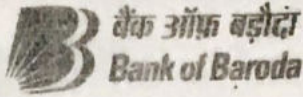


1 Ver



नाम उमेश कुमार भगत
Name : **UMESH KUMAR BHAGAT**
कार्यकारी कुट. क्र. १७२८२४
E. C. No. **172834**



[Signature]
जारीकर्ता अधिकारी

[Signature]
कारक के प्रस्तापक

U.K.B

K.Z.

दिखने पर निम्नलिखित को संकेत
सहायक सहायक (सुरक्षा), बैंक ऑफ़ बड़ौदा, राष्ट्रीय पोस्टल बेंच
ब्लॉक - 26, बॉम्बे रोड, बंधुवा कॉम्प्लेक्स, बंधुवा (पुणे), गुजरात; 400 051, भारत
फोन: 91 22 6698 5196, फैक्स: 91 22 2652 5747

If Found, Please return to:
Asst. General Manager (Security), Bank of Baroda, Baroda Corporate Centre
C-26, G Block, Bandra-Kurla Complex, Mumbai 400 051, India
Phone:- 91 22 6698 5196 Fax: 91 22 2652 5747

वर्षित कर लेना या गुप्तता दिखने पर तुरंत सूचना देना।
Name & Ph./Person of emergency contact: **PRIYANKA BHAGAT**
8240560422

रक्त समूह/Blood Group **B+** एलर्जी/Allergy **NIL**

चिह्न/Identification mark
NIL

जारीकर्ता कार्यालय/Issuing office
BOB, KOLKATA ZONE, Plot No 38/2, Block - GN, Sector-V, Salt Lake City, Kolkata - 700051

A Venture of Apple Cardiac Care

A-3, Ekta Nagar, Stadium Road,
(Opp. Care Hospital),
Bareilly - 243 122 (U.P.) India
Tel. : 07599031977, 09458888448



APPLE
PATHOLOGY
TRUSTED RESULT

Reg.NO. : 430
NAME : **Mr. UMESH KUMAR BHAGAT**
REFERRED BY : Dr.Nitin Agarwal (D M)
SAMPLE : BLOOD

DATE : **24/09/2022**
AGE : 36 Yrs.
SEX : MALE

<u>TEST NAME</u>	<u>RESULTS</u>	<u>UNITS</u>	<u>BIOLOGICAL REF. RANGE</u>
HAEMATOLOGY			
COMPLETE BLOOD COUNT (CBC)			
HAEMOGLOBIN	13.4	gm/dl	12.0-18.0
TOTAL LEUCOCYTE COUNT	7,300	/cumm	4,000-11,000
DIFFERENTIAL LEUCOCYTE COUNT(DLC)			
Neutrophils	66	%	40-75
Lymphocytes	32	%	20-45
Eosinophils	02	%	01-08
TOTAL R.B.C. COUNT	4.90	million/cumm	3.5-6.5
P.C.V./ Haematocrit value	41.6	%	35-54
M C V	84.9	fL	76-96
M C H	27.3	pg	27.00-32.00
M C H C	32.2	g/dl	30.50-34.50
PLATELET COUNT	2.51	lacs/mm ³	1.50 - 4.50
E.S.R. (Westergren Method)	15	mm/1st hr.	0 - 20
BIOCHEMISTRY			
BLOOD SUGAR F.	86	mg/dl	60-100

HAEMATOLOGY

Reg.NO. : 430
NAME : **Mr. UMESH KUMAR BHAGAT**
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DATE : **24/09/2022**
AGE : 36 Yrs.
SEX : MALE

TEST NAME	RESULTS	UNITS	BIOLOGICAL REF. RANGE
GLYCOSYLATED HAEMOGLOBIN	5.6		

EXPECTED RESULTS :

Non diabetic patients : 4.0% to 6.0%
Good Control : 6.0% to 7.0%
Fair Control : 7.0% to -8%
Poor Control : Above 8%

***ADA: American Diabetes Association**

The glycosylated hemoglobin assay has been validated as a reliable indicator of mean blood glucose levels for a period of 8-12 week period prior to HBA1C determination. ADA recommends the testing twice a year in patients with stable blood glucose, and quarterly, if treatment changes, or if blood glucose levels are unstable.

METHOD : ADVANCED IMMUNO ASSAY.

BIOCHEMISTRY

BLOOD UREA	29	mg/dL.	10-40
------------	----	--------	-------

* Low serum urea is usually associated with status of overhydration severe hepatic failure.

* A urea level of 10-45 mg/dl indicates normal glomerular function and a level of 100-250 mg/dl indicates a serious imparement of renal function. In chronic renal failure , urea correlates better with the symptoms of uremia than does serum creatinine.

* Urine/Serum urea is more than 9 in prerenal and less than 3 in renal uremia.

SERUM CREATININE	0.9	mg/dL.	0.5-1.4
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URIC ACID	7.9	mg/dl	0-8
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CLINICAL SIGNIFICANCE:

Analysis of synovial fluid plays a major role in the diagnosis of joint disease.

are of Apple Cardiac Care

Ekta Nagar, Stadium Road,
 App. Care Hospital),
 Bareilly - 243 122 (U.P.) India
 Tel. : 07599031977, 09458888448



APPLE
PATHOLOGY
 TRUSTED RESULT

Reg.NO. : 430
 NAME : **Mr. UMESH KUMAR BHAGAT**
 REFERRED BY : Dr.Nitin Agarwal (D M)
 SAMPLE : BLOOD

DATE : **24/09/2022**
 AGE : 36 Yrs.
 SEX : MALE

<u>TEST NAME</u>	<u>RESULTS</u>	<u>UNITS</u>	<u>BIOLOGICAL REF. RANGE</u>
SERUM SODIUM (Na)	136	m Eq/litre.	135 - 155
SERUM POTASSIUM (K)	4.5	m Eq/litre.	3.5 - 5.5
SERUM CALCIUM	9.8	mg/dl	8.5 - 10.5
LIVER PROFILE			
SERUM BILIRUBIN			
TOTAL	0.8	mg/dL	0.3-1.2
DIRECT	0.4	mg/dL	0.2-0.6
INDIRECT	0.4	mg/dL	0.1-0.4
SERUM PROTEINS			
Total Proteins	7.4	Gm/dL	6.4 - 8.3
Albumin	4.7	Gm/dL	3.5 - 5.5
Globulin	2.7	Gm/dL	2.3 - 3.5
A : G Ratio	1.74		0.0-2.0
SGOT	32	IU/L	0-40
SGPT	27	IU/L	0-40
SERUM ALK.PHOSPHATASE	76	IU/L	00-115

NORMAL RANGE : BILIRUBIN TOTAL

Premature infants. 0 to 1 day: <8 mg/dL Premature infants. 1 to 2 days: <12 mg/dL Adults: 0.3-1 mg/dL.
 Premature infants. 3 to 5 days: <16 mg/dL Neonates, 0 to 1 day: 1.4-8.7 mg/dL
 Neonates, 1 to 2 days: 3.4-11.5 mg/dL Neonates, 3 to 5 days: 1.5-12 mg/dL Children 6 days to 18 years: 0.3-1.2 mg/dL

COMMENTS-

Total and direct bilirubin determination in serum is used for the diagnosis, differentiation and follow -up of jaundice. Elevation of SGPT is found in liver and kidney diseases such as infectious or toxic hepatitis, IM and cirrhosis. Organs rich in SGOT are heart, liver and skeletal muscles. When any of these organs are damaged, the serum SGOT level rises in proportion to the severity of damage. Elevation of Alkaline Phosphatase in serum or plasma is found in hepatitis, biliary obstructions, hyperparathyroidism, steatorrhea and bone diseases.

Reg.NO. : 430	DATE : 24/09/2022
NAME : Mr. UMESH KUMAR BHAGAT	AGE : 36 Yrs.
REFERRED BY : Dr.Nitin Agarwal (D M)	SEX : MALE
SAMPLE : BLOOD	

<u>TEST NAME</u>	<u>RESULTS</u>	<u>UNITS</u>	<u>BIOLOGICAL REF. RANGE</u>
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BIOCHEMISTRY			
LIPID PROFILE			
SERUM CHOLESTEROL	196	mg/dL.	130 - 200
SERUM TRIGLYCERIDE	335	mg/dl.	30 - 160
HDL CHOLESTEROL	38	mg/dL.	30-70
VLDL CHOLESTEROL	67	mg/dL.	15 - 40
LDL CHOLESTEROL	91	mg/dL.	00-130
CHOL/HDL CHOLESTEROL RATIO	5.16	mg/dl	
LDL/HDL CHOLESTEROL RATIO	2.39	mg/dl	

INTERPRETATION
 TRIGLYCERIDE level > 250mg/dL is associated with an approximately 2-fold greater risk of coronary vascular disease. Elevation of triglycerides can be seen with obesity, medication, fast less than 12 hrs., alcohol intake, diabetes melitus, and pancreatitis.
 CHOLESTEROL, its fractions and triglycerides are the important plasma lipids in defining cardiovascular risk factors and in the management of cardiovascular disease. Highest acceptable and optimum values of cholesterol values of cholesterol vary with age. Values above 220 mgm/dl are associated with increased risk of CHD regardless of HDL & LDL values.
 HDL-CHOLESTEROL level <35 mg/dL is associated with an increased risk of coronary vascular disease even in the face of desirable levels of cholesterol and LDL - cholesterol.
 LDL - CHOLESTEROL & TOTAL CHOLESTEROL levels can be strikingly altered by thyroid, renal and liver disease as well as hereditary factors. Based on total cholesterol, LDL- cholesterol, and total cholesterol/HDL - cholesterol ratio, patients may be divided into the three risk categories.

HAEMATOLOGY	
BLOOD GROUP	
Blood Group	B
Rh	POSITIVE

BIOCHEMISTRY			
Gamma Glutamyl Transferase (GGT)	26	U/L	7-32

Reg.NO. : 430
 NAME : **Mr. UMESH KUMAR BHAGAT**
 REFERRED BY : Dr.Nitin Agarwal (D M)
 SAMPLE : BLOOD

DATE : **24/09/2022**
 AGE : 36 Yrs.
 SEX : MALE

<u>TEST NAME</u>	<u>RESULTS</u>	<u>UNITS</u>	<u>BIOLOGICAL REF. RANGE</u>
URINE EXAMINATION REPORT			
PHYSICAL EXAMINATION			
TRANSPARENCY			
Volume	25	ml	
Colour	Light Yellow		
Appearance	Clear		Nil
Odour	NIL		
Sediments	Nil		
Specific Gravity	1.015		1.015-1.025
Reaction	NIL		
BIOCHEMICAL EXAMINATION			
UROBILINOGEN	Nil		NIL
BILIRUBIN	Nil		NEGATIVE
URINE KETONE	Nil		NEGATIVE
Sugar	Nil		Nil
Albumin	Nil		Nil
Phosphates	NIL		Nil
MICROSCOPIC EXAMINATION			
Red Blood Cells	Nil	/H.P.F.	
Pus Cells	3-5	/H.P.F.	
Epithelial Cells	1-2	/H.P.F.	
Crystals	NIL		NIL
Casts	Nil	/H.P.F.	
DEPOSITS	NIL		

Reg.NO. : 430
NAME : **Mr. UMESH KUMAR BHAGAT**
REFERRED BY : Dr.Nitin Agarwal (D M)
SAMPLE : BLOOD

DATE : **24/09/2022**
AGE : 36 Yrs.
SEX : MALE

<u>TEST NAME</u>	<u>RESULTS</u>	<u>UNITS</u>	<u>BIOLOGICAL REF. RANGE</u>
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Shweta

--{End of Report}--

Dr. Shweta Agarwal, M.D.
(Pathologist)

A Venture of Apple Cardiac Care

A-3, Ekta Nagar, Stadium Road,
(Opp. Care Hospital),
Bareilly - 243 122 (U.P.) India
Tel. : 07599031977, 09458888448



APPLE
PATHOLOGY
TRUSTED RESULT

Reg.NO. : 430
NAME : **Mr. UMESH KUMAR BHAGAT**
REFERRED BY : Dr.Nitin Agarwal (D M)
SAMPLE : BLOOD

DATE : **24/09/2022**
AGE : 36 Yrs.
SEX : MALE

<u>TEST NAME</u>	<u>RESULTS</u>	<u>UNITS</u>	<u>BIOLOGICAL REF. RANGE</u>
	BIOCHEMISTRY		
BLOOD SUGAR. P.P.	102	mg/dl	80-140

--{End of Report}--

Shweta

Dr. Shweta Agarwal, M.D.
(Pathologist)

Dr. Nitin Agarwal

MD, DM (Cardiology)

Consultant Interventional Cardiologist

Cell : +91-94578 33777

Formerly at :

Escorts Heart Institute & Research Centre, Delhi

Dr. Ram Manohar Lohia Hospital, Delhi



**APPLE
CARDIAC CARE**

DR. NITIN AGARWAL'S HEART CLINIC

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Sp. Surgery (F)
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A-3, EKTA NAGAR, (OPP. CARE HOSPITAL) STADIUM ROAD, NEAR DELAPEER CHAURAHA, BAREILLY - 243 122 (U.P.)

OPD Timings : 12.00 Noon to 04.00 pm, **Sunday** : 12.00 Noon to 3.00 pm

नम्बर लगाने के लिए फोन करें : 09458888448, 07599031977

VALID FOR 5 DAYS.

पर्चा पाँच दिन के लिये मान्य

PatientID 0005

ExamID 3586

NAME Omesh Kumar V 34/M

Date 09/24/2022

Time 11:10

ExamTime 20:57

(VD = 13.75 mm)

----- MANIFEST -----

	SPH	CYL	AXS
<R>	-1.75	0.00	180
<L>	-1.75	0.00	180
<FAR VA>			
	R	R+L	L

----- RM DATA -----

	SPH	CYL	AXS
<R>	-2.00	-0.25	174
<L>	-2.50	-0.25	25
<FAR VA>			
	R	R+L	L

FAR PD = 67.0 mm

TOPCON CV-5000

Umesh Kumar 34/M

eglam

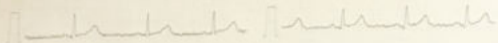
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$NVA_{\pi} \left\{ \begin{array}{l} 6 \\ 6 \end{array} \right.$ $\left\{ \begin{array}{l} 6 \\ 6 \end{array} \right.$ $\left\{ \begin{array}{l} \\ \end{array} \right.$ $\left\{ \begin{array}{l} 6 \\ 6 \end{array} \right.$

10mm/mV 25mm/sec 25Hz

BPL CARDIART 6100T

II



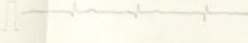
PAT. ID..... UMESH KOMAR SWAGAT

mylogix

10mm/mV 25mm/sec 25Hz

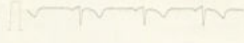
BPL CARDIART 6100T

III



PAT. ID.....

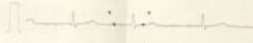
aVR



10mm/mV 25mm/sec 25Hz

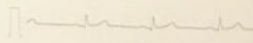
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aVL



PAT. ID.....

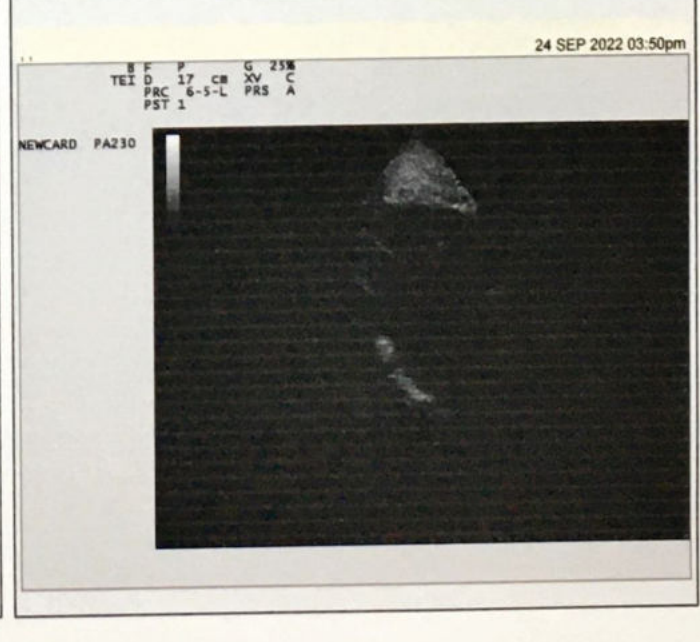
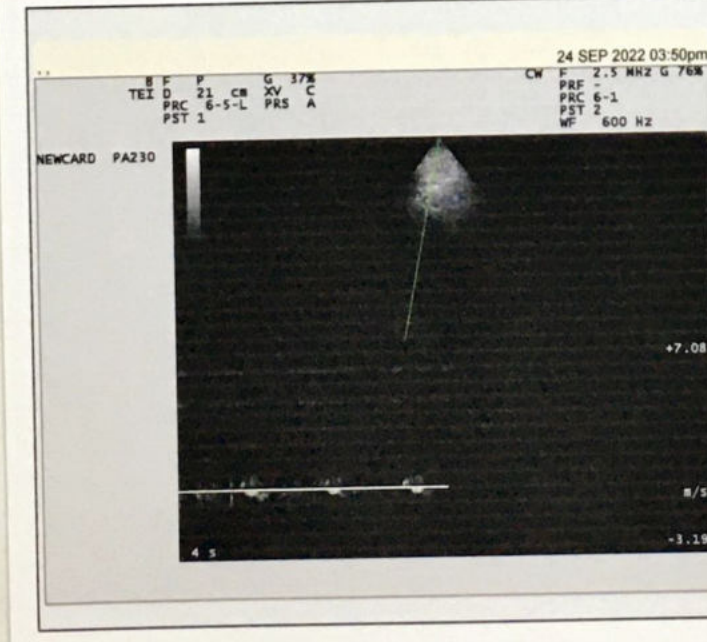
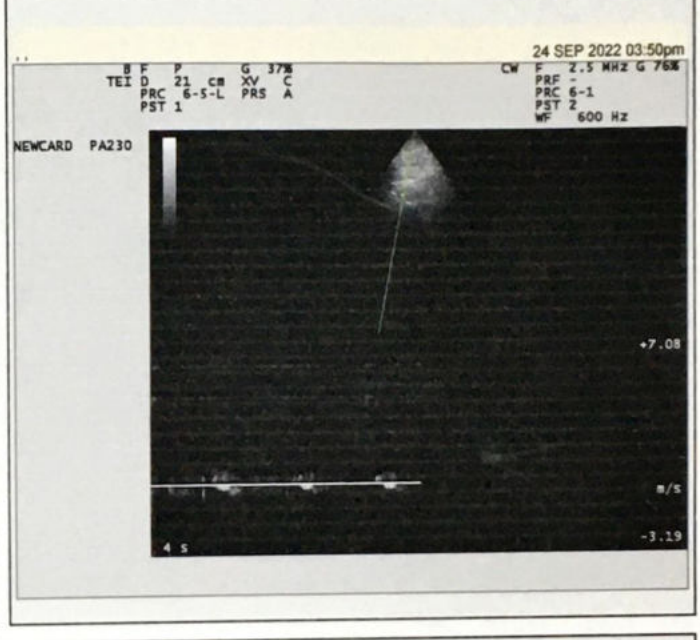
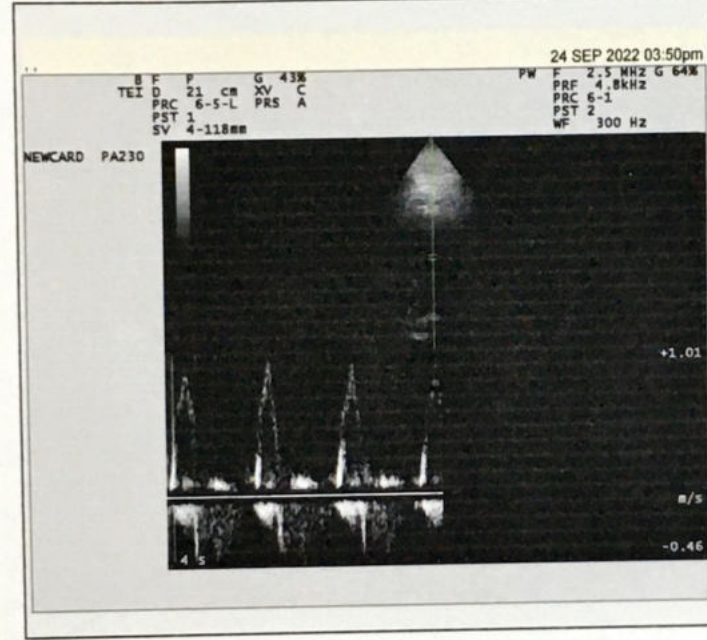
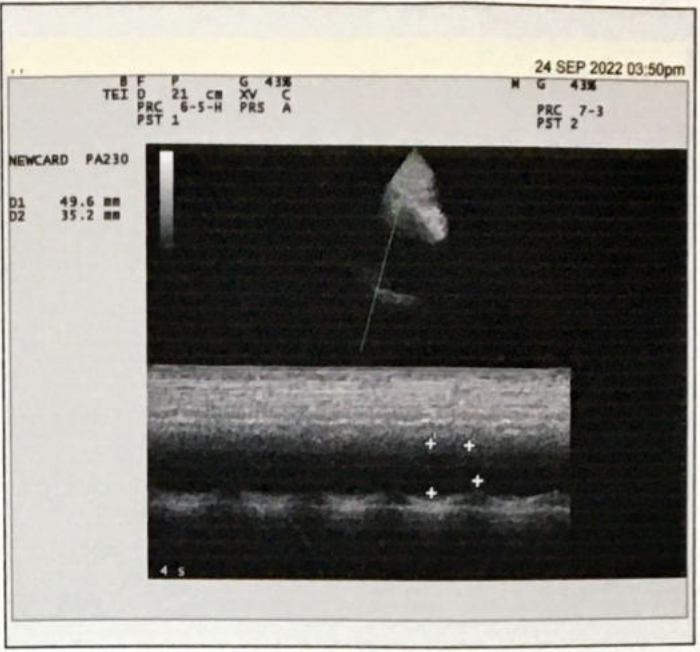
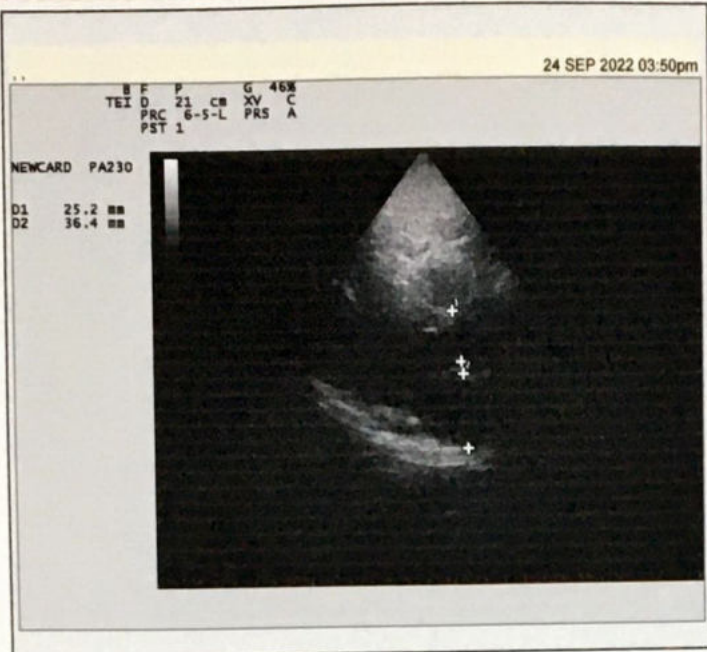
aVF





APPLE CARDIAC CARE, BAREILLY

saote MyLab



NAME	Mr. UMESH CHANDRA BHAGAT	AGE/SEX	34 Y/M
Ref. By	Dr. NITIN AGARWAL (DM)	DATE	24/09/2022

ECHOCARDIOGRAPHY AND COLOUR DOPPLER STUDY

<u>MEASUREMENTS</u>	<u>VALUE</u>	<u>NORMAL DIMENSIONS</u>
LVID (d)	4.6	cm (3.7 –5.6 cm)
LVID (s)	2.5	cm (2.2 –3.9 cm)
RVID (d)	2.4	cm (0.7 –2.5 cm)
IVS (ed)	1.0	cm (0.6 –1.1 cm)
LVPW (ed)	1.0	cm (0.6 –1.1 cm)
AO	2.2	cm (2.2 –3.7 cm)
LA	2.9	cm (1.9 –4.0 cm)
<u>LV FUNCTION</u>		
EF	60	% (54 –76 %)
FS	30	% (25 –44 %)

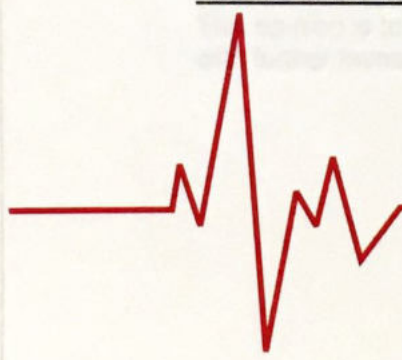
LEFT VENTRICLE : No regional wall motion abnormality
 No concentric left Ventricle Hypertrophy

MITRAL VALVE : Thin, PML moves posteriorly during Diastole
 No SAM, No Subvalvular pathology seen.
 No mitral valve prolapse calcification .

TRICUSPID VALVE : Thin, opening wells. No calcification, No doming .
 No Prolapse.
 Tricuspid inflow velocity= 0.7 m/sec

AORTIC VALVE : Thin, tricuspid, opening well, central closer,
 no flutter.
 No calcification
 Aortic velocity = 1.3 m/sec

PULMONARY VALVE : Thin, opening well, Pulmonary artery is normal
 EF slope is normal.
 Pulmonary Velocity = 0.9 m /sec



ON DOPPLER INTERROGATION THERE WAS :

- No mitral regurgitation
- No tricuspid regurgitation
- No aortic regurgitation
- No pulmonary regurgitation

MITRAL FLOW E= 0.8 m/sec A= 0.6 m/sec

ON COLOUR FLOW:

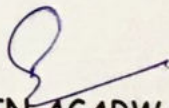
- No mitral regurgitation
- No tricuspid regurgitation
- No aortic regurgitation
- No pulmonary regurgitation

COMMENTS:

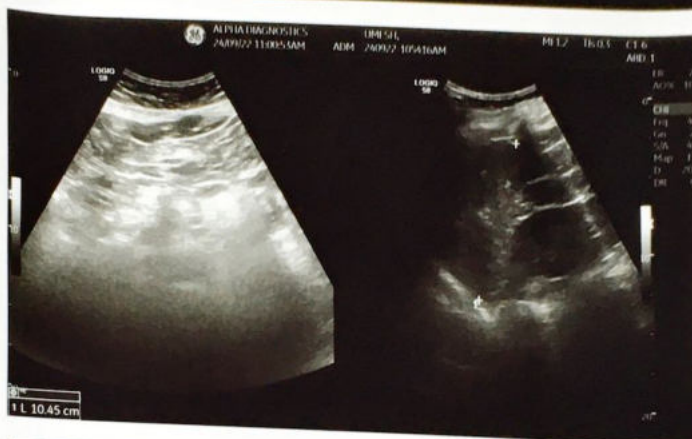
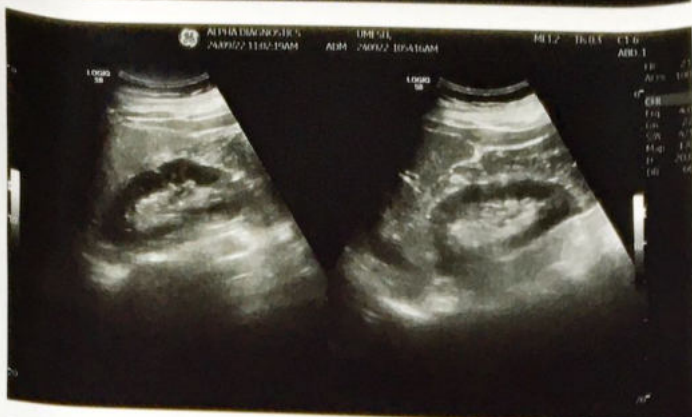
- No LA /LV clot
- No pericardial effusion
- No intracardiac mass
- IAS/IVS Intact
- Inferior vena cava – normal in size with normal respiratory variation

FINAL IMPRESSION

- NO REGIONAL WALL MOTION ABNORMALITY
- NORMAL LV DIASTOLIC FUNCTION
- NORMAL LV SYSTOLIC FUNCTION (LVEF~60%)
- NORMAL CARDIAC CHAMBER DIMENSIONS
- NORMAL VALVULAR COLOUR FLOW PATTERN


DR. NITIN AGARWAL
DM (Cardiology)
Consultant Cardiologist

This opinion is to be correlated with the clinically findings and if required, please re-evaluate / reconfirm with further investigation.





ALPHA

DIAGNOSTICS

115-D, Gulmohar Park, Near Delapeer
Talaab, Rajendra Nagar, Bareilly (U.P.)
+91 7642912345, 7642812345, 0581-4015223
contact@alphadiagnostic.in,
alphadiagnostic07@gmail.com
www.alphadiagnostic.in



Patient ID 102212595
Name Mr. UMESH KUMAR BHAGAT
Sex/Age Male 34 Yrs
Ref. By Dr. NITIN AGARWAL

Reg. Date 24/09/2022 10:07:05
Reported On 24/09/2022 11:07:18

USG WHOLE ABDOMEN

Liver - is normal in size with diffuse fatty changes obscuring visualization of posterior region. No IHBRD / focal SOL is seen. PV - normal. Porta hepatis - normal.

Gall bladder - Normal physiological distension. No calculus in lumen. Wall thickness is normal. CBD - normal.

Pancreas - is normal in thickness and echotexture. Pancreatic duct is not dilated. No evidence of pancreatic calcification.

Spleen - is normal in size and normal echotexture.

Both kidneys - normal in size, outline and cortical echotexture. Renal parenchymal width is normal. Corticomedullary definition is normal. No backpressure changes are seen. Perinephric spaces are normal.

Urinary bladder - No calculus is seen in the lumen. Wall is smooth and regular.

Prostate - Size is normal (16cc), parenchyma is homogeneous.

No free fluid is seen in peritoneal cavity.

IMPRESSION:

- **GRADE II FATTY LIVER.**

ADV - PLEASE CORRELATE CLINICALLY.

*** End of Report ***



DR KAMAL NAYAN GANGEY
DNB RADIODIAGNOSIS

Page No: 1 of 1



■ CT Scan(96 Slice) ■ 2D-Echo ■ Serology ■ Histopathology ■ Semen Wash For IUI
■ 4D Ultrasound ■ Spirometry ■ Biochemistry ■ Microbiology ■ Complete Hematology
■ Colour Doppler ■ Digital X-Ray ■ Cytology ■ Video Bronchoscopy ■ PCR For Covid-19 (Truenat)



Patient ID 102212596
Name Mr. UMESH KUMAR BHAGAT
Sex/Age Male 34 Yrs
Ref. By Dr. NITIN AGARWAL

Reg. Date 24/09/2022 10:08:16

Reported On 24/09/2022 10:51:19

X-RAY CHEST PA VIEW

Trachea is central in position.
Bony cage is normal.
Both hila are normal.
No definite evidence of pleuro pulmonary pathology
Both CP angles are clear.
Cardio - thoracic-ratio is within normal limit.
Both diaphragms are normal in position and contour.

ADV - PLEASE CORRELATE CLINICALLY.

*** End of Report ***



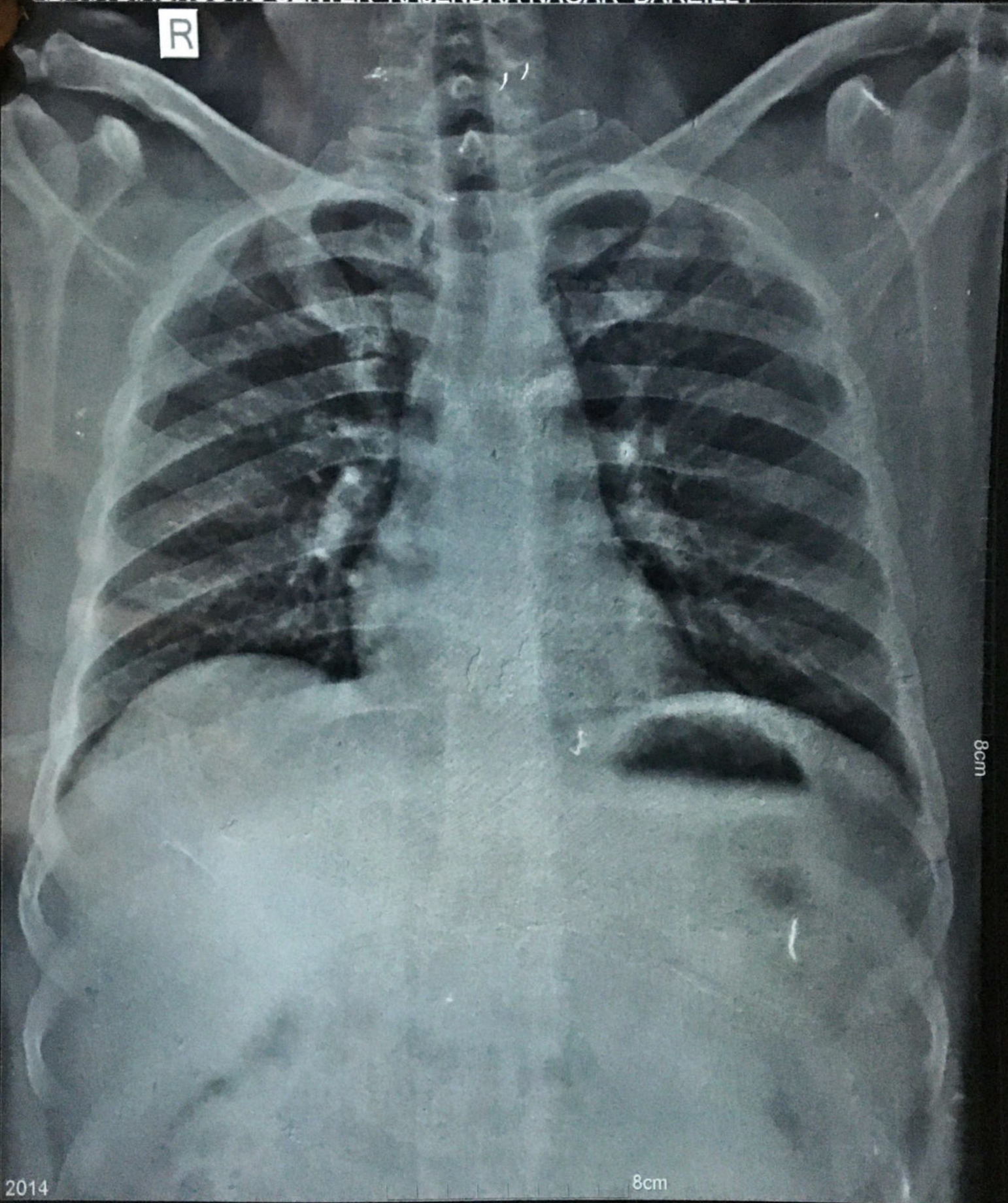
DR KAMAL NAYAN GANGEY

DNB RADIODIAGNOSIS

Page No. 1 of 1



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8cm

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8cm