

Mr. Sangeet Kumar - 31M

17/02/21

Neckline Healthy Chest

PM: no murmurs and / sept

PR: 77-

BP: 110/80

Wt: 55 kg mo

Di: B/LW @
to 11)

ENT: WHO

General: NPO

PPBS: 397
HbA1c: 12.82
FBS: 306

Glucose

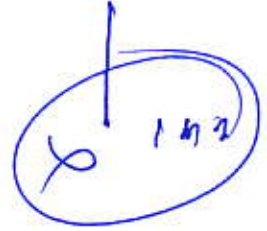
LEF / RFT - (N)

Di: T2DM (secondary sed)

By
Gup: Rabbu - 1st
21. Glucose MI - 1300 B.D.
P-7-8

~~26 Dapansal~~

26. Guptagnest m (501500) - 100
B. Gul



26/2

Imp: 120m recently saw

no other significant connectivity
would like valley

EYE EXAMINATION

NAME: - Mr. Sanjeev Kumar
AGE/SEX 31 YIM

DATE:- 17/02/23

1. EXAMINATION OF EYES : (BY OPHTHALMOLOGIST)

EXTRENAL, EXAMINATION				
SQUINT	NAB			
NYSTAGMUS	NAB			
COLOUR VISION	NAB			
FUDUS	Normal			
INDIVIDUAL COLOUR IDENTIFICATION	WNL			
DISTANT VISION	Normal			
NEAR VISION	$\left\langle \begin{matrix} 6/9 \\ 6/9 \end{matrix} \right\rangle$ Acc $\left\langle \begin{matrix} -0.50 Dsph \\ -0.50 Dsph \end{matrix} \right\rangle 6/6$			
NIGHT BLINDNESS	NAB			
	SPH	CYL	AXIS	ADD
RIGHT	-0.50		—	—
LEFT	-0.50		—	—
REMARK :-				
<p>Dr. Vikash Mishra (SIGN.) MBBS, MS (Oph.) Consultant-Ophthalmology We Care Super Speciality Hospital</p>				

NAME MR. SANJEEV KUMAR

AGE 31YR/M

REF BY: DR. ANIS SIDDIQUI

DATE: 17/02/2023

ECHOCARDIOGRAPHY

M-MODE

<u>MEASUREMENT</u>	<u>PT'S VALUE</u>	<u>NORMAL VALUE</u>
AO	37.3 mm	20-37 mm
LA	32.2 mm	19-40 mm
IVS (d)	11.2 mm	6-11 mm
LVID (d)	43.4 mm	35-50 mm
LVPW (d)	10.8 mm	6-11 mm
LVID (S)	27.8 mm	23-39 mm
EF	60%	

2 D ECHO & CFI

CHAMBERS	-	NORMAL.
VALVES	-	NORMAL.
SEPTAE	-	IVS / IAS Intact
RWMA	-	NO RWMA PRESENT AT REST.
EF	-	60%

CLOT / VEGETATION/ PERICARDIAL EFFUSSION – NULL.

<u>VALVE</u>	<u>REGURGITATION</u>	<u>GRADIENT (mmHg)</u>
Mitral Valve	NILL	Not Significant
Aortic Valve	NILL	Not Significant
Tricuspid Valve	NILL	Not Significant
Pulmonary Valve	NILL	Not Significant

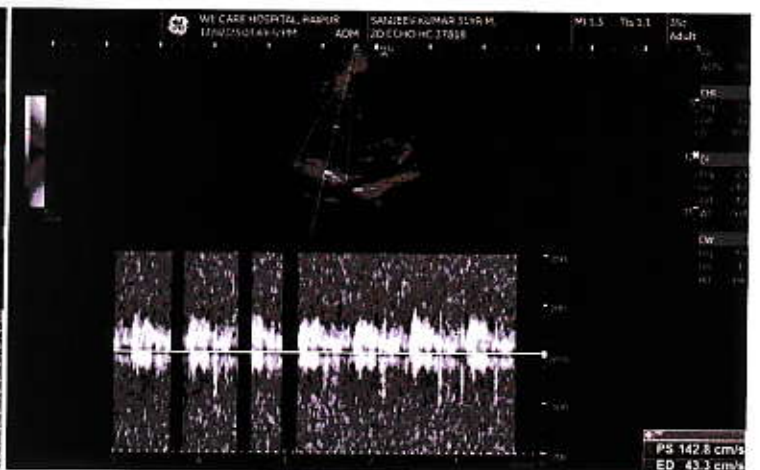
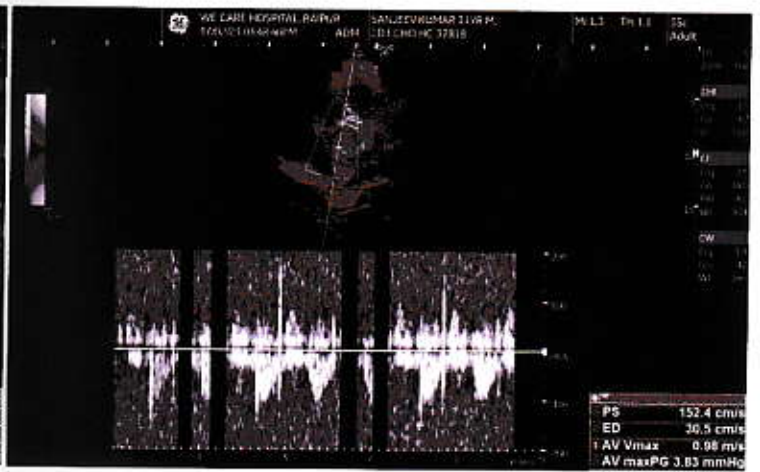
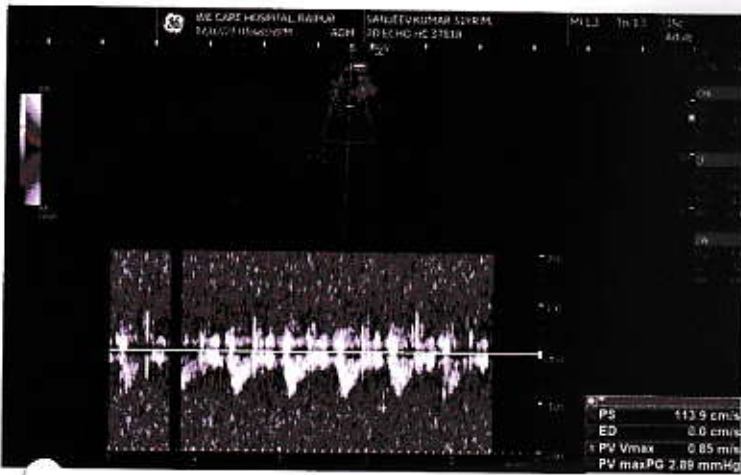
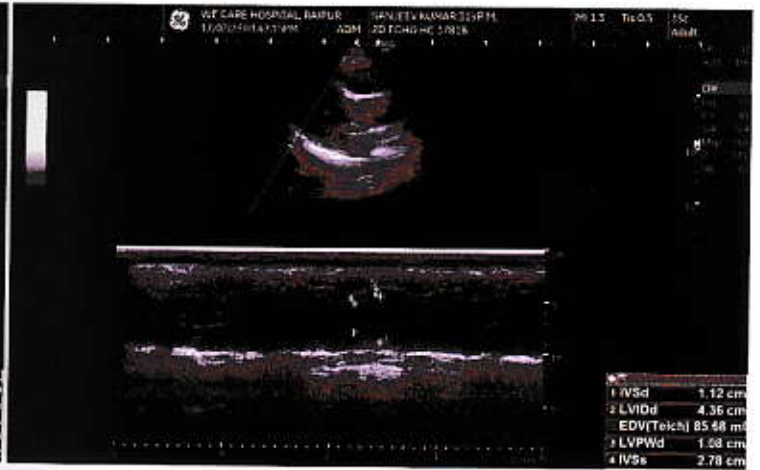
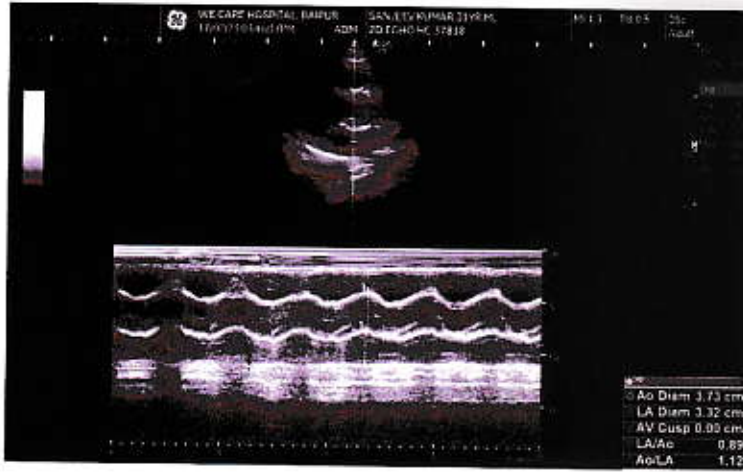
PULSE WAVE DOPPLER

- Mitral Valve inflow shows E Wave < A Wave .

IMPRESSION.

- NO RWMA PRESENT AT REST.
- NORMAL BIVENTRICULAR SYSTOLIC FUNCTION.
- GLOBAL LVEF 60%.
- NO AS/MS/TR/NO AR/NO MR.
- NO INTRACARDIAC CLOT, VEGETATION.

Dr.ANIS SIDDIQUI (MD,PGCCDM)



PATIENT'S NAME: SANJEEV KUMAR 31YR M
REFERRED BY: DR ANIS SIDDIQUI
MRD NO: USG ABD HC 37818

STUDY TIME: 17-02-23
PRINT TIME: 17/02/23 4:33 PM
PAGE 1

STUDY: USG OF THE ABDOMEN

INDICATION: Routine check up.

COMPARISON: None.

OBSERVATIONS:

Liver is normal in size measuring 140 mm in craniocaudal extent, and normal in parenchymal echogenecity. No obvious focal lesion is seen. Intrahepatic biliary radicles are not dilated.

Spleen is enlarged measuring 126 mm in size. No focal lesion is seen.

1. Pancreas appears normal in size and echopattern. Pancreatic duct is not dilated. No obvious pancreatic parenchymal calcifications are seen either.

Gall bladder is well distended. No calculus is seen. Wall thickness is normal. CBD is normal.

Portal vein is normal. IVC and aorta are unremarkable.

Right kidney measures 100 mm in size. Right kidney is normal in size, shape, position and echogenecity. Corticomedullary differentiation is maintained. No focal lesion is noted. No evidence of calculus or hydronephrosis is noted.

Left kidney measures 98 mm in size. Left kidney is normal in size, shape, position and echogenecity. Corticomedullary differentiation is maintained. No focal lesion is noted. No evidence of calculus or hydronephrosis is noted.

Urinary bladder is partially distended. (Patient not willing / able to hold any further). Prostate cannot be commented upon.

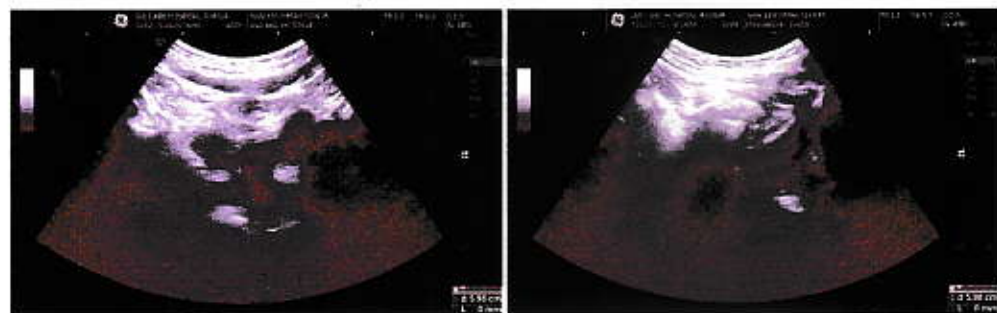
No free fluid is seen. No significant lymphadenopathy is seen.

CONCLUSION:

Mild splenomegaly.

DR NEERAJ GAUTAM
DNB RADIODIAGNOSIS
CONSULTANT RADIOLOGIST







PATIENT'S NAME: SANJEEV KUMAR 31YR M
REFERRED BY: DR ANIS SIDDIQUI
MRD NO: XR CHEST 37818 KH 48 OPD HC

STUDY TIME: 17-02-23
PRINT TIME: 17/02/23 4:37 PM
PAGE 1 OF 1

STUDY: XRAY OF THE CHEST PA VIEW

INDICATION: Routine checkup.

COMPARISON: None.

OBSERVATIONS & CONCLUSION:

NO ACUTE BONY PATHOLOGY IS SEEN.

NO PULMONARY INFILTRATE, COLLAPSE OR CONSOLIDATION, EFFUSION, OR PNEUMOTHORAX IS SEEN.

TRACHEA IS IN MIDLINE.

NO CARDIOMEGALY IS SEEN.

THE SOFT TISSUES DEMONSTRATE NO ACUTE PATHOLOGY.

DR NEERAJ GAUTAM
DNB RADIODIAGNOSIS
CONSULTANT RADIOLOGIST

PATIENT NAME : Mr. MR.SANJEEV KUMAR
UHID NO. : 37818
AGE / SEX : 31 Y Male
CONSULTANT : DR ANIS SIDDIQUI

RECEIPT NO. : PAC/48
SAMPLE RECEIVED ON / AT : 17/02/2023 08:54AM
SAMPLE REPORTED ON / AT : 17/02/2023 04:27PM

COMPLETE BLOOD COUNT(CBC)

RBC

Haemoglobin (HB)	15.7	gm%	12 - 17mg/dl
Haematocrit (HCT)	42.2	%	40 - 55
RBC Count	5.11	millions/cumm	4.5 - 6
MCV	82.6	fL	78 - 92
MCH	30.7	pg	27 - 32
MCHC	37.2	g/dl	32 - 36
RDW-CV	15.6	%	11 - 16

WBC

Total Leucocyte Count (TLC) 4700 4000 - 11000

Differential Leucocyte Count (DLC)

Neutrophils	47	%	40 - 75
Lymphocytes	45	%	20 - 40
Monocytes	06	%	0 - 8
Eosinophils	02	%	1 - 7%
Basophils	00	%	0 - 1

PLATELETS

PLT Count	0.94	lakhs/cmm	1.0 - 4.0
MPV	10.9	fl	8 - 11

Advice

The test results are to be used for help in diagnosing/treating medical diseases & not for forensic applications. These result cannot be used fo medico-legal purposes. These reported results are for the information of referring clinical only.

Test Done By MEDONIC M-SERIES Fully Automatic.

Test Done By
Senior Technologist
SATYANARAYAN SINGH

Report Checked By
Technician

Pathologist
Dr. D. Prashant
M.D. (Pathologist)



PATIENT NAME : Mr. MR.SANJEEV KUMAR	RECEIPT NO. : PAC/48
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CLINICAL PATHOLOGY

TEST	RESULT	UNIT	REF. RANGE
URINE SUGAR(F) Urine Sugar (Fasting)	Present 1+		ABSENT



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CONSULTANT : DR ANIS SIDDIQUI	

Lipid Profile			
Total Cholesterol	193	mg/dl	Desirable : <200 Borderline : 200 - 239 High : >= 240
Triglycerides	120	mg/dl	Normal:<161 High : 161 - 199 Hypertriglyceridemic : 200 - 499 Very High : > 499
<i>Note: The National Cholesterol Education Program Adult Treatment Panel III (NCEP-ATP III) report.</i>			
HDL Cholesterol	52	mg/dl	35.3 - 79.5
LDL Cholesterol	117	mg/dl	Less than 100 mg/dl - Optimal 100-129 mg/dl - Near/above optimal 130-159 mg/dl - Borderline high 160-189 mg/dl - High >190 mg/dl - Very high
<i>Note: The National Cholesterol Education Program Adult Treatment Panel III (NCEP-ATP III) report.</i>			
VLDL Cholesterol	24	mg/dl	20 - 50
Total Cholesterol/HDL Ratio	3.71		0 - 5.1
LDLC/HDLC Ratio	2.25		2.5 - 3.5
Correlates with Lipid Profile:			
1. Fasting state: Fasting should begin 12 to 14 Hrs before the sample collection. This includes all beverages, although water is permitted. No alcohol should be taken 24 before sample collection.			
2. Drugs: Cholesterol and Triglyceride lowering agents. Please repeat with fresh sample if dinically indicated.			
<i>The test has been performed on fully-Automated Biochemistry Analyser "ERBA EM 200"</i>			
KFT(KIDNEY FUNCTION TEST)			
Urea	29	mg/dL	15 - 45
Serum Creatinine	0.54	mg/dl	0.70 - 1.40 mg/dL
Uric Acid	4.1	mg/dL	3.5 - 7.2
<i>Test Done By MICRO LAB 300 Fully Automatic.</i>			

Test Done By
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SATYANARAYAN SINGH

Report Checked By
Technician

Pathologist
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UHID NO : 37518	SAMPLE RECEIVED ON / AT : 17/02/2023 08:54AM
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CONSULTANT : DR ANIS SIDDIQUI	

BIO CHEMISTRY

TEST	RESULT	UNIT	REF. RANGE
BSPP	397		<140 mg/dl
Urine SUGAR(PP)	Present (1.%)		ABSENT
GGT(GAMMA GT)	68.5	U/L	<55
LFT(Liver Function Test)			
Bilirubin - Total	1.42	mg/dl	0.2 - 1.3
Bilirubin - Direct	0.52	mg/dl	Adult : 0.0 - 0.4 Neonatal : - 0.0 - 0.6
Bilirubin(Irdirect)	0.90	mg/dl	Adult : 0.0 - 0.9 Neonatal : 0.6 - 10.5
Total Proteins	6.58	g/dl	6.4 - 8.3 g/dl
Albumin	4.57	g/dl	3.5 - 5.2 g/dl
Globulin	2.01	g/dl	2.3 - 3.6
A/G Ratio	2.27		1.10 - 2.20
Alkaline Phosphatase	103	U/L	4 - 15 Yrs 54 - 369 20 - 59 Yrs 53-128 >60 Yrs 56 - 119
SGPT (AST)	18	U/L	upto 35 U/L
SGPT (ALT)	22	U/L	upto 45 U/L

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SATYANARAYAN SINGH

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HAEMATOLOGY

TEST	RESULT	UNIT	REF. RANGE
HbA1c (Glycosalated Haemoglobin)			
HbA1C-Glycosalated Haemoglobin	12.82	%	4 to 6% Non-diabetic 6 to 7% Excellent control 7 to 8% fair to good control 8 to 10% Unsatisfactory control Above 10% poor Control

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The test has been performed on fully-Automated Biochemistry Analyser "ERBA EM 200"

ESR	10	mm at 1hr	up to 15 mm (1 hr)
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Blood Group

ABO Group : O Rh Positive

SUITE METHOD

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Machine Footer

Test Done By
Senior Technologist
SATYANARAYAN SINGH

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Technician

Pathologist
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PATHOLOGY

TEST	RESULT	UNIT	REF. RANGE
BSF (Fasting Sample Required)	306		<110 mg/dl



Test Done By
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SATYANARAYAN SINGH

Report Checked By
Technician



Pathologist
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M.D. (Pathologist)

PATIENT NAME : Mr. MR.SANJEEV KUMAR	RECEIPT NO. : PAC/48
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CONSULTANT : DR ANIS SIDDIQUI	

ROUTINE URINE ANALYSIS TEST

TEST	RESULT	UNIT	REF. RANGE
Urine Routine ANALYSIS TEST			
<u>General Examination</u>			
Volume	20	ml	>2
Colour	Pale Yellow		Pale Yellow
Appearance	Clear		Clear
pH	6.0		5.5 - 8.0
<u>Chemical Examination</u>			
Urine Protein(Albumin)	Absent	g/L	Absent
Urine Glucose(Sugar)	Present 1 +	mmol/L	Absent
Urine Ketons(Acetone)	Absent	mmol/L	Absent
Specific Gravity	1.025		
<u>Microscopic Examination</u>			
Pus cells	4-5/HPF	/hpf	<5
RBC (Urine)	Nil	/hpf	Nil
Epithelial cell	1-2/HPF		0-4
Casts	Absent		Absent
Crystals	Absent		Absent

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Test Done By
Senior Technologist
SATYANARAYAN SINGH

Report Checked By
Technician

Pathologist
Dr. D. Prashant
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PATIENT NAME : Mr. MR.SANJEEV KUMAR
UHID NO : 37518
AGE / SEX : 31 Y Male
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TUMOR MARKERS

TEST	RESULT	UNIT	REF. RANGE
PSA (Total)	0.42	ng/mL	CUT-OFF 4.00
<i>The instrument for ichroma test calculate the test result automatically and displays PSA concentration of the test sample in terms of ng/mL.</i>			

Test done by ichroma

Test Done By
Senior Technologist
SATYANARAYAN SINGH

Report Checked By
Technician

Pathologist
Dr. D. Prashant
M.D. (Pathologist)

17-02-2025 09:55:44 AM

Dr. Z

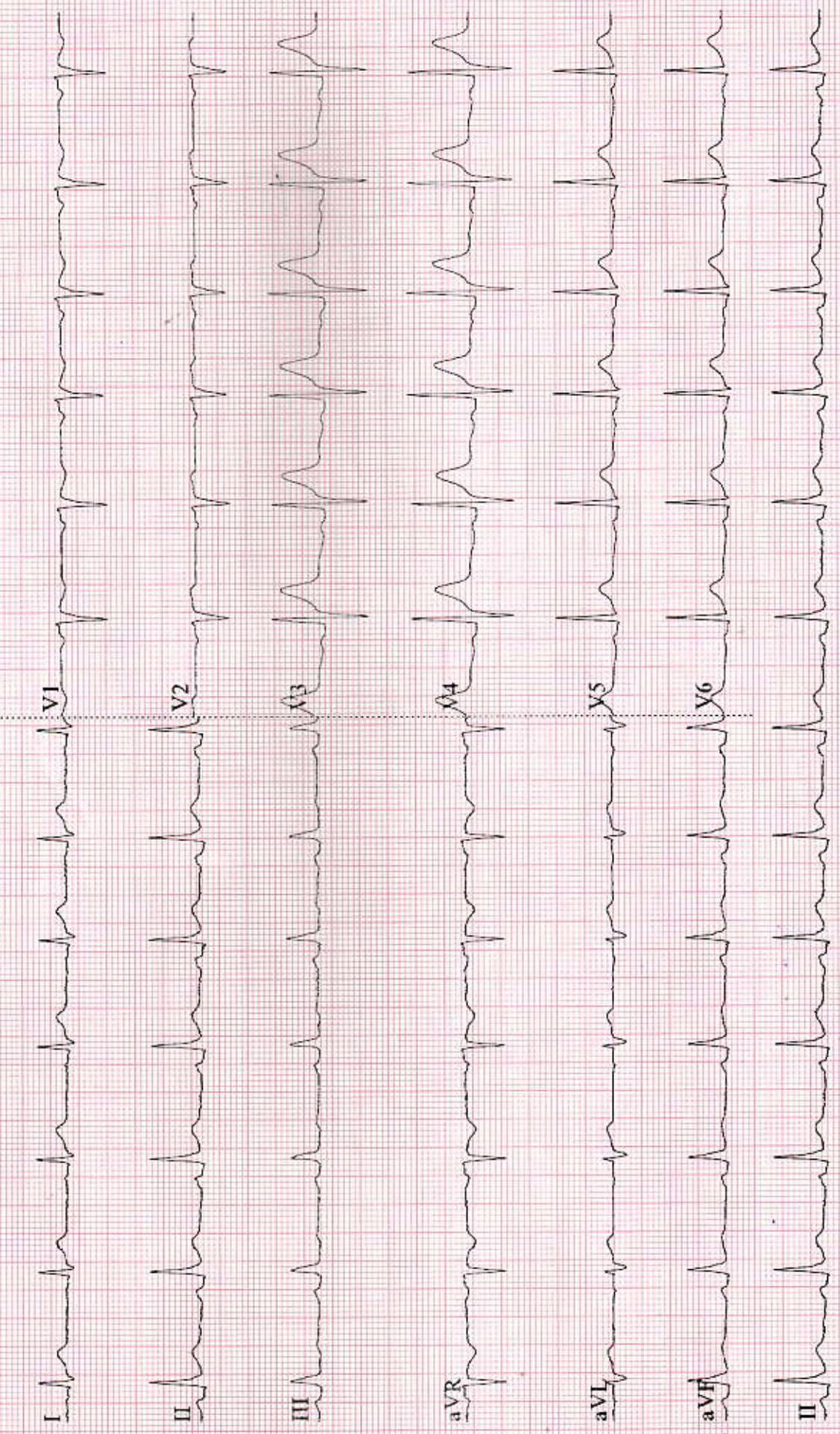
MR SANJEEV KUMAR
Male 31Years

Diagnosis Information:

Sinus Rhythm
Normal ECG

HR	: 77	bpm
P	:	ms
PR	: 164	ms
QRS	: 102	ms
QT/QTc	: 343/389	ms
P/QRS/T	: 75/63/43	°
RV5/SV1	: 1.108/0.823	mV

Report Confirmed by:



BPL