

Name : Mr. DILIP NASKAR (56 /M)

Date : 14/12/2022

Address :

Examined by: Dr .JHUMA BAGCHI

UHID : AMHL.0002059452

Package : MEDI WHEEL FULL BODY HCK - MALE (ABOVE 40 YRS WITH TMT/ECHO)

AHC No : AMHLAH162865



CHIEF COMPLAINTS

No specific complaints

PRESENT KNOWN ILLNESS

No history of - Diabetes mellitus,
Hypertension, Dyslipidemia,
Thyroid disorder



DRUG ALLERGY

NO KNOWN ALLERGY :14/12/2022



SYSTEMIC REVIEW

Cardiovascular system

- Nil Significant

Respiratory system

- Nil Significant

Gastrointestinal system

- Nil Significant

Genitourinary system

- Nil Significant

Central nervous system

- Nil Significant

Eyes

- Nil Significant

ENT

- Nil Significant

Skin

- Nil Significant



Past medical history

Past medical history - nil significant



Personal history

Marital status - Married
No. of children - 2
Diet - Non Vegetarian
Alcohol - does not consume alcohol
Smoking - No
Chews tobacco - Yes
Physical activity - Mild



Family history

Father - has expired
Mother - alive
Brothers - 4
Coronary artery disease - none
Cancer - None

PHYSICAL EXAMINATION



General

Build - over weight
Height - 162
Weight - 73
BMI - 27.82
Pallor - No
Oedema - no



Cardiovascular system

Heart rate (Per minute) - 78
Rhythm - Regular
- B.P. Sitting
Systolic(mm of Hg) - 124
Diastolic(mm of Hg) - 80
Heart sounds - S1S2+

Respiratory system

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Breath sounds - Normal vesicular breath sounds

 **Abdomen**

Organomegaly - No

Tenderness - No

 **Central nervous system**

- No neurological deficit

Printed By : Benazir Begaum

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COMPLETE HAEMOGRAM PROFILE

Test Name	Result	Unit	Level	Range
Hemoglobin	13.0	g/dl	●	13.0-17.0
RBC COUNT	4.32 *	Million/ ul	●	4.5-5.5
Hematocrit - Hct:	38.7 *	%	●	41-53
MCV	89.6	fl	●	83-101
MCH	30.1	pg	●	27-32
MCHC	33.6	%	●	31.5-34.5
RDW	14.2 *	%	●	11.8-14.0
WBC Count	2400 *	/cu mm	●	4000-10000
Platelet Count	0.95 *	lacs/cu mm	●	1.5-4.0
Neutrophils	54	%	●	40-80
Lymphocytes	34	%	●	20-40
Monocytes	07	%	●	2-10
Eosinophils	05	%	●	01-06
Basophils	00	%	●	0-0
RBC:	Normocytic Normochromic cells			
WBC:	Leucopenia noted			
ERYTHROCYTE SEDIMENTATION RATE (ESR)	28 *	mm/1st hr	●	0-15

URINE ROUTINE AND MICROSCOPY

Test Name	Result	Unit	Level	Range
Volume:	40	mL		
Colour:	Pale Straw			
Appearance	Clear			
Specific Gravity	1.020			
pH:	6.0			
Albumin:	Not Detected			
Glucose	Not Detected			
Ketone:	Not Detected			
Bile Pigments	Not Detected			
RBC	Nil	/hpf		

Pus Cells	1-2	/hpf
Epithelial Cells	0-2	
Casts:	Not Found	
Crystals:	Not Found	
Note	Biological reference interval RBC- 0-2/hpf Pus Cell - 0-5/hpf.	

URINE SUGAR - POST PRANDIAL (QUALITATIVE)

Test Name	Result	Unit	Level	Range
URINE GLUCOSE(POST PRANDIAL)	Nil			

URINE SUGAR- FASTING(QUALITATIVE)

Test Name	Result	Unit	Level	Range
URINE GLUCOSE(FASTING)	Nil			

BLOOD GROUPING AND TYPING (ABO AND RH)

Test Name	Result	Unit	Level	Range
ABO Group:	B			
Rh (D) Type:	POSITIVE			

LIVER FUNCTION TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
ALT(SGPT) - SERUM	48 *	U/L	●	10-40
ALBUMIN - SERUM	4.5	g/dL	●	3.5-5.1
ALKALINE PHOSPHATASE - SERUM	108	U/L	●	53-128
AST (SGOT) - SERUM	34	U/L	●	10-42
BILIRUBIN TOTAL - SERUM	1.9 *	mg/dL	●	0.0-1.0

LIPID PROFILE TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
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● Within Normal Range ● Borderline High/Low ● Out of Range

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CHOLESTEROL - SERUM 222 * mg/dL ● 0-200

VLDL CHOLESTEROL - SERUM (Calculated) 40 * mg/dL ● 0-35

CREATININE - SERUM

Test Name Result Unit Level Range
CREATININE - SERUM 0.9 mg/dL ● 0.9-1.3

LIVER FUNCTION TEST (PACKAGE)

Test Name Result Unit Level Range
PROTEIN TOTAL - SERUM 7.3 g/dL ● 6.4-8.3
GLOBULIN: (CALCULATED) - SERUM 2.8 g/dL ● 1.8-3.6

LIVER FUNCTION TEST (PACKAGE)

Test Name Result Unit Level Range
GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM 22 U/L ● 7-64

THYROID PROFILE - I(T3,T4 AND TSH)

Test Name Result Unit Level Range
TOTAL T3: TRI IODOTHYRONINE - SERUM 1.0 ng/ml ● 0.8-2
TOTAL T4: THYROXINE - SERUM 8.4 µg/dL ● 5.1-14.1

GLUCOSE - PLASMA (FASTING)

Test Name Result Unit Level Range
GLUCOSE - PLASMA (FASTING) 110 * mg/dL ● 70-99

LIPID PROFILE TEST (PACKAGE)

Test Name Result Unit Level Range
TRIGLYCERIDES - SERUM 211 * mg/dL ● 0-150

GLUCOSE - PLASMA (POST PRANDIAL)

Test Name Result Unit Level Range
GLUCOSE - PLASMA (POST PRANDIAL) 121 mg/dL ● 70-140

THYROID PROFILE - I(T3,T4 AND TSH)

Test Name Result Unit Level Range
TSH: THYROID STIMULATING HORMONE - SERUM 2.9 µIU/mL ● 0.270-4.200

HBA1C (GLYCOSYLATED HAEMOGLOBIN)-WHOLE BLOOD

Test Name Result Unit Level Range
HBA1C (GLYCOSYLATED HAEMOGLOBIN)-WHOLE BLOOD 5.2 % ●
Nondiabetic : 4 - 5.6 %
Prediabetics : 5.7 - 6.4%
Diabetes : >= 6.5%
ADA Therapeutic goal : <7%

URIC ACID - SERUM

Test Name Result Unit Level Range
URIC ACID - SERUM 5.7 mg/dL ● 3.5-7.2

LIPID PROFILE TEST (PACKAGE)

Test Name Result Unit Level Range
HDL CHOLESTEROL - SERUM 42 mg/dL ● 30-70

LIVER FUNCTION TEST (PACKAGE)

Test Name Result Unit Level Range
BILIRUBIN CONJUGATED (DIRECT) - SERUM 0.2 mg/dL ● 0.0-0.2

LDL CHOLESTEROL -SERUM 140 * mg/dL ● Optimal: <100

PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL) - SERUM

Test Name Result Unit Level Range

● Within Normal Range ● Borderline High/Low ● Out of Range

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PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL) - SERUM 0.48 ng/mL ● 0.00-6.50

BUN (BLOOD UREA NITROGEN)

Test Name	Result	Unit	Level	Range
BUN (BLOOD UREA NITROGEN)	7.0	mg/dL	●	7.0-18.0

LIVER FUNCTION TEST (PACKAGE)

Test Name	Result	Unit	Level	Range
A/G - RATIO	1.6		●	1.0-2.0

ECG

SINUS BRADYCARDIA. OTHERWISE WITHIN NORMAL LIMITS.

TREADMILL TEST / STRESS TEST

STRESS TEST IS NEGATIVE FOR PROVOCABLE MYOCARDIAL ISCHAEMIA.

ULTRASOUND SCREENING WHOLE ABDOMEN

* Grade-I fatty liver.

Dr. WERASAT ALI
MBBS, DNB (RADIOLOGIST)
CONSULTANT RADIOLOGIST
Reg. No- 73873 (WBMC)

X-RAY CHEST PA

Chest skiagram does not reveal any significant abnormality.

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INVESTIGATIONS NOT DONE / NOT YET REPORTED / NOT PART OF PACKAGE(LAB,RADIOLOGY & CARDIOLOGY)

Haematology

STOOL ROUTINE

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Dr.JHUMA BAGCHI

AHC Physician / Consultant Internal Medicine

Printed By :

Note :- The Health Check-up examinations and routine investigations have certain limitations and may not be able to detect all the diseases. Any new or persisting symptoms should be brought to the attention of the Consulting Physician. Additional tests, consultations and follow up may be required in some cases.