



HEALTH CHECK-UP SUMMARY

Race Course Road, Vadodara

Name: AJAY PANWAR	
SH No: 296980	Date: 26/10/2024
Age: 29	Gender: MALE

ASSESSMENT:

- o P/H/O: ANAL FISSURE
- o P/I/O OPERATION : CIRCUMCISION (2023)
- o C/O: RASHES ON B/L LIMB , OCCASIONAL DIZZINESS , OCCASIONAL ANXIETY , ACIDITY
- o ENT EXAMINATION : LEFT EAR WAX PRESENT
- o HIGH RDW CV(14.80)
- o LOW BLOOD UREA NITROGEN (8.41) , LOW BLOOD UREA(18)
- o HIGH T3 , TOTAL(1.60)
- o URINE R/M: LOW SPECIFIC GRAVITY(1.010)
- o ECG: LOW VOLTAGE

ADVISED:

- o PLENTY OF LIQUIDS
- o AVOID OUT SIDE FOOD AND WATER
- o REGULAR EXERCISE.
- o OPHTHALMOLOGIST ADVICE : FOLLOW ADVICE
- o ENT ADVICE:FOLLOW ADVICE
- o PHYSICIAN CONSULTATION
- o DERMATOLOGIST CONSULTATION

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

DR. JAY S PANDIT

Prevention & Rehabilitation Dept

Hospital Address: Sterling Hospitals, Race Course Road, Opp. Inox Cinema Han Nagar, Circle West, Vadodara - 390007, Gujarat, India | Call: 0265-6144111, 0265-2364455, 98 98 98 78 78  
www.sterlinghospitals.com | info@sterlinghospitals.com

Registered Office: Sterling Addlife India Private Limited | CIN: U85110GJ2000PTC029121  
Sterling Hospital, Sterling Hospital Road, Memnagar, Ahmedabad-380057, Gujarat, India.



**HEALTH CHECK UP  
 MEDICAL EXAMINATION**

 Name: Ajay Panwar Employee ID: \_\_\_\_\_  
 Company Name: \_\_\_\_\_ Age: 29 Sex: MALE  
 Height: 173 cms. Weight: 69.1 Kgs BMI: 23.08 Blood Group: \_\_\_\_\_  
 Name of HO / Registrar taking History: Dr. Jay S. Parolia

Allergies:  None  Yes (If Yes, describe)

Drugs/Food/Latex/Dyes/Contrast/Other .....	Reaction
1.	
2.	
3.	

 Chief Complaints :  
P/H/O - Anal fissure.  
Pain on B/L, hem. (fungsigs)
**Physical Examination :**

 Vital Signs:  
 Temp: 98.6 F SPO<sub>2</sub>: 99 Pulse: 77/min R/R: 18/min B.P.: 110/70 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. _____ If Tuberculosis, When _____ Any Other P/H _____
Under Treatment of Dr. _____ Any intervention done _____ P/H of Operation Diagnosis <u>circumcision</u> Name of Operation <u>(202-3)</u> Year of Operation _____	Any Other Medication _____ P/H of Hospitalization _____ Diagnosis _____ Year _____ Duration _____ Blood Transfusion History: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Year _____
Others _____	

**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	} NAD	Asthma	Yes/No	} PAD
Heart Disease	Yes/No		Stroke	Yes/No	
Diabetes	Yes/No		Arthritis/Gout	Yes/No	
Tuberculosis	Yes/No		Cancer	Yes/No	
Epilepsy	Yes/No		Other Chronic disease	Yes/No	

**Personal History :**

Diet	veg	Smoking	Yes/No	since	/	per day
Appetite		Alcohol	Yes/No	since	/	(freq.)
Sleep		Drugs	Yes/No	since	/	(freq.)
Micturition		Tobacco	Yes/No	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

- 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: NO
- Oriented  Yes  No If disoriented, to  Person  Place  Time
- Reaction:  Brisk  Sluggish  No response
- LOC:  Alert  Confused  Sedated
- Speech:  Clear  Slurred

Respiratory :  NSF

- A F B E clear
- Lung sounds: .....
  - Dyspnoea:  None  With activity  At rest  Lying down  Retractions
  - Cough:  None  Non-productive  Productive - colour
  - 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
  - Ratus  Yes  No
  - Pain  Yes  No
  - Rectal bleeding  Yes  No
  - Colostomy  Yes  No
  - Ileostomy  Yes  No
- Mildly

Bowel

- Diarrhoea  Constipation  Incontinence  Blood in stool  None
  - Pain  Yes  No Place: 2 hrs / dy Hemorrhoids  Yes  No
  - Frequency of stool: 2 hrs / dy
  - Interventions:  None • Laxatives  Yes  No Type: ..... Frequency: .....
- 7 NAD

**Genitorurinary :**  NSF

 Colour of Urine White Frequency 6-7/dg

 Pain  Yes  No Burning  Yes  No Itching  Yes  No

 Urgency  Yes  No Incontinence  Yes  No

 Nocturia  Yes  No Urastomy  Yes  No

 History of calculi  Yes  No History of UTI  Yes  No

 Foley's Catheter  Yes  No Date of Insertion \_\_\_\_\_

**Reproductive :**  NA  NSF

LMP \_\_\_\_\_ Regular / Irregular \_\_\_\_\_

 Dysmenorrhea  Yes  No Amenorrhea  Yes  No if yes, Duration: \_\_\_\_\_

 Menopausal  Yes  No if yes, Duration: \_\_\_\_\_

 Vaginal discharge  Yes  No Itching  Yes  No

**Breasts**  NA  NSF

 Breast Feeding  Yes  No Lumps  Yes  No

**Positive Finding & Advice**

.....

.....

.....

.....

**Sterling AddLife India Limited**

 Unit 5, Sterling Hospital Vadodara  
 Bhatnagar Circle, (West)  
 VADODARA - 390 007.

Sign and Stamp of Medical Officer

**Sterling Hospital**  
Racecourse Road

**EMERGENCY HELPLINE**

 992 444 9972  
0265 - 61 44 111

**Sterling Hospital**  
Bhayli

**EMERGENCY HELPLINE**

 908 1000 557  
0265 - 61 23 333



**OPHTHALMIC CHECK-UP**

**SIGNIFICANT HISTORY:**

**FAST HISTORY:**

- Refractive Error:
- Any Surgery:
- Color Blind:
- Diabetes:
- Hypertension:
- Any Treatment:

\_\_\_\_\_

**EXAMINATION OF EYES:**

	<u>Right Eye:</u>	<u>Left Eye:</u>
Distant Vision without Glasses:	2/6	2/6
Distant Vision with Glasses:	FF	FF
Near Vision without Glasses:	9/6	9/6
Near Vision with Glasses:	FF	FF
Intraocular Pressure:	17	17
Anterior Segment:	FF	FF
Fundus:	FF	FF

**PRESCRIPTION OF GLASSES:**

	RIGHT			LEFT		
	Sphere	Cylinder	Axis	Sphere	Cylinder	Axis
Distant	-	-	-	-	-	-
Near	-	-	-	-	-	-

Type of glass:

**ADVICE:**

Hypertension for 2 hrs.

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Race Course Road, (West)  
VADODARA - 390 007.

**DR MAYA PATEL**  
(OPHTHALMOLOGIST)





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

**COMPLAINTS:**

— nasal discharge

**EXAMINATION OF EARS:**

Local Examination:

— N/A  
Tympanic Membrane:   
② normal  
③ normal

**EXAMINATION OF NOSE:**

Local Examination:

— N/A

**THROAT & LARYNX:**

— Reddened pharynx

**LARYNGOSCOPIC EXAMINATION:**

— N/A  
Larynx normal

Solomon Fradoup  
Sterling Addlife India Limited  
Unit-Sterling Hospital Vadodara  
Race Course Circle, (West)  
Vadodra - 390 007  
Phone: 390 007

**DR. NAVMIT MAKWANA**  
ENT SURGEON





Passport No :

**LABORATORY TEST REPORT**


Patient Information	Sample Information	Location Information
Name : <b>Mr. Ajay . Panwar</b>	Lab Id : <b>102407502632</b>	Pl. Type : <b>Sterling Hospital Vadodara Health Checkup</b>
Sex/Age : <b>Male / 29 Y</b> 05-Apr-1995	Registration on : <b>26-Oct-2024 09:29</b>	Location : <b>Main BNo.7</b>
Ref. Id : <b>290980</b> / <b>2816877</b>	Collected at : <b>SAWPL</b>	Approved on : <b>26-Oct-2024 12:47</b> Status : <b>Final</b>
Ref. By : <b>Dr. RMO , STERLING...</b>	Collected on : <b>26-Oct-2024 09:38</b>	Printed On : <b>26-Oct-2024 15:06</b>
	Sample Type : <b>EDTA blood</b>	Process At : <b>75 - Sterling Hospital, Race course (Vadodar</b>

**MEDI WHEEL FULL BODY ANNUAL PLUS**
**Complete Blood Count**

Test	Result	Unit	Biological Ref. Interval
Hemoglobin <small>Solvent</small>	15.7	g/dL	13.0 - 16.5
RBC Count <small>Count (reference)</small>	5.23	million/cmm	4.5 - 5.5
Hematocrit <small>Calculated</small>	47.1	%	40 - 49
MCV <small>Calculated</small>	90.1	fL	83 - 101
MCH <small>Calculated</small>	29.9	pg	27.1 - 32.5
MCHC <small>Calculated</small>	33.2	g/dL	32.5 - 36.7
RDW CV <small>Calculated</small>	H <b>14.80</b>	%	11.5 - 14

**Total WBC and Differential Count**

WBC count	Result	Unit	Biological Ref. Interval
WBC count <small>WBC Count (reference)</small>	5440	/cmm	4000 - 10000


  

Differential Count	Result	Unit	Biological Ref. Interval	Absolute Count
Neutrophils <small>Microscopic</small>	45	%	40 - 80	2448 /cmm    2000 - 6700
Lymphocytes <small>Microscopic</small>	46	%	20 - 40	2502 /cmm    1000 - 3000
Eosinophils <small>Microscopic</small>	01	%	1 - 6	54 /cmm    20 - 500
Monocytes <small>Microscopic</small>	08	%	2 - 10	435 /cmm    200 - 1000
Basophils <small>Microscopic</small>	00	%	0 - 2	0 /cmm    0 - 100

**Platelet Count**

Platelet Count	Result	Unit	Biological Ref. Interval
Platelet Count <small>Platelet Count (reference)</small>	364000	/cmm	150000 - 410000
MPV <small>Calculated</small>	8.50	fL	7.5 - 10.3

**Platelets Morphology**      Platelets are adequate on Smear

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

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**Sterling Accuris Pathology Laboratory**

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







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**LABORATORY TEST REPORT**


Patient Information		Sample Information		Location Information	
Name	: Mr. Ajay . Panwar	Lab Id	: 102407502632	Pt. Type	: Sterling Hospital Vadodera Health Checkup
Sex/Age	: Male / 29 Y 05-Apr-1995	Registration on	: 26-Oct-2024 08:29	Location	: Main
Ref. Id	: 295980 / 2915977	Collected at	: SAWPL	Approved on	: 26-Oct-2024 12:47 Status : Final
Ref. By	: Dr. RMO . STERLING...	Collected on	: 26-Oct-2024 09:38	Printed On	: 26-Oct-2024 15:06
		Sample Type	: EDTA blood	Process At	: 75 - Sterling Hospital, Race course (Vadodera)

**MEDI WHEEL FULL BODY ANNUAL PLUS**
**Complete Blood Count**

Test	Result	Unit	Biological Ref. Interval
<b>Erythrocytes Sedimentation Rate</b>			
ESR	3	mm/hr	0 - 14

**Differential Count**
**Absolute Count**
  
 Dr. C. Shrinivasan..

 M.D ( Pathology ) [G-18341]  
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**LABORATORY TEST REPORT**


Patient Information	Sample Information	Location Information
Name : Mr. Ajay . Panwar	Lab Id : 102407502632	Pt. Type : Sterling Hospital Vadodara Health Checkup
Sex/Age : Male / 29 Y 05-Apr-1995	Registration on : 26-Oct-2024 09:29	Location : Main
Ref. Id : 296980 / 2815877	Collected at : SAWPL	Approved on : 26-Oct-2024 12:48 Status : Final
Ref. By : Dr. RMO : STERLING...	Collected on : 26-Oct-2024 09:38	Printed On : 26-Oct-2024 15:06
	Sample Type : EDTA blood	Process At : 75 - Sterling Hospital, Race course (Vadodar

**MEDI WHEEL FULL BODY ANNUAL PLUS**
**Blood Group**

Test	Result	Unit	Biological Ref. Interval
ABO Type <small>Color Agglutination</small>	*O*		
Rh (D) Type	Positive		

  
 Dr. C. Shrinivasan..

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**LABORATORY TEST REPORT**


Patient Information	Sample Information	Location Information
Name : Mr. Ajay , Panwar Sex/Age : Male / 29 Y 06-Apr-1995 Ref. Id : 298980 / 2815877 Ref. By : Dr. RMO , STERLING...	Lab Id : 102407502632 Registration on : 26-Oct-2024 09:29 Collected at : SAWPL Collected on : 26-Oct-2024 09:38 Sample Type : Serum, Urine	Pt. Type : Sterling Hospital Vadodara Health Checkup Location : BNo.1 Approved on : 26-Oct-2024 10:51 Status : Final Printed On : 26-Oct-2024 15:06 Process At : 75 - Sterling Hospital, Race course (Vadodar

**MEDI WHEEL FULL BODY ANNUAL PLUS**

Test	Result	Unit	Biological Ref. Interval
<b>Fasting Blood Glucose</b> <small>(G00-P00)</small>	83.0	mg/dL	74 - 100
<b>Fasting Urine Glucose</b> <small>(G00-P00)</small>	Absent		Absent
<b>Fasting Urine Ketone</b> <small>(M100-K01)</small>	Absent		Absent

	Fasting Blood Glucose*	Postprandial Blood Glucose #	Random Blood Glucose
Normal	< 100 mg/dL	< 140 mg/dL	< 140 mg/dL
Pred diabetic	100 - 125 mg/dL	140 - 199 mg/dL	140 - 199 mg/dL
Diabetic	≥ 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) ≥ 126 mg/dL
2. Two-hour blood glucose (2-h OGTT) ≥ 200 mg/dL
3. HbA1c values (A1c) ≥ 6.5%
4. Random plasma glucose ≥ 200 mg/dL

[With symptoms of hyperglycemia or hyperglycemic crisis]

In the absence of unequivocal hyperglycemia, diagnosis of DM (with 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 - Factbook on Diabetes - Prevention and treatment



Dr. C. Shrinivasan,  
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**LABORATORY TEST REPORT**


Patient Information	Sample Information	Location Information
Name : Mr. Ajay . Panwar Sex/Age : Male / 29 Y 06-Apr-1995 Ref. Id : 296980 / 2815877 Ref. By : Dr. RMO . STERLING...	Lab Id : 102407502632 Registration on : 26-Oct-2024 09:29 Collected at : SAWPL Collected on : 26-Oct-2024 11:54 Sample Type : Fluoride	PL Type : Sterling Hospital Vadodara Health Checkup Location : Main BNo.7 Approved on : 26-Oct-2024 14:28 Status : Final Printed On : 26-Oct-2024 15:06 Process At : 75 - Sterling Hospital, Race course (Vadodar

**MEDI WHEEL FULL BODY ANNUAL PLUS**

Test	Result	Unit	Biological Ref. Interval
<b>Post-breakfast Blood Glucose</b> <small>GOB-POB</small>	115	mg/dL	70 - 140
<b>Post-breakfast Urine Glucose</b> <small>GOB-POB</small>	Absent		Absent
<b>Post Breakfast Urine Ketone</b> <small>Mintgreen/No</small>	Absent		Absent



 Dr. Kajal Parmar  
 MD

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Patient Information		Sample Information		Location Information	
Name	: Mr. Ajay . Panwar	Lab Id	: 102407502632	Pl. Type	: Sterling Hospital Vadodra Health Checkup
Sex/Age	: Male / 29 Y 05-Apr-1995	Registration on	: 26-Oct-2024 09:25	Location	: Main BNO,
Ref. Id	: 296990 ; 2916977	Collected at	: SAWPL	Approved on	: 26-Oct-2024 14:28 Status : Final
Ref. By	: Dr. RMO . STERLING...	Collected on	: 26-Oct-2024 09:38	Printed On	: 26-Oct-2024 15:06
		Sample Type	: EDTA blood	Process At	: 75 - Sterling Hospital, Race course (Vadodra)

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

Test	Result	Unit	Biological Ref. Interval
HbA1c	5.20	%	For Screening: Diabetes: $\geq 6.5\%$ ; Pre-Diabetes: 5.7 - 6.4%; Non-Diabetes: $< 5.7\%$  For Diabetic Patient: Poor Control : $\geq 7.0\%$ ; Good Control : 6.0-7.0%
Mean Blood Glucose	102.54	mg/dL	

**Description:**

- Total hemoglobin 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. Kajal Parmar**  
MD

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# Patient report

# Sterling HOSPITALS

DATE: 26/10/2024

TIME: 01:06 PM

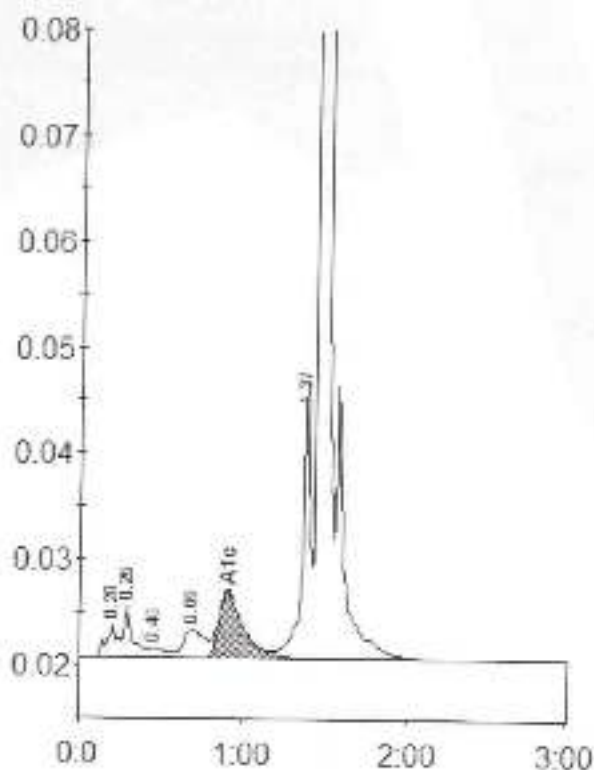
S/N: #DJ8G550303 Software version: 4.30-2

Sample ID: 102407502632

Injection date: 26/10/2024 01:06 PM

Injection #: 7 Method: HbA1c

Rack #: --- Rack position: 7



Peak table - ID: 102407502632

Peak	R.time	Height	Area	Area %
A1a	0.20	3201	15636	1.0
A1b	0.29	5053	17854	1.1
F	0.46	1041	7056	0.4
LA1c/C11b-1	0.69	2685	24324	1.5
A1c	0.90	6351	64719	5.2
P3	1.37	26018	89630	5.7
A0	1.44	549141	1356781	86.1
Total Area:			1576000	

Concentration:	%
A1c	5.2





Passport No :

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Sex/Age : Male / 29 Y 05-Apr-1995	Registration on : 26-Oct-2024 09:29	Location : Main
Ref. Id : 296863 / 2615677	Collected at : SAWPL	Approved on : 26-Oct-2024 11:44 Status : Final
Ref. By : Dr. RMG : STERLING..	Collected on : 26-Oct-2024 09:38	Printed On : 26-Oct-2024 15:08
	Sample Type : Serum	Process At : 75 - Sterling Hospital, Race course (Vadodara)

**MEDI WHEEL FULL BODY ANNUAL PLUS**
**Lipid Profile**

Test	Result	Unit	Biological Ref. Interval
<b>Cholesterol</b> <small>Cholesterol (total) - Auto/Whole</small>	172.0	mg/dL	Desirable : <200 Borderline High : 200-239 High : >240
<b>Triglyceride</b> <small>Enzymic Lipase (DR/CPW/POC)</small>	80.0	mg/dL	Normal : <150 Borderline : 150-199 High : 200-499 Very High : >500
<b>HDL Cholesterol</b> <small>HDL-C</small>	53.0	mg/dL	Low : <40.0 High : >60.0
<b>Direct LDL</b> <small>Direct LDL-C</small>	100.00	mg/dL	Optimal : <100 Near to above Optimal : 100-129 Borderline High : 130-159 High : 160-189 Very High : >190
<b>VLDL</b> <small>Calculated</small>	16.00	mg/dL	15 - 35
<b>CHOL/HDL Ratio</b> <small>Calculated</small>	3.2		Up to 5.0
<b>dLDL/HDL Ratio</b> <small>Calculated</small>	1.9		Up to 3.5

Dr. C. Shrinivasan.,  
M.D ( Pathology ) [G-18341]  
Consultant Pathologist

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**LABORATORY TEST REPORT**


Patient Information	Sample Information	Location Information
Name : <b>Mr. Ajay . Panwar</b>	Lab Id : <b>102407502632</b>	Pt. Type : Sterling Hospital Vadodara Health Checkup Main
Sex/Age : <b>Male / 29 Y</b> 05-Apr-1995	Registration on : 26-Oct-2024 09:29	Location : BNo.7
Ref. Id : 286860 , 2815677	Collected at : SAWPL	Approved on : 26-Oct-2024 10:52 Status : Final
Ref. By : Dr. RMO : STERLING...	Collected on : 26-Oct-2024 09:38	Printed On : 26-Oct-2024 15:06
	Sample Type : Serum	Process At : 75 - Sterling Hospital Race course (Vadodar

**MEDI WHEEL FULL BODY ANNUAL PLUS**

Test	Result	Unit	Biological Ref. Interval
<b>Uric Acid</b> <small>Uricase</small>	4.90	mg/dL	3.5 - 8.5
<b>Blood Urea Nitrogen</b> <small>Calculated</small>	L 8.41	mg/dL	9.0 - 20.0
<b>Urea</b> <small>Urease, Colorimetric</small>	L 18.0	mg/dL	19.3 - 43.0
<b>Creatinine, serum</b> <small>Creatinine Aminolyticase</small>	0.70	mg/dL	0.66 - 1.25
<b>BUN Creatinine Ratio</b> <small>Calculated</small>	12.01		
<b>Urea Creatinine Ratio</b> <small>Calculated</small>	25.71		



Dr. C. Shrinivasan..

M.D ( Pathology ) [G-18341]

Consultant Pathologist

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**LABORATORY TEST REPORT**


Patient Information	Sample Information	Location Information
Name : Mr. Ajay . Panwar	Lab Id : 102407502632	Pt. Type : Sterling Hospital Vadodara Health Checkup
Sex/Age : Male / 29 Y 05-Apr-1995	Registration on : 26-Oct-2024 09:29	Main Location : B.No.1
Ref. Id : 296980 / 2815877	Collected at : SAWPL	Approved on : 26-Oct-2024 11:44 Status : Final
Ref. By : Dr. RMD . STERLING...	Collected on : 26-Oct-2024 09:38	Printed On : 26-Oct-2024 15:05
	Sample Type : Serum	Process At : 75 - Sterling Hospital, Race course (Vadodara)

**MEDI WHEEL FULL BODY ANNUAL PLUS**
**Liver Function Test**

Test	Result	Unit	Biological Ref. Interval
<b>ALT (SGPT)</b> <small>UV with P50, IFCC</small>	48.0	U/L	0 - 50
<b>AST (SGOT)</b> <small>UV with P50</small>	34.0	U/L	17 - 69
<b>GGT (Gamma Glutamyl Transferase)</b> <small>L-γ-Glutamyl-p-nitroanilide</small>	29.0	U/L	15 - 73
<b>Alkaline Phosphatase</b> <small>BMPI, AMP SuRo, IFCC</small>	58.0	U/L	38 - 126
<b>Total Bilirubin</b> <small>Asco/Drubin - diazoingress</small>	0.70	mg/dL	0.2 - 1.3
<b>Conjugated Bilirubin</b> <small>Cetonia - Microt Binding</small>	0.10	mg/dL	0.0 - 0.3
<b>Unconjugated Billrubin</b> <small>Cetonia - Microt Binding</small>	0.40	mg/dL	0.0 - 1.1
<b>Delta Billrubin</b> <small>Calculated</small>	0.20	mg/dL	0.0 - 0.2
<b>Total Protein</b> <small>Gomwe method for colour comparison</small>	7.60	g/dL	6.3 - 8.2
<b>Albumin</b> <small>(Bromocresol) Green Method</small>	4.70	g/dL	3.5 - 5.0
<b>Globulin</b> <small>Calculated</small>	2.90	g/dL	2.3 - 3.5
<b>A/G Ratio</b> <small>Calculated</small>	1.62		1.3 - 1.7


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**LABORATORY TEST REPORT**


Patient Information		Sample Information		Location Information	
Name	: Mr. Ajay . Panwar	Lab Id	: 102407502632	Pl. Type	: Sterling Hospital Vadodara Health Checkup
Sex/Age	: Male / 29 Y 05-Apr-1995	Registration on	: 26-Oct-2024 09:29	Location	: Main BNo./
Ref. Id	: 296980 , 2815677	Collected at	: SAWPL	Approved on	: 26-Oct-2024 11:49 Status: Final
Ref. By	: Dr. RMO . STERLING...	Collected on	: 26-Oct-2024 09:38	Printed On	: 26-Oct-2024 15:06
		Sample Type	: Serum	Process At	: 75 - Sterling Hospital, Race course (Vadodar

**MEDI WHEEL FULL BODY ANNUAL PLUS**
**Thyroid Function Tests**

Test	Result	Unit	Biological Ref. Interval
T3, total (Trilodothyronine) <small>ELIA</small>	H 1.60	ng/mL	0.58 - 1.59
T4, total (Thyroxine) <small>CLIA</small>	9.27	ug/dl	4.87 - 11.72
TSH (3rd Gen.) <small>Chemiluminescence</small>	1.4300	µIU/mL	0.4001 - 4.040

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 25 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, and opiates.
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), Multimodular goitre (toxic nodule); Transient thyrotoxicosis postpartum, silent (symptomatic), Post viral (granulomatous, subacute, DeQuervain's) Gestational thyrotoxicosis hyperemesis gravidarum.
Decreased or within range	Raised	Within range	T3 toxicosis; Non-thyroidal illness.

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

  
**Dr. C. Shrinivasan..**

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

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**LABORATORY TEST REPORT**


Patient Information	Sample Information	Location Information
Name : Mr. Ajay . Panwar	Lab Id : 102407502632	Pt. Type : Sterling Hospital Vadodera Health Checkup
Sex/Age : Male / 29 Y 05-Apr-1995	Registration on : 26-Oct-2024 09:29	Location : Main
Ref. Id : 298990 / 2815877	Collected at : SAWPL	Approved on : 26-Oct-2024 11:43 Status : Final
Ref. By : Dr. RMD , STERLING...	Collected on : 26-Oct-2024 09:38	Printed On : 26-Oct-2024 15:06
	Sample Type : Urine	Process At : 75 - Sterling Hospital, Race course (Vadodera)

**MEDI WHEEL FULL BODY ANNUAL PLUS**
**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
Specific Gravity <i>Protein/creatinine based method</i>	L 1.010		1.015 - 1.025
Protein <i>Protein error of indicator</i>	Absent		Absent
Glucose <i>GDH-PON</i>	Absent		Absent
Ketone <i>Nitroprusside</i>	Absent		Absent
Blood <i>Peroxidase/Absorption</i>	Absent		Absent
Bilirubin <i>Diazotization</i>	Absent		Absent
Leucocytes <i>Colorimetric method</i>	Absent		Absent
Nitrite <i>p-arsenic acid to diazonium compound</i>	Absent		Absent
<b>Microscopic Examination</b>			
Erythrocytes (RBCs)	Absent	/hpf	0 - 2
Pus Cells	Occasional	/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

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Dr. Anuj,

26/10/24

Hyderabad for  
Amber / Dr

MSD

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SV134/79



Report Date: 04 Nov 2024 - 01:59 PM

Patient Id	: RCR-296980	Patient Name	: PANWAR AJAY .
Age	: 29Y 6M 21D	Sex	: Male
Ref. Doctor	: DR. RMO . STERLING	Study Date	: 26 Oct 2024 - 10:04 AM

### RADIOGRAPH CHEST PA

Both lungs and CP angles appear clear.  
Mediastinal shadow and hilar region appear normal.  
Cardiac shadow appears normal.  
Both domes of diaphragm show normal position and contour.  
Pony thorax under vision appears normal.

### IMPRESSION

No significant abnormality detected.

**Dr. Palak Nandolia**  
Consultant Radiologist



03 bpm  
1 mmHg

STERLING  
HCP  
VADODARA

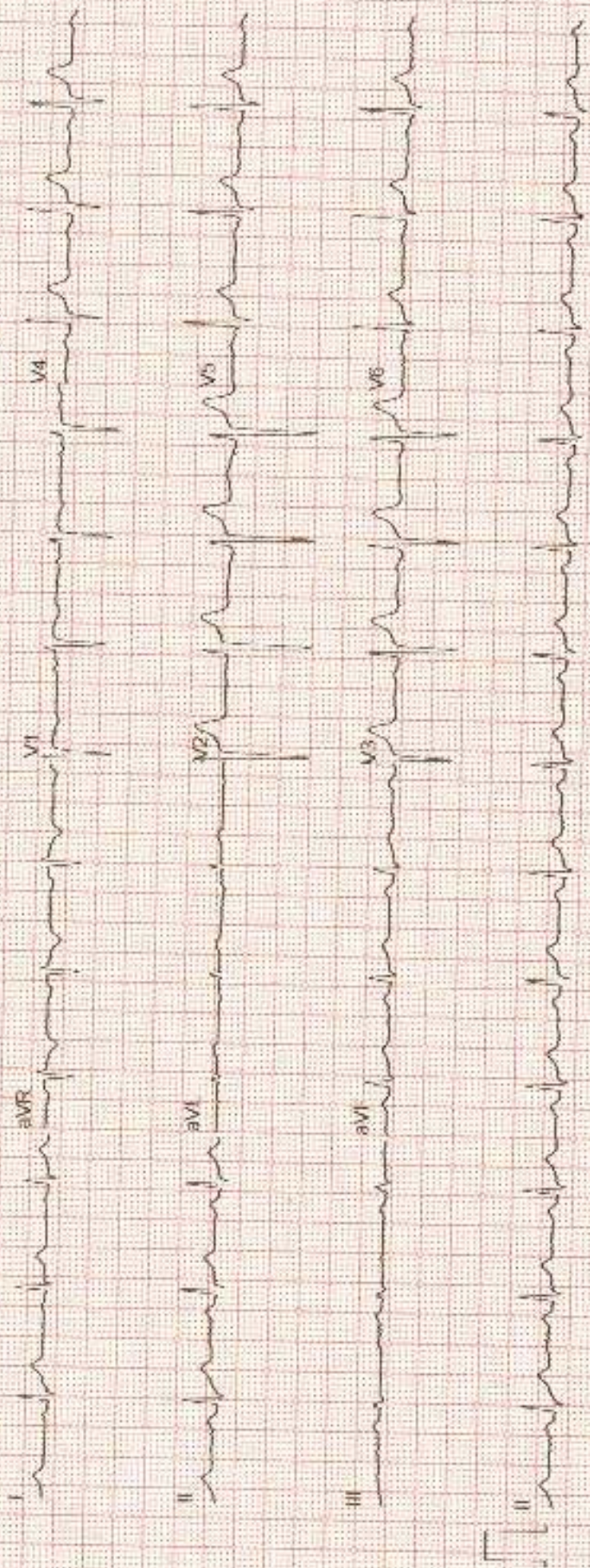
28 years

Male

QRS 82 ms  
 QT / QTcBaz 332 / 390 ms  
 PR 152 ms  
 P 102 ms  
 RR / pp 722 / 722 ms  
 P / QRS / T 67 / 46 / 42 degrees

Low voltage

NR





# 2D ECHOCARDIOGRAPHY REPORT



# Sterling<sup>®</sup> HOSPITALS

Race Course Road, Vadodara

Name: Mr. AJAY PANWAR  
Age: 29 Years  
Sex: M  
Date: 26-Oct-2024

Ref By: HCP  
Study: 2D Echo

### M-MODE:

IVS	10mm	LVDD	46mm
PW	09mm	LVDS	26mm
LA	31mm	LV EF	60 %

### DOPPLER STUDY:

MITRAL	E 0.96	A 0.76
AORTIC	1.12	
TRICUSPID	N	
PULMONARY	0.76	

### CONCLUSION :

- NORMAL SIZED CHAMBERS
- NORMAL LV SYSTOLIC FUNCTION LVEF 60 %
- NO RWMA AT REST
- NO DIASTOLIC DYSFUNCTION
- NO MR, NO AR, NO TR, NO PAH.
- OTHER VALVES ARE NORMAL
- NO CLOT OR VEGETATION
- NO PERICARDIAL EFFUSION
- IVC NORMAL

  
Dr. KAUSHIK TRIVEDI MD,DM  
Consultant interventional Cardiologist



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Report Date: 26 Oct 2024 - 10:39 AM

Patient Id	: RCR-296980	Patient Name	: PANWAR AJAY .
Age	: 29Y 6M 21D	Sex	: Male
Ref. Doctor	: DR.RMO.STERLING	Study Date	: 26 Oct 2024 - 10:19 AM

**SONOGRAPHY OF WHOLE ABDOMEN: -**

**LIVER:** Liver appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen. No evidence of dilated IHBR is seen. Intrahepatic portal radicals appear normal. Portal vein is normal in caliber at porta & shows hepatopetal blood flow.

**GALL BLADDER:** Gall bladder is distended and appears normal. No evidence of calculus or changes of cholecystitis are seen. It appears normal.

**PANCREAS:** Pancreas is partially visualized and visualized portion is normal in size and echotexture.

**SPLEEN:** Spleen is normal in size & shows normal echotexture. No focal or diffuse lesion is seen.

**BOTH KIDNEYS:** Both kidneys are normal in size, shape, position and contour. Cortical thickness & echo appear normal. No evidence of renal calculus, hydronephrosis or mass lesion is seen on either side.

Right kidney measures 10.5 x 4.6 cm

Left kidney measures 9.8 x 4.7 cm

No evidence of suprarenal mass lesion is seen on either side.

**URINARY BLADDER:** Bladder is normally distended and appears unremarkable. No bladder calculus, diverticulum or mass lesion is seen.

**PROSTATE:** Prostate appears normal in size and shows normal echotexture. No evidence of solid or cystic lesion.

No ascites or significant lymphadenopathy is seen.

Mild gaseous distention of bowel loops is seen.

**CONCLUSION:**

No significant abdominal abnormality detected.

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

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