



DEPARTMENT OF LABORATORY

NAVI MUMBAI

Patient Name : Mr. PRAVEENA ACHARYA
Bill No/ UMR No : NMBC60816/NMU0047199
Received Dt : 09-Mar-24 09:45 am

Age /Gender : 39 Y(s)/Male
Referred By : Dr. DMO
Report Date : 09-Mar-24 12:54 pm

FINAL REPORT

<u>Parameters</u>	<u>Specimen</u>	<u>Result</u>	<u>Biological Reference Intervals</u>	<u>Method</u>
ESR	CITRATED BLOOD	30	0 - 10 mm/1st hour	WESTERGREN'S METHOD
COMPLETE BLOOD COUNT				
RBC				
R B C COUNT	Blood	5.32	4.5 - 5.5 $10^6/\mu\text{L}$	
HEMOGLOBIN		15.0	13.0 - 17.0 g/dl	
PCV/HCT		44.2	40 - 50 %	
			36 - 46 %	
MCV		83	83 - 101 fl	
			83 - 101 fl	
MCH		28.3	27 - 32 pg	
MCHC		34.0	31.5 - 34.5 g/dL	
RDW(cv)		12.6	11.6 - 14.0 %	
PLATELETS				
PLATELET COUNT	Blood	200	150 - 400 $10^3/\mu\text{L}$	
MPV		8.6	7.5 - 11.5 fl	
WBC				
TC (TOTAL LEUCOCYTE COUNT)	Blood	10.4	4.0 - 11.0 $10^3/\mu\text{L}$	
DIFFERENTIAL COUNT				
NEUTROPHILS	Blood	67	40 - 80 %	
LYMPHOCYTES		26	20 - 40 %	
MONOCYTES		06	02 - 10 %	
EOSINOPHILS		01	00 - 06 %	
BASOPHILS		00	00 - 01 %	

*** End Of Report ***





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Bill No/ UMR No : NMBC60816/NMU0047199	Referred By : Dr. DMO	
Received Dt : 09-Mar-24 09:45 am	Report Date : 09-Mar-24 12:53 pm	

FINAL REPORT

<u>Parameters</u>	<u>Specimen</u>	<u>Result</u>	<u>Biological Reference Intervals</u>	<u>Method</u>
SERUM ELECTROLYTES				
SERUM SODIUM	Serum	138	136 - 145 mmol/L	ISE INDIRECT
SERUM POTASSIUM		4.4	3.5 - 5.1 mmol/L	ISE INDIRECT
SERUM CHLORIDES		101	98 - 107 mmol/L	ISE INDIRECT
FBS (FASTING BLOOD GLUCOSE WITH URINE GLUCOSE)				
FASTING BLOOD GLUCOSE		168	Normal Range : 70 - 99 mg/dL	Hexokinase
FASTING URINE SUGAR		NIL		
BUN / CREATININE RATIO				
BUN (Blood Urea Nitrogen.)		11	7.0 - 21.0 mg/dL	Calculated
SERUM CREATININE		0.87	0.8 - 1.3 mg/dL	
BUN / CREATININE RATIO		12.6	10 - 20	
LFT(LIVER FUNCTION TEST)				
TOTAL BILIRUBIN		0.7	< 1.2 mg/dL	Method : Diazo Method
DIRECT BILIRUBIN		0.2	<= 0.20 mg/dL	Method: Diazo Method
INDIRECT BILIRUBIN		0.5	<= 1.0 mg/dL	
SGPT (ALT)		40	<= 41 U/L	Method : UV without PSP
SGOT (AST)		19	<= 40 U/L	Method : UV without PSP
ALKALINE PHOSPHATASE (ALP)		91	40 - 129 U/L 35 - 105 U/L	Method : PNPP, AMP Buffer - IFCC Ref.
TOTAL PROTEINS		7.6	6.0 - 8.0 g/dL	Method : Biuret method
SERUM ALBUMIN		4.9	3.5 - 5.2 g/dL	Method : Bromcresol Green (BCG)
GLOBULINS		2.7	2.5 - 3.5 g/dL	
A/G RATIO		1.81	1.2 - 2.5	
GAMMA GLUTAMYL TRANSFERASE(GGT)		48	10 - 71 U/L	Method : G-glutamyl-carboxy-nitroanilide - IFCC Ref.
BUN(BLOOD UREA NITROGEN)				
BUN (Blood Urea Nitrogen.)		11	7.0 - 21.0 mg/dL	Calculated
TOTAL PROTEIN				
TOTAL PROTEINS		7.6	6.0 - 8.0 g/dL	Method : Biuret method
LIPID PROFILE				





DEPARTMENT OF LABORATORY

NAVI MUMBAI

Patient Name : Mr. PRAVEENA ACHARYA
Bill No/ UMR No : NMBC60816/NMU0047199
Received Dt : 09-Mar-24 09:45 am

Age /Gender : 39 Y(s)/Male
Referred By : Dr. DMO
Report Date : 09-Mar-24 01:23 pm

<u>Parameters</u>	<u>Specimen</u>	<u>Result</u>	<u>Biological Reference In</u>	<u>Method</u>
TOTAL CHOLESTEROL		242	Desirable : : < 200 mg/dL Borderline High : : 200 - 239 mg/dL High risk : > 240 mg/dL	METHOD : Enzymatic colorimetric
HDL CHOLESTEROL		41	Low : : < 40 mg/dL High : : > 60 mg/dL	Homogeneous enzymatic colorimetric
LDL CHOLESTEROL		187	Optimal : - ≤ 100 mg/dL Near Optimal : 100 - 129 mg/dL Borderline High : 130 - 159 mg/dL High : 160 - 189 mg/dL Very High : - > 190 mg/dL	Direct-Enzymatic colorimetric
VLDL		23		
SERUM TRYGLYCERIDES		114	< 150 mg/dL Borderline High : 150 - 199 mg/dL High : 200 - 499 mg/dL	METHOD: Enzymatic colorimetric
CHO/HDL RATIO		5.9	Normal : - < 3.5 High Risk : - > 5.0	
LDL/HDL RATIO		4.56		
SERUM URIC ACID		4.0	3.4 - 7.0 mg/dL	uricase
PSA (PROSTATE SPECIFIC ANTIGEN).				
PROSTATE SPECIFIC ANTIGEN (PSA)		0.982	0 - 4.0 ng/mL	Method : ECLIA
T3,T4 AND TSH				
T3		110.3	70 - 204 ng/dL	
T4		8.69	5.1 - 14.1 µg/dL	Method : ECLIA
TSH (THYROID STIMULATING HORMONE)		0.954	0.270 - 4.20 uIU/mL	Method : ECLIA
HBA1C (GLYCOSYLATED HAEMOGLOBIN)				
HBA1C		10.2	< 5.7 Normal Prediabetic 5.7 - 6.4 & ≥ 6.5 Diabetic %	
MPG (Mean Plasma Glucose)		246	Excellent Control : 90 - 120 mg/dL Good Control : 121 - 150 mg/dL	
PLBS (POST LUNCH BLOOD SUGAR WITH URINE SUGAR)				
PLBS (POST LUNCH BLOOD GLUCOSE)		134	110 - 180 mg/dL	Hexokinase

*** End Of Report ***





MEDICOVER HOSPITALS

DEPARTMENT OF LABORATORY

NAVI MUMBAI

Patient Name : Mr. PRAVEENA ACHARYA
Bill No/ UMR No : NMBC60816/NMU0047199
Received Dt : 09-Mar-24 01:03 pm

Age / Gender : 39 Y(s)/Male
Referred By : Dr. DMO
Report Date : 11-Mar-24 08:34 am

<u>Parameter</u>	<u>Specimen</u>	<u>Result Values</u>	<u>Biological Reference</u>	<u>Method</u>
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Lab Incharge


Dr. VISHAL MEHROTRA, MD Pathology
Clinical Pathology Services

Verified By : : 022633

Test results related only to the item tested.

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<i>Patient ID:</i>	<i>NMU0047199</i>	<i>Patient Name:</i>	<i>PRAVEENA ACHARYA</i>
<i>Age:</i>	<i>39 Years</i>	<i>Sex:</i>	<i>M</i>
<i>Accession Number:</i>	<i>NMBC60816</i>	<i>Modality:</i>	<i>DX</i>
<i>Referring Physician:</i>	<i>DR.DMO</i>	<i>Study:</i>	<i>CHEST</i>
<i>Study Date:</i>	<i>09-Mar-2024</i>		

X RAY CHEST PA VIEW

Both lungs are clear.

The frontal cardiac dimensions are normal.

The pleural spaces are clear.

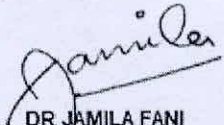
Both hilar shadows are normal in position and density.

No diaphragmatic abnormality is seen.

The soft tissues and bony thorax are normal.

Impression:

- **No significant abnormality is seen.**



DR JAMILA FANI
Consultant Radiologist
MBBS, MD

Date: 10-Mar-2024 14:07:11

Patient ID:	NMU0047199	Patient Name:	PRAVEENA ACHARYA
Age:	39 Years	Sex:	M
Accession Number:	NMBC60816	Modality:	US
Referring Physician:	DR.DMO	Study:	USG ABDOMEN WHOLE
Study Date:	09-Mar-2024	Study Time:	11:11:11

USG WHOLE ABDOMEN

LIVER is normal in size, normal in shape with bright echotexture. No evidence of any focal lesion. The portal vein appears normal & shows normal hepatopetal flow. No evidence of intra-hepatic biliary duct dilatation.

Gall Bladder appears partially distended with normal wall thickness. There is no obvious calculus or pericholecystic collection or free fluid noted. CBD appears normal.

Visualised parts of head & body of pancreas appear normal. PD is not dilated.

SPLEEN is normal in size and echotexture. No focal lesion seen. SV is normal.

Both kidneys are normal in size, shape and echotexture with normal parenchymal reflectivity and maintained cortico-medullary differentiation. No hydronephrosis or calculi or mass seen.

Urinary Bladder is adequately distended; no e/o wall thickening or mass or calculi seen. Post-void residue is not significant.

PROSTATE is normal in size, shape & echotexture. It ms 22 gms.

Visualised bowel loops appear normal. There is no free fluid seen.

NB:- This scan does not rule out all pathologies related to bowel and appendix.

IMPRESSION –

- **Grade I fatty liver.**
- **No other significant abnormality detected**

THIS REPORT IS NOT TO BE USED FOR MEDICOLEGAL PURPOSE. THE CONTENTS OF THIS REPORT REQUIRE CLINICAL CORRELATION BEFORE ANY APPLICATION.



Dr. Ashwin Y.
M.D. (Radio-Diagnosis)

Rate 69 . Sinus rhythm.....normal P axis, V-rate 50- 99

PR 149
QRSD 86
QT 370
QTc 397

--AXIS--

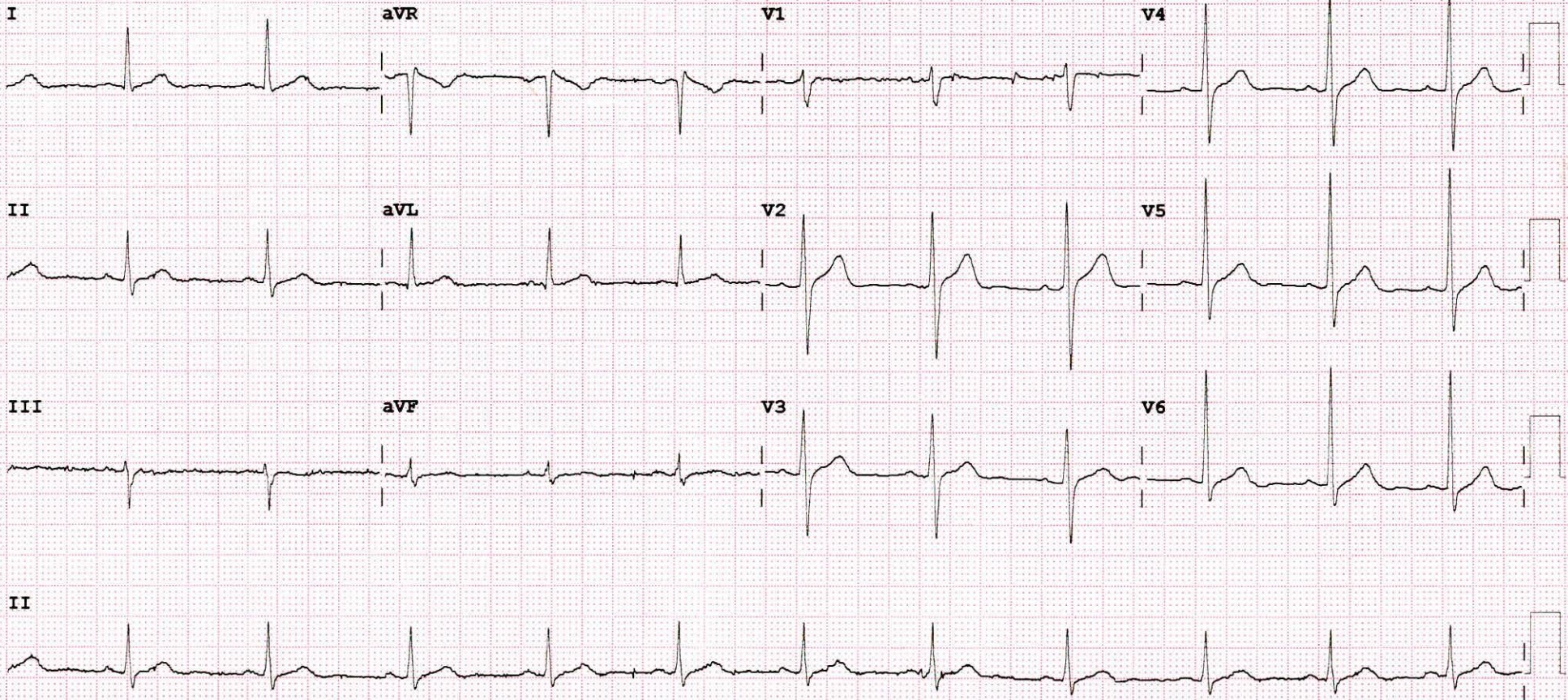
P 32
QRS 3
T 18

- NORMAL ECG -

12 Lead; Standard Placement

Unconfirmed Diagnosis

N12
WV
Σ





MEDICOVER
HOSPITALS
NAVI MUMBAI

Praveen Acharya

O/E - Generalised Attrition
& Erosion.

- linea Alba seen.

- Stains⁺⁺⁺

- Calculus⁺⁺

Adv:- complete Oral prophylaxis.
Night guard prosthesis →

☆
- Buy NIM toothpaste

Mandekar

Dr. Sayali Vasant Mandekar
MDS In Conservative Dentistry
And Endodontics
Reg. No. A-32634.



MEDICAL HEALTH CHECK- UP ASSESMENT FORM

NAME : Mr / Mrs Praveena Acharya DATE: 09/03/24

AGE : 39 Yrs / m

SEX: Male / Female

NMU: NMU00047199

DOCTOR'S NAME:

TEMP :	<u>97.4</u>	^o f	BP :	<u>120/70</u>	mmHg
PULSE :	<u>75</u>	b/m	HEIGHT :	<u>170</u>	cm
RR :	<u>20</u>	b/m	WEIGHT :	<u>77.5</u>	kg
SPO2 :	<u>99</u>	%	HGT:	<u>—</u>	

REMARK:



DEPARTMENT OF OPHTHALMOLOGY

MEDICOVER HOSPITALS

DATE: 09/03/24

PATIENT NAME: Mrs Praveena Acharye

AGE / SEX 39/m, NAVI MUMBAI

UMR NO: N000004199

	RE	LE
VA (DISTANCE)	6/6(B)	6/6
VA(NEAR)	NG	NG
COLOUR VISION	Normal	Normal

		SPHERE	CYLINDER	AXIS	VA
MRx	O D	+ -	-0.50	10°	6/6 _{MC}
	O S	plano	_____		6/6 _{MC}

HISTORY :

• H/O DM (bck) : 2-3 yrs. • H/O spectacle use.
 • H/O Ocular trauma Allegis. & surronds.

OCULAR FINDINGS :

(BE) - Ant seg WNL
 (undilated) Disc $\leq \begin{matrix} 0.4 \\ 0.5 \end{matrix}$

ADVICE:

Refresh Teax eld qid 1777 X 1month

AS
 CDR. ANUSHREE VANAKAR

