



Patient Name Mr Ray Munda MRN: 164985 Age 3) Sex M Date/Time 23/3/24

Investigations: (Please Tick)

CBC
ESR
CRP
S-Vit D3
S-Vit B12
RBS
B Sugar - F/PP
DA1C

HLA B27
ANA
HIV
HBsAg
Anti HCV

Vitals

LFT/KFT PT INR

RA Factor Anti CCP

B.P.

SPO2

Temp

**Medical Illness** 

Hypertension

Diabetes

Thyroid

Cardiac Disease

**Drug Allergies** 

Next Appointment/Follow up

Dr. Bhawna Garg
MBBS, DIP.GO, PGDHA
Reg.No.-MP18035
Deputy Medical Superintendent
RJN Apollo Spectra Hospitals

Signature:

### RATAN JYOTI NETRALAYA PRIVATE LIMITED

CIN: U85110MP2013PTC030901

Registered Office: 18, Vikas Nagar, Near Sai Baba Mandir, Gwalior - 474002

### **RJN APOLLO SPECTRA HOSPITALS**

18, Vikas Nagar, Near Sai Baba Mandir, Gwalior - 474002 Ph. No.: 0751-2454600, 2450500 www.apollospectra.com Registered Vide No. NH/1542/MAR-2016





: Mr.RAJ MUNDA

Age/Gender

: 31 Y O M O D /M

UHID/MR NO Visit ID

: ILK.00039350

: ILK.115866

Ref Doctor

Took M.

: Dr.ARCOFEMI HEALTHCARE LIMITED

Collected

: 23/Mar/2024 10:59AM

Received Reported

: 23/Mar/2024 11:37AM

Status

: 23/Mar/2024 01:04PM

Client Name

: Final Report : INSTA

**DEPARTMENT OF HEMATOLOGY** 

rest Name				
	Result	Unit	Rio Def D	
			Bio. Ref. Range	Method

COMPLETE BL	OOD COUNT- CB	C / HAEMOGRAM	Alamana and a second	
Haemoglobin (Hb%)	12.7		, WHOLE BLOOD EDTA	
P.C.V (Hematocrit)		gm%	14.0-17.0	Cyanmeth
RBC Count	40.7	%	40-54	Cell Counter
Mean Corpuscular Volume(MCV)	5.8	Mill./cu mm	4.00-5.50	Cell Counter
Mean Colpuscular Volume(MCV)	69.8	fL	76-96	Calculated
Mean Corpuscular Hb. (MCH)	21.8	pg	27.0-32.0	
Mean Corp. Hb. Conc.(MCHC)	31.2	g/dl		Calculated
RDW	14.2		30.0-35.0	Calculated
Total WBC count (TLC)		%	11-16	Calculated
Differential Count by Flowcytometry/	7,400	/cu mm	4000-11000	Cell Counter

Neutrophils	56.5			
	56.5	%	50-70	Cell Counter
Lymphocytes	31.3	%	20-40	
Monocytes	6.8	%	01-10	C.U.C.
Eosinophils	4.4			Cell Counter
Basophils		%	01-06	Cell Counter
About	1.0	%	00-01	Cell Counter

### **Absolute Leucocyte Count**

Neutrophil (Abs.)	A 101			
	4,181	per cumm	2000 - 8000	Calculated
Lymphocyte (Abs.)	2316	per cumm	600-4000	Calculated
Monocyte (Abs.)	503	per cumm	0-600	
Eosinophil (Abs.)	326			Calculated
Basophils (Abs.)		per cumm	40-440	Calculated
	74	per cumm	0-110	Calculated
Platelet Count	2.20	Lac/cmm	1.50-4.00	Cell Counter

|--|

Enghange Cadina to the control			110	
Erythrocyte Sedimentation Rate (ESR)	8	mm lst hr.	0-20	Wester Green
			0 20	Avezrei Dieeli

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DR. ASHOK KUMAR M.D. (PATH)

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Test Name	Result	Unit	Bio. Ref. Range	Method

BLOOD GR	OUPING(A,B,O) A	ND RH FAC	TOR , WHOLE BLOOD EDTA
	^		

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

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DEPARTMENT	OF BIOCHEMISTRY-RO	CHITIME
	O. PIOCHILIANDI VI-KI	JUIINE

Test Name		The second secon		
rest Hume	Result	Unit	Rio Ref Dans	
		- Oille	Bio. Ref. Range	Method

GLUCOSE	- FASTING (FBS)	, NAF PLASMA
---------	-----------------	--------------

Fasting Glucose

85.0

mg/dL

65-110

God - Pod

Ref. for Biological Reference Intervals: American Diabetic Assiosation.

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

Post Prandial Glucose

111.0

mg/dL

90-140

2hrs. after...gm glucose/lunch

Ref.for Biological Reference Intervals: American Diabetic Assiosation.

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DEPARTMENT OF BIOCHEMISTRY-ROUTING	TINE
------------------------------------	------

Took No.				
Test Name	Result	Unit	Dia Def De	
		Oilit	Bio. Ref. Range	Method

GLYCOSYLATE	D HAEMOGLOBIN	(GHB/HBA:	IC) , WHOLE BLOOD EDTA	
Glycosylated Haemoglobin HbA1c	5.3	%		NEPHELOMETRY
Approximate mean plasma glucose	104.84			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</li>
- Action suggested: >8.0% HbA1c

#### -Pediatric patients:

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

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A.K. Pajona

DR. ASHOK KUMAR M.D. (PATH)

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DEPARTMENT	OF BIOCHEMISTRY-ROUTINE
------------	-------------------------

Test Name	Result	Unit	Bio. Ref. Range	Method
	COMPLETE KIDNEY PR	OFILE (RFT/KFT	, SERUM	
Urea	26.26	mg/dL	13.0-43.0	Urease
Creatinine	0.7	mg/dL	0.5-1.3	Enzymatic
Uric Acid	7.1	mg/dL	3.5-7.2	Urease
Sodium	135.0	Meq/L	135-155	Direct ISE
Potassium	4.7	Meq/L	3.5-5.5	Direct ISE
Chloride	102.0	mmol/L	96-106	Direct ISE
Calcium	9.0	mg/dL	8.6-10.0	ОСРС
Phosphorous	2.8	mg/dL	2.5-5.6	PMA Phenol
BUN	12.27	mg/dL	6.0-20.0	Reflect Spectrothoto

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Low Risk: 3.3-4.4

Average Risk: 4.5-7.1 Moderate Risk: 7.2-11.0 High Risk: >11.0

Status Client Name : Final Report : INSTA

DEPARTMENT OF BIOCHEMISTRY-ROUTINE

Test Name	Result	Unit	Bio. Ref. Range	Method
	LIPID PRO	FILE , SERUM		
Type OF Sample	CLEAR			
Total Cholesterol	199.0	mg/dl	up to 200	End Point
Total Triglycerides	96.0	mg/dL	Borderline High Risk: 150-199 High Risk: 200-499 Very High Risk: >500	
HDL Cholesterol	41.0	mg/dL	Optimal: >55 Border Line High Risk: 35-55 High Risk:- <35	Reflect Spectrothoto
Non - HDL Cholesterol	158	mg/dL	<130	
LDL Cholesterol	138.8	mg/dL		Reflect Spectrothoto
VLDL Cholesterol	19.2	mg/dL	5.0-40.0	Reflect

4.85

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Chol / HDL Ratio





DR. ASHOK KUMAR M.D. (PATH)

Spectrothoto

CALCULATED

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: INSTA

DEPARTMENT	OF BIOCHEMISTRY-ROUTI	NE
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	The state of the s			
Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER	FUNCTION TEST	(LFT) WITH GG	T , SERUM	
Total Bilirubin	0.9	mg/dL	0.2-1.2	Jendrassik-Grof
Direct Bilirubin	0.2	mg/dL	0.0-0.3	Jendrassik-Grof
Indirect Bilirubin	0.7	mg/dL	0.0-0.9	Calculated
SGOT / AST	25.0	U/L	1-30	UV Kinetic (IFCC)
SGPT / ALT	26.0	U/L	1-45	UV Kinetic (IFCC)
Alkaline Phosphatase	59.0	U/L	43-115	PNPP
Gamma Glutaryl Transferase (GGT)	13.0	U/L	0.0-55.0	Reflect Spectrophoto
Total Protein	7.0	g/dl	6.4-8.3	Biuret
Albumin	4.7	g/dL	3.5-5.2	BCG
Globulin	2.3	g.dl	2.0-3.5	Calculated
A/G Ratio	2.04	%	1.0-2.3	Calculated

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Reported

: 23/Mar/2024 02:53PM

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DEPARTMENT	OF	BIOCHEMISTRY-SPECIAL
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est Name	D- 1			
	Result	Unit	Bio. Ref. Range	Method

	THYROID PR	OFILE-I, SERUM		
Trilodothyronine Total (TT3)	1.35	ng/dL	0.6-1.8	Chemilluminisence
Thyroxine (TT4)	6.51	μg/dL	4.5-10.9	Chemilluminisence
Thyroid Stimulating Hormone (TSH)	2.310	μIU/ml	0.35-5.50	Chemilluminisence

COMMENT: Above mentioned reference ranges are standard reference ranges.

AGE RELATED GUIDLINES FOR REFERENCE RANGES FOR TSH

TSH	NEW BORN	INFANT	CHILD	ADULT
u lu/ml)	0.52-38.9	1.7-9.1	0.7-6.4	0.3-5.6
	<b>ELATED</b> GUIDLINES FOR F	REFERENCE RANGE	S FOR TSH	
TSH	1st Trimester	2nd & 3rd Tri	mester	
(u lu/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.

Ultrasensetive kits used.

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

- :-Primary hypethyroidism 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.
- :-.singhtly 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 propanolol .
- :-Although elevated TSH levels are nearly always indicative of primary hypothyroidism. Rarely they can result from TSH secreting pituitary tumours ( seconday huperthyroidism).

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: 23/Mar/2024 11:37AM : 23/Mar/2024 12:34PM

Status

: Final Report

: INSTA

Client Name DEPARTMENT OF CLINICAL PATHOLOGY

**Test Name** 

Result

Unit

Bio. Ref. Range

Method

**CUE - COMPLETE URINE ANALYSIS , URINE** 

Physical	Examination
----------	-------------

Colour	PALE YELLOW		Visual
Appearance	Clear		Visual
pH	6.0	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	2-3	/Hpf	0-2	
Epithelial Cells	3-4	Hpf	<10	
RBC	ABSENT	/Hpf	ABSENT	
Casts	ABSENT	RE III	ABSENT	
Crystals	ABSENT		ABSENT	
Bacteria	NORMALLY PRESENT		NORMALLY PRESENT	
Budding Yeast Cells	Absent		Absent	

\*\*\* End Of Report \*\*\*

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# ECHO CARDIOGRAPHY REPORT

Patient Name

MR RAJ MUNDA

Date : 23/03/2024

AGE & Sex :31yrs/M

Echocardiography was performed on vivid T8

Quality Of Imaging
Mitral Valve
Tricuspid Valve
Aortic Valve
Pulmonary Valve: Adequate
: Normal
: Normal
: Normal

Left Atrium : 3.4cms

Left Ventricle :

IVSD : 1.2 cms EDD : 4.6 cms

: 4.6 cms : 2.8 cms LVPWD : 1.2cms

EF 60% FS 32%

RWMA : NO REGIONAL WALL MOTION ABNORMALITY

**ESD** 

: Normal Right Atrium : Normal Right Ventricle : 3.1cms Aorta : Intact IAS IVS : Normal Pulmonary Artery · Normal Pericardium : Normal SVC, IVC : Normal Pulmonary Artery Intracardiac Masses: Nil

Doppler

E > A

Conclusion :

TACHYCARDIA PRESENT DURING STUDY NORMAL CARDIAC CHAMBERS DIMENSION . NO REGIONAL WALL MOTION ABNORMALITY NORMAL LV SYSTOLIC FUNCTION , LVEF-60% NORMAL VALVES INTACT SEPTUM NO CLOT /VEGETATION /PERICARDIAL EFFUSION

Dr. Abhishek Sharma

"BS,MD (Medicine) DNB (Cardiology)

"Itant Interventional Cardiology

Reg.No. MP 12056

Consultant

Dr. Abhishek sharma (DNB) (Interventional Cardiologist)

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Patient name	MR. RAJ MUNDA	Age/sex	31Y/M
Ref. By	HCP		211/M
A CONTRACTOR OF THE PARTY OF TH	ПСР	Date	23.03.24

# **USG WHOLE ABDOMEN**

The Liver is normal in size and outline. It shows a diffuse hyper echopattern. No obvious focal pathology is seen. The intra and extra hepatic biliary passages are not dilated.

The Gall Bladder is normal in size, has normal wall thickness with no evidence of calculi.

The **Pancreas** is normal in size and echogenicity. Its outlines are distinct. No obvious focal lesion, calcification or ductal dilatation is seen.

Spleen is normal in size and echogenicity.

Both Kidneys are normal in position, outline and echogenicity. No evidence of calculi or

There is no evidence of ascites.

The **Urinary Bladder** is normal in size and outline. There is no evidence of any obvious intraluminal or perivesical pathology

The **Prostate** is normal in size.. It shows a uniform parenchymal echogenicity and smooth outlines with no evidence of focal or diffuse lesion seen.

Impression:-

Grade I fatty liver

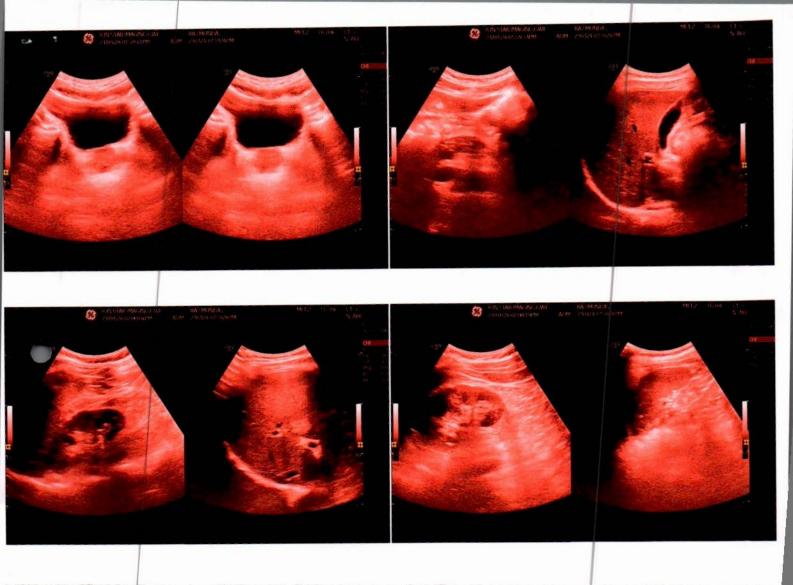
Please correlate clinically.

DR. ANOOP ARXA (SINGHAL) DMRD, DNB (RADIODIAGNOSIS)

गर्भाशय कन्या भ्रूण की जाँच एवं हत्या दण्डनीय अपराध है।

बेटी बचाओ - बेटी पढ़ाओ







# RATAN JYOTI NETRALAYA

### OPHTHALMIC INSTITUTE & RESEARCH CENTRE





18, Vikas Nagar, Near Sai Baba Mandir, Gwalior-2 (M.P.) INDIA Tel.: 2423350/51, Web: www.ratanjyotigroup.org, Email: rjneye@gmail.com Opp. Medical College, Gate No. 3 Jhansi-284128 (U.P.) Ph. 0510-2322311 (M) 9109973225

EYE

SR.NO.

: 1919684

NAME

: MR RAJ MUNDA

DATE

: 23-March-2024

AGE/SEX

: 31 YRS / MALE

MRD NO.

: R-119466 : GWALIOR

PAST SURGERIES :

NIL IN

DISTANCE		NEAR	
OD	os	OD	os
5/60	5/60		
6/6	6/6		
	OD 5/60	OD OS 5/60 5/60	OD OS OD 5/60 5/60

		IOP READIN	NG	
TIME	OD	OD METHOD OS		OS METHOD
2:12PM	16		17	

Instructions

D-

Rx.

AQUARAY / CARBOXYMETHYL CELLULOSE EYE

DROPS IP

ONE DROP 4 TIMES A DAY FOR 60 DAYS

BOTH EYE 23-Mar-2024 21-May-2024

From

TREATMENT PLAN

: GLASS PRESCRIPTION

REFFERED TO

DR. REMARK

: PERIODICAL FOLLOW UPS

**NEXT REVIEW** 

: AS PER DR. ADVISED

DR. JYOTSNA SHARMA

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) Counselled

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 • कैशलैस इंश्योरेन्स एवं टी.पी.ए. सुविधा उपलब्ध

For Appointment Please Contact: 9111004046

स्वामी विद्यानंद भारती आई बैंक नेव्रदान

करें और करायें इसे अपने परिवार की परम्परा बनायें नेत्रदान के लिए सम्पर्क करें : 9111004044





	5 I Y / IVI
Age/sex	31Y/M 23.03.24
	Date

# XRAY CHEST (PA VIEW)

- The lung fields appear clear.
- Bilateral C.P. angles appear clear.
- Cardiac size within normal limits.
- Soft tissue shadow and bony thoracic cage appears normal.

Please correlate clinically.

DR. ANOOP ARYA (SINGHAL) DMRD, DNB (RADIODIAGNOSIS)

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