Dr. Vimmi Goel MBBS, MD (Internal Medi Sr. Consultant Non Invasiv Reg. No: MMC- 2014/01/0	cine) KIMS ve Cardiology	ntive Health Chec Kingsway Hospi Nagpur e No.: 7499913	tals VC	KIMS-KIN HOSPI	IGSWAY TALS
Name : _ M.	Pahul	Bisane		Date :	12/4/24

Ąç	·	384	Sex W/F	Weight : 65	<u>9</u> kg Height	t: <u>1618</u> inc	BMI :	25.2
E	:	140/3	<u>0</u> _mm	Hg Pulse :		bpm	RBS :	mg/dl

Dr. Rahul Atara BDS, MDS (Endodontics) Sr. Consultant Dental Surgeon Reg. No: A-16347



Name :	Mr	Rah	ul Bishe				Date	12:04 2	4
Age :	38 470-	Sex : M/F	Weight :	kg	Height :	inc	BMI :		
BP		mm	Hg Pulse :			bpm	RBS :		ma/dl

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SPANV Medisearch Lifesciences Private Limitee rwana Bhawan, Kingsway, Nagour - 10 001, Maharashim, Indi Phone - 91 0 12 6 65 1 , North 1993N - Lei an 1995 N

Dr. Rahul Atara BDS, MDS (Endodontics) Sr. Consultant Dental Surgeon Reg. No: A-16347

KIMS-KINGSWAY HOSPITALS

Name :	Mr Rahue Bisme			Date : 12.04.24
Age :	오(기코)- Sex∶M/F Weight: kg	Height :	inc BMI :	
	mmHg Pulse :	bpm	RBS :	mg/dl

of calculus stario Mussing of Dey, comes at

ADV Scaling Replacement i EL R CT C EL CADY LOPAS

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KIMS - Kingsway Hospitals

(A Unit of SPANV Medisearch Lifesciences Pvt. Ltd.)

44, Kingsway, Near Kasturchand Park, Nagpur,

Maharashtra, India - 440001.

Ph No.:1800 266 8346|Mobile No.:+91-7126789100

Email :assistance@kimshospitals.com/Website :www.kimshospitals.com

#### DEPARTMENT OF OPHTHALMOLOGY OUT PATIENT ASSESSMENT RECORD

RAHUL BISANE	CONSULT DATE : 12-04-2024	DR. ASHISH PRAKASHCHANDRA
8Y(S) 0M(S) 0D(S)/M	CONSULT ID : OPC2425004423	KAMBLE
RNP2425001283	CONSULT TYPE	MBBS,MS, FVRS,FICO
04552267	VISIT TYPE : NORMAL	CONSULTANT
00101	TRANSACTION	DEPT OPHTHALMOLOGY
	TYPE	

#### VITALS

Temp :	Pulse :	BP (mmHg) :	spO2 :	Pain Score :	Height :
- °F			%RA		cms

CHIEF COMPLAINTS

ROUTINE CHECK UP

#### Weight : BMI :

– kgs –

### MEDICATION PRESCRIBED

#	Medicine	Route	Dose	Frequency	When	Duration		
	XLHA EYE DROPS	Eye	1-1-1 <b>~ 1</b>	Every Day	NA	2 months		
1	10ML Instructions : BOTH EYE							
	Camposition : SODIUM HY	ALURONATE 0.1% W/V						

#### NOTES

GLASS PRESCRIPTION :-DISTANCE VISION

EYE	SPH	CYL	AXIS	VISION
RIGHT EYE	00	00	00	6/6
LEFT EYE	00	00	00	6/6
NEAR ADDITION				
RIGHT EYE			00	N6
LEFT EYE			00	NG
REMARK-BLUE CL	JT LENS	Eg		

Clamble

Dr. Ashish Prakashchandra Kamble MBBS,MS, FVRS,FICO Consultant

Printed On :12-04-2024 11:26:48



HOSPITALS

### **DEPARTMENT OF PATHOLOGY**

	: Mr. RAHUL BISANE	Age /Gender	:38 Y(s)/Male	
BULNO/ UMR NO	: BIL2425003166/MRNP2425001283	<b>Referred By</b>	:Dr. Vimmi Goel MBBS,MD	
Received Dt	:12-Apr-24 08:45 am	<b>Report Date</b>	:12-Apr-24 10:06 am	

### HAEMOGRAM

Parameter	<u>Specimen</u>	<u>Results</u>	<b>Biological Reference</b>	<u>Method</u>
Haemoglobin	Blood	16.4	13.0 - 17.0 gm%	Photometric
Haematocrit(PCV)		47.9	40.0 - 50.0 %	Calculated
RBC Count		5.48	4.5 - 5.5 Millions/cumm	Photometric
Mean Cell Volume (MCV)		87	83 - 101 fl	Calculated
Mean Cell Haemoglobin (MCH)		30.0	27 - 32 pg	Calculated
Mean Cell Haemoglobin Concentration (MCHC)		34.3	31.5 - 35.0 g/l	Calculated
RDW		14.3	11.5 - 14.0 %	Calculated
Platelet count		297	150 - 450 10^3/cumm	Impedance
WBC Count		8000	4000 - 11000 cells/cumm	Impedance
DIFFERENTIAL COUNT				
Neutrophils		71.7	50 - 70 %	Flow Cytometry/Light microscopy
Lymphocytes		20.8	20 - 40 %	Flow Cytometry/Light
Eosinophils		2.8	1-6 %	microscopy Flow Cytometry/Light microscopy
Monocytes		4.7	2 - 10 %	Flow Cytometry/Light
Basophils		0.0	0-1 %	microscopy
Absolute Neutrophil Count		5736	2000 - 7000 /cumm	Flow Cytometry/Light microscopy Calculated

Page 1 of 2





### DEPARTMENT OF PATHOLOGY

				Age /Gender	• 38 Y(s)/Ma	e
	: Mr. RAHUL	BISANE				
patient Name	-11.24250(	13166/MRN	2425001283	<b>Referred By</b>	:Dr. Vimmi (	Goel MBBS,MD
Patient Name Bill No/ UMR No	: BIL242500	08:45 am		Report Date	:12-Apr-24	10:06 am
Received Dt	12 / 12		Results	Biologica	l Reference	Method
		<u>Specimen</u>		1000 - 4800 /cu		Calculated
Parameter Absolute Lymphocy	/te Count		1664	20 - 500 /cumm		Calculated
Absolute Eosinophi	il Count		224 376	200 - 1000 /cu		Calculated
Absolute Monocyte	Count		0	0 - 100 /cumm		Calculated
Absolute Basophil	Count					
PERIPHERALS	SMEAK		Normochromic			
RBC			Normocytic Anisocytosis			
Anisocytosis			+(Few) As Above			
WBC			Adequate			to be metod
Platelets			06	0 - 15 mm/hr		Automated Westergren's Method
ESR			*** End Of F	Report ***		

Page 2 of 2

Suggested Clinical Correlation \* If neccessary, Please discuss

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#### **DEPARTMENT OF BIOCHEMISTRY**

	HUL BISANE		Age /Gender : 38 Y(s)	/Male
Bill No/ UMR No : BIL242	5003166/MRN	P2425001283	Referred By : Dr. Vim	nmi Goel MBBS,MD
Received Dt : 12-Apr			Report Date : 12-Apr	-24 10:21 am
Parameter	<u>Specimen</u>	<b>Results</b>	<b>Biological Reference</b>	Method
Fasting Plasma Glucose	Plasma	<b>104</b> 129	< 100 mg/dl < 140 mg/dl	GOD/POD,Colorimetric GOD/POD, Colorimetric
GLYCOSYLATED HAEM	OGLOBIN (H	IBA1C)		
HDAIC		5.2	Non-Diabetic : <= 5.6 % Pre-Diabetic : 5.7 - 6.4 % Diabetic : >= 6.5 %	HPLC
		*** End Of Re	port ***	

Suggested Clinical Correlation \* If neccessary, Please discuss

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Phone: +91 0712 6789100 CIN: U74999MH2018PTC303510





### DEPARTMENT OF BIOCHEMISTRY

			Age /Gender	:38 Y(s)/Ma	le
Patient Name	: Mr. RAHUL BISANE	1p2425001283	Referred By	:Dr. Vimmi	Goel MBBS,MD
Bill No/ UMR No	: BIL2425003166/MRN	)   2423001===	Report Date	:12-Apr-24	10:21 am
Received Dt	:12-Apr-24 08:45 am				
LIPID PROFI Parameter Total Cholesterol Triglycerides HDL Cholesterol Dir	Serum	<b>219</b> <b>162</b> 41	< 200 mg/dl < 150 mg/dl > 40 mg/dl < 100 mg/dl		Method Enzymatic(CHE/CHO/PO D) Enzymatic (Lipase/GK/GPO/POD) Phosphotungstic acid/mgcl-Enzymatic (microslide) Enzymatic
i vel Dir	ect	146.05	< 30 mg/dl		Calculated
LDL Cholesterol Dir		32	3 - 5		Calculation
VLDL Cholesterol		5	Consider Drug	therapy	<u>LDC-C</u>
Tot Chol/HDL Ratio	tic	>100	>130, optional		<100
Multiple major risk	c factors comente	>130	10 yrs risk 10-	20 % >130	<130
10 yrs CHD risk> Two or more addi factors,10 yrs CH	D risk <20%	>160	10 yrs risk <10 >190,optional	)% >160	<160
No additional maj additional major r	or risk of one	*** End Of Re	port ***		

Suggested Clinical Correlation \* If neccessary, Please discuss Verified By : : 11100026 Test results related only to the item tested.

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### CLINICAL DIAGNOSTIC LABORATORY

### DEPARTMENT OF BIOCHEMISTRY

Patient Name: Mr. RAHUL BISANEBill No/ UMR No: BIL2425003166/MRNP2425001283Received Dt: 12-Apr-24

Age / Gender: 38 Y(s)/MaleReferred By: Dr. Vimmi Goel MBBS,MDReport Date: 12-Apr-24 10:21 am

KIMS-KINGSWAY HOSPITALS

### IVER FUNCTION TEST(LFT)

LIVER FUNCTION	Specimen	<u>Results</u>	<b>Biological Reference</b>	<u>Method</u>
<u>Parameter</u>	Serum	1.40	0.2 - 1.3 mg/dl	Azobilirubin/Dyphylline
Total Bilirubin	Serum	0.23	0.1 - 0.3 mg/dl	Calculated
Direct Bilirubin Indirect Bilirubin		1.17	0.1 - 1.1 mg/dl	Duel wavelength spectrophotometric
		72	38 - 126 U/L	pNPP/AMP buffer
Alkaline Phosphatase		30	10 - 40 U/L	Kinetic with pyridoxal 5 phosphate
SGPT/ALT		24	15 - 40 U/L	Kinetic with pyridoxal 5 phosphate
SGOT/AST		8.64	6.3 - 8.2 gm/dl	Biuret (Alkaline cupric sulphate)
Serum Total Protein Albumin Serum		4.81	3.5 - 5.0 gm/dl	Bromocresol green Dye Binding
		3.83	2.0 - 4.0 gm/dl	Calculated
Globulin		1.3		
A/G Ratio		*** End Of Re	port ***	

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### CLINICAL DIAGNOSTIC LABORATORY

### DEPARTMENT OF BIOCHEMISTRY

Patient Name	: BIL2425	JL BISANE 003166/MRN 24 08:45 am	P2425001283	Age /Gender Referred By Report Date	:Dr. Vimmi	Goel MBBS,MD
THYROID PRO Parameter	OFILE	<u>Specimen</u> Serum	1.80	<u>Biological Ref</u> 0.55 - 1.70 ng/m	h	Method Enhanced chemiluminescence
T3 Free T4				0.80 - 1.70 ng/d 0.50 - 4.80 uIU/		Enhanced Chemiluminescence Enhanced chemiluminescence
TSH			*** End Of Rep	ort ***		

Suggested Clinical Correlation \* If neccessary, Please discuss

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### CLINICAL DIAGNOSTIC LABORATORY

### DEPARTMENT OF BIOCHEMISTRY

	: Mr. RAHUL BISANE		Age /Gender		
antient Name	-11-1425003166/MRN	125003166/MRNP2425001283		Referred By : Dr. Vimmi Goel	
Bill No/ UMR No	: Mr. RAHUL BISANL : BIL2425003166/MRN : 12-Apr-24 08:45 am		Report Date	:12-Apr-24	10:21 am
Received Dt	. 12 / 4				
	a seimen	Result Values	<u>Biological Ref</u>		<u>Method</u> Urease with indicator
RFT	<u>Specimen</u> Serum	20	19.0 - 43.0 mg/	dl	dve
Parameter Blood Urea	Serum	0.8	0.66 - 1.25 mg/		Enzymatic ( creatinine amidohydrolase) Calculation by CKD-EPI
Creatinine		116.2	>90 mL/min/1.7	73m square.	2021
GFR		147	136 - 145 mmo		Direct ion selective electrode Direct ion selective
Sodium		4.97	3.5 - 5.1 mmol/	/L	electrode
Potassium		*** End Of Re	port ***		

Suggested Clinical Correlation \* If neccessary, Please discuss Verified By : : 11100026

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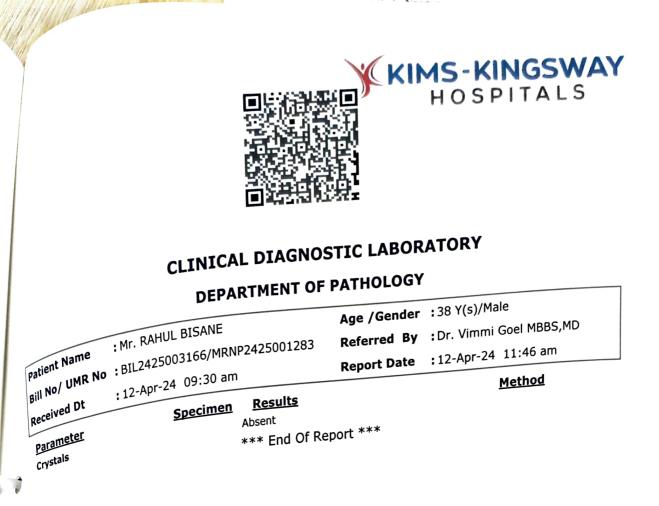
Dr. VAIDEHEE NAIK, MBBS, MD CONSULTANT PATHOLOGIST



### DEPARTMENT OF PATHOLOGY

patient	t Name	: Mr. RAHU : BIL24250	L BISANE 003166/MRNI 4 09:30 am	P2425001283	Age /Gender Referred By Report Date	Goel MBBS,MD
Receiv URI Para PHYS	NE MICRO meter SICAL EXAN	OSCOPY	<u>Specimen</u>	<b>Results</b> 30 ml Pale yellow Clear	Clear	<u>Method</u>
<u>CHE</u> Rea Spe Uri Su Bil Ke	ur. earance <u>EMICAL EXA</u> action (pH) ecific gravity ine Protein gar lirubin etone Bodies itrate		N	5.0 1.015 Negative Negative Negative Negative Negative Negative	4.6 - 8.0 1.005 - 1.025 Negative Negative Negative Negative Negative Normal	Indicators ion concentration protein error of pH indicator GOD/POD Diazonium Legal's est Principle Ehrlich's Reaction Manual
U M E R F	robilinogen <u>IICROSCOP</u> pithelial Cell a.B.C. ous Cells Casts	<u>IC EXAMIN</u> s	ATION	0-1 Absent 0-1 Absent	0 - 4 /hpf 0 - 4 /hpf 0 - 4 /hpf Absent	Manuai

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Suggested Clinical Correlation * If neccessary, Please	
discuss	
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KIMS-KINGSWAY

# CLINICAL DIAGNOSTIC LABORATORY

DEPARTMENT OF PATHOLOGY

	Age /Gender	:38 Y(s)/Male	e
: Mr. RAHUL BISANE	5001283 Referred By	: Dr. Vimmi O	Goel MBBS, MD
Patient Name BIL2425003166/MRNP2425	Report Date	:12-Apr-24	12:29 pm
patient Name: Mr. RAHUL BISANEpatient Name: BIL2425003166/MRNP2425Bill No/ UMR No: BIL2425003166/MRNP2425Bill No/ UMR No: 12-Apr-24	Report		
Received Dt			Method
Received Dt USF(URINE SUGAR FASTING)	sul <u>t Values</u> <u>Biological Ref</u>	erence	STRIP
USF(UK Specifier Nega	ative		01112
orameter Urine	End Of Report ***		
Urine Glucose ***			

Suggested Clinical Correlation \* If neccessary, Please discuss Verified By : : 11100400

Test results related only to the item tested.

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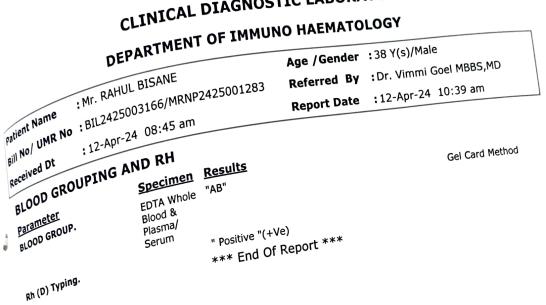
Dr. VAIDEHEE NAIK, MBBS,MD CONSULTANT PATHOLOGIST

Station





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CONSULTANT PATHOLOGIST

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#### DEPARTMENT OF RADIOLOGY & IMAGING SCIENCE

STUDY DATE	12-04-2024 10:11:10	
HOSPITAL NO.	MRNP2425001283	
MODALITY	DX	
REFERRED BY	Dr. Vimmí Goel	
	HOSPITAL NO. MODALITY	HOSPITAL NO. MRNP2425001283 MODALITY DX

#### X-RAY CHEST PA VIEW

Both the lung fields are clear.

Heart and Aorta are normal.

Both hilar shadows appear normal.

Diaphragm domes and CP angles are clear.

Bony cage is normal.

### IMPRESSION -

No pleuro-parenchymal abnormality seen.

DR R.R KHANDELWAL

MD, RADIODIAGNOSIS [MMC-55870]

N.B : This is only a professional opinion and not the final diagnosis. Radiological investigations are subject to variations due to technical limitations. Hence, correlation with clinical findings and other investigations should be carried out to know true nature of illness.

> 44, Parwana Bhawan, Kingsway, Nagpur - 440 001, Maharashtra, India. Phone: +91 0712 6789100 CIN: U74999MH2018PTC303510

1 of 1



PATIENT NAME:	MR. RAHUL BISANE	AGE /SEX:	38 YRS/MALE
	2425001283	BILL NO:	2425003166
	R NO: 2425001283	DATE:	12/04/2024
REF BY			

#### USG ABDOMEN AND PELVIS

LIVER is normal in size , shape and echotexture. No evidence of any focal lesion seen. Intrahepatic billiary radicals are not dilated. PORTAL VEIN and CBD are normal in course and caliber.

GALL BLADDER is physiologically distended. No stones or sludge seen within it. Wall thickness is within normal limits.

Visualized head and body of PANCREAS is normal in shape, size and echotexture.

SPLEEN is normal in size, shape and echotexture. No focal lesion seen.

Both KIDNEYS are normal in shape, size and echotexture. No evidence of calculus or hydronephrosis seen. URETERS are not dilated.

URINARY BLADDER is partially distended. No calculus or mass lesion seen.

Prostate is normal in size, shape and echotexture.

There is no free fluid or abdominal lymphadenopathy seen.

#### IMPRESSION:

No significant visceral abnormality seen. Suggest clinical correlation / further evaluation.

DR. R.R. KHANDELWAL SENIOR CONSULTANT MD RADIO DIAGNOSIS [MMC-55870]

DR. JUHI M RESIDENT DOCT

. -

#### Station

Telephone

EXERCISE STRESS TEST REPORT

Kingsway Hospitals •44 Kingsway, Mohan Nagar, Near Kasturchand Park, Nagpur

Patient Name: Mr. Rahul, Bisane Patient ID: 001283 Height: Weight: Study Date: 12.04.2024 Test Type: Treadmill Stress Test Protocol: BRUCE DOB: 15.03.1986 Age: 38yrs Gender: Male Race: Indian Referring Physician: Mediwheel HCU Attending Physician: Dr. Vimmi Goel Technician: --

Comment

### Medications:

### Medical History:

NIL Reason for Screening for Exercise To se Name	Exercise Test: or CAD est Summary: Stage Name	Time in Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	•
PRETEST	SUPINE STANDING	00:07 00:01	0.00 0.00	0.00 0.00	74 74	120/80	
112	WARM-UP	00:07 03:00	0.70 1.70	0.00	75 105	120/80	
EXERCISE	STAGE 1 STAGE 2 STAGE 3	03:00 02:51	2.50 3.40	12.00 14.00	126 153 114	130/80 130/80 130/80	
RECOVERY	5	01:00 02:00 00:19	0.00 0.00 0.00	0.00 0.00 0.00	114 112 116	120/80	

The patient exercised according to the BRUCE for 8:51 min:s, achieving a work level of Max. METS: 10.10. The resting heart rate of 73 bpm rose to a maximal heart rate of 157 bpm. This value represents 86 % of the maximal, age-predicted heart rate. The resting blood pressure of 120/80 mmHg, rose to a maximum blood pressure of 130/80 mmHg. The exercise test was stopped due to Target heart rate achieved.

### Interpretation:

Summary: Resting ECG: normal. Inctional Capacity: normal. HR Response to Exercise: appropriate. BP Response to Exercise: normal resting BP - appropriate response. Chest Pain: none. Arrhythmias: none. ST Changes: none. Overall impression: Normal stress test.

#### Conclusions:

TMT is negative for inducible ischemia.

Dr. VIMMI GOEL MBBS, MD Sr. Consultant-Non Invasive Cardiology Reg.No.: 2014/01/0113

