

MR ANIL KUMAR

Male 41 Years

HR : 78 bpm

P : 102 ms

PR : 148 ms

QRS : 94 ms

QT/QTc : 362/413 ms

P/QRS/T : 63/34/31 °

RV5/SV1 : 1038/0.467 mV

Diagnosis Information:

Sinus rhythm

Possible left atrial abnormality

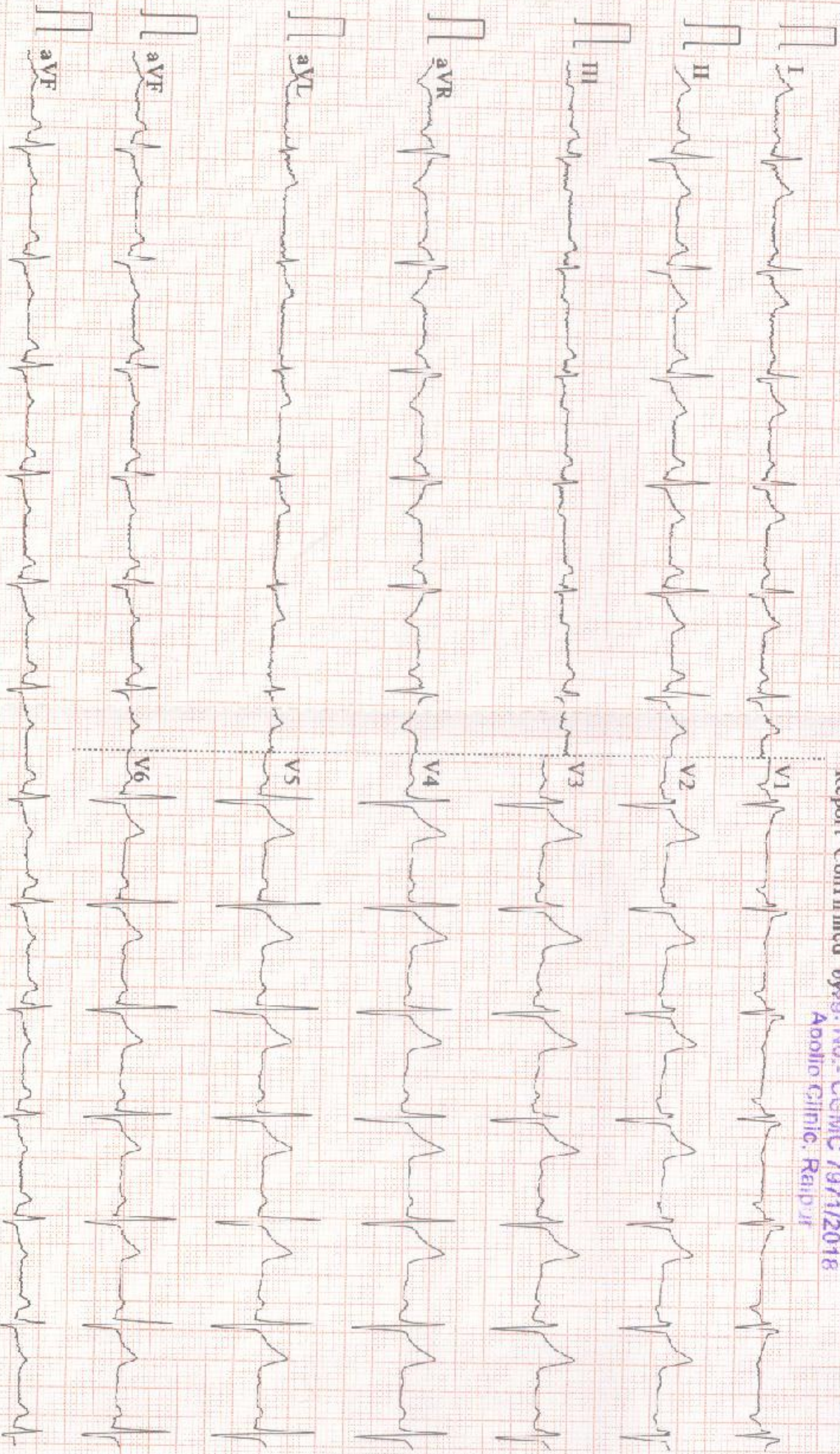
rSr'(V1) - probable normal variant

Borderline ECG



Report Confirmed by

Dr. Ankit Sharma
MD Medicine
Apollo Clinic, Raipur
Reg. No. - CGMC 7971/2018



Dr. Sweety Lath

BDS (Cosmetic Dental Surgeon)



Dr. Vivek Lath

Chief Dental Consultant
BDS, MDS, Diplomate (WCOI, Japan)
Professor, MCDRC - Durg
Reg. No. CGDC/14/PG/45

- Consult for : Digital Dentistry • Fixed Teeth • RCT • Dental Implants • Gums Diseases • Dentures • Cosmetic Filling • Tooth Jewellery
- Digital OPG • Braces Treatment • Tooth Removal • Kids Dental Treatment • All Kind of Dental Surgeries

Mr. Ajit Baranwal
41/M

23/12/23

Pt has come for routine dental checkup

O/E → Stains +
Calculus +

Adv → Oral Prophylaxis

gala



Apollo Clinic

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Apollo Clinic @ Tiara Complex A.T. Classic Near Ashoka Ratan, VIP Estate, Raipur (C.G.)

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0771 4033341/42

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www.apolloclinic.com

NAME OF PATIENT: MR. AJIT KUMAR BARANWAL

AGE: 41YRS/MALE

REFERRED BY: BOB

DATE: 23/12/2023.

CHEST X - RAY PA VIEW

FINDINGS:

- Both the domes of diaphragm and CP angles are normal.
- Both the hila and mediastinum are normal.
- Both the lung fields are clear. No e/o focal parenchymal lesion.
- Cardio-thoracic ratio is normal.
- Soft tissues and bony cage are unremarkable.

IMPRESSION:

- **NO SIGNIFICANT ABNORMALITY SEEN.**

Advised: Clinical correlation and further evaluation if clinically indicated.



Dr. Zeeshan Ateeb Dani
MBBS, MD
Consultant Radiologist
DR. ZEESHAN ATEEB DANI
(MD)
CONSULTANT RADIOLOGIST

This report is for perusal of the doctor only not the definitive diagnosis; findings have to be clinically correlated. This report is not for medico-legal purposes.

***THIS PAPER IS USED FOR CLINICAL REPORTING PURPOSE ONLY**

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0771 4033341/42

PATIENT NAME:- MR. AJIT KUMAR BARANWAL
REF BY :- BOB

AGE/SEX:- 41YRS/M
DATE:-23.12.2023

USG ABDOMEN

Liver: Liver is normal in size ,smooth in outline with normal echotexture. IHBR's are not dilated. CBD is not dilated. Portal vein and hepatic veins are normal.

Gall bladder: Distended & normal.

Pancreas & Paraaortic Region: Normal.

Spleen: Is normal in size and echotexture.

Kidneys	RIGHT	LEFT
SIZE	9.61X4.50cm	9.61X5.03cm
CORTICAL ECHOGENICITY	Normal	Normal
CORTICOMEDULLARY DIFFERENTIATION	Maintained	Maintained
PCS	Not dilated	Not dilated
Any other remarks	Nil	Nil

Urinary bladder.- Distended & normal..

Prostate: is normal in size, shape & echotexture.

No free fluid in abdomen.

Visualized bowel loops are normal.

No significant intra-abdominal lymphadenopathy seen.

IMPRESSION:

- USG abomen within normal limit.

Advised clinical correlation/further evaluation if clinically indicated.



(Handwritten signature)

DR. ANIL WASTI
SONOLOGIST REG.NO. CGMC-1471

This report is for perusal of the doctor only not the definitive diagnosis; findings have to be clinically correlated. Ultrasound has its limitations in obese patients and in retroperitoneal organs. All congenital abnormalities cannot be detected on ultrasound. This report is not for medico-legal purposes.

EXAMINATION OF EYES :- (BY OPHTHALMOLOGIST)

Patient Name Mr. Ajit Kumar -

Date 23/12/23

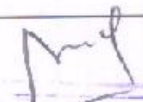
Sex/Age

MR No

Employee Id

EXTERNAL EXAMINATION				
SQUINT		NO		
NYSTAGMUS				
COLOUR VISION		NORMAL		
FUNDUS:(RE):-		WM	(LE):-	WM
INDIVIDUAL COLOUR IDENTIFICATION		Good		
DISTANT VISION:(RE):-		6/18 e4 6/6	(LE):-	6/18 e4 6/6
NEAR VISION:(RE):-		18 e4 6	(LE):-	18 e4 6
NIGHT BLINDNESS		NAD		
	SPH	CYL	AXIS	ADD
RIGHT	+1.50	+0.75	110°	+1.25
LEFT	+1.50	-	-	+1.25
REMARKS :-				




Dr. Vikas Mishra
MBBS, MS(Ophthalmologist)
Reg. No. CGMC 621/2006

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0771 4033341/42

Patient Name : MR AJIT KUMAR BARANWAL
UHID/ MR No : 8210
Visit Date : 23/12/2023
Sample Collected On : 23/12/2023 06:34PM
Ref. Doctor : SELF
Sponsor Name :

Age/Gender : 41 Y Male
OP Visit No : OPD-UNIT-II-2
Reported On : 23/12/2023 06:41PM

HAEMATOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
CBC - COMPLETE BLOOD COUNT			
Haemoglobin(HB) Method: CELL COUNTER	14.4	gm/dl	12 - 17
Erythrocyte (RBC) Count Method: CELL COUNTER	4.64	mill/cu.mm.	4.20 - 6.00
PCV (Packed Cell Volume) Method: CELL COUNTER	43.20	%	39 - 52
MCV (Mean Corpuscular Volume) Method: CELL COUNTER	93.1	fL	76.00 - 100
MCH (Mean Corpuscular Haemoglobin) Method: CELL COUNTER	31.0	pg	28 - 34
MCHC (Mean Corpuscular Hb Concn.) Method: CELL COUNTER	33.3	g/dl	32 - 35
RDW (Red Cell Distribution Width) Method: CELL COUNTER	12.4	%	11- 16
Total Leucocytes (WBC) Count Method: CELL COUNTER	5.69	cells/cumm	3.50 - 10.00
Neutrophils Method: CELL COUNTER	65	%	40.0 - 73.0
Lymphocytes Method: CELL COUNTER	25	%	15.0 - 45.0
Monocytes Method: CELL COUNTER	07	%	4.0 - 12.0
Eosinophils Method: CELL COUNTER	03	%	1-6%
Basophils Method: CELL COUNTER	00	%	0.0 - 2.0

End of Report
Results are to be correlated clinically

Lab Technician / Technologist
 path

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(Signature)
DR DHANANJAY RAMCHANDRA PRASAD
 M.D. PATHOLOGY

Patient Name : MR AJIT KUMAR BARANWAL
UHID/ MR No : 8210
Visit Date : 23/12/2023
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Ref. Doctor : SELF
Sponsor Name :

Age/Gender : 41 Y. Male
OP Visit No : OPD-UNIT-II-2
Reported On : 23/12/2023 08:41PM

HAEMATOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
ESR- Erythrocyte Sedimentation Rate Method: Westergren's Method	10	mm /HR	0 - 10

1. It indicates presence and intensity of an inflammatory process, never diagnostic of a specific disease. Changes are more significant than a single abnormal test.
2. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis, polymyalgia rheumatica.
3. Also increased in pregnancy, multiple myeloma, menstruation & hypothyroidism


Blood Group (ABO Typing)

Blood Group (ABO Typing) B
RhD factor (Rh Typing) POSITIVE

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HAEMATOLOGY


Investigation	Observed Value	Unit	Biological Reference Interval
Platelet Count Method: CELL COUNTER	125	lacs/cu.mm	150-400

1. As per the recommendation of International council for Standardization in Hematology, the differential leucocyte counts are additionally being reported as absolute numbers of each cell in per unit volume of blood.
2. Test conducted on EDTA whole blood.

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BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
GLUCOSE - (POST PRANDIAL)			
Glucose -Post prandial Method: REAGENT GRADE WATER	119.0	mg/dl	70-140
GLUCOSE (FASTING)			
Glucose- Fasting SUGAR REAGENT GRADE WATER	93.0	mg/dl	70 - 120
KFT - RENAL PROFILE - SERUM			
BUN-Blood Urea Nitrogen METHOD: Spectrophotometric	10	mg/dl	7 - 20
Creatinine METHOD: Spectrophotometric	1.10	mg/dl	0.6-1.4
Uric Acid Method: Spectrophotometric	4.5	mg/dL	2.6 - 7.2

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Dhananjay
DR DHANANJAY RAMCHANDRA PRASAD
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BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
LIPID PROFILE TEST (PACKAGE)			
Cholesterol - Total	160.0	mg/dl	Desirable: < 200 Borderline High: 200-239 High: >= 240
Triglycerides level	129.0	mg/dl	Normal : < 150 Borderline High : 150-199 Very High : >=500
Method: Spectrophotometric HDL Cholesterol	39.0	mg/dl	Major risk factor for heart disease: < 40 Negative risk factor for heart disease :>60
Method: Spectrophotometric LDL Cholesterol	95.20	mg/dl	Optimal:< 100 Near Optimal :100 – 129 Borderline High : 130-159 High : 160-189 Very High : >=190
Method: Spectrophotometric VLDL Cholesterol	25.80	mg/dl	6 - 38
Total Cholesterol/HDL Ratio	4.10		3.5-5
Method: Spectrophotometric			

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BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
LIVER FUNCTION TEST			
Bilirubin - Total Method: Spectrophotometric	0.9	mg/dl	0.1- 1.2
Bilirubin - Direct Method: Spectrophotometric	0.3	mg/dl	0.05-0.3
Bilirubin (Indirect) Method: Calculated	0.60	mg/dl	0 - 1
SGOT (AST) Method: Spectrophotometric	26	U/L	0 - 40
SGPT (ALT) Method: Spectrophotometric	32	U/L	0 - 41
ALKALINE PHOSPHATASE	85	U/L	25-147
Total Proteins Method: Spectrophotometric	6.6	g/dl	6 - 8
Albumin Method: Spectrophotometric	4.4	mg/dl	3.4 - 5.0
Globulin Method: Calculated	2.2	g/dl	1.8 - 3.6
A/G Ratio Method: Calculated	2.0	%	1.1 - 2.2

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IMMUNO ASSAY

Investigation	Observed Value	Unit	Biological Reference Interval
PSA - TOTAL			
PSA-TOTAL	0.93	ng/ml	<4.0
Borderline : 4 - 10			

10 - 49 years: 1.5
 50 - 59 " : 2.5
 60 - 69 " : 4.5
 70 - 79 " : 7.5

1. PSA is detected in serum of males with normal, benign hypertrophic and malignant prostatitis.

2. Measurement of serum PSA level is not recommended as a screening procedure for the diagnosis of cancer, because elevated PSA levels also are observed in patients with benign prostatic hypertrophy.

3. The fact that PSA is unique to prostate tissue makes it a suitable marker for monitoring men with cancer of the prostate. PSA is also useful for determining possible recurrence after therapy when used in conjunction with other diagnostic indices.


METHOD: Fluorometric Immuncassay (Done with mini VIDAS Bio Meriux France)

PATHOLOGIST *All Reports Require Clinical Interpretation, please consult your Doctor

End of Report
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Lab Technician / Technologist
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Sponsor Name :

Age/Gender : 41 Y. Male
OP Visit No : OPD-UNIT-II-2
Reported On : 23/12/2023 06:41PM

CLINICAL PATHOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
URINE ROUTINE EXAMINATION			
Physical Examination			
Volum of urine	30ML		
Appearance	Clear		Clear
Colour	Pale Yellow		Colourless
Specific Gravity	1.020		1.001 - 1.030
Reaction (pH)	6.0		
Chemical Examination			
Protein(Albumin) Urine	Absent		Absent
Glucose(Sugar) Urine	Absent		Absent
Blood	Absent		Absent
Leukocytes	Absent		Absent
Ketone Urine	Absent		Absent
Bilirubin Urine	Absent		Absent
Urobilinogen	Absent		Absent
Nitrite (Urine)	Absent		Absent
Microscopic Examination			
RBC (Urine)	NIL	/hpf	0 - 2
Pus cells	2-4	/hpf	0 - 5
Epithelial Cell	2-4	/hpf	0 - 5
Crystals	Not Seen	/hpf	Not Seen
Bacteria	Not Seen	/hpf	Not Seen
Budding yeast	Not Seen	/hpf	

End of Report
Results are to be correlated clinically

Lab Technician / Technologist
 path

Page 1 of 2

Dr. Prasad
 DR DHANANJAY RAMCHANDRA PRASAD
 M.D. PATHOLOGY



16 / MR AJIT / 41 Yrs / M / 167 Cms / 69 Kg

Date: 23 / 12 / 2023

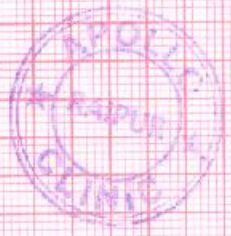
Stage	Time	Duration	Speed(Kmph)	Elevation	METs	Rate	% THR	BP	RPP	PVC	Comments
Supine	00:09	0:09	00.0	00.0	01.0	075	42%	120/80	090	00	
ExStart	00:17	0:08	00.0	00.0	01.0	075	42%	120/80	090	00	
BRUCE Stage 1	03:17	3:00	02.7	10.0	04.7	133	74%	122/82	162	00	
PeakEx	06:06	2:49	04.0	12.0	07.0	154	86%	124/84	190	00	
Recovery	06:36	0:30	00.8	00.0	01.8	143	80%	124/84	177	00	
Recovery	07:06	1:00	00.8	00.0	01.0	128	72%	124/84	168	00	
Recovery	07:49	1:43	00.0	00.0	01.0	110	61%	124/84	136	00	

FINDINGS :

- Exercise Time : 05:49
- Max HR Attained : 154 bpm 86% of Target 179
- Max BP Attained : 124/84 (mm/Hg)
- Max WorkLoad Attained : 7 Fair response to induced stress
- Test End Reasons : Test Complete, Heart Rate Achieved

REPORT :

STRESS TEST IS NEGATIVE FOR REVERSIBLE MYOCARDIAL ISCHEMIA WITH FAIR FUNCTION CAPACITY



Doctor : DR DEEPAN DAS MBBS DIP CARDIO

16 / MRAJIT / 41 Yrs / M / 167 Cms / 69 Kg / HR : 75

Date: 23 / 12 / 2023

METS: 1.0 / 75 bpm 42% of THR

Bp: 120/80 mmHg

Combined Medians/ BLG On/Notch On/ HF 0.05 Hz/ LF 35 Hz

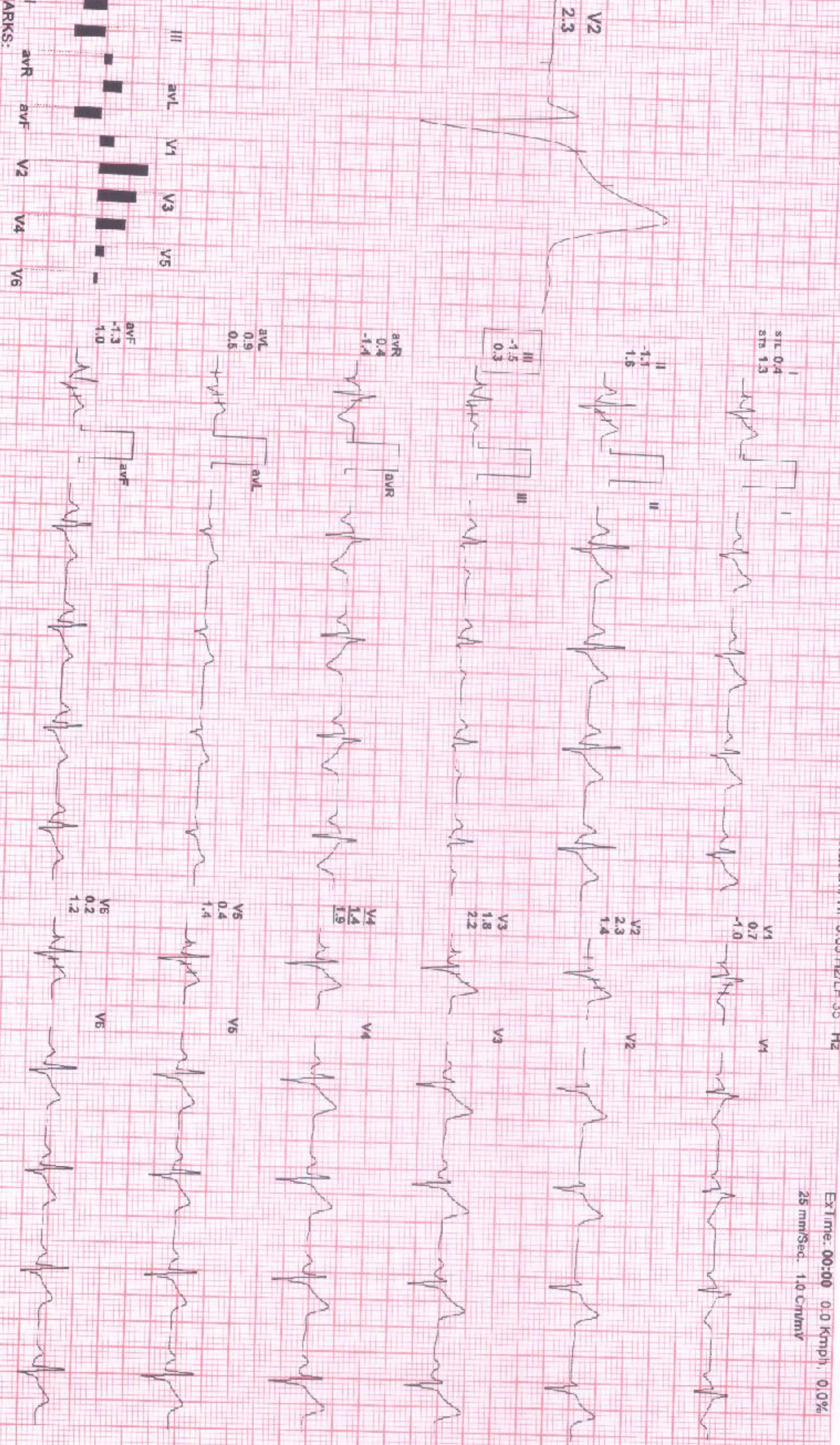
EXTime: 00:00 0.0 Km/h, 0.0%

25 mm/Sec. 1.0 cm/mV

BRUCE:Supine(0:09)



4X 80 ms Post J



REMARKS:

16 / MR ALIT / 41 Yrs / M / 167 Cms / 69 Kg / HR : 75

Date: 23 / 12 / 2023

4X

80 ms Post J

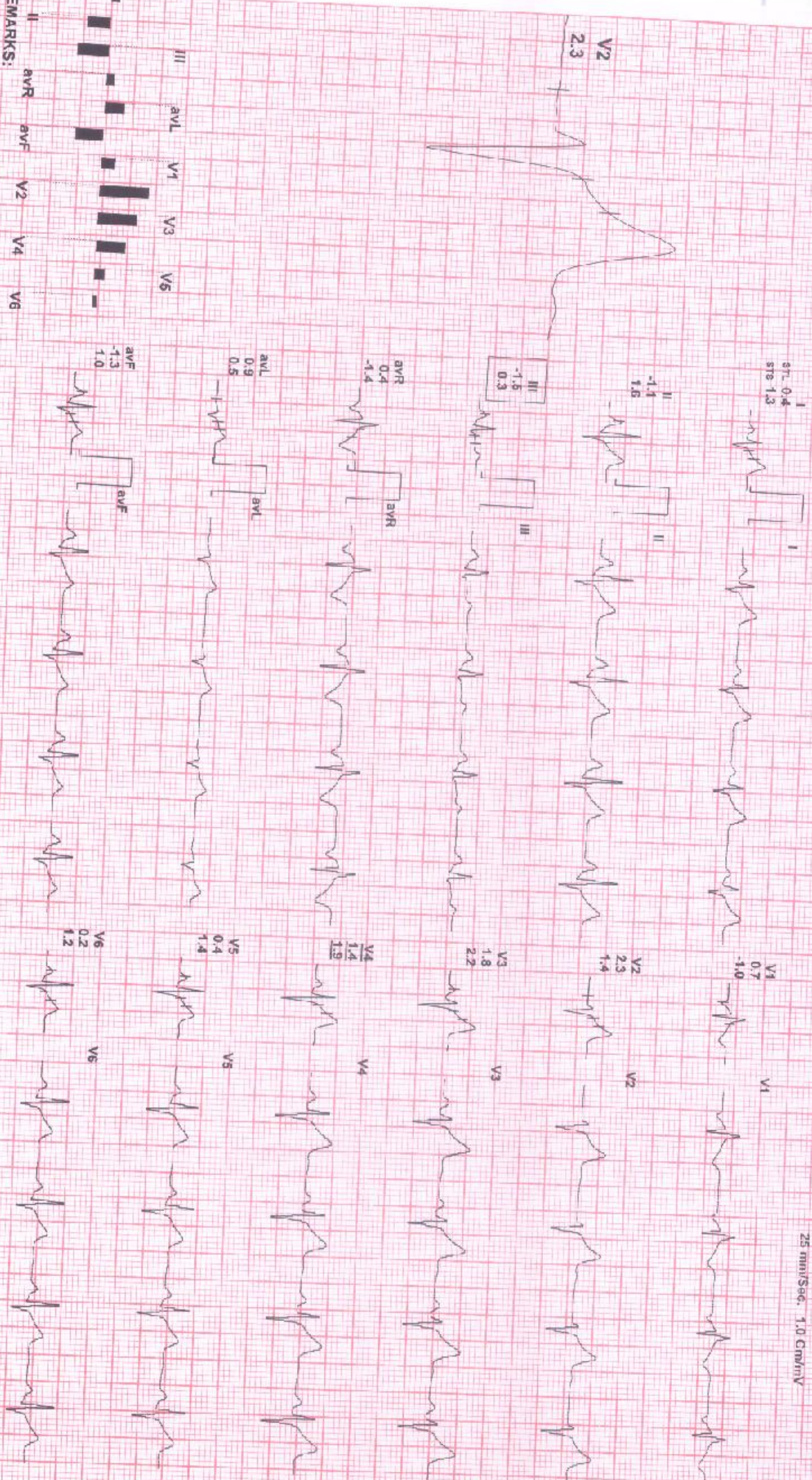
MEIS: 1.0/75 bpm 42% of THR

BP: 120/80 mmHg

Combined Medians/ BLC On/ Notch On/ HF: 0.05 Hz/LF: 35 Hz

ExTime: 00:00 0.0 Km/h, 0.0%
25 mm/Sec, 1.0 Cm/mV

ExStart



EMARKS: II aVR aVL V1 V2 V3 V4 V5 V6

16 / MR AJIT / 41 Yrs / M / 167 Cms / 69 Kg / HR : 154

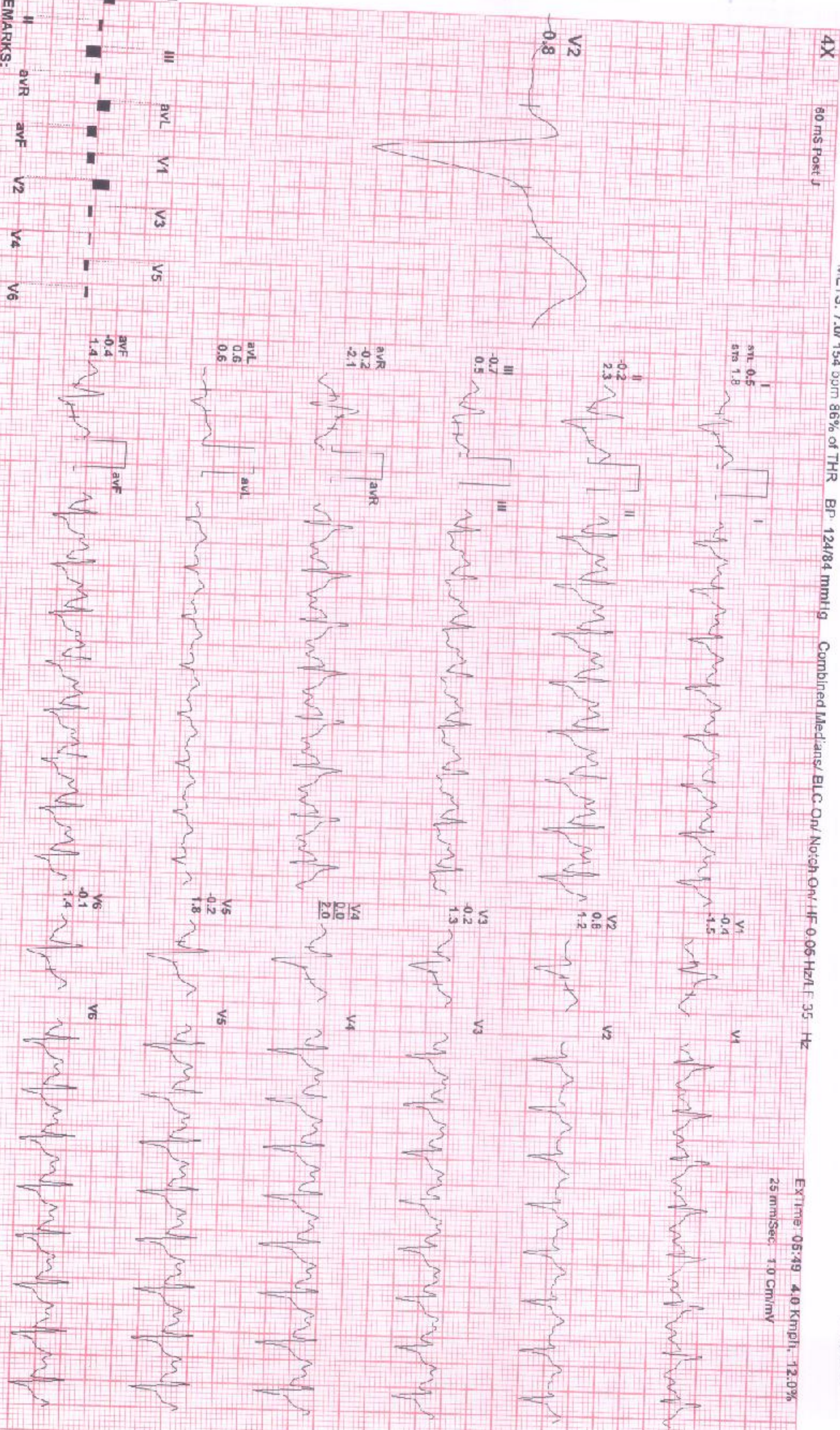
Date: 23 / 12 / 2023

4X 60 MS Post J METS: 7.0/ 154 burn 86% of THR BP: 124/84 mmHg Combined Medians/ ELC On/ No: ch On/ HF: 0.06 Hz/ LF: 35 Hz

PeakEX



EXTime: 05:49 4.0 Km/Pl: 12.0%
23 mm/Sec: 1.0 Cm/mV



REMARKS:

16 / MR AJIT / 41 Yrs / M / 167 Cms / 69 Kg / HR : 133

BRUCE: Stage 1(3:00)

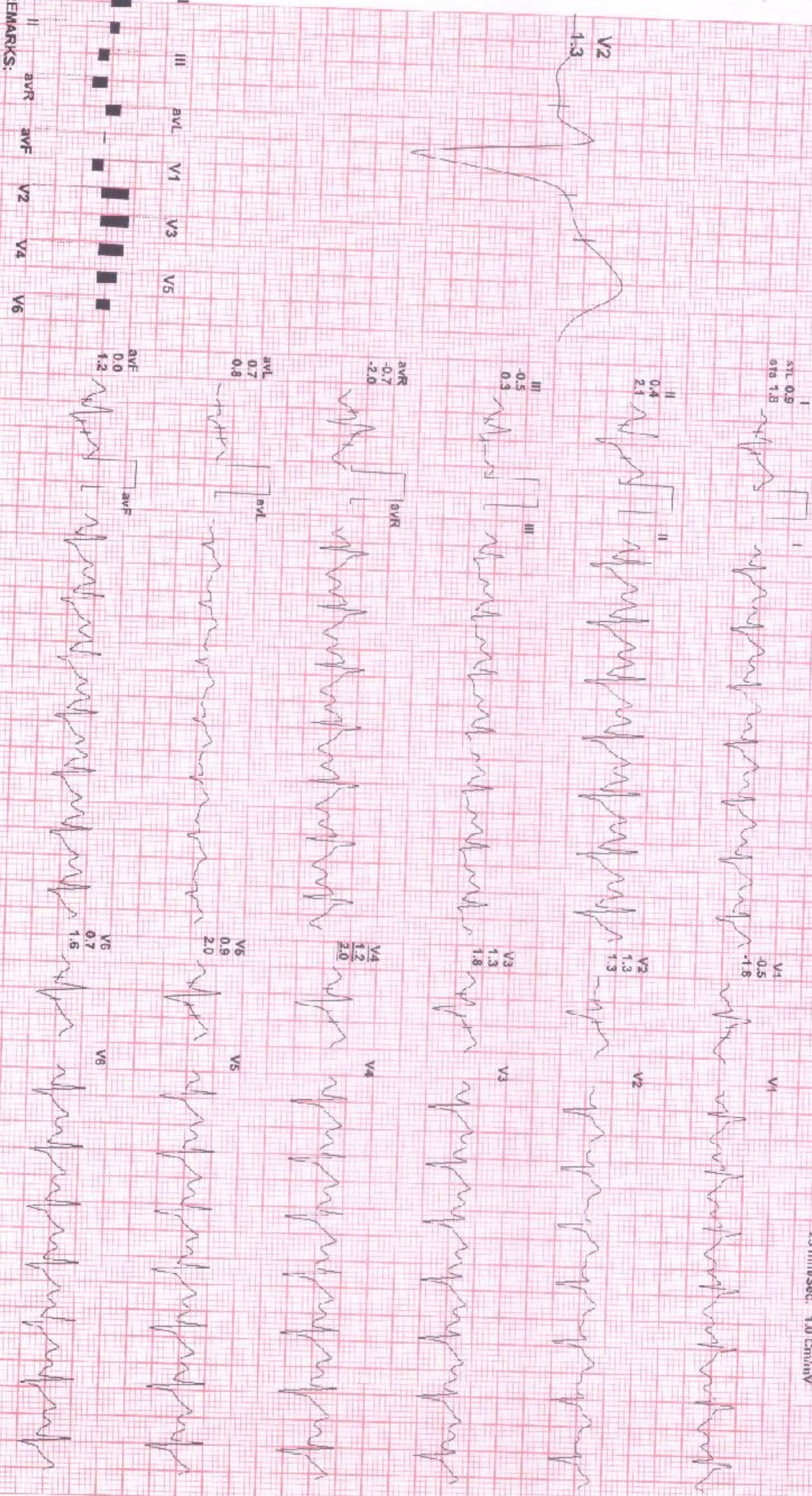
Date: 23 / 12 / 2023



4X 60 MS Post J

METS: 4.71 133 bpm 74% of THR BP: 122/82 mmHg Combined Medians/ ECG On/Notch On/ HF 0.06 Hz/ LF 35 Hz

ExTime: 03:00 2.7 Km/h 10.0%
25 mm/Sec. 1.0 Cm/mV



REMARKS:

16 / MR AJIT / 41 Yrs / M / 167 Cms / 69 Kg / HR : 143

Date: 23 / 12 / 2023

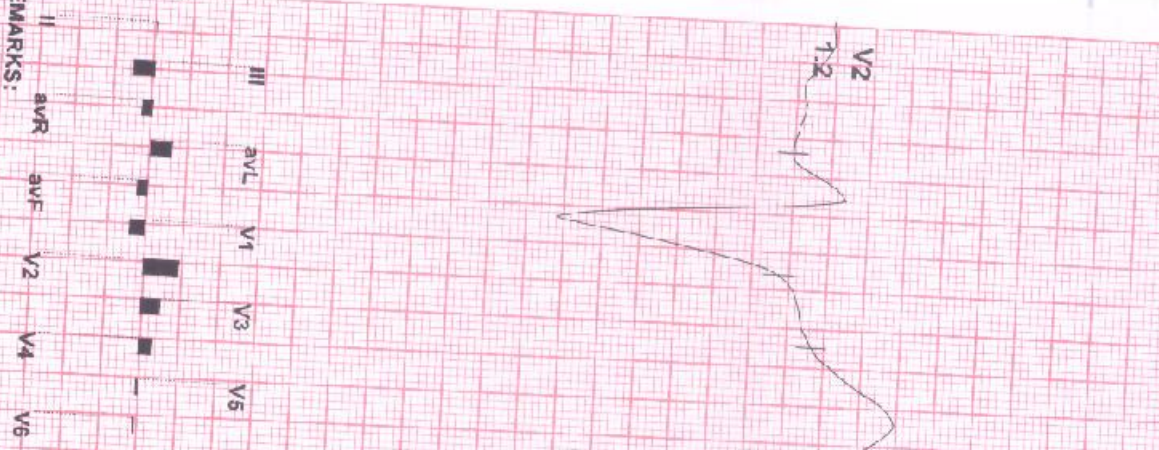
4X 60 mS Post J

METS: 1.8/ 143 bpm 80% of THR BP: 124/84 mmHg

Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/ LF 35 Hz

ExTime: 05:49 0.8 Km/ph 0.0%
25 min/Sec. 1.0 Cm/InV

Recovery(0:30)



EMARKS:

16 / MR AJIT / 41 Yrs / M / 167 Cms / 69 Kg / HR : 128

Recovery(1:00)



Date: 23 / 12 / 2023

4X 60 ms Post J

METS: 1.0/ 128 bpm 72% of THR

BP: 124/84 mmHg

Combined Medians/ Blc Orv/ Notch On/ HF 0.05 Hz/ E 35 Hz

ExTime: 05:49 0.8 Kmph, 0.0%

25 mm/Sec, 1.0 Cm/mV

STL 1.0
STB 1.8



V1 0.8
-1.6

V1

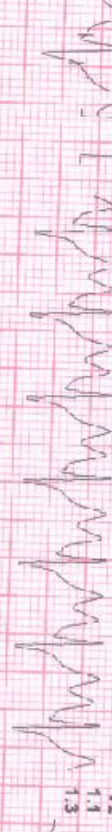
II 0.9
2.8



V2 1.1
1.3

V2

III -0.1
1.0



V3 1.3
2.4

V3

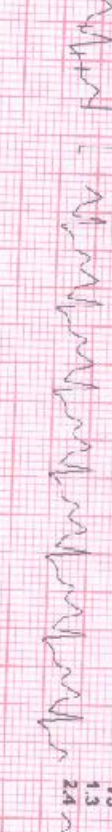
avR -1.0
-2.4



V4 1.5
2.8

V4

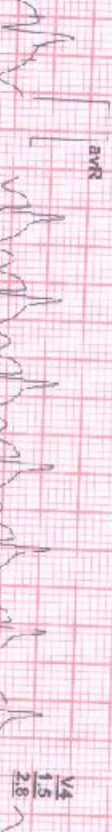
avL 0.8
0.4



V5 1.0
2.4

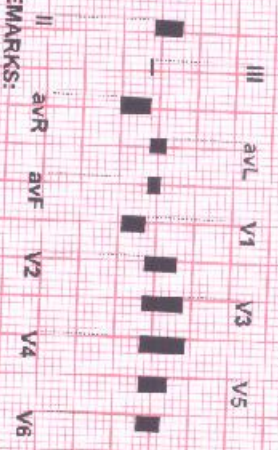
V5

avF 0.4
1.9



V6 0.8
2.0

V6



REMARKS:

16 / MR AJT / 41 Yrs / M / 167 Cms / 69 Kg / HR : 110

Recovery(1:43)



Date: 23 / 12 / 2023

METS: 1.0/ 110 bpm 61% of THR

BP: 124/84 mmHg

Combined Mediansy ECG On/ Notch On/ RR: 0.05 Hz/LF 35 Hz

ExTime: 05:49 0.0 Km/ph, 0.0%

25 mm/Sec. 1.0 Cm/mV

4X 80 ms Post J

STL 1.5
STR 2.2

V1 -1.2
V2 -1.7

II 1.7
III 0.1
aVR -1.7
aVL 0.8
aVF 0.9

V3 2.0
V4 1.8
V5 1.4
V6 1.1

V2 1.6

V3 2.4
V4 2.4
V5 2.1
V6 1.8

REMARKS:
II aVR aVF V2 V4 V6
III aVL V1 V3 V5

