

MEDICAL EXAMINATION REPORT

NAME: MR. DEEPAK KUMAR MISHRA

AGE/SEX: 53 Y/MALE

DATE OF BIRTH: 20/06/1970

ADDRESS: 104 – LAKHANPUR, HOUSING SOCIETY – KANPUR – 208024

OBSERVATIONS

- | | |
|--------------------------|---------------------|
| 1. DIABETES MELLITUS: NO | 2. HYPERTENSION: NO |
| 3. C.O.P.D.: NO | 4. TUBERCULOSIS: NO |
| 5. EYE DISORDER: NO | 6. PARALYSIS: NO |
| 7. EPILEPSY: NO | 8. DENTAL: NORMAL |
| 9. E.N.T.: NORMAL | |

BLOOD PRESSURE: 130/70 mmhg

PULSE: 86 bpm

WEIGHT: 67 kg

RESPIRATORY RATE: 19/m

HEIGHT: 161 cm

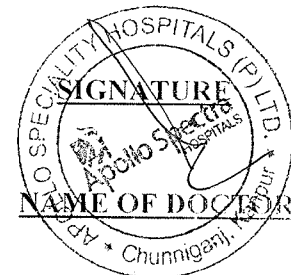
BMI: 25.8 kg/m²

ADVICE:

1. Low fat diet.
2. Consult with an urologist due to right renal cortical cyst.

PLACE: Kanpur

DATE: 29/03/2024



APOLLO SPECIALTY HOSPITALS PRIVATE LIMITED

(Formerly known as Nova Specialty Hospitals Private Limited)

CIN- U85100TG2009PTC099414

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

BENGALURU | CHENNAI | DELHI | JAIPUR | KANPUR | MUMBAI | PUNE

Dr. Ajay Pratap Singh

MBBS, DLO

ENT (Ear, Nose & Throat)

Days: Monday to Friday

Timings: 02:00 PM to 3:00 PM

Emergency Mobile: +91 9935577550

Mr. Deepak for Mr. M
54 y/m.

Further ENT. Checkup

R

No ENT Complaint

only for Itching.

R

P.D. OTIFLOX 0.25/0.25

MIR DEEPAK KUMAR Mishra / 53 / MAR 1

Vu

- RG! 1.25 sph. 6/c*
- LG! 4.00 sph. 6/36.*

(Distant)

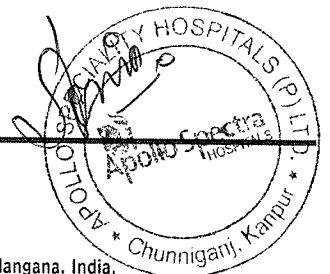
Nv

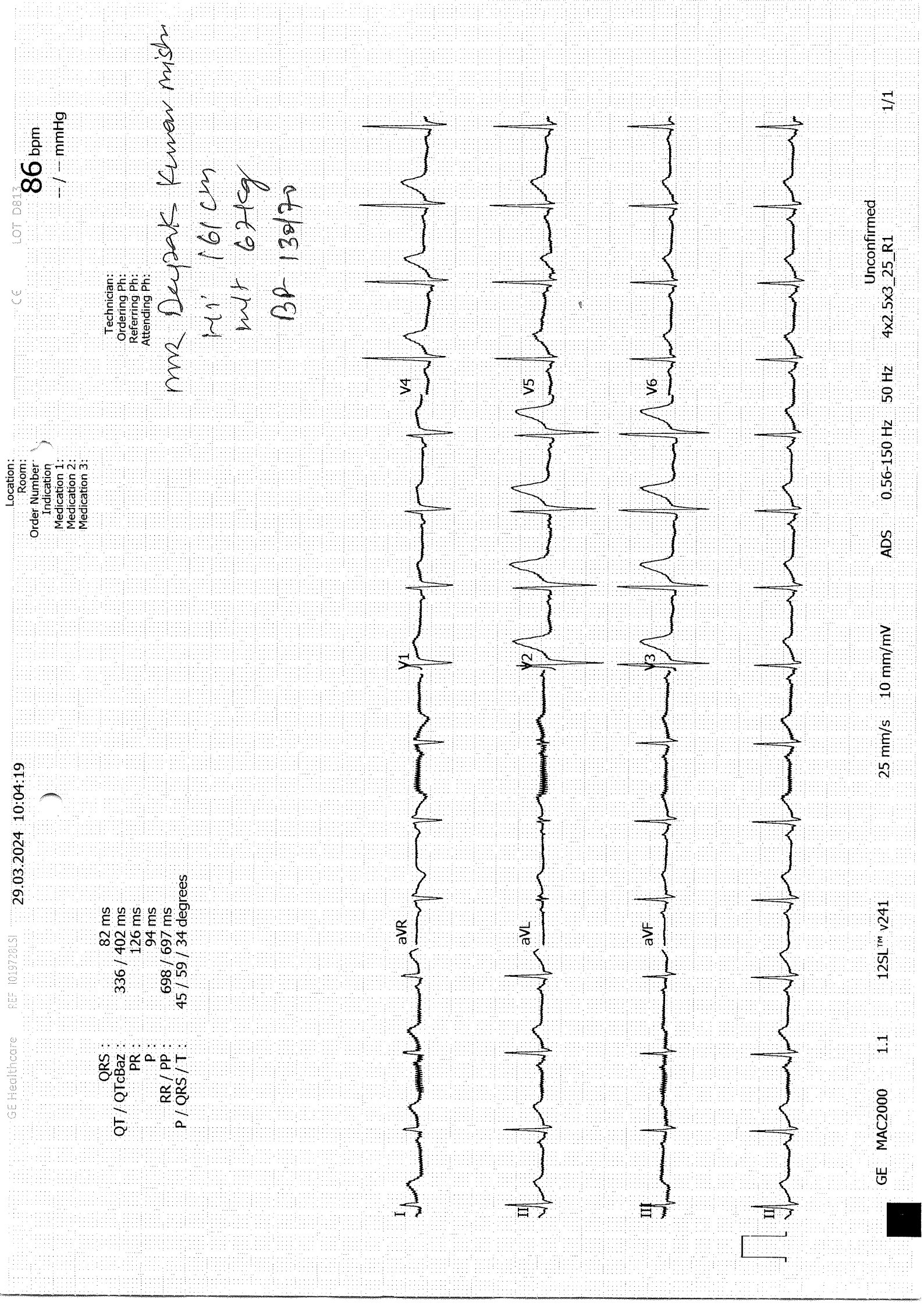
- Add! 2.50 sph*
- Add! 2.50 sph*

Colour Vision

WNL

No active intervention





GE Healthcare REF 1019720LSI 29.03.2024 10:04:19

Location: CE
 Room: CE
 Order Number: 86 bpm
 Indication: -- / -- mmHg
 Medication 1:
 Medication 2:
 Medication 3:

Technician:
 Ordering Ph:
 Referring Ph:
 Attending Ph:

QRS : 82 ms
 QT / QTcBaz : 336 / 402 ms
 PR : 126 ms
 P : 94 ms
 RR / PP : 698 / 697 ms
 P / QRS / T : 45 / 59 / 34 degrees

MR Deypak Kumar Mishr
 Ht: 161 cm
 Wt: 67 kg
 BP: 130/70

Patient Name	: Mr. DEEPAK KUMAR MISRA	Age	: 53 Y M
UHID	: SKAN.0000124728	OP Visit No	: SKANOPV164500
Reported on	: 29-03-2024 12:00	Printed on	: 29-03-2024 12:00
Adm/Consult Doctor	:	Ref Doctor	: SELF

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .


Thoracic wall and soft tissues appear normal.


CONCLUSION :

No obvious abnormality seen

Printed on:29-03-2024 12:00

---End of the Report---


Dr. DUSHYANT KUMAR VARSHNEY
MD, DNB
Radiology



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Reported on : 29-03-2024 12:34
Adm/Consult Doctor :

Age : 53 Y M
OP Visit No : SKANOPV164500
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DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver- Mild hepatomegaly with diffuse grade I Fatty liver . simple hepatic cyst measuring 9 x 10 mm in left lobe of liver . Intra hepatic biliary radicles not dilated. Portal vein is normal in course and caliber.

*Bladder- Normal in distension and wall thickness.No sizeable calculus or mass lesion.
CBD normal in course, caliber & clear in visualized region.*

Pancreas - Normal in size, shape and echogenicity. No sizeable mass lesion.Main Pancreatic duct not dilated.

Spleen -normal in size, shape and echogenicity. No focal lesion. Splenic vein at hilum is normal caliber.

Retroperitoneum –obscured by bowel gas..

Bilateral Kidney -Normal in size, shape, position and echogenicity. Corticomedullary differentiation preserved.

Pelvicalyceal system not dilated.No calculus. Bilateral ureter not dilated. Right kidney mid pole simple cortical cyst measuring 1.8 x 1.9 cm with cortical calcification

Urinary Bladder –is empty. Pelvic organs could not be commented.

No evidence of ascites.

IMPRESSION:

Mild hepatomegaly with diffuse grade I Fatty liver

Left lobe simple hepatic cyst

Right kidney complex cortical cyst.

Suggest – clinical correlation.

(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:29-03-2024 12:34

---End of the Report---

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Age : 53 Y M

UHID : SKAN.0000124728

OP Visit No : SKANOPV164500

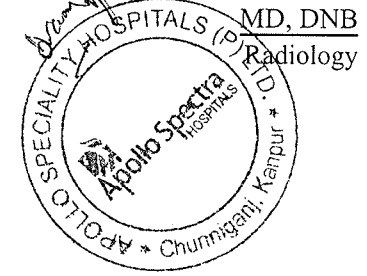
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Adm/Consult Doctor :

Ref Doctor : SELF

Dr. DUSHYANT KUMAR VARSHNEY



Patient Name : Mr. DEEPAK KUMAR MISRA
 UHID : SKAN.0000124728
 Conducted By: :
 Referred By : SELF

Age : 53 Y/M
 OP Visit No : SKANOPV164500
 Conducted Date : 29-03-2024 12:16

HEART STATION ECHO REPORT

PROCEDURES:	MEASUREMENTS:				B.S.A. M ² Normal
	M-MODE/2D/DOPPLER/COLOR/CONTRAST				
Aortic root diameter	2.2				2.0-3.7 cm < 2.2 cm
Aortic valve opening	2.3				1.5-2.6 cm
Right ventricular dimension	4.2				0.7-2.6 cm < 1.4 cm / M ²
Right atrial dimension	4.1				0.5-2.9 cm
Left atrial dimension	4.2				1.9-4.0 cm < 2.2 cm / M ²
Left ventricular ED dimension	4.3				3.7-5.6 cm < 3.2 cm / M ²
Left ventricular ES dimension	2.8				2.2-4.0 cm
Interventricular septal thickness	ED	0.9	ES	1.6	2.2-4.0 cm
Left vent PW thickness	ED	1.2	ES	1.2	0.5-1.0 cm
INDICES OF LEFT VENTRICLE FUNCTION					
LV Ejection Fraction					60-62%
DOPPLER					
MV	80	Cm/sec	MR	Nil	
AoV	80	Cm/sec	AI	Nil	
TV	95	Cm/sec	TR	Nil	
PV	80	Cm/sec	PI	Nil	

FINAL DIAGNOSIS:

Normal LV contractility.
 No regional wall motion abnormality.
 LVEF =60%.
 Normal cardiac chambers.
 Normal valves and flows.
 No evidence of pericardial effusion.
 No evidence of RHD/ASD/VSD/PDA.
 No LA/LV, Clot/Vegetation.
 (Kindly correlate clinically and further investigation)

Please correlate clinically Kindly Note

Please Intimate us for any typing mistakes and send the report for correction within 7 days.

The science of Radiological diagnosis is based on the interpretation of various shadows produced by both the normal and abnormal tissues and are not always conclusive. Further biochemical and radiological investigation & clinical correlation is required to enable the clinician to reach the final diagnosis.

The report and films are not valid for medico – legal purpose.



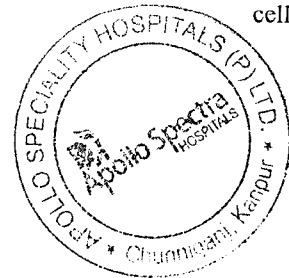
**DR MOHD SHAHID
 MD (Med), DMRD**

DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mr. DEEPAK KUMAR MISRA	Age / Gender : 53Y/Male
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Sample Collected on : 29-03-2024 11:20	Reported on : 29-03-2024 14:10
LRN# : LAB13422452	Specimen : Blood(EDTA)
Ref Doctor : SELF	
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324	
Emp/Auth/TPA ID : 21J98339100000498E	Adm/Consult Doctor :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED	

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
HEMOGRAM + PERIPHERAL SMEAR			
Hemoglobin Method: Cyanide Photometric	9.2*	13 - 17	g/dL
RBC Count Method: Electrical Impedance	5.10	4.5 - 5.5	millions/cu mm
Haematocrit Method: Calculated	33.1*	40 - 50	%
MCV Method: Calculated	64.9*	83 - 101	fl
MCH Method: Calculated	18.0*	27 - 32	pg
MCHC Method: Calculated	27.8*	31.5 - 34.5	g/dl
RDW	18.5*	11.6 - 14	%
Platelet Count Method: Electrical Impedance	2.40	1.5 - 4.1	lakhs/cumm
TLC Count Method: Electrical Impedance	5900	4000 - 11000	cells/cumm



Results are to be correlated clinically

NOTE : All pathological test have technical limitations which may at times cause interpretative errors. Collaborative clinical pathological co-relation is necessary. In case of any discrepancy, results may be reviewed and repeat investigation is advised. Typographical errors should be reported immediately for correction. The report is not valid for medico legal purpose.

Excel Hospitals (P) Ltd.

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MD Ph. 0512-2555991, 2555992
Email : excelhospitals@gmail.com
Pathology
Emergency No. 9935577550

DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mr. DEEPAK KUMAR MISRA	Age / Gender : 53Y/Male
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Differential Leucocyte Count(Fluorescence Flow Cytometry / VCS Technology)

Neutrophils	56	40 - 80	%
Lymphocytes	39	20 - 40	%
Monocytes	02	2 - 10	%
Eosinophils	03	1-6	%
Basophils	00	0-2	%
Erythrocyte Sedimentation Rate (ESR)	26*	0 - 14	mm/hr

Method: Westergrens Method.

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
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BLOOD GROUP ABO AND RH FACTOR

ABO	A
Method: Microplate Hemagglutination	
Rh (D) Type:	POSITIVE
Method: Microplate Hemagglutination	

End of the report



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Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

Age / Gender : 53Y/Male
OP Visit No : SKANOPV164500
Reported on : 29-03-2024 14:46
Specimen : Blood(EDTA)
Adm/Consult Doctor :

DEPARTMENT OF LABORATORY MEDICINE

PERIPHERAL SMEAR

Methodology : Microscopic
RBC : are showing anisocytosis and comprise of predominant population of Normocytic Hypochromic /Microcytic Hypochromic cells.
WBC : within normal limits.DLC is as mentioned.
Platelets : Adequate in Number
Parasites : No Haemoparasites seen
IMPRESSION : PBS show normocytic hypochromic/Microcytic hypochromic anemia.
Advice : Serum iron study.
Note/Comment : Please Correlate clinically

End of the report



Results are to be correlated clinically

Lab Technician / Technologist

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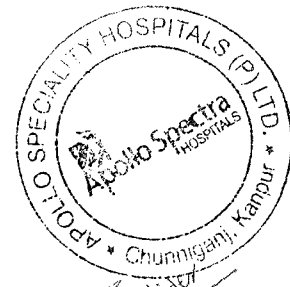
DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mr. DEEPAK KUMAR MISRA	Age / Gender : 53Y/Male
UHID/MR No. : SKAN.0000124728	OP Visit No : SKANOPV164500
Sample Collected on : 29-03-2024 11:20	Reported on : 29-03-2024 17:59
LRN# : LAB13422452	Specimen : Serum
Ref Doctor : SELF	
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324	
Emp/Auth/TPA ID : 21J98339100000498E	Adm/Consult Doctor :
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DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
LIPID PROFILE			
CHOLESTEROL Method: CHOD-End Point POD (Enzymatic)	134	<200 - Desirable 200-239 - Borderline High ≥240 - High	mg/dL
HDL Method: Direct Measure PEG	46	<40 - Low ≥60 - High	mg/dL
LDL Method: Calculation Friedewald's Formula	65.4	< 100 - Optimal 100-129 - Near Optimal & Above Optimal	
TRIGLYCERIDES Method: Enzymatic GPO/POD/End Point	113	Normal : <150 Border High : 150 - 199 High : 200 - 499 Very High : ≥ 500 Note: Overnight fasting of 10-12hrs is recommended to avoid fluctuations in Lipid Profile.	mg/dl
VLDL Method: Calculated	22.6	10-40	mg/dL
RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)			
CREATININE - SERUM / PLASMA	1.0	0.7 - 1.3	mg/dl

Results are to be correlated clinically



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Method: Jaffe's Kinetic

URIC ACID - SERUM 4.3 3.5 - 7.2 mg/dl

Method: Modified Uricase

UREA - SERUM/PLASMA 25 Male: 19 - 43 mg/dl

Method: Urease with indicator dye

CALCIUM 7.12* 8.5 - 10.1 mg/dl

Method: O-Cresolphthalein complexone

BUN 11.66 9-20 mg/dl

Method: Urease with indicator dye

PHOSPHORUS 2.28* 2.5 - 4.5 mg/dl

Method: Phosphomolybdate -UV

ELECTROLYTES (Na) 130* 135 - 145 meq/L

Method: ISE-Direct

ELECTROLYTES (K) 3.9 3.5 - 5.1 meq/L

Method: ISE-Direct

GLUCOSE, FASTING

FASTING SUGAR 134* 70 - 110 mg/dl

Method: GOD-PAP

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

GLUCOSE - SERUM / PLASMA (POST PRANDIAL) 229* 70 - 140 mg/dl

Method: Glucose Oxidase-Peroxidase

LIVER FUNCTION TEST (LFT)



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BILIRUBIN TOTAL	0.78	0.2 - 1.3	mg/dL
Method: Azobilirubin/dyphylline			
BILIRUBIN (DIRECT)	0.24	Adults: 0.0 - 0.3 Neonates: 0.0 - 0.6	mg/dL
Method: Dual Wavelength Spectrophotometric			
BILIRUBIN UNCONJUGATED(INDIRECT)	0.54	0.0 - 1.1	mg/dL
Method: Dual Wavelength Spectrophotometric			
ALBUMIN	4.5	3.0 - 5.0	g/dL
Method: Bromocresol Green dye binding			
PROTEIN TOTAL	7.3	6.0 - 8.2	g/dL
Method: Biuret Reaction			
AST (SGOT)	24	14 - 36	U/L
Method: Kinetic (Leuco dye) with P 5 P			
GLOBULINN	2.8	2.8 - 4.5	g/dL
Method: Calculation			
ALT(SGPT)	33	9 - 52	U/L
GAMMA GLUTAMYL TRANFERASE (GGT)			
GAMMA GT	48	< 55	U/L
Method: Kinetic Photometric			

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DEPARTMENT OF LABORATORY SERVICES

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Sample Collected on : 29-03-2024 11:20 **Reported on** : 29-03-2024 14:25
LRN# : LAB13422452 **Specimen** : Blood(bio/EDTA)
Ref Doctor : SELF
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY
ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO -
PAN INDIA - FY2324
Emp/Auth/TPA ID : 21J98339100000498E **Adm/Consult Doctor** :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
HbA1c, GLYCATED HEMOGLOBIN			
HbA1c, GLYCATED HEMOGLOBIN Method:HPLC	8.0*	<=5.6:Non-Diabetic 5.7-6.4: Prediabetes (Increased Risk for Diabetes) >=6.5: Diabetes Mellitus Note: In absence of unequivocal Hyperglycemia and the presence of discordant fasting, post prandial or Random Glucose values, result should be confirmed by repeat test(ADA Guidelines 2015)	%
eAG (estimated Average Glucose) Method: Calculated	182.9		mg/dL

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Ref Doctor : SELF	
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Emp/Auth/TPA ID : 21J98339100000498E	Adm/Consult Doctor :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED	

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
COMPLETE URINE EXAMINATION			
Color:	Pale Yellow	Pale Yellow	
Specific Gravity Method: Indicator Method	1.030	1.005 - 1.035	
Transparency:	Clear	Clear	
Protein : Method: Indicator Method	Traces	Nil	
Glucose: Method: Glucose Oxidase	Absent	Nil	
pH Method: Indicator Method	6.0 (Acidic)	4.6 - 8	
DEPOSITS:	Absent		
WBC/Pus Cells	Nil	0-5	/hpf
Tc/Sqc(Transitional/Squamous epithelial cells)	Occasional	2-3	/hpf



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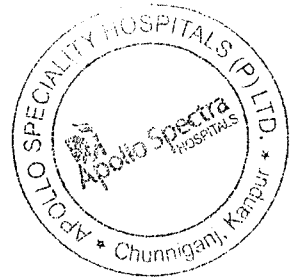
Pathology Agency No. 9935577550

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RBC	Nil	0 - 2	/hpf
Crystals:	Nil		
Casts:	Nil		/hpf

End of the report



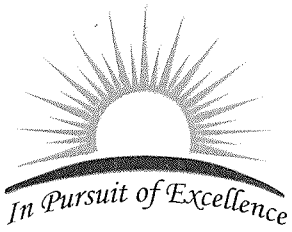
Results are to be correlated clinically

NOTE : All pathological test have technical limitations with technical limitations. Interpretative errors. Collaborative clinical pathological co-relation is necessary. In case of any discrepancy, results may be reviewed and repeat investigation is advised. Typographical errors should be reported immediately for correction. The report is not valid for medico legal purpose.

Excel Hospitals (P) Ltd.

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Pathology Emergency No. 9935577550



SONI DIAGNOSTICS

118/572, KAUSHALPURI, GUMTI NO. 5, KANPUR - 208012

Ph. : 0512-2219667, 8858154254

e-mail : sonidiagnostics01@gmail.com

Patient Name : MR. DEEPAK KUMAR MISHRA

Age / Gender : 53 years / Male

Patient ID : 47650

Source : Excel Hospital

Referral : SELF

Collection Time : 29/03/2024, 01:43 p.m.

Reporting Time : 29/03/2024, 04:00 p.m.

Sample ID :



240890014

Test Description	Value(s)	Reference Range	Unit(s)
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T3,T4,TSH

SAMPLE TYPE : SERUM

T3 Method : CLIA	1.07	0.79 - 1.58	ng/mL
T4 Method : CLIA	8.59	5.2-12.7	µg/dL
TSH Method : CLIA	2.0	0.3-4.5	µIU/mL

Interpretation

TSH	T4	T3	INTERPRETATION
HIGH	NORMAL	NORMAL	MILD (SUBCLINICAL)HYPOTHYROIDISM
HIGH	LOW OR NORMAL	LOW OR NORMAL	HYPOTHYROIDISM
LOW	NORMAL	NORMAL	MILD (SUBCLINICAL)HYPERTHYROIDISM
LOW	HIGH OR NORMAL	HIGH OR NORMAL	HYPERTHYROIDISM
LOW	LOW OR NORMAL	LOW OR NORMAL	NON-THYROIDAL ILLNESS: RARE PITUITARY (SECONDARY)HYPOTHYROIDISM

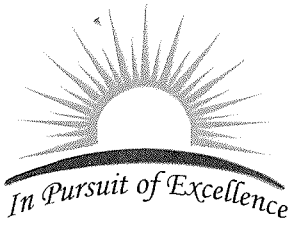
****END OF REPORT****

All the reports have to be correlated clinically. If the result of the tests are unexpected ,the patient is advised to contact the lab immediately for a recheck.

Dr. S.S.Soni
M.D. (PATHOLOGY)



All diagnostic tests have limitations & clinical interpretation should not be solely based on single investigation. Clinical correlation and further relevant investigations advised if warranted. Any discrepancies in test results should be notified within 24 hours. This report is not valid for medicolegal purpose.



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Sample ID :



240890014

Test Description	Value(s)	Reference Range	Unit(s)
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PSA

Sample type : Serum

PSA	0.749	0 - 4	ng/mL
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Method : CLIA

Interpretation :

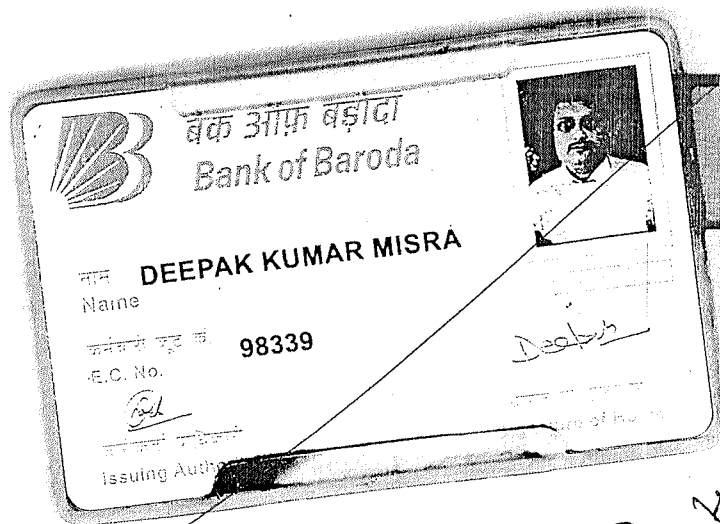
Elevated serum PSA concentrations are found in men with prostate cancer, benign prostatic hyperplasia or inflammatory condition of other adjacent genitourinary tissues. PSA has been demonstrated to be accurate marker for monitoring advancing clinical stage in untreated patients and for monitoring response to therapy by radical prostatectomy, radiation therapy and anti androgen therapy.

****END OF REPORT****

All the reports have to be correlated clinically. If the result of the tests are unexpected ,the patient is advised to contact the lab immediately for a recheck.

Dr. S.S.Soni
M.D. (PATHOLOGY)





Submitted for Health check up
Deepak
29/08/2024

