

Certificate No.: PEH/2022-1862
April 07, 2022 - April 06, 2024

MR No. 173645 Patient Name Mrs. Parvank Mishra Age 58 Sex M Date 27/7/24

Mob No.

Investigations : (Please Tick)

- CBC
- ESR
- CRP
- S-Vit D3
- S-Vit B12
- RBS
- Sugar - F/PP
- HbA1C
- LFT/KFT
- PT
- INR
- RA Factor
- Anti CCP
- HLA B27
- ANA
- HIV
- HBsAg
- Anti HCV

H - 170
W - 59
BSR - 118/21
P - 81

Vitals

- P.
- P.R.
- SPO2
- Temp

Medical Illness

- Hypertension
- Diabetes
- Thyroid
- Cardiac Disease
- Drug Allergies

Next Appointment/Follow up

Signature :

*Pragyan
reference*

Dr. Bhawna Garg
MBBS, DIP.CO, PGDHA
MEDICAL CO ORDINATOR
RJN Apollo Spectra Hospital
Reg.No. MP18035

Patient NAME	: Mr. PRIYANK MISHRA	Collected	: 27/Jul/2024 10:08AM
Age/Gender	: 38 Y 0 M 0 D /M	Received	: 27/Jul/2024 10:57AM
UHID/MR NO	: ILK.00043232	Reported	: 27/Jul/2024 11:43AM
Visit ID	: ILK.127427	Status	: Final Report
Ref Doctor	: Dr.ARCOFEMI HEALTHCARE LIMITED	Client Name	: INSTA

DEPARTMENT OF HEMATOLOGY

COMPLETE BLOOD COUNT- CBC / HAEMOGRAM , WHOLE BLOOD EDTA

Haemoglobin (Hb%)	11.5	gm%	14.0-17.0	Cyanmeth
P.C.V (Hematocrit)	35.8	%	40-54	Cell Counter
RBC Count	4.2	Mill./cu mm	4.00-5.50	Cell Counter
Mean Corpuscular Volume(MCV)	86.1	fL	76-96	Calculated
Mean Corpuscular Hb. (MCH)	27.8	pg	27.0-32.0	Calculated
Mean Corp. Hb. Conc.(MCHC)	32.2	g/dl	30.0-35.0	Calculated
RDW	14.4	%	11-16	Calculated
Total WBC count (TLC)	5,100	/cu mm	4000-11000	Cell Counter

Differential Count by Flowcytometry/Microscopy

Neutrophils	68.3	%	50-70	Cell Counter
Lymphocytes	21.3	%	20-40	
Monocytes	7.5	%	01-10	Cell Counter
Eosinophils	2.7	%	01-06	Cell Counter
Basophils	0.2	%	00-01	Cell Counter

Absolute Leucocyte Count

Neutrophil (Abs.)	3,466	per cumm	2000 - 8000	Calculated
Lymphocyte (Abs.)	1081	per cumm	600-4000	Calculated
Monocyte (Abs.)	382	per cumm	0-600	Calculated
Eosinophil (Abs.)	138	per cumm	40-440	Calculated
Basophils (Abs.)	8	per cumm	0-110	Calculated
Platelet Count	1.51	Lac/cmm	1.50-4.00	Cell Counter

ERYTHROCYTE SEDIMENTATION RATE (ESR)

Erythrocyte Sedimentation Rate (ESR)	32	mm 1st hr.	0-20	Wester Green
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DR. SARITA PATHAK
M.D (PATH)



RJN Apollo Spectra Hospitals

18, Vikas Nagar, Near Sai Baba Temple, Gwalior - 474009 (M.P.) Ph.: 0751-2454600, Mob. : 8269663137, Email: ipc.rjn@gmail.com

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DEPARTMENT OF HEMATOLOGY

BLOOD GROUPING(A,B,O) AND RH FACTOR , WHOLE BLOOD EDTA

Blood Grouping	B			Slide/Tube Agglutination
Rh (D) Type	POSITIVE			Slide/Tube Agglutination

BLOOD PICTURE - PERIPHERAL SMEAR EXAMINATION , WHOLE BLOOD EDTA

RBC'S : Normocytic Normochromic RBC's.
No cytoplasmic inclusions or hemoparasite seen.

WBC'S : Normal in number , morphology and distribution. No toxic granules seen.
No abnormal cell seen.

PLATELETS : Adequate on smear .

IMPRESSION ; NORMOCYTIC NORMOCHROMIC ANEMIA.

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1971-1972

1971-1972



1971-1972

1971-1972

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DEPARTMENT OF BIOCHEMISTRY-ROUTINE

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE - FASTING (FBS) , NAF PLASMA

Fasting Glucose	86.0	mg/dL	65-110	God - Pod
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Ref.for Biological Reference Intervals: American Diabetic Assiosation.

GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) , FLUORIDE PLASMA

Post Prandial Glucose	122.0	mg/dL	90-140	2hrs. after...gm glucose/lunch
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Ref.for Biological Reference Intervals: American Diabetic Assiosation.

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Test Name	Result	Unit	Bio. Ref. Range	Method
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GLYCOSYLATED HAEMOGLOBIN (GHb/HbA1c) , WHOLE BLOOD EDTA

Glycosylated Haemoglobin HbA1c	6.2	%	Normal: <5.7 Pre-Diabetes: 5.7-6.4 Diabetes: 6.5	H P L C
Approximate mean plasma glucose	130.95			Calculated

Ref. for Biological Reference Intervals: American Diabetes Association.

INTERPRETATION:

The A1C test measures your average blood glucose for the past 2 to 3 months. Diabetes is diagnosed at an A1C of greater than or equal to 6.5%.

Therapeutic goals for glycemic control (ADA)

-Adults:

- Goal of therapy: <7.0% HbA1c
- Action suggested: >8.0% HbA1c

-Pediatric patients:

- Toddlers and preschoolers: <8.5% (but >7.5%)
- School age (6-12 years): <8%
- Adolescents and young adults (13-19 years): <7.5%



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DEPARTMENT OF BIOCHEMISTRY-ROUTINE

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE KIDNEY PROFILE (RFT/KFT) , SERUM				
Urea	23.26	mg/dL	13.0-43.0	Urease
Creatinine	0.9	mg/dL	0.5-1.3	Enzymatic
Uric Acid	10.3	mg/dL	3.5-7.2	Urease
Sodium	140.0	Meq/L	135-155	Direct ISE
Potassium	4.2	Meq/L	3.5-5.5	Direct ISE
Chloride	104.0	mmol/L	96-106	Direct ISE
Calcium	9.4	mg/dL	8.6-10.0	OCPC
Phosphorous	3.1	mg/dL	2.5-5.6	PMA Phenol
BUN	10.87	mg/dL	6.0-20.0	Reflect Spectrophoto

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DEPARTMENT OF BIOCHEMISTRY-ROUTINE

Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
Type OF Sample	SERUM-F			
Total Cholesterol	221.0	mg/dl	up to 200	End Point
Total Triglycerides	322.0	mg/dL	Borderline High Risk : 150-199 High Risk: 200-499 Very High Risk: >500	End Point
HDL Cholesterol	44.0	mg/dL	Optimal: >55 Border Line High Risk: 35-55 High Risk:- <35	Reflect Spectrothoto
Non - HDL Cholesterol	177	mg/dL	<130	
LDL Cholesterol	108.4	mg/dL	49-172	Reflect Spectrothoto
VLDL Cholesterol	64.4	mg/dL	5.0-40.0	Reflect Spectrothoto
Chol / HDL Ratio	5.02		Low Risk : 3.3-4.4 Average Risk : 4.5-7.1 Moderate Risk : 7.2-11.0 High Risk : >11.0	CALCULATED



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DEPARTMENT OF BIOCHEMISTRY-ROUTINE

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) WITH GGT , SERUM

Total Bilirubin	0.8	mg/dL	0.2-1.2	Jendrassik-Grof
Direct Bilirubin	0.1	mg/dL	0.0-0.3	Jendrassik-Grof
Indirect Bilirubin	0.7	mg/dL	0.0-0.9	Calculated
SGOT / AST	60.0	U/L	1-30	UV Kinetic (IFCC)
SGPT / ALT	108.0	U/L	1-45	UV Kinetic (IFCC)
Alkaline Phosphatase	71.0	U/L	43-115	PNPP
Gamma Glutaryl Transferase (GGT)	20.0	U/L	0.0-55.0	Reflect Spectrophoto
Total Protein	7.3	g/dl	6.4-8.3	Biuret
Albumin	4.6	g/dL	3.5-5.2	BCG
Globulin	2.7	g.dl	2.0-3.5	Calculated
A/G Ratio	1.70	%	1.0-2.3	Calculated

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Collected : 27/Jul/2024 10:08AM
Received : 27/Jul/2024 01:05PM
Reported : 27/Jul/2024 02:03PM
Status : Final Report
Client Name : INSTA

DEPARTMENT OF BIOCHEMISTRY-SPECIAL

Test Name	Result	Unit	Bio. Ref. Range	Method
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THYROID PROFILE-I , SERUM

Trilodothyronine Total (TT3)	0.93	ng/dL	0.6-1.8	Chemilluminescence
Thyroxine (TT4)	7.00	µg/dL	4.5-10.9	Chemilluminescence
Thyroid Stimulating Hormone (TSH)	4.833	µIU/ml	0.35-5.50	Chemilluminescence

COMMENT :- Above mentioned reference ranges are standard reference ranges.

AGE RELATED GUIDLINES FOR REFERENCE RANGES FOR TSH

TSH	NEW BORN	INFANT	CHILD	ADULT
(u IU/ml)	0.52-38.9	1.7-9.1	0.7-6.4	0.3-5.6

PREGNENCY RELATED GUIDLINES FOR REFERENCE RANGES FOR TSH

TSH	1st Trimester	2nd & 3rd Trimester
(u IU/ml)	0.2 - 2.5	0.3 - 3.0

NOTE : TSH levels are subject to circadian variation, reaching peak levels between 2-4 AM and at a minimum between 6-10 PM. Dose and time of drug intake also influence the test result.

Ultrasensitive kits used.

Serum T3/ FT3 , T4/FT4 and TSH measurements form three components of thyroid screening panel.

- Primary hypothyroidism is accompanied by elevated serum T3 & T4 values alongwith depressed TSH level.
- Primary hypothyroidism is accompanied by elevated serum T3 & T4 values & elevated serum TSH level.
- Normal T3 &T4 levels with high TSH indicate mild / subclinical HYPOTHYROIDISM.
- slightly elevated T3 levels may be found in pregnancy and in estrogen therapy while depressed levels may be encountered in severe illness, malnutrition, renal failure and during therapy with drugs like propranolol .
- Although elevated TSH levels are nearly always indicative of primary hypothyroidism. Rarely they can result from TSH secreting pituitary tumours (secondary hyperthyroidism).



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DEPARTMENT OF CLINICAL PATHOLOGY

Test Name	Result	Unit	Bio. Ref. Range	Method
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CUE - COMPLETE URINE ANALYSIS , URINE

Physical Examination

Colour	YELLOW			Visual
Appearance	Clear			Visual
pH	6.5		5.0-7.5	Dipstick
Specific Gravity	1.025		1.002-1.030	Dipstick

Chemical Examination

Albumin Urine/ Protein Urine	NIL		NIL	Dipstick/Heat Test
Glucose Urine	NIL		NIL	Dipstick/Benedict
Urobilinogen	NIL		NIL	Dipstick/Ehrlichs
Ketones	NIL		NIL	Dipstick/Rotheras
Bile Salts	ABSENT		ABSENT	Dipstick
Bile Pigments	ABSENT		ABSENT	Dipstick/Fouchets
Nitrite	ABSENT		ABSENT	Dipstick

Microscopic Examination.

Pus Cells	3-4	/Hpf	0-2	
Epithelial Cells	1-2	Hpf	<10	
RBC	ABSENT	/Hpf	ABSENT	
Casts	ABSENT		ABSENT	
Crystals	ABSENT		ABSENT	
Bacteria	NORMALLY PRESENT		NORMALLY PRESENT	
Budding Yeast Cells	Absent		Absent	

*** End Of Report ***

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RATAN JYOTI NETRALAYA

OPHTHALMIC INSTITUTE & RESEARCH CENTRE

Hospital Reg. No. : 071



18, Vikas Nagar, Near Sai Baba Mandir, Gwalior-2 (M.P.) INDIA Tel. : 2423350/51, Web : www.ratanjyotigroup.org, Email : rjneye@gmail.com

SR.NO. : 2045653
NAME : MR PRIYANK MISHRA
AGE/SEX : 38 YRS / MALE

DATE : 27-July-2024
MRD NO. : R-128740
CITY : AURAIYA

VISION	DISTANCE		NEAR	
	OD	OS	OD	OS
UNAIDED	6/60	6/60		
WITH GLASSES	6/6	6/6		
WITH PIN HOLE				
WITH COLOR				
VISION				

IOP READING				
TIME	OD	OD METHOD	OS	OS METHOD
1:22PM	18		18	

Rx. EYE From To Instructions
1 ECO MOIST ULTRA 1*10ML BOTH EYE 27-Jul-2024 25-Aug-2024
ONE DROP 4 TIMES A DAY FOR 30 DAYS

TREATMENT PLAN : -GP
REV FOR DILATED EX WHEN WILLING
REFERRED TO :
NEXT REVIEW : AS PER DR. ADVISED

DR. SAVITRI DEVAL

NOTE : Kindly continue medications as advised for the period advised.
In case of redness or allergy please discontinue and inform the doctor.
Nutritional Advice : As per treating physician
Instructions : Patient and Attendant(s) Counselling
Advised medicine may be replaced with a good quality generic medicine.

Speciality Clinics : ▪ Comprehensive Ophthalmology Clinic ▪ Cataract & IOL Clinic ▪ Vitreo Retina & Uvea Clinic ▪ Spectacle Removal Clinic (Lasik/Femto Lasik/Phakic Lens) ▪ Cornea Clinic ▪ Glaucoma Clinic ▪ Orbit & Oculoplasty Clinic ▪ Trauma Clinic ▪ Squint Clinic ▪ Paediatric Ophthalmology Clinic ▪ Low Vision Aid Clinic ▪ Contact Lens Clinic

CONSULTATION TIMINGS : MORNING 9:00 A.M. TO 6:00 P.M. (SUNDAY OFF)

● केन्द्रीय कर्मचारियों के लिए मान्यता प्राप्त ● कैशलेस इश्योरेन्स एवं टी.पी.ए. सुविधा उपलब्ध ● For Appointment Please Contact : 9111004046

स्वामी विद्यानंद भारती आई बैंक

नेत्रदान

करें और करावें इसे अपने परिवार की परम्परा बनावें
नेत्रदान के लिए सम्पर्क करें : 9111004044

PATIENT NAME - PRIYANK MISHRA 38Y/M
REFERRED BY - H.C.P
DATE - 27/07/2024
INVESTIGATION - USG WHOLE ABDOMEN

IMAGING FINDINGS:-

Liver appears normal in size, position, shape and margin. Parenchyma shows increased echogenecities. The intrahepatic biliary and portal venous radicles appear normal. Hepatic veins and portal vein are normal.

Gall Bladder is partially distended. GB wall appears normal. Visualized **CBD** is of normal caliber.

Spleen appears normal in size (~ 10.5cm), position, shape, echotexture and margin. No any focal lesion within splenic parenchyma. Splenic vein is normal and undilated.

Pancreas is obscured due to poor window

Both Kidneys: Measurements are right kidney ~ 9.9x3.5cm and left kidney ~ 9.4x4.4cm. Both kidneys are normal in position, size, shape, surface, echotexture and cortico-medullary differentiation. Bilateral PC systems are compact. No significant calculus or hydronephrosis on either side. Ureters are undilated on either side.

Urinary Bladder is normal in shape, wall and content.

Prostate appears normal in size (~ 13.8cc), shape and echotexture.

No obvious ascites.

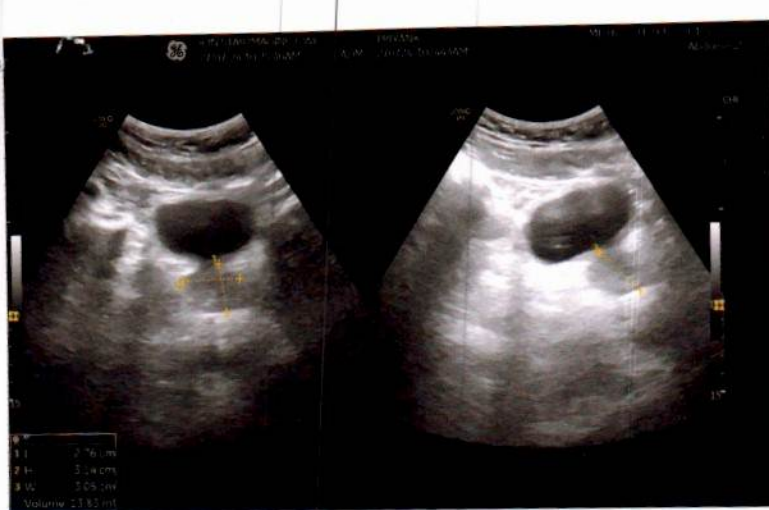
OPINION:- Features are suggestive of-

- Grade I fatty liver

Suggested clinical correlation/Follow up imaging.

DR. SAKSHI CHAWLA
(MD RADIODIAGNOSIS)

Disclaimer: The science of radiology is based upon interpretation of shadows of normal and abnormal tissue. This is neither complete nor accurate; hence, findings should always be interpreted in to the light of clinico-pathological correlation. This is a professional opinion, not a diagnosis. Not meant for medico legal purposes. For any kind of typing error, please intimate us within 7 days of reporting.



PT. NAME: PRIYANK MISHRA	AGE/SEX: 38Y/M
REF. BY: 173649	27/07/2024

X RAY CHEST (PA)

IMAGING FINDINGS:

Expiratory scan, hence cardiothoracic ratio cannot be commented upon
Prominent vascular markings seen in both lung fields.
B/L costophrenic angle appear clear and normal.
B/L domes of diaphragm are smooth, regular and normal in position.

Please correlate with clinical findings and relevant investigations.


DR. SAKSHI CHAWLA
(MD RADIODIAGNOSIS)

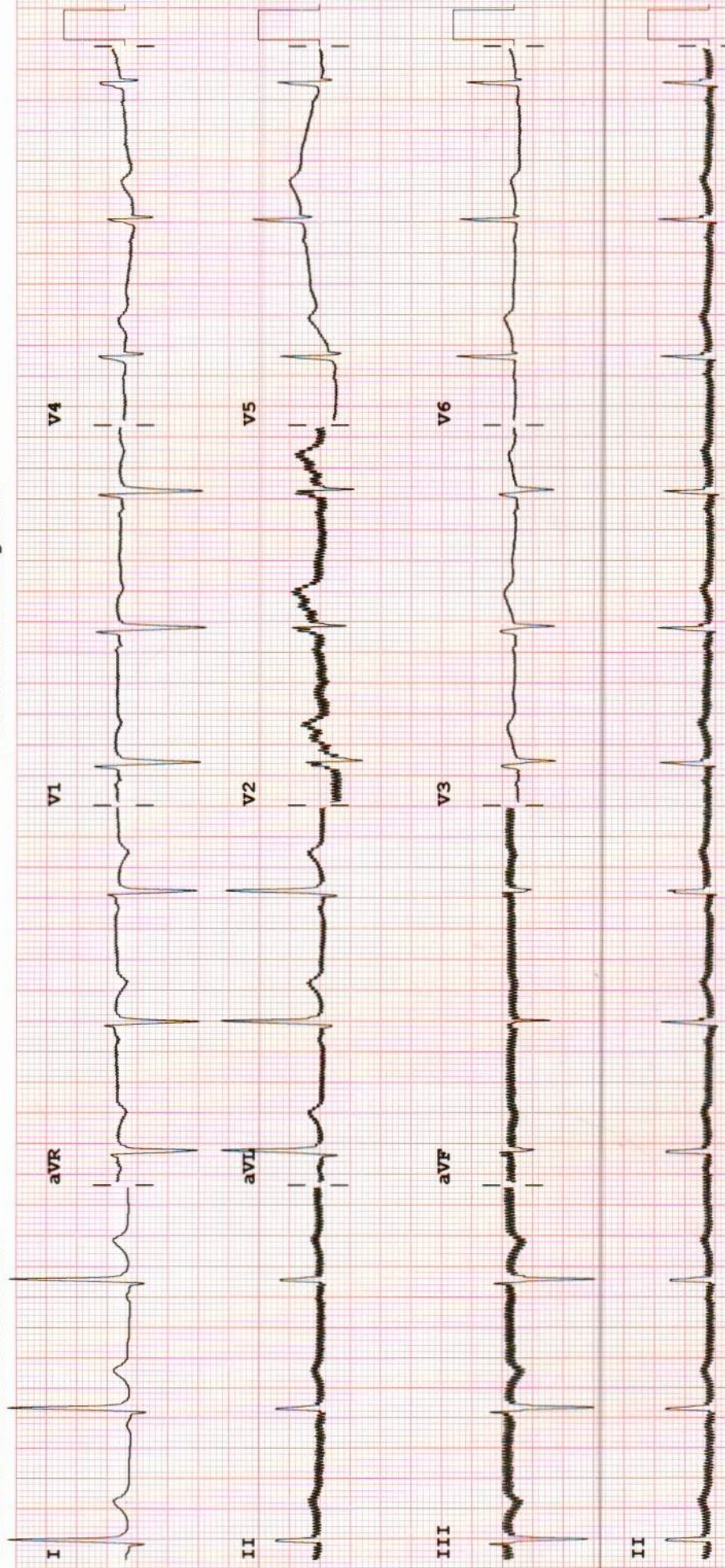
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38 Years

Rate 69 . Sinus rhythm.....normal P axis, V-rate 50- 99
 . Left ventricular hypertrophy.....multiple voltage criteria
 PR 129 . Abnormal T, consider ischemia, inferior leads.....T <-0.20mV, II III aVF
 QRS 101 . Artifact in lead(s) II, III, aVR, aVL, V1, V2, V3, V4, V5, V6
 QT 379
 QTc 406

--AXIS--
 P -27
 QRS -16
 T -45
 12 Lead; Standard Placement

Unconfirmed Diagnosis



[Handwritten signature]

Device: Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV PH100B CL P?
 F 60~ 0.15-100 Hz