

Patient Name Mohojati's Mansori MRN : 161723 Age 58 Sex M Date/Time 12/02/24

Mob No.

Investigations : (Please Tick)

- CBC
- ESR
- CRP
- S-Vit D3
- S-Vit B12
- RBS
- B Sugar - F/PP
- HbA1C
- LFT/KFT
- PT
- INR
- RA Factor
- Anti CCP
- HLA B27
- ANA
- HIV
- HBsAg
- Anti HCV

- HbA1C
- Physician reference

Vitals

- B.P.
- P.R.
- SPO2
- Te

Medical Illness

- Hypertension
- Diabetes
- Thyroid
- Cardiac Disease
- Drug Allergies

Next Appointment/Follow up

Signature :

Dr. Bhawna Garg
MBBS, DIP.GO, PGDHA
MEDICAL CO ORDINATOR
RJN Apollo Spectra Hospital
Reg.No. MP18035

Patient NAME : Mr. MOHD JAKIR MANSURI
Age/Gender : 38 Y 0 M 0 D /M
UHID/MR NO : ILK.00037952
Visit ID : ILK.111578
Ref Doctor : Dr.ARCOFEMI HEALTHCARE LIMITED

Collected : 12/Feb/2024 10:04AM
Received : 12/Feb/2024 10:22AM
Reported : 12/Feb/2024 12:29PM
Status : Final Report
Client Name : INSTA

DEPARTMENT OF HEMATOLOGY

COMPLETE BLOOD COUNT- CBC / HAEMOGRAM , WHOLE BLOOD EDTA

Haemoglobin (Hb%)	14.9	gm%	14.0-17.0	Cyanmeth
P.C.V (Hematocrit)	45.0	%	40-54	Cell Counter
RBC Count	5.5	Mill./cu mm	4.00-5.50	Cell Counter
Mean Corpuscular Volume(MCV)	82.4	fL	76-96	Calculated
Mean Corpuscular Hb. (MCH)	27.3	pg	27.0-32.0	Calculated
Mean Corp. Hb. Conc.(MCHC)	33.2	g/dl	30.0-35.0	Calculated
RDW	13.3	%	11-16	Calculated
Total WBC count (TLC)	8,500	/cu mm	4000-11000	Cell Counter

Differential Count by Flowcytometry/Microscopy

Neutrophils	67.0	%	50-70	Cell Counter
Lymphocytes	21.3	%	20-40	
Monocytes	8.2	%	01-10	Cell Counter
Eosinophils	2.6	%	01-06	Cell Counter
Basophils	0.9	%	00-01	Cell Counter

Absolute Leucocyte Count

Neutrophil (Abs.)	5,718	per cumm	2000 - 8000	Calculated
Lymphocyte (Abs.)	1814	per cumm	600-4000	Calculated
Monocyte (Abs.)	698	per cumm	0-600	Calculated
Eosinophil (Abs.)	226	per cumm	40-440	Calculated
Basophils (Abs.)	77	per cumm	0-110	Calculated
Platelet Count	1.80	Lac/cmm	1.50-4.00	Cell Counter

ERYTHROCYTE SEDIMENTATION RATE (ESR)

Erythrocyte Sedimentation Rate (ESR)	4	mm 1st hr.	0-20	Wester Green
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SIN NO : 10436525,

(Signature)

DR. ASHOK KUMAR
M.D. (PATH)

Patient NAME : Mr. MOHD JAKIR MANSURI	Collected : 12/Feb/2024 10:04AM
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DEPARTMENT OF HEMATOLOGY

BLOOD GROUPING(A,B,O) AND RH FACTOR , WHOLE BLOOD EDTA

Blood Grouping	O			Slide/Tube Agglutination
Rh (D) Type	POSITIVE			Slide/Tube Agglutination

BLOOD PICTURE - PERIPHERAL SMEAR EXAMINATION , WHOLE BLOOD EDTA

RBC'S : Normocytic Normochromic RBC's.
 No cytoplasmic inclusions or hemoparasite seen.

WBC'S : Normal in number , morphology and distribution. No toxic granules seen.
 No abnormal cell seen.

PLATELETS : Adequate on smear .

IMPRESSION ; NORMOCYTIC NORMOCHROMIC BLOOD PICTURE.



SIN NO :10436525,

A.K. Fejora

DR. ASHOK KUMAR
M.D. (PATH)

Patient NAME : Mr. MOHD JAKIR MANSURI	Collected : 12/Feb/2024 10:04AM
Age/Gender : 38 Y 0 M 0 D /M	Received : 12/Feb/2024 10:22AM
UHID/MR NO : ILK.00037952	Reported : 12/Feb/2024 12:18PM
Visit ID : ILK.111578	Status : Final Report
Ref Doctor : Dr.ARCOFEMI HEALTHCARE LIMITED	Client Name : INSTA

DEPARTMENT OF BIOCHEMISTRY-ROUTINE

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE - FASTING (FBS) , NAF PLASMA

Fasting Glucose	89.0	mg/dL	65-110	God - Pod
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Ref.for Biological Reference Intervals: American Diabetic Assiosation.

GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) , FLUORIDE PLASMA

Post Prandial Glucose	99.0	mg/dL	90-140	2hrs. after...gm glucose/lunch
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Ref.for Biological Reference Intervals: American Diabetic Assiosation.



SIN NO : 10436525,

A.K. Rajong

DR. ASHOK KUMAR
M.D. (PATH)

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DEPARTMENT OF BIOCHEMISTRY-ROUTINE

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

GLYCOSYLATED HAEMOGLOBIN (GHB/HBA1C) , WHOLE BLOOD EDTA

Glycosylated Haemoglobin HbA1c	6.0	%	Normal: <5.7 Pre-Diabetes: 5.7-6.4 Diabetes: 6.5	NEPHELOMETRY
Approximate mean plasma glucose	124.35			Calculated

Ref.for Biological Reference Intervals: American Diabetes Association.

INTERPRETATION:

The A1C test measures your average blood glucose for the past 2 to 3 months. Diabetes is diagnosed at an A1C of greater than or equal to 6.5%.

Therapeutic goals for glycemic control (ADA)

-Adults:

- Goal of therapy: <7.0% HbA1c
- Action suggested: >8.0% HbA1c

-Pediatric patients:

- Toddlers and preschoolers: <8.5% (but >7.5%)
- School age (6-12 years): <8%
- Adolescents and young adults (13-19 years): <7.5%



SIN NO : 10436525,

(Signature)

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M.D. (PATH)

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UHID/MR NO : ILK.00037952
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DEPARTMENT OF BIOCHEMISTRY-ROUTINE

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

COMPLETE KIDNEY PROFILE (RFT/KFT) , SERUM

Urea	17.98	mg/dL	13.0-43.0	Urease
Creatinine	0.7	mg/dL	0.5-1.3	Enzymatic
Uric Acid	5.9	mg/dL	3.5-7.2	Urease
Sodium	133.0	Meq/L	135-155	Direct ISE
Potassium	4.1	Meq/L	3.5-5.5	Direct ISE
Chloride	100.0	mmol/L	96-106	Direct ISE
Calcium	9.4	mg/dL	8.6-10.0	OCPC
Phosphorous	4.6	mg/dL	2.5-5.6	PMA Phenol
BUN	8.4	mg/dL	6.0-20.0	Reflect Spectrothoto



A.K. Rajan

DR. ASHOK KUMAR
M.D. (PATH)

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Visit ID : ILK.111578	Status : Final Report
Ref Doctor : Dr.ARCOFEMI HEALTHCARE LIMITED	Client Name : INSTA

DEPARTMENT OF BIOCHEMISTRY-ROUTINE

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

LIPID PROFILE , SERUM

Type OF Sample	SERUM			
Total Cholesterol	114.0	mg/dl	up to 200	End Point
Total Triglycerides	65.0	mg/dL	Borderline High Risk : 150-199 High Risk: 200-499 Very High Risk: >500	End Point
HDL Cholesterol	48.0	mg/dL	Optimal: >55 Border Line High Risk: 35-55 High Risk:- <35	Reflect Spectrothoto
Non - HDL Cholesterol	66	mg/dL	<130	
LDL Cholesterol	53	mg/dL	49-172	Reflect Spectrothoto
VLDL Cholesterol	13	mg/dL	5.0-40.0	Reflect Spectrothoto
Chol / HDL Ratio	2.38		Low Risk : 3.3-4.4 Average Risk : 4.5-7.1 Moderate Risk : 7.2-11.0 High Risk : >11.0	CALCULATED

Page 6 of 9



SIN NO :10436525,

A.K. Rajong

DR. ASHOK KUMAR
M.D. (PATH)

RJN Apollo Spectra Hospitals

18, Vikas Nagar, Near Sai Baba Temple, Gwalior - 474009 (M.P.) Ph.: 0751-2454600, Mob. : 8269663137, Email: ipc.rjn@gmail.com

• Results may vary from lab to lab and from time to time for the same parameter for the same patient • Assays are performed in accordance with standard procedures.
• In case of disparity test may be repeated immediately. • This report is not valid for medico legal purpose.

Patient NAME : Mr. MOHD JAKIR MANSURI
Age/Gender : 38 Y 0 M 0 D /M
UHID/MR NO : ILK.00037952
Visit ID : ILK.111578
Ref Doctor : Dr.ARCOFEMI HEALTHCARE LIMITED

Collected : 12/Feb/2024 10:04AM
Received : 12/Feb/2024 10:22AM
Reported : 12/Feb/2024 12:18PM
Status : Final Report
Client Name : INSTA

DEPARTMENT OF BIOCHEMISTRY-ROUTINE

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

LIVER FUNCTION TEST (LFT) , SERUM

Total Bilirubin	0.5	mg/dL	0.2-1.2	Jendrassik-Grof
Direct Bilirubin	0.1	mg/dL	0.0-0.3	Jendrassik-Grof
Indirect Bilirubin	0.4	mg/dL	0.0-0.9	Calculated
SGOT / AST	39.0	U/L	1-30	UV Kinetic (IFCC)
SGPT / ALT	47.0	U/L	1-45	UV Kinetic (IFCC)
Alkaline Phosphatase	65.0	U/L	43-115	PNPP
Total Protein	7.5	g/dl	6.4-8.3	Biuret
Albumin	4.8	g/dL	3.5-5.2	BCG
Globulin	2.7	g.dl	2.0-3.5	Calculated
A/G Ratio	1.78	%	1.0-2.3	Calculated

LIVER FUNCTION TEST (LFT) WITH GGT , SERUM

Total Bilirubin	0.5	mg/dL	0.2-1.2	Jendrassik-Grof
Direct Bilirubin	0.1	mg/dL	0.0-0.3	Jendrassik-Grof
Indirect Bilirubin	0.4	mg/dL	0.0-0.9	Calculated
SGOT / AST	39.0	U/L	1-30	UV Kinetic (IFCC)
SGPT / ALT	47.0	U/L	1-45	UV Kinetic (IFCC)
Alkaline Phosphatase	65.0	U/L	43-115	PNPP
Gamma Glutaryl Transferase (GGT)	44.0	U/L	0.0-55.0	Reflect Spectrophoto
Total Protein	7.5	g/dl	6.4-8.3	Biuret
Albumin	4.8	g/dL	3.5-5.2	BCG
Globulin	2.7	g.dl	2.0-3.5	Calculated
A/G Ratio	1.78	%	1.0-2.3	Calculated

Page 7 of 9



SIN NO :10436525,

A.K. Rajong

DR. ASHOK KUMAR
M.D. (PATH)

RJN Apollo Spectra Hospitals

18, Vikas Nagar, Near Sai Baba Temple, Gwalior - 474009 (M.P.) Ph.: 0751-2454600, Mob. : 8269663137, Email: ipc.rjn@gmail.com

• Results may vary from lab to lab and from time to time for the same parameter for the same patient • Assays are performed in accordance with standard procedures.
• In case of disparity test may be repeated immediately. • This report is not valid for medico legal purpose.

Patient NAME : Mr. MOHD JAKIR MANSURI	Collected : 12/Feb/2024 10:04AM
Age/Gender : 38 Y 0 M 0 D /M	Received : 12/Feb/2024 01:22PM
UHID/MR NO : ILK.00037952	Reported : 12/Feb/2024 02:42PM
Visit ID : ILK.111578	Status : Final Report
Ref Doctor : Dr.ARCOFEMI HEALTHCARE LIMITED	Client Name : INSTA

DEPARTMENT OF BIOCHEMISTRY-SPECIAL

Test Name	Result	Unit	Bio. Ref. Range	Method
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THYROID PROFILE-I , SERUM

Trilodothyronine Total (TT3)	1.15	ng/dL	0.6-1.8	Chemilluminescence
Thyroxine (TT4)	7.26	µg/dL	4.5-10.9	Chemilluminescence
Thyroid Stimulating Hormone (TSH)	1.460	µIU/ml	0.35-5.50	Chemilluminescence

COMMENT :- Above mentioned reference ranges are standard reference ranges.

AGE RELATED GUIDLINES FOR REFERENCE RANGES FOR TSH

TSH	NEW BORN	INFANT	CHILD	ADULT
(u IU/ml)	0.52-38.9	1.7-9.1	0.7-6.4	0.3-5.6

PREGNANCY RELATED GUIDLINES FOR REFERENCE RANGES FOR TSH

TSH	1st Trimester	2nd & 3rd Trimester
(u IU/ml)	0.2 - 2.5	0.3 - 3.0

NOTE : TSH levels are subject to circadian variation, reaching peak levels between 2-4 AM and at a minimum between 6-10 PM. Dose and time of drug intake also influence the test result.

Ultrasensitive kits used.

Serum T3/ FT3 , T4/FT4 and TSH measurements form three components of thyroid screening panel.

- Primary hypothyroidism is accompanied by elevated serum T3 & T4 values alongwith depressed TSH level.
- Primary hypothyroidism is accompanied by elevated serum T3 & T4 values & elevated serum TSH level.
- Normal T3 & T4 levels with high TSH indicate mild / subclinical HYPOTHYROIDISM.
- slightly elevated T3 levels may be found in pregnancy and in estrogen therapy while depressed levels may be encountered in severe illness, malnutrition, renal failure and during therapy with drugs like propranolol .
- Although elevated TSH levels are nearly always indicative of primary hypothyroidism. Rarely they can result from TSH secreting pituitary tumours (secondary hyperthyroidism).



SIN NO : 10456525,

(Signature)

DR. ASHOK KUMAR
M.D. (PATH)

Patient NAME : Mr. MOHD JAKIR MANSURI	Collected : 12/Feb/2024 10:04AM
Age/Gender : 38 Y 0 M 0 D /M	Received : 12/Feb/2024 10:22AM
UHID/MR NO : ILK.00037952	Reported : 12/Feb/2024 11:13AM
Visit ID : ILK.111578	Status : Final Report
Ref Doctor : Dr.ARCOFEMI HEALTHCARE LIMITED	Client Name : INSTA

DEPARTMENT OF CLINICAL PATHOLOGY

Test Name	Result	Unit	Bio. Ref. Range	Method
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CUE - COMPLETE URINE ANALYSIS , URINE

Physical Examination

Colour	PALE YELLOW			Visual
Appearance	Clear			Visual
pH	5.5		5.0-7.5	Dipstick
Specific Gravity	1.020		1.002-1.030	Dipstick

Chemical Examination

Albumin Urine/ Protein Urine	NIL		NIL	Dipstick/Heat Test
Glucose Urine	NIL		NIL	Dipstick/Benedict
Urobilinogen	NIL		NIL	Dipstick/Ehrlichs
Ketones	NIL		NIL	Dipstick/Rotheras
Bile Salts	ABSENT		ABSENT	Dipstick
Bile Pigments	ABSENT		ABSENT	Dipstick/Fouchets
Nitrite	ABSENT		ABSENT	Dipstick

Microscopic Examination.

Pus Cells	1-2	/Hpf	0-2	
Epithelial Cells	1-2	Hpf	<10	
RBC	ABSENT	/Hpf	ABSENT	
Casts	ABSENT		ABSENT	
Crystals	ABSENT		ABSENT	
Bacteria	NORMALLY PRESENT		NORMALLY PRESENT	
Budding Yeast Cells	Absent		Absent	

*** End Of Report ***



SIN NO :10436525,

A. K. Rajong

DR. ASHOK KUMAR
M.D. (PATH)

ECHO CARDIOGRAPHY REPORT

Patient Name : Mr MOHD JAKIR
Date : 12/02/2024

AGE & Sex :38yrs /M

Echocardiography was performed on vivid T8

Quality Of Imaging : Adequate

Mitral Valve : Normal

Tricuspid Valve : Normal

Aortic Valve : Normal

Pulmonary Valve : Normal

Left Atrium : 3.4cms

Left Ventricle :
IVSD : 1.2 cms
EDD : 4.6 cms
ESD : 3.0 cms

LVPWD : 1.2cms
EF 60%
FS 32%

RWMA : NO REGIONAL WALL MOTION ABNORMALITY

Right Atrium : Normal

Right Ventricle : Normal

Aorta : 3.1cms

IAS IVS : Intact

Pulmonary Artery : Normal

Pericardium : Normal

SVC, IVC : Normal

Pulmonary Artery : Normal

Intracardiac Masses : Nil

Doppler : E > A

Conclusion :

NORMAL CARDIAC CHAMBERS DIMENSION .
NO REGIONAL WALL MOTION ABNORMALITY
NORMAL LV SYSTOLIC FUNCTION , LVEF-60%
NORMAL VALVES
INTACT SEPTUM
NO CLOT /VEGETATION /PERICARDIAL EFFUSION

Dr. Abhishek Sharma
MBBS, MD (Medicine) & DNB (Cardiology)
Consultant Interventional Cardiology
RJN Apollo Spectra Hospitals
Reg.No. MP 12056

Consultant
Dr. Abhishek sharma (DNB)
(Interventional Cardiologist)

PATIENT NAME - MR. MOHAMMAD JAKIR MANSURI 38Y/M
REFERRED BY - H.C.P
DATE - 12/02/2024
INVESTIGATION - USG WHOLE ABDOMEN

IMAGING FINDINGS:-

Liver appears normal in size, position, shape, and margin. Parenchyma shows increased echogenicities. The intrahepatic biliary and portal venous radicles appear normal. Hepatic veins and portal vein are normal.

Gall Bladder is well distended. GB wall and lumen content appears normal. No echogenic focus within GB lumen. Visualized **CBD** is of normal caliber.

Spleen appears normal in size (~ 7.9cm), position, shape, echotexture and margin. No any focal lesion within splenic parenchyma. Splenic vein is normal and undilated.

Pancreas is well visualized, appears normal in size, shape and echotexture. Pancreatic duct is not dilated. No USG evidence of obvious measurable focal lesion.

Both Kidneys: Measurements are right kidney ~9x3.8cm and left kidney ~ 8.5x4.8cm. Both kidneys are normal in position, size, shape, surface, echotexture and cortico-medullary differentiation. Bilateral PC systems are compact. No significant calculus or hydronephrosis on either side. Ureters are undilated on either side.

Urinary Bladder is normal in shape, wall and content.

Prostate appears normal in size (~ 7.2cc), shape and echotexture.

No obvious ascites.

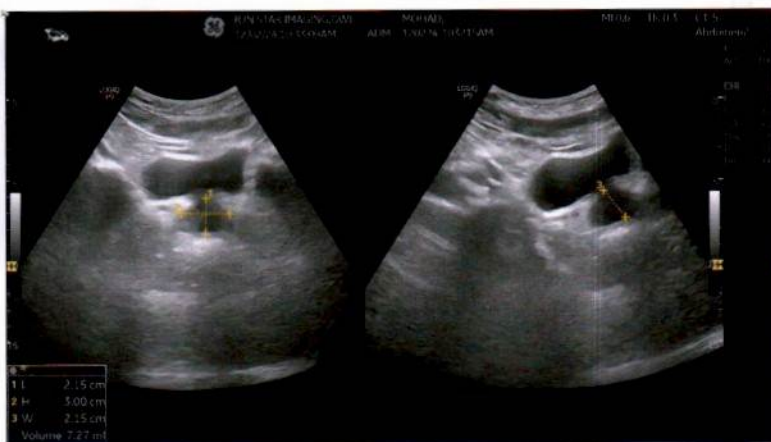
OPINION:- Features are suggestive of-

- **Grade I fatty liver.**

Suggested clinical correlation/Follow up imaging.

DR. SAKSHI CHAWLA
(MD RADIODIAGNOSIS)

Disclaimer: The science of radiology is based upon interpretation of shadows of normal and abnormal tissue. This is neither complete nor accurate; hence, findings should always be interpreted in to the light of clinico-pathological correlation. This is a professional opinion, not a diagnosis. Not meant for medico legal purposes. For any kind of typing error, please intimate us within 7 days of reporting.





RATAN JYOTI NETRALAYA

OPHTHALMIC INSTITUTE & RESEARCH CENTRE

Hospital Reg. No. : 071



॥ सर्वेन्द्रियाणाम् नयनम् प्रधानम् ॥

18, Vikas Nagar, Near Sai Baba Mandir, Gwalior-2 (M.P.) INDIA Tel. : 2423350/51, Web : www.ratanjyotigroup.org, Email : rjneye@gmail.com
Opp. Medical College, Gate No. 3 Jhansi-284128 (U.P.) Ph. 0510-2322311 (M) 9109973225

SR.NO. : 1908228
NAME : MR MOHAMMAD JAKIR MANSURI
AGE/SEX : 38 YRS / MALE

DATE : 12-February-2024
MRD NO. : R-115668
CITY : DATIYA

PAST SURGERIES :

NIL IN

VISION	DISTANCE		NEAR	
	OD	OS	OD	OS
UNAIDED	6/12	6/9P	N6	N6
WITH GLASSES				
WITH PIN HOLE	6/6	6/6		
WITH COLOR				
VISION				

IOP READING				
TIME	OD	OD METHOD	OS	OS METHOD
11:53AM	18		17	

Rx. EYE From To Instructions

1 LUBREX EYE DROP
10ML/CARBOXYMETHYLCELLULOSE EYE DROPS
IP (0.5% W/V)
ONE DROP 4 TIMES A DAY FOR 60 DAYS BOTH EYE 12-Feb-2024 11-Apr-2024

TREATMENT PLAN : ADV
GLASSES
LUBRICATION
R/W SOS /1 YEAR.

REFERRED TO :
NEXT REVIEW : AS PER DR. ADVISED

DR. AMQL CHAUDHARI

NOTE : Kindly continue medications as advised for the period advised.
In case of redness or allergy please discontinue and inform the doctor.

Nutritional Advice : As per treating physician
Instructions : Patient and Attendant(s) Counsellor
Advised medicine may be replaced with a good quality generic medicine.

Speciality Clinics : ▪ Comprehensive Ophthalmology Clinic ▪ Cataract & IOL Clinic ▪ Vitreo Retina & Uvea Clinic ▪ Spectacle Removal Clinic (Lasik/Femto Lasik/Phakic Lens) ▪ Cornea Clinic ▪ Glaucoma Clinic ▪ Orbit & Oculoplasty Clinic ▪ Trauma Clinic ▪ Squint Clinic
▪ Paediatric Ophthalmology Clinic ▪ Low Vision Aid Clinic ▪ Contact Lens Clinic

CONSULTATION TIMINGS : MORNING 9:00 A.M. TO 6:00 P.M. (SUNDAY OFF)

- केन्द्रीय कर्मचारियों के लिए मान्यता प्राप्त ● कैशलेस इश्योरेन्स एवं टी.पी.ए. सुविधा उपलब्ध
- For Appointment Please Contact : 9111004046

स्वामी विद्यानंद भारती आई बैंक
नेत्रदान
करें और करावें इसे अपने परिवार की परम्परा बनायें
नेत्रदान के लिए सम्पर्क करें : 9111004044

Patient Name
Date

MOHD JAKIR MANSURI
12-Feb-24

Age
Sex

38Yrs
MALE

CHEST X RAY (PA VIEW)

Both lung fields appear clear.

Both costo-phrenic angles appear clear.

Cardiothoracic ratio is normal.

Both domes of diaphragm appear normal.

Thoracic soft tissue and skeletal system appear unremarkable.

IMPRESSION:

- No significant abnormality is noted.

Please correlate clinically and with related investigations may be more informative.

Dr. Anuj Jain
MBBS, DNB,
Consultant Radiologist
RMC No- 27793/13247

Patient Name Mohammed Jahin MRN : Age 30y Sex M Date/Time 12/2/24

Mob No.

Investigations : (Please Tick)

- CBC
- ESR
- CRP
- S-Vit D3
- S-Vit B12
- RBS
- Glucose - F/PP
- HbA1C
- LFT/KFT
- PT
- INR
- RA Factor
- Anti CCP
- HLA B27
- ANA
- HIV
- HBsAg
- Anti HCV

Handwritten notes:
 health check up
 o/e - Ear (R) Ear (L) [diagram with arrows]
 EAC - hear TM - intact
 Neck [diagram with arrows]
 TM [diagram with arrows]
 No Active ENT infections

Signature:
 Dr. S. [Signature]
 Reg. No. [Number]
 RJN Apollo Spectra Hospitals

Vitals

- BP
- P.R.
- SPO2
- Temp

Medical Illness

- Hypertension
- Diabetes
- Thyroid
- Cardiac Disease
- Drug Allergies

Next Appointment/Follow up

Signature :

161725
38 Years

moihd jakir mansujri
Male

12-Feb-24 11:01:58 AM

Rate 66 . Sinus rhythm.....Normal P axis, V-rate 50- 99
 . Abnormal R-wave progression, early transition.....QRS area>0 in V2
 . Baseline wander in lead(s) V3,V4,V5,V6

PR 139
 QRS 94
 QT 363
 QTc 381

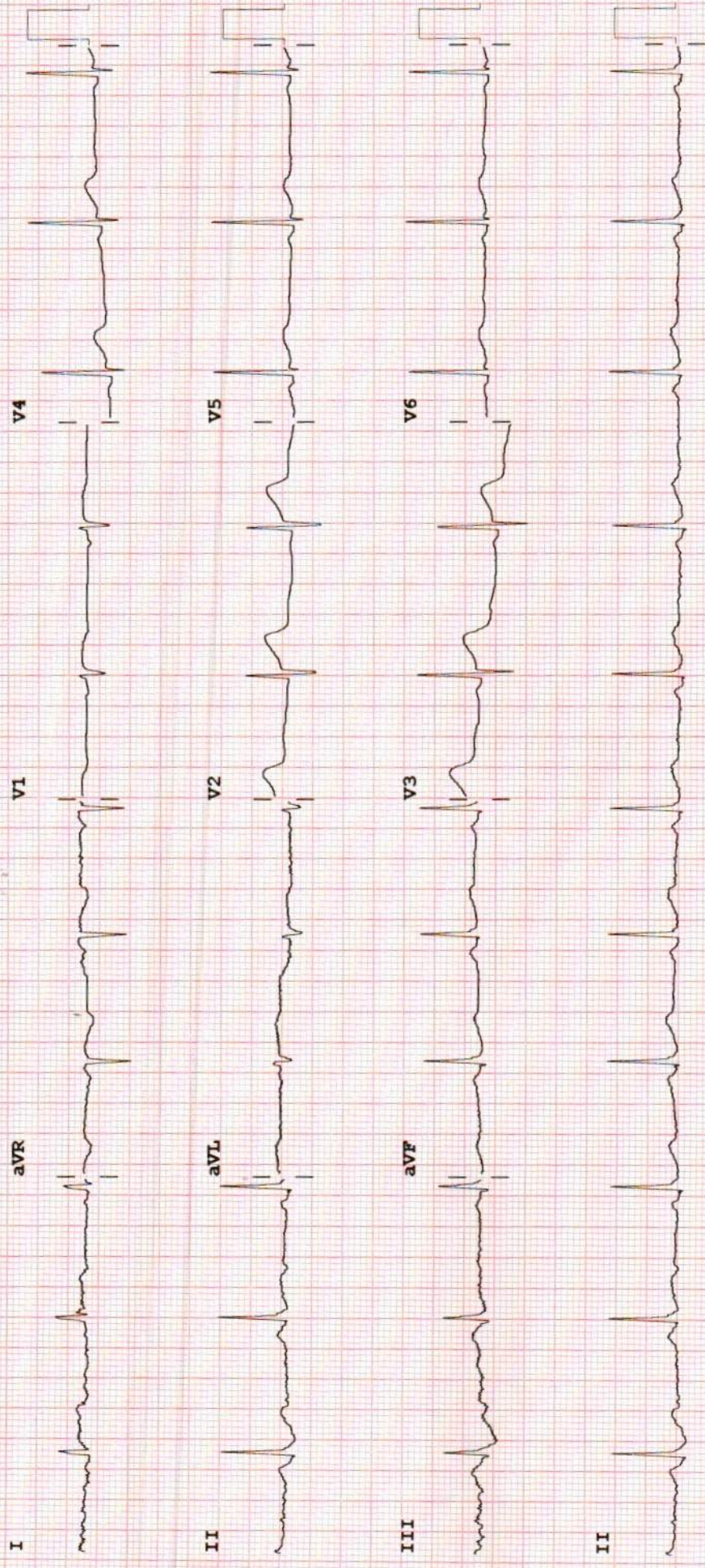
--AXIS--

P 73
 QRS 63
 T 42

12 Lead; Standard Placement

- OTHERWISE NORMAL ECG -

Unconfirmed Diagnosis



Device:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 60~ 0.15-100 Hz

PH100B CL

P?