

भारतीय निर्वाचन आयोग
 ELECTION COMMISSION OF INDIA
 IDENTIFICATION CARD

भारतीय निर्वाचन आयोग
 भारतीय निर्वाचन आयोग

WAO3825993E




नाम : सुदीप शर्मा
 पता : सुदीप शर्मा
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 पता : सुदीप शर्मा

जन्म तिथि : 11/05/1974
 लिंग : पुरुष
 आयु : 35 वर्ष

WAO3825993E

202, RAJTRAPATI DI WAWAN
 SOCIETY, DWARKA PLOT NO.3
 SECTOR 10, DELHI

Address:

Date: 13/01/2014

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pt - Sudeep Bhatt
Age - 47 yr / male.

No fresh complaints.

Wt: PS
CNS
CVS } NAD.

B.P - 120/80 mmHg.

SpO₂ - 99% on RA

PR - 81/min.

WT - 79 kg.

patients all findings are
within normal limit.



25/10/24
4:15 PM



BOOK APPOINTMENT



25-10-2024 10:52:07 AM

ID: 24

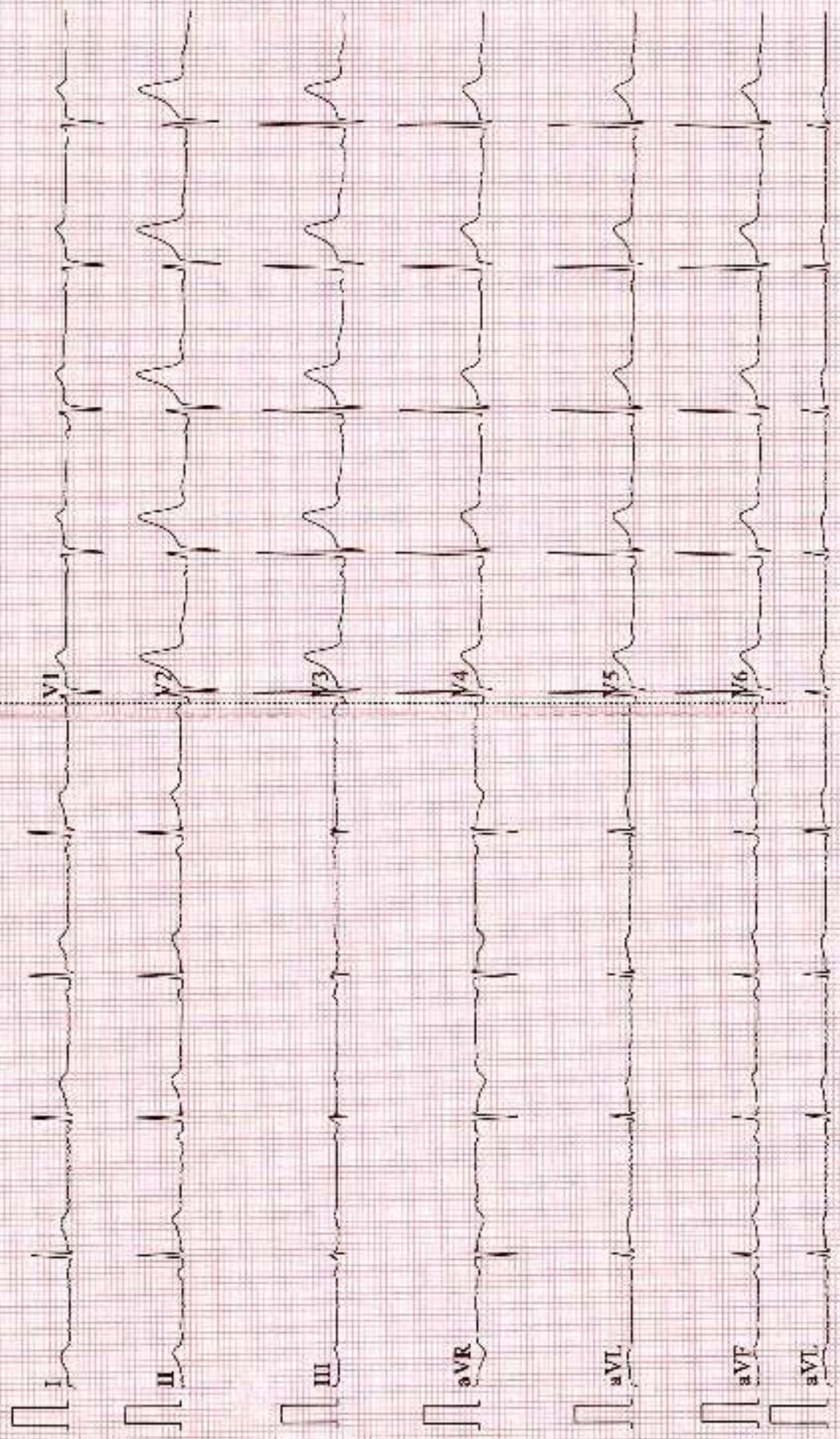
sudeep Bhatt
Male 47Years
Reg. No. :


Diagnosis Information:

Sinus bradycardia
Normal ECG except for rate

Dr. ANIL SAHOO
MD, PGDCC
Regn. No. 33201

Report Confirmed by:



Patient Name : Mr. SUDEEP BHATT	Reg No. : 4323UHID23DL	Lab ID. : 4977/OPDPB24DL
Age / Gender : 47Y / Male	Date : 25-Oct-2024	
Mobile No. : 9810918855	Manual No.	Collected : 25-Oct-2024 10.09
Refd. By : Dr. INSURANCE		Received : 25-Oct-2024 10.42
Sample Type : Plasma(Sodium fluoride)	Sample ID : 246989	Report : 25-Oct-2024 13.28

TEST NAME	RESULT	UNIT	RANGE	METHOD
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BIOCHEMISTRY

BLOOD SUGAR FASTING	95.6	mg/dl	74-100	GOD-POD
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INTERPRETATION:

American Diabetes Association (ADA) Diabetes Guidelines

Criteria for Diabetes Mellitus Diagnosis:

Fasting plasma glucose >126.0 mg/dl (Fasting is defined as no caloric intake for >8 hours) or

2-hr plasma glucose >200 mg/dl after glucose load or

HbA1c >= 6.5% or

Random Plasma glucose >200 mg/dl

Impaired Fasting Glucose


Fasting glucose >=100mg/dl but <126 mg/dl

-----End of Report-----



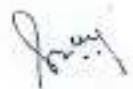
Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252
Lab Technician : chand



Patient Name : Mr. SUDEEP BHATT	Reg No. : 4323/UHID23DL	Lab ID. : 4977/OPDPB24DL
Age / Gender : 47Y / Male	Date : 25-Oct-2024	
Mobile No. : 9810918855	Manual No.	Collected : 25-Oct-2024 10.09
Refd. By : Dr. INSURANCE		Received : 25-Oct-2024 10.42
Sample Type : EDTA whole blood	Sample ID : 246889	Report : 25-Oct-2024 13.28

TEST NAME	RESULT	UNIT	RANGE	METHOD
HEAMATOLOGY				
COMPLETE BLOOD COUNT				
HEMOGLOBIN	15.1	g/dl	13.0 - 17.0	Colorimetric
TOTAL LEUCOCYTE COUNT	4.0	10 ³ /uL	4.0-11.0	Electrical impedance
DIFFERENTIAL LEUCOCYTE COUNT(DLC)				
Neutrophil	55	%	40-75	Electrical impedance
Lymphocyte	34	%	20-45	Electrical impedance
Eosinophil	04	%	01-06	Microscopy
Monocyte	07	%	2-10	Microscopy
Basophil	00	%	0-2	Microscopy
ESR	13	mm/1sthr	0-20	Westergren's
RBC COUNT	4.76	mill/cumm	4.50 - 5.50	Electrical impedance
PCV	43	%	40 - 50	Calculated
MCV	91.10	fL	83.00 - 101.00	Calculated
MCH	31.8	Picogram	27.0 - 32.0	Calculated
MCHC	34.90	gm/dl	31.50 - 34.50	Calculated
PLATELET COUNT	120	10 ³ /uL	150 - 410	Electrical impedance

-----End of Report-----




Dr. Sangeeta B
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DMC/25252

Lab Technician : charud



BOOK APP VISIT



Patient Name : Mr. SUDEEP BHATT	Reg No. : 4323/UHID23DL	Lab ID. : 4977/OPDPB24DL
Age / Gender : 47Y / Male	Date : 25-Oct-2024	
Mobile No. : 9810918855	Manual No.	Collected : 25-Oct-2024 10.09
Refd. By : Dr. INSURANCE		Received : 25-Oct-2024 10.42
Sample Type : EDTA whole blood	Sample ID : 246989	Report : 25-Oct-2024 13.26

TEST NAME	RESULT	UNIT	RANGE	METHOD
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HEAMATOLOGY

HbA1c (GLYCOSYLATED HB)	5.4	%	4-6	PEIT
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Metabolically healthy patients : 4.5 - 6.0 %
6.1 - 6.5 %

Good control :

Fair control : 6.6 - 7.0 %

Poor control : Above - >7.0 %


COMMENTS: HbA1c is an indicator of glycaemic control. HbA1c represents average glycaemia over the past six to eight weeks. Glycation of hemoglobin occurs over the entire 120 day life span of the red blood cell, but with in this 120 days. Recent glycaemia has the largest influence on the HbA1c value. Clinical studies suggest that a patient in stable control will have 50% of their HbA1c formed in the month before sampling, 25% in the month before that, and the remaining 25% in months two to four. Estimated Average Glucose mg/dl = (HbA1c x 35.6) - 77.3. Correlation between HbA1c and Mean Plasma Glucose (MPG) is not "perfect" but rather only this means that to predict or estimate average glucose from Hb-A1c or vice-versa is not "perfect" but gives a good working ballpark estimate. Afternoon and evening results correlate more closely to HbA1c than morning results, perhaps because morning fasting glucose levels vary much more than daytime glucose levels, which are easier to predict and control. As per IFCC recommendations 2007, HbA1c being reported as above maintaining traceability to both IFCC (mmol/mol) & NGSP (%) units.

-----End of Report-----



Dr. Sangeeta B
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DMC/25252
Lab Technician : Chand



Patient Name : Mr. SUDEEP BHATT	Reg No. : 4323/UH/D23DL	Lab ID. : 4977/OPDP824DL
Age / Gender : 47Y / Male	Date : 25-Oct-2024	
Mobile No. : 9810918855	Manual No.	Collected : 25-Oct-2024 10.09
Refd. By : Dr. INSURANCE		Received : 25-Oct-2024 10.42
Sample Type : Serum	Sample ID : 246959	Report : 25-Oct-2024 13.26

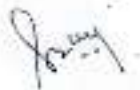
TEST NAME	RESULT	UNIT	RANGE	METHOD
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BIOCHEMISTRY

KIDNEY FUNCTION TEST

Blood Urea	25.9	mg/dl	15.0-45.0	urease-GLDH
Serum Creatinine	1.1	mg/dl	0.7-1.3	Jaffes Kinetic
Serum Uric Acid	8.40	mg/dl	2.5-7.2	Uricase
Total Protein				
PROTEIN	6.50	g/dl	6.4-8.3	Biuoret
ALBUMIN	4.3	g/dl	3.4-4.8	Beg
GLOBULIN	2.20	g/dl	2.3-3.5	
A/G RATIO	1.95			
Calcium	9.0	mg/dl	8.6-10.2	Arsenazo
Sodium	141.0	mmol/L	136.0-149.0	ISE Indirect
Potassium	4.2	mmol/L	3.5-5.5	ISE Indirect
Chloride	102.0	mmol/L	98.0-109.0	ISE Indirect

-----End of Report-----




Dr. Sangeeta B
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DMC/25252
Lab Technidan : chand



BOOK APP LINK



Patient Name : Mr. SUDEEP BHATT	Reg No. : 4323/UHID23DL	Lab ID. : 4977/OPDP624DL
Age / Gender : 47Y / Male	Date : 25-Oct-2024	
Mobile No. : 9810918855	Manual No. :	Collected : 25-Oct-2024 10.09
Refd. By : Dr. INSURANCE		Received : 25-Oct-2024 10.42
Sample Type : Serum	Sample ID : 246989	Report : 25-Oct-2024 13.28

TEST NAME	RESULT	UNIT	RANGE	METHOD
BIOCHEMISTRY				
LIPID PROFILE				
Total Cholesterol	295.00	mg/dl	123-199	CHOD-PAP
Triglycerides	325.1	mg/dl	40-160	Gpo
HDL Cholesterol Direct	44.2	mg/dl	35.3-79.5	Direct
Vldl	65	mg/dl	4.7-22.1	
LDL Cholesterol Direct	185.7	mg/dl	63-129	
Total Cholesterol/HDL Ratio	6.7		0.0-4.97	
LDL/HDL Ratio	4.2		0.0-3.55	

INTERPRETATION:-

	Total cholesterol	LDL cholesterol	Triglycerides
Acceptable/Low Risk	: < 200 mg/dl	<130 mg/dl	<150 mg/dl
Borderline High Risk	: 200-239 mg/dl	130-159 mg/dl	150-199 mg/dl
High Risk	: > 240 mg /dl	> 160 mg/dl	200-499 mg/dl
Very High			>500 mg/dl

-----End of Report-----


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DCP, DNB, PATHOLOGY,
DMC/25252

Lab Technician : chand

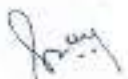


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Patient Name : Mr. SUDEEP BHATT	Reg No. : 4323/UHID23DL	Lab ID. : 4977/OPDPB24DL
Age / Gender : 47Y / Male	Date : 25-Oct-2024	
Mobile No. : 9610918855	Manual No.	Collected : 25-Oct-2024 10.09
Refd. By : Dr. INSURANCE		Received : 25-Oct-2024 10.42
Sample Type : Serum	Sample ID : 246989	Report : 25-Oct-2024 13.26

TEST NAME	RESULT	UNIT	RANGE	METHOD
BIOCHEMISTRY				
LIVER FUNCTION TEST				
Serum Bilirubin				
Total Bilirubin	1.18	mg/dl	0.0-2.0	Diazo
Direct Bilirubin	0.40	mg/dl	0-0.4	Diazo
Indirect Bilirubin	0.78	mg/dl	0-0.8	Calculated
Total Protein				
PROTEIN	6.50	g/dl	6.4-8.3	Buret
ALBUMIN	4.3	g/dl	3.4-4.8	Bcg
GLOBULIN	2.22	g/dl	2.3-3.5	
A/G RATIO	1.93			
SGOT	35	U/L	0-35	IFCC
SGPT	52	U/L	0.0-45	IFCC
Gamma GT	76.1	U/L	0-55	Glupa-c
Alkaline Phosphatase	70	U/L	53-128	Amp
-----End of Report-----				




Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252
Lab Technician : chand



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Patient Name : Mr. SUDEEP BHATT	Reg No. : 4323/UH/D23DL	Lab ID. : 4877/OPDPB24DL
Age / Gender : 47Y / Male	Date : 25-Oct-2024	
Mobile No. : 9810918855	Manual No.	Collected : 25-Oct-2024 12.31
Refd. By : Dr. INSURANCE		Received : 25-Oct-2024 12.32
Sample Type : URINE	Sample ID : 246089	Report : 25-Oct-2024 13.26

TEST NAME	RESULT	UNIT	RANGE	METHOD
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CLINICAL PATHOLOGY

URINE ROUTINE

MICROSCOPY

PHYSICAL EXAMINATION

QUANTITY	20.00	ml	10-30	
COLOUR	PALE YELLOW			
TRANSPARENCY	CLEAR			
SPECIFIC GRAVITY	1.015		1.015-1.025	
PH	6.0		5.5 - 7	

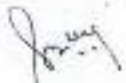
CHEMICAL EXAMINATION

PROTEIN	NIL
SUGAR	NIL

MICROSCOPIC EXAMINATION

PUS CELLS	2-3	/hpf		MICROSCOPIC
RBC'S	NIL			
CASTS	NIL			
CRYSTALS	NIL			
EPITHELIAL CELLS	0-1			
BACTERIA	NIL			
OTHERS	NIL			
KETONE	NIL			

-----End of Report-----



Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252
Lab Technician : chand



2024/10/25 12:31



Patient Name :	Mr. SUDEEP BHATT	Radiology No. :	4977/OPDPB24DL
Referred By :	Dr. INSURANCE	Date :	25-Oct-2024
UHID No. :	4323/UHID23DI	Age/Sex :	47Y Male

ECHO-DOPPLER REPORT

Final Interpretation

1. No RWMA, LVEF-60%
2. Normal cardiac chamber
3. Normal cardiac valves
4. Normal MIP
5. IVC Normal in size and normal respiratory variation
6. No CLOT/ VEG/PE

M-Mode/2-D Description

Left Ventricle: No RWMA, LVEF-60%

- **Left Atrium:** Normal
- **Right Atrium:** Normal
- **Right Ventricle:** Normal
- **Aortic Valve:** Normal
- **Mitral Valve:** Normal
- **Tricuspid valve:** Normal
- **Pulmonary Valve:** Normal
- **Main Pulmonary artery & its branches:** Appear normal in size.
- **Pericardium:** Normal

Measurements (mm):

	Observed Values		Normal Values
Aortic root diameter	28		20-36 (22mm/M ²)
Aortic Valve Opening			15-26
Left Atrium size	31		19-40
	End Diastole	End Systole	Normal Values
Left Ventricle size	40	25	(ED= 37-56)
Inter ventricular Septum	10	12	(ED= 6-12)
Posterior Wall Thickness	8	12	(ED= 5-10)
LV Ejection Fraction (%)	60%		55%-80%



BOOK APPOINTMENT



Patient Name	: Mr. SUDEEP BHATT	Radiology No.	: 4977/CPDPB24DL
Referred By	: Dr. INSURANCE	Date	: 25-Oct-2024
UHD No.	: 4323/UJTD23DL	Age/Sex	: 47Y Male

Doppler velocities (cm/sec)

Pulmonary valve		Aortic valve	
Max velocity	67	PG/MG	115
Mitral valve		Tricuspid valve	
E	88	Max PG =	Max Velocity
A	58		116
DT		Mean PG =	Mean PG
E/A			5

Regurgitation

MR		TR	
Severity	nil	Severity	nil
Max Velocity		PASP	5 mm Hg
AR		PR	
Severity	nil	Severity	nil

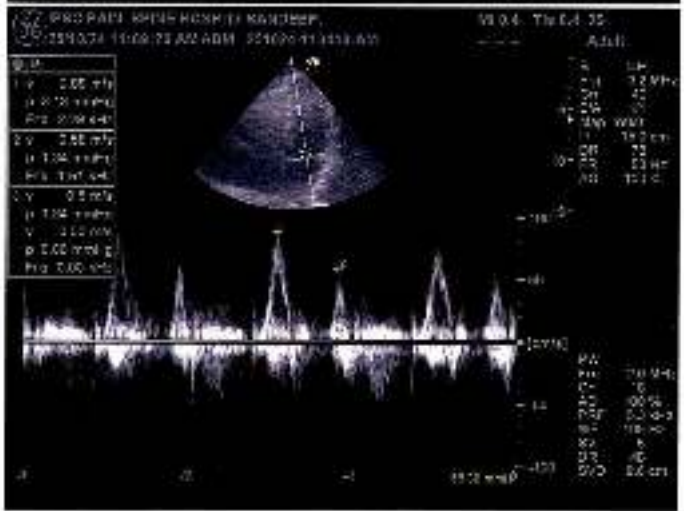
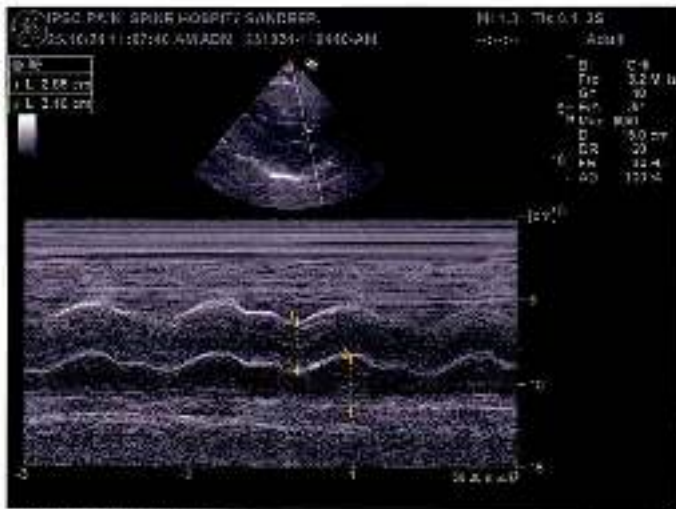
Dr. ANIL SAHOO
(Cardiology)

Dr. ANIL SAHOO
MD, PGDCC
Reg. No. 33201



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Patient Name	: Mr. SUDEEP BHATT	Radiology No.	: 4977/CPDPB24DL
Referred By	: Dr. INSURANCE	Date	: 25-Oct-2024
UHID No.	: 4323/UHID23DL	Age/Sex	: 47Y Male

ULTRASOUND OF WHOLE ABDOMAN

Convex and linear probes were used.

The liver is normal in size contour however is increased in echotexture. Intrahepatic bile ducts and CBD are not dilated. Hepatic portal veins and the IVC appear normal in caliber.

Gall bladder is distended. Few echogenic foci are seen along the GB wall having reverberation artifact suggestive of adenomyomatosis. No calculus is seen.

Pancreas is of normal size and contour with normal echotexture.

Right kidney is normal in size and position. It shows normal movements with respiration. Cortical thickness is normal.

No calculus, mass or hydronephrotic changes seen.

Right kidney measures- 111 x 41mm.

Renal artery pulsation appear normal.

Left kidney is normal in size and position .It shows normal movements with respiration. Cortical thickness is normal.

No calculus, mass or hydronephrotic changes seen.

Left kidney measures- 99 x 47mm.

Renal artery pulsation appear normal.

Spleen is of normal size and shape. Echotexture is normal. No focal lesion is seen. No evidence of retro-peritoneal lymphadenopathy/ ascites/ pleural effusion noted.

Urinary bladder does not show any calculus or mass lesion. No significant wall thickening noted.

Prostate is of normal size for age with regular contours and normal echo-texture. It measures 34 x 35 x 44mm which is equal to 28gms.

**Impressions: 1)Fatty liver grade I.
2)Adenomyomatosis.**

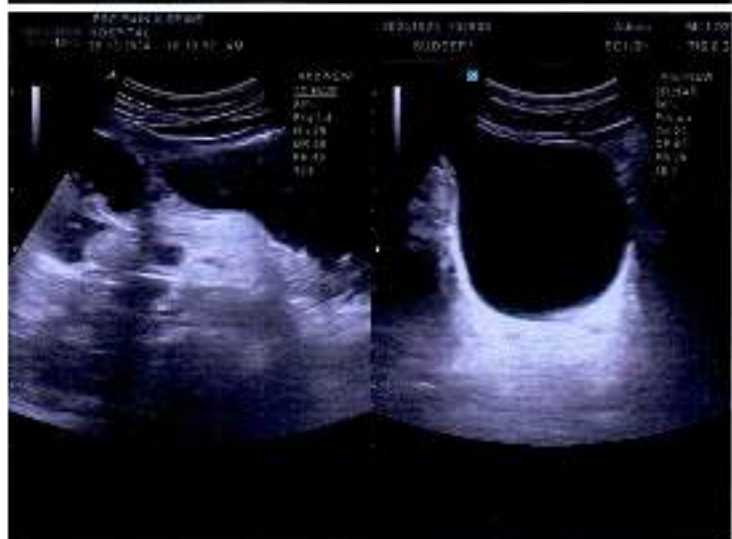
Dr. Harshita Surange

MBBS,DMRD(RADIO DIAGNOSIS)
DIPLOMA IN MSK,UCAM(Spain)
Reg.No. MCI/16522,DMC/18402



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Patient Name :	Mr. SUDEEP BHATT	Radiology No. :	4977/OPDPB24DL
Referred By :	Dr. INSURANCE	Date :	25-Oct-2024
LHID No. :	4323/LHID23DI	Age/Sex :	47Y Male

X-RAY CHEST

Indication: Routine check-up.

Image quality:-

No evidence of rotation.

PA view. Normal penetration.

Airway:- Trachea central.

Carina & bronchi are normal.

No hilar abnormality.

Lung fields:- Clear.

Cardiac:- Cardiac borders are visible.

Normal heart size.

Diaphragm:- Costophrenic angles on right & left are normal.

Cardiophrenic angles on right & left are normal.

Diaphragm portion are normal.

Bony cage:- No evidence of bony lesion/fracture seen.

No evidence of cervical ribs is seen.

Impression: No significant abnormality detected.

Please correlate clinically.



Dr. Harshita Surange
MBBS, DMRD (RADIO DIAGNOSIS)
DIPLOMA IN MSK, UCAM (Spain)
Reg. No. MCI/16522, DMC/18402



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