



BHAILAL AMIN
GENERAL HOSPITAL



CONCLUSION OF HEALTH CHECKUP

ECU Number	: 2248	MR Number	: 23201942	Patient Name	: SAMIR I SHAH
Age	: 54	Sex	: Male	Height	: 163
Weight	: 64	Ideal Weight	: 60	BMI	: 24.09
Date	: 11/03/2023				

Dr. Manish Mittal

Internal Medicine

Note : General Physical Examination & routine Investigations included in the Health Checkup have certain limitations and may not be able to detect all the latent and asymptomatic diseases.

ECU Number : 2248 MR Number : 23201942 Patient Name: SAMIR I SHAH
Age : 54 Sex : Male Height : 163
Weight : 64 Ideal Weight : 60 BMI : 24.09
Date : 11/03/2023

Past H/O : NO P/H/O ANY MAJOR ILLNESS

Present H/O : COMPLAIN NO MEDICAL AT PRESEN

Family H/O : MOTHER : DIABETES

Habits : NO HABITS

Gen.Exam. : G.C.GOOD

B.P : 140/86 mm Hg

Pulse : 70/MIN REG

Others : SPO2-98%

C.V.S : NAD

R.S. : NAD

Abdomen : NP

Spleen : NP

Skin : NAD

C.N.S : NAD

Advice :

ECU Number : 2248
Age : 54
Weight : 64
Date : 11/03/2023

MR Number : 23201942
Sex : Male
Ideal Weight : 60

Patient Name: SAMIR I SHAH
Height : 163
BMI : 24.09

Ophthalmic Check Up :

Right

Left

Ext Exam

NIL

Vision Without Glasses

6/6 N.5

6/6 N.5

Vision With Glasses

SAME AS PATIENT S OWN

NA

Final Correction

NA

NA

Fundus

NORMAL

Colour Vision

NORMAL

Advice

NIL

Orthopaedic Check Up :

Ortho Consultation

Ortho Advice

ENT Check Up :

Ear

Nose

Throat

Hearing Test

ENT Advice

General Surgery Check Up :

General Surgery

Abdominal Lump

Hernia

External Genitals

PVR

Proctoscopy

Any Other

Surgical Advice



Patient Name : Mr. SAMIR I SHAH
 Gender / Age : Male / 54 Years 10 Months 17 Days
 MR No / Bill No. : 23201942 / 231071434
 Consultant : Dr. Manish Mittal
 Location : OPD

Type : OPD
 Request No. : 112252
 Request Date : 11/03/2023 08:12 AM
 Collection Date : 11/03/2023 08:31 AM
 Approval Date : 11/03/2023 12:36 PM

CBC + ESR

Test	Result	Units	Biological Ref. Range
Haemoglobin.			
Haemoglobin	15.0	gm/dL	13 - 17
Red Blood Cell Count (T-RBC)	5.47	mill/cmm	4.5 - 5.5
Hematocrit (HCT)	44.9	%	40 - 50
Mean Corpuscular Volume (MCV)	82.1	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	27.4	pg	27 - 32
MCH Concentration (MCHC)	33.4	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	12.1	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	36.2	fl	39 - 46
Total Leucocyte Count (TLC)			
Total Leucocyte Count (TLC)	6.06	thou/cmm	4 - 10
Differential Leucocyte Count			
Polymorphs	49	%	40 - 80
Lymphocytes	45	%	20 - 40
Eosinophils	1	%	1 - 6
Monocytes	4	%	2 - 10
Basophils	1	%	0 - 2
Polymorphs (Abs. Value)	2.97	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	2.73	thou/cmm	1 - 3
Eosinophils (Abs. Value)	0.10	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.20	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.06	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.2	%	1 - 3 : Borderline > 3 : Significant
Platelet Count			
Platelet Count	280	thou/cmm	150 - 410
Smear evaluation	Adequate		
ESR	2	mm/1 hr	0 - 12

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / retest may be requested.

365 Days / 24 Hours Laboratory Services

Home Collection Facility Available
(Mon To Sat 8:00 am to 5:00 pm)



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GENERAL HOSPITAL

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name	: Mr. SAMIR I SHAH	Type	: OPD
Gender / Age	: Male / 54 Years 10 Months 17 Days	Request No.	: 112252
MR No / Bill No.	: 23201942 / 231071434	Request Date	: 11/03/2023 08:12 AM
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CBC + ESR

Immature Granulocyte (IG) count is a useful early marker of infection or inflammation, even when other markers are normal. It is an early and rapid discrimination of bacterial from viral infections. It is also increased in patients on steroid therapy / chemotherapy or haematological malignancy. High IG is always pathological; except in pregnancy and neonates of < 7 days.
Method : HB by Non-Cyanide Hemoglobin analysis method. HCT by RBC pulse height detection method. RBC, TLC & PLC are by Particle Count by Electrical Impedance in Cell Counter. Optical Platelets by Fluorescent + Laser Technology. MCV, MCH, MCHC, RDW (CV & SD) are calculated parameter. DLC by Flowcytometry method using semi-conductor Laser+Smear verification. ESR on Ves metic 20, comparable to Westergrens method and in accordance to ICSH reference method.

--- End of Report ---

Dr. Rakesh Vaidya
MD (Path). DCP.

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Consultant	: Dr. Manish Mittal	Collection Date	: 11/03/2023 08:31 AM
Location	: OPD	Approval Date	: 11/03/2023 01:01 PM

Haematology

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>Biological Ref. Range</u>
Blood Group			
ABO system	B		
Rh system.	Positive		

By Gel Technology / Tube Agglutination Method

Note :

- This blood group has been done with new sensitive Gel Technology using both Forward and Reverse Grouping Card with Autocontrol.
- This method check`s group both on Red blood cells and in Serum for "ABO" group.

---- End of Report ----

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Location : OPD

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Request No. : 112252
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Approval Date : 11/03/2023 10:48 AM

Fasting Plasma Glucose

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>Biological Ref. Range</u>
<i>Fasting Plasma Glucose</i>			
Fasting Plasma Glucose	131	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	163	mg/dL	70 - 140

By Hexokinase method on RXL Dade Dimension

---- End of Report ----

Dr. Sejal Oedra
M.D.Pathology

Text Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / repeat may be requested.



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HbA1c (Glycosylated Hb)

Test	Result	Units	Biological Ref. Range
HbA1c (Glycosylated Hb)			
Glycosylated Hemoglobin (HbA1c)	7.5	%	
estimated Average Glucose (e AG) *	168.55	mg/dL	

*(Method:**By Automated HPLC analyser on D-10 Biorad. NGSP Certified, US-FDA approved, Traceable to IFCC reference method.*** Calculated valued for past 60 days, derived from HbA1c %, based on formula recommended by the A1c - Derived Average Glucose study from ADA and EASD funded The ADAG trial.***Guidelines for Interpretation:***Indicated Glycemic control of previous 2-3 months*

HbA1c%	e AG (mg/dl)	Glycemic control
> 8	> 183	Action suggested...High risk of developing long-term complications. Action suggested, depends on individual patient circumstances
7 - 8	154 - 183	Good
< 7	< 154	Goal...Some danger of hypoglycemic reaction in type I Diabetics. Some Glucose intolerant individuals and Sub-Clinical diabetics may demonstrate (elevated) HbA1c in this area.
6 - 7	126 - 154	Near Normal
< 6	< 126	Nondiabetic level)

--- End of Report ---

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Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea <i>(By Urease Kinetic method on RXL Dade Dimension)</i>	16	mg/dL	10 - 45
Creatinine <i>(By Modified Kinetic Jaffe Technique)</i>	0.90	mg/dL	0.9 - 1.3
Estimate Glomerular Filtration rate <i>(Ref. range : > 60 ml/min for adults between age group of 18 to 70 yrs. EGFR Calculated by IDMS Traceable MDRD Study equation. Reporting of eGFR can help facilitate early detection of CKD. By Modified Kinetic Jaffe Technique)</i>	More than 60		
Uric acid <i>(By Uricase / Catalase method on RXL Siemens)</i>	3.8	mg/dL	3.4 - 7.2

— End of Report —

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M.D.Pathology



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Complete Lipid Profile

Test	Result	Units	Biological Ref. Range
Complete Lipid Profile			
Appearance	Clear		
Triglycerides	49	mg/dL	1 - 150
<i>(By Lipase / Glycerol dehydrogenase on RXL Dade Dimension)</i>			
< 150 Normal			
150-199 Borderline High			
200-499 High			
> 499 Very High)			
Total Cholesterol	144	mg/dL	1 - 200
<i>(By enzymatic colorimetric method on RXL Dade Dimension)</i>			
<200 mg/dL - Desirable			
200-239 mg/dL - Borderline High			
> 239 mg/dL - High)			
HDL Cholesterol	50	mg/dL	40 - 60
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension)</i>			
< 40 Low			
> 60 High)			
Non HDL Cholesterol (calculated)	94	mg/dL	1 - 130
<i>(Non- HDL Cholesterol)</i>			
< 130 Desirable			
139-159 Borderline High			
160-189 High			
> 191 Very High)			
LDL Cholesterol	83	mg/dL	1 - 100
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension)</i>			
< 100 Optimal			
100-129 Near / above optimal			
130-159 Borderline High			
160-189 High			
> 189 Very High)			
VLDL Cholesterol (calculated)	9.8	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	1.66		2.1 - 3.5
T. Ch./HDL Ch. Ratio	2.88		3.5 - 5
<i>(Recent NECP / ATP III Guidelines / Classification (mg/dl) :)</i>			

--- End of Report ---

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Liver Function Test (LFT)

Test	Result	Units	Biological Ref. Range
Bilirubin			
Bilirubin - Total	0.59	mg/dL	0 - 1
Bilirubin - Direct	0.13	mg/dL	0 - 0.3
Bilirubin - Indirect	0.46	mg/dL	0 - 0.7
<i>(By Diazotized sulfanilic acid on RXL Dade Dimension.)</i>			
Aspartate Aminotransferase (SGOT/AST)	28	U/L	15 - 40
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alanine Aminotransferase (SGPT/ALT)	42	U/L	16 - 63
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alkaline Phosphatase	126	U/L	56 - 119
<i>(BY PNPP AMP method on RXL Dade Dimension.)</i>			
Gamma Glutamyl Transferase (GGT)	38	U/L	15 - 85
<i>(By IFCC method on RXL Dade Dimension.)</i>			
Total Protein			
Total Proteins	7.40	gm/dL	6.4 - 8.2
Albumin	3.85	gm/dL	3.4 - 5
Globulin	3.55	gm/dL	3 - 3.2
A : G Ratio	1.08		1.1 - 1.6
<i>(By Biuret endpoint and Bromocresol purple method on RXL Dade Dimension.)</i>			

--- End of Report ---

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Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
------	--------	-------	-----------------------

Triiodothyronine (T3)

1.53

ng/ml

(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)

Reference interval (ng/ml)

1 - 3 days : 0.1 - 7.4
 1-11 months : 0.1 - 2.45
 1-5 years : 0.1 - 2.7
 6-10 years : 0.9 - 2.4
 11-15 years : 0.8 - 2.1
 16-20 years : 0.8 - 2.1
 Adults (20 - 50 years) : 0.7 - 2.0
 Adults (> 50 years) : 0.4 - 1.8
 Pregnancy (in last 5 months) : 1.2 - 2.5

(Reference : Tietz - Clinical guide to laboratory test, 4th edition))

Thyroxine (T4)

9.73

mcg/dL

(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)

Reference interval (mcg/dL)

1 - 3 days : 11.8 - 22.6
 1-2 weeks : 9.8 - 16.6
 1 - 4 months : 7.2 - 14.4
 4 - 12 months : 7.8 - 16.5
 1-5 years : 7.3 - 15.0
 5 - 10 years : 6.4 - 13.3
 10 - 20 years : 5.6 - 11.7
 Adults / male : 4.6 - 10.5
 Adults / female : 5.5 - 11.0
 Adults (> 60 years) : 5.0 - 10.7

(Reference : Tietz - Clinical guide to laboratory test, 4th edition))

Thyroid Stimulating Hormone (US-TSH)

3.44

microIU/ml

(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)

Reference interval (microIU/ml)

Infants (1-4 days) : 1.0 - 39
 2-20 weeks : 1.7 - 9.1
 5 months - 20 years : 0.7 - 6.4
 Adults (21 - 54 years) : 0.4 - 4.2
 Adults (> 55 years) : 0.5 - 8.9
 Pregnancy :
 1st trimester : 0.3 - 4.5
 2nd trimester : 0.5 - 4.6
 3rd trimester : 0.8 - 5.2

(Reference : Tietz - Clinical guide to laboratory test, 4th edition))

--- End of Report ---

Dr. Sejal Odedra
M.D.Pathology



Patient Name	: Mr. SAMIR I SHAH	Type	: OPD
Gender / Age	: Male / 54 Years 10 Months 17 Days	Request No.	: 112252
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Prostate Sp. (Antigen)

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>Biological Ref. Range</u>
Total PSA	1.14	ng/ml	0 - 4

(Method : Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)

Remark :

Age related reference range for interpretation :

< 40 yrs : 0.21 - 1.72

40 - 49 yrs : 0.27 - 2.19

50 - 59 yrs : 0.27 - 3.42

60 - 69 yrs : 0.27 - 6.16

>69 yrs : 0.21 - 6.77

TPSA may be raised usually mildly in benign prostatic conditions like hyperplasia. Typically 30 % of BPH may show values between 4-10 and 7 % between 10-40.

In Prostatic Malignancy 43 % show values below 4

21 % between 4 to 10

20 % between 10 to 40 &

16 % above 40)

----- End of Report -----

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Urine routine analysis (Auto)

Test	Result	Units	Biological Ref. Range
Physical Examination			
Quantity	20	mL	
Colour	Pale Yellow		
Appearance	Clear		
Chemical Examination (By Reagent strip method)			
pH	6.5		
Specific Gravity	1.015		
Protein	Negative	gm/dL	0 - 5
Glucose	Negative	mg/dL	0 - 5
Ketones	Negative		0 - 5
Bilirubin	Negative		Negative
Urobilinogen	Negative		Negative (upto 1)
Blood	Negative		Negative
Leucocytes	Negative		Negative
Nitrite	Negative		Negative
Microscopic Examination (by Microscopy after Centrifugation at 2000 rpm for 10 min or on fully automated Sysmex urine sedimentation analyzer UF4000)			
Red Blood Cells	0 - 1	/hpf	0 - 2
Leucocytes	0 - 1	/hpf	0 - 5
Epithelial Cells	0 - 1	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil	/hpf	Nil
Mucus	Absent	/hpf	Absent
Organism	Absent		

--- End of Report ---

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DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 23201942 Report Date : 11/03/2023
Request No. : 190056359 11/03/2023 8.12 AM
Patient Name : Mr. SAMIR I SHAH
Gender / Age : Male / 54 Years 10 Months 17 Days

ADVANCED DIGITAL SOLUTIONS

- Computer Radiography
- Ultra Sensitive Colour Doppler
- Ultra High Resolution Sonography
- Multi-Detector CT Scan
- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

X-Ray Chest AP

Both lung fields are clear.
Both costophrenic sinuses appear clear.
Heart size is normal.
Hilar shadows show no obvious abnormality.
Aorta is normal.

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
• NOT VALID FOR MEDICO-LEGAL PURPOSES
• CLINICAL CORRELATION RECOMMENDED

Dr. Priyanka Patel, MD
Consultant Radiologist



H-2015-0297

MC-3004

E-2021-0037

1828



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DEPARTMENT OF DIAGNOSTIC RADIOLOGY

ADVANCED DIGITAL SOLUTIONS

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- Ultra High Resolution Sonography
- Multi-Detector CT Scan
- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

Patient No. : 23201942 Report Date : 11/03/2023
Request No. : 190056416 11/03/2023 8.12 AM
Patient Name : **Mr. SAMIR I SHAH**
Gender / Age : Male / 54 Years 10 Months 17 Days

USG : Screening for Abdomen (excluding Pelvis) Or Upper Abdomen

Liver is normal in size shows increased in echopattern. No mass lesion identified. The hepatic veins are clear and patent. PV patent. No dilated IHBR.

Gall bladder is well distended and shows GB calculi largest measures 8mm . Common bile duct measures 4 mm in diameter.

Pancreas shows no obvious abnormality. Tail obscured. Spleen is normal in size and echopattern.

Both kidneys are normal in shape and position. Normal echogenicity and cortico medullary differentiation is noted. No hydronephrosis or mass lesion seen.

Prostate appears normal in size and volume is ~ 17cc. Prostate measures 39mm x 34mm x 32mm.

Urinary bladder is well distended and appears normal.

No ascites.

COMMENT:

**Fatty liver
Few GB calculi.**

Kindly correlate clinically

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
 • NOT VALID FOR MEDICO-LEGAL PURPOSES
 • CLINICAL CORRELATION RECOMMENDED

Prerna C Hasani

Dr.Pruna C Hasani, MD
Consultant Radiologist



H-2015-0297

MC-3004

E-2015-0037

DEPARTMENT OF CARDIOLOGY

ECHO NO/Date: 11 /03 / 2023

PATIENT'S NAME: MR. SAMIR SHAH

SEX: 54 / MALE

REF. PHYSICIAN: DR. MANISH MITTAL, M.D.

PERF. CARDIOLOGIST: DR. KILLOL KANERIA,


2D ECHO / COLOUR DOPPLER ECHOCARDIOGRAM REPORT

MITRAL VALVE: NORMAL, NO MS, TRACE MR
AORTIC VALVE: TRILEAFLET, NO AS, NO AR
TRICUSPID VALVE: NORMAL, TRACE TR, NO PAH;
PULMONARY VALVE: NORMAL, NO PR, NO PS
LEFT ATRIUM: NORMAL SIZE
AORTA: NORMAL
LEFT VENTRICLE: NORMAL LVEF – 60%, NO RWMA AT REST
RIGHT ATRIUM: NORMAL SIZE
RIGHT VENTRICLE: NORMAL SIZE
I.V.S.: INTACT
I.A.S.: INTACT
PULMONARY ARTERY: NORMAL
PERICARDIUM: NO EFFUSION

COLOUR/DOPPLER FLOW MAPPING: TRACE MR, TR, NO PAH

FINAL CONCLUSION:

1. NORMAL SIZED ALL CARDIAC CHAMBERS
2. NORMAL LV SYSTOLIC FUNCTION LVEF – 60%
3. NO RESTING RWMA
4. GRADE I LV DIASTOLIC DYSFUNCTION
5. NORMAL VALVES, NO MITRAL / AORTIC STENOSIS
6. TRACE MR, TR, NO PAH
7. NO PERICARDIAL EFFUSION, CLOT OR VEGETATION SEEN.

 **Dr. KILLOL KANERIA, Interventional Cardiologist**

11-03-2023 08:39:59 AM
ID: 25201942
SAMIR I SHAH
Male 54 years

HR	65	bpm
P	97	ms
PR	129	ms
QRS	100	ms
QT/QTc	387/405	ms
P/QRS/T	46/78/50	°
RV/SSV1	1.009/0.887	mV

Diagnosis Information:
Sinus Rhythm
Pre-excitation Syndrome

Report Confirmed by

[Signature]

