

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mr. Dhananjay J Gaikwad on 12/02/2023

After reviewing the medical history and on clinical examination it has been found that he/she is

	Tick
<ul style="list-style-type: none"> Medically Fit 	✓
<ul style="list-style-type: none"> Fit with restrictions/recommendations <p>Though following restrictions have been revealed, in my opinion, these are impediments to the job.</p> <p>1. <u>Mild thrombocytopenia</u></p> <p>2. <u>BSL-F - 111 PP - 154 LFT - ↑</u></p> <p>3. <u>Udc - Cholelithiasis ; Moderate Splenomegaly</u></p> <p>However the employee should follow the advice/medication that has been Communicated to him/her.</p> <p>Review after <u>1 month</u>.</p>	
<ul style="list-style-type: none"> Currently Unfit. <p>Review after _____ recommended</p>	
<ul style="list-style-type: none"> Unfit 	

Dr. _____

Medical Officer

Apollo Clinic, (NIGDI) Dr. Anam A. A. Inamdar

MBBS

This certificate is not meant for medico-legal purposes No. 2021/06/6236

Patient Name	: Mr.DHANANJAY J GAIKWAD	Collected	: 10/Feb/2024 11:51AM
Age/Gender	: 50 Y 11 M 18 D/M	Received	: 10/Feb/2024 04:19PM
UHID/MR No	: CPIM.0000035592	Reported	: 10/Feb/2024 06:08PM
Visit ID	: CPIMOPV156780	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bobS8385		

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	12.6	g/dL	13-17	Spectrophotometer
PCV	35.60	%	40-50	Electronic pulse & Calculation
RBC COUNT	3.3	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	108	fL	83-101	Calculated
MCH	38	pg	27-32	Calculated
MCHC	35.2	g/dL	31.5-34.5	Calculated
R.D.W	16	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8.980	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	65.5	%	40-80	Electrical Impedance
LYMPHOCYTES	23.4	%	20-40	Electrical Impedance
EOSINOPHILS	4.2	%	1-6	Electrical Impedance
MONOCYTES	6.1	%	2-10	Electrical Impedance
BASOPHILS	0.8	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	5881.9	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2101.32	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	377.16	Cells/cu.mm	20-500	Calculated
MONOCYTES	547.78	Cells/cu.mm	200-1000	Calculated
BASOPHILS	71.84	Cells/cu.mm	0-100	Calculated
PLATELET COUNT	140000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	14	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				
RBC's Anisocytosis+, Macrocytes+				
WBC's normal in number and morphology				
Platelets mild thrombocytopenia, large platelets seen				
No Abnormal cells/hemoparasite seen.				



Sheha Shah
Dr Sheha Shah
MBBS, MD (Pathology)
Consultant Pathologist

SIN No: BIED240034271

This test has been performed at Apollo Health and Lifestyle Itr- Sadashiv Peth Pune, Diagnostics Lab



Certificate No: MC-5687

Patient Name	: Mr.DHANANJAY J GAIKWAD	Collected	: 10/Feb/2024 11:51 AM
Age/Gender	: 50 Y 11 M 18 D/M	Received	: 10/Feb/2024 04:19 PM
UHID/MR No	: CPIM.0000035592	Reported	: 10/Feb/2024 08:08 PM
Vist ID	: CPIMOPV156780	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bob58385		

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

RBC's Anisocytosis+, Macrocytes+
WBC's normal in number and morphology
Platelets mild thrombocytopenia, large platelets seen
No Abnormal cells/hemoparasite seen.



Sneha Shah
Dr Sneha Shah
MBBS, MD (Pathology)
Consultant Pathologist

SIN No:BED240034271

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Patient Name	: Mr.DHAMANJAY J GAIKWAD	Collected	: 10/Feb/2024 11:51AM
Age/Gender	: 50 Y 11 M 18 D/M	Received	: 10/Feb/2024 04:19PM
LHID/MR No	: CPIM.0000035592	Reported	: 10/Feb/2024 08:01PM
Visit ID	: CPIMOPV156780	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bob58385		

DEPARTMENT OF HAEMATOLOGY
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	B			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination

DR. Sanjay Ingle
M.B.S.S.M.D (Pathology)
Consultant Pathologist

SIN No:BED240034271

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab



Certificate No: MD-5657

Patient Name : Mr.DHANANJAY J GAIKWAD	Collected : 10/Feb/2024 11:53AM
Age/Gender : 50 Y 11 M 18 D/M	Received : 10/Feb/2024 04:32PM
UHID/MR No : CPIM.0000035582	Reported : 10/Feb/2024 05:13PM
Visit ID : CPIMOPV156780	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS6385	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	111	mg/dL	70-100	HEXOKINASE

Comment:

As per American Diabetes Guidelines, 2023

Fasting Glucose Values in mg/dL.	Interpretation
70-100 mg/dL.	Normal
100-125 mg/dL.	Prediabetes
≥126 mg/dL.	Diabetes
<70 mg/dL.	Hypoglycemia

Note:

- The diagnosis of Diabetes requires a fasting plasma glucose of \geq or $=$ 126 mg/dL and/or a random / 2 hr post glucose value of \geq or $=$ 200 mg/dL on at least 2 occasions.
- Very high glucose levels (\geq 450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	154	mg/dL	70-140	HEXOKINASE

Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other. Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.

Sneha Shah

Dr Sneha Shah

MBBS, MD (Pathology)
Consultant Pathologist

SIN No:PLP/14/7478

This test has been performed at Apollo Health and Lifestyle Ltd- Sudashiv Peth Pune, Diagnostics Lab



Patient Name	: Mr.DHANANJAY J GAIKWAD	Collected	: 10/Feb/2024 11:51 AM
Age/Gender	: 50 Y 11 M 18 D/M	Received	: 10/Feb/2024 04:16 PM
UHID/MR No	: CPIM.DCDD035592	Reported	: 10/Feb/2024 08:01 PM
Visit ID	: CPIMOPV15678D	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bob58385		

DEPARTMENT OF BIOCHEMISTRY
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	4	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	68	mg/dL		Calculated


Comment:
 Reference Range as per American Diabetes Association (ADA) 2023 Guidelines:

REFERENCE GROUP	HBA1C %
NON DIABETIC	<5.7
PREDIABETES	5.7 – 6.4
DIABETES	≥ 6.5
DIABETICS	
EXCELLENT CONTROL	6 – 7
FAIR TO GOOD CONTROL	7 – 8
UNSATISFACTORY CONTROL	8 – 10
POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

- HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- Trends in HbA1C values is a better indicator of Glycemic control than a single test.
- Low HbA1C in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.
- Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present.
- In cases of Interference of Hemoglobin variants in HbA1C, alternative methods (Fructosamine) estimation is recommended for Glycemic Control
 - A: HbF >25%
 - B: Homozygous Hemoglobinopathy
 (Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)




 DR.Sanjay Ingole
 M.B.B.S.,M.D(Pathology)
 Consultant Pathologist

SIN No: EDT240015224
 This test has been performed at Apollo Health and Lifestyle Ltd- Sardarshiv Peth Pune, Diagnostics Lab

Patient Name	: Mr.DHANANJAY J.GAIKWAD	Collected	: 10/Feb/2024 11:51AM
Age/Gender	: 50 Y 11 M 18 D/M	Received	: 10/Feb/2024 04:44PM
UHID/MR No	: CPIM.0000035592	Reported	: 10/Feb/2024 08:58PM
Visit ID	: CPIMOPV156780	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bobS8385		

DEPARTMENT OF BIOCHEMISTRY
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	3.34	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.69	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	2.65	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	22.71	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	30.6	U/L	<50	IFCC
ALKALINE PHOSPHATASE	63.72	U/L	30-120	IFCC
PROTEIN, TOTAL	7.42	g/dL	6.6-8.3	Biuret
ALBUMIN	4.64	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.78	g/dL	2.0-3.5	Calculated
A/G RATIO	1.67		0.9-2.0	Calculated

Comment:

LFT results reflect different aspects of the health of the liver, i.e., hepatocyte integrity (AST & ALT), synthesis and secretion of bile (Bilirubin, ALP), cholestasis (ALP, GGT), protein synthesis (Albumin)

Common patterns seen:

1. Hepatocellular Injury:

- AST - Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.
- ALT - Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI.
- Disproportionate increase in AST, ALT compared with ALP.
- Bilirubin may be elevated.
- AST/ALT (ratio) - In case of hepatocellular injury AST, ALT > 1 in Alcoholic Liver Disease AST/ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilson's disease, Cirrhosis, but the increase is usually not >2.

2. Cholestatic Pattern:

- ALP - Disproportionate increase in ALP compared with AST, ALT.
- Bilirubin may be elevated.
- ALP elevation also seen in pregnancy, impacted by age and sex.
- To establish the hepatic origin correlation with GGT helps. If GGT elevated indicates hepatic cause of increased ALP.

3. Synthetic function impairment:

- Albumin- Liver disease reduces albumin levels.
- Correlation with PT (Prothrombin Time) helps.

DR. Sanjay Ingle
M.B.B.S.M.D.(Pathology)
Consultant Pathologist

SN No: SF04625893

This test has been performed at Apollo Health and Lifestyle Irl- Sadashiv Peth Pune, Diagnostics Lab



Patient Name	: Mr.DHANANJAY J GAIKWAD	Collected	: 10/Feb/2024 11:51AM
Age/Gender	: 50 Y 11 M 18 D/M	Received	: 10/Feb/2024 04:44PM
UHID/MR No	: CPIM.0000035592	Reported	: 10/Feb/2024 06:56PM
Visit ID	: CPIMOPV156780	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bob58385		

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.83	mg/dL	0.72 – 1.18	Modified Jaffe, Kinetic
UREA	16.53	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	7.7	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.30	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	9.10	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	2.99	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	138.8	mmol/L	136–146	ISE (Indirect)
POTASSIUM	3.3	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	100.9	mmol/L	101–109	ISE (Indirect)



DR.Sanjay Ingle
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:SE04625893

This test has been performed at Apollo Health and Lifestyle Ltd- Sudashiv Peth Pune, Diagnostics Lab

Patient Name : Mr.DHANANJAY J GAIKWAD Age/Gender : 50 Y 11 M 18 D/M UHID/MR No : CPIM.0000035532 Visit ID : CPIMOPV156780 Ref Doctor : Dr.SELF Emp/Auth/TPA ID : bobS8385	Collected : 10/Feb/2024 11:51AM Received : 10/Feb/2024 07:39PM Reported : 10/Feb/2024 08:24PM Status : Final Report Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
TOTAL PROSTATIC SPECIFIC ANTIGEN (TPSA) , SERUM	0.440	ng/mL	0-4	CLIA



DR. Sanjay Ingole
M.B.B.S, M.D.(Pathology)
Consultant Pathologist

SIN No:SPF.24022638

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Tech Park, Diagnostics Lab


Patient Name : Mr.DHANANJAY J GAIKWAD	Collected : 10/Feb/2024 11:51AM
Age/Gender : 50 Y 11 M 18 D/M	Received : 10/Feb/2024 04:37PM
UHID/MR No : CPIM.0000035592	Reported : 10/Feb/2024 05:07PM
Visit ID : CPIMOPV156780	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS8385	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Blo. Ref. Range	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	5.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.015		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	3 - 4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1 - 2	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY




Dr Sneha Shah
MBBS, MD (Pathology)
Consultant Pathologist
SIN No:UR2280165

This test has been performed at Apollo Health and Lifestyle Pvt. Ltd- Sadashiv Path Pune, Diagnostics Lab

Certificate No: MC-5857

Patient Name	: Mr.DHANANJAY J GAIKWAD	Collected	: 10/Feb/2024 11:51AM
Age/Gender	: 50 Y 11 M 18 D/M	Received	: 10/Feb/2024 04:37PM
UHID/MR No	: CPIM.0000035592	Reported	: 10/Feb/2024 05:06PM
Visit ID	: CPIMOPV156780	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bobS8385		

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	Dipstick

Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	Dipstick

*** End Of Report ***

Dr Sneha Shah
MBBS, MD (Pathology)
Consultant Pathologist

SIN No:UJF01U576

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab



Patient Name : Mr. DHANANJAY J GAIKWAD Age : 50 Y M
UHID : CPIM.0000035592 OP Visit No : CPIMOPV156780
Reported on : 10-02-2024 18:13 Printed on : 10-02-2024 19:33
Adm/Consult Doctor : Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Observation:-

Both lung fields are clear.

Both C-P angles are clear.

Cardiac size appear normal.

Hila and pulmonary vessels are within normal limits.

Both the domes of diaphragm are normal.

Thoracic cage and soft tissues are within normal limits.

Impression

Study is within normal limits.

Printed on:10-02-2024 18:13

---End of the Report---



Dr. KIRAN PRALHAD SUDHATE
MBBS, DMRD
Radiology

Patient Name : Mr. DHANANJAY J GAIKWAD Age : 50 Y M
UHID : CPIM.0000035592 OP Visit No : CPIMOPV156780
Reported on : 10-02-2024 12:17 Printed on : 10-02-2024 13:16
Adm/Consult Doctor : Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver appears normal in size and echo texture. No focal lesion is seen. PV and CBD normal. No dilatation of the intrahepatic biliary radicals.

Gall bladder is well distended. 6.5mm and 4.5mm calculi noted. Wall thickness appears normal. No evidence of periGB collection. No evidence of focal lesion is seen.

Spleen appears enlarged and measures 18.3cms . No focal lesion seen. Splenic vein appears normal.

Pancreas appears normal in echo pattern. No focal/mass lesion/calcification. No evidence of peri-pancreatic free fluid or collection. Pancreatic duct appears normal.

Both Kidneys are normal in size, location and echo texture. The cortico medullary differentiation is maintained bilaterally. No evidence of calculus / hydronephrosis seen on either side.

Urinary bladder is normal. No evidence of filling defect or mass effect. The wall thickness is normal.

Prostate is normal in size and echo texture. No evidence of necrosis / calcification seen.

IMPRESSION: -
CHOLELITHIASIS

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016.

Ph No: 040-4904 7777, Fax No: 4904 7744 | Email ID: enquiry@apollohl.com | www.apollohl.com

APOLLO CLINICS NETWORK MAHARASHTRA

Pune (Aundh) | Kharadi | Nigdi Pradhikaran | Viman Nagar | Wanowrie

Online appointments: www.apolloclinic.com

Patient Name : Mr. DHANANJAY J GAIKWAD
UHID : CPIM.0000035592
Reported on : 10-02-2024 12:17
Adm/Consult Doctor :

Age : 50 Y M
OP Visit No : CP1MOPV156780
Printed on : 10-02-2024 13:16
Ref Doctor : SELF

MODERATE SPLENOMEGALY

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.

Printed on: 10-02-2024 12:17

---End of the Report---



Dr. KUNDAN MEHTA
MBBS, DMRE (RADIOLOGY)
Radiology

2 D ECHOCARDIOGRAPHY & COLOUR DOPPLER STUDY

Patient's Name: MR. DHANANJAY GAIKWAD	Age/Sex: 50 / M
Ref: ARCOFEMI	Date: 10.02.2024

2 DIMENSIONAL ECHOCARDIOGRAPHY:

1. All cardiac chambers are normal in dimensions
2. No LV regional wall motion abnormalities at rest
3. LVEF = 60 %
4. Good RV function
5. All cardiac valves structurally normal
6. IAS / IVS intact
7. No clots / vegetation/ pericardial effusion seen on TTE
8. Great arteries are normally related & appear normal
9. IVC is normal in size & collapsing well with respiration

DOPPLER STUDIES (CONTINUOUS WAVE, PULSED WAVE, COLOR DOPPLER):

1. Normal transvalvular pressure gradients, No AR/MR, Trivial TR
2. No LV diastolic dysfunction
3. No pulmonary hypertension
4. No intracardiac or extracardiac shunt noted

DIMENSIONS (M-MODE) :

Left Atrium	36.0 mm	Aortic Root	35.0 mm
IVS (d)	10.0 mm	IVS (s)	16.0 mm
LVID (d)	43.0 mm	LVID (s)	26.0 mm
LVPW(d)	10.0 mm	LVPW(s)	15.0 mm

IMPRESSION :

NORMAL CARDIAC CHAMBER DIMENSIONS

GOOD BIVENTRICULAR FUNCTION

LVEF = 60%

NO LV DIASTOLIC DYSFUNCTION

NORMAL CARDIAC VALVES

NO PULMONARY HYPERTENSION

IAS/IVS INTACT

NO CLOT/VEGETATION/PERICARDIAL EFFUSION



DR. RAJENDRA V. CHAVAN
MD (MEDICINE), DM (CARDIOLOGY)
CONSULTANT CARDIOLOGIST

Apollo Health and Lifestyle Limited

{CIN - UBS110TG2000PI/C115819}

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016.

Ph No: 040-4904 7777, Fax No: 4904 7744 | Email ID: enquiry@apollohl.com | www.apollohl.com

APOLLO CLINICS NETWORK MAHARASHTRA

Pune (Aundh | Kharadi | Nigdi Pradhikaran) | Viman Nagar | Wankwrie

Online appointments: www.apollohl.com

TO BOOK AN APPOINTMENT

1860 500 7788

Apollo Clinic,
Nigdi, Pune - 411044.

Date - 10.02.24

Patient Name *Dhananjay Aitwad*

UHID:

Age / Sex: *50 yrs M*

EYE CHECK UP

COMPLETE

PREMEDICAL/OTHER

	RIGHT EYE	LEFT EYE
Far Vision	<i>6/6 > csped</i>	<i>6/6 > csped</i>
Near Vision	<i>N/6 > csped</i>	<i>N/6 > csped</i>
Anterior Segment Pupil	<i>conc</i>	<i>conc</i>
Color Vision	<i>normal</i>	<i>normal</i>
Family History/Medical History	<i>-</i>	<i>-</i>

Same as

IMPRESSION:-

[Signature]
OPTOMETRIST

Mr. Dhananjay Gaikwad
50 yrs / M.

10th Feb 2024.

Δ - Hereditary Spermocytosis ; Allergic to Egg

Dietary habit :- Mixed diet.

Daily Diet

Morning Time :- luke warm water
+ lemon juice + salt

Morning Exercise :- 30-40 min.

Morning Tea - Green tea + pudina.
less sugar

Morning Breakfast

- ~~Wheat Ragi~~

Rajgeera Laddo / chikki

OR Shingada pith - upma / pes OR Idli Sambar.

OR Laddo - dry fruit + janas + jaggary OR Ragi
Recipe.

+ Fruit Seasonal.

11am - Buttermilk

OR - Rajgeera Laddo

1-2 pm - Lunch - Salad + Chapati + Bhaji

+ Sprouts (chana, mug, udid, hulge, masoor)

OR 2-3 pcs chicken / fish less oily. P.T.O →



MR. Dhananjay Gaikwad
Age, 50/m

Height : 169	Weight : 83.8	BMI : 29	Waist Circum :
Temp : 98	Pulse : 60	Resp : 20/r	B.P : 130/90

General Examination / Allergies History

Spicy diet
Diet: Mix

Clinical Diagnosis & Management Plan


SLE
 CVS: S1S2 (+)
 RL: A+B
 CAG: NAD.
 PA: NAD.
 No known allergy.
 No past Sx
Anam

Dr. Anam A. Inamdar
MBBS
Reg. No. 2021/06/6236

Follow up date:

Doctor Signature

2

Name : Mr. DHANANJAY J GAIKWAD Age : 50 Y Sex : M Address : FL NO - 13, BLDG B2, SUKHWANI IMPERIAL, PHASE - II, MORWADI, PIMPRI Plan : ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN INDIA OP AGREEMENT	UHID :CPTM.0000035592  OP Number :CPTMOPV156780 Bill No :CPTM-OCR-75984 Date : 10.02.2024 11:00
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Sno	Service Type/Service Name	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324	
<input checked="" type="checkbox"/>	1 GAMMA GLUTAMYL TRANSFERASE (GGT)	
<input checked="" type="checkbox"/>	2 PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL)	
<input checked="" type="checkbox"/>	3 2 D ECHO	
<input checked="" type="checkbox"/>	4 LIVER-FUNCTION TEST (LFT)	
<input checked="" type="checkbox"/>	5 GLUCOSE, FASTING	
<input checked="" type="checkbox"/>	6 HEMOGRAM + PERIPHERAL SMEAR	
<input checked="" type="checkbox"/>	7 DIET CONSULTATION	
<input checked="" type="checkbox"/>	8 COMPLETE URINE EXAMINATION	
<input checked="" type="checkbox"/>	9 URINE GLUCOSE (POST PRANDIAL)	
<input checked="" type="checkbox"/>	10 PERIPHERAL SMEAR	
<input checked="" type="checkbox"/>	11 ECG	
<input checked="" type="checkbox"/>	12 RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
<input checked="" type="checkbox"/>	13 DENTAL CONSULTATION	
<input checked="" type="checkbox"/>	14 GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	
<input checked="" type="checkbox"/>	15 URINE GLUCOSE (FASTING)	
<input checked="" type="checkbox"/>	16 HbA1c, GLYCATED HEMOGLOBIN	
<input checked="" type="checkbox"/>	17 X-RAY CHEST PA	
<input checked="" type="checkbox"/>	18 ENT CONSULTATION	
<input checked="" type="checkbox"/>	19 FITNESS BY GENERAL PHYSICIAN	
<input checked="" type="checkbox"/>	20 BLOOD GROUP ABO AND RH FACTOR	
<input checked="" type="checkbox"/>	21 LIPID PROFILE	
<input checked="" type="checkbox"/>	22 BODY MASS INDEX (BMI)	
<input checked="" type="checkbox"/>	23 OPHTHAL BY GENERAL PHYSICIAN	
<input checked="" type="checkbox"/>	24 ULTRASOUND - WHOLE ABDOMEN	
<input checked="" type="checkbox"/>	25 THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	

VIT B12
