



BHAILAL AMIN
GENERAL HOSPITAL

ESTD. 1964

CONCLUSION OF HEALTH CHECKUP

ECU Ref. No : MH/22/000588 Patient No : 21040556 Date : 26/03/2022
Name : MR. LOVENEESH MISHRA Sex / Age : MALE 32
Height / Weight : 177 Cms 70 Kgs Ideal Weight 72 Kgs BMI : 22.3

Dr. Manish Mittal


Dr. Manish Mittal
Physician

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.



Name : MR. LOVENEESH MISHRA

Sex / Age : MALE 32

Present History

NO ANY MAJOR ILLNESS AT PRESENT

Past History

NO ANY MAJOR ILLNESS IN PAST

Family History

FATHER- COPD

Personal History

NON VEGDIET; NO SMOKING OR ALCOHOL

Clinical Examination

B.P. 110/80 MMHG

Pulse 78/MIN; REG

Others NAD

Respiratory System

CLINICALLY NAD

Cardio Vascular System

CLINICALLY NAD

Abdominal System

CLINICALLY NAD

Neurological System

CLINICALLY NAD



Name : MR. LOVENEESH MISHRA

Sex / Age : MALE 32

Eye Checkup

Doctor Name DR.SIDDHARTH DUA

	Right	Left
History	NIL	NIL
Uncorrected vision	NIL	NIL
Corrected vision	6/6	6/6
IOP	NORMAL	NORMAL
Fundus	NORMAL	NORMAL
Any other	-	-
Advice	RETINA OK, CHECK UP NEEDED	



Dietary Assessment

Name : **MR. LOVENEESH MISHRA** Sex / Age : MALE 32
Height : 177 Cms Weight : 70 Kgs Ideal Weight : 72 Kgs BMI : 22.3

Body Type : Normal / Underweight / Over weight

Diet History

Diet preference : Vegetarian / Eggeterian / Mixed

Frequency of consuming fried food : Once a / day / week or occasional

Frequency of consuming sweets : Once a / day or occasional weeks

Frequency of consuming outside food : Once a / week or occasional

Amount of water consumed / day : 2 glasses / liters

Life style assessment

Physical activity : Active / moderate / Sedentary / Nil

Alcohol intake : Yes / No / Occasional

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.

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

Eat Beetroot, Figs, Almond, Walnut, Dates, leafy vegetables, roasted Channa and Jeggary (Gur) for Heamoglobin. In case of diabetic patient avoid Rasins, Dates and Jeggary.

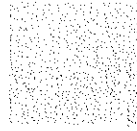
Drink green Tea or black Coffee once in a day.

Do brisk walking daily.

Dietitian

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mr. LOVENEESH MISHRA
Gender / Age : Male / 32 Years 10 Months 11 Days
MR No / Bill No. : 21040556 / 221033880
Consultant : Dr. Manish Mittal
Location : OPD

Type : OPD
Request No. : 35022
Request Date : 26/03/2022 08:55 AM
Collection Date : 26/03/2022 09:50 AM
Approval Date : 26/03/2022 02:54 PM

Clinical Biochemistry

Test	Result	Units	Biological Ref. Range
Fasting Plasma Glucose	91	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	127	mg/dL	70 - 140

By Hexokinase method on RXL Dade Dimension

— End of Report —

Dr. Rakesh Vaidya
Approved By Dr. Sejal Odedra

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DEPARTMENT OF DIAGNOSTIC RADIOLOGY

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

Patient No. : 21040556 Report Date : 26/03/2022
Request No. : 190014875 26/03/2022 8.55 AM
Patient Name : **LOVENEESH MISHRA**
Gender / Age : Male / 32 Years 10 Months 11 Days

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

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

Gall bladder is well distended and shows tiny GB polyp. Common bile duct is not dilated.

Pancreas shows no obvious abnormality. Tail obscured.
Spleen is normal 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 ~ 10 cc.
Prostate measures 26mm x 29mm x 25mm.

Urinary bladder is well distended and appears normal.
No ascites.

COMMENT:

Tiny GB polyp.

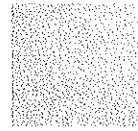
Kindly correlate clinically

• 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





Patient Name : Mr. LOVENEESH MISHRA
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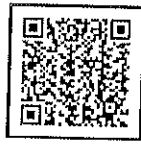
CBC + ESR

Test	Result	Units	Biological Ref. Range
Haemoglobin.			
Haemoglobin	14.1	gm/dL	13 - 17
Red Blood Cell Count (T-RBC)	4.83	mill/cmm	4.5 - 5.5
Hematocrit (HCT)	40.6	%	40 - 50
Mean Corpuscular Volume (MCV)	84.1	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	29.2	pg	27 - 32
MCH Concentration (MCHC)	34.7	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	13.1	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	40.5	fl	39 - 46
Total Leucocyte Count (TLC)			
Total Leucocyte Count (TLC)	6.20	thou/cmm	4 - 10
Differential Leucocyte Count			
Polymorphs	65	%	40 - 80
Lymphocytes	29	%	20 - 40
Eosinophils	02	%	1 - 6
Monocytes	04	%	2 - 10
Basophils	00	%	0 - 2
Polymorphs (Abs. Value)	4.02	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	1.77	thou/cmm	1 - 3
Eosinophils (Abs. Value)	0.15	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.24	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.02	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.3	%	1 - 3 : Borderline > 3 : Significant
Platelet Count			
Platelet Count	154	thou/cmm	150 - 410
Smear evaluation	Adequate		
PBS Overview	Hypersegmented neutrophils seen		
ESR	4	mm/1 hr	0 - 10

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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. Nikunj V. Mehta
MD (Path.)

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Approval Date : 26/03/2022 01:50 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 ----

Dr. Rakesh Vaidya
Approved By Dr. Sejal Odedra

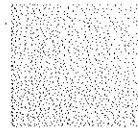
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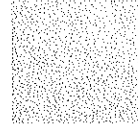
Clinical Biochemistry

Test	Result	Units	Biological Ref. Range
Fasting Plasma Glucose	91	mg/dL	70 - 110

---- End of Report ----

**Dr. Nikunj V. Mehta
MD (Path.)**

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 Approval Date : 26/03/2022 03:00 PM

Clinical Biochemistry

Test	Result	Units	Biological Ref. Range
Glycosylated Hemoglobin (HbA1c)	5.3	%	
estimated Average Glucose (e AG) *	105.41	mg/dL	

(Method:

By Automated HPLC analyser on D-10 Biorad. NGSP Certified, US-FDA approved, Traceable to IFCC reference method.

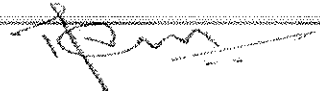
* Calculated valued for past 60 days, derived from HbA1c %, based on formula recommended by the A1c - Derived Average Glucose study from ADA and EASD funded The ADAG trial.

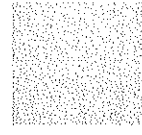
Guidelines for Interpretation:

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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 MD (Path.)



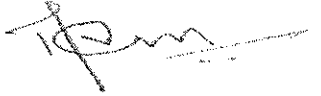
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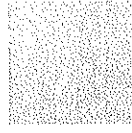
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Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea (By Urease Kinetic method on RXL Dade Dimension)	29	mg/dL	10 - 45
Creatinine (By Modified Kinetic Jaffe Technique)	0.85	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)	7.6	mg/dL	3.4 - 7.2

--- End of Report ---


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Liver Function Test (LFT)

Test	Result	Units	Biological Ref. Range
Bilirubin			
Bilirubin - Total	0.33	mg/dL	0 - 1
Bilirubin - Direct	0.09	mg/dL	0 - 0.3
Bilirubin - Indirect	0.24	mg/dL	0 - 0.7
<i>(By Diazotized sulfanilic acid on RXL Dade Dimension.)</i>			
Aspartate Aminotransferase (SGOT/AST)	21	U/L	15 - 40
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alanine Aminotransferase (SGPT/ALT)	41	U/L	10 - 40
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alkaline Phosphatase	82	U/L	53 - 128
<i>(BY PNPP AMP method on RXL Dade Dimension.)</i>			
Gamma Glutamyl Transferase (GGT)	41	U/L	15 - 85
<i>(By IFCC method on RXL Dade Dimension.)</i>			
Total Protein			
Total Proteins	7.69	gm/dL	6.4 - 8.2
Albumin	4.43	gm/dL	3.4 - 5
Globulin	3.26	gm/dL	3 - 3.2
A : G Ratio	1.36		1.1 - 1.6
<i>(By Biuret endpoint and Bromocresol purple method on RXL Dade Dimension.)</i>			

--- End of Report ---

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MD (Path.)

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Complete Lipid Profile

Test	Result	Units	Biological Ref. Range
Complete Lipid Profile			
Appearance	Clear		
Triglycerides	124	mg/dL	1 - 150
<i>(By Lipase / Glycerol dehydrogenase on RXL Dade Dimension</i>			
<i>< 150 Normal</i>			
<i>150-199 Borderline High</i>			
<i>200-499 High</i>			
<i>> 499 Very High)</i>			
Total Cholesterol	215	mg/dL	1 - 200
<i>(By enzymatic colorimetric method on RXL Dade Dimension</i>			
<i><200 mg/dL - Desirable</i>			
<i>200-239 mg/dL - Borderline High</i>			
<i>> 239 mg/dL - High)</i>			
HDL Cholesterol	46	mg/dL	40 - 60
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension</i>			
<i>< 40 Low</i>			
<i>> 60 High)</i>			
Non HDL Cholesterol (calculated)	169	mg/dL	1 - 130
<i>(Non- HDL Cholesterol</i>			
<i>< 130 Desirable</i>			
<i>139-159 Borderline High</i>			
<i>160-189 High</i>			
<i>> 191 Very High)</i>			
LDL Cholesterol	148	mg/dL	1 - 100
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension</i>			
<i>< 100 Optimal</i>			
<i>100-129 Near / above optimal</i>			
<i>130-159 Borderline High</i>			
<i>160-189 High</i>			
<i>> 189 Very High)</i>			
VLDL Cholesterol	24.8	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	3.22		2.1 - 3.5
T. Ch./HDL Ch. Ratio	4.67		3.5 - 5
<i>(Recent NECP / ATP III Guidelines / Classification (mg/dl) :)</i>			

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Thyroid Hormone Study

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

Triiodothyronine (T3)

0.725

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)

7.04

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)

2.32

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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 Approved By Dr. Sejal Odedra

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Urine Routine

Test	Result	Units	Biological Ref. Range
Physical Examination			
Quantity	40	mL	
Colour	Pale Yellow		
Appearance	Clear		
Chemical Examination (By Reagent strip method)			
pH	6.0		
Specific Gravity	1.015		
Protein	Negative	gm/dL	Negative
Glucose	Negative	mg/dL	Negative
Ketones	Negative		Negative
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
Microscopic Examination (After Centrifugation at 2000 rpm for 10 min)			
Red Blood Cells	Nil	/hpf	0 - 2
Leucocytes	Present (0-2)	/hpf	0 - 5
Epithelial Cells	Present (0-2)	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil		Nil
Mucus	Absent		Absent
Organism	Absent		Absent

--- End of Report ---



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MD (Path.)

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GENERAL HOSPITAL

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DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 21040556 Report Date : 26/03/2022
Request No. : 190014869 26/03/2022 8.55 AM
Patient Name : **LOVENEESH MISHRA**
Gender / Age : Male / 32 Years 10 Months 11 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

Prerna C Hasani

Dr. Prerna C Hasani, MD
Consultant Radiologist

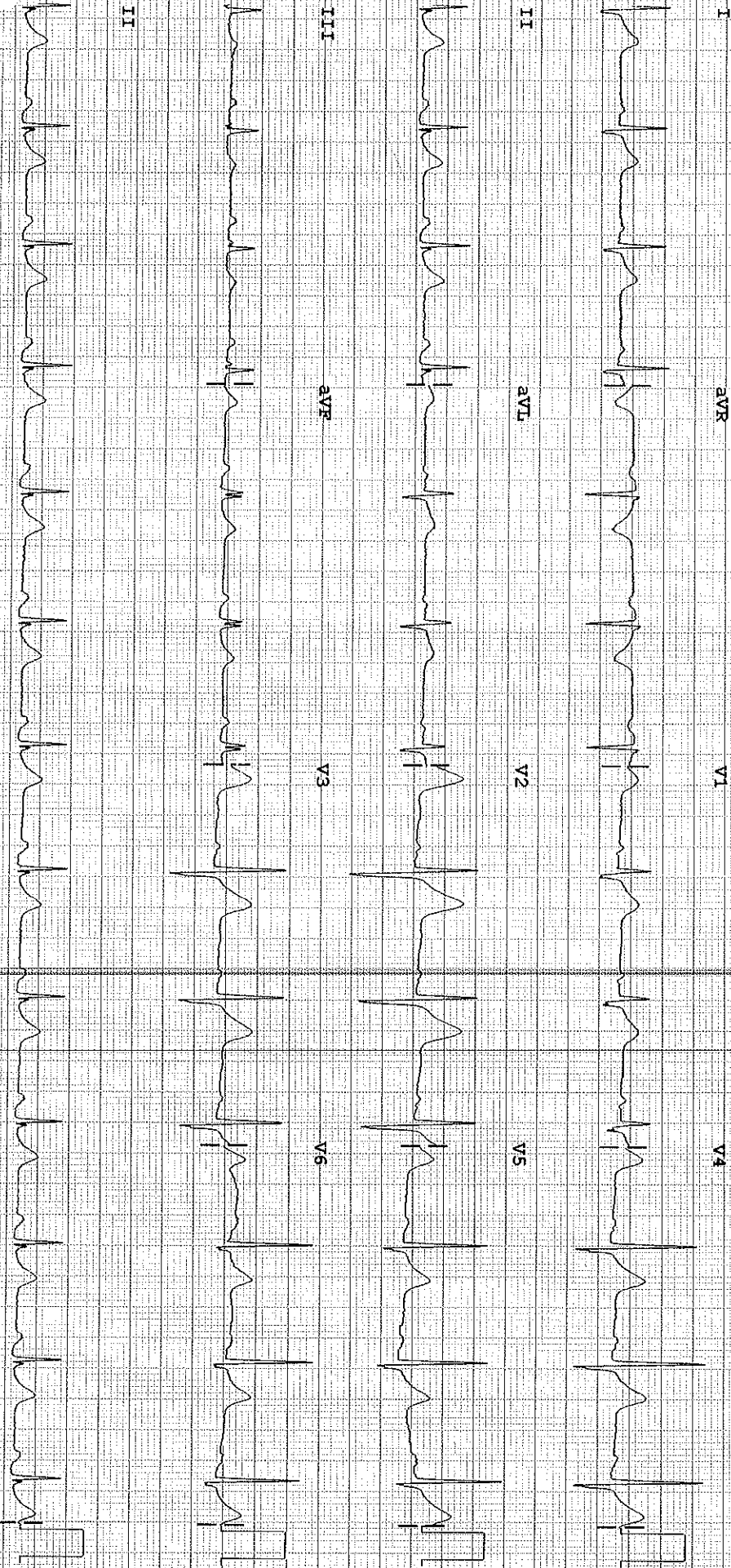




B.M.M. GENERAL HOSPITAL
AN NABH, NABL & ISO Accredited Institute

Rate 74
PR 168
QRSD 90
QT 364
QTc 404

--AXIS--
P 64
QRS 60
T 34



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

50~0.15-150 Hz

PH08

P?

Bob

Doctor DR. MANISH MITTAL

BHAILAL AMIN GENERAL HOSPITAL
 BHAILAL AMIN MARG,
 VADODARA-3, PH-(0265) 3956222

Station
 Telephone: 0265-3956222,3956024

EXERCISE STRESS TEST REPORT

Patient Name: LOVENEESH MISHRA,
 Patient ID: 6564
 Height: 177 cm
 Weight: 70 kg

DOB: 16.05.1989
 Age: 32yrs
 Gender: Male
 Race: Indian

Study Date: 26.03.2022
 Test Type: Treadmill Stress Test
 Protocol: BRUCE

Referring Physician: ARCOFEMI HEALTHCARE LTD
 Attending Physician: DR. MANISH MITTAL
 Technician: Mr. VISHAL MORE

Medications:
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Medical History:
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Reason for Exercise Test:
 Screening for CAD

Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	00:43	0.00	0.00	93	110/80	
	STANDING	00:02	0.00	0.00	93	110/80	
	HYPERV.	00:01	0.00	0.00	93	110/80	
	WARM UP	00:12	0.60	0.00	90	110/80	
EXERCISE	STAGE 1	03:00	1.70	10.00	125	110/80	
	STAGE 2	03:00	2.50	12.00	146	120/80	
	STAGE 3	02:31	3.40	14.00	164	130/80	
RECOVERY		03:15	0.00	0.00		150/80	

The patient exercised according to the BRUCE for 8:31 min:s, achieving a work level of Max. METS: 10.10. The resting heart rate of 91 bpm rose to a maximal heart rate of 169 bpm. This value represents 89% of the maximal, age-predicted heart rate. The resting blood pressure of 110/80 mmHg, rose to a maximum blood pressure of 170/90 mmHg. The exercise test was stopped due to Target heart rate achieved.

Interpretation

Summary: Resting ECG: normal.
 Functional Capacity: normal.
 HR Response to Exercise: appropriate.
 BP Response to Exercise: normal resting BP - appropriate response.
 Chest Pain: none.
 Arrhythmias: none.
 ST Changes: none.
 Overall impression: Normal stress test.

Conclusions

STRESS TEST IS NEGATIVE FOR INDUCIBLE MYOCARDIAL ISCHEMIA

CONFIRMED BY : DR. MANISH MITTAL 