



Indira Health And Lifestyle Private Limited.
NABL Accredited Laboratory
Eucharistic Congress Bldg. No. 1, Opp. Café Leopold,
Close to Delhi Darbar Hotel, Convent Street, Colaba, Mumbai - 400 001.
Tel.: 022-22021122, ☎: 8450982226,
E:apolloclinicmumbai@gmail.com, apollocliniccolaba@gmail.com



Name : Mr. Dilip Kumar Gender : Male Age : 40 Years
UHID : AF-001001489 Bill No : Lab No : c-2861-23
Ref. by : Arcofemi Healthcare Sample Col.Dt : 24/03/2023 11:30
Barcode No : 9874 Reported On : 24/03/2023 15:12

TEST RESULTS UNITS BIOLOGICAL REFERENCE INTERVAL

Lipid Profile- Serum

| | | | |
|----------------------------|--------------------|-------|---|
| S. Cholesterol(Oxidase) | 178 | mg/dL | Desirable < 200 Borderline:>200-<240 Undesirable:>240 |
| S. Triglyceride(GPO-POD) | 132 | mg/dL | Desirable < 150 Borderline:>150-<499 Undesirable:>500 |
| S. VLDL:(Calculated) | 26.4 | mg/dL | Desirable <30 |
| S. HDL-Cholesterol(Direct) | <u>37.5</u> | mg/dL | Desirable > 60 Borderline:>40-<59 Undesirable:<40 |
| S. LDL:(calculated) | 114.1 | mg/dL | Desirable < 130 Borderline:>130-<159 Undesirable:>160 |
| Ratio Cholesterol/HDL | 4.7 | | 3.5 - 5 |
| Ratio of LDL/HDL | 3 | | 2.5 - 3.5 |

Vasanti Gondal
Entered By

Ms Kaveri Gaonkar
Verified By

Dr. Milind Patwardhan
M.D(Path)
Chief Pathologist

End of Report
Results are to be correlated clinically



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Barcode No : 9874 Reported On : 24/03/2023 15:01

TEST RESULTS BIOLOGICAL REFERENCE INTERVAL

HAEMOGRAM(CBC,ESR,P/S)-WB (EDTA)

| | | | |
|-----------------------------------|-------------|----------------|--------------|
| Haemoglobin(Colorimetric method) | 13.2 | g/dl | 13 - 18 |
| RBC Count (Impedance) | 4.94 | Millions/cumm. | 4 - 6.2 |
| PCV/Haematocrit(Calculated) | 40.8 | % | 35 - 55 |
| MCV:(Calculated) | 82.5 | fl | 78 - 98 |
| MCH:(Calculated) | 26.6 | pg | 26 - 34 |
| MCHC:(Calculated) | 32.3 | gm/dl | 30 - 36 |
| RDW-CV: | 15.6 | % | 11.5 - 16.5 |
| Total Leucocyte count(Impedance) | 8000 | /cumm. | 4000 - 10500 |
| Neutrophils: | 56 | % | 40 - 75 |
| Lymphocytes: | 38 | % | 20 - 40 |
| Eosinophils: | 04 | % | 0 - 6 |
| Monocytes: | 02 | % | 2 - 10 |
| Basophils: | 00 | % | 0 - 2 |
| Platelets Count(Impedance method) | 1.23 | Lakhs/c.mm | 1.5 - 4.5 |
| MPV | 13.4 | fl | 6.0 - 11.0 |
| ESR(Westergren Method) | 03 | mm/1st hr | 0 - 20 |

Peripheral Smear (Microscopic examination)

RBCs: Normochromic, Normocytic

WBCs: Normal

Platelets **Large platelets, Reduced, Manual platelet count = 1.25 Lakhs/c.mm**

Note: Test Run on 5 part cell counter. Manual diff performed.

Alsaba Shaikh
Entered By

Ms Kaveri Gaonkar
Verified By

Dr. Milind Patwardhan
M.D(Path)
Chief Pathologist

End of Report
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TEST RESULTS UNITS BIOLOGICAL REFERENCE INTERVAL

Thyroid (T3,T4,TSH)- Serum

| | | | |
|---|-------|--------|---|
| Total T3 (Tri-iodo Thyronine) (ECLIA) | 2.01 | nmol/L | 1.3 - 3.1 nmol/L |
| Total T4 (Thyroxine) (ECLIA) | 82.43 | nmol/L | 66 - 181 nmol/L |
| TSH-Ultrasensitive (Thyroid-stimulating hormone) Method : ECLIA | 1.66 | μIU/ml | Euthyroid : 0.35 - 5.50 μIU/ml Hyperthyroid : < 0.35 μIU/ml Hypothyroid : > 5.50 μIU/ml |

Grey zone values observed in physiological/therapeutic effect.

Note:

T3 :

1. Decreased values of T3 (T4 and TSH normal) have minimal Clinical significance and not recommended for diagnosis of hypothyroidism.
2. Total T3 and T4 values may also be altered in other conditions due to changes in serum proteins or binding sites ,Pregnancy, Drugs (Androgens,Estrogens,O C pills, Phenytoin) etc. In such cases Free T3 and free T4 give corrected Values.
3. Total T3 may decrease by < 25 percent in healthy older individuals

T4 :

1. Total T3 and T4 Values may also be altered in other condition due to changes in serum proteins or binding sites, Pregnancy Drugs (Androgens,Estrogens,O C pills, Phenytoin), Nerphrosis etc. In such cases Free T3 and Free T4 give Corrected values.

TSH :

1. TSH Values may be transiently altered because of non thyroidal illness like severe infections,liver disease, renal and heart failure. Severe burns, trauma and surgery etc.
2. Drugs that decrease TSH values e.g L dopa, Glucocorticoids.
3. Drugs that increase TSH values e.g. Iodine,Lithium, Amiodarone

Vasanti Gondal
Entered By

Ms Kaveri Gaonkar
Verified By

Dr. Milind Patwardhan
M.D(Path)
Chief Pathologist

End of Report
Results are to be correlated clinically

Physical Examination Findings

General Examination

Height 166 cm
Weight 73.2 kg
BMI 26.5 kg/m²
Pulse 56 / min
BP 160/90 mm of Hg
RR 16 /min
Evidence of : pallor / Icterus / Pedal Oedema / Cyanosis / Clubbing

Abdominal Examination:

Cardiovascular System:

Respiratory System:

Musculoskeletal System:

Advice:

• Admit patient in dept, Blue BP Moby.
• T. Telma 20 (i-oo) x daily with wkft.

Doctor's Sign & Stamp:

Dr Merchant Adnaan
Regn.No I-80064-A
Physician

ENT EVALUATION

| | | |
|-------------|---|--------|
| Name: | Mr. DILIP KUMAR 40 09:29 M 24-03-2023 AF-001001489 | MR NO: |
| Age/Gender: |  PLF1083745 | Date: |

COMPLAINTS, IF ANY:

Ear:-
Tympanic Membrane:
Pre-auricular:-
Pina / EAC:
Mastoid Tuning Fork tests:-

(R) wax
(L) TM infection

NOSE:-
External Nose:-
Anterior Rhinoscopy:-
Post - Nasal space:-

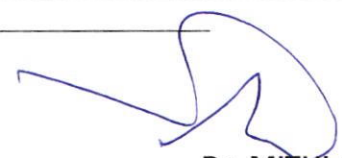
THROAT:-
Tongue / palate / Teeth:-

NECK:-
Nodes:-
Thyroid:-
Glands:-

LNL

INVESTIGATIONS:

IMPRESSION:- (R) wax.
Rest part - LNL



Dr. MITUL BHATT
M.S. (ENT Surgeon),
Reg No. 2011051748

OPHTHALMIC EVALUATION

| | | |
|-----------------|---------------------------------------|---------------|
| Name: | Mr. DILIP KUMAR | MR NO: |
| Age/Sex: | 40 09:29 M 24-03-2023 AF-001001489 | Date: |



Examination

Right Eye

Left Eye

Visual Acuity

Distance Vision

6/6

Near Vision

NS

Color Vision

Normal/Defective

Refraction Prescription :

| Right Eye | | | Left Eye | | |
|----------------|------|------|----------------|-------|------|
| Sph. | Cyl. | Axis | Sph. | Cyl. | Axis |
| +1 DS | | | +0.75 | +0.50 | 150 |
| +2.25 DS | | | +2.00 DS | +0.50 | 150 |
| Remarks | | | Remarks | | |

D
N

SLIT LAMP EXAMINATION:

Anterior Segment: _____

IOP :- _____ mm of Hg.

Posterior Segment: *was* _____

near add +1.25 DS

REMARKS: *Glasses for Reading only*

WNL = Within Normal Limits

NAD = No abnormality detected.

Dr.Zelda V.Dadachanji
MBBS, M.S.(Ophthal),DNB FICO(UK),MRCSEd
Fellow-Cornea & Refractive Surgery (NN)
Consultant Ophthalmologist
CORNEA&LASIK Specialist
Reg. No.MMC2013/05/1940

Mr. DILIP KUMAR
40 09:29 M
24-03-2023 AF-001001489

SR01352888

DENTAL CHECKUP

| | |
|-------------------|---------------|
| Name: DILIP KUMAR | MR NO: 1489 |
| Age/Gender : 40/M | Date: 24/3/23 |

Medical history: Diabetes Hypertension

| EXAMINATION | UPPER RIGHT | UPPER LEFT | LOWER LEFT | LOWER RIGHT |
|----------------------|-------------|------------|------------|-------------|
| Calculus& Stains | ++ | ++ | +++ | +++ |
| Mobility | | | | |
| Caries (Cavities) | | | | |
| a)Class 1 (Occlusal) | | | | |
| b)Class 2 (Proximal) | | | | |
| c)Class 5 (Cervical) | 11-16 | 21,22 | | 44,46 |
| Faulty Restoration | | | | |
| Faulty Crown | | | | |
| Fractured Tooth | | | | |
| Root Pieces | | | | |
| Impacted Tooth | | | | |
| Missing Tooth | | | | |
| Existing Denture | | | | |

TREATMENT ADVISED:

| TREATMENT | UPPER RIGHT | UPPER LEFT | LOWER LEFT | LOWER RIGHT |
|-----------------------|-------------|------------|------------|-------------|
| Restoration / Filling | 11-16 | 21,22 | | 44,46 |
| Root Canal Therapy | | | | |
| Crown | | | | |
| Extraction | | | | |

Oral Prophylaxis: Scaling & polishing
 Orthodontic Advice for Braces: Yes / No
 Prosthetic Advice to Replace Missing Teeth: Denture Bridge Implant
 Oral Habits: Tobacco Cigarette Others since ___ years
 Advice to quit any form of tobacco as it can cause cancer.

Other Findings: _____



Dr. Prachi Shah Manudhane
 BDS, GDC Mumbai (Reg.No. A-17381)
 Advanced Prosthodontics, UCLA, California, USA

Mr. DILIP KUMAR
40 09:29 M
24-03-2023 AF-001001489
ED799249

| | |
|--|-------------------------------|
| | Registration Date: |
| | Ht./Wt.: Cms./ Kgs. |

NUTRITION PRESCRIPTION for HTN

Keeping in mind your Medical Reports, health status, food intake, dietary habits, personalized Dietary Instructions are provided here.

DIETARY RECOMMENDATIONS:-Changes with regards to your present Dietary habits,

- Start your day with 1 tbsp of methi seeds soaked overnight. Gulp methi along with water.
- Have roasted snacks like popcorns, channas, rice flakes, puffed rice.
- **CEREALS-** Include more of whole grain products like wheat, jowar, oats, ragi, soya, and barley and avoid consumption of refined flour and its products.
- **MILK-** Avoid butter, cream, cheese, whole milk.
- **NUTS-** Avoid coconut, peanut, cashewnut.
- **NON-VEG-** Have more of Egg whites, chicken, fish, avoid red meat, shellfish, beef and pork.
- Avoid papad, pickles, oily chutneys, fried foods, creamy foods, mayonnaise, chocolates, ice-cream, junk foods & fast foods.
- Use oil in rotation: Oil /Ghee consumption – 3-4 tsp/day. I.e ½ kg/person/ month.
- **Salt for entire day should not exceed ½ tsp (3 grams).**
- **Avoid soda-bi-carb in food preparation.**
- **Avoid Chinese foods, canned & processed foods, brined foods & salted nuts.**
- **To enhance flavor add lime, vinegar, tamarind,kokam, herbs and other spices.**
- Use Non-stick cookware for cooking your food.
- Avoid vanaspati, margarine, bakery products like cakes, pastries, cream-biscuits.
- Drink plenty of water, atleast 12-15 glasses (2.5 -3 liters) / day.
- Do not smoke, drink, or chew tobacco.
- Exercise daily for 45-60 mins either brisk walking, jogging, swimming. If medical complaint then as per doctor's advise.


Dr. Sabiha Siddiqui

BHSc,P.G.Dietetics,CDE,DNYS
(Head Clinical Dietician & Nutritionist)

| DIET CHART | | | |
|-----------------|---------------|--|--|
| TIME | MEAL | MENU | AMOUNT [HOUSEHOLD MEASURES] |
| 7:30 am | Early morning | Warm Water | 1 glass |
| | | Aerobic Exercise | 45 mins. (minimum) |
| 9:00am | Breakfast | Tea / coffee/ Milk (skimmed) | 50 ml milk |
| | | Veg poha /Oats Upma / Veg Dahlia Phulka / Methi Khakra / Bhakri | 1 vati Medium size -2 nos (no oil / ghee) |
| 11:00am | Mid – Morning | Fruit | 1 Medium size |
| 1: 00 pm | Lunch | Salad / Thin soup Cucumber ,Tomato, cabbage, onion , sprouted pulses . etc | 1 Big Bowl |
| | | Roti / Phulka | 2 small / 1 big |
| | | Vegetables | 1-2 Vati (cook in 1 tsp oil) |
| | | Rice | 1 vati |
| | | Dal | 1 Vati |
| | | Curd (skimmed)/ Buttermilk | 1/2 cup /1 glass |
| 4:00pm – 6.00pm | Evening | Diet Khakra / digestive oats biscuit | 1 / 2 nos only |
| | | Roasted chana/Roastedrice flakes / sprouts bhel, /sweet corns | 1 handful 1 small katori |
| | | Tea | 1 cup |

| | | | |
|---------|------------|--|---------------------------|
| 8:30pm | Dinner | SAME AS LUNCH (except rice) | |
| | OPTIONS | Veg khichdi + kadhi /curd | 2 Vatis / 1 vati |
| | OPTIONS | Bhakri -Wheat /Bajra/Jowar Vegetable Dal | 2 nos 1 vati 1 vati |
| 10:00pm | Bed – Time | Milk (Skimmed) | 100 ml milk |

| | | |
|--------------------|----------------|----------|
| Total calories/day | Oil /Ghee /day | Salt/day |
| 1500 Kcals | 4 tsps | 1/2 tsp |

- Oil intake should be ½ liter per person per month.
- Consume Green tea/ Herbal tea 2-3 cups/ day.
- Take 1 Tsp Flaxseed (Aisi) after lunch and dinner (optional)



Dr. Sabiha Siddiqui
BHSc,P.G.Dietetics,CDE,DNYS
(Head Clinical Dietitian & Nutritionist)

MR DILIP KUMAR
1489

40 Years Male

24.03.2023 12:10:03
THE APOLLO CLINIC
COLABA
MUMBAI-400001

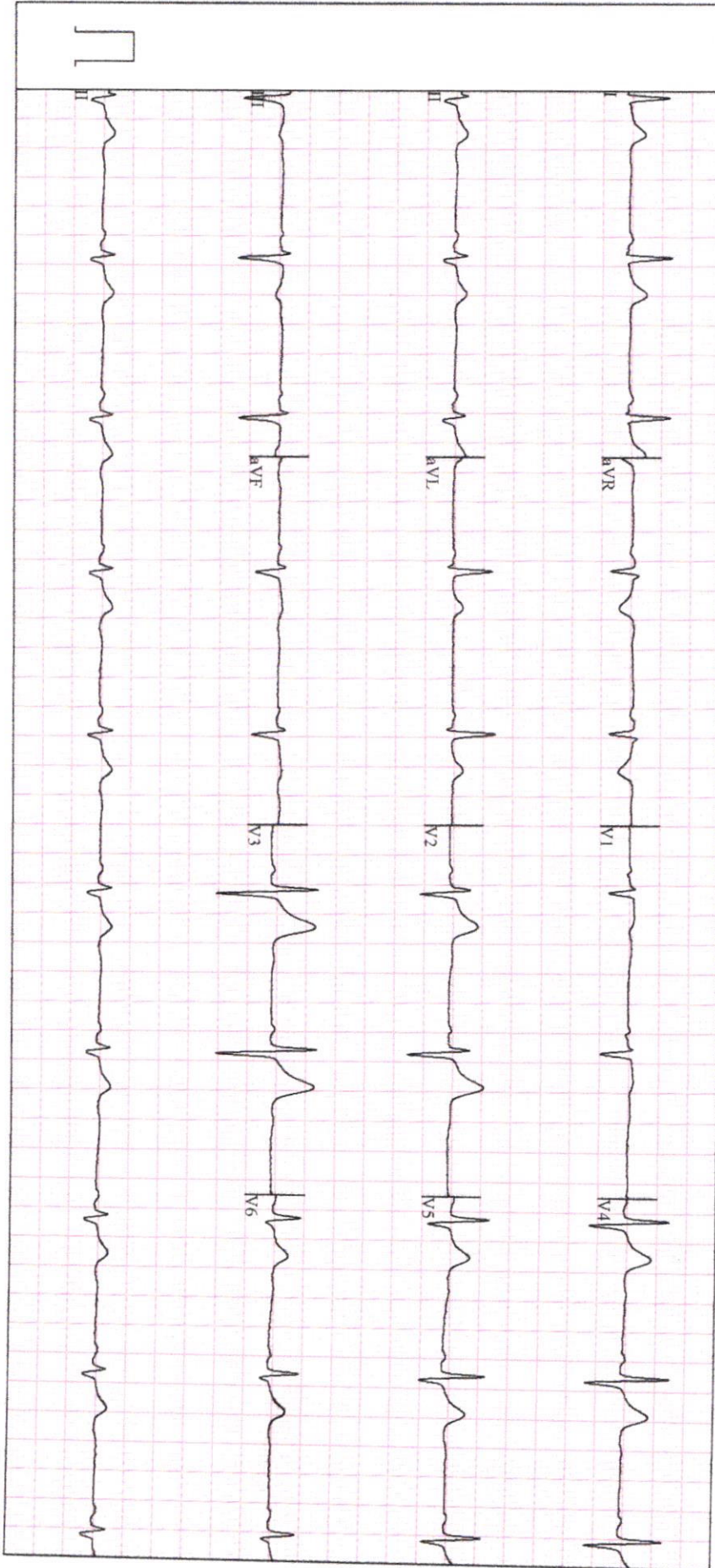
QRS : 84 ms
QT / QTcBaz : 388 / 371 ms
PR : 142 ms
P : 90 ms
RR / PP : 1084 / 1090 ms
P / QRS / T : 31 / -23 / 16 degrees

Sinus bradycardia
Otherwise normal ECG

55 bpm
--/-- mmHg

Sinus Bradycardia

Dr. SUNDEEP AMBERKAR
M.D.F.C.P.S. DIP, ECHO
Consultant Cardiologist
Reg. No. 87773



GE MAC2000 1.1 12SL™ v241 25 mm/s 10 mm/mV ADS 0.56-20 Hz 50 Hz Unconfirmed 4x2.5x3_25_R1 1/1

NAME : MR. DILIP KUMAR
AGE/SEX : 40 YEARS / MALE
REF. BY : ARCOFEMI MEDIWHEEL

MR.NO : AF001001489
DATE : 24/03/2023


2D ECHOCARDIOGRAPHY AND COLOR DOPPLER STUDY

2D ECHOCARDIOGRAPHY FINDINGS :

1. No LV Dilatation. No LV Wall Hypertrophy.
2. No Significant LV RWMA seen at rest.
3. Good LV Systolic function. LVEF appears to be 60 %.
4. Gr- I LV Diastolic Dysfunction. Normal LVEDP.
5. Structurally normal all cardiac valves. No PAH
6. Normal sized LA / RA/ RV with good RV contractility. No Hepatic Congestion.
7. IAS and IVS appear intact.
8. No obvious clot seen.
9. No vegetations or pericardial effusion.
10. Normal Sinus Rhythm.

IMPRESSION

Normal all Cardiac chambers.
Normal LV systolic function.
Gr- I LV DD. Normal LVEDP.
Normal valves. No PAH.
No Clots / Vegetations/Pericardial effusion.
Normal Sinus Rhythm.


DR SUNDEEP AMBERKAR
M.D., F. C. P.S., Dip. Echo.

APOLLO CLINIC (COLABA)

Name: DILIP KUMAR
MRN: 23-03-24-113646

Study Date: 24/03/2023 11:36
Gender: Male

Cardiac

Dimension

MMode

IVSd (MM): 1.06 cm
LVIDd (MM): 5.18 cm
LVPWd (MM): 0.935 cm

IVSs (MM): 1.53 cm
LVIDs (MM): 3.44 cm
LVPWs (MM): 1.44 cm

AoR Diam (MM): 3.10 cm
LA Dimen (MM): 3.65 cm

AV Cusp Sep: 1.95 cm

EDV (MM-Teich): 129 ml
ESV (MM-Teich): 48.9 ml
IVS/LVPW (MM): 1.14
LA/Ao (MM): 1.18
LVPW % (MM): 54.5 %

EF (MM-Teich): 62.0 %
FS (MM-Teich): 33.6 %
IVS % (MM): 44.0 %
LV Mass (Cubed): 193 grams

Aortic Valve

Doppler

AV Vmax: 115 cm/s
AV Max PG: 5.25 mmHg

LVOT VTI: 18.2 cm
LVOT Vmax: 82.5 cm/s
LVOT Max PG: 2.72 mmHg
LVOT Vmean: 61.2 cm/s
LVOT Mean PG: 1.65 mmHg

Mitral Valve

MMode

APOLLO CLINIC COLABA

Mumbai Pvt. Ltd.
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Close to Delhi Darbar Hotel, Convent Street, Colaba, Mumbai - 400 001.
file:///C:/Users/DILIP KUMAR/

NABL ACCREDITED LABORATORY



022-22021122



8450982226

colaba@theapolloclinic.com
apollocliniccolaba@gmail.com

MV E-F Dist: 2.42 cm
MV EPSS: 0.722 cm

Doppler

MV Peak A Vel: 82.5 cm/s
MV Peak A PG: 2.72 mmHg

MV Peak E Vel: 47.6 cm/s (Avg.)
MV Peak E PG: 0.905 mmHg (Avg.)
MV Dec Slope: 113 cm/s²
MV Dec Slope Time: 0.409 sec
MV DS P1/2t: 121 msec

MV Peak E Vel: 47.6 cm/s (Avg.)
MV Peak E PG: 0.905 mmHg (Avg.)

MV E/A: 0.577

Tricuspid Valve

Doppler

TR Vmax: 204 cm/s (Avg.)
TR Max PG: 16.6 mmHg (Avg.)

Pulm Valve

Doppler

PI End Dias Vel: 157 cm/s
PI End Dias PG: 9.89 mmHg
PV Vmax: 160 cm/s
PV Max PG: 10.3 mmHg

Interpretation Summary

Comments

Reading Physician: _____

Patient Name : Mr. Dilip Kumar

Age : 40 yrs

Ref. By : Arcofemi

MR No : AF001001489

Sex : Male

Date : 24-03-2023

X-RAY CHEST PA VIEW

The lungs are clear.

Heart size is upper limit of normal.

Mild unfolding of aorta.

Pleural spaces are clear.

Bilateral costophrenic angles are clear.

Bony thorax and soft tissues are unremarkable.


Dr. Bushra Rasool
Consultant Radiologist

Patient Name : Mr. Dilip Kumar
Age : 40 yrs
Ref. By : Arcofem

MR No : AF001001489
Sex : Male
Date : 24-03-2023

ULTRASOUND OF ABDOMEN AND PELVIS

LIVER: It is normal in size and shape. It measures 12.3 cm. **The parenchyma shows mildly increased echo-texture.** No focal lesion seen. Intra-hepatic biliary and portal radicles are normal. The main portal vein is normal.

GALL BLADDER: is minimally distended. No calculus or mass seen. The wall thickness is normal. No peri-cholic abnormality seen. The common bile duct is normal. No evidence of choledocholithiasis seen.

PANCREAS: It is normal in size and echotexture. No focal lesion seen. No peri-pancreatic collection noted. The main pancreatic duct is normal.

SPLEEN: It is normal in size and echotexture. Splenic vein is normal.

BOTH KIDNEYS: Both kidneys are normal in size, shape and position. The parenchyma shows normal echo-texture. Cortico-medullary differentiation is well maintained.

Right kidney measures 9.0 x 4.7 cm. **Mid and lower poles calcification.**

Left kidney measures 10.1 x 4.9 cm. **Mid and lower poles calcification.**

No evidence of calculus or hydronephrosis seen.


URINARY BLADDER: It is adequately distended. The margins are smooth. No vesical mass or calculus seen. Prevoid is 164 cc. **Postvoid residue is significant (vol = 29 cc)**

PROSTATE: is mildly enlarged in size . It measures 4.0 x 3.4 x 4.5 cm. **The weight measures approx 32.0 cc.**

No ascitis or lymphadenopathy noted.

IMPRESSION:

- MILD FATTY LIVER.
- GRADE II PROSTATOMEGALY WITH SIGNIFICANT POSTVOID RESIDUE.


Dr. Bushra Rasool
Consultant Radiologist

Note: USG examinations have their limitations due to patient body habitus and bowel gas. Bowel abnormalities may not be detected on sonography. This document is not valid for medico-legal purpose.