



Patient Name	: Mr.TAJBIJE VISHNU	Bill Date	: 24-01-2023 08:30
Age / Gender	: 54 Y(s) / Male	Sample Collected Date	: 24-01-2023 08:31
Bill No/UHID No	: PS004067/P00000476993	Report Date	: 24-01-2023 12:47
Lab No / Result No	: 2300003157/6141	Specimen	: SERUM
Ref erred By	: HOSPITAL CASE		

DEPARTMENT OF BIO CHEMISTRY

<u>Investigation</u>	<u>Result</u>	<u>Reference Range</u>	<u>Methods</u>
<u>BUN</u>			
UREA NITROGEN(BUN)	: 13.32	6.0 - 20.0 mg/dL	Calculated
UREA	: 28.5	12.8-42.8 mg/dL	Urease
<u>CALCIUM</u>			
CALCIUM	: 9.1	8.6 - 10.2 mg/dL	Arsenazo
<u>CREATININE</u>			
CREATININE	: 0.7	0.6 - 1.3 mg/dL	Enzymatic
<u>ELECTROLYTES (Na & K)</u>			
SODIUM	: 142.0	136.0 - 145.0 mmol/L	Potentiometric
POTASSIUM	: 4.1	3.5 - 5.1 mmol/L	Potentiometric
<u>FBS</u>			
GLUCOSE (FASTING).	: 89.0	Prediabetic : 100 - 125 mg/dL Diabetic : \geq 126 mg/dL Normal : $<$ 100.0 mg/dL	GOD-POD
REFERENCE : ADA 2015 GUIDELINES			
<u>Liver Function Test</u>			
TOTAL BILIRUBIN	: 0.9	0.3 - 1.2 mg/dL	DIAZO
DIRECT BILIRUBIN	: 0.4	0-0.4 mg/dL	DIAZO
INDIRECT BILIRUBIN	: 0.5	0.0 - 0.8 mg/dL	DIAZO
ALANINE TRANSAMINASE	: 25.0	$<$ 50 U/L	Kinetic
ASPARTATE TRANSAMINASE	: 24.0	10.0 - 40.0 U/L	Kinetic
ALKALINE PHOSPHATASE	: 88.0	30.0 - 115.0 U/L	4NPP/AMP BUFFER
TOTAL PROTEIN	: 7.1	6.0 - 8.0 g/dl	Biuret
ALBUMIN	: 4.3	3.5-4.8 g/dl	BCG
GLOBULIN	: 2.8	2.3-3.5 gm/dL	Calculated
A/G RATIO	: 1.54		Calculated
<u>LIPID PROFILE</u>			
CHOLESTEROL	: 202.0	130.0 - 220.0 mg/dL	Enzymatic
TRIGLYCERIDES	: 182.0	35.0 - 180.0 mg/dL	Enzymatic
HDL CHOLESTEROL	: 35.0	35-65 mg/dL	Enzymatic
LDL CHOLESTEROL	: 130.6	10.0 - 130.0 mg/dL	Calculated
VLDL CHOLESTEROL	: 36.4	5.0-36.0 mg/dL	Calculated
CHOL/HDL RATIO	: 5.77	2.0-6.2	Calculated
<u>PHOSPHOROUS</u>			
PHOSPHORUS	: 4.1	2.7-4.5 mg/dL	Phospho Molybdate



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DEPARTMENT OF BIO CHEMISTRY

<u>Investigation</u>	<u>Result</u>	<u>Reference Range</u>	<u>Methods</u>
PPBS			
GLUCOSE (POST PRANDIAL)	: 123	60-140 mg/dL	GOD-POD
PSA BLOOD			
Prostate Specific Antigen (PSA)	: 0.553	00-4.0 ng/ml	Enhanced Chemiluminescence
T3-T4-TSH -			
Tri-iodothyronine, (Total T3)	: 0.921	0.87-1.78 ng/ml	ECLIA
THYROXINE (T4), TOTAL	: 4.93	4.6 - 10.5 ug/dl	ECLIA
THYROID STIMULATING HORMONE (ULTRA).	: 4.78	0.28-3.89 uIU/mL	ECLIA
TSH - For pregnancy the referance range is as follows - 1st -trimester : 0.6 - 3.4 uIU/mL 2nd trimester : 0.37 - 3.6 uIU/mL 3rd trimester : 0.38 - 4.04 uIU/mL			
TOTAL PROTEINS (Total Protein Albumin+Globulin)			
TOTAL PROTEIN	: 7.1	6.0 - 8.0 g/dl	Biuret
ALBUMIN	: 4.3	3.5-4.8 g/dl	BCG
GLOBULIN	: 2.8	2.3-3.5 gm/dL	Calculated
A/G RATIO	: 1.54		Calculated
URIC ACID			
URIC ACID	: 6.9	3.5-7.2 mg/dL	Uricase

*** End Of The Report ***

Note : This test is performed on automated BIO CHEMISTRY analyzer - VITROS250

Anjana A. Sanghavi

Dr. Anjana Sanghavi
Consultant Pathologist

Verified By
Ruhi S

NOTE :

- * Clinically correlate, Kindly discuss if necessary.
- * This report relates only to the item received.



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Bill No/UHID No	: PS004067/P00000476993	Report Date	: 24-01-2023 12:30
Lab No / Result No	: 2300003158-G/6141	Specimen	: WHOLE BLOOD
Ref erred By	: HOSPITAL CASE		

DEPARTMENT OF BIO CHEMISTRY

<u>Investigation</u>	<u>Result</u>	<u>Reference Range</u>	<u>Methods</u>
<u>GLYCOSYLATED HB% (HbA1C)</u>			
GLYCOSYLATED HAEMOGLOBIN (HBA1c)	: 5.2	Prediabetic : 5.7 - 6.4 % Diabetic : >= 6.5 % Therapeutic Target : <7.0 %	HPLC

REFERENCE : ADA 2015 GUIDELINES

*** End Of The Report ***

Note : This test is performed on automated BIO CHEMISTRY analyzer - BIORAD D10

**Dr.Anjana Sanghavi
Consultant Pathologist**

Verified By
Shrikant.A

NOTE :

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Patient Name	: Mr.TAJBIJE VISHNU	Bill Date	: 24-01-2023 08:30
Age / Gender	: 54 Y(s) / Male	Sample Collected Date	: 24-01-2023 08:31
Bill No/UHID No	: PS004067/P00000476993	Report Date	: 24-01-2023 14:12
Lab No / Result No	: 2300003159/6141	Specimen	: URINE
Ref erred By	: HOSPITAL CASE		

DEPARTMENT OF CLINICAL PATHOLOGY

<u>Investigation</u>	<u>Result</u>	<u>Reference Range</u>	<u>Methods</u>
<u>URINE ROUTINE</u>			
<u>PHYSICAL EXAMINATION</u>			
COLOUR	: Pale Yellow		
APPEARANCE	: Clear		
<u>CHEMICAL TEST</u>			
PH	: 5.0	5.0-7.0	
SPECIFIC GRAVITY	: 1.030	1.015-1.030	
ALBUMIN	: Absent	Abset	
URINE SUGAR	: Absent	Absent	
KETONE BODIES	: Absent	Absent	
BILE PIGMENTS/ BILIRUBIN	: Absent	Absent	
UROBILINOGEN	: Normal	Normal	
NITRITES	: Absent	Absent	
LEUCOCYTES ESTERASE	: Absent	Absent	
<u>MICROSCOPIC TEST</u>			
PUS CELLS.	: 1-2	0 - 5 /hpf	
RED BLOOD CELLS.	: Absent	0 - 2 /hpf	
EPITHELIAL CELLS.	: 1-2	0-5 /hpf	
BACTERIA	: Absent	Absent	
CAST	: Absent	Absent	
YEAST CELLS	: Absent	Absent	
CRYSTALS	: Absent	Absent	
OTHERS	: Absent	Absent	

*** End Of The Report ***

Verified By
SANDEEP

NOTE :

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Dr.Anjana Sanghavi
Consultant Pathologist



Patient Name	: Mr.TAJBIJE VISHNU	Bill Date	: 24-01-2023 08:30
Age / Gender	: 54 Y(s) / Male	Sample Collected Date	: 24-01-2023 08:31
Bill No/UHID No	: PS004067/P00000476993	Report Date	: 24-01-2023 14:12
Lab No / Result No	: 2300003158/6141	Specimen	: WHOLE BLOOD
Ref erred By	: HOSPITAL CASE		

DEPARTMENT OF HAEMATOLOGY

<u>Investigation</u>	<u>Result</u>	<u>Reference Range</u>	<u>Methods</u>
<u>BLOOD GROUP</u>			
BLOOD GROUP	: B RH POSITIVE		
<u>Erythrocyte Sedimentation Rate</u>			
ESR at 1 Hour	: 5	0-20 mm/hr	Modified Westergren Method

INTERPRETATION :

ESR is a screening test to detect presence of systemic disease; however a normal result does not rule out a systemic disease.

ESR is also used to monitor course of disease or response to therapy if initially elevated.

*** End Of The Report ***

Verified By
Shrikant.A

NOTE :

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Dr. Anjana Sanghavi
Consultant Pathologist



Patient Name	: Mr.TAJBIJE VISHNU	Bill Date	: 24-01-2023 08:30
Age / Gender	: 54 Y(s) / Male	Sample Collected Date	: 24-01-2023 08:31
Bill No/UHID No	: PS004067/P00000476993	Report Date	: 24-01-2023 10:59
Lab No / Result No	: 2300003158/6141	Specimen	: WHOLE BLOOD
Ref erred By	: HOSPITAL CASE		

DEPARTMENT OF HAEMATOLOGY

<u>Investigation</u>	<u>Result</u>	<u>Reference Range</u>	<u>Methods</u>
HAEMOGRAM REPORT			
W.B.C.COUNT	: 3560	4000-11000 /ul	Coulter Principle
NEUTROPHILS	: 60.8	40-75 %	Derived from WBC Histogram
LYMPHOCYTES	: 28.5	20-40 %	
MONOCYTES	: 5.0	2-10 %	
EOSINOPHILS	: 4.7	1.0-6.0 %	
BASOPHILS	: 1.0	0.0-1.0 %	
%IMMATURE GRANULOCYTES	: 0.01	0.00-0.10 %	
ABSOLUTE NEUTROPHIL COUNT	: 2.16	2-7 x10 ³ cells/ul	Calculated
ABSOLUTE LYMPHOCYTE COUNT	: 1.01	1 - 3 x10 ³ cells/ul	Calculated
ABSOLUTE MONOCYTE COUNT	: 0.18	0.2-1.0 x10 ³ cells/ul	Calculated
ABSOLUTE EOSINOPHIL COUNT	: 0.16	0.02-0.5 x10 ³ cells/ul	Calculated
ABSOLUTE BASOPHIL COUNT	: 0.04	0.02-0.1 x10 ³ cells/ul	Calculated
R.B.C COUNT	: 5.04	4.5 - 6.5 million/ul	Coulter Principle
HAEMOGLOBIN	: 15.4	13 - 17 g/dl	Cyanmethemoglobin Photometry
HAEMATOCRIT	: 45.8	40-50 %	Calculated
MCV	: 90.9	83-99 fl	Coulter Principle
MCH	: 30.6	27 - 32 pg	Calculated
MCHC	: 33.7	31.5 - 34.5 g/dl	Calculated
RDW	: 11.7	11.6-14.0 %	Calculated From RBC Histogram
PLATELET COUNT	: 252	150 - 450 x10 ³ /ul	Coulter Principle
MPV	: 9.0	7.8-11 fl	Coulter Principle
RBC MORPHOLOGY	: Normocytic Normochromic		
WBC MORPHOLOGY	: Leucopenia		
PLATELET	: Adequate		

*** End Of The Report ***

Note : This test is performed on automated HAEMATOLOGY analyzer - HORIBA YUMIZEN H550

Verified By
Shrikant.A

NOTE :

- * Clinically correlate, Kindly discuss if necessary.
- * This report relates only to the item received.

Anjana A. Sanghavi

Dr. Anjana Sanghavi
Consultant Pathologist

Name:	TAJBIJE VISHNU.	Exam Date :	24-Jan-2023 08:55
Age :	054Y	Accession:	87948085759
Gender:	M	Exam:	ABDOMEN AND PELVIS
PID:	P00000476993	Physician:	HOSPITAL CASE^^^^
OPD :			

ULTRASOUND OF ABDOMEN AND PELVIS

Liver appears normal in size 12.9 cm, shape and echotexture. No focal lesion is seen. No intrahepatic biliary radicle dilatation seen. The portal vein and CBD appear normal.

Gall bladder is well distended with normal wall thickness. No calculus or sludge is seen.
Pancreas appears normal in size and echotexture. No focal lesion is seen.
Spleen appears normal in size and echotexture. No focal lesion is seen.

Right kidney measures 10.6 x 4.6 cms. Left kidney measures 10.7 x 4.8 cms. Both kidneys appear normal in size, shape & echotexture. They show good cortico-medullary differentiation. There is no hydronephrosis, hydroureter or calculus seen on either side.

The urinary bladder is well distended. Wall thickness is normal. No mass lesion or calculus is seen.

Prostate is normal in size, shape and echotexture. No obvious focal lesion is seen on present transabdominal study.

Visualised bowel loops are non-dilated and show normal peristalsis.
There is no ascites or significant lymphadenopathy seen.

IMPRESSION : No significant abnormality noted.

Suggest : Clinical correlation.



DR. YATIN R. VISAVE
CONSULTANT RADIOLOGIST
MBBS, DMRD
Regd. No. 090812

Date: 24-Jan-2023 11:30:35



Name: TAJBIJE VISHNU .
Age : 054 Years
Gender: M
PID: P00000476993
OPD :

Exam Date : 24-Jan-2023 09:01
Accession: 87969112641
Exam: CHEST X RAY
Physician: HOSPITAL CASE^^^^

Health Check

Radiograph Chest PA View :

Both lung fields normal.

Both costo-phrenic angles are clear.

Cardiac silhouette and aortic knuckle are normal.

Both hilar shadows and the diaphragmatic contours are normal.

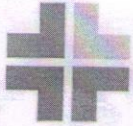
Thoracic soft tissues and the rib cage normal.

Impression :

No significant abnormality noted.

DR. YATIN R. VISAVE
CONSULTANT RADIOLOGIST
MBBS, DMRD
Regd. No. 090812

Date: 24-Jan-2023 11:40:45



Grant Medical Foundation
Ruby Hall Clinic
 Hinjawadi

Rajeev Gandhi Infotech Park, MIDC, Phase No. 1, Plot No P-33, Hinjawadi, Pune - 411057.

• Ph: 020 66999999 • Email : hinjawadi@rubyhall.com • 24 hrs Helpline - 8554802253 • Website : www.rubyhall.com

OPHTHALMOLOGY

NAME : VISHNU SHARANAPPA, TAJQUE

AGE : 54/M

R +0.5 X 180°

L +0.5 X 180°

ADD +2.5

1) Vision $\left\{ \begin{array}{l} \text{unaided} \quad \underline{6/6} \\ \text{c glasses} \quad \underline{-1-} \end{array} \right.$

2) Near Vision $\left\{ \begin{array}{l} \text{unaided} \quad \underline{6/6} \\ \text{c glasses} \quad \underline{-1-} \end{array} \right.$

3) Binocular Vision _____

4) Colour Vision NAD

5) Tension _____

6) Anterior Segment _____

7) Pupils _____

8) Lens _____

9) Media & Fundus _____

10) Remarks _____

Date : 24/01/23


 (Signature)

2DECHO&DOPPLER REPORT

NAME: MR. TAJBIJE VISHNU AGE:54 Yrs/M DATE: 24 /01/2023

MITRAL VALVE: has thin leaflets with normal subvalvar motion.
 No mitral regurgitation .E= 0.54 & A=0.53 m/sec, E/A ratio- 1.03, E/E' ratio-5.91
 AORTIC VALVE : has three thin leaflets with normal opening
 No aortic regurgitation.AVPG= 5.28 mmHg
 PULMONARY VALVE; NORMAL,PVPG= 4.92 mmHg
 LEFT VENTRICLE : is normal , has normal wall thickness, No RWMA at rest .
 Normal LV systolic function. EF - 60%.
 LEFT ATRIUM: is normal.
 RIGHT ATRIUM & RIGHT VENTRICLE: normal in size. TAPSE =22 mm.
 TRICUSPID VALVE & PULMONARY VALVES : normal.
 Trivial TR, PPG = 17 mmHg. PA Pressure = 22 mmHg.
 No PH.
 No pericardial effusion.
 M- MODE :

AORTA	LA	LVI DD	LVIDS	IVS	PW	LVEF
31mm	32mm	51mm	26mm	11mm	11mm	60%

IMP : **Normal LV Systolic function. EF-60%.**
No diastolic dysfunction
No RWMA at rest
Normal Valves and Chambers
IAS & IVS Intact
No clot / vegetation / thrombus / pericardial effusion.



DR. KEDAR KULKARNI
DNB(MEDICINE), DNB(CARDIOLOGY)
CONSULTANT INTERVENTIONAL CARDIOLOGIST

24-Jan-2023 9:05

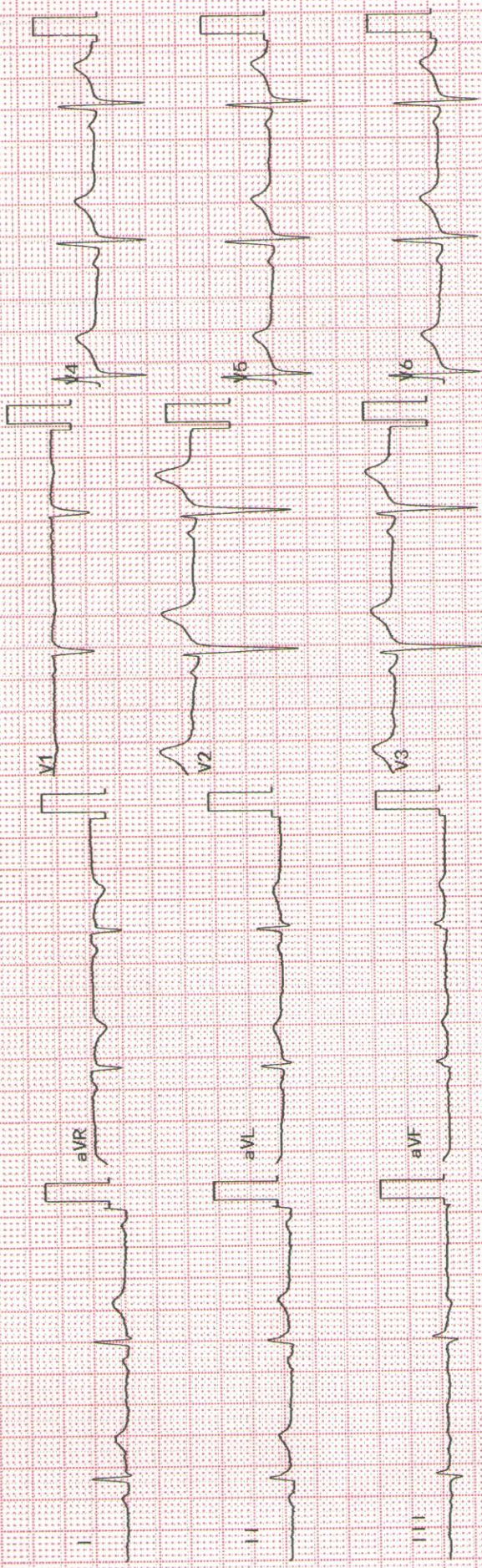
MR. TAIBUJE VISHNU
Ref: PS004067-Reg-OPS00002934
54.11.9/M - NH - 24/01/2023
P00000476993.

Name: vishnu
Sex: M
Birth date: /
mmHg
54 years
1100 Sinus rhythm
4636 Possible inferior injury or acute infarct
9150 ** abnormal ECG **

Medication:
Symptoms:
History:
Vent. rate 67 bpm
PR int 144 ms
QRS dur 86 ms
QT/QTc(E) int 386/402 ms
P/QRS/T axis 19/ 18/ 28
RV5/SV1 amp 0.84/ 0.66 mV
RV5+SV1 amp 1.50 mV

Unconfirmed Report
Reviewed by:

10 mm/mV 25 mm/s Filter: H50 D 35 Hz 10 mm/mV 10 mm/mV



Rhythm [11] 10 mm/mV