

Date → 20/11/23

Densica Dental

Mr. Vijay. M. Bahadur.

Pt c/o mild sensitivity in teeth.

T/t adv.

Rx.

Sky NM toothpaste.

Dr. Shaifali

8120909043.



Name : Mr. VIJAY M BAHADUR

Age : 39Yr 0Mth 22Days

Gender : Male

UHID : ASHB.0000022828 / BPLAH4649

W/BNo/RefNo : AHC

SIN \ LRN : 65905 \ 65904 \ 65906 \ 25729

Specimen : Blood

Ref Doctor : Dr. Gopal Batni



Collected on : 20-NOV-2023 04:17:52 PM

Received on : 20-NOV-2023 05:15:32 PM

Reported on : 20-NOV-2023 08:56:53 PM

**MEDIWHEEL FULL BODY ANNUAL CHECKUP**

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
GLUCOSE - SERUM / PLASMA (FASTING)	86	70-100	mg/dL
GLUCOSE - PLASMA (FASTING)			
GLUCOSE - SERUM / PLASMA (POST PRANDIAL)	115	70-140	mg/dL
GLUCOSE - PLASMA - (POST PRANDIAL)			
CHOLESTEROL - SERUM / PLASMA	217 *	Desirable: <200 Borderline High: 200-239 High >240	mg/dL
HDL CHOLESTEROL - SERUM / PLASMA	38 *	>40	mg/dL
LDL CHOLESTEROL - SERUM / PLASMA	174 *	Optimal: <100 Above optimal: 100-129 Borderline high: 130-159 High: 160-189 Very high: >190	mg/dL
TRIGLYCERIDES - SERUM / PLASMA	155 *	Normal<150 Borderline high 150-199 High 200-499 Very high: ≥ 500	mg/dL
VLDL CHOLESTEROL - SERUM	31 *	15-30	
TOTAL CHOLESTEROL AND HDL RATIO INTERPRETATIVE[2]TOTAL CHOLESTEROL/HDL CHOLESTEROL RATIO (Calculated)	5.7 *	3.5-5.0	



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PROTEIN TOTAL - SERUM / PLASMA			
PROTEIN TOTAL - SERUM	7.4	6.6-8.3	g/dL
ALBUMIN - SERUM	4.3	3.5-5.2	g/dL
GLOBULIN - SERUM			
GLOBULIN	3.1	2.6 - 4.6	g/dL
ALBUMIN/GLOBULIN RATIO			
ALBUMIN AND GLOBULIN RATIO	1.4	0.9-2.0	
AST (SGOT) - SERUM	17	< 50	U/L
ALT(SGPT) - SERUM / PLASMA			
ALT(SGPT) - SERUM	18	<50	U/L
BILIRUBIN, TOTAL - SERUM			
BILIRUBIN TOTAL	0.8	0.3-1.2	mg/dL
BILIRUBIN CONJUGATED (DIRECT) - SERUM			
BILIRUBIN CONJUGATED (DIRECT)	0.2	<0.2	mg/dL
BILIRUBIN UNCONJUGATED (INDIRECT) - SERUM			
BILIRUBIN UNCONJUGATED (INDIRECT)	0.6	0.1-1.2	mg/dL
ALKALINE PHOSPHATASE - SERUM/PLASMA			
ALKALINE PHOSPHATASE - SERUM	84	30-120	U/L
GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM			
GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM	28	0 - 55	U/L
CREATININE - SERUM / PLASMA	0.76	0.72 - 1.18	mg/dL
URIC ACID - SERUM / PLASMA	7.1	3.5-7.2	mg/dL
BUN (BLOOD UREA NITROGEN)	8.5	Male: <50yrs 8.87-20.5 mg/dl Male:>50yrs 8.41-25.7 mg/dl	mg/dL
TOTAL T3: TRI IODOTHYRONINE - SERUM	1.25	0.60-1.81	ng/ml



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TOTAL T4: THYROXINE - SERUM	12.33	5.01 - 12.45	µg/dL
TSH: THYROID STIMULATING HORMONE - SERUM	2.31	0.35-5.50	µIU/mL

Report Status:Final

\* END OF REPORT \*

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153991



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Dr Anupriya Chanda  
Consultant Pathologist

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Name : **Mr. VIJAY M BAHADUR** Age : 39Yr 0Mth 22Days Gender : Male  
 UHID : ASHB.0000022828 / BPLAH4649 W/BNo/RefNo : AHC  
 SIN \LRN : 65908 \ 65909 \ 25729  
 Specimen : Urine  
 Ref Doctor : Dr. Gopal Batni



Collected on : 20-NOV-2023 05:04:41 PM Received on : 20-NOV-2023 05:05:12 PM Reported on : 20-NOV-2023 05:13:25 PM

**MEDIWHEEL FULL BODY ANNUAL CHECKUP**

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
<b>CBC</b>			
HAEMOGLOBIN	14.9	13.0-17.0	g/dL
Packed cell volume (Calculated)	43.6	38.3-48.6	%
RBC COUNT(Impedance)	4.18 *	4.50-5.90	Million/ul
MCV-	104.2 *	80-100	fl
MCH-	35.7 *	27-32	pg
MCHC-	34.2	32-36	g/dL
RDW (Derived from RBC histogram)	13.7	11.8 - 14.5	%
TLC COUNT	6.76	4.0-11.0	10 <sup>3</sup> /mm <sup>3</sup>
<b>DIFFERENTIAL COUNT</b>			
Neutrophils	50	40-80	%
Lymphocytes	41 *	20-40	%
Monocytes	7	2-10	%
Eosinophils	2	1-6	%
Basophils	0	0-2	%
Platelet Count(Impedance)	336.2	150-450	10 <sup>3</sup> /mm <sup>3</sup>
Mean Platelet Volume	8.6	6.5-12.0	fl
ERYTHROCYTE SEDIMENTATION RATE (ESR)	27 *	0-15	mm/1st hr
<b>URINE ROUTINE (CUE)</b>			
<b>MACROSCOPIC EXAMINATION</b>			
Specific Gravity(Automated – Reflectance Spectrometer)	1.020	1.005 - 1.025	
Colour (Naked Eye Examination)	Pale-Yellow		



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Transparency:(Naked Eye Examination)	Clear		
pH(Automated – Reflectance Spectrometer)	Acidic		
Protein :(Automated – Reflectance Spectrometer/Sulpho salicylic acid method)	Nil		
Sugar:(Automated - Reflectance Spectrometer/ Benedict's Test)	Nil		
Ketone(Automated – Reflectance Spectrometer/Rothera's test)	Nil		
Bilirubin: (Automated – Reflectance Spectrometer/Fouchet's method)	Nil		
<b>Cells:</b>			
RBC(Automated - Reflectance spectrometer/Microscopy/Flow cytometric)	Nil		
Pus Cells(Automated – Reflectance spectrometer/Microscopy/Flow cytometric)	1-2	0.0 - 5.0/HPF	/hpf
Epithelial Cells(Microscopic /Flow cytometric)	1-2	<20	/hpf
Yeast Cells	Absent		
Bacteria	Absent		
Casts:(Microscopic /Flow cytometric)	Absent	ABSENT	
Crystals:(Microscopic /Flow cytometric)	Absent		



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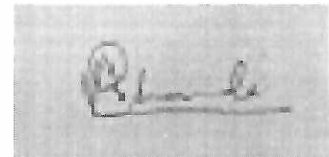


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\* END OF REPORT \*

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Consultant Pathologist

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**MEDIWHEEL FULL BODY ANNUAL CHECKUP**

<u>TEST NAME</u>	<u>RESULT</u>
BLOOD GROUPING AND TYPING (ABO and Rh)	
ABO Group:	O
Rh (D) Type:	Positive
Report Status:Final	

\* END OF REPORT \*

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725449

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Dr.Samir Singh  
CONSULTANT-BLOOD BANK







**Out Patient Assessment Form**  
Apollo Hospital, Bhopal

**Place Patient Label Here**  
 Mr. vijay M. Bahadur  
 If label not available, write Pt. Name UHID No. IP  
 No Age, Sex, Date, Name of Treating Physician

Date : 20/11/23      Time : 9:15 Am      Consultant Name : H.C.

**Pain Assessment      Nursing Assessment**

<p>0 No Hurt    2 Hurts Little Bit    4 Hurts Little More    6 Hurts Even More    8 Hurts Whole Lot    10 Hurts Worst</p>	Height 182 cm	Weight : 137.3 kg	Pulse : 79/m	BP : 141/82
	Allergies (if any) NO.		Falls risk : Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
	Oral hygiene : Poor <input type="checkbox"/>		Fair <input type="checkbox"/> Good <input checked="" type="checkbox"/>	

Investigation Ordered

SpO<sub>2</sub> → 99%

BMI → 41.5

Chief complains past medical / surgical history. Diagnosis, Treatment Plan, Current Medications & Follow - up advice :

**Patient Education (Patient Is Briefed on Following) Cost May Vary In Course Of Disease**

Proposed Care Plan    Yes <input type="checkbox"/> No <input type="checkbox"/>	Expected Outcome :    Yes <input type="checkbox"/> No <input type="checkbox"/>
Expected Cost :    Yes <input type="checkbox"/> No <input type="checkbox"/>	Admission Advice :    Yes <input type="checkbox"/> No <input type="checkbox"/>

Consultant Signature      Date :  
Time