


Patient Name : MR. NIRMESH PRAJAPATI  
Age / Sex : 37Y/Male  
IP/Req.No/UHID : Req-10845 /UHID10845  
Lab No : LA24004695  
Referred By : Dr.SAMANVAY HOSPITAL  
Bedcategory/Bed :  
Mobile No : 9879795419  
UHID : UHID10845  
Consultant : Mr. Samanvay Hospital  
Sponsor : **MEDIWHEEL**  
Barcode No. : **26888.26889.26890.26891**

Bill No : OPB/1/24/3843  
Sample Collected : Jun 20 2024 11:12AM  
Sample Received : Jun 20 2024 11:14AM  
Report On : Jun 20 2024 11:16AM  
Bill Creation Date: Jun 20 2024 10:56AM  
Bar Code :   
Req No : Req-10845  
IPNo :  
Passport No. :  
Verified On : **Jun 20 2024 12:24PM**

### Test Name

### Results

### Units

### Biological Reference

#### BIOCHEMISTRY

BUN CREATININE RATIO(CALCULATED)	↓ 9.0	mg/dl	10.0 - 20
SGOT/SGPT RATIO(CALCULATED)	0.78	U/L	0.0 - 2.0
CALCIUM (TOTAL)(ARSENAZO)	10.1	mg/dl	8.6 - 10.2
PHOSPHOROUS	3.77	mg/dl	2.5 - 4.5

#### MICRO

#### URINE ANALYSIS

##### PHYSICAL EXAMINATION

VOLUME	30 ML
COLOUR	PALE YELLOW
APPEARANCE	CLEAR

##### CHEMICAL EXAMINATION

PH	5.5		4.5 - 8.0
SPECIFIC GRAVITY	1.025		1.000 - 1.030
PROTEIN	Negative		
GLUCOSE	Negative		
KETONE	Negative		
BLOOD	POSITIVE(+)		
UROBILINOGEN	Negative		
BILE PIGMENTS	Negative		
BILE SALT	Negative		
NITRITE	Negative		
LEUKOCYTE ESTERASE	Negative		

##### MICROSCOPIC EXAMINATION

PUS CELLS	↑ 6-8	CELLS/HPF	0 - 5
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Dr. Sweta Patel  
MD (Pathology)


Mr. Sandip Rathva

Prepared by

Verified By

Nr. St. Kabir School, Opp. Raneshwar Temple, Vasna Road, Vadodara-15

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Test Name	Results	Units	Biological Reference
RBC	↑ 8-10	RBC'S/HPF	0 - 2
EPITHELIAL CELLS	↑ 6-8	OCC/HPF	0 - 5
CASTS	NIL		
CRYSTALS	NIL		
<b>BIOCHEMISTRY</b>			
<b>FASTING BLOOD GLUCOSE*</b>			
FASTING BLOOD GLUCOSE(FBS)(GOD-POD)	96.8	mg/dl	74.0 - 100.0
FASTING URINE GLUCOSE	NIL		
<b>HPLC</b>			
<b>HBA1C/ GLYOCO HB</b>			
GLYCOCYLATED HAEMOGLOBIN(HBA1C)(HPLC)	5.3		4.0 - 6.0
AVERAGE BLOOD SUGAR	105.4	mg/dl	0 - 140.0
<b>IMMUNOLOGY</b>			
<b>T3 T4 TSH</b>			
TOTAL T3(CHEMILUMINESCENCE / CLIA)	2.28	ng/ml	0.19 - 6.51
TOTAL T4(CHEMILUMINESCENCE / CLIA)	8.63	ug/dl	4.5 - 12.7
TSH(CHEMILUMINESCENCE / CLIA)	2.81	μIU/mL	0.35 - 4.78

Interpretation : 1. TSH results between 4.5 to 15.0 show considerable physiologic and seasonal variation, suggest clinical correlation or repeat testing with fresh sample.  
2. TSH results between 0.1 to 0.45 requires correlation with patient age and clinical symptoms. As with increasing age, there are marked changes in thyroid hormone production, metabolism and its action resulting in an increase prevalence of sub-clinical thyroid disease.  
3. TSH values may be transiently altered because of non- thyroidal illness like severe infections, liver diseases, renal and heart failure, severe burns, trauma and surgery etc.  
4. Drugs that decreased TSH values e.g. L-dopa, glucocorticoid. Drugs that increase TSH values e.g. Iodine, Lithium and amiodarone.

**BIOCHEMISTRY**

**LIPID PROFILE**

Mr. Sandip Rathva




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Test Name	Results	Units	Biological Reference
CHOLESTROL (TOTAL)(CHOD-PAP)	196.0	mg/dl	0.0 - 200.0 Desirable blood cholesterol : <200 mg/dl Borderline high blood cholesterol : 200-239 mg/dl High blood cholesterol : >239 mg/dl
TRIGLYCERIDE(GPO-METHOD)	111.6	mg/dl	0 - 161.0 NORMAL : <161 MG/DL HIGH : 161-199 MG/DL HYPERTRIGLYCERIDEMIC : 200-499 MG/DL
HDL CHOLESTEROL(DIRECT METHOD)	46.0	mg/dl	35.3 - 79.5
CHOLESTROL (TOTAL)/HDL RATIO(CALCULATED)	4.26		3.30 - 4.40
VLDL	22.3		0 - 30.0
LDL CHOLESTEROL(CALCULATED)	↑ <b>150.0</b>		0 - 130.0
LDL/HDL RATIO	3.26		
URIC ACID	4.4	mg/dl	3.5 - 7.2
BUN(UREASE-GLDH)	9.90	mg/dl	5.0 - 21.0
CREATININE (BLOOD)(ENZYMATIC)	1.09	mg/dl	0.7 - 1.3
<b>LIVER FUNCTION TEST</b>			
BILIRUBIN-TOTAL(DIAZO)	0.64	mg/dl	0.00 - 2.0
BILIRUBIN-DIRECT(DIAZO)	0.31	mg/dl	0.00 - 0.4
BILIRUBIN-INDIRECT(DIAZO)	0.33	mg/dl	0.00 - 1.10
SGOT(IFCC WITHOUT PYRIDOXAL PHOSPHATE)	21.7	U/L	0 - 35
SGPT	27.7	U/mL	0 - 45
ALKALINE PHOSPHATASE(ALKP04)* (AMP-METHOD)	↓ <b>49.0</b>	U/L	53 - 128

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Test Name	Results	Units	Biological Reference
PROTEIN (SERUM)(BIURET)	6.81	g/dl	6.4 - 8.3
ALBUMIN(BCG)	4.31	g/dl	3.5 - 5.2
GLOBULIN(CALCULATED)	2.50	g/dl	2.3 - 3.7
A/G RATIO(CALCULATED)	1.72	Ratio	1.0 - 2.0
GAMMA GT(GLUPA C METHOD)	27.2	U/L	0.0 - 58.0

#### IMMUNOLOGY

VITAMIN B 12(CHEMILUMINESCENCE / CLIA)	↓ <b>156.46</b>	pg/mL	180.0 - 914.0
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- Interpretation :
- Vitamin B12 levels are decreased in megaloblastic anemia, partial/total gastrectomy, pernicious anemia, peripheral neuropathy , chronic alcoholism, senile dementia and treated epilepsy.
  - An associated increase in homocysteine level in an independent risk marker for cardio vascular disease and deep vein thrombosis.
  - Holo transcobalamin II levels are more accurate marker of active Vitamin B 12 component.

#### HEMATOLOGY

##### CBC WITH ESR

##### RBCS PARAMETER

HAEMOGLOBIN(SLS METHOD)	14.7	g/dl	13.0 - 17.0
RBC COUNT(IMPEDENCE)	↓ <b>4.41</b>	10 <sup>6</sup> /uL	4.50 - 5.50
PCV (HEMATOCRIT)(IMPEDENCE)	43.5	%	40.0 - 50.0
MCV(CALCULATED)	98.6	fl	80.0 - 100.0
MCH(CALCULATED)	↑ <b>33.3</b>	pg	27.0 - 33.0
MCHC(CALCULATED)	33.8	g/dl	32.0 - 36.0
RDW-CV(PARTICLE COUNTER(CALCULATED))	12.8	%	11.6 - 14.0
RDW-SD(PARTICLE COUNTER(CALCULATED))	↑ <b>47.0</b>	fl	39 - 46

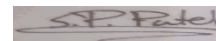
##### WBCS PARAMETER

TOTAL COUNT(FLOW CYTOMETRY)	7480	/uL	4000 - 10000
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##### DLC

NEUTROPHILS(FLOW CYTOMETRY)	59	%	40 - 70
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Test Name	Results	Units	Biological Reference
LYMPHOCYTES(FLOW CYTOMETRY)	33	%	20 - 40
MONOCYTES(FLOW CYTOMETRY)	04	%	2 - 8
EOSINOPHILS(FLOW CYTOMETRY)	04	%	1 - 4
BASOPHILS(FLOW CYTOMETRY)	00	%	0.0 - 1.0
ABSOLUTE NEUTROPHIL COUNT(CALCULATED)	4420.0	10 <sup>3</sup> /uL	2000.0 - 7000.0
ABSOLUTE LYMPHOCYTE COUNT(CALCULATED)	2380.0	10 <sup>3</sup> /uL	1000.0 - 3000.0
ABSOLUTE MONOCYTE COUNT(CALCULATED)	310.0	10 <sup>3</sup> /uL	200.0 - 1000.0
ABSOLUTE EOSINOPHIL COUNT(CALCULATED)	320.0	10 <sup>3</sup> /uL	20.0 - 500.0
<b>PLATELETS PARAMETER</b>			
PLATELET COUNT(IMPEDENCE)	383000	/uL	150000 - 450000
MPV(IMPEDENCE)	8.4	fl	8.0 - 13.0
PDW(IMPEDENCE)	↓ 8.6	fl	9.0 - 17.0
ESR	12	mm/hr	0 - 20
BLOOD GROUP RH	"B" POSITIVE		

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

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# SAMANVAY HOSPITAL VADODARA

**NIRMESH PRAJAPATI (37 M)**

Bruce Protocol

ID: 9526

Date: 20-06-2024

Exec Time: 0:00:00

Stage Time: 04:15

HR: 92 bpm

BP: 120/80 mmHg

STLevel(mm) STSlope(mV/s)

Stage: Standing

Speed: 0 km/h

Slope: 0%

THR: 155 bpm

STLevel(mm) STSlope(mV/s)

0 0.1

I



0.2 0.1

II



0.2 0.1

III



0.1 -0.1

aVR



-0.1 0

aVL



0.2 0.1

aVF



V5



Chart Speed: 25 mm/sec Amplitude: 10mm/mV Filter: 35 Hz Mains Filter: ON ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms Schiller Cardiovit CS-10 Version: 3.4

SAMANVAY HOSPITAL VADODARA

NIRMESH PRAJAPATI (37 M)

Bruce Protocol

ID: 9526

Date: 20-06-2024

Exec Time : 00:00

Stage Time: 03:00

HR: 110 bpm

BP: 120/80 mmHg

Stage: PreTest

Speed: 1.6 kmph

Grade: 0%

THR: 155 bpm

STLevel(mm) STSlope(mV/s)

STLevel(mm) STSlope(mV/s)



Chart Speed: 25 mm/sec Amplitude: 10mm/mV Filter: 35 Hz Mains Filter: ON ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller Cardiovit CS-10 Version:3.4

# SAMANVAY HOSPITAL VADODARA

**NIRMESH PRAJAPATI (37 M)**

ID: 9526

Date: 20-06-2024

Exec Time : 0:03:00

**HR: 140 bpm**

Bruce Protocol

Stage: 1

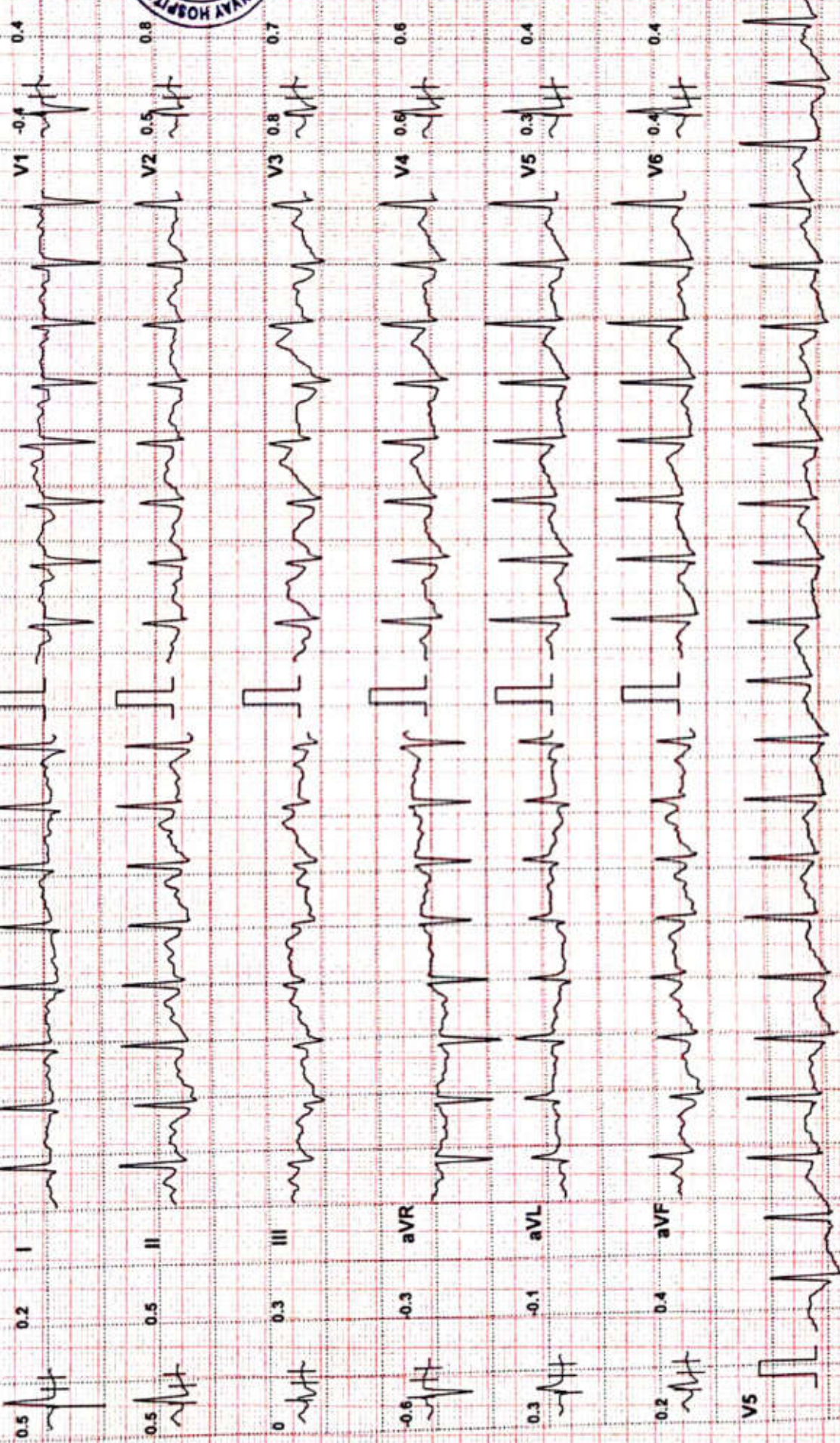
Speed: 2.7 kmph

Slope: 10 %

BP: 130/80 mmHg

STLevel(mm) STSlope(mV/s)

STLevel(mm) STSlope(mV/s)





# SAMANVAY HOSPITAL VADODARA

**NIRMESH PRAJAPATI (37 M)**

ID: 9526

Date: 20-06-2024

Exec Time : 0:06:00

Stage Time: 03:00

**HR: 167 bpm**

Bruce Protocol

Speed: 4 kmph

Slope: 12 %

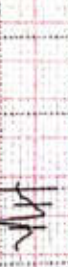
THR: 155 bpm

STLevel(mm) STSlope(mV/s)

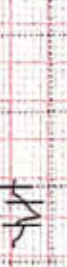
0.3 I



0.3 II



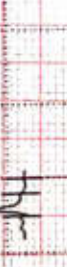
0.4 III



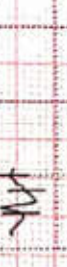
-0.1 aVR



-0.2 aVL



0.4 aVF



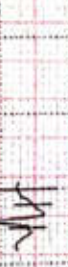
V5



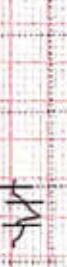
-0.1 V1



0.3 V2



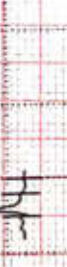
0.4 V3



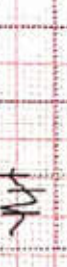
-0.1 V4



-0.2 V5



0.4 V6



# SAMANVAY HOSPITAL VADODARA

**NIRMESH PRAJAPATI (37 M)**

Bruce Protocol

STLevel(mm) STSlope(mV/s)

ID: 9526

Date: 20-06-2024

Exec Time : 0:07:40

Stage Time: 01:40

HR: 186 bpm

BP: 160/90 mmHg

STLevel(mm) STSlope(mV/s)

V1 -0.6 0.2



V2 0.5



V3 -0.4



V4 0.8



V5 0.1



V6 0.5



0.4 I



0.1 II



-0.3 III



-0.3 aVR



0.3 aVL



-0.1 aVF



V5

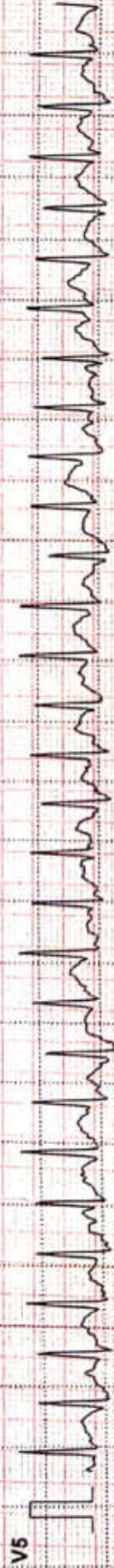


Chart Speed: 25 mm/sec ..... Amplitude: 10mm/mV ..... Filter: 35 Hz Mains Filter: ON ..... ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms ..... Schiller Cardiovit CS-10 Version:3.4

# SAMANVAY HOSPITAL VADODARA

**NIRMESH PRAJAPATI (37 M)**

ID: 9526

**HR: 159 bpm**

Bruce Protocol

Exec Time : 00:00

THR: 155 bpm

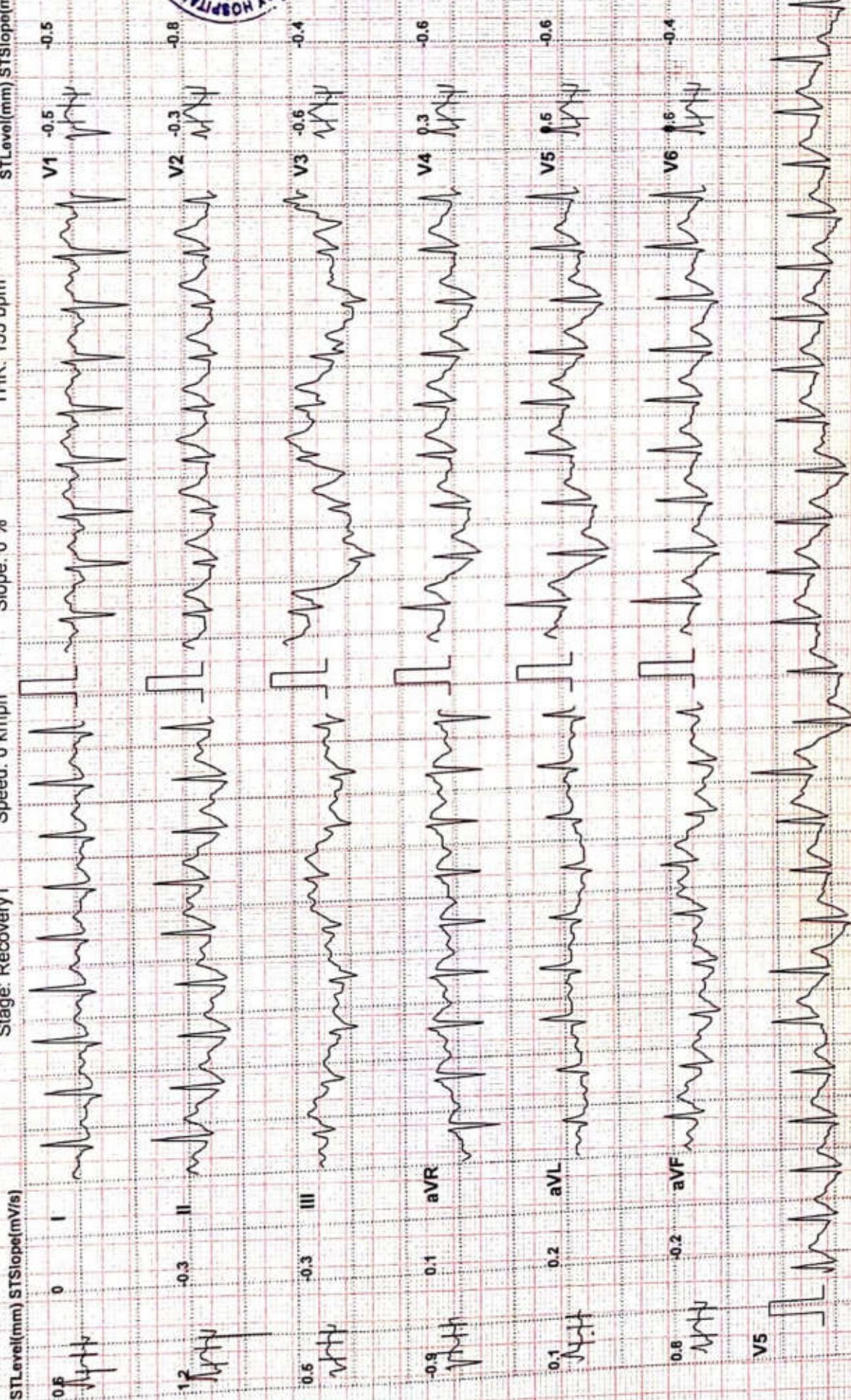
Date: 20-06-2024

Speed: 0 kmph

Stage: Recovery1

Slope: 0 %

STLevel(mm) STSlope(mV/s)



# SAMANVAY HOSPITAL VADODARA

**NIRMESH PRAJAPATI (37 M)**

ID: 9526

Date: 20-06-2024

Exec Time : 00:00

Stage Time: 01:00

HR: 136 bpm

Bruce Protocol

Stage: Recovery2

Speed: 0 kmph

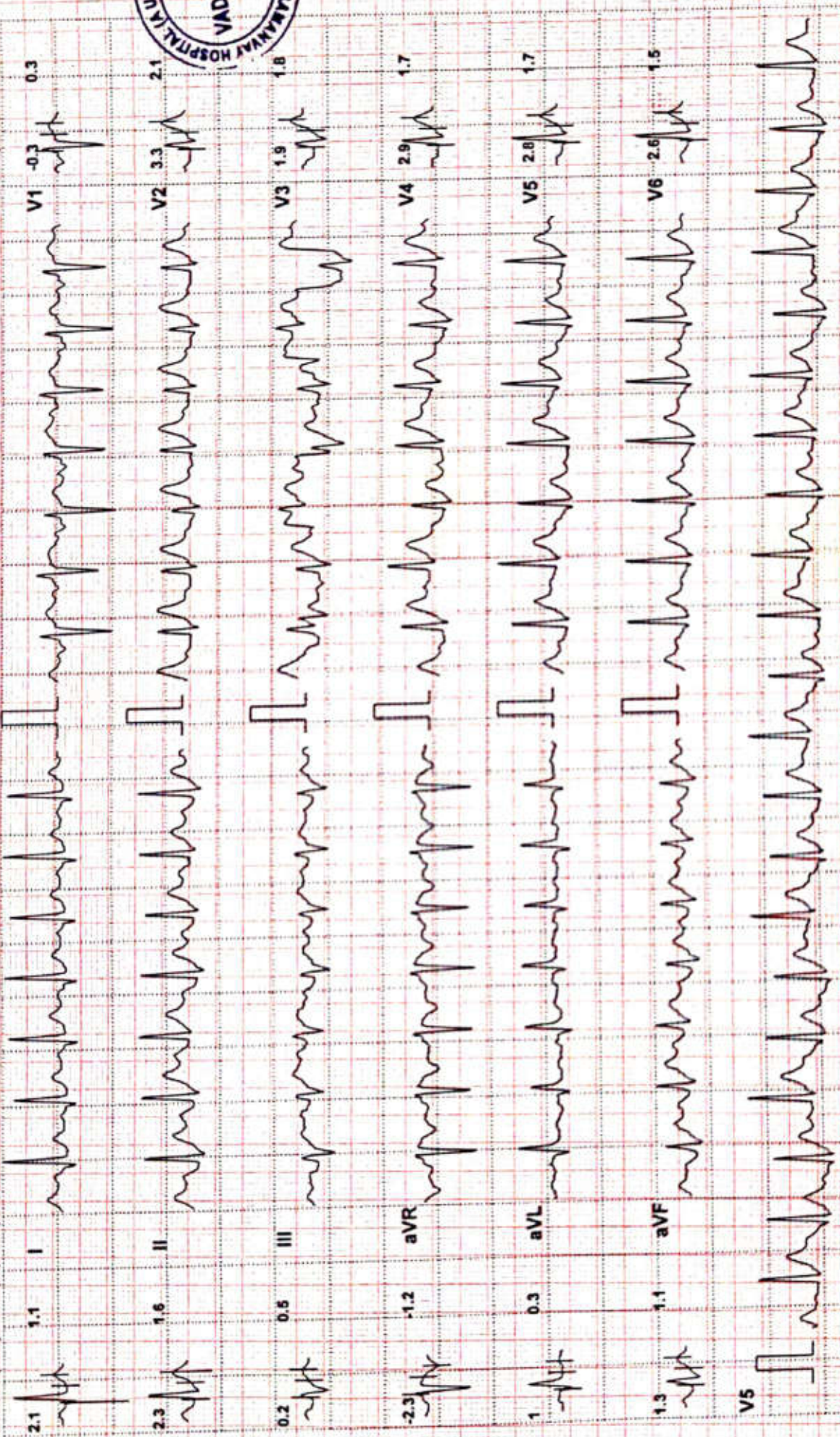
Slope: 0 %

THR: 155 bpm

BP: 160/90 mmHg

STLevel(mm) STSlope(mV/s)

STLevel(mm) STSlope(mV/s)



# SAMANVAY HOSPITAL VADODARA

**NIRMESH PRAJAPATI (37 M)**

ID: 9526

Bruce Protocol

STLevel(mm) STSlope(mV/s)

Date: 20-06-2024

Speed: 0 kmph

Exec Time : 00:00

Slope: 0 %

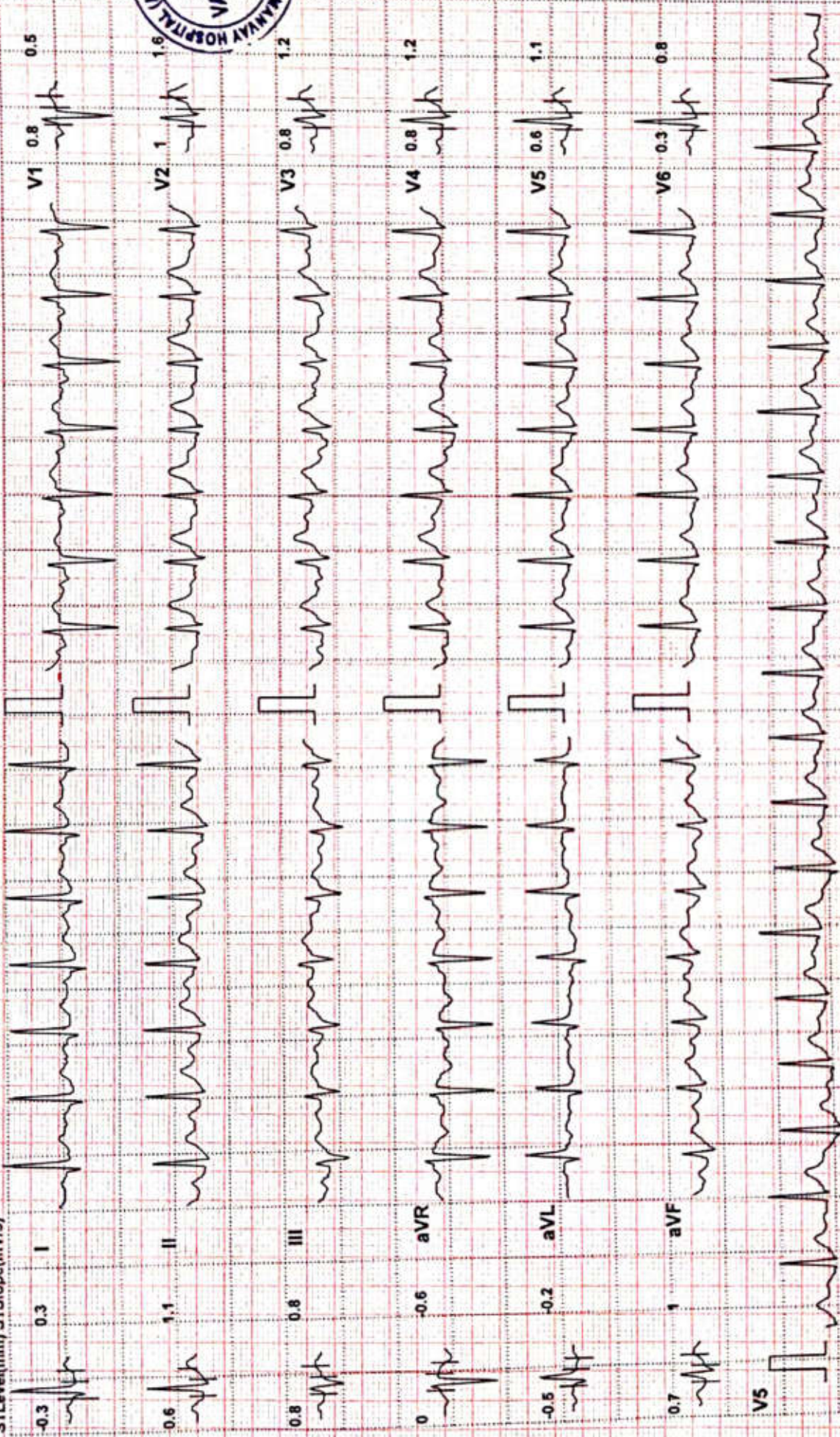
Stage Time: 01:00

THR: 155 bpm

HR: 126 bpm

BP: 140/80 mmHg

STLevel(mm) STSlope(mV/s)



nirmesh  
prajapati

HR 56/min

Axis:

SINUS RHYTHM

.....

P 44°

LEFTWARD AXIS

.....

QRS -6°

OTHERWISE NORMAL ECG

Age: .....

T 15°

..... cm / .....

PR 154 ms

5.79

..... kg

S (V1) -1.30 mV

P (II) 0.09 mV

.....

QT 380 ms

R (V5) 1.37 mV

.....

QTc 369 ms

Sokol. 2.79 mV

.....

10 mm/mV

10 mm/mV

UNCONFIRMED REPORT

**DR. PAVAN ROY**

MD, DM (CARDIOLOGY)

CONSULTANT CARDIOLOGIST

REG NO. G-23390

M No. 9305900158



10 mm/mV

AT-102 1.37 C1M

25 mm/s

SCHILLER

0.05-25Hz F50 SCF S85 Th 20-JUN-24 09:33:28

saranuaya hospital, baroda

Part No. 2 157017M

S80

Patient

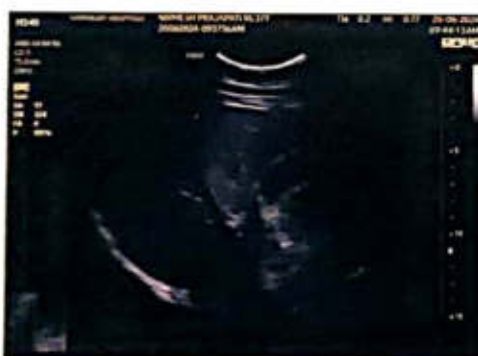
ID  
Name  
Birth Date  
Gender

20062024-093736AM  
NIRMESH PRAJAPATI M/37Y

Exam

Accession #  
Exam Date  
Description  
Operator

20-06-2024



**NIRMESH PRAJAPATI**

**M /37 YEARS**

**DATE: 20/06/2024**

**REAL TIME SONOGRAPHY OF THE ABDOMEN & PELVIS**

**LIVER** - It is normal in size (15.5 cm). It shows bright echo pattern. No evidence of solid or cystic focal lesion is seen. The intrahepatic biliary system is normal and shows no dilatation of the radicles. The portal vein, CBD and hepatic veins appear normal.

**GALL BLADDER** - It is distended and appears normal. No evidence of sludge or calculus is seen. The wall appears normal.

**PANCREAS** - It is visualized and appears normal.

**SPLEEN** - It appears normal in size (8.2 cm), normal in shape and echotexture. No focal lesions.

**KIDNEYS** - . Both the kidneys appear normal in size, shape and show normal corticomedullary differentiation. Normal echogenicity of both kidneys.

Right kidney measures 9.5 X 3.8 cm. Left kidney measures 9.5 X 5.9 cm.

No hydronephrosis or calculus is seen on either side.

Urinary bladder is distended and appears normal no evidence of any calculus or mass lesion.

Prostate appears normal in size and echo texture.

No evidence of any lymphadenopathy or ascites is noted.

**IMPRESSION:**

**FATTY LIVER GRADE-I.**



**DR. SARJAN VASAVA,**  
CONSULTANT RADIOLOGIST.

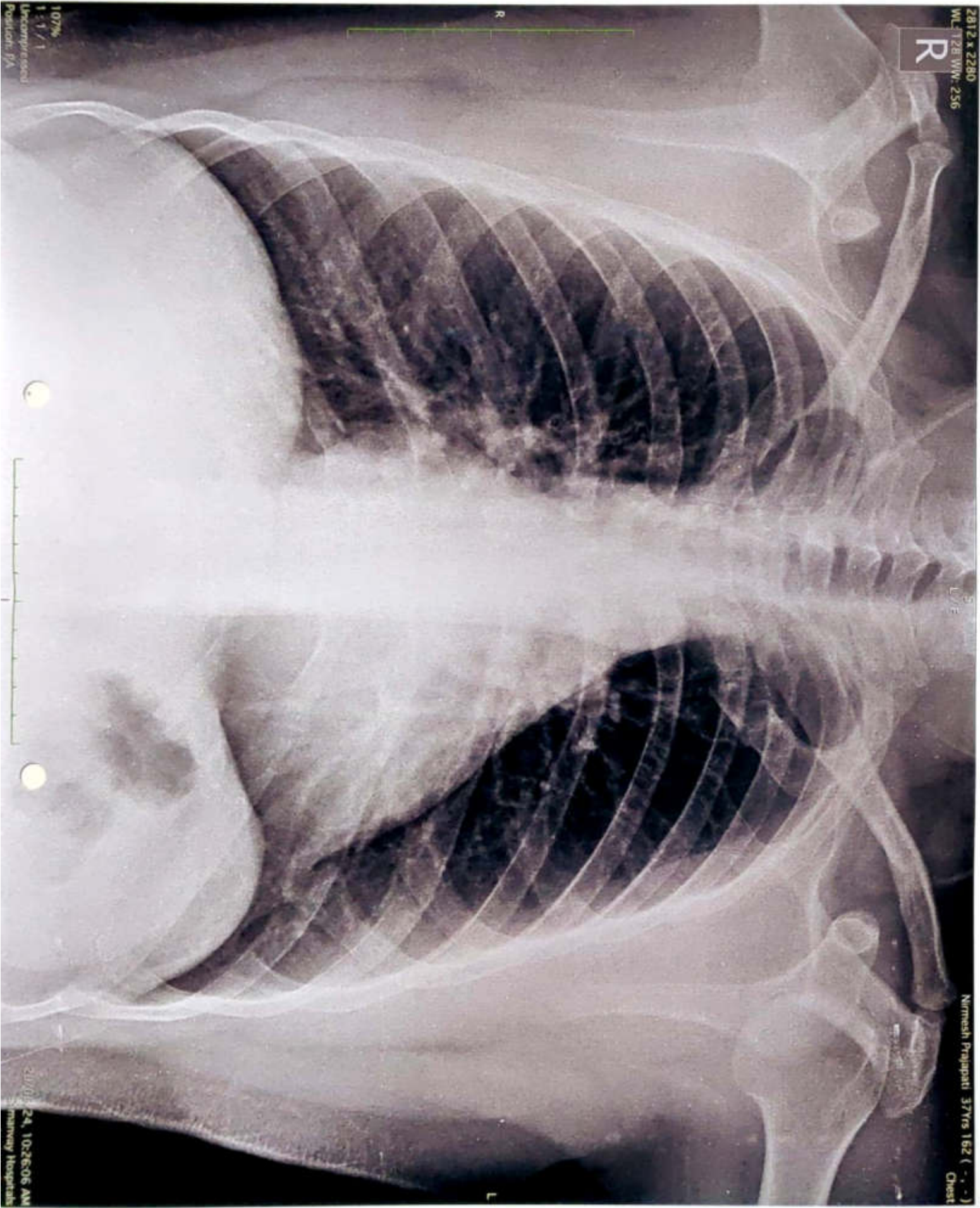
**DR SARJAN VASAVA**  
M.B.B.S., D.M.R.D.  
Reg. No. G-26527  
SAMANVAY HOSPITALS





Nirmesh Prajapati m/37y

2020-06-24



**DATE:20-06-24  
NIRMESH PRAJAPATI  
37 YEARS/MALE**

**CHEST X RAY PA VIEW**

Both the lung fields appear normal.

Both costophrenic angles appear clear.

Cardiac silhouette appear normal.

Both hila appears normal.

Bony thorax appears normal.

No evidence of free gas seen under dome of diaphragm.

**COMMENTS:**

- **NORMAL BOTH LUNG FIELDS.**
- **NORMAL CARDIAC SIZE.**



**DR SARJAN VASAVA,  
CONSULTANT RADIOLOGIST.**

**DR SARJAN VASAVA  
M.B.B.S., D.M.R.D.  
Reg. No. G-26527  
SAMANVAY HOSPITALS**



**SAMANVAY HOSPITAL, VADODARA**

**NIRMESH PRAJAPATI (37 M)**

**Clinical History :**

**Medications :**

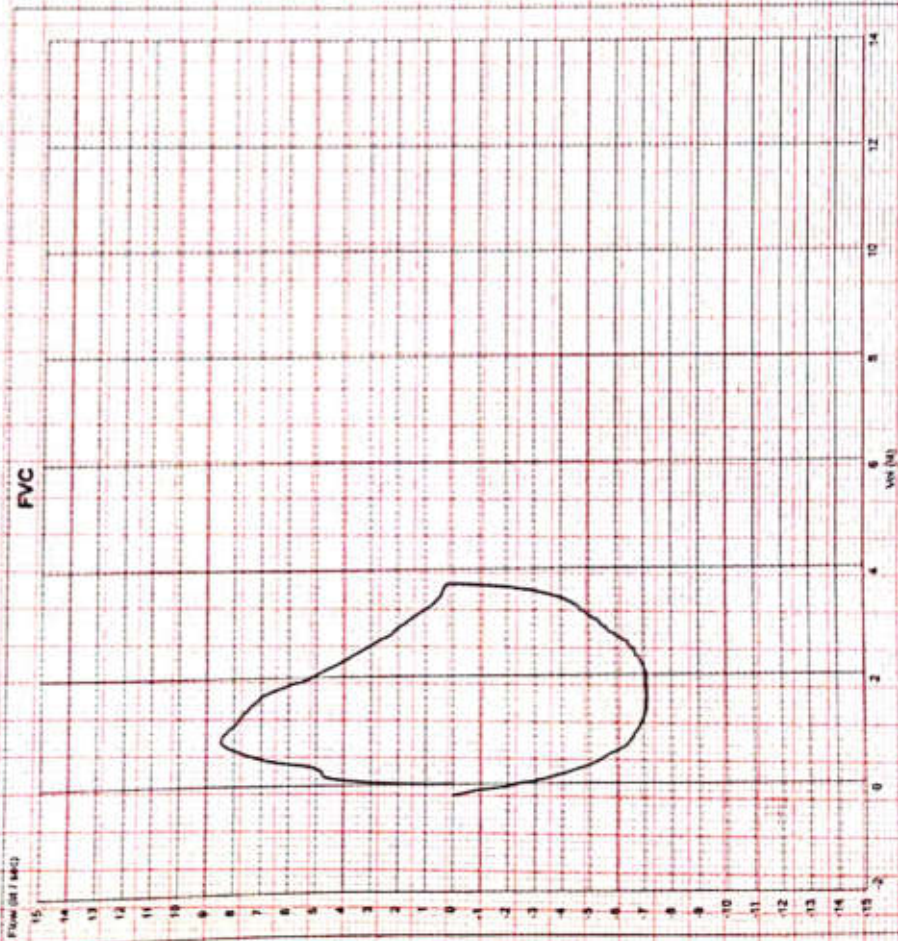
ID: 80288

Date: 20-06-2024  
Time: 11:03:06

Height: 170 cms  
Weight: 95 Kgs

Ethnic: Asian  
Norm: Indian

**Best Report**



Params	Pred	Best Effort	Pre Best Value	% Pred
FVC (L)	3.68	3.72	3.72	101.1
FEV 0.5 (L)	---	2.67	2.67	---
FEV 1.0 (L)	2.83	3.37	3.37	119.1
FEV 3.0 (L)	3.43	0	0	0.0
FEV 0.5/FVC (%)	---	71.71	71.71	---
FEV 1.0/FVC (%)	80.4	90.55	90.55	112.6
FEV 3.0/FVC (%)	---	0	0	---
FEF 25% - 75% (L/s)	3.05	4.99	4.99	163.6
FEF 75% - 85% (L/s)	---	1.77	1.77	---
FEF 25% (L/s)	---	8.42	8.42	---
FEF 50% (L/s)	3.7	6.12	6.12	165.4
FEF 75% (L/s)	1.42	2.22	2.22	156.3
FEF 0.2 - 1.2 (L/s)	---	7.01	7.01	---
PEF (L/s)	7.55	8.44	8.44	111.8
FMFT (s)	---	0.39	0.39	---
FVC (L)	---	4.24	4.24	---
FV1 (L)	---	4.22	4.22	---
FV1/FVC (%)	---	99.62	99.62	---
FV1/FVC (%)	---	113.36	113.36	---
PIF (L/s)	---	7.11	7.11	---
FIF 50% (L/s)	---	7.1	7.1	---

**F V C**

**Interpretation :**

**Dr Parth S Shah**  
MBBS, MD (Respi. Med.)  
Chest physician  
G -18840  
DR PARTH SHAH

Dental



**SAMANVAY  
HOSPITALS**  
Healing Hands, Caring Hearts



MR. Nimesh Prajapati

Date:- 20/06/2024

clo : Regular dental check-up .

ofe : Stains<sup>++</sup> .

afv : 1) Scaling

2) follow-up every 6 months .

Vasna Main Road,  
Opp Raneshwar Temple, Vadodara.

info@samanvayhospital.com

Ph: +91 88820 82082



# ENT CHECK UP

Case No. : \_\_\_\_\_ Dose : \_\_\_\_\_

Name : Niramesh prajapati Age / Sex : 37/M

GENERAL EXAMINATION : Normal.

EAR : BIL TUNAT

NOSE : Normal

THROAT : Normal

ADVICE : Hyg.

Doctor's Signature : \_\_\_\_\_



### EYE CHECK UP

Reg. No. : \_\_\_\_\_ Date : 2.06/24  
 Name : MR. Nitimesh Prajapati Age / Sex : 37 / m

	RIGHT EYE	LEFT EYE
DISTANCE : (With / Without Glasses)	6/6	6/6
NEAR VISION : ( With / Without Glasses)	6/6	N.6
ANTERIOR SEGMENT :	wnel	wnel
	(Contact lens on)	
I O P (MM of Hg)	16.0	16.0
FUNDUS :	wnel	wnel
COLOR VISION :	wnel	wnel
CLINICAL IMPRESSION :	refractive	error
ADVICE :	ct + scl (contact)	glm (lens)

Doctor's Signature : \_\_\_\_\_



### COMPREHENSIVE HEALTH CHECK UP

Case No. : \_\_\_\_\_ Date : 20/6/24

Name : Mr. Nirmal Prajapati Age/Sex : 37/M

MEDICAL HISTORY : H/O depression ↓ exercise tolerance

PERSONAL HISTORY : NAD

Appetite : (N) Smoking : No  
 Sleep : (N) H/O Alcohol : None  
 Bladder : - Lifestyle : -  
 Bowel : - Exercise : -

DRUG HISTORY : -

PAST HISTORY : None

FAMILY HISTORY : \_\_\_\_\_

#### GENERAL PHYSICAL EXAMINATION :

Built and Nourishment :

Height : 170 cm  
 B. P. : 110/80 mm of Hg Weight : 95.0 kg Kg  
 Character : (N) Pulse : 69 /Min  
 Nails : - Odema : -  
 Tonsils : - Skin : -  
 Tongue : - Sclera : -  
 Eat. & Joints : - Glands : -



Adv  
 (20/6/24) - Tb. SLB12 plus (1) दोपहर सुकाना  
 - Aggressive wt. control

Name: NIRMESH PRAJAPATI

SAMANVAY HOSPITAL VADODARA

Date: 20-06-2024

Time: 11:14

Age: 37 Gender: M

Height: 170 cms

Weight: 95 Kg

ID: 9526

Clinical History:

Medications:

Test Details:

Protocol: Bruce

Exercise Time: 0:07:40

Max BP: 160/90

Test Termination Criteria:

Predicted Max HR: 183

Achieved Max HR: 186 (102% of Pr. MHR)

Max BP x HR: 29760

Target HR: 155 (85% of Pr. MHR)

Max Mets: 8.6

Protocol Details:

Stage Name	Stage Time	METS	Speed kmph	Grade %	Heart Rate bpm	BP mmHg	RPP	ST Level mm	ST Slope mV/S
Standing	04:15	1	0	0	92	120/80	11040	0.7 V1	0.3 V2
PreTest	03:02	1	1.6	0	105	120/80	12600	0.7 V1	0.4 V2
Stage: 1	03:00	4.7	2.7	10	140	130/80	18200	0.8 V3	0.8 V2
Stage: 2	03:00	7	4	12	167	150/90	25050	0.9 V3	1.1 II
Peak Exercise	01:40	8.6	5.5	14	186	160/90	29760	-0.6 V1	0.8 II
Recovery1	03:00	1	0	0	159	160/90	25440	1.2 II	-0.8 V2
Recovery2	01:00	1	0	0	136	160/90	21760	3.3 V2	2.1 V2
Recovery3	01:00	1	0	0	126	140/80	17640	1 V2	1.6 V2
Recovery4	00:09	1	0	0	127	140/80	17780	0.9 V3	1.1 V2

Interpretation

The Patient Exercised according to Bruce Protocol for 0:07:40 achieving a work level of 8.6 METS. Resting Heart Rate, initially 92 bpm rose to a max. heart rate of 186bpm (102% of Predicted Maximum Heart Rate). Resting Blood Pressure of 120/80 mmHg, rose to a maximum Blood Pressure of 160/90 mmHg

— Good Efforts Tolerare / 102%. THR  $\tau$  8.6 METS Achieved  
— No ST-T Changes during Exercise  
or recovery

DR. PAVAN ROY  
MD, DM (CARDIOLOGY)  
CONSULTANT CARDIOLOGIST  
REG. NO. G-23390  
M No. 9305998158

Doctor: DR. PAVAN ROY



Ref. Doctor: — SCHILLER Test is Negative for Inducible ISchemia

UIDIDS :

FEI VALI :

( Summary Report edited by User )

Schiller Cardiovit CS-10 Version:3.4



Diet



**SAMANVAY HOSPITALS**  
Healing Hands, Caring Hearts



Ht - 170 cms  
Wt - 95 kgs  
Bmi - 32.8  
IBW - 76.8

MR. Nimesh Prajapati

1 સમસ્તિકા ના સમગ્ર દેશી શાકે 12 મહિના પાણીમાં પલાળી માપે ગાળીને પીવું.  
સવારે ભૂખા પેરે - 12 લાસ દુધમાં પાણી સાં 1/2 નાની સમગ્રી ભજનો પાઉડર  
ના + 1/2 ભીંધુનો રસ મીઠમ કરીને પીવું.

- બાંધણી - 211 (મોખી)  
(8:30-9AM) ખાખરા/મમરા / ઘેવો / અઉંજા સમગ્રી / મકાઈના સમગ્રી  
અકલાડિયામાં 2 દિવસ - કાઠાબેના મત / બાફેલા ચણા / બાફેલી ડુંબેર.

- અપોચંજ (નાશ્વ) (1-1:30PM) - 2- રોટલી  
શીક-બરાકા વડાસુ: OR બાફેલા અત / ચણાની ભજ.  
આપીસ - 1 ઘાઉં  
ભારા - 12 ભર

- બાંધણી (4-4:30PM) - કુંદો વાજા અંક માફ ફળ C નાંચેલી / ઝોમંજી / ડીવી / પાઉંનેપામ / કાંઈ

- રાત્રી (7-7:30PM) - રોટલો + શાક / પેશુ. ખાખી + કાંઈ / ભાજી + રોટલો /  
ભરિયા બીકાડી

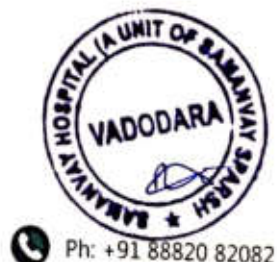
પંજ ન બાણ?

- મેંદા અને મેંદાની બનાવવા
- માંસ
- રોટી જુદા જુદા
- આપીસ/કાંઈ / કાંઈ કાંઈ
- પુકીંગા / મિઠાસોડ
- 2 અનાજ માટે ન ભેલ દા. અઉંજાનો
- ભજનો પાઉં / કાંઈ

- પેકેટ્સ
- ચીક, ગ્રે, પાંક

Vasna Main Road,  
Opp Raneshwar Temple, Vadodara.

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Ph: +91 88820 82082



## TEST REPORT

Reg. No. : 40601010384 Reg. Date : 20-Jun-2024 11:52 Collected On : 20-Jun-2024 11:52  
Name : Mr. NIRMESH PRAJAPTI Approved On : 20-Jun-2024 12:49  
Age : 37 Years Gender : Male Ref. No. : Dispatch At :  
Ref. By : Tele No. :  
Location : SAMANVAY HOSPITAL UNIT OF SAMANVAY SPARSH @ VADODARA

Test Name	Results	Units	Bio. Ref. Interval
PSA	0.470	ng/mL	0 - 4

Method:CLIA

Sample Type:Serum

### Useful For

- Evaluating patients with documented prostate problems in whom multiple prostate-specific antigen tests may be necessary per year
- Monitoring patients with a history of prostate cancer as an early indicator of recurrence and response to treatment.
- Prostate cancer screening.

### Comments

-Prostate-specific antigen (PSA) is a glycoprotein that is produced by the prostate gland, the lining of the urethra, and the bulbourethral gland. Normally, very little PSA is secreted in the blood. Increases in glandular size and tissue damage caused by benign prostatic hypertrophy, prostatitis, or prostate cancer may increase circulating PSA levels.


-Digital rectal examination generally does not increase normal prostate-specific antigen (PSA) values. However, cystoscopy, urethral instrumentation, and prostate biopsy may increase PSA levels.

----- End Of Report -----

This is an electronically authenticated report. "Please verify the authenticity of this report by scanning the QR code to ensure data integrity."

Test done from collected sample.

Printed On: 20-Jun-2024 12:48

  
Dr Mitesh Rathwa  
MD PATHOLOGY  
Reg No : 6-24196

Page 1 of 1