

## भारत सरकार

# Government of India



अभिषेक पाण्डेय Abhishek Pandey जन्म वर्ष / Year of Birth: 1988 पुरुष / Male



4098 8854 3091

आधार - आम आदमी का अधिकार



# भारतीय विशिष्ट पहचान प्राधिकरण

# Unique Identification Authority of India

पताः S/O: अश्वनी पाण्डेय, 27, थाना कॉलोनी, गोविन्दपुरा, हजुर, गोविन्दपुरा, भोपाल, मध्य प्रदेश, 462023 Address: S/O: Ashwani Pandey, 27, thana colony, govindpura, Huzur, Govindpura, Bhopal, Madhya Pradesh, 462023

4098 8854 3091





help@uidai.gov.in





MIG -215 216,Gautam Nagar, Govindpura, Bhopal-462023 (M.P.) Phone No. : 0755-4272669, 4250134



Patient Name: MR ABHISHEK PANDEY

Age/Gender : 35 Yrs/Male

Ref. Dr. : Dr. APOLLO CLINIC

Center : CMH OPD

Registration Date : 29/03/2024 11:41 AM

Collection Date : 29/03/2024 11:44 AM

Report Date : 29/03/2024 05:24 PM



#### **HAEMATOLOGY REPORT**

Test Description	Result	Unit	Biological Reference Ranges
HbA1c Glycosilated Haemoglobin	5.3	%	Non-diabetic: <= 6.0 Pre-diabetic: 6.0-7.0 Diabetic: >= 7.0
Estimated Average Glucose :	105	mg/dL	

Reference Range (Average Blood Sugar):

Excellent control

: 90 - 120 mg/dl

Good control

: 121 - 150 mg/dl

Average control

: 151 - 180 mg/dl

Action suggested : 181 - 210 mg/dl

Panic value :> 211 mg/dl

#### Interpretation & Remark:

- 1. HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
- 2. HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
- 3. Trends in HbA1c are a better indicator of diabetic control than a solitary test.
- 4. Low glycated haemoglobin(below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia(especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
- 5. To estimate the eAG from the HbA1C value, the following equation is used: eAG(mg/dl) = 28.7\*A1c-46.7
- 6. Interference of Haemoglobinopathies in HbA1c estimation.
  - A. For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
  - B. Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status
  - C. Heterozygous state detected (D10/ turbo is corrected for HbS and HbC trait).
- 7. In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control. Excellent Control 6 to 7 %, Fair to Good Control 7 to 8 %, Unsatisfactory Control 8 to 10 % and Poor Control More than 10 %.

Dr. Subhash Parmar Consultant Pathologist



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### **HAEMATOLOGY REPORT**

Test Description Result Unit Biological Reference	Ranges
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#### **BLOOD GROUP AND RH FACTOR**

ABO Type A

Rh Factor POSITIVE(+VE)

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#### **BIOCHEMISTRY REPORT**

Test Description	Result	Unit	Biological Reference Ranges
RENAL FUNCTION TEST (R	FT)		
Blood Urea	24.0	mg/dl	15 - 50
Serum Creatinine	1.19	mg/dl	0.7 - 1.5
eGFR	79	ml/min	
Blood Urea Nitrogen-BUN	11.21	mg/dl	<mark>7</mark> - 20
Serum Sodium	142.5	mmol/L	1 <mark>35 -</mark> 150
Serum Potassium	4.36	mmol/L	3.5 - 5.0
Chloride	102.0	mmol/L	94.0 - 110.0
Uric Acid	5.1	mg/dl	3.2 - 7.0
NOTE : Please correlate with clin	ical conditions.		

Dr. Subhash Parmar Consultant Pathologist

Sister Concern: Citi Hospital, 115, Zone-II, M.P. Nagar, Bhopal - 462011. Ph.: 0755-4287772-73

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#### **BIOCHEMISTRY REPORT**

Test Description	Result	Unit	Biological Reference Ranges		
LIVER FUNCTION TEST (LFT)					
TOTAL BILIRUBIN	0.69	mg/dl	0 - 1.2		
DIRECT BILIRUBIN	0.14	mg/dL	0 - 0.3		
INDIRECT BILIRUBIN	0.55	mg/dl	0.1 - 0.8		
SGOT (AST)	33.8	U/L	0 - 35		
SGPT (ALT)	31.6	U/L	0 - 45		
ALKALINE PHOSPHATASE	98.4	U/L	<mark>40 - 1</mark> 40		
GAMMA GLUTAMYL TRANSFERASE	24.3	IU/L	15 - 45		
TOTAL PROTEIN	7.01	g/dl	6.4 - 8.3		
SERUM ALBUMIN	4.40	g/dl	3.5 - 5.2		
SERUM GLOBULIN	2.61	g/dl	1.8 - 3.6		
A/G RATIO	1.69		1.2 - 2.2		
NOTE: Please correlate with clinic	NOTE : Please correlate with clinical conditions.				

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#### **BIOCHEMISTRY REPORT**

Collection Date

Test Description	Result	Unit	Biological Reference Ranges
LIPID PROFILE			
Cholesterol-Total	219.0	mg/dL	< 200 Desirable 200-239 Borderline High > 240 High
Triglycerides level	153.7	mg/dL	< 150 Normal 150-199 Borderline High 200-499 High > 500 Very High
HDL Cholesterol	45.6	mg/dL	< 40 Major Risk for Heart > 40 Normal
LDL Cholesterol	142.66	mg/dL	< 100 Optimal 100-129 Near/Above Optimal 130-159 Borderline high
			160-189 High > 190 Very High
VLDL Cholesterol	30.74	mg/dL	6 - 38
CHOL/HDL RATIO	4.80		3.5 - 5.0
LDL/HDL RATIO  NOTE 8-10 hours fasting sample is reference.	3.13 equired		2.5 - 3.5

SPECIALITY

Dr. Subhash Parmar Consultant Pathologist



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#### CLINICAL BIOCHEMISTRY REPORT

Test Description	Result	Unit	<b>Biological Reference Ranges</b>
Fasting Blood Sugar	77.3	mg/dl	Normal: 70-110
Method: GOD-POD			Impaired Fasting Glucose(IFG):
			<mark>1</mark> 00-125

Diabetes mellitus: >= 126

Note:- An individual may show higher fasting glucose level in comparison to post prandial glucose level due to following reasons. The glycaemic index and response to food consumed, Changes in body composition, Increased insulin response and sensitivity, Alimentary hypoglycemia, Renal glycosuria, Effect of oral hypoglycaemics & Insulin treatment.

SPE

Dr. Subhash Parmar **Consultant Pathologist** 



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: Dr. APOLLO CLINIC Ref. Dr.

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### **IMMUNOASSAY REPORT**

ng/mL ng/mL	
ng/mL	
	52 - 127
μIU/ml	D.3-4.5 Pregnancy (As per American Thyroid Association)
	First Trimester : 0.1-2.5 Second Trimester : 0.2-3.0 Third trimester : 0.3-3.0

Method: CLIA

#### **INTERPRETATION**

TSH	T3 / FT3	T4 / FT4	Suggested Interpretation for the Thyroid Function Tests Pattern		
Within Range	Decreased	Within Range	<ul> <li>Isolated Low T3-often seen in elderly &amp; associated Non-Thyroidal illness. In elderly the drop in T3 level can be upto 25%.</li> </ul>		
Raised	Within Range	Within Range	•Isolated High TSHespecially in the range of 4.7 to 15 mIU/ml is commonly associated with Physiological & Biological TSH Variability. •Subclinical Autoimmune Hypothyroidism •Intermittent T4 therapy for hypothyroidism •Recovery phase after Non-Thyroidal illness"		
Raised	Decreased	Decreased	chronic Autoimmune Thyroiditis lost thyroidectomy,Post radioiodine lypothyroid phase of transient thyroiditis"		
Raised or within Range	Raised	Raised or within Range	Interfering antibodies to thyroid hormones (anti-TPO antibodies) Intermittent T4 therapy or T4 overdose Drug interference- Amiodarone, Heparin,Beta blockers,steroids,anti-epileptics"		
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 Hyperthyroidism (TSH remains suppressed)"		
Decreased	Raised	Raised	Primary Hyperthyroidism (Graves' disease), Multinodular goitre, Toxic nodule Transient thyroiditis: Postpartum, Silent (lymphocytic), Postviral (granulomatous, subacute, DeQuervain's), Gestational thyrotoxicosis with hyperemesis gravidarum"		
Decreased or within Range	Raised	Within Range	•T3 toxicosis •Non-Thyroidal illness		

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#### **URINE EXAMINATION REPORT**

Test Description	Result	Unit	Biological Reference Ranges
URINE ROUTINE			
General Examination			
Colour	Pale Yellow		Pale Yellow
Transparency (Apperance)	Clear		Clear
Deposit	Absent		Absent
Reaction (pH)	Acidic		5.0-8.5
Specific Gravity	1.025		-1.005-1.030
Chemical Examination			
Urine Protein	Absent		Absent
Urine Ketones (Acetone)	Absent		Absent
Urine Glucose	Absent		Absent
Bile pigments	Absent		Absent
Bile salts	NIL		NIL
Urobilinogen	Normal		Normal
Nitrite	Negative		Negative
Microscopic Examination			
RBC's	NIL	/hpf	NIL
Leukocyte (Pus cells)	2-4	/hpf	0-5/hpf
Epithelial Cells	1-2	/hpf	0-4/hpf
Crystals	Absent		Absent
Casts	Not Seen		Not Seen
Amorphous deposits	Absent		Absent
Yeast Cells	Not seen		Not seen

Note: 1. Chemical examination through Dipstick includes test methods as Protein (Protein Error Principle), Glucose (Glucose oxidase-Peroxidase), Ketone (Legals Test), Bilirubin (Azo- Diazo reaction), Urobilinogen (Diazonium ion Reaction) Nitrite (Griess Method). All abnormal results of chemical examination are confirmed by manual methods. 2. Pretest conditions to be observed while submitting the sample- First void, mid-stream urine, collected in a clean, dry, sterile container is recommended for routine urine analysis, avoid contamination with any discharge from vaginal, urethra, perineum, as applicable, avoid prolonged transit time & undue exposure to sunlight. 3. During interpretation, points to be considered are Negative nitrite test does not exclude the urinary tract infections, Trace proteinuria can be seen with many physiological conditions like prolonged recumbency, exercise, high protein diet. False positive reactions for bile pigments, proteins, glucose and nitrites can be caused by peroxidase like activity by disinfectants, therapeutic dyes,

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Test Description	Result	Unit	<b>Biological Reference Ranges</b>
COMPLETE BLOOD COUNT			
Haemoglobin	14.2	gm/dL	12.0 - 16.0
RBC Count	5.17	mil/cu.mm	4.00 - 5.50
Hematocrit HCT	<b>45.0</b>	%	40.0 - 54.0
Mean Corp Volume MCV	87.0	fL	80.0 - 100.0
Mean Corp Hb MCH	27.5	pg	<mark>2</mark> 7.0 - 34.0
Mean Corp Hb Conc MCHC	31.6	gm/dL	32.0 - 36.0
Platelet Count	1.35	lac/cmm	<mark>1.50 -</mark> 4.50
Total WBC Count /TLC	4.91	10^3/cu.mm	4.0 - 11.0
DIFFERENTIAL LEUCOCYTE CO	DUNT		
Neutrophils	59	%	40 - 70
Lymphocytes	36	%	20 - 40
Monocytes	03	%	02 - 10
Eosinophils	02	%	01 - 06
Basophils 00		%	00 - 01
Absolute Differential Count			
Absolute Neutrophils Count	2.9	thou/mm3	2.00 - 7.00
Absolute Lymphocyte Count	1.8	thou <mark>/mm3</mark>	1.00 - 3.00
Absolute Monocytes Count	0.1	thou/mm3	0.20 - 1.00
Absolute Eosinophils Count	0.1	thou/mm3	0.02 - 0.50

**EDTA Whole Blood -** Tests done on Automated Three Part Cell Counter. (WBC, RBC Platelet count by impedance method, WBC

differential by VCS technology other parameters calculated) All Abnormal Haemograms are reviewed confirmed microscopically.

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Test Description	Result	Unit	Biological Reference Ranges
<b>ESR - ERYTHROCYTE</b>	07	mm/hr	0 - 09
SEDIMENTATION RATE			

Method: Wintrobes

#### **INTERPRETATION:**

- 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. It is also increased in pregnancy, multiple myeloma, menstruation, and hypothyroidism.

SPE

\*\*\*\* End of the report\*\*\*\*

This report is not valid for medico legal aspects. This is just a professional opinion not the final. Kindly correlate clinically because of technical, lack of clinical information and physical findings, if any disparity noted please inform.

Dr. Subhash Parmar Consultant Pathologist

### MER- MEDICAL EXAMINATION REPORT

29-03-2024
ABMISHER PANDEY
35 Gender Male
176 WEIGHT (kg) 66
110/70MMHC
WNL
NORMAL
Color Vision: No Far Vision Ratio: No
Near Vision Ratio: No
No. Any Procent allhents
No. Any post aithents No. Any past aithents He is physically fid.
He is physically fid.

Dr. SABYASACHI GUPTA MBBS (Gold Medalist), MS (Med.), RCGP (U.K.)

Reg. No. 1671

Signature with Stamp of Medical Examiner

# CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of MR. ABHISHEK	DUNDER	on 29-03-	24
After reviewing the medica	al history and on	clinical examination it ha	as been foun
that he/she is			

ne/she is		Ti
Medically Fit		
7/4-1		_
Fit with restrictions/recommendations		
Though following restrictions have been reveale not impediments to the job.	d, in my opinion, these are	
1		
2		
3		
However the employee should follow the advice been communicated to him/her.	/medication that has	
Review after		
Currently Unfit.	recommended	1
Review after	Teconmended	
	Dr. SABYASACHI GUPTA	
Unfit	MBBS (Gold Medalist), Wilder Manager M	

President of the start of the s

Dr. DR.S.S.GUPTA(MD)
Medical Officer
The Apollo Clinic, (Location)

This certificate is not meant for medico-legal purposes



MIG -215 216, Gautam Nagar, Govindpura, Bhopal-462023 (M.P.)

Phone No.: 0755 - 4250134

Mobile No.: 7771008660,8319214664, 9303135719



Name

MR. ABHISHEK

Age/Sex

35years/M

Date

29/03/24

### USG ABDOMEN

<u>Liver</u>: Liver is normal in size, shape and have smooth contour. Hepatic parenchyma is homogenous in echotexture. Intra and extra hepatic billiary and vascular channels are normal. No gross or diffuse mass lesions seen.

Gall Bladder: Gall bladder seen as an anechoic thin walled cavity with normal size and shape. No cholithiasis or mass lesions seen. CBD is normal in calibre.

Spleen: Normal in size, shape and echotexture.

Pancreas: Normal in size, shape and echotexture.

Kidneys : Both the kidney are normal in size, shape, axe and position. Cortico medullary differentiation are normal and maintained bilaterlly. No caliceal dilatation seen on either side.

Urinary bladder: Urinary bladder is normal and contents are echofree.

Prostate: Prostate is normal size shape weight and echotexture .(8.93)

Retroperitoneum: No lymphadenopathy seen. No free fluid or ascitis seen.

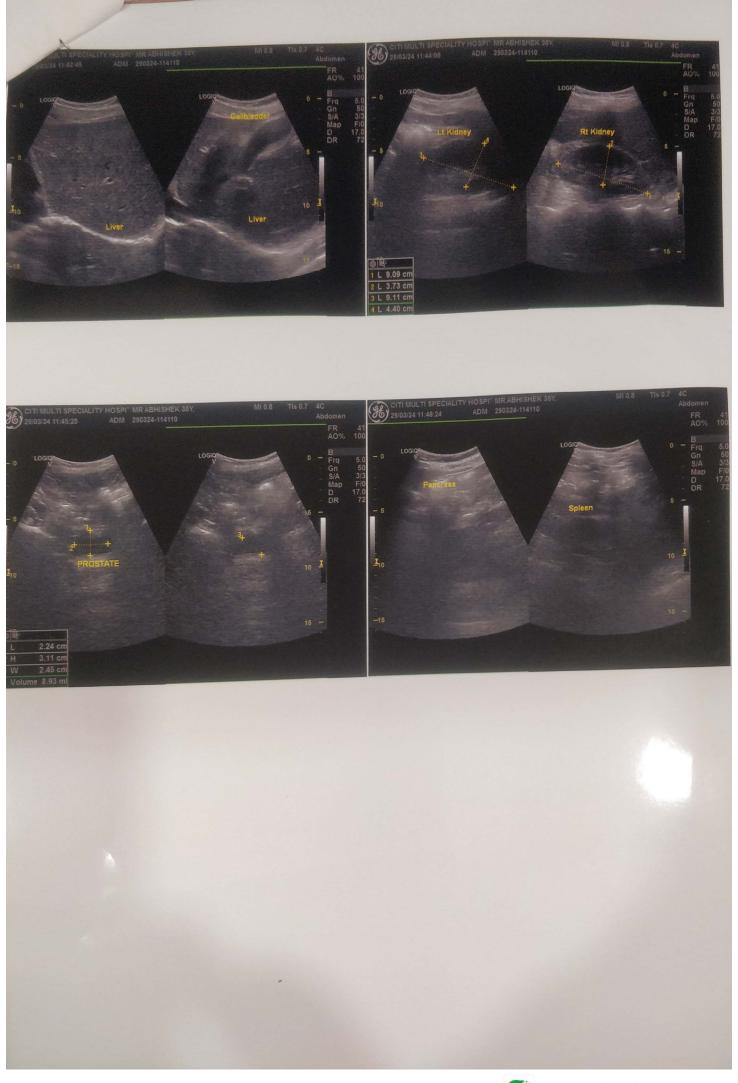
IMPRESSION: normal study

TANT SONOLOGIST

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 clinic-pathological correlation. This is a professional opinion, not a diagnosis. In case of any discrepancy a review can be asked.

Empanelled with: State Government, M.P.Police, ESIC, HPCL, Punjab National Bank, Indian Bank Food Corporation of India, Ayushman Bharat







Phone No.: 0755 - 4250134 Mobile No.: 7771008660,8319214664, 9303135719



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Empanelled with: State Government, M.P.Police, ESIC, HPCL, Punjab National Bank, Indian Bank Food Corporation of India, Ayushman Bharat



### Mail Clarity Medical Pvt. Ltd.

# SHIVAM CT Scan And Diagnostic Centre

MIG-215 GUTAM NAGAR GOVINDPURA BHOPAL PHONE 777108660

380 - MR ABHISHEK

35 Years / Male / Ht 177 Cms /65 Kgs / Non-Smoker

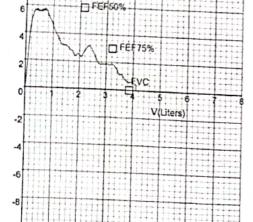
**FVC TEST** Date: 29-03-2024 (T1)

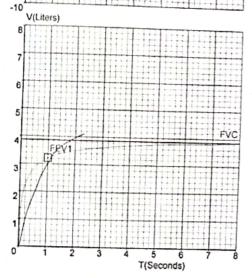
Pred Eqn : CLARITY Ref By : NONE

Eth.Corr: 100

Temp: 0°C

16					
14					
12					
	11111	HILLIII.	Hill		PEED



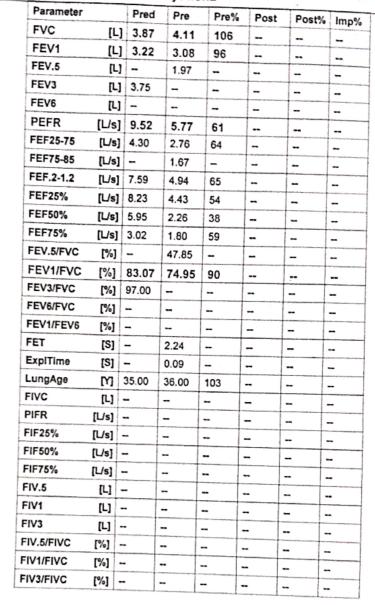


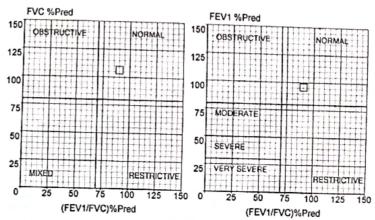
- Pre Medication Report :

Early Small Airway Obstruction. Spirometery within Normal range as FVC% >= 80 And FEV1/FVC% > 70

- Pre COPD Severity Report: Pre Test within Normal range

- Doctor's Comments :





Dr. SABYASACHI GUPTA MBBS (Gold Medalist), MD (Med.), RCGP (U.K.)

> Reg. No. 116/1 Dr. S.S.GUPTA MD MEDICINE



### SHIVAM CT Scan And Diagnostic Centre

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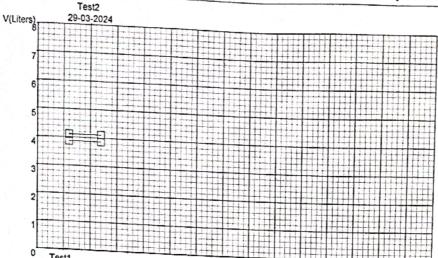
TRENDS [Pre]

Pred Eqn: CLARITY

Eth.Corr: 100

Temp: 0°C

Date: 29-03-2024 (T1) Ref By: NONE



Test1 29-03-2024

Parameter	_	Test1	Test2	Test3	Test4	Test5	Test6	Test7	Test	Test	9 Test1
FVC	[L]	4.11	4.11		-				1,000	1000	-
FEV1	[L]	3.08	3.08	-			1	-	+		<del></del>
FEV.5	[L]	1.97	1.97	-	-	-		-	-		
FEV3	[L]	-		-	-	-	_	-	+	<del> -</del> -	
FEV6	[L]	-	-	-	-	-	+	-	-	-	
PEFR	[L/s]	5.77	5.77		-		-	-	-	-	-
FEF25-75	[L/s]	2.76	2.76	-	-		-	-	-		<del> </del>
FEF75-85	[L/s]	1.67	1.67	-	-		-	-	-	-	-
FEF.2-1.2	[L/s]	4.94	4.94	-	_	-		-	-	-	-
FEF25%	[L/s]	4.43	4.43	_	-	-	-	-	-	-	-
FEF50%	[L/s]	2.26	2.26	_	_	-	-	-	-	-	
FEF75%	[L/s]	1.80	1.80	-	_	_	-	-	-	-	-
FEV.5/FVC	[%]	47.85	47.85	_	-	_	-	-	-	-	-
FEV1/FVC	[%]	74.95	74.95			-	-	-	-	-	-
FEV3/FVC	[%]	_			_	-					
FEV6/FVC	[%]			-	_	_	-	-		-	
FEV1/FEV6	[%]		_		-	_					-
FET	[8]	2.24	2.24	_	_		-		-		
ExplTime	[8]	0.09	0.09				-		-	-	-
_ungAge	M	36.00	36.00					-	-		
IVC	[L]		-	_		-	-		-		
PIFR	[Us]						-	-			-
		-		_					- '		
		_	_	-	-		-	-			-
				_	-	-			-		-
IV.5		-	_	-	-	-		-	-		
IV1		-		_	-	-	-	-	-		-
IV3			_	_	-		-	-	-		
IV.5/FIVC	2010	-	_		-	-	-		-		
IV1/FIVC	***	-	_	_	-		-	-		-	
IV3/FIVC	P0/-				-					-	

Dr. SABYASACHI GUPTA

MBBS (Gold Medalist) MD (Med.), RCGP (U.K.) Reg. NON SS GUPTA

MD MEDICINE



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TRENDS [Post] Date: 29-03-2024 (T1)

Pred Eqn: CLARITY

Eth.Corr: 100

Temp: 0°C

Ref By : NONE Test2 29-03-2024 V(Liters) Ü

Test1 29-03-2024

Parameter		Test1	Test2	Test3	Test4	Test5	Test6	Test7	Test8	Test9	Test1
FVC	[L]		3.49			••					
FEV1	[L]		2.74								
FEV.5	[L]		1.79				-	-			-
FEV3	[L]	-	-	-	-	-	-				
FEV6	[L]						-		-		-
PEFR	[L/s]		4.95	**							-
FEF25-75	[L/s]		2.62					-	-	-	-
FEF75-85	[L/s]		1.52	-	-		-				-
FEF.2-1.2	[L/s]	-	4.08			-		-		-	-
FEF25%	[L/s]		4.28				-				-
FEF50%	[L/s]		2.72			-	-				-
FEF75%	[L/s]		1.87			-	-		-	-	-
FEV.5/FVC	[%]		51.26			war			-	-	-
FEV1/FVC	[%]	••	78.40			**				••	
FEV3/FVC	[%]		••				-	**	-	-	-
FEV6/FVC	-	**						-			-
FEV1/FEV6	[%]		-								-
FET			1.83				-	-	-	-	-
ExplTime		**	0.09	••					-		-
LungAge	NAME AND ADDRESS OF THE OWNER, TH		40.00	••			-			**	-
FIVC	-		2.73			**		-		-	
PIFR	-	••	2.06				-			-	-
AND RESIDENCE OF THE PARTY OF T	A STATE OF THE PARTY OF THE PAR		4.60					-		-	
and the second second second second	NAME OF TAXABLE PARTY.		2.86		-		-	-			-
and the last of th	-		2.18	••	-		-		-	-	-
and the second of the second of the	Ottom challe and de		0.72	**	**				-	-	
FIV.5	regarded transfer and		1.59								-
FIV1	epitro ras mujerni em	er.			**			-			-
FIV3			26.51						-	per contract of the contract of	-
FIV.5/FIVC	distance of the same		58.22		N. T.	go scored and a second point		••		-	
FIV1/FIVC FIV3/FIVC			-			-				Dr. Sa	DVA.

### MIG 216. Gautam Nagar BHOPAL

462023

Name MR ABHISHEK PANDEY

Case No.

Sex Age

Phone No.

746

35 Male

9826504002

Address

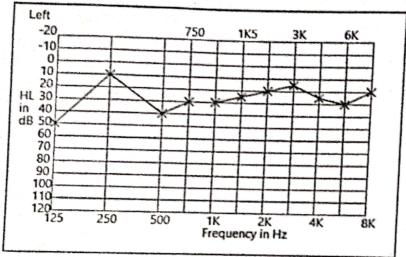
MINAL GATE 1 BHOPAL

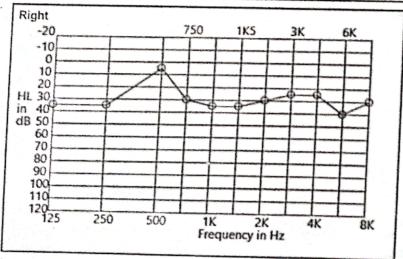
Referred By

Date & Time

APOLLO CLINIC

29/3/24





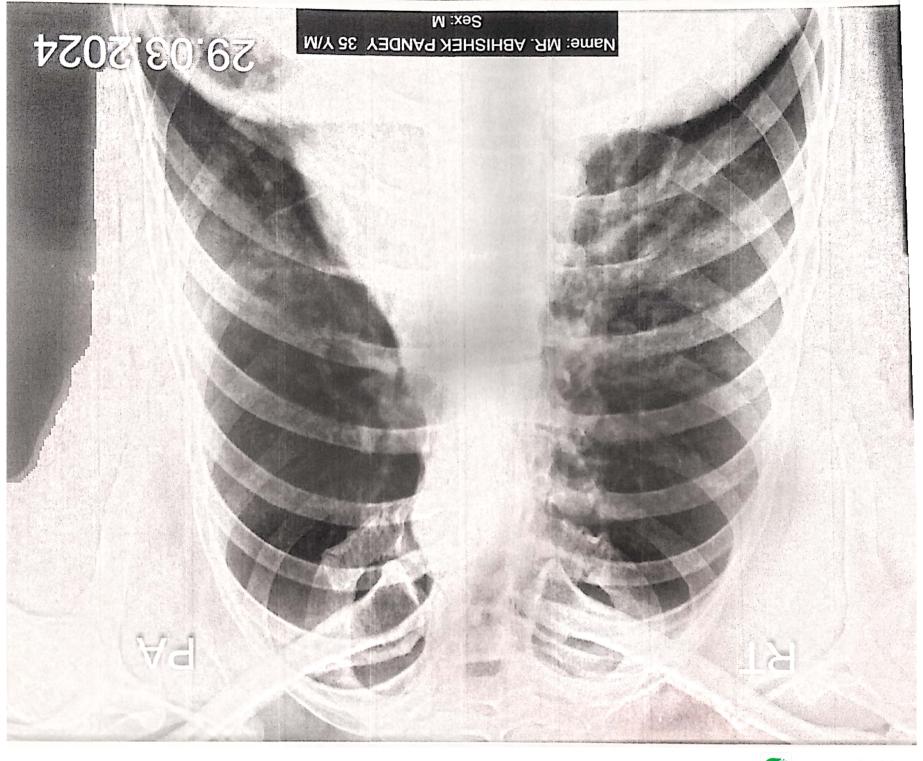
Interpretation

NORMAL HEARING STUDY

Doctor/Audiologist

DR S S GUPTA SIR (MD)

Dr. SABYASACHI GUPTA MBBS (Gold Medalist), NO (Med.), RCGP (U.K.) Reg. No 11671







Patient- Name:	MR. ABHISHEK PANDEY	Age/Sex:	35 Y/M
Referred. By:	INS	Date:	29.03.2024

### X-RAY CHEST PA VIEW

- -Bilateral Lungs Fields Appear Clear.
- -Bilateral Hilar Shadows Appear Clear.
- -Bilateral CP Angels Appear Clear.
- -Both The Domes Of Diaphragm Appear normal in shape and position.
- -Visualized bony cage and soft tissue appear normal.

### **IMPRESSION**

No Significant Abnormality.

Dr. SANJAY ...

CONSULTANT RADIOLOGIST

Empanelled with: State Government, M.P.Police, ESIC, HPCL, Punjab National Bank, Indian Bank Food Corporation of India, Ayushman Bharat

