

Samir Sandilia
39 yrs / Male

13/01/2024

No fresh complaints

K140 - DM, HTN. ∴ 2020.

NO PH.

NO SH.

F/H - ~~HAD~~
father - HTN

BP - 180/90 mmHg (not take anti HTN)

P - 88/min

SPO₂ - 97%

Height - 180 cm

Weight - 80 kg

BMI - 24.7 kg/m²

↳ Normal

Pt is fit and can resume
his normal duties

⊕ Consult with physician for blood changes
cholesterol, TG, HbA1c, Sugar
raised ↑↑





Name - Mr. Samir Kumar Sandili	Age - 39 Y/M
Ref by Dr.- Siddhivinayak Hospital	Date - 13/01/2024

USG ABDOMEN & PELVIS

FINDINGS: -

The liver dimension is enlarged in size (19.5 cm). It appears normal in morphology with shows echogenicity. No evidence of intrahepatic ductal dilatation.

The GB-gallbladder is distended normally. Wall thickness is normal.

The CBD- common bile duct is normal. The portal vein is normal.

The pancreas appears normal in morphology.

The spleen is normal in size (11.4 cm) and morphology.

Both kidneys demonstrate normal morphology.

Both kidneys show normal cortical echogenicity.

The right kidney measures 11.8 x 4.4 cm.

The left kidney measures 10.7 x 5.3 cm.

Urinary bladder: -normally distended. Wall thickness - normal.

Prostate is normal in size and morphology Size: 17.3 gms

No free fluid is seen.

IMPRESSION:-

- Hepatomegaly with fatty infiltration (Grade I).

DR. AMOL BENDRE
MBBS; DMRE
CONSULTANT RADIOLOGIST





Name - Mr. Samir Kumar Sandilia	Age - 39 Y/M
Ref by Dr.- Siddhivinayak Hospital	Date - 13/01/2024

X- Ray chest (PA VIEW)

No obvious active parenchymal lesion seen in both lungs.

Cardiac and aortic shadows appear normal

No evidence of pleural of effusion is seen.

Both domes of diaphragm appear normal.

No obvious bony lesion is seen.

IMPRESSION:

- No significant abnormality seen.

Adv.: Clinical and lab correlation.

DR. MOHAMMAD SOHAIB
MBBS; DMRE
CONSULTANT RADIOLOGIST

Note: The above report represents interpretation of various radiographic / sonographic shadows, and hence has its own limitations. This report has to be co-related clinic-pathologically by the referring / physician and it does NOT represent the sole diagnosis.



OPHTHAL CHECK UP SCREENING

NAME OF EMPLOYEE

SAMIR KUIMAR SANDILIA

AGE

39

DATE -

13.01.2024

Spects : Without Glasses

	RT Eye	Lt Eye
NEAR	N/8	N/6
DISTANT	6/12	6/12
Color Blind Test	NORMAL	

SIDDHIVINAYAK HOSPITALS

ID: 751

Sandip Kumar

13-01-2024 09:05:15 AM

Female
Years 39
BP: 180/90

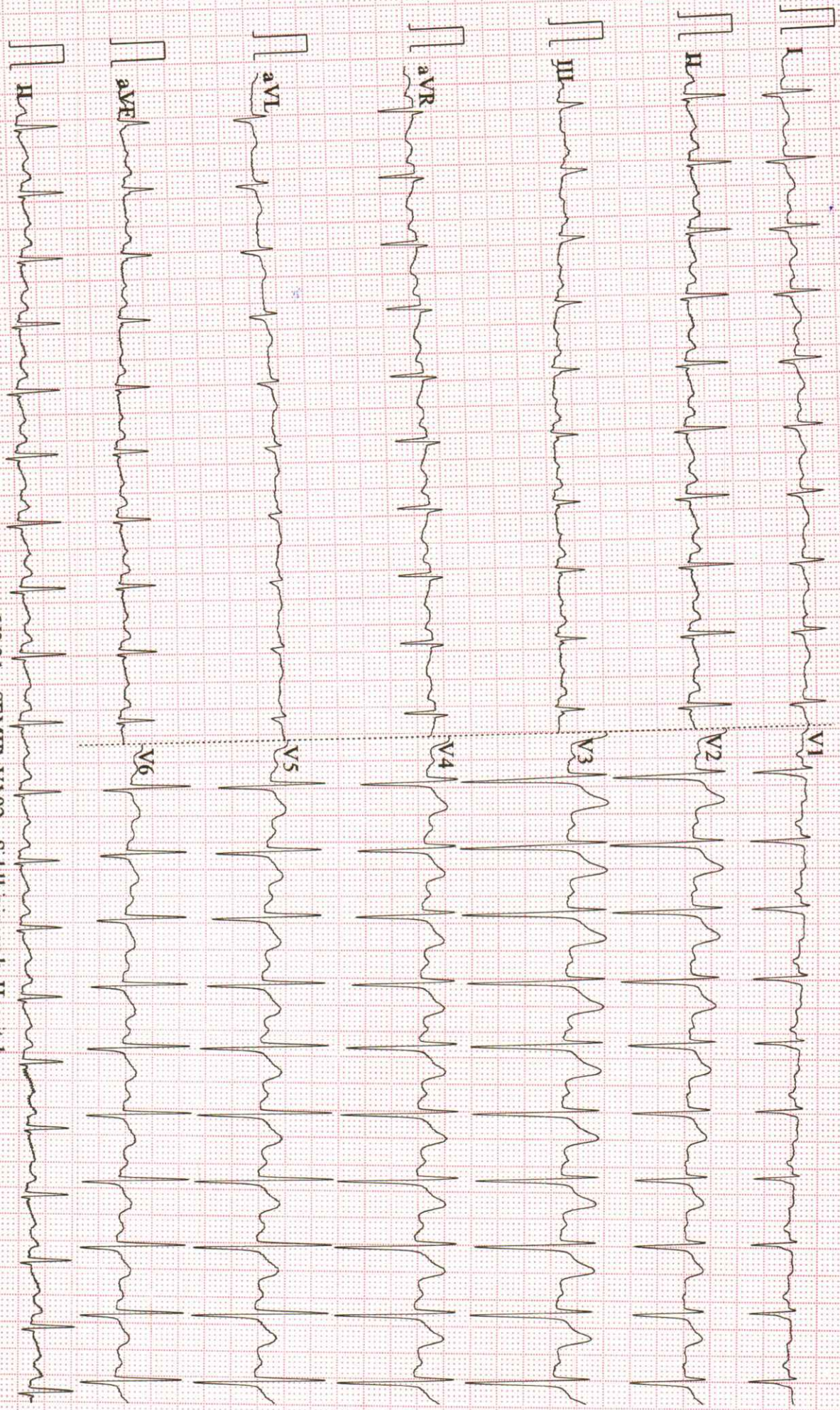
HR	: 119 bpm
P	: 102 ms
PR	: 147 ms
QRS	: 87 ms
QT/QTcBz	: 310/436 ms
PQRST	: 68/70/46 °
RV5/SV1	: 1.181/0.817 mV

Diagnosis Information:

Sinus Tachycardia
 Larged PtfV1
 Slight ST Elevation(V3,V4)

Report Confirmed by:

Sinus Tachy
*ST Lev
Tach



0.15~45Hz ACS50 25mm/s 10mm/mV 2*5.0s+1r V2.21 SEMIP V1.92 Siddhivinayak Hospital



ECHOCARDIOGRAM

NAME	MR. SAMIR KUMAR SANDILIA
AGE/SEX	39 YRS/M
REFERRED BY	SIDDHIVINAYAK HOSPITAL
DATE OF EXAMINATION	13/01/2024

2D/M-MODE ECHOCARDIOGRAPHY

VALVES: MITRAL VALVE: <ul style="list-style-type: none"> • AML: Normal • PML: Normal • Sub-valvular deformity: Absent AORTIC VALVE: Normal <ul style="list-style-type: none"> • No. of cusps: 3 PULMONARY VALVE: Normal TRICUSPID VALVE: Normal	CHAMBERS: LEFT ATRIUM: Normal <ul style="list-style-type: none"> • Left atrial appendage: Normal LEFT VENTRICLE: Normal <ul style="list-style-type: none"> • RWMA: No • Contraction: Normal RIGHT ATRIUM: Normal RIGHT VENTRICLE: Normal <ul style="list-style-type: none"> • RWMA: No • Contraction: Normal
GREAT VESSELS: <ul style="list-style-type: none"> • AORTA: Normal • PULMONARY ARTERY: Normal 	SEPTAE: <ul style="list-style-type: none"> • IAS: Intact • IVS: Intact
CORONARIES: Proximal coronaries normal CORONARY SINUS: Normal PULMONARY VEINS: Normal	VENACAVAE: <ul style="list-style-type: none"> • SVC: Normal • IVC: Normal and collapsing >20% with respiration
	PERICARDIUM: Normal

MEASUREMENTS:

AORTA		LEFT VENTRICLE STUDY		RIGHT VENTRICLE STUDY	
PARAMETER	OBSERVED VALUE	PARAMETER	OBSERVED VALUE	PARAMETER	OBSERVED VALUE
Aortic annulus	20 mm	Left atrium	32 mm	Right atrium	mm
Aortic sinus	mm	LVIDd	51.1mm	RVd (Base)	mm
Sino-tubular junction	mm	LVIDs	29.7 mm	RVEF	%
Ascending aorta	mm	IVSd	9.2 mm	TAPSE	mm
Arch of aorta	mm	LVPWd	9.2 mm	MPA	mm
Desc. thoracic aorta	mm	LVEF	72 %	RVOT	mm
Abdominal aorta	mm	LVOT	mm	IVC	14 mm



COLOR - FLOW & DOPPLER ECHOCARDIOGRAPHY

NAME	MR. SAMIR KUMAR SANDILIA
AGE/SEX	39 YRS/M
REFERRED BY	SIDDHIVINAYAK HOSPITAL
DATE OF EXAMINATION	13/01/2024

	MITRAL	TRICUSPID	AORTIC	PULMONARY
FLOW VELOCITY (m/s)			1.38	1.38
PPG (mmHg)				
MPG (mmHg)				
VALVE AREA (cm ²)				
DVI (ms)				
PR END DIASTOLIC VELOCITY (m/s)				
ACCELERATION/ DECELERATION TIME (ms)				
PHT (ms)				
VENA CONTRACTA (mm)				
REGURGITATION		TRJV= m/s PASP= mmHg		
E/A	E<A			
E/E'				

FINAL IMPRESSION: NORMAL STUDY

- No RWMA
- Normal LV systolic function (LVEF 72 %)
- Good RV systolic function
- Grade I diastolic dysfunction
- All cardiac valves are normal
- All cardiac chambers are normal
- IAS/IVS intact
- No pericardial effusion/ clot/vegetations

ADVICE: Nil

ECHOCARDIOGRAPHER:

Dr. ANANT MUNDE

DNB, DM (CARDIOLOGY)

INTERVENTIONAL CARDIOLOGIST

Dr. Anant Ramkishanrao Munde
MBBS, DNB, DM (Cardiology)
Reg. No. 2005021228



Name : Mr. SAMIR KUMAR (A) Collected On : 13/1/2024 10:05 am
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Ref By : SIDDHIVINAYAK HOSPITAL CGHS /ESIS Report Status : FINAL



***LIPID PROFILE**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
TOTAL CHOLESTEROL (CHOLESTEROL OXIDASE, ESTERASE, PEROXIDASE)	213.0	mg/dL	Desirable blood cholesterol: - <200 mg/dl. Borderline high blood cholesterol: - 200 - 239 mg/dl. High blood cholesterol: - >239 mg/dl.
S.HDL CHOLESTEROL (DIRECT MEASURE - PEG)	46.1	mg/dL	Major risk factor for heart : <30 mg/dl. Negative risk factor for heart disease: >=80 mg/dl.
S. TRIGLYCERIDE (ENZYMATIC, END POINT)	688.9	mg/dL	Desirable level : <161 mg/dl. High : >= 161 - 199 mg/dl. Borderline High : 200 - 499 mg/dl. Very high : >499mg/dl.
VLDL CHOLESTEROL (CALCULATED VALUE)	138	mg/dL	UPTO 40
S.LDL CHOLESTEROL (CALCULATED VALUE)	29	mg/dL	Optimal: <100 mg/dl. Near Optimal: 100 - 129 mg/dl. Borderline High: 130 - 159 mg/dl. High : 160 - 189mg/dl. Very high : >= 190 mg/dl.
LDL CHOL/HDL RATIO (CALCULATED VALUE)	0.63		UPTO 3.5
CHOL/HDL CHOL RATIO (CALCULATED VALUE)	4.62		<5.0

Above reference ranges are as per ADULT TREATMENT PANEL III recommendation by NCEP (May 2015).

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

Checked By
pooja_jadhav

DR. SMITA RANVEER.
M.B.B.S.M.D. Pathology(Mum)
Consultant Histocytopathologist





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COMPLETE BLOOD COUNT

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
HEMOGLOBIN	13.3	gm/dl	13 - 18
HEMATOCRIT (PCV)	40.3	%	42 - 52
RBC COUNT	4.60	x10 ⁶ /uL	4.70 - 6.50
MCV	88	fl	80 - 96
MCH	28.9	pg	27 - 33
MCHC	33	g/dl	33 - 36
RDW-CV	13.7	%	11.5 - 14.5
TOTAL LEUCOCYTE COUNT	8340	/cumm	4000 - 11000
<u>DIFFERENTIAL COUNT</u>			
NEUTROPHILS	64	%	40 - 80
LYMPHOCYTES	28	%	20 - 40
EOSINOPHILS	03	%	0 - 6
MONOCYTES	05	%	2 - 10
BASOPHILS	00	%	0 - 1
PLATELET COUNT	150000	/cumm	150000 - 450000
MPV	15.9	fl	6.5 - 11.5
PDW	16.7	%	9.0 - 17.0
PCT	0.170	%	0.200 - 0.500
RBC MORPHOLOGY	Normocytic Normochromic		
WBC MORPHOLOGY	Normal		
PLATELETS ON SMEAR	Seen in clumps		

Method : EDTA Whole Blood- Tests done on Automated Six Part Cell Counter.RBC and Platelet count by Electric Impedance ,WBC by SF Cube method and Differential by flow cytometry . Hemoglobin by Cyanide free reagent for hemoglobin test (Colorimetric Method).Rest are calculated parameters.

Result relates to sample tested, Kindly correlate with clinical findings.

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SHAISTA Q

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* 1 8 0 4 4 7 *

IMMUNOASSAY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<u>VITAMIN B12, SERUM</u>			
SPECIMEN	Serum		
VITAMIN B12	82.96	pg/ml	180 - 914

INTERPRETATION -

Decreased vitamin B12: Megaloblastic anemia, Folate deficiency, Neurological diseases, Gastric and small bowel diseases, malabsorption, strict vegetarian, Pancreatic insufficiency, Parasite-Fish tape worm. Alcoholism, Drug like PSA, anticonvulsants, metformin, Increased Vitamin B12: Acute hepatitis, Iatrogenic, Myeloproliferative diseases, Polycythemia, Oral contraceptives etc. Blood collection after vitamin B12 injections or oral supplements containing vitamin B12 may interfere with results.

ASSOCIATED TEST: SERUM FOLATE, HOMOCYSTEINE, HOLOTRANSCOBALAMIN/ACTIVE B12, INTRINSIC FACTOR.

Result relates to sample tested, Kindly correlate with clinical findings.

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URINE ROUTINE EXAMINATION

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
URINE ROUTINE EXAMINATION			
PHYSICAL EXAMINATION			
VOLUME	10 ml		
COLOUR	Pale yellow		Pale Yellow
APPEARANCE	Clear		CLEAR
CHEMICAL EXAMINATION			
REACTION (methyl red and Bromothymol blue indicator)	Acidic		Acidic
SP. GRAVITY (Bromothymol blue indicator)	1.010		1.005 - 1.022
PROTEIN (Protein error of PH indicator)	Absent		Absent
BLOOD (Peroxidase Method)	Absent		Absent
SUGAR (GOD/POD)	Present (++)		Absent
KETONES (Acetoacetic acid)	Absent		Absent
BILE SALT & PIGMENT (Diazonium Salt)	Absent		Absent
UROBILINOGEN (Red azodye)	Normal		Normal
LEUKOCYTES (pyrrole amino acid ester diazonium salt)	Absent		Absent
NITRITE (Diazonium compound With tetrahydrobenzo quinolin 3-phenol)	Absent		Negative
MICROSCOPIC EXAMINATION			
RED BLOOD CELLS	Absent		Absent
PUS CELLS	1-2	/ HPF	0 - 5
EPITHELIAL	1-2	/ HPF	0 - 5
CASTS	Absent		

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URINE ROUTINE EXAMINATION

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
CRYSTALS	Absent		
BACTERIA	Absent		Absent
YEAST CELLS	Absent		Absent
ANY OTHER FINDINGS	Absent		

REMARK Result relates to sample tested. Kindly correlate with clinical findings.

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IMMUNO ASSAY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<u>TFT (THYROID FUNCTION TEST)</u>			
SPACE		Space	-
SPECIMEN	Serum		
T3	102.3	ng/dl	84.63 - 201.8
T4	9.19	µg/dl	5.13 - 14.06
TSH	3.82	µIU/ml	0.270 - 4.20
T3 (Triiodo Thyronine hormone)	T4 (Thyroxine)	TSH(Thyroid stimulating hormone)	
AGE	RANGE	AGE	RANGES
1-30 days	100-740	1-14 Days	11.8-22.6
1-11 months	105-245	1-2 weeks	9.9-16.6
1-5 yrs	105-269	1-4 months	7.2-14.4
6-10 yrs	94-241	4 -12 months	7.8-16.5
11-15 yrs	82-213	1-5 yrs	7.3-15.0
0.1-2.5			
15-20 yrs	80-210	5-10 yrs	6.4-13.3
0.20-3.0			
		11-15 yrs	5.6-11.7
0.30-3.0			
			3rd Trimester

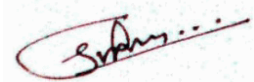
INTERPRETATION :

TSH stimulates the production and secretion of the metabolically active thyroid hormones, thyroxine (T4) and triiodothyronine (T3), by interacting with a specific receptor on the thyroid cell surface. The synthesis and secretion of TSH is stimulated by Thyrotropin releasing hormone (TRH), in response to low levels of circulating thyroid hormones. Elevated levels of T3 and T4 suppress the production of TSH via a classic negative feedback mechanism. Failure at any level of regulation of the hypothalamic-pituitary-thyroid axis will result in either underproduction (hypothyroidism) or overproduction (hyperthyroidism) of T4 and/or T3.

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

Checked By
 Priyanka_Deshmukh



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IMMUNOASSAY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<u>25- HYDROXY VITAMIN D</u>			
SPECIMEN	Serum		
25-HYDROXY, VITAMIN D	9.36	ng/ml	30 - 100

INTERPRETATION -

Cholicalciferol (vit D3) is synthesized in the skin from 7 dehydrocholecalciferol in response to sunlight, some part also comes from diet and supplements. Ergocalciferol (VitD2) comes essentially from diet and supplements

Both Cholicalciferol and Ergocalciferol are converted in the liver to 25 OH Vitamin D.

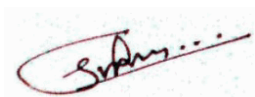
25 OH Vitamin D is considered best indicator of vitamin D nutritional status.

Deficiency : Secondary hyperparathyroidism, diseases related to impaired bone metabolism like rickets, osteoporosis, osteomalacia, and associated with increasing risk of many chronic illness and cardiovascular problems. Kindly correlate clinically.

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

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HAEMATOLOGY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<u>BLOOD GROUP</u>			
SPECIMEN	WHOLE BLOOD EDTA & SERUM		
* ABO GROUP	'O'		
RH FACTOR	POSITIVE		
Method: Slide Agglutination and Tube Method (Forward grouping & Reverse grouping)			
Result relates to sample tested, Kindly correlate with clinical findings.			
----- END OF REPORT -----			

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***RENAL FUNCTION TEST**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
BLOOD UREA (Urease UV GLDH Kinetic)	25.5	mg/dL	19 - 45
BLOOD UREA NITROGEN (Calculated)	11.92	mg/dL	5 - 20
S. CREATININE (Enzymatic)	0.82	mg/dL	0.6 - 1.4
S. URIC ACID (Uricase)	5.6	mg/dL	3.5 - 7.2
S. SODIUM (ISE Direct Method)	139.9	mEq/L	137 - 145
S. POTASSIUM (ISE Direct Method)	4.07	mEq/L	3.5 - 5.1
S. CHLORIDE (ISE Direct Method)	100.0	mEq/L	98 - 110
S. PHOSPHORUS (Ammonium Molybdate)	4.50	mg/dL	2.5 - 4.5
S. CALCIUM (Arsenazo III)	9.6	mg/dL	8.6 - 10.2
PROTEIN (Biuret)	7.1	g/dl	6.4 - 8.3
S. ALBUMIN (BGC)	4.23	g/dl	3.2 - 4.6
S.GLOBULIN (Calculated)	2.87	g/dl	1.9 - 3.5
A/G RATIO calculated	1.47		0 - 2

NOTE BIOCHEMISTRY TEST DONE ON FULLY AUTOMATED (EM 200)
ANALYZER.

Result relates to sample tested, Kindly correlate with clinical findings.

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Peripheral smear examination

TEST NAME	RESULTS
SPECIMEN RECEIVED	Whole Blood EDTA
RBC	Normocytic Normochromic
WBC	Total leucocyte count is normal on smear. Neutrophils:65 % Lymphocytes:28 % Monocytes:04 % Eosinophils:03 % Basophils:00 %
PLATELET	Adequate on smear.
HEMOPARASITE	No parasite seen.

Result relates to sample tested, Kindly correlate with clinical findings.
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LIVER FUNCTION TEST

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
TOTAL BILLIRUBIN (Method-Diazo)	0.42	mg/dL	0.0 - 2.0
DIRECT BILLIRUBIN (Method-Diazo)	0.15	mg/dL	0.0 - 0.4
INDIRECT BILLIRUBIN Calculated	0.27	mg/dL	0 - 0.8
SGOT(AST) (UV without PSP)	21.9	U/L	0 - 37
SGPT(ALT) UV Kinetic Without PLP (P-L-P)	34.9	U/L	UP to 40
ALKALINE PHOSPHATASE (Method-ALP-AMP)	100.0	U/L	53 - 128
S. PROTIEN (Method-Biuret)	7.1	g/dl	6.4 - 8.3
S. ALBUMIN (Method-BCG)	4.23	g/dl	3.5 - 5.2
S. GLOBULIN Calculated	2.87	g/dl	1.90 - 3.50
A/G RATIO Calculated	1.47		0 - 2

Result relates to sample tested, Kindly correlate with clinical findings.

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* 1 8 0 4 4 7 *

HAEMATOLOGY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
ESR			
ESR	45	mm/1hr.	0 - 20

METHOD - WESTERGREIN

Result relates to sample tested, Kindly correlate with clinical findings.

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BIOCHEMISTRY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
*S.ALKALINE PHOSPHATASE	100.0	U/L	53 - 128

Method: PNP AMP KINETIC

GLYCOCELATED HEMOGLOBIN (HBA1C)

HBA1C (GLYCOSALATED HAEMOGLOBIN)	11.0	%	Hb A1c > 8 Action suggested < 7 Goal < 6 Non - diabetic level
AVERAGE BLOOD GLUCOSE (A. B. G.)	269.0	mg/dL	NON - DIABETIC : <=5.6 PRE - DIABETIC : 5.7 - 6.4 DIABETIC : >6.5

METHOD Particle Enhanced Immunturbidimetry

HbA1c : Glycosylated hemoglobin concentration is dependent on the average blood glucose concentration which is formed progressively and irreversibly over a period of time and is stable till the life of the RBC/erythrocytes. Average Blood Glucose (A.B.G) is calculated value from HbA1c : Glycosylated hemoglobin concentration in whole Blood. It indicates average blood sugar level over past three months.

GAMMA GT	85.8	U/L	13 - 109
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BLOOD GLUCOSE FASTING & PP

BLOOD GLUCOSE FASTING	264.7	mg/dL	70 - 110
URINE GLUCOSE FASTING			
BLOOD GLUCOSE PP	349.0	mg/dL	70 - 140

Method (GOD-POD). DONE ON FULLY AUTOMATED ANALYSER (EM200).

1. Fasting is required (Except for water) for 8-10 hours before collection for fasting specimen. Last dinner should consist of bland diet.
2. Don't take insulin or oral hypoglycemic agent until after fasting blood sample has been drawn

Checked By
Priyanka_Deshmukh

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Consultant Histocytopathologist





Name : Mr. SAMIR KUMAR (A) Collected On : 13/1/2024 10:05 am
Lab ID. : 180447 Received On : 13/1/2024 10:15 am
Age/Sex : 39 Years / Male Reported On : 15/1/2024 1:26 pm
Ref By : SIDDHIVINAYAK HOSPITAL CGHS /ESIS Report Status : FINAL



BIOCHEMISTRY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
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INTERPRETATION

- Normal glucose tolerance : 70-110 mg/dl
- Impaired Fasting glucose (IFG) : 110-125 mg/dl
- Diabetes mellitus : ≥ 126 mg/dl

POSTPRANDIAL/POST GLUCOSE (75 grams)

- Normal glucose tolerance : 70-139 mg/dl
- Impaired glucose tolerance : 140-199 mg/dl
- Diabetes mellitus : ≥ 200 mg/dl

CRITERIA FOR DIAGNOSIS OF DIABETES MELLITUS

- Fasting plasma glucose ≥ 126 mg/dl
- Classical symptoms + Random plasma glucose ≥ 200 mg/dl
- Plasma glucose ≥ 200 mg/dl (2 hrs after 75 grams of glucose)
- Glycosylated haemoglobin $> 6.5\%$

***Any positive criteria should be tested on subsequent day with same or other criteria.

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

Checked By
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* 1 8 0 4 4 7 *

REPORT ON IMMUNOLOGY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
PSA (PROSTATE SPECIFIC ANTIGEN)(TOTAL) (CLIA)	0.536	ng/ml	0 - 4

INTERPRETATION:

Increased levels are noted in prostate cancer, benign prostatic hypertrophy, prostatitis

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

Checked By
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