

LABORATORY REPORT

Name

Mr. Jaimin Saksena

Sex/Age

Male/34 Years

Ref. By

; iviale);

:

Client Name : Mediwheel

Reg. No

211101170

Reg. Date

26-Nov-2022 12:04 PM

Collected On

Report Date

26-Nov-2022 03:54 PM

## **Medical Summary**

**GENERAL EXAMINATION** 

Height (cms):177

Weight (kgs):67.6

Blood Pressure: 120/70mmHg

Pulse: 73/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

This is an electronically authenticated report

Dr.Jay Soni M.D, GENERAL MEDICINE

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Jamin Saksena

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अर्थाकृत्यं <mark>प्राधिकार्ग</mark> १५९०मेषु Authoria

All Control of Strategies







**TEST REPORT** Reg. No : 211101170 Ref Id Collected On : 26-Nov-2022 12:04 PM Name : Mr. Jaimin Saksena Reg. Date : 26-Nov-2022 12:04 PM Age/Sex : 34 Years : 7874847693 7 Male Pass. No. Tele No. Ref. By Dispatch At Location : CHPL Sample Type : EDTA Whole Blood

Parameter	Results		Unit	Biological	Ref. Inte	erval
	CON		E BLOOD COUNT (CB imen: EDTA blood	C)		
Hemoglobin	15.8		g/dl_	13.0 - 18.0		
Hematrocrit (Calculated)	48.80		%	47 - 52		
RBC Count	5.45		million/cmm	4.7 - 6.0		
MCV	89.4		L	78 - 110		
MCH (Calculated)	29.0		Pg	27 - 31		
MCHC (Calculated)	32.4		%	31 - 35		
RDW (Calculated)	12.1		%	11.5 - 14.0		
WBC Count	6560		/cmm	4000 - 105	00	
MPV (Calculated)	H 11.0		fL.	7.4 - 10.4		
DIFFERENTIAL WBC COUNT	[%]		EXPECTED VALUES	[ Abs ]	ļ	EXPECTED VALUES
Neutrophils (%)	47.10	%	42.0 - 75.2	3090	/cmm	2000 - 7000
Lymphocytes (%)	43.80	%	20 - 45	2873	/cmm	1000 - 3000
Eosinophils (%)	1.30	%	0 - 6	492	/cmm	200 - 1000
Monocytes (%)	7.50	%	2 - 10	85	/cmm	20 - 500
Basophils (%)	0.30	%	0 - 1	20	/cmm	0 - 100
PERIPHERAL SMEAR STUDY						
RBC Morphology	Normocy	tic and l	Normochromic.			
WBC Morphology	Normal					
PLATELET COUNTS						
Platelet Count (Volumetric Impedance)	348000		/cmm	150000 - 4	150000	
Platelets	Platelets	are ade	equate with normal morpho	ology.		
Parasites	Malarial	parasite	is not detected.			
Comment	u					

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Approved By:

Dr.Dhwani Bhatt

MD (Pathology)

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26-Nov-2022 03:25 PM Page 1 of 12

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







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211101170

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: 26-Nov-2022 12:04 PM

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Tele No.

: 26-Nov-2022 12:04 PM : 7874847693

Age/Sex Ref. By

: 34 Years 1 Male Pass. No.

Dispatch At

Location

: CHPL

Sample Type

: EDTA Whole Blood

**Parameter** 

Result

Unit

Biological Ref. Interval

#### **HEMATOLOGY**

#### BLOOD GROUP & RH

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

ABO

"'\<u>`</u>"

Rh (D)

Positive

Note

### ERYTHROCYTE SEDIMANTATION RATE [ESR]

ESR (After 1 hour) Intra red measurement

04

mm/hr

ESR AT 1 hour: 1-7

ESR AT 2 hour: 8-15

### 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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: 26-Nov-2022 12:04 PM

Age/Sex

: 34 Years / Male

Pass. No. Tele No.

: 7874847693

Ref. By

Dispatch At

: Flouride F,Flouride PP

Location Parameter : CHPL

Sample Type Unit

Biological Ref. Interval

FASTING PLASMA GLUCOSE

Fasting Blood Sugar (FBS)

107.10

Result

Specimen: Flouride plasma

mg/dL

70 - 110

GOD-POD Method

Criteria for the diagnosis of diabetes

1. HbA1c >/= 6.5 \*

Ог

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

### POST PRANDIAL PLASMA GLUCOSE

Specimen: Flouride plasma

Post Prandial Blood Sugar (PPBS)

100.7

mg/di...

70 - 140

GOD-POD Method

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26-Nov-2022 05:22 PM 12

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/ Male

Reg. No Name

: 211101170

Ref Id

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Collected On

: 26-Nov-2022 12:04 PM

; Mr. Jaimin Saksena

Reg. Date

: 26-Nov-2022 12:04 PM

: 34 Years Age/Sex

Tele No.

: 7874847693

Ref. By		Dispatch At	: : Serum
Location : CHPL		Sample Type	
Parameter	Result	Unit	Biological Ref. Interval
	Lipid Profile		
Cholesterol	279.00	mg/dL	Desirable: < 200 Boderline High: 200 - 239 High: > 240
Enzymatic, colorimetric method Triglyceride	178.70	mg/dL	Normal: < 150 Boderline High: 150 - 199 High: 200 - 499 Very High: > 500
Enzymatic, colorimetric method HDL Cholesterol	43.00	mg/dl_	High Risk : < 40 Low Risk : = 60
Accelerator selective detergent method LDL	200.26	mg/dL	Optimal: < 100.0 Near / above optimal: 100-129 Borderline High: 130- 159 High: 160-189 Very High: >190.0
Calculated VLDL	35.74	mg/dL	15 - 35
Calculated LDL / HDL RATIO	4.66		0 - 3.5
Calculated Cholesterol /HDL Ratio	6.49		0 - 5.0

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Calculated

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**TEST REPORT** : 26-Nov-2022 12:04 PM Collected On Ref Id : 211101170 Reg. No : 26-Nov-2022 12:04 PM Reg. Date ; Mr. Jaimin Saksena Name : 7874847693 Tele No. Pass. No. / Male : 34 Years Age/Sex Dispatch At Ref. By : Serum Sample Type Location : CHPL Biological Ref. Interval Unit Result Parameter **BIO - CHEMISTRY** LFT WITH GGT 6.3 - 8.2gm/dL 7.84 Total Protein Biuret Reaction 0 - 4 days: 2.8 - 4.4 5.53 g/dL Albumin 4 days - 14 yrs: 3.8 - 5.4 By Bromocresol Green 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 2.3 - 3.5g/dL 2.31 Globulin Calculated 0.8 - 2.02.39 A/G Ratio Calculated 0 - 40U/L 29.80 SGOT UV without P5P 0 - 40 U/L 69.10 SGPT UV without P5P 53 - 128 U/L 55.3 Alakaline Phosphatase p - Nitrophenylphosphate (PNPP) 0 - 1.2 mg/dL 0.77 Total Bilirubin Vanadate Oxidation 0.0 - 0.40.20 -mg/dL Conjugated Bilirubin 0.0 - 1.1mg/dL Unconjugated Bilirubin 0.57 Calculated mg/dL 15 - 73 35.70 **GGT** 

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SZASZ Method

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MD (Pathology)

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Reg. Date

: 26-Nov-2022 12:04 PM

Age/Sex

: 34 Years / Male Tele No.

: 7874847693

Ref. By Location

: CHPL

Pass. No.

Dispatch At

Sample Type

: Serum

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UV Method





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Child: 5.0 - 18.0

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/ Male

: 211101170 Reg. No

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± 26-Nov-2022 12:04 PM

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: Mr. Jaimin Saksena

Reg. Date

: 26-Nov-2022 12:04 PM

Age/Sex

: 34 Years

Pass. No.

Tele No.

7874847693

Ref. By

Location

: CHPL

Dispatch At

Sample Type

: EDTA Whole Blood

Parameter

Result

Unit

Biological Ref. Interval

**HEMOGLOBIN A1 C ESTIMATION** Specimen: Blood EDTA

\*Hb A1C

6.1

% 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

128.37

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 effects 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:

\*Ermeous 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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CUROVIS HEALTHCARE PVT. LTD.

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info@curovis.co.in

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Reg. No : 211101170

Name : Mr. Jaimin Saksena

Age/Sex : 34 Years Ref. By

Location

: CHPL

/ Male

Pass. No.

Ref Id

Collected On

: 26-Nov-2022 12:04 PM

Reg. Date Tele No.

: 26-Nov-2022 12:04 PM

: 7874847693

Dispatch At

Sample Type

: Urine Spot

Test Result Unit Biological Ref. Interval

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATION

Quantity

15 cc

Colour

Pale Yellow

Clarity

Clear

Clear

CHEMICAL EXAMINATION (BY REFLECTANCE PHOTOMETRIC)

4.6 - 8.0

Sp. Gravity

1.005

1.001 - 1.035

Protein

Nil

Nil

Glucose

Nil

Nil

Kelone Bodies

Nil

Nil

Urobilinogen Bilírubin

Nil Nil

Nil

Nitrite

Nil

Nil

Blood

Nil

Nil

MICROSCOPIC EXAMINATION (MANUAL BY MICROSCOPY)

Leucocytes (Pus Cells)

Occasional/hpf

Absent

Erythrocytes (Red Cells)

Nil

Absent

**Epithelial Cells** 

Nil

Absent

Crystals

Absent

Absent

Casts

Absent

Absent

Amorphous Material

Absent

Bacteria

Absent

Absent Absent

Remarks

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Reg. No

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: 26-Nov-2022 12:04 PM

Name

: Mr. Jaimin Saksena 7 Male

Reg. Date

: 26-Nov-2022 12:04 PM

Age/Sex

: 34 Years

Pass, No.

Tele No.

: 7874847693

Ref. By

Dispatch At

: Serum

Location

: CHPL

Sample Type

Parameter

Result

Unit

Biological Ref. Interval

#### **IMMUNOLOGY**

#### THYROID FUNCTION TEST

\*T3 (Triiodothyronine)

1.32

ng/mL

0.6 - 1.81

CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY

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.

10.80

\*T4 (Thyroxine)

ng/mL

3.2 - 12.6

CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY

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 triodothyronine (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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Name

: Mr. Jaimin Saksena

Reg. Date

: 26-Nov-2022 12:04 PM

Age/Sex

: 34 Years / Male Tele No.

: 7874847693

Ref. By Location

Dispatch At

Sample Type

: Serum

\*TSH

: CHPL

μIU/ml

0.55 - 4.78

CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY

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 hypothyroidism, TSH levels are low.

2.775

TSH levels During Pregnancy: First Trimester : 0.1 to 2.5 µIÚ/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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IMMUNOLOGY

\*TOTAL PROSTATE SPECIFIC ANTIGEN (PSA)
CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY

0.38

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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26-Nov-2022 03:39 PM Page 12 of 1

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LABORATORY REPORT Name Mr. Jaimin Saksena Reg. No 211101170 Sex/Age Male/34 Years Reg. Date 26-Nov-2022 12:04 PM Ref. By Collected On Client Name Mediwheel **Report Date** 26-Nov-2022 03:32 PM

## Electrocardiogram

**Findings** 

Normal Sinus Rhythm.

Within Normal Limit.

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Dr.Jay Soni

M.D, GENERAL MEDICINE

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Page 1 of 4

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81-1825lus 1,24 C	CCR CR HM HM HM HM HM HM HM HM HM HM HM HM HM	13 15 15 14 14	585 26.11.2822	# * 5 8 \$ \$ \$	2 25-25	25 mm/s
	4					Umzmm 81
<b>C</b>	10 mm/mU		9xis: P 33 ° 10R5 38 ° T 48 ° P (11) 9.10 mU S (U1) -1.19 mU R (U5) 2.44 mU Sokol. 3.63 mU	HR 73/min FINTERVALS:  Intervals: RR 821 ms P 188 ms PR 154 ms PR 154 ms PR 354 ms URS 98 ms URS 98 ms URS 98 ms URS 98 ms	## ## ## ## ## ## ## ## ## ## ## ## ##	Jaimin Saksena 43 34 years 177 cm / 68 kg
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· Mandada harakan ya			LABORATORY REPORT			
Name	;	Mr. Jaimin Saksena		Reg. No	:	211101170
Sex/Age	;	Male/34 Years		Reg. Date	;	26-Nov-2022 12:04 PM
Ref. By	•			Collected On	:	
Client Name	;	Mediwheel		Report Date	:	26-Nov-2022 03:32 PM

## 2D Echo Colour Doppler

### **OBSERVATION:**

- 2 D Echo and color flow studies were done in long and short axis, apical and Sub coastal views.
- 1. Normal LV size. No RWMA at rest.
- 2. Normal RV and RA. No Concentric LVH.
- All Four valves are structurally normal.
- Good LV systolic function. LVEF = 60%.
- Normal LV Compliance.
- 6. Trivial TR. Mild MR. No AR.
- 7. No PAH.
- 8. Intact IAS and IVS.
- 9. No Clot, No Vegetation.
- 10. No pericardial effusion.

#### CONCLUSION

- 1. Normal LV size with Good LV systolic function.
- 2. No Concentric LVH. Normal LV Compliance
- 3. Trivial TR with No PAH. Mild MR. No AR
- 4. No RWMA at rest.

This echo doesn't rule out any kind of congenital cardiac anomalies.

This is an electronically authenticated report

Dr.Jay Soni M.D, GENERAL MEDICINE

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LABORATORY REPORT Name Mr. Jaimin Saksena Reg. No : 211101170 26-Nov-2022 12:04 PM Male/34 Years Reg. Date Sex/Age Collected On Ref. By Client Name Mediwheel Report Date 26-Nov-2022 04:32 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.

COMMENT: No significant abnormality is detected.

Both domes of diaphragm appear normal.

----- End Of Report

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DR DHAVAL PATEL

DR DHAVAL PATEL
Consultant Radiologist
MB,DMRE
Reg No:0494



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		\$2000000000000000000000000000000000000	LABORATORY REPORT			
Name	:	Mr. Jaimin Saksena		Reg. No	:	211101170
Sex/Age	:	Male/34 Years		Reg. Date	:	26-Nov-2022 12:04 PM
Ref. By	:			Collected On	:	
Client Name		Mediwheel		Report Date	•	26-Nov-2022 04:32 PM

### **USG ABDOMEN**

**Liver** appears normal in size, show **increased homogenous parenchymal echo**. 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 appears normal in size and echopattern. No evidence of focal lesions.

Spleen appears normal in size & normal in echopattern.

**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 contour is normal, No evidence of calculus or mass lesion.

**Prostate** is normal in size, show homogenous echo, outline is smooth.

No evidence of ascites.

No any lymphadenopathy seen.

No evidence of dilated small bowel loops.

### **COMMENTS:**

Grade I fatty liver.

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432

DR DHAVAL PATEL Consultant Radiologist MB,DMRE Reg No:0494



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Name

Mr. Jaimin Saksena

Sex/Age :

Male/34 Years

Ref. By

,

Client Name : Mediwheel

.....

Reg. No

211101170

Reg. Date

26-Nov-2022 12:04 PM

Collected On

Report Date

26-Nov-2022 05:06 PM

## Eye Check - Up

No Eye Complaints

RIGHT EYE

SP:±0.50

CY: -0.75

AX: 14

LEFT EYE

SP: ±0.50

CY:-0.50

AX:170

	Without Glasses	With Glasses
Right Eye	6/5	N.A
Left Eye	6/5	N.A

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

Fundus Examination - Within Normal Limits.

Color Vision: Normal

Comments: Normal

---- End Of Report -

This is an electronically authenticated report

Special Control of the Control of th

Dr Kejal Patel MB,DO(Ophth) S (AHMEDABAD) S (S)

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CUROVIS HEALTHCARE PVT. LTD.



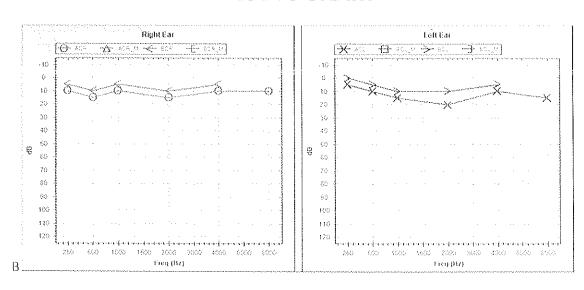
NAME:- JAIMIN SAKSHENA.

ID NO :-

AGE:- 34Y/ M

Date: - 26/11/2022

# **AUDIOGRAM**



	MODE	Air Con		tione Co	nduction	Colour	Thurshaid by dD	DAZTELY	LEET
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			X		>	131 pe	AIR CONDUCTION	1.1	11.
- THE STREET STREET	RKGH	Δ	0	£	<	Steal	BONE CONDUCTION		
	NO RESPONS	E: Add	ą, below (	he respe	(tive symi)	ols	SPEECH		

### Comments:-

Bilateral Hearing Sensitivity Within Normal Limits.



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