



HEALTH CHECK-UP SUMMARY

Race Course Road, Vadodara

Name: SRINATH K PARIKH	
SH No: 97809	Date:23 09 2024
Age: 60	Gender: MALE

ASSESSMENT:

- o OBESITY (BMI: 30.21).
- o K/C/O : PROSTATE ENLARGEMENT ON REGULAR AYURVEDIC TREATMENT
- o C/O: INCREASED APPETITE , NOT GETTING SOUND SLEEP , OCCASIONAL INTERRUPTED URINE
- o O/E-B.P:140/90 , RECHECKED BP:140/84
- o P/H/O OPERATION:CYST REMOVAL (2024) , CATARACT SURGERY(2019)
- o F/H/O: DIABETES(MOTHER, BROTHER, SISTER)
- o HIGH FBS(101) , HIGH HBA1C(6),
- o BORDERLINE HIGH CHOLESTEROL(212), BORDERLINE HIGH DIRECT LDL(144)
- o LOW BLOOD UREA NITROGEN(8.88), LOW BLOOD UREA(19)
- o HIGH TSH(5.8920)
- o URINE R/M: HIGH SPECIFIC GRAVITY(1.030) , PROTEIN:PRESENT(TRACE)
- o X RAY CHEST PA VIEW: RIGHT HEMI DIAPHRAGM IS ELEVATED (ABOUT ONE INTERCOSTALS SPACE)? CHEST/DIAPHRAGMATIC/ABDOMINAL ETIOLOGY
- o ECG: Q IN L3 AND AVF. SMALL R IN CHEST LEADS.CLINICAL CORREALTION
- o USG ABDOMEN AND PELVIS : MODERATE FATTY LIVER(GRADE 2), PROSTATE MEASURES – 23 CC WITH MILD INDENTAQTION OF MEDIAN LOBE OVER BLADDDER BASE.ADV: CLINICAL CORRELATION. MILD URINARY BLADDER WALL THICKENING.ADV URINE ROUTINE MICROSCOPY TO RULE OUT CYSTITIS

ADVISED:

- o PLENTY OF LIQUIDS
- o SALT RESTRICTED, ANTI DIABETIC & LOW FAT DIET
- o AVOID OUT SIDE FOOD AND WATER
- o REGULAR EXERCISE & WEIGHT REDUCTION.
- o REGULAR BLOOD PRESSURE AND BLOOD SUGAR MONITORING AND CONTROL
- o REPEAT LIPID PROFILE AFTER 3 MONTH
- o OPHTHALMOLOGIST ADVICE : FOLLOW ADVICE
- o ENT ADVICE: FOLLOW ADVICE
- o UROLOGIST CONSULTATION
- o CARDIOLOGIST CONSULTATION
- o PHYSICIAN CONSULTATION

**Sterling Addlife India Limited**  
Unit-Sterling Hospital Vadodara  
Race Course Circle, (West)  
VADODARA - 390 007.

**DR. JAY S PANDIT**  
Prevention & Rehabilitation Dept

**Hospital Address:** Sterling Hospitals, Race Course Road, Opp. Inox Cinema Hari Nagar, Circle West, Vadodara – 390007, Gujarat, India | Call: 0265-6144111, 0265-2354455, 98 98 98 78 78  
www.sterlinghospitals.com | info@sterlinghospitals.com

**Registered Office:** Sterling Addlife India Private Limited | CIN U85110GJ2000PTC039121  
Sterling Hospital, Sterling Hospital Road, Memnagar, Ahmedabad-380052, Gujarat, India





**HEALTH CHECK UP  
MEDICAL EXAMINATION**

Name : Arinath . K . Parikh Employee ID : \_\_\_\_\_  
Company Name : \_\_\_\_\_ Age : 60 Sex : M/F  
Height : 172 cms. Weight : 100.1 Kgs BMI : 30.21 Blood Group : BIVE  
Name of HO / Registrar taking History : Dr - Jay . S . Parodit

Allergies : <input type="checkbox"/> None <input type="checkbox"/> Yes (If Yes, describe)	
Drugs/Food/Latex/Dyes/Contrast/Other .....	Reaction
1.	
2.	
3.	

**Chief Complaints :**  
Kidney - Prostate enlargement  
On ayurvedic Rx.

**Physical Examination :**  
**Vital Signs :**  
Temp : Afebrile °F SPO<sub>2</sub> : 92 Pulse : 80 /min R/R : 18 /min B.P. : 140/90 mm Hg

**Past History :**

If Hypertension, since On Medication 1)..... 2)..... 3).....	If Diabetes, since On Medication 1)..... 2)..... 3).....
If Ischaemic Heart Disease since On Medication 1)..... 2)..... 3).....	Under Treatment Dr. ....
Under Treatment of Dr. ....	If Tuberculosis, When ..... Any Other P/H .....
Any Intervention done .....	Any Other Medication .....
P/H of Operation Diagnosis : .....	P/H of Hospitalization .....
Name of Operation : <u>Cyst</u> <u>Removal</u>	Diagnosis : .....
Year of Operation : <u>(2024)</u>	Year : .....
Others <u>Cataract sx (2019)</u>	Duration : .....
	Blood Transfusion History : Yes / No <u>✓</u> Year : .....

**Family History :** (Specify : F-Father, M-Mother, B-Brother, S-Sister)

(Pl. Circle whichever is applicable e.g. If Father has h/o 10 yrs then, Yes / No F/10 yrs)

Hypertension	Yes/No <u>No</u>	Asthma	Yes/No <u>No</u>
Heart Disease	Yes/No <u>No</u>	Stroke	Yes/No <u>No</u>
Diabetes	Yes/No <u>No</u>	Arthritis/Gout	Yes/No <u>No</u>
Tuberculosis	Yes/No <u>No</u>	Cancer	Yes/No <u>No</u>
Epilepsy	Yes/No <u>No</u>	Other Chronic disease	Yes/No <u>No</u>

**Personal History :**

Diet	<u>Sagittain</u>	Smoking	Yes/No <u>No</u>	since ..... / ..... per day
Appetite	<u>Increased</u>	Alcohol	Yes/No <u>No</u>	since ..... / ..... (freq.)
Sleep	<u>not sound sleep</u>	Drugs	Yes/No <u>No</u>	since ..... / ..... (freq.)
Micturition	<u>Normal</u>	Tobacco	Yes/No <u>No</u>	since ..... / ..... (freq.)
Bowel Habits		Any other habit		

**FOR FEMALES :**

 Obstetric History : L.D. ....  
 Abortion : .....  
 Others : .....

**General Examination :**
 Anemia   
  Cyanosis   
  Jaundice   
  Generalized Lymphadenopathy   
  Pedal oedema

**General Examination :**

 .....  
 .....  
 .....

**Head :**  NSF

Injuries (Specify if any) : .....

**Eyes :**  NSF: glasses for both vision

- Vision :  Normal     Blurred     Double     Colour Blind
- Pupils :  Normal     Abnormal
- Other :  Inflammation     Pain     Itching     Discharge     No complaint

Remarks (if any) :

**Ears :**  NSF

- Deaf     Yes     No    • Pain     Yes     No    • Discharge     Yes     No
- Dizziness     Yes     No

**Nose :**  NSF

- Nosebleed     Yes     No    • Congestion     Yes     No    • Sinus problem     Yes     No

**Mouth :**  NSF

- Lesion     Yes     No
- Dental Hygiene     Good     Poor    Bleeding gums     Yes     No
- Sense of taste     Yes     No

**Throat/Neck :**  NSF

- Swollen glands  Yes  No
- Stiffness  Yes  No
- Dysphagia  Yes  No

**SYSTEMIC EXAMINATION**
**Neurological :**  NSF

- Headache  Yes  No
- Memory changes  Yes  No
- Dizziness  Yes  No
- Syncope  Yes  No
- Seizures  Yes  No
- Paralysis  Yes  No if yes  R  L
- Cooperative  Yes  No
- Anxiety  Yes  No
- Depression  Yes  No
- Suicidal attempt  Yes  No
- Any psychiatric illness None
- Oriented  Yes  No if disoriented, to  Person  Place  Time
- Reaction:  Brisk  Sluggish  No response
- LOC:  Alert  Confused  Sedated
- Speech:  Clear  Slurred

**Respiratory :**  NSF

- Lung sounds: A F B C clear
- Dyspnoea:  None  With activity  At rest  Lying down  Retractions
- Cough:  None  Non-productive  Productive - colour: white
- Hemoptysis:  Yes  No
- Night Sweats:  Yes  No
- Cyanosis:  Yes  No Where .....

**Cardiovascular :**  NSF

- Chest discomfort  Yes  No
- Oedema  Yes  No Location: .....  Pitting  Non-pitting

**Extremities-Musculoskeletal :**  NSF

- Skin:  Warm  Cool  Dry  Firm  Flaccid  Colour
- Extremities: Tingling  Yes  No Weakness  Yes  No Deformity  Yes  No
- Joints: Pain  Yes  No Stiffness  Yes  No
- Uses:  Walker  Wheelchair  None

**Gastrointestinal :**  NSF

- Appetite  Good  Poor
- Nausea  Yes  No
- Vomiting  Yes  No
- Distension  Yes  No
- Heartburn  Yes  No
- Flatus  Yes  No
- Pain  Yes  No
- Rectal Bleeding  Yes  No
- Colostomy  Yes  No
- Illeostomy  Yes  No

**Bowel**

- Diarrhoea  Constipation  Incontinence  Blood in stool  None
- Pain  Yes  No Place .....
- Hemorrhoids  Yes  No
- Frequency of stool 2 times/day
- Interventions:  None
- Laxatives  Yes  No
- Type As usual Frequency 1 time/month





OPHTHALMIC CHECK-UP

SIGNIFICANT HISTORY:

PAST HISTORY:

Refractive Error:

Any Surgery:

Color Blind:

Diabetes:

Hypertension:

Any Treatment:

EXAMINATION OF EYES:

Distant Vision without Glasses:

Distant Vision with Glasses:

Near Vision without Glasses:

Near Vision with Glasses:

Intraocular Pressure:

Anterior Segment:

Fundus:

Right Eye:

Left Eye:

Handwritten examination notes for Right and Left eyes, including vision measurements and IOP readings.

PRESCRIPTION OF GLASSES:

	RIGHT			LEFT		
	Sphere	Cylinder	Axis	Sphere	Cylinder	Axis
Distant	-0.25	-0.75	185	-0.5	-0.5	180
Near	+2.00	-0.75	185	+2.00	-0.5	180

Type of glass:

ADVICE:

Sterling Addlife India Limited  
Unit-Sterling Hospital Vadodara  
Race Course Circle, (West)  
VADODARA - 390 007.

DR MAYA PATEL  
(OPHTHALMOLOGIST)

Hospital Address: Sterling Hospitals, Race Course Road, Opp. Inox Cinema Hari Nagar, Circle West, Vadodara - 390007, Gujarat, India | Call: 0265-6144111, 0265-2354455, 98 98 98 78 78 www.sterlinghospitals.com | info@sterlinghospitals.com

Registered Office: Sterling Addlife India Private Limited | CIN U85110GJ2000PTC039121 Sterling Hospital, Sterling Hospital Road, Memnagar, Ahmedabad-380052, Gujarat, India





**EAR, NOSE & THROAT CHECK-UP**

**COMPLAINTS:**

*Naso or, increased Tinnitus*

**EXAMINATION OF EARS:**

**Local Examination:**

*- mto*

**Tympanic Membrane:**

*(R) | B/C. no  
revised  
(L) | Treatment.*

**EXAMINATION OF NOSE:**

**Local Examination:**

*mto*

**THROAT & LARYNX:**

*mto*

**LARYNGOSCOPIC EXAMINATION:**

*mto*

**Sterling Addlife India Limited**  
Unit-Sterling Hospital Vadodara  
Race Course Circle, (West)  
VADODARA - 390 007.

*Dr. Navnit Makwana*

**DR. NAVNIT MAKWANA**

**ENT SURGEON**





Passport No :

**LABORATORY TEST REPORT**


Patient Information		Sample Information		Location Information	
Name	: Mr. Shrinath K Parikh	Lab Id	: 092407502441	Pt. Type	: Sterling Hospital Vadodara Health Checkup
Sex/Age	: Male / 60 Y 11-Sep-1964	Registration on	: 23-Sep-2024 08:56	Location	: Main BNo./
Ref. Id	: 97809 / 2811067	Collected at	: SAWPL	Approved on	: 23-Sep-2024 14:17 Status : Final
Ref. By	: Dr. RMO . STERLING...	Collected on	: 23-Sep-2024 08:55	Printed On	: 23-Sep-2024 14:32
		Sample Type	: EDTA blood	Process At	: 75 - Sterling Hospital, Race course (Vadodara)

**MEDI WHEEL FULL BODY ANNUAL PLUS ABV 50 M**
**Complete Blood Count**

Test	Method	Result	Unit	Biological Ref. Interval
Hemoglobin	Colorimetric	14.1	g/dL	13.0 - 16.5
RBC Count	Electrical impedance	4.76	million/cmm	4.5 - 5.5
Hematocrit	Calculated	42.7	%	40 - 49
MCV	Derived	89.8	fL	83 - 101
MCH	Calculated	29.6	pg	27.1 - 32.5
MCHC	Calculated	33.0	g/dL	32.5 - 36.7
RDW CV	Calculated	12.90	%	11.6 - 14
<b>Total WBC and Differential Count</b>				
WBC count	SF Cube cell analysis	4760	/cmm	4000 - 10000
<b>Differential Count</b>				
Neutrophils	Microscopic	52	% 40 - 80	2475 /cmm 2000 - 6700
Lymphocytes	Microscopic	38	% 20 - 40	1809 /cmm 1000 - 3000
Eosinophils	Microscopic	04	% 1 - 6	190 /cmm 20 - 500
Monocytes	Microscopic	06	% 2 - 10	286 /cmm 200 - 1000
Basophils	Microscopic	00	% 0 - 2	0 /cmm 0 - 100
<b>Platelet Count</b>				
Platelet Count	Electrical impedance	232000	/cmm	150000 - 410000
MPV	Calculated	10.10	fL	7.5 - 10.3
Platelets Morphology	Platelets are adequate on Smear			

Dr. C. Shrinivasan..

M.D ( Pathology ) [G-18341]

Consultant Pathologist

Page 1 of 13


**Sterling Accuris Pathology Laboratory**

 Sterling Hospital, Opp. Inox Cinema, Race Course Circle (West), Vadodara - 390 007. Tests marked with # are referred tests  
 Ph: 0265-6144210

pathlab@sterlinghospitals.com | Website: www.sterlinghospitals.com / www.sterlingaccuris.com

This is an Electronically Authenticated Report.



Download Accuris App





Passport No :

**LABORATORY TEST REPORT**


Patient Information	Sample Information	Location Information
Name : <b>Mr. Shrinath K Parikh</b>	Lab Id : <b>092407502441</b>	Pt. Type : Sterling Hospital Vadodara Health Checkup
Sex/Age : <b>Male / 60 Y</b> 11-Sep-1964	Registration on : 23-Sep-2024 08:56	Location : Main BNo./
Ref. Id : 97809 / 2811067	Collected at : SAWPL	Approved on : 23-Sep-2024 14:17 Status : Final
Ref. By : Dr. RMO . STERLING...	Collected on : 23-Sep-2024 08:55	Printed On : 23-Sep-2024 14:32
	Sample Type : EDTA blood	Process At : 75 – Sterling Hospital, Race course (Vadodar

**MEDI WHEEL FULL BODY ANNUAL PLUS ABV 50 M**
**Complete Blood Count**

Test	Result	Unit	Biological Ref. Interval
<b>Erythrocytes Sedimentation Rate</b>			
ESR <small>Capillary photometry</small>	2	mm/1hr	0 - 19

**Differential Count**
**Absolute Count**

**Dr. C. Shrinivasan..**

M.D ( Pathology )(G-18341]

Consultant Pathologist

Page 2 of 13


**Sterling Accuris Pathology Laboratory**

 Sterling Hospital, Opp. Inox Cinema, Race Course Circle (West), Vadodara - 390 007. Tests marked with # are referred tests  
 Ph: 0265-6144210

pathlab@sterlinghospitals.com | Website: www.sterlinghospitals.com / www.sterlingaccuris.com

This is an Electronically Authenticated Report.



Download Accuris App



Passport No :

**LABORATORY TEST REPORT**


Patient Information	Sample Information	Location Information
Name : <b>Mr. Shrinath K Parikh</b>	Lab Id : <b>092407502441</b>	Pt. Type : Sterling Hospital Vadodara Health Checkup
Sex/Age : <b>Male / 60 Y</b> 11-Sep-1964	Registration on : 23-Sep-2024 08:56	Location : Main BNo./
Ref. Id : 97809 / 2811067	Collected at : SAWPL	Approved on : 23-Sep-2024 14:22 Status : Final
Ref. By : Dr. RMO . STERLING...	Collected on : 23-Sep-2024 08:55	Printed On : 23-Sep-2024 14:32
	Sample Type : EDTA blood	Process At : 75 – Sterling Hospital, Race course (Vadodar

**MEDI WHEEL FULL BODY ANNUAL PLUS ABV 50 M**
**Blood Group**

Test	Result	Unit	Biological Ref. Interval
<b>ABO Type</b> <i>Tube Agglutination</i>	"B"		
<b>Rh (D) Type</b>	Positive		

  
**Dr. C. Shrinivasan..**

M.D ( Pathology ) [G-18341]

Consultant Pathologist

Page 3 of 13


**Sterling Accuris Pathology Laboratory**

 Sterling Hospital, Opp. Inox Cinema, Race Course Circle (West), Vadodara - 390 007 tests marked with # are referred tests  
 Ph: 0265-6144210

pathlab@sterlinghospitals.com | Website: www.sterlinghospitals.com / www.sterlingaccuris.com

This is an Electronically Authenticated Report.



Download Accuris App



Passport No :

**LABORATORY TEST REPORT**


Patient Information		Sample Information		Location Information	
Name	: Mr. Shrinath K Parikh	Lab Id	: 092407502441	Pt. Type	: Sterling Hospital Vadodara Health Checkup
Sex/Age	: Male / 60 Y 11-Sep-1964	Registration on	: 23-Sep-2024 08:56	Location	: Main BNo./
Ref. Id	: 97809 / 2811067	Collected at	: SAWPL	Approved on	: 23-Sep-2024 10:54 Status : Final
Ref. By	: Dr. RMO . STERLING...	Collected on	: 23-Sep-2024 08:55	Printed On	: 23-Sep-2024 14:32
		Sample Type	: Serum, Urine	Process At	: 75 – Sterling Hospital, Race course (Vadodara)

**MEDI WHEEL FULL BODY ANNUAL PLUS ABV 50 M**

Test	Result	Unit	Biological Ref. Interval
<b>Fasting Blood Glucose</b> <i>GOD-POD</i>	H 101.0	mg/dL	74 - 100
<b>Fasting Urine Glucose</b> <i>GOD-POD</i>	Absent		Absent
<b>Fasting Urine Ketone</b> <i>Nitroprusside</i>	Absent		Absent

	Fasting Blood Glucose*	Postprandial Blood Glucose #	Random Blood Glucose
<b>Normal</b>	< 100 mg/dL	< 140 mg/dL	< 140 mg/dL
<b>Prediabetic</b>	100 – 125 mg/dL	140 – 199 mg/dL	140 – 199 mg/dL
<b>Diabetic</b>	>=126 mg/dL	>= 200 mg/dl	>= 200 mg/dl

\* Fasting is defined as no caloric intake for more than 8 hours

# The test should be performed as described by the WHO, using a glucose load containing the equivalent of 75 g anhydrous glucose dissolved in water.

**Criteria for Diagnosis of Diabetes:**

1. Fasting blood glucose (FPG)  $\geq$  126 mg/dL
2. Two-hour blood glucose (2-h OGTT) = 200 mg/dL
3. HbA1c values (A1c)  $\geq$  6.5%
4. Random plasma glucose  $\geq$  200 mg/dL

(With symptoms of hyperglycemia or hyperglycemic crisis)

In the absence of unequivocal hyperglycemia, diagnosis of DM using A1C, FPG or 2-h OGTT requires two abnormal test results from the same sample or in two separate samples.

**References:**

1. American diabetes association. Standards of medical care in diabetes 2024
2. National Library of Medicine – National Institute of Health (USA) – Diabetes Mellitus
3. World Health Organization – Factsheet on Diabetes – Prevention and treatment


**Dr. C. Shrinivasan..**

 M.D ( Pathology ) [G-18341]  
Consultant Pathologist

Page 4 of 13

**Sterling Accuris Pathology Laboratory**

 Sterling Hospital, Opp. Inox Cinema, Race Course Circle (West), Vadodara - 390 007 tests marked with # are referred tests  
Ph: 0265-6144210

pathlab@sterlinghospitals.com | Website: www.sterlinghospitals.com / www.sterlingaccuris.com

This is an Electronically Authenticated Report.



Download Accuris App





Passport No :

**LABORATORY TEST REPORT**


Patient Information	Sample Information	Location Information
Name : <b>Mr. Shrinath K Parikh</b>	Lab Id : <b>092407502441</b>	Pt. Type : Sterling Hospital Vadodara Health Checkup
Sex/Age : <b>Male / 60 Y</b> 11-Sep-1964	Registration on : 23-Sep-2024 08:56	Location : Main BNo./
Ref. Id : 97809 / 2811067	Collected at : SAWPL	Approved on : 23-Sep-2024 13:02 Status : Final
Ref. By : Dr. RMO . STERLING...	Collected on : 23-Sep-2024 11:44	Printed On : 23-Sep-2024 14:32
	Sample Type : Fluoride	Process At : 75 - Sterling Hospital, Race course (Vadodar

**MEDI WHEEL FULL BODY ANNUAL PLUS ABV 50 M**

Test	Result	Unit	Biological Ref. Interval
<b>Post-breakfast Blood Glucose</b> <i>GOD-POD</i>	83	mg/dL	70 - 140
<b>Post-breakfast Urine Glucose</b> <i>GOD-POD</i>	Absent		Absent
<b>Post Breakfast Urine Ketone</b> <i>Nitroprusside</i>	Absent		Absent

  
**Dr. C. Shrinivasan..**

M.D ( Pathology ) [G-18341]

Consultant Pathologist

Page 5 of 13


**Sterling Accuris Pathology Laboratory**

 Sterling Hospital, Opp. Inox Cinema, Race Course Circle (West), Vadodara - 390 007 tests marked with # are referred tests  
 Ph: 0265-6144210

pathlab@sterlinghospitals.com | Website: www.sterlinghospitals.com / www.sterlingaccuris.com

This is an Electronically Authenticated Report.



Download Accuris App



Passport No :

**LABORATORY TEST REPORT**


Patient Information	Sample Information	Location Information
Name : <b>Mr. Shrinath K Parikh</b>	Lab Id : <b>092407502441</b>	Pt. Type : Sterling Hospital Vadodara Health Checkup
Sex/Age : <b>Male / 60 Y</b> 11-Sep-1964	Registration on : 23-Sep-2024 08:56	Location : Main BNo./
Ref. Id : 97809 / 2811067	Collected at : SAWPL	Approved on : 23-Sep-2024 14:20 Status : Final
Ref. By : Dr. RMO . STERLING...	Collected on : 23-Sep-2024 08:55	Printed On : 23-Sep-2024 14:32
	Sample Type : EDTA blood	Process At : 75 - Sterling Hospital, Race course (Vadodara)

**MEDI WHEEL FULL BODY ANNUAL PLUS ABV 50 M**
**HbA1c (Glycosylated Hemoglobin) by HPLC**

Test	Result	Unit	Biological Ref. Interval
HbA1c	H <b>6.00</b>	%	For Screening: Diabetes: $\geq 6.5\%$ ; Pre-Diabetes: 5.7 - 6.4%; Non-Diabetes: $< 5.7\%$
Mean Blood Glucose	125.50	mg/dL	For Diabetic Patient: Poor Control : $> 7.0\%$ ; Good Control : 6.0-7.0%

**Description:**

- Total haemoglobin A1c is continuously synthesized in the red blood cell through 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 glucose levels.
- 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 measurement which reflects 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:**

Erroneous 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).

**Reference:** American diabetes association. Standards of medical care in diabetes 2024


**Dr. C. Shrinivasan..**

M.D ( Pathology )(G-18341]

Consultant Pathologist

Page 6 of 13


**Sterling Accuris Pathology Laboratory**

 Sterling Hospital, Opp. Inox Cinema, Race Course Circle (West), Vadodara - 390 007 tests marked with # are referred tests  
 Ph: 0265-6144210

pathlab@sterlinghospitals.com | Website: www.sterlinghospitals.com / www.sterlingaccuris.com

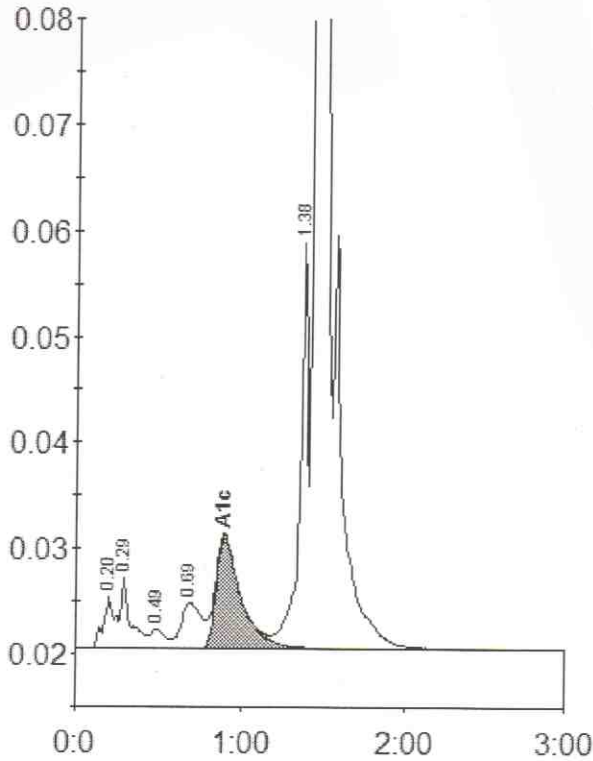
This is an Electronically Authenticated Report.



Download Accuris App



Bio-Rad                      DATE: 23/09/2024  
 D-10                         TIME: 01:58 PM  
 S/N: #DJ8G550303        Software version: 4.30-2  
 Sample ID:                 092407502441  
 Injection date             23/09/2024 01:58 PM  
 Injection #: 3             Method: HbA1c  
 Rack #: ---                Rack position: 3



Peak table - ID: 092407502441

Peak	R.time	Height	Area	Area %
A1a	0.20	4847	23847	1.0
A1b	0.29	6897	27679	1.1
F	0.49	1868	12562	0.5
LA1c/CHb-1	0.69	4400	37010	1.5
A1c	0.90	10737	112529	6.0
P3	1.38	38274	136096	5.4
A0	1.44	778474	2156459	86.0
Total Area:	2506183			

Concentration:	%
A1c	6.0





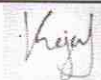
Passport No :

**LABORATORY TEST REPORT**


Patient Information	Sample Information	Location Information
Name : <b>Mr. Shrinath K Parikh</b>	Lab Id : <b>092407502441</b>	Pt. Type : Sterling Hospital Vadodara Health Checkup
Sex/Age : <b>Male / 60 Y</b> 11-Sep-1964	Registration on : 23-Sep-2024 08:56	Location : Main BNo./
Ref. Id : 97809 / 2811067	Collected at : SAWPL	Approved on : 23-Sep-2024 11:25 Status : Final
Ref. By : Dr. RMO . STERLING...	Collected on : 23-Sep-2024 08:55	Printed On : 23-Sep-2024 14:32
	Sample Type : Serum	Process At : 75 – Sterling Hospital, Race course (Vadodara)

**MEDI WHEEL FULL BODY ANNUAL PLUS ABV 50 M**
**Lipid Profile**

Test	Result	Unit	Biological Ref. Interval
<b>Cholesterol</b> <i>Cholesterol oxidase – Peroxidase</i>	H <b>212.0</b>	mg/dL	Desirable : <200 Borderline High : 200-239 High : >240
<b>Triglyceride</b> <i>Ezymatic (Lipase/GK/GPO/POD)</i>	78.0	mg/dL	Normal : <150 Borderline : 150-199 High : 200-499 Very High : >500
<b>HDL Cholesterol</b> <i>PTA/MgCl2</i>	54.0	mg/dL	Low: <40.0 High: >60.0
<b>Direct LDL</b> <i>Direct measured</i>	H <b>144.00</b>	mg/dL	Optimal: <100 Near to above Optimal: 100–129 Borderline High: 130-159 High: 160–189 Very High: =190
<b>VLDL</b> <i>Calculated</i>	15.60	mg/dL	15 - 35
<b>CHOL/HDL Ratio</b> <i>Calculated</i>	3.9		Up to 5.0
<b>dLDL/HDL Ratio</b> <i>Calculated</i>	2.7		Up to 3.5


**Dr. Kajal Parmar**  
 MD

This is an Electronically Authenticated Report.

Page 8 of 13


**Sterling Accuris Pathology Laboratory**

 Sterling Hospital, Opp. Inox Cinema, Race Course Circle (West), Vadodara - 390 007,  
 Ph: 0265-6144210

tests marked with # are referred tests

pathlab@sterlinghospitals.com | Website: www.sterlinghospitals.com / www.sterlingaccuris.com



Download Accuris App



Passport No :

**LABORATORY TEST REPORT**


Patient Information	Sample Information	Location Information
Name : <b>Mr. Shrinath K Parikh</b>	Lab Id : <b>092407502441</b>	Pt. Type : Sterling Hospital Vadodara Health Checkup
Sex/Age : <b>Male / 60 Y</b> 11-Sep-1964	Registration on : 23-Sep-2024 08:56	Location : Main BNo./
Ref. Id : 97809 / 2811067	Collected at : SAWPL	Approved on : 23-Sep-2024 10:54 Status : Final
Ref. By : Dr. RMO . STERLING...	Collected on : 23-Sep-2024 08:55	Printed On : 23-Sep-2024 14:32
	Sample Type : Serum	Process At : 75 - Sterling Hospital, Race course (Vadodar

**MEDI WHEEL FULL BODY ANNUAL PLUS ABV 50 M**

Test	Result	Unit	Biological Ref. Interval
<b>Uric Acid</b> <i>Uricase</i>	5.20	mg/dL	3.5 - 8.5
<b>Blood Urea Nitrogen</b> <i>Calculated</i>	L 8.88	mg/dL	9.0 - 20.0
<b>Urea</b> <i>Urease, Colorimetric</i>	L 19.0	mg/dL	19.3 - 43.0
<b>Creatinine, serum</b> <i>Creatinine Amidohydrolase</i>	0.80	mg/dL	0.66 - 1.25
<b>BUN Creatinine Ratio</b> <i>Calculated</i>	11.10		
<b>Urea Creatinine Ratio</b> <i>Calculated</i>	23.75		


**Dr. C. Shrinivasan..**

M.D ( Pathology ) [G-18341]

Consultant Pathologist

Page 9 of 13


**Sterling Accuris Pathology Laboratory**

Sterling Hospital, Opp. Inox Cinema, Race Course Circle (West), Vadodara - 390 007 tests marked with # are referred tests  
Ph: 0265-6144210

 pathlab@sterlinghospitals.com | Website: www.sterlinghospitals.com / www.sterlingaccuris.com

This is an Electronically Authenticated Report.



Download Accuris App





Passport No :

**LABORATORY TEST REPORT**


Patient Information	Sample Information	Location Information
Name : <b>Mr. Shrinath K Parikh</b>	Lab Id : <b>092407502441</b>	Pt. Type : Sterling Hospital Vadodara Health Checkup
Sex/Age : <b>Male / 60 Y</b> 11-Sep-1964	Registration on : 23-Sep-2024 08:56	Location : Main BNo./
Ref. Id : 97809 / 2811067	Collected at : SAWPL	Approved on : 23-Sep-2024 11:44 Status : Final
Ref. By : Dr. RMO . STERLING...	Collected on : 23-Sep-2024 08:55	Printed On : 23-Sep-2024 14:32
	Sample Type : Serum	Process At : 75 - Sterling Hospital, Race course (Vadodara)

**MEDI WHEEL FULL BODY ANNUAL PLUS ABV 50 M**
**Liver Function Test**

Test	Result	Unit	Biological Ref. Interval
<b>ALT (SGPT)</b> <i>UV with P5P, IFCC</i>	47.0	U/L	0 - 50
<b>AST (SGOT)</b> <i>UV with P5P</i>	35.0	U/L	17 - 59
<b>GGT (Gamma Glutamyl Transferase)</b> <i>L-y-Glytamyl-p-nitroanilide</i>	17.0	U/L	15 - 73
<b>Alkaline Phosphatase</b> <i>PNPP, AMP Buffer, IFCC</i>	57.0	U/L	38 - 126
<b>Total Bilirubin</b> <i>Azobillirubin chromophores</i>	0.70	mg/dL	0.2 - 1.3
<b>Conjugated Bilirubin</b> <i>Cationic Mordant Binding</i>	0.10	mg/dL	0.0 - 0.3
<b>Unconjugated Bilirubin</b> <i>Cationic Mordant Binding</i>	0.40	mg/dL	0.0 - 1.1
<b>Delta Bilirubin</b> <i>Calculated</i>	0.20	mg/dL	0.0 - 0.2
<b>Total Protein</b> <i>Copper tartrate to colour complex</i>	6.90	g/dL	6.3 - 8.2
<b>Albumin</b> <i>Bromocresol Green Method</i>	4.00	g/dL	3.5 - 5.0
<b>Globulin</b> <i>Calculated</i>	2.90	g/dL	2.3 - 3.5
<b>A/G Ratio</b> <i>Calculated</i>	1.38		1.3 - 1.7


 Dr. C. Shrinivasan..

M.D ( Pathology )(G-18341]

Consultant Pathologist

Page 10 of


**Sterling Accuris Pathology Laboratory**

 Sterling Hospital, Opp. Inox Cinema, Race Course Circle (West), Vadodara - 390 007  
 Ph: 0265-6144210

pathlab@sterlinghospitals.com | Website: www.sterlinghospitals.com / www.sterlingaccuris.com

This is an Electronically Authenticated Report.

tests marked with # are referred tests



Download Accuris App



Passport No :

**LABORATORY TEST REPORT**


Patient Information	Sample Information	Location Information
Name : <b>Mr. Shrinath K Parikh</b> Sex/Age : <b>Male / 60 Y</b> 11-Sep-1964 Ref. Id : 97809 / 2811067 Ref. By : Dr. RMO . STERLING...	Lab Id : <b>092407502441</b> Registration on : 23-Sep-2024 08:56 Collected at : SAWPL Collected on : 23-Sep-2024 08:55 Sample Type : Serum	Pt. Type : Sterling Hospital Vadodara Health Checkup Location : Main BNo./ Approved on : 23-Sep-2024 11:24    Status : Final Printed On : 23-Sep-2024 14:32 Process At : 75 – Sterling Hospital, Race course (Vadodar)

**MEDI WHEEL FULL BODY ANNUAL PLUS ABV 50 M**
**Immunoassay**

Test	Result	Unit	Biological Ref. Interval
<b>Prostate Specific Ag. (PSA), Total</b>	0.78	ng/mL	Upto 3.1 ng/mL

PSA is a glycoprotein that is expressed by both normal and neoplastic prostate tissue and is prostate tissue specific and not prostate cancer specific. PSA is constantly expressed in nearly all prostate cancers, although its level of expression on a per cell basis is lower than in normal prostate epithelium. The absolute value of serum PSA is useful for determining the extent of prostate cancer and assessing the response to prostate cancer treatment; its use as a screening method to detect prostate cancer is also common.

**Interpretation**
**Increased in**

- Prostate disease (Cancer, Prostatitis, Benign prostatic hyperplasia, Acute urinary retention)
- Manipulations (Cystoscopy, Needle biopsy, Radiation therapy, Indwelling catheter, Prostatic massage)
- Transurethral resection
- Prostatic ischemia

**Decreased in**

- Castration
- Prostatectomy
- Radiation therapy
- Ejaculation within 24 - 48 hours
- 5-alpha-reductase inhibitor reduces PSA by 50% after 6 months in men without cancer

**Limitations**

- PSA has been recommended by the American Cancer Society for use in conjunction with a DRE for early detection of prostate cancer starting at the age of 50 years for men with at least 10-year life expectancy
- PSA levels that are measured repeatedly over time may vary because of biologic variability where the true PSA level in a given man is different on different measurements.
- A change in PSA of >30% in man with a PSA initially below 2.0 ng/mL was likely to indicate a true change beyond normal random variation.


**Dr. Kajal Parmar**  
 MD

This is an Electronically Authenticated Report.

Page 11 of


**Sterling Accuris Pathology Laboratory**

 Sterling Hospital, Opp. Inox Cinema, Race Course Circle (West), Vadodara - 390 007,  
 Ph: 0265-6144210

pathlab@sterlinghospitals.com | Website: www.sterlinghospitals.com / www.sterlingaccuris.com

tests marked with # are referred tests



Download Accuris App



Passport No :

**LABORATORY TEST REPORT**


Patient Information	Sample Information	Location Information
Name : <b>Mr. Shrinath K Parikh</b>	Lab Id : <b>092407502441</b>	Pt. Type : Sterling Hospital Vadodara Health Checkup
Sex/Age : <b>Male / 60 Y</b> 11-Sep-1964	Registration on : 23-Sep-2024 08:56	Location : Main BNo./
Ref. Id : 97809 / 2811067	Collected at : SAWPL	Approved on : 23-Sep-2024 11:25 Status : Final
Ref. By : Dr. RMO , STERLING...	Collected on : 23-Sep-2024 08:55	Printed On : 23-Sep-2024 14:32
	Sample Type : Serum	Process At : 75 – Sterling Hospital, Race course (Vadodar

**MEDI WHEEL FULL BODY ANNUAL PLUS ABV 50 M**
**Thyroid Function Tests**

Test	Result	Unit	Biological Ref. Interval
T3, total (Triiodothyronine) <small>CLIA</small>	1.33	ng/mL	0.58 - 1.59
T4, total (Thyroxine) <small>CLIA</small>	4.97	µg/dl	4.87 - 11.72
<b>TSH (3rd Gen.)</b> <small>Chemiluminescence</small>	<b>H 5.8920</b>	<b>µIU/mL</b>	<b>0.4001 - 4.049</b>

TSH	T3/FT3	T4/FT4	Suggested interpretation of Thyroid function tests pattern
Within range	Decreased	Within range	Isolated low T3 often seen in elderly & associated Non-Thyroid illness. In elderly the drop in T3 level can be up to 25%.
Raised	Within Range	Within Range	Isolated High TSH Especially in the range of 4.7 to 15 mIU/ml is commonly associated with physiological & Biological TSH Variability; Subclinical Autoimmune Hypothyroidism; Intermediate T4 therapy for hypothyroidism; Recovery phase after Non-Thyroidal illness.
Raised	Decreased	Decreased	Chronic Autoimmune Thyroiditis; Post thyroidectomy, post radioiodine; Hypothyroid phase of transient thyroiditis.
Raised or within range	Raised	Raised or within range	Interfering antibodies to thyroid hormones (anti-TPO antibodies); Intermediate T4 therapy of T4 overdose; Drug Interference-Amiodarone, Heparin, Beta blocker, steroids, anti-epileptics.
Decreased	Raised or within range	Raised or within range	Isolated Low TSH – Especially in the range of 0.1 to 0.4 often seen in elderly & associated with Non-Thyroidal illness; Subclinical Hyperthyroidism; Thyroxine ingestion.
Decreased	Decreased	Decreased	Central Hypothyroidism; Non-Thyroidal illness; Recent treatment for Hypothyroidism (TSH remains suppressed).
Decreased	Raised	Raised	Primary Hyperthyroidism (Graves' disease), Multinodular goitre Toxic nodule; Transient thyroiditis: postpartum, Silent (lymphocytic), Post viral (granulomatous, subacute, DeQuervain'a) Gestational thyrotoxicosis hyperemesis gravidarum.
Decreased or within range	Raised	Within range	T3 toxicosis; Non-Thyroidal illness.

Reference: Wallach's Interpretation of Diagnostic by Mary Williamson, 10th edition, 2015.


**Dr. Kajal Parmar**  
MD

This is an Electronically Authenticated Report.

Page 12 of


**Sterling Accuris Pathology Laboratory**

 Sterling Hospital, Opp. Inox Cinema, Race Course Circle (West), Vadodara - 390 007,  
Ph: 0265-6144210

pathlab@sterlinghospitals.com | Website: www.sterlinghospitals.com / www.sterlingaccuris.com

tests marked with # are referred tests



Download Accuris App



Passport No :

**LABORATORY TEST REPORT**


Patient Information	Sample Information	Location Information
Name : <b>Mr. Shrinath K Parikh</b>	Lab Id : <b>092407502441</b>	Pt. Type : Sterling Hospital Vadodara Health Checkup Main
Sex/Age : <b>Male / 60 Y</b> 11-Sep-1964	Registration on : 23-Sep-2024 08:56	Location : BNo./
Ref. Id : 97809 / 2811067	Collected at : SAWPL	Approved on : 23-Sep-2024 11:52 Status : Final
Ref. By : Dr. RMO . STERLING...	Collected on : 23-Sep-2024 08:55	Printed On : 23-Sep-2024 14:32
	Sample Type : Urine	Process At : 75 - Sterling Hospital, Race course (Vadodar

**MEDI WHEEL FULL BODY ANNUAL PLUS ABV 50 M**
**URINE ROUTINE EXAMINATION**

Test	Result	Unit	Biological Ref. Interval
<b>Physical &amp; Chemical (Dip strip) examination</b>			
Colour	Pale Yellow		Pale Yellow
pH <i>Double indicator</i>	6.0		5.5 - 7.0
<b>Specific Gravity</b> <i>Polyelectrolyte based reaction</i>	H 1.030		1.015 - 1.025
Protein <i>Protein error of indicators</i> <b>Rechecked.</b>	Present (Trace)		Absent
Glucose <i>GOD-POD</i>	Absent		Absent
Ketone <i>Nitroprusside</i>	Absent		Absent
Blood <i>Peroxidase like reaction</i>	Absent		Absent
Bilirubin <i>Diazo reaction</i>	Absent		Absent
Leucocytes <i>Esterase reaction</i>	Absent		Absent
Nitrite <i>p-arsanilic acid to diazonium compound</i>	Absent		Absent
<b>Microscopic Examination</b>			
Erythrocytes (RBCs)	Absent	/hpf	0 - 2
Pus Cells	1-2	/hpf	0 - 5
Epithelial Cells	Occasional	/hpf	
Crystals	Absent		Absent
Casts	Absent		Absent
Bacteria	Absent		Absent
Amorphous Material	Absent		Absent
Yeast	Absent		Absent

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


**Dr. C. Shrinivasan..**

M.D ( Pathology ) [G-18341]

Consultant Pathologist

Page 13 of

**Sterling Accuris Pathology Laboratory**

 Sterling Hospital, Opp. Inox Cinema, Race Course Circle (West), Vadodara - 390 007  
 Ph: 0265-6144210

pathlab@sterlinghospitals.com | Website: www.sterlinghospitals.com / www.sterlingaccuris.com

This is an Electronically Authenticated Report.

tests marked with # are referred tests



Download Accuris App



Great  
Place  
To  
Work.

Certified

MAR 2024-MAR 2025  
INDIA



Race Course Road, Vadodara

Report Date: 23 Sep 2024 - 12:34 PM

Patient Id : RCR-97809

Patient Name : PARIKH SHRINATH K

Age : 60Y 12D

Sex : Male

Ref. Doctor : DR. RMO . STERLING

Study Date : 23 Sep 2024 - 10:13 AM

### X-RAY CHEST PA VIEW

- Poor inspiratory efforts.
- Both lung fields show prominent broncho-vascular markings.
- Cardiac size appears within normal limit.
- Trachea and mediastinal soft tissue shadow appear unremarkable.
- Bilateral C.P. angles and left domes of diaphragm appear normal.
- **Right hemi diaphragm is elevated (about one intercostals space)? Chest/diaphragmatic/abdominal etiology..**
- Bony thorax under vision appears normal.

**Dr. Shilpi Gupta MD**  
**Sr. Consultant Radiologist**

Hospital Address: Sterling Hospitals, Race Course Road, Opp. Inox Cinema Hari Nagar, Circle West, Vadodara – 390007, Gujarat, India | Call: 0265-6144111, 0265-2354455, 98 98 98 78 78  
www.sterlinghospitals.com | info@sterlinghospitals.com

Registered Office: Sterling Addlife India Private Limited | CIN U85110GJ2000PTC039121  
Sterling Hospital, Sterling Hospital Road, Memnagar, Ahmedabad-380052, Gujarat, India

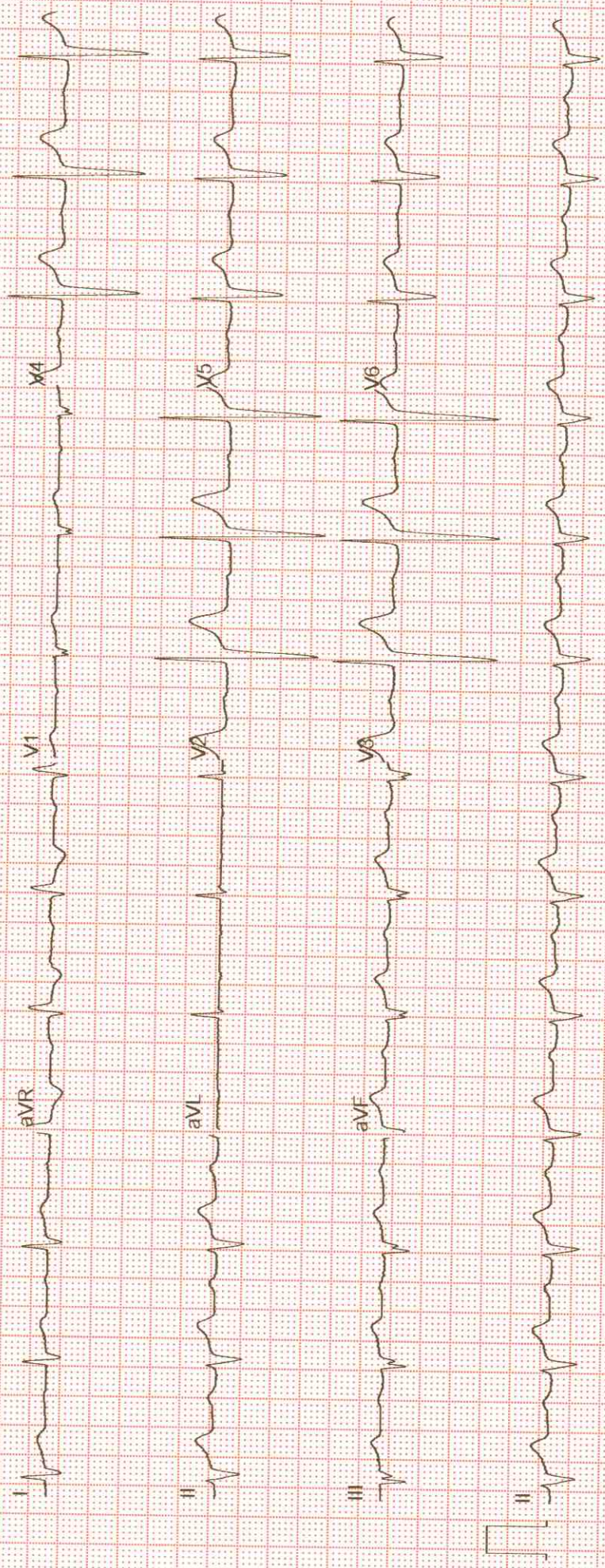


Male

60 Years

QRS	110 ms
QT / QTcBaz	382 / 426 ms
PR	254 ms
P	114 ms
RR / PP	796 / 800 ms
P / QRS / T	67 / -68 / 65 degrees

ap L → R aVF  
small R in chest leads  
clinical grade





Patient Id	: RCR-97809	Patient Name	: PARIKH SHRINATH K
Age	: 60Y 12D	Sex	: Male
Ref. Doctor	: DR. RMO . STERLING	Study Date	: 23 Sep 2024 - 11:19 AM

**ULTRASOUND OF ABDOMEN AND PELVIS**

**Liver is normal in size (13.2 cm) and shows bright echotexture- moderate fatty infiltration.** No focal lesion seen. No IHBR dilatation.

**Portal vein** (11 mm) and **CBD** appears normal.

**Gall bladder is not visualized- likely contracted (patient had breakfast before scan). Adv fasting USG for evaluation of GB if clinically indicated.**

Visualized **pancreas** appears normal.

**Spleen** appears normal in size (10 cm) and shows normal echotexture. No focal lesion seen.

**Right kidney** appears normal (11 x 6 cm). There is no evidence of scarring, hydronephrosis or calculi. Normal cortical echogenicity and cortico-medullary differentiation are maintained.

**Left kidney** appears normal (13 x 5 cm). There is no evidence of scarring, hydronephrosis or calculi. Normal cortical echogenicity and cortico-medullary differentiation are maintained.

**Urinary bladder is well distended (~370 cc) with mild wall thickening ~ 5 mm.** No calculus or mass lesion is seen.

**Prostate measures ~23 cc with mild indentation of median lobe over base of bladder.** No focal mass is seen.

No evidence of ascites seen.

**IMPRESSION**

- **Moderate fatty liver (Grade II).**
- **Prostate measures ~23 cc with mild indentation of median lobe over bladder base. Adv. clinical correlation.**
- **Mild urinary bladder wall thickening. Adv. urine routine microscopy to rule out cystitis.**

**Dr. Palak Nandolia**  
**Consultant Radiologist**

**Hospital Address:** Sterling Hospitals, Race Course Road, Opp. Inox Cinema Hari Nagar, Circle West, Vadodara – 390007, Gujarat, India | Call: 0265-6144111, 0265-2354455, 98 98 98 78 78  
www.sterlinghospitals.com | info@sterlinghospitals.com

**Registered Office:** Sterling Addlife India Private Limited | CIN U85110GJ2000PTC039121  
Sterling Hospital, Sterling Hospital Road, Memnagar, Ahmedabad-380052, Gujarat, India



TABULAR SUMMARY REPORT

SHRINATH, PARIKH  
 ID:  
 23-Sep-2024  
 11:38:33

60years Caucasian Male

Referred by: HCP  
 Test ind:

BRUCE  
 Max HR: 142bpm 88% of max predicted 160bpm  
 Max BP: 120/80  
 Reason for Termination: THR ACHIEVED  
 Comments: GOOD EFFORT TOLERANCE  
 NORMAL HR AND BP RESPONSE  
 NO ST-T CHANGES SEEN DURING EXERCISE OR RECOVERY  
 NO ANGINA OR ARRHYTHMIAS  
 TEST IS NEGATIVE FOR INDUCIBLE ISCHEMIA  
 DR.RANJEET SHUKLA CARDIOLOGIST

Total Exercise time: 6:00  
 Maximum workload: 7.0METS

25.0 mm/s  
 10.0 mm/mV  
 100hz

*for info*

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	Work Load (METS)	HR (bpm)	BP (mmHg)	RPP (x100)
PRETEST	SUPINE	1:13	***	***	1.0	68	120/80	82
	STANDING	0:42	***	***	1.0	75	120/80	90
	HYPERVENT	0:57	0.8	0.0	1.2	77	120/80	92
EXERCISE	STAGE 1	3:00	1.7	10.0	4.6	117	120/80	140
	STAGE 2	3:00	2.5	12.0	7.0	142	120/80	170
RECOVERY	RECOVERY	3:19	0.0	0.0	1.0	77	120/80	92