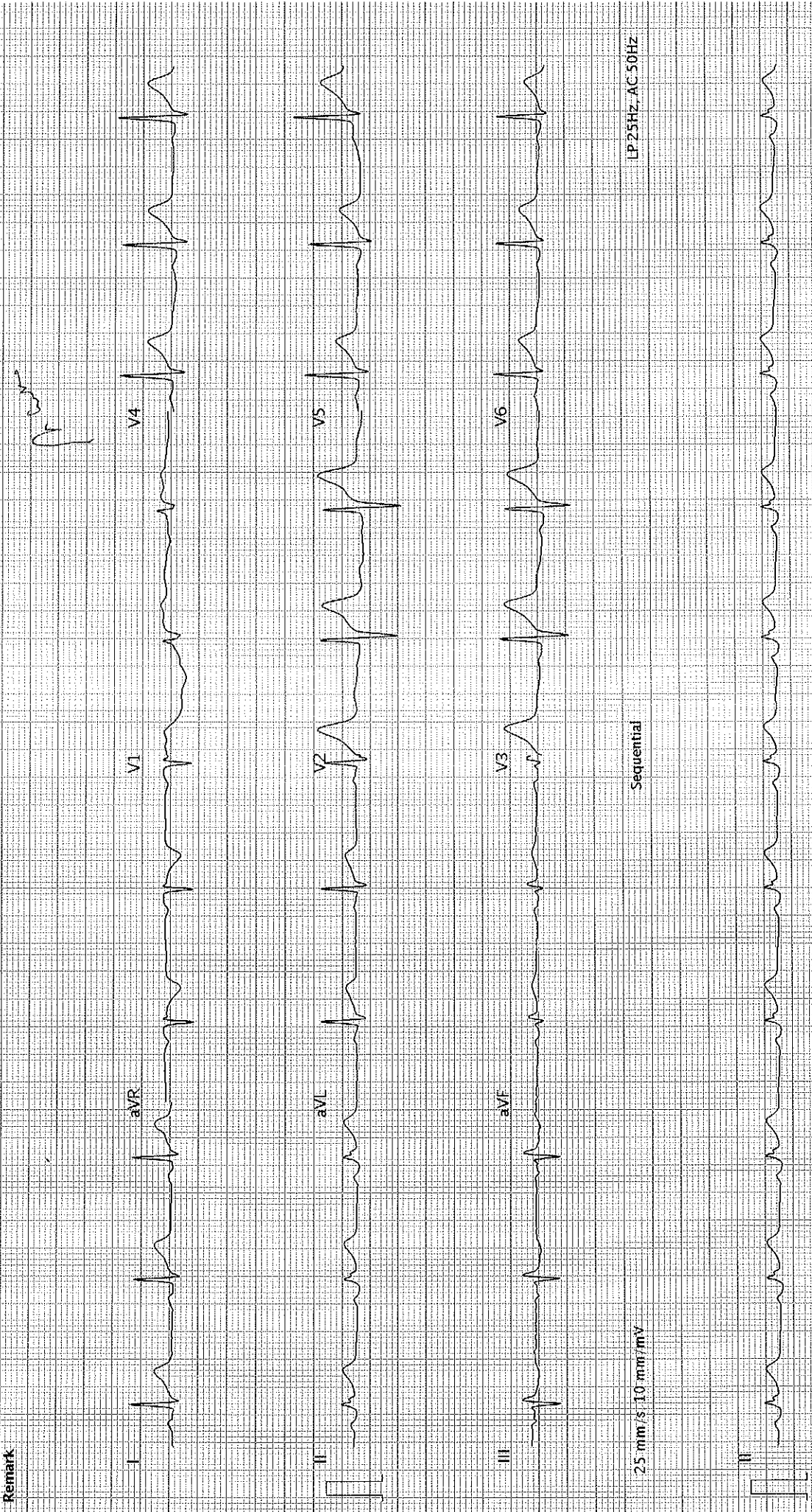


09.12.2023 09:11:10  
Standard 12 - Lead

Sinha, saxsena -  
Patient ID E.ci/25220773

Age	032Y	Ref. phys.		HR	64 bpm	RR	93.7 ms
Gender	Male			P		P	106 ms
Pacemaker	Unknown			PR		PR	160 ms
Remark				P axis	42°	QRS	94 ms
				QRS axis	11°	QT	388 ms
				T axis	20°	QTcB	401 ms

Unconfirmed report



25 mm/s 10 mm/mV

Sequential

LP-25Hz-AC-50Hz

25 mm/s 10 mm/mV

LP-25Hz-AC-50Hz