

			LABORATORY REPORT	· ·		
Name	:	Mr. Abhishek Lodhi		Reg. No	:	308100849
Sex/Age	:	Male/37 Years		Reg. Date	:	12-Aug-2023 10:11 AM
Ref. By	:			<b>Collected On</b>	:	
Client Name	:	Mediwheel		Report Date	:	14-Aug-2023 09:50 AM

### **Medical Summary**

**GENERAL EXAMINATION** 

Height (cms):169

Weight (kgs):66.6

Blood Pressure: 110/70 mmHg

Pulse:55 /Min

No Clubbing/Cynosis/Pallor/PedelOedem

Systemic Examination:

Cardio vascular System - S1,S2 Normal, No Murmur

Respiratory system - AEBE

Central Nervous System - No FND

Abdomen - Soft, Non Tender, No Organomegaly

Epilepsy - N/A

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M.D, GENERAL MEDICINE
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CUROVIS HEALTHCARE PVT. LTD.





# भारतीय विशिष्ट पहचान प्राधिकरण

# भारत सरकार Inique Identification Authority of India Government of India

नामांकन क्रम/Enrolment No.: 1207/05003/12788

Τo अभिषेक लोधी Abhishek Lodhi S/O: Madanlal Pichhode D-06 virangana laxmi bai parisar kotra sultanabad near may flower school Huzur Bhopal C.T.T.Nagar Madhya Pradesh - 462003 9691746324



आपका आधार क्रमांक / Your Aadhaar No. : G-23899

8680 5379 3290 मेरा आधार, मेरी पहचान



### भारत सरकार

Government of India



अभिषेक लोधी Abhishek Lodhi जन्म तिथि/ DOB: 21/08/1985

पुरुष / MALE



8680 5379 3290

मेरा आधार, मेरी पहचान





#### सूचना

- 🟿 आधार पहचान का प्रमाण है, नागरिकता का नहीं |
- 🛮 पहचान का प्रमाण ऑनलाइन ऑथेन्टिकेशन द्वारा प्राप्त करें |
- 🛮 यह एक इलेक्ट्रॉनिक प्रक्रिया द्वारा बना हुआ पत्र है |

#### INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
- To establish identity, authenticate online.
- This is electronically generated letter.
- अाधार देश भर में मान्य है ।
- आधार भविष्य में सरकारी और गैर-सरकारी सेवाओं का लाभ उठाने में उपयोगी होगा ।
- Aadhaar is valid throughout the country.
- Aadhaar will be helpful in availing Government and Non-Government services in future.

Dr Jay Soni eral Medicine)





भारतीय विशिष्ट पहचान प्राधिकरण Unique Identification Authority of India

पताः

S/O: मदनलाल पिछोडे, डी-06 वीरंगना लक्षमी बाई परिसर, मे फ्लावर स्कूल के पास, कोटरा सुल्तानाबाद, हुजुर, भोपाल, मध्य प्रदेश - 462003

Address:

S/O: Madanlal Pichhode, D-06 virangana laxmi bai parisar, near may flower school, kotra sultanabad, Huzur, Bhopal, Madhya Pradesh - 462003

8680 5379 3290



 $\searrow$ 

7773854425







Reg. No

: 308100849

Ref Id

**Collected On** : 12-Aug-2023 10:11 AM

Name

: Mr. Abhishek Lodhi

Reg. Date

: 12-Aug-2023 10:11 AM

Age/Sex

: 37 Years

i Male

Tele No.

: 7773854425

Ref. By

Pass. No.

Dispatch At

Location : CHPL					Sample	Тур	e :El	DTA Whole Blood
Parameter	R	esults		Unit	Biolog	gical F	Ref. Inte	erval
		COM	PLET	BLOOD COUNT (CI	BC)			
Hemoglobin (Colorimetric method)	1	3.9		g/dL	13.0 -	18.0		
Hematrocrit (Calculated)	L 3	9.90		%	47 - 5	2		
RBC Count (Electrical Impedance)	L 4	.62		million/cmm	4.7 - 6	5.0		
MCV (Calculated)	8	6.5		fL	78 - 1	10		
MCH (Calculated)	3	0.1		Pg	27 - 3	1		
MCHC (Calculated)	3	4.8		%	31 - 3	5		
RDW (Calculated)	L 1	1.0		%	11.5 -	14.0		
WBC Count Flowcytometry with manual Microscopy	L 3	790		/cmm	4000	- 1050	00	
MPV (Calculated)	9	.8		fL	7.4 - 1	10.4		
DIFFERENTIAL WBC COUNT	[	% ]		EXPECTED VALUES	S [.	Abs ]		EXPECTED VALUES
Neutrophils (%)	L 4	<b>1</b> 1	%	42.0 - 75.2	1	554	/cmm	2000 - 7000
Lymphocytes (%)	H 4	<b>17</b>	%	20 - 45	1	781	/cmm	1000 - 3000
Eosinophils (%)	(	)2	%	0 - 6	3	79	/cmm	200 - 1000
Monocytes (%)		10	%	2 - 10	7	6	/cmm	20 - 500
Basophils (%)	(	00	%	0 - 1	0	)	/cmm	0 - 100
PERIPHERAL SMEAR STUDY								
RBC Morphology	١	Normocyt	ic and I	Normochromic.				
WBC Morphology	L	.eucoper	ıia					
PLATELET COUNTS								
Platelet Count (Electrical Impedance	e) 2	24000		/cmm	1500	00 - 4	50000	
Platelets	F	Platelets	are ade	quate with normal morph	hology.			
Parasites				is not detected.				
Comment	-	·						

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Approved By:

Dr. Bhavi Patel

MD (Pathology)

Generated On: 12-Aug-2023 09:23 PM

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12-Aug-2023 11:54 AM Page 1 of 11

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**CUROVIS HEALTHCARE PVT. LTD.** 

<sup>\*</sup> This test has been out sourced.







/ Male

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: Mr. Abhishek Lodhi

Req. Date

: 12-Aug-2023 10:11 AM

Age/Sex

: 37 Years

Pass. No.

Tele No.

: 7773854425

Ref. By

Dispatch At

: EDTA Whole Blood

Location **Parameter**  : CHPL

Sample Type Result Unit

Biological Ref. Interval

**HEMATOLOGY** 

**BLOOD GROUP & RH** 

Specimen: EDTA and Serum; Method: Forward Reverse Tube Agglutination

**ABO** 

"O"

Rh (D)

Positive

Note

**ERYTHROCYTE SEDIMANTATION RATE [ESR]** 

ESR 1 hour Westergreen method 03

mm/hr

ESR AT1 hour: 1-7

ERYTHRO SEDIMENTION RATE, BLOOD -

Erythrocyte sedimentation rate (ESR) is a non - specific phenomena and is clinically useful in the diagnosis and monitoring of disorders associated with an increased production of acute phase reactants. The ESR is increased in prenancy from about the 3rd month and returns to normal by the 4th week post partum. ESR is influenced by age, sex, menstrual cycle and drugs (eg. corticosteroids, contraceptives). It is especially low (o-1mm) in polycythaemia, hypofibrinogenemia or or congestive cardiac failure and when there are abnormalities or the red cells such as poikilocytosis, spherocytosis or sickle cells.

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MD (Pathology)

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CUROVIS HEALTHCARE PVT. LTD.

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**4**0308700

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: Mr. Abhishek Lodhi

308100849

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Name

Reg. Date

: 12-Aug-2023 10:11 AM

Age/Sex

Rea. No

: 37 Years / Male Pass. No.

Tele No.

: 7773854425

Ref. By

: CHPL

Dispatch At Sample Type

: Flouride F

Location Parameter

Result

Unit

Biological Ref. Interval

**FASTING PLASMA GLUCOSE** Specimen: Flouride plasma

Fasting Blood Sugar (FBS)

92.6

mg/dL

70 - 110

GOD-POD Method

Criteria for the diagnosis of diabetes

1. HbA1c >/= 6.5 \*

Or

2. Fasting plasma glucose >126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.

3. Two hour plasma glucose >/= 200mg/dL during an oral glucose tolerence test by using a glucose load containing equivalent of 75 gm anhydrous glucose dissolved in water.

4. In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose >/= 200 mg/dL.

\*In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing. American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34;S11.

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Dr. Bhavi Patel

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Triglyceride





**TEST REPORT** Reg. No Ref Id : 308100849 Collected On : 12-Aug-2023 10:11 AM Name : Mr. Abhishek Lodhi Reg. Date : 12-Aug-2023 10:11 AM Age/Sex : 37 Years / Male Pass. No. Tele No. : 7773854425 Ref. By Dispatch At : Serum Location : CHPL Sample Type **Parameter** Result Unit Biological Ref. Interval **Lipid Profile** Cholesterol 199.00 ma/dL Desirable: <200.0 Borderline High: 200-High: >240.0 Enzymatic, colorimetric method

116.30

3,		J	Borderline: 150-199 High: 200-499 Very High : > 500.0
Enzymatic, colorimetric method			
HDL Cholesterol	44.20	mg/dL	Low: <40 High: >60
Accelerator selective detergent method			
LDL	131.54	mg/dL	Optimal: < 100.0 Near Optimal: 100-129 Borderline High: 130- 159 High : 160-189 Very High : >190.0
Calculated			
VLDL	23.26	mg/dL	15 - 35
Calculated			
LDL / HDL RATIO	2.98		0 - 3.5
Calculated			
Cholesterol /HDL Ratio	4.50		0 ~ 5.0
Calculated			

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\* This test has been out sourced.

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mg/dL

Dr. Bhavi Patel

Normal: <150.0

MD (Pathology)

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**CUROVIS HEALTHCARE PVT. LTD.** 







/ Male

Reg. No

: 308100849

Ref Id

Collected On : 12-Aug-2023 10:11 AM

Name

: Mr. Abhishek Lodhi

Reg. Date

: 12-Aug-2023 10:11 AM

Age/Sex

: 37 Years

Pass. No.

Tele No.

: 7773854425

Pof Ry

Disnatch At

Ref. By		Dispatch At	:
Location : CHPL		Sample Type	: Serum
Parameter	Result	Unit	Biological Ref. Interval
	LFT WITH GGT		
Total Protein	7.55	gm/dL	1Day: 3.4-5.0 1Day to 1Month: 4.6-6.8 2 to 12Months: 4.8-7.6 >=1Year: 6.0-8.0 Adults: 6.6-8.7
Biuret Reaction			
Albumin	5.10	g/dL	0 - 4 days: 2.8 - 4.4 4 days - 14 yrs: 3.8 - 5.4 14 19 yrs: 3.2 - 4.5 20 - 60 yrs: 3.5 - 5.2 60 - 90 yrs: 3.2 - 4.6 > 90 yrs: 2.9 - 4.5
By Bromocresol Green			
Globulin (Calculated)	2.45	g/dL	2.3 - 3.5
A/G Ratio (Calulated)	2.08		0.8 - 2.0
SGOT	23.90	U/L	0 - 40
UV without P5P			
SGPT	28.00	U/L	0 - 40
UV without P5P			
Alakaline Phosphatase	65.2	IU/I	53 - 128
P-nitrophenyl phosphatase-AMP Buffer, Multiple-point rate			
Total Bilirubin	0.63	mg/dL	0 - 1.2
Vanadate Oxidation			
Conjugated Bilirubin	0.19	mg/dL	0.0 - 0.4
Unconjugated Bilirubin  Calculated	0.44	mg/dL	0.0 - 1.1
GGT	20.60	mg/dL	< 49

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Dr. Bhavi Patel

MD (Pathology)

SZASZ Method

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Name

: Mr. Abhishek Lodhi

Reg. Date

: 12-Aug-2023 10:11 AM

Age/Sex

: 37 Years / Male

Pass. No.

Tele No.

: 7773854425

Ref. By

Dispatch At

Location

· CHDI

Sample Type : Serum

Location		Sample Typ	e , Serum
Parameter	Result	Unit	Biological Ref. Interval
	BIO - CHEMISTRY		
Uric Acid Enzymatic, colorimetric method	5.02	mg/dL	3.5 - 7.2
Creatinine Enzymatic Method	0.90	mg/dL	0.9 - 1.3
BUN UV Method	9.20	mg/dL	6.0 - 20.0

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\* This test has been out sourced.

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Dr. Bhavi Patel

MD (Pathology)

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: 308100849

**TEST REPORT** Ref Id

Pass. No.

**Collected On** : 12-Aug-2023 10:11 AM

: Mr. Abhishek Lodhi Name

Reg. Date

: 12-Aug-2023 10:11 AM

Age/Sex : 37 Years / Male

Tele No.

: 7773854425

Ref. By

Reg. No

Dispatch At

Sample Type

: EDTA Whole Blood

Location : CHPL

Result

Unit

Biological Ref. Interval

**HEMOGLOBIN A1 C ESTIMATION** 

Specimen: Blood EDTA

\*Hb A1C

**Parameter** 

5.1

% of Total Hb Normal: < 5.7 %

Pre-Diabetes: 5.7 % -6.4 %

Diabetes: 6.5 % or

higher

Boronate Affinity with Fluorescent Quenching

Mean Blood Glucose

99.67

mg/dL

Calculated

### **Degree of Glucose Control Normal Range:**

Poor Control >7.0% \*

Good Control 6.0 - 7.0 %\*\*Non-diabetic level < 6.0 %

- \* High risk of developing long term complication such as retinopathy, nephropathy, neuropathy, cardiopathy, etc.
- Some danger of hypoglycemic reaction in Type I diabetics.
- \* Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1c levels in this area.

### **EXPLANATION:-**

- \*Total haemoglobin A1 c is continuously synthesised in the red blood cell throught its 120 days life span.The concentration of HBA1c in the cell reflects the average blood glucose concentration it encounters.
- \*The level of HBA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose concentration over an extended time period and remains unaffected by short-term fluctuations in blood
- \*The measurement of HbA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half life of a red blood cell is sixty days, HbA1c has been accepted as a measurnment which eflects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months.

\*It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures.

**HbA1c assay Interferences:** 

\*Errneous values might be obtained from samples with abnormally elevated quantities of other Haemoglobins as a result of either their simultaneous elution with HbA1c(HbF) or differences in their glycation from that of HbA(HbS)

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Approved By:

Dr. Keyur V Patel

MB,DCP

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Name

: Mr. Abhishek Lodhi

Reg. Date

: 12-Aug-2023 10:11 AM

Age/Sex

: 37 Years

1 Male

Pass. No.

Tele No.

: 7773854425

Ref. By

Dispatch At

: Urine Spot

Location

: CHPL

Sample Type

Test

Result

Unit

Biological Ref. Interval

#### URINE ROUTINE EXAMINATION

**PHYSICAL EXAMINATION** 

Quantity

30 cc

Clear

Colour

Pale Yellow

Clarity

Clear

CHEMICAL EXAMINATION (BY REFLECTANCE PHOTOMETRIC)

pН

6.0

4.6 - 8.0

Sp. Gravity

1.005

1.001 - 1.035

Protein

Nil

Nil

Glucose

Nil

Nil

Ketone Bodies

Nil

Nil

Urobilinogen

Nil

Nil

Nil

Nitrite

Bilirubin

Nil

Nil

Blood

Nil

Nil

### MICROSCOPIC EXAMINATION (MANUAL BY MICROSCOPY)

Leucocytes (Pus Cells)

1 - 2/hpf

Absent

Erythrocytes (Red Cells)

Nil

Absent

**Epithelial Cells** 

1 - 2/hpf

Absent

Crystals

Absent

Absent

Casts

Absent

Absent

Amorphous Material

Absent

Bacteria

Absent

Absent Absent

Remarks

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Dr. Bhavi Patel

MD (Pathology)

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**C** 079 40308700

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Req. Date

: 12-Aug-2023 10:11 AM

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Age/Sex

**Parameter** 

: 37 Years

/ Male

Pass. No.

Tele No.

Unit

: 7773854425

Dispatch At

Sample Type

: Serum

: CHPL Location

Biological Ref. Interval

**IMMUNOLOGY** 

THYROID FUNCTION TEST

Result

T3 (Triiodothyronine)

CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY

1.43

na/mL

0.86 - 1.92

Triiodothyronine (T3) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH (thyroid stimulating hormone) and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland and hypothalamus.

In the circulation, 99.7% of T3 is reversibly bond to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and prealbumin. The remaining unbound T3 is free in the circulation and is metabolically active.

In hypothyroidism and hyperthyroidism, F T3 (free T3) levels parallel changes in total T3 levels. Measuring F T3 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T3 occur due to changes in T3 binding proteins, especially TBG.

T4 (Thyroxine)

CHEMILUMINECENT MICROPARTICLE IMMUNOASSAY

10.70

ua/dL

3.2 - 12.6

Thyroxin (T4) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH (thyroid stimulating hormone) and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland and hypothalamus. In the circulation, 99.95% of T4 is reversibly bond to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and thyroxine-binding prealbumin. The remaining unbound T4 is free in the circulation and is both metabolically active and a precursor to triiodothyronine (T3).

In hypothyroidism and hyperthyroidism, F T4 (free T4) levels parallel changes in total T4 levels. Measuring FT4 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T4 occur due to changes in T4 binding proteins, especially TBG.

#### Limitations:

- 1. The anticonvulsant drug phenytoin may interfere with total and F T4 levels due to competition for TBG binding
- 2.F T4 values may be decreased in patients taking carbamazepine.
- 3. Thyroid autoantibodies in human serum may interfere and cause falsely elevated F T4 results.

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\* This test has been out sourced.

Approved By:

Dr. Keyur V Patel

MB,DCP

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12-Aug-2023 07:27 PM

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Ref. By

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Location

/ Male Pass. No.

Ref Id

Dispatch At

: CHPL

Sample Type : Serum

**TSH** CHEMILUMINECENT MICROPARTICLE IMMUNOASSAY µIU/ml 0.35 - 5.50

Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-relasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulate the thyroid gland to synthesize and secrete T3 and T4. Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary

1.770

hypothyroidism, TSH levels are low.

TSH levels During Pregnancy: First Trimester :0.1 to 2.5 µIU/mL Second Trimester: 0.2 to 3.0 µIU/mL Third trimester: 0.3 to 3.0 µIU/mL

Referance: Carl A.Burtis, Edward R.Ashwood, David E.Bruns. Tietz Textbook of Clinical Chemistry and Molecular

Diagnostics. 5th Eddition. Philadelphia: WB Sounders, 2012:2170

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: 37 Years

Reg. Date Tele No.

: 12-Aug-2023 10:11 AM

Ref. By

Age/Sex

Location

1 Male Pass. No.

: 7773854425

: CHPL

Dispatch At

: Serum

Sample Type

Result Unit **Parameter** 

Biological Ref. Interval

**IMMUNOLOGY** 

\*TOTAL PROSTATE SPECIFIC ANTIGEN (PSA)

CHEMILUMINECENT MICROPARTICLE IMMUNOASSAY

0.71

ng/mL

0 - 4

Measurement of total PSA alone may not clearly distinguish between benign prostatic hyperplasia (BPH) from cancer, this is especially true for the total PSA values between 4-8 ng/mL.

Percentage of free PSA = free PSA/total PSA X 100

Percentage of free PSA: Patients with prostate cancer generally have a lower percentage of Free PSA than patients with benign prostatic hyperplasia. Percentage Free PSA of less than 25% is a high likelihood of prostatic cancer.

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

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MD (Pathology)

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12-Aug-2023 02:52 PM Page 11 of 1

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**C** 079 40308700

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			LABORATORY REPORT	2000		
Name	:	Mr. Abhishek Lodhi		Reg. No	:	308100849
Sex/Age	:	Male/37 Years		Reg. Date	:	12-Aug-2023 10:11 AM
Ref. By	:			Collected On	:	
Client Name	:	Mediwheel		Report Date	:	12-Aug-2023 01:59 PM

### **Electrocardiogram**

**Findings** 

Sinus Bradycardia.

Rest Within Normal Limit.

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LABORATORY REPORT Name Mr. Abhishek Lodhi Reg. No 308100849 Sex/Age Male/37 Years Reg. Date 12-Aug-2023 10:11 AM Ref. By **Collected On Client Name** Mediwheel **Report Date** : 12-Aug-2023 01:59 PM

# **2D Echo Colour Doppler**

- 1. No concentric LVH.
- 2. Normal sized LA, LV, RA, RV.
- 3. Normal LV systolic function, LVEF: 60%.
- 4. No RWMA.
- 5. Normal LV compliance.
- All cardiac valves are structurally normal.
- 7. Trivial MR, Trivial TR, Trivial PR, No AR.
- 8. No PAH, RVSP: 32 mm Hg.
- 9. IAS/IVS: Intact.
- 10. No clot/vegetation/pericardial effusion.
- 11. No coarctation of aorta.

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Name: Abhishek Lodhi

### M MODE FINDINGS:

MITRAL VALVE	OBSERVED		RMAL LUES	LV Fl	JNCTION
Anterior leaflet	Normal			LVA(	d):
EF Slope		70-	150mm/sec		
Opening Amplitude				LVA(	
Posterior leaflet	Normal			LVL(s	
E.P.S.S.		m		LVV(	<del></del>
Mitral Valve Prolapse	No			LVV(	
Vegetation	No			LVEF	
TRICUSPID VALVE		LVCOM	/IPLIANCE		
Normal		Normal			

	OBSERVED	NORMAL	MVO AREA	
VALVE		VALUES		
EF Slope		6-115 mm	By Planimetry:	
A' Wave -				
Midsystolic notch -			By PHT :	
Flutter -				
Other Findings				
DIMENSIONS:			AORTIC VALVE	
1. Lvd. (Diastole)	44 mm		Cuspal Opening	16mm
2. Lvd. (Systole)	28 mm	24-42 mi		Central
3. RVID (Diastole)	13mm	7-23 mi	m Eccentricity index	1
4. IVS (Diastole)	10mm		Other findings	Absent
5. IVS (Systole)	12mm			
6. LVPWT (Diastole	e) 10mm	6-11 mi	m	
7. LVPM (Systole)	11mm			
8. Aortic root	32 mm	22-37 mi	m	
9. Left Atrium:	36 mm	19-40 mi	m	
10. LVEF	60%			

STRUCTURE	REGURG	VELOCITY1	GRADIENT
	GRADING	m/sec	5 Mm Hg
		Max/Mean	Peak/Mean
MITRAL VALVE	Trivial	0.80	3.30
TRICUSPID VALVE	Trivial	0.60	1.40
PULMONARY VALVE	Trivial	0.85	2.25
AORTIC	No	1.20	6.0

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### **CUROVIS HEALTHCARE PVT. LTD.**



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Ref. By	:			Collected On	:	
Client Name	:	Mediwheel		Report Date	:	14-Aug-2023 01:14 PM

### X RAY CHEST PA

Both lung fields appear clear. No evidence of any active infiltrations or consolidation. Cardiac size appears within normal limits. Both costo-phrenic angles appear free of fluid. Both domes of diaphragm appear normal. **COMMENT:** No significant abnormality is detected. ----- End Of Report -----

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**DR DHAVAL PATEL** 

**Consultant Radiologist** MB, DMRE

Reg No:0494
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Client Name	:	Mediwheel		Report Date	:	14-Aug-2023 01:13 PM

### **USG ABDOMEN**

Liver appears normal in size & echogenicity. No evidence of focal solid or cystic lesion seen. No evidence of dilatation of intra-hepatic billiary or portal radicals. PV is normal in caliber.

Gall bladder is normally distended. No evidence of calculus or mass seen. Gall bladder wall thickness appears normal.

Pancreas Visualized portion appears normal in size and echopattern. No evidence of focal lesions.

Spleen appears normal in size & echopattern. No evidence of focal lesions.

Both kidneys are normal in size, shape and position. C.M. differentiation on both sides is maintained. No evidence of hydronephrosis, calculus or solid mass on either side.

Urinary bladder is partially distended. No evidence of calculus or mass.

Prostate appears normal in size and echopattern. No evidence of focal lesions.

No evidence of free fluid in peritoneal cavity. No evidence of para-aortic lymph adenopathy. No evidence of dilated small bowel loops.

### **COMMENTS:**

NO SIGNIFICANT ABNORMALITY DETECTED.

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**DR DHAVAL PATEL Consultant Radiologist** MB, DMRE

Reg No:0494

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<b>Client Name</b>	:	Mediwheel		Report Date	•	12-Aug-2023 02:25 PM

### Eye Check - Up

No Eye Complaints

**RIGHT EYE** 

SP: -2.25

CY: -1.50

AX: 75

LEFT EYE

SP: -1.75

CY: -1.25

AX:85

	Without Glasses	With Glasses
Right Eye	6/24	6/5
Left Eye	6/24	6/5

Near Vision: Right Eye - N/6, Left Eye - N/6

Fundus Examination - Within Normal Limits.

ColorVision: Normal

Comments: Normal

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MB,DO(Ophth)

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'B' Block, Mondeal Business Park, Near Gurudwara, Bodakdev, S.G. Highway, Ahmedabad - 380 054, Gujarat

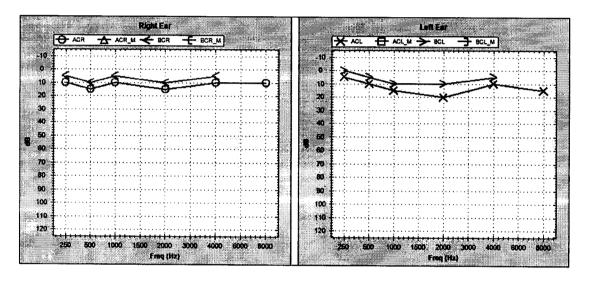
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# **AUDIOGRAM**



			Colour	
Masked	UnWasked	Masked	UnMasked	Code
	X	ר	>	Blue
Δ	0		<	Red
		ОХ	СΧ	

Threshold In dB	RIGHT	LEFT		
AIR CONDUCTION	10.5	10.5		
BONE CONDUCTION				
SPEECH				

**Comments:** -Bilateral Hearing Sensitivity Within Normal Limits.

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