

Mangesh Kulkarni  
59 yrs / Male

19/02/2024

No fresh complaints.

No comorbidities

No PH

No SH

FIH - Mother - ~~DM~~ } expired.  
father - DM

Height - 176 cm

Weight - 92 kg

BMI - 29.7 kg/m<sup>2</sup>

(Overweight)

BP - 120/70 mmHg

P - 60/min

SpO<sub>2</sub> - 98%

Pt is fit and can resume  
his normal duties.



**HELPLINE**

022 - 2588 3531

S-1, Vedant Complex,  
Vartak Nagar, Thane (W) 400 606  
[www.siddhivinayakhospitals.org](http://www.siddhivinayakhospitals.org)





Name - Mr. Mangesh Kulkarni	Age - 59 Y/M
Ref by Dr.- Siddhivinayak Hospital	Date - 17/02/2024

### USG ABDOMEN & PELVIS

#### FINDINGS:-

The liver dimension is enlarged in size (17.0 cm). It appears normal in morphology with raised echogenicity. No evidence of intrahepatic ductal dilatation.

The GB-gallbladder is distended normally. Wall thickness is normal.

The CBD- common bile duct is normal. The portal vein is normal.

The pancreas appears normal in morphology.

The spleen is normal in size 10.5 cm and morphology.

Both kidneys demonstrate normal morphology.

Both kidneys show normal cortical echogenicity.

The right kidney measures 9.6 x 4.7 cm.

The left kidney measures 9.3 x 5.4 cm.

Urinary bladder: -normally distended. Wall thickness – normal.

Prostate is normal in size and morphology Size: 16 gms

Seminal vesicles appear normal.

No free fluid is seen.

#### IMPRESSION:-

- Hepatomegaly with Grade I fatty liver.

DR. AMOL BENDRE  
MBBS; DMRE  
CONSULTANT RADIOLOGIST





Name - Mr. Mangesh Kulkarni	Age - 59 Y/M
Ref by Dr.- Siddhivinayak Hospital	Date - 19/02/2024

**X- Ray chest (PA VIEW)**

No obvious active parenchymal lesion seen in both lungs.

Cardiac and aortic shadows appear normal

No evidence of pleural of effusion is seen.

Both domes of diaphragm appear normal.

No obvious bony lesion is seen.

**IMPRESSION:**

- No significant abnormality seen.

Adv.: Clinical and lab correlation.

**DR. AMOL BENDRE**  
MBBS; DMRE  
CONSULTANT RADIOLOGIST

Note: The above report represents interpretation of various radiographic / sonographic shadows, and hence has its own limitations. This report has to be co-related clinic-pathologically by the referring / physician and it does NOT represent the sole diagnosis.





### 2D ECHOCARDIOGRAM & COLOUR DOPPLER REPORT

NAME	: MR. MANGESH KULKARNI
AGE	: 59 YR/M
DATE OF EXAMINATION	: 19/02/2024
REF BY	: SIDDHIVINAYAK HOSPITAL
ECHOCARDIOGRAM DONE BY	: DR.SANDIP FULPAGARE

Mitral Valve	:	Normal.	
Aortic Valve	:	Normal.	
Pulmonary Valve	:	Normal.	
Tricuspid Valve	:	Normal.	
Interatrial septum	:	Intact.	
Interventricular septum	:	Intact.	
RA	:	Normal	
RV	:	Normal	
LA	:	3.7cm	
LV	:	Normal, No RWMA.	
LV Dimensions			
LVID (d): 4.7 cm		LVID (s):2.7 cm	LVEF: 60%
IVS (d): 1.0 cm		LVPW (d):1.0cm	
Aorta		2.7cm	
Pericardium	:	Normal.	
IVC / Other findings			

#### DOPPLER MEASUREMENTS:-

MV: E = 0.4, A= 0.7, DT = 160 ms.

Aortic flow velocity = 1.2 m/s.

Pulmonary flow velocity = 0.7 m/s.

MR: Nil, AR: Nil, TR: Nil, PR: Nil

#### IMPRESSION:-

Normal Sized cardiac chambers.

No RWMA, Good LV Systolic Function. (LVEF- 60 %)

Normal Valves.

RA/ RV Normal, Good RV systolic function.

No pericardial effusion/ Clot.

DR. SANDIP FULPAGARE,  
MD (MEDICINE), DNB (CARDIOLOGY).FESC.



## OPHTHAL CHECK UP SCREENING

NAME OF EMPLOYEE

MANGESH KULKARNI

AGE

59

DATE -

19.02.2024

Specs : With Glasses

	RT Eye	Lt Eye
NEAR	N/10	N/10
DISTANT	6/9	6/6
Color Blind Test	NORMAL	



SIDDHIVINAYAK HOSPITALS



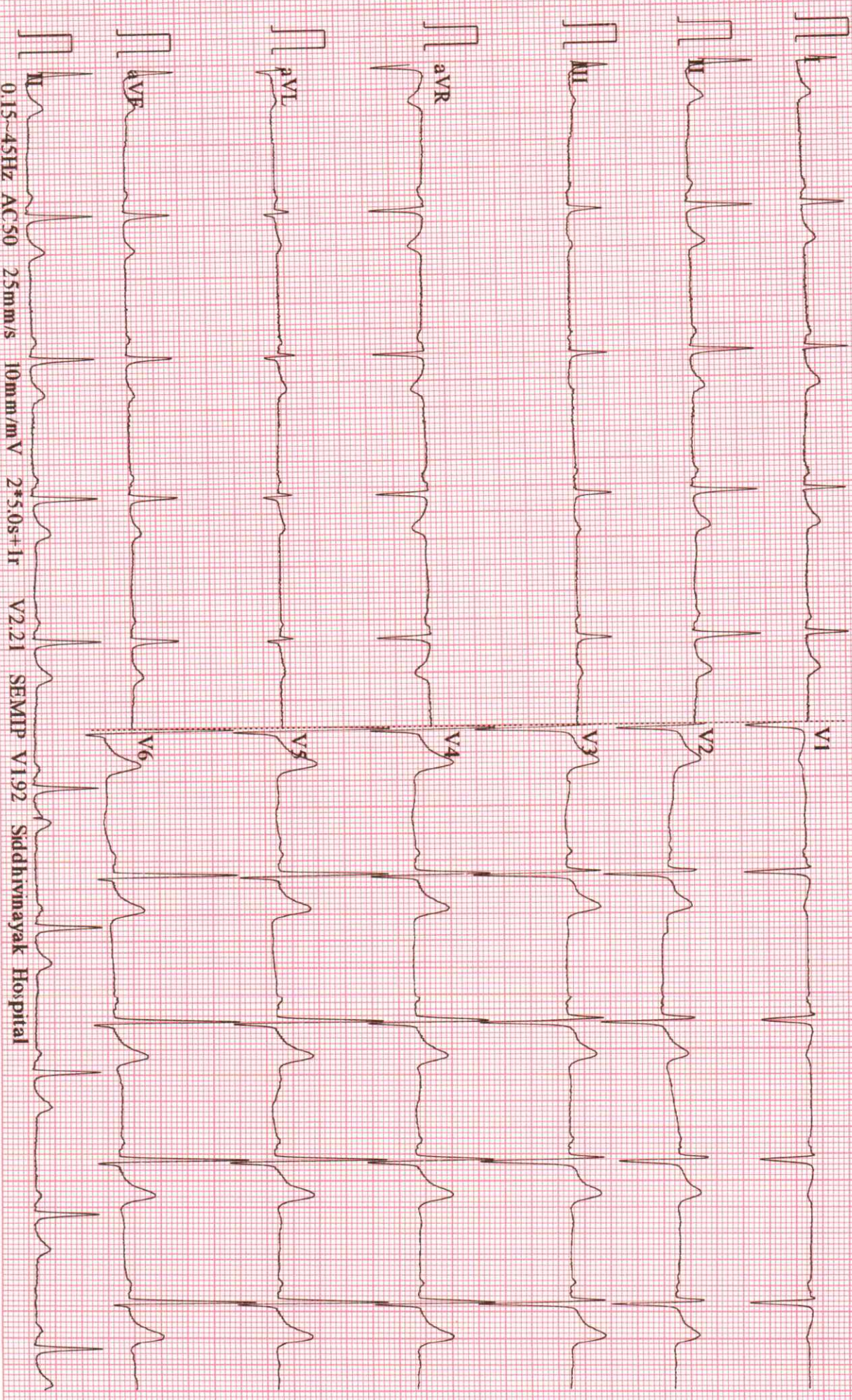
Female  
Years 59  
Req. No. :  
BP :-

HR	: 55 bpm
P	: 106 ms
PR	: 149 ms
QRS	: 91 ms
QT/QTcBz	: 385/371 ms
P/QRS/T	: 37/57/43 °
RV5/SV1	: 2.058/1.025 mV

Diagnosis Information:  
Sinus Bradycardia

Adm  
S Decho

Report Confirmed by:



0.15-45Hz AC50 25mm/s 10mm/mV 2\*5.0s+1r V2:21 SEMIP V1:92 Siddhivnyak Hospital





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 Ref By : SIDDHIVINAYAK HOSPITAL CGHS /ESIS Report Status : FINAL



**\*LIPID PROFILE**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<b>TOTAL CHOLESTEROL (CHOLESTEROL OXIDASE, ESTERASE, PEROXIDASE)</b>	<b>211.0</b>	mg/dL	Desirable blood cholesterol: - <200 mg/dl. Borderline high blood cholesterol: - 200 - 239 mg/dl. High blood cholesterol: - >239 mg/dl.
<b>S.HDL CHOLESTEROL (DIRECT MEASURE - PEG)</b>	49.3	mg/dL	Major risk factor for heart : <30 mg/dl. Negative risk factor for heart disease: >=80 mg/dl.
<b>S. TRIGLYCERIDE (ENZYMATIC, END POINT)</b>	71	mg/dL	Desirable level : <161 mg/dl. High : >= 161 - 199 mg/dl. Borderline High : 200 - 499 mg/dl. Very high : >499mg/dl.
<b>VLDL CHOLESTEROL (CALCULATED VALUE)</b>	14	mg/dL	UPTO 40
<b>S.LDL CHOLESTEROL (CALCULATED VALUE)</b>	148	mg/dL	Optimal: <100 mg/dl. Near Optimal: 100 - 129 mg/dl. Borderline High: 130 - 159 mg/dl. High : 160 - 189mg/dl. Very high : >= 190 mg/dl.
<b>LDL CHOL/HDL RATIO (CALCULATED VALUE)</b>	3.00		UPTO 3.5
<b>CHOL/HDL CHOL RATIO (CALCULATED VALUE)</b>	4.28		<5.0

Above reference ranges are as per ADULT TREATMENT PANEL III recommendation by NCEP (May 2015).

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

Checked By  
 Priyanka\_Deshmukh

**DR. SMITA RANVEER.**  
**M.B.B.S.M.D. Pathology(Mum)**  
**Consultant Histocytopathologist**





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**COMPLETE BLOOD COUNT**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<b>HEMOGLOBIN</b>	14.2	gm/dl	13 - 18
HEMATOCRIT (PCV)	42.6	%	42 - 52
RBC COUNT	4.77	x10 <sup>6</sup> /uL	4.70 - 6.50
MCV	89	fl	80 - 96
MCH	29.8	pg	27 - 33
MCHC	33	g/dl	33 - 36
RDW-CV	13.4	%	11.5 - 14.5
<b>TOTAL LEUCOCYTE COUNT</b>	6760	/cumm	4000 - 11000
<b><u>DIFFERENTIAL COUNT</u></b>			
NEUTROPHILS	54	%	40 - 80
LYMPHOCYTES	33	%	20 - 40
EOSINOPHILS	03	%	0 - 6
MONOCYTES	10	%	2 - 10
BASOPHILS	00	%	0 - 1
<b>PLATELET COUNT</b>	256000	/cumm	150000 - 450000
MPV	<b>11.7</b>	fl	6.5 - 11.5
PDW	16	%	9.0 - 17.0
PCT	0.300	%	0.200 - 0.500
RBC MORPHOLOGY	Normocytic Normochromic		
WBC MORPHOLOGY	Normal		
PLATELETS ON SMEAR	Adequate		

Method : EDTA Whole Blood- Tests done on Automated Six Part Cell Counter.RBC and Platelet count by Electric Impedance ,WBC by SF Cube method and Differential by flow cytometry . Hemoglobin by Cyanide free reagent for hemoglobin test (Colorimetric Method).Rest are calculated parameters.

**Result relates to sample tested, Kindly correlate with clinical findings.**

----- END OF REPORT -----

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**URINE ROUTINE EXAMINATION**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<b><u>URINE ROUTINE EXAMINATION</u></b>			
<b><u>PHYSICAL EXAMINATION</u></b>			
VOLUME	15ml		
COLOUR	Pale Yellow		Pale Yellow
APPEARANCE	Clear		CLEAR
<b><u>CHEMICAL EXAMINATION</u></b>			
REACTION (methyl red and Bromothymol blue indicator)	Acidic		Acidic
SP. GRAVITY (Bromothymol blue indicator)	1.010		1.005 - 1.022
PROTEIN (Protein error of PH indicator)	Absent		Absent
BLOOD (Peroxidase Method)	Absent		Absent
SUGAR (GOD/POD)	Absent		Absent
KETONES (Acetoacetic acid)	Absent		Absent
BILE SALT & PIGMENT (Diazonium Salt)	Absent		Absent
UROBILINOGEN (Red azodye)	Normal		Normal
LEUKOCYTES (pyrrole amino acid ester diazonium salt)	Absent		Absent
NITRITE (Diazonium compound With tetrahydrobenzo quinolin 3-phenol)	Absent		Negative
<b><u>MICROSCOPIC EXAMINATION</u></b>			
RED BLOOD CELLS	Absent		Absent
PUS CELLS	1-2	/ HPF	0 - 5
EPITHELIAL	1-2	/ HPF	0 - 5
CASTS	Absent		

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**URINE ROUTINE EXAMINATION**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
CRYSTALS	Absent		
BACTERIA	Absent		Absent
YEAST CELLS	Absent		Absent
ANY OTHER FINDINGS	Absent		

REMARK Result relates to sample tested. Kindly correlate with clinical findings.

**Result relates to sample tested, Kindly correlate with clinical findings.**

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<b>Ref By</b>	: SIDDHIVINAYAK HOSPITAL CGHS /ESIS	<b>Report Status</b>	: FINAL



**IMMUNO ASSAY**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<b><u>TFT (THYROID FUNCTION TEST )</u></b>			
SPACE		Space	-
SPECIMEN	Serum		
T3	141.1	ng/dl	84.63 - 201.8
T4	11.21	µg/dl	5.13 - 14.06
TSH	0.741	µIU/ml	0.270 - 4.20
T3 (Triiodo Thyronine hormone)	T4 (Thyroxine)	TSH(Thyroid stimulating hormone)	
AGE	RANGE	AGE	RANGES
1-30 days	100-740	1-14 Days	11.8-22.6
1-11 months	105-245	1-2 weeks	9.9-16.6
1-5 yrs	105-269	1-4 months	7.2-14.4
6-10 yrs	94-241	4 -12 months	7.8-16.5
11-15 yrs	82-213	1-5 yrs	7.3-15.0
0.1-2.5			
15-20 yrs	80-210	5-10 yrs	6.4-13.3
0.20-3.0			
		11-15 yrs	5.6-11.7
0.30-3.0			

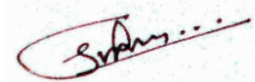
**INTERPRETATION :**

TSH stimulates the production and secretion of the metabolically active thyroid hormones, thyroxine (T4) and triiodothyronine (T3), by interacting with a specific receptor on the thyroid cell surface. The synthesis and secretion of TSH is stimulated by Thyrotropin releasing hormone (TRH), in response to low levels of circulating thyroid hormones. Elevated levels of T3 and T4 suppress the production of TSH via a classic negative feedback mechanism. Failure at any level of regulation of the hypothalamic-pituitary-thyroid axis will result in either underproduction (hypothyroidism) or overproduction (hyperthyroidism) of T4 and/or T3.

**Result relates to sample tested, Kindly correlate with clinical findings.**

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**HAEMATOLOGY**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<b>BLOOD GROUP</b>			
SPECIMEN	WHOLE BLOOD EDTA & SERUM		
* ABO GROUP	'B'		
RH FACTOR	POSITIVE		
Method: Slide Agglutination and Tube Method (Forward grouping & Reverse grouping)			
<b>Result relates to sample tested, Kindly correlate with clinical findings.</b>			
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**\*RENAL FUNCTION TEST**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<b>BLOOD UREA</b> (Urease UV GLDH Kinetic)	25.6	mg/dL	18 - 55
<b>BLOOD UREA NITROGEN</b> (Calculated)	11.96	mg/dL	5 - 20
<b>S. CREATININE</b> (Enzymatic)	0.84	mg/dL	0.6 - 1.4
<b>S. URIC ACID</b> (Uricase)	6.0	mg/dL	3.5 - 7.2
<b>S. SODIUM</b> (ISE Direct Method)	138.6	mEq/L	137 - 145
<b>S. POTASSIUM</b> (ISE Direct Method)	4.21	mEq/L	3.5 - 5.1
<b>S. CHLORIDE</b> (ISE Direct Method)	103.2	mEq/L	98 - 110
<b>S. PHOSPHORUS</b> (Ammonium Molybdate)	2.81	mg/dL	2.5 - 4.5
<b>S. CALCIUM</b> (Arsenazo III)	8.8	mg/dL	8.6 - 10.2
<b>PROTEIN</b> (Biuret)	6.59	g/dl	6.4 - 8.3
<b>S. ALBUMIN</b> (BGC)	4.04	g/dl	3.2 - 4.6
<b>S.GLOBULIN</b> (Calculated)	2.55	g/dl	1.9 - 3.5
<b>A/G RATIO</b> calculated	1.58		0 - 2

NOTE

BIOCHEMISTRY TEST DONE ON FULLY AUTOMATED ( EM 200 )  
ANALYZER.

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

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\* 1 8 4 1 9 2 \*

### Peripheral smear examination

TEST NAME	RESULTS
SPECIMEN RECEIVED	Whole Blood EDTA.
RBC	Normocytic Normochromic.
WBC	Total leukocytes count is normal on smear.
	NEUTROPHILS :54%
	LYMPHOCYTES :33%
	EOSINOPHILS :03%
	MONOCYTES :10%
	BASOPHILS :00%
PLATELET	Adequate on smear.
HEMOPARASITE	No Parasites seen.

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Pathologist

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**LIVER FUNCTION TEST**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<b>TOTAL BILLIRUBIN</b> (Method-Diazo)	0.93	mg/dL	0.1 - 1.2
<b>DIRECT BILLIRUBIN</b> (Method-Diazo)	0.39	mg/dL	0.0 - 0.4
<b>INDIRECT BILLIRUBIN</b> Calculated	0.54	mg/dL	0 - 0.8
<b>SGOT(AST)</b> (UV without PSP)	15.8	U/L	0 - 37
<b>SGPT(ALT)</b> UV Kinetic Without PLP (P-L-P)	14.3	U/L	UP to 40
<b>ALKALINE PHOSPHATASE</b> (Method-ALP-AMP)	56.0	U/L	53 - 128
<b>S. PROTIEN</b> (Method-Biuret)	6.59	g/dl	6.4 - 8.3
<b>S. ALBUMIN</b> (Method-BCG)	4.04	g/dl	3.5 - 5.2
<b>S. GLOBULIN</b> Calculated	2.55	g/dl	1.90 - 3.50
<b>A/G RATIO</b> Calculated	1.58		0 - 2

Result relates to sample tested, Kindly correlate with clinical findings.

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**HAEMATOLOGY**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<b>ESR</b>			
<b>ESR</b>	05	mm/1hr.	0 - 20

METHOD - WESTERGREIN

Result relates to sample tested, Kindly correlate with clinical findings.

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**BIOCHEMISTRY**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
GAMMA GT	23.3	U/L	13 - 109
<b><u>BLOOD GLUCOSE FASTING &amp; PP</u></b>			
BLOOD GLUCOSE FASTING	<b>110.2</b>	mg/dL	70 - 110
BLOOD GLUCOSE PP	128.5	mg/dL	70 - 140

Method (GOD-POD). DONE ON FULLY AUTOMATED ANALYSER (EM200).

1. Fasting is required (Except for water ) for 8-10 hours before collection for fasting specimen. Last dinner should consist of bland diet.
2. Don't take insulin or oral hypoglycemic agent until after fasting blood sample has been drawn

**INTERPRETATION**

- Normal glucose tolerance : 70-110 mg/dl
- Impaired Fasting glucose (IFG) : 110-125 mg/dl
- Diabetes mellitus :  $\geq 126$  mg/dl

**POSTPRANDIAL/POST GLUCOSE (75 grams)**

- Normal glucose tolerance : 70-139 mg/dl
- Impaired glucose tolerance : 140-199 mg/dl
- Diabetes mellitus :  $\geq 200$  mg/dl

**CRITERIA FOR DIAGNOSIS OF DIABETES MELLITUS**

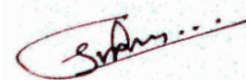
- Fasting plasma glucose  $\geq 126$  mg/dl
- Classical symptoms +Random plasma glucose  $\geq 200$  mg/dl
- Plasma glucose  $\geq 200$  mg/dl (2 hrs after 75 grams of glucose)
- Glycosylated haemoglobin  $> 6.5\%$

\*\*\*Any positive criteria should be tested on subsequent day with same or other criteria.

**GLYCOCELATED HEMOGLOBIN (HBA1C)**

HBA1C (GLYCOSALATED HAEMOGLOBIN)	<b>6.2</b>	%	Hb A1c > 8 Action suggested < 7 Goal < 6 Non - diabetic level NON - DIABETIC : $\leq 5.6$ PRE - DIABETIC : 5.7 - 6.4 DIABETIC : $> 6.5$
AVERAGE BLOOD GLUCOSE (A. B. G. )	131.0	mg/dL	
METHOD	Particle Enhanced Immunoturbidimetry		

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**BIOCHEMISTRY**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
-----------	---------	------	-----------------

HbA1c : Glycosylated hemoglobin concentration is dependent on the average blood glucose concentration which is formed progressively and irreversibly over a period of time and is stable till the life of the RBC/erythrocytes. Average Blood Glucose (A.B.G) is calculated value from HbA1c : Glycosylated hemoglobin concentration in whole Blood. It indicates average blood sugar level over past three months.

**Result relates to sample tested, Kindly correlate with clinical findings.**

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**REPORT ON IMMUNOLOGY**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
PSA (PROSTATE SPECIFIC ANTIGEN)(TOTAL) (CLIA)	0.217	ng/ml	0 - 4

**INTERPRETATION:**

Increased levels are noted in prostate cancer, benign prostatic hypertrophy, prostatitis

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