



BHAILAL AMIN  
GENERAL HOSPITAL



### CONCLUSION OF HEALTH CHECKUP

ECU Number	: 283	MR Number	: 21588469	Patient Name	: AMIT KUMAR
Age	: 33	Sex	: Male	Height	: 172
Weight	: 72	Ideal Weight	: 68	BMI	: 24.34
Date	: 19/11/2022				

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.



# BHAILAL AMIN GENERAL HOSPITAL



ECU Number : 283                      MR Number : 21588469              Patient Name: AMIT KUMAR  
Age : 33                                      Sex : Male                                      Height : 172  
Weight : 72                                      Ideal Weight : 68                                      BMI : 24.34  
Date : 19/11/2022

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

Present H/O : NO MEDICAL COMPLAIN AT PRESENT

Family H/O : NO F/H/O ANY MAJOR ILLNESS

Habits : NO HABITS

Gen.Exam. : G.C.GOOD

B.P : 110/70 mm HG

Pulse : 68/MIN REG

Others : SPO2-98%

C.V.S : CLINICALLY NAD

R.S. : CLINICALLY NAD

Abdomen : NP

Spleen : NP

Skin : NAD

C.N.S : NAD

Advice :



# BHAILAL AMIN GENERAL HOSPITAL



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MR Number : 21588469  
Sex : Male  
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Patient Name : AMIT KUMAR  
Height : 172  
BMI : 24.34

### Ophthalmic Check Up :

Right

Left

Ext Exam

NORMAL

Vision Without Glasses

6/6 N.5

6/6 N.5

Vision With Glasses

.

.

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

Dietary Assessment

ECU Number : 283 MR Number : 21588469 Patient Name: AMIT KUMAR  
Age : 33 Sex : Male Height : 172  
Weight : 72 Ideal Weight : 68 BMI : 24.34  
Date : 19/11/2022

Body Type : Normal / Underweight / Overweight  
Diet History : Vegetarian / Eggetarian / Mixed

Frequency of consuming fried food : / Day / Week or occasional

Frequency of consuming Sweets : / Day / or occasional

Frequency of consuming outside food : / Day / Week or occasional

Amount of water consumed / day : Glasses / liters

Life style assessment :

Physical activity : Active / moderate / Sedentary / Nil

Alcohol intake : Yes / No

Smoking : Yes / No

Allergic to any food : Yes / No

Are you stressed out ? : Yes / No

Do you travel a lot ? : Yes / No

General diet instructions :

Have small frequent meals.

Avoid fatty products like oil, ghee, butter, cheese.

Take salt restricted diet and avoid table salt.

Consume fibrous food regularly like whole grains, Daliya, Oats, Bajra, Flex seeds, Pulses, Fruits and Salads.

Keep changing your cooking oil every three months.

Avoid Maida, Starchy foods and Bakery products.

Consume 1-2 servings of all fruits and vegetables, For Diabetic patients avoid Mango, Chikoo, Banana, Grapes and Custurd apple

Dring 3 to 4 liters (12 - 14 glass) of water daily.

Eat Beetroots, Figs, Almond, Walnut, Dates, Leafy vegetables, roasted Channa and Jeggary (Gur) for Heamoglobin in case of diabetic patient avoid Rasins, Dates and Jeggary

Drink green Tea or black Coffee once in a day.

Do brisk walking daily.



Patient Name : Mr. AMIT KUMAR  
 Gender / Age : Male / 33 Years 4 Months 12 Days  
 MR No / Bill No. : 21588469 / 231048342  
 Consultant : Dr. Manish Mittal  
 Location : OPD

Type : OPD  
 Request No. : 87365  
 Request Date : 19/11/2022 08:49 AM  
 Collection Date : 19/11/2022 09:05 AM  
 Approval Date : 19/11/2022 02:36 PM

**CBC + ESR**

Test	Result	Units	Biological Ref. Range
<i>Haemoglobin.</i>			
Haemoglobin	14.6	gm/dL	13 - 17
Red Blood Cell Count (T-RBC)	4.86	mill/cmm	4.5 - 5.5
Hematocrit (HCT)	44.1	%	40 - 50
Mean Corpuscular Volume (MCV)	90.7	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	30.0	pg	27 - 32
MCH Concentration (MCHC)	33.1	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	12.6	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	42.6	fl	39 - 46
<i>Total Leucocyte Count (TLC)</i>			
Total Leucocyte Count (TLC)	5.76	thou/cmm	4 - 10
<i>Differential Leucocyte Count</i>			
Polymorphs	57	%	40 - 80
Lymphocytes	34	%	20 - 40
Eosinophils	3	%	1 - 6
Monocytes	6	%	2 - 10
Basophils	0	%	0 - 2
Polymorphs (Abs. Value)	3.30	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	1.97	thou/cmm	1 - 3
Eosinophils (Abs. Value)	<b>0.12</b>	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.35	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.02	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.0	%	1 - 3 : Borderline > 3 : Significant
<i>Platelet Count</i>			
Platelet Count	260	thou/cmm	150 - 410
Smear evaluation	Adequate		
ESR	2	mm/1 hr	0 - 10

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)



BHAILAL AMIN  
GENERAL HOSPITAL

ESTD. 1964

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name	: Mr. AMIT KUMAR	Type	: OPD
Gender / Age	: Male / 33 Years 4 Months 12 Days	Request No.	: 87365
MR No / Bill No.	: 21588469 / 231048342	Request Date	: 19/11/2022 08:49 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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GENERAL HOSPITAL

**DEPARTMENT OF LABORATORY MEDICINE**

Patient Name : Mr. AMIT KUMAR  
Gender / Age : Male / 33 Years 4 Months 12 Days  
MR No / Bill No. : 21588469 / 231048342  
Consultant : Dr. Manish Mittal  
Location : OPD

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Approval Date : 19/11/2022 01:04 PM

### Haematology

Test	Result	Units	Biological Ref. Range
<b>Blood Group</b>			
ABO system	O		
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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DEPARTMENT OF LABORATORY MEDICINE

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**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	87	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	101	mg/dL	70 - 140

By Hexokinase method on RXL Dade Dimesion

---- End of Report ----

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**HbA1c (Glycosylated Hb)**

Test	Result	Units	Biological Ref. Range
<b>HbA1c (Glycosylated Hb)</b>			
Glycosylated Heamoglobin (HbA1c)	5.5	%	
estimated Average Glucose (e AG) *	111.15	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)

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**Liver Function Test (LFT)**

Test	Result	Units	Biological Ref. Range
<b>Bilirubin</b>			
Bilirubin - Total	0.34	mg/dL	0 - 1
Bilirubin - Direct	0.11	mg/dL	0 - 0.3
Bilirubin - Indirect	0.23	mg/dL	0 - 0.7
<i>(By Diazotized sulfanilic acid on RXL Dade Dimension.)</i>			
Aspartate Aminotransferase (SGOT/AST)	16	U/L	15 - 40
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alanine Aminotransferase (SGPT/ALT)	45	U/L	16 - 63
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alkaline Phosphatase	94	U/L	53 - 128
<i>(BY PNPP AMP method on RXL Dade Dimension.)</i>			
Gamma Glutamyl Transferase (GGT)	25	U/L	15 - 85
<i>(By IFCC method on RXL Dade Dimension.)</i>			
<b>Total Protein</b>			
Total Proteins	6.98	gm/dL	6.4 - 8.2
Albumin	3.84	gm/dL	3.4 - 5
Globulin	3.14	gm/dL	3 - 3.2
A : G Ratio	1.22		1.1 - 1.6
<i>(By Biuret endpoint and Bromocresol purple method on RXL Dade Dimension.)</i>			

--- End of Report ---

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**Complete Lipid Profile**

Test	Result	Units	Biological Ref. Range
<b>Complete Lipid Profile</b>			
Appearance	Clear		
Triglycerides	91	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	184	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	54	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)	130	mg/dL	1 - 130
<i>(Non- HDL Cholesterol)</i>			
< 130 Desirable			
139-159 Borderline High			
160-189 High			
> 191 Very High			
LDL Cholesterol	<b>111</b>	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)	18.2	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	2.06		2.1 - 3.5
T. Ch./HDL Ch. Ratio	<b>3.41</b>		3.5 - 5
<i>(Recent NECP / ATP III Guidelines / Classification (mg/dl) :)</i>			

---- End of Report ----

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## Thyroid Hormone Study

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

Triiodothyronine (T3)	0.879	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)	6.61	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)	1.28	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 ---

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## Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea (By Urease Kinetic method on RXL Dade Dimension)	23	mg/dL	10 - 45
Creatinine (By Modified Kinetic Jaffe Technique)	0.89	mg/dL	0.9 - 1.3
Estimate Glomerular Filtration rate (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)	More than 60		
Uric acid (By Uricase / Catalase method on RXL Siemens)	4.7	mg/dL	3.4 - 7.2

--- End of Report ---

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**Urine routine analysis (Auto)**

Test	Result	Units	Biological Ref. Range
<b>Physical Examination</b>			
Quantity	30	mL	
Colour	Pale Yellow		
Appearance	Clear		
<b>Chemical Examination (By Reagent strip method)</b>			
pH	6.0		
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
Bile Salt	Absent		Absent
Leucocytes	Negative		Negative
Bile Pigments	Absent		Absent
Nitrite	Negative		Negative
<b>Microscopic Examination (by Microscopy after Centrifugation at 2000 rpm for 10 min or on fully automated Sysmex urine sedimentation analyzer UF4000)</b>			
Red Blood Cells	0.0 - 1.0	/hpf	0 - 2
Leucocytes	0.0 - 1.0	/hpf	0 - 5
Epithelial Cells	0.0 - 1.0	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil	/hpf	Nil
Mucus	Absent	/hpf	Absent
Organism	Absent		

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**DEPARTMENT OF DIAGNOSTIC RADIOLOGY**

Patient No. : 21588469      Report Date : 19/11/2022  
Request No. : 190042032      19/11/2022 8.49 AM  
Patient Name : **Mr. AMIT KUMAR**  
Gender / Age : Male / 33 Years 4 Months 12 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 ASNORMALITIES  
• NOT VALID FOR MEDICO-LEGAL PURPOSES  
• CLINICAL CORRELATION RECOMMENDED

**Dr. Priyanka Patel, MD**  
Consultant Radiologist





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**DEPARTMENT OF DIAGNOSTIC RADIOLOGY**

Patient No. : 21588469      Report Date : 19/11/2022  
Request No. : 190042027      19/11/2022 8.49 AM  
Patient Name : Mr. AMIT KUMAR  
Gender / Age : Male / 33 Years 4 Months 12 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

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

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

Gall bladder is well distended and shows no obvious abnormality. 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 seen. **Left kidney shows upper & mid pole calculi measures 2-3 mm**

Prostate appears normal in size and volume is ~ 9 cc. Prostate measures 25mm x 22mm x 30mm.

Urinary bladder is well distended and appears normal.

No ascites.

**COMMENT:**

**Left renal calculi.**

*Kindly correlate clinically*

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

*Prerna C Hasani*

**Dr. Prerna C Hasani, MD**  
Consultant Radiologist





*Fee*

Patient No. : 21588469      Report Date : 19/11/2022  
Request No. : 190042038      19/11/2022 8.49 AM  
Patient Name : **Mr. AMIT KUMAR**  
Gender / Age : Male / 33 Years 4 Months 12 Days

### Echo Color Doppler

MITRAL VALVE : NORMAL, NO MS, NO MR  
AORTIC VALVE : TRILEAFLET, NO AS, NO AR  
TRICUSPID VALVE : NORMAL, NO 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 : NO MR // AR // TR, NO PAH

#### FINAL CONCLUSION:

1. NORMAL SIZED ALL CARDIAC CHAMBERS, NO LVH
2. NORMAL LV SYSTOLIC FUNCTION LVEF - 60%
3. NO RESTING REGIONAL WALL MOTION ABNORMALITY
4. NORMAL ALL CARDIAC VALVES STRUCTURALLY AND FUNCTIONALLY
5. NO MITRAL / AORTIC STENOSIS, INTACT IAS // IVS
6. NORMAL RIGHT HEART SIZE AND RV PRESSURES
7. NO PERICARDIAL EFFUSION, CLOT OR VEGETATION SEEN, SR+.

  
DR. K. L. KANERIA, M.D., D.M., CARD.

21588469  
33 Years

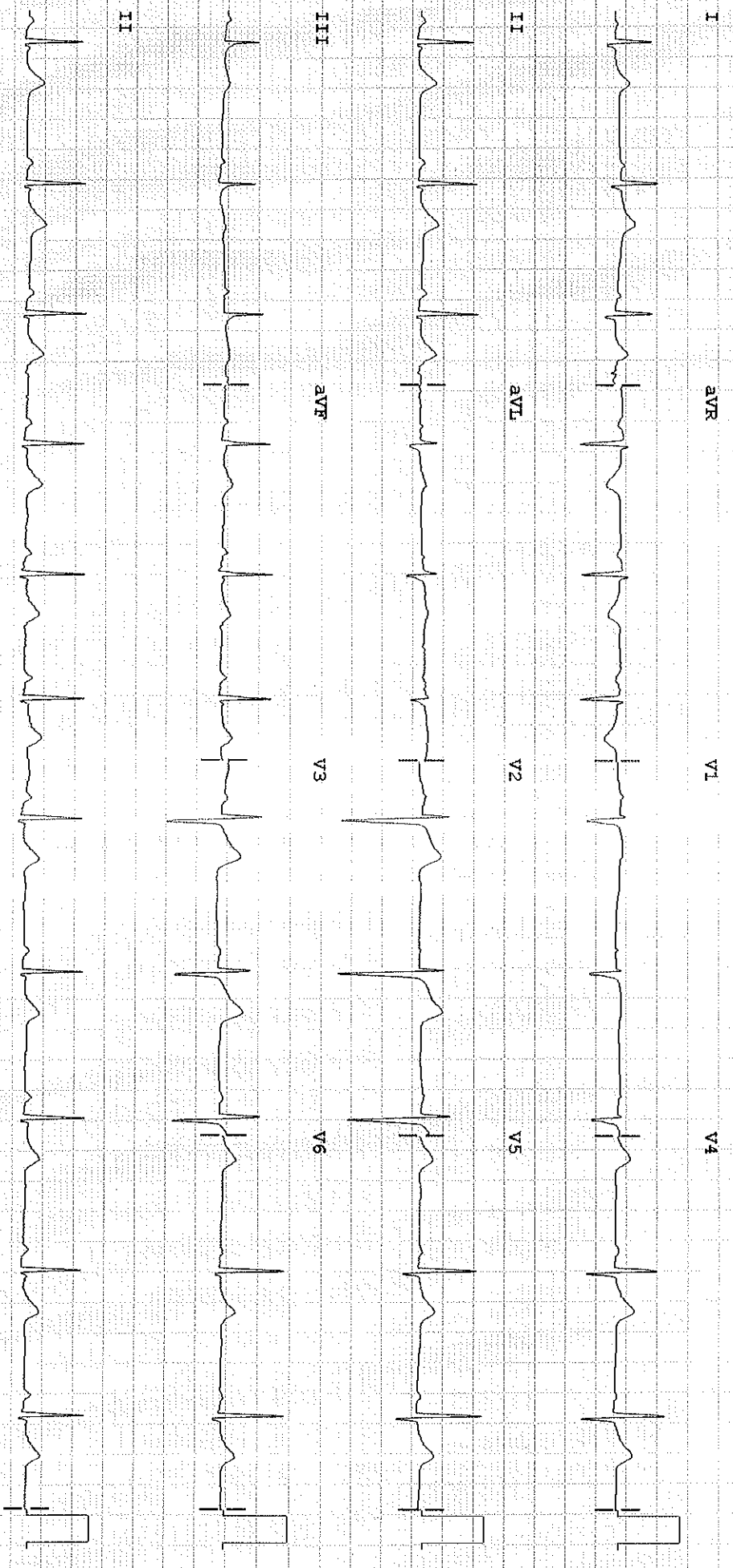
19-Nov-22 10:57:39 AM AMIT KUMAR  
Male



Doctor DR M MITTAL

Rate 66  
PR 156  
QRSD 80  
QT 388  
QTc 406

--AXIS--  
P 57  
QRS 66  
T 48



Dev:

Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10 mm/mV

F 50 ~ 0.5-150 Hz W

PH08

P2