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TOUCHING LIVES

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VASHI

MEDICAL SUMMARY

NAME:	Mr. Suman Kumar	UHID:	
AGE:	36	DATE OF HEALTHCHECK:	23-12-2023
GENDER:	M		

HEIGHT:	174	MARITAL STATUS:	M
WEIGHT:	65.8	NO OF CHILDREN:	1.
BMI:	21.7		

C/O: Pulmonary koch's Oct - 2023

K/C/O: PTB : 2023 oct.

PRESENT MEDICATION: kochs treatment
Tab - Udiz - 20 1-0-0
Tab - Albumin - 4 4-0-0
Tab - Combutol 1-0-0.
Tab - Benadon-40 0-1/2-0.
Cap - Neurobion forte 0-1-0.

P/M/H: - No

P/S/H: - No.

ALLERGY: - no

PHYSICAL ACTIVITY: Active/ Moderate/ Sedentary

H/A: SMOKING:
ALCOHOL: No.
TOBACCO/PAN:

FAMILY HISTORY FATHER: NAD
MOTHER:

O/E:

BP: 110/80 PULSE: - 86/min

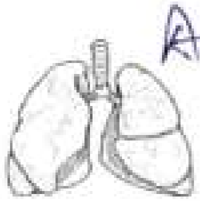
TEMPERATURE: - SCARS:

LYMPHADENOPATHY:

PALLOR/ICTERUS/CYNOSIS/CLUBBING:

OEDEMA:

S/E:
RS: AEBE



P/A: - NAD

CVS: S1 S2 +

CNS: Conscious, Oriented

Extremities & Spine: Body pain - Cramps

ENT: - NAD

Skin: - NAD

Vision:

	Without Glass		With Glass	
	Right Eye	Left Eye	Right Eye	Left Eye
FAR :				
NEAR :				
COLOUR VISION:				

• ANDHERI • COLABA • NASHIK • VASHI

Vashi : M/S. Indira Health & Lifestyle Pvt. Ltd. The Emerald, 1st Floor, Plot No. 195, Sector - 12, Besides Neel Siddhi Tower, Vashi - Navi Mumbai - 400703.
Tel.: (022) - 2788 1322 / 23 / 24 8291490000 • Email: apolloclinicvashi@gmail.com

Name:	Age:	Date of Health check-up:

Findings and Recommendation:

Findings:-

- Hb↓
- Plt↓
- UA↑
→ Ca-9C Koch

Recommendation:-

Repeat UA / CAC

- T Febu 40 [illegible]
- CT A[illegible]

Signature:

Consultant –

Dr. ANIRBAN DASGUPTA
[illegible]
Diploma Cardiology
MMC -2005/02/0920

Dr. ANIRBAN DASGUPTA
M.B.B.S., D.N.B. Medicine
Diploma Cardiology
MMC -2005/02/0920

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OPHTHALMIC EVALUATION

UHID No.: _____ Date : 23/12/23

Name : SUMAN KUMAR Age : 36y Gender : Male/Female

Without Correction :

Distance: Right Eye _____ Left Eye _____

Near : Right Eye N-6 Left Eye N-6.

With Correction :

Distance: Right Eye 6/6 Left Eye 6/6.

Near : Right Eye _____ Left Eye _____

	RIGHT					LEFT				
	SPH	CYL	AXIS	PRISM	VA	SPH	CYL	AXIS	PRISM	VA
Distance										
Near										

Colour Vision : (BE) - WNL

Anterior Segment Examination (BE) - WNL

Pupils : (BE) - WNL

Fundus : (BE) - WNL

Intraocular Pressure : _____

Diagnosis : (BE) - WNL

Advice : _____

Re-Check on _____ (This Prescription needs verification every year)

Dr. Sagorika Dey
(Consultant Ophthalmologist)
DR. SAGORIKA DEY
MBBS, DOMS
REGN NO: 2008/04/1182

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DENTAL CHECKUP

Name: Mr. Suman Kumar.	**MR NO:**
Age/Gender : 36yrs / M.	**Date:** 23/12/23.

Medical history: ☐ Diabetes ☐ Hypertension ☐ ~~NRH~~ On TB medication

EXAMINATION	UPPER RIGHT	UPPER LEFT	LOWER LEFT	LOWER RIGHT
Calculus& Stains	✓	✓	✓	✓
Mobility				
Caries (Cavities)				
a)Class 1 (Occlusal)				
b)Class 2 (Proximal)				
c)Class 5 (Cervical)				
Faulty Restoration				
Faulty Crown				
Fractured Tooth				
Root Pieces				
Impacted Tooth				
Missing Tooth	17			
Existing Denture				

TREATMENT ADVICED:

TREATMENT	UPPER RIGHT	UPPER LEFT	LOWER LEFT	LOWER RIGHT
Restoration / Filling				
Root Canal Therapy				
Crown				
Extraction				

Oral Prophylaxis: ☑ Scaling & polishing
Orthodontic Advice for Braces: ☐ Yes / ☐ No
Prosthetic Advice to Replace Missing Teeth: ☐ Denture ☐ Bridge ☑ Implant 27
Oral Habits: ☐ Tobacco ☐ Cigarette ☐ Others since ___ years
☐ Advice to quit any form of tobacco as it can cause cancer.
Other Findings: _____

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Apollo Clinic VASHI

Name	: Mr. Suman Kumar	Gender	: Male	Age	: 36 Years
UHID	: FVAH 9951.	Bill No	:	Lab No	: V-4251-23
Ref. by	: SELF	Sample Col.Dt	: 23/12/2023 08:30		
Barcode No	: 1375	Reported On	: 23/12/2023 17:59		

TEST	RESULTS		BIOLOGICAL REFERENCE INTERVAL
CBC (Complete Blood Count)-WB (EDTA)			
Haemoglobin(Colorimetric method)	**12.8**	g/dl	13 - 18
RBC Count (Impedance)	4.72	Millions/cumm.	4 - 6.2
PCV/Haematocrit(Calculated)	40.9	%	35 - 55
MCV:(Calculated parameter)	86.8	fl	78 - 98
MCH:(Calculated parameter)	27.1	pg	26 - 34
MCHC:(Calculated parameter)	31.2	gm/dl	30 - 36
RDW-CV:	**16.7**	%	11.5 - 16.5
Total Leucocyte count(Impedance)	6150	/cumm.	4000 - 10500
Neutrophils:	67	%	40 - 75
Lymphocytes:	23	%	20 - 40
Eosinophils:	**08**	%	0 - 6
Monocytes:	02	%	2 - 10
Basophils:	00	%	0 - 2
Platelets Count(Impedance method)	**1.39**	Lakhs/c.mm	1.5 - 4.5
MPV	**11.4**	fl	6.0 - 11.0
Peripheral Smear (Microscopic examination)			
RBCs:	Hypochromasia(Mild),Anisocytosis(Mild)		
WBCs:	Eosinophilia		
Platelets	**Reduced,Large platelets,Manual platelet count = 1.42 Lakhs/c.mm**		
Note:	Test Run on 5 part cell counter.		

Vasanti Gondal
Entered By

Ms Kaveri Gaonkar
Verified By

Dr. Milind Patwardhan
M.D(Path)
Chief Pathologist

End of Report
Results are to be correlated clinically

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TEST	RESULTS
Blood Grouping (ABO & Rh)-WB(EDTA) Serum	
ABO Group:	**:B:**
Rh Type:	**Positive**
Method :	Matrix gel card method (forward and reverse)
------	----------

Pooja Surve
Entered By

Ms Kaveri Gaonkar
Verified By

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M.D(Path)
Chief Pathologist

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TEST	RESULTS	BIOLOGICAL REFERENCE INTERVAL

ESR(Westergren Method)

Erythrocyte Sedimentation Rate:-	37	mm/1st hr	0 - 20

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TEST	RESULTS		BIOLOGICAL REFERENCE INTERVAL

HbA1c(Glycosylated Haemoglobin)WB-EDTA

(HbA1C) Glycosylated Haemoglobin :	5.2	%	Normal <5.7 % Pre Diabetic 5.7 - 6.5 % Diabetic >6.5 % Target for Diabetes on therapy < 7.0 % Re-evalution of therapy > 8.0 %
Mean Blood Glucose :	102.54	mg/dL	

Corelation of A1C with average glucose

A1C (%)	Mean Blood Glucose (mg/dl)
6	126
7	154
8	183
9	212
10	240
11	269
12	298

Method — High Performance Liquid Chromatography (HPLC).

INTERPRETATION

- The HbA1c levels corelate with the mean glucose concentration prevailing in the course of Pts recent history (apprx 6-8 weeks) & therefore provides much more reliable information for glycemia control than the blood glucose or urinary glucose.
- This Methodology is better then the routine chromatographic methods & also for the daibetic pts.having HEMOGLBINOPATHIES OR UREMIA as Hb varaints and uremia does not INTERFERE with the results in this methodology.
- It is recommended that HbA1c levels be performed at 4 - 8 weeks during therapy in uncontrolled DM pts.& every 3 - 4 months in well controlled daibetics .
- Mean blood glucose (MBG) in first 30 days (0-30)before sampling for HbA1c contributes 50% whereas MBG in 90 - 120 days contribute to 10% final HbA1c levels

Anushka Chavan
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TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
PLASMA GLUCOSE			
Fasting Plasma Glucose :	94	mg/dL	Normal < 100 mg/dL Impaired Fasting glucose : 101 to 125 mg/dL Diabetes Mellitus : >= 126 mg/dL (on more than one occasion) (American diabetes association guidlines 2016)
Post Prandial Plasma Glucose :	105	mg/dL	Normal < 140 mg/dL Impaired Post Prandial glucose : 140 to 199 mg/dL Diabetes Mellitus : >= 200 mg/dL (on more than one occasion) (American diabetes association guidlines 2016)
Method :	Hexokinase		

Neha More
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TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
LIPID PROFILE - Serum			
S. Cholesterol(Oxidase)	146	mg/dL	Desirable < 200 Borderline:>200-<240 Undesirable:>240
S. Triglyceride(GPO-POD)	105	mg/dL	Desirable < 150 Borderline:>150-<499 Undesirable:>500
S. VLDL:(Calculated)	21	mg/dL	Desirable <30
S. HDL-Cholesterol(Direct)	42.7	mg/dL	Desirable > 60 Borderline:>40-<59 Undesirable:<40
S. LDL:(calculated)	82.3	mg/dL	Desirable < 130 Borderline:>130-<159 Undesirable:>160
Ratio Cholesterol/HDL	**3.4**		3.5 - 5
Ratio of LDL/HDL	**1.9**		2.5 - 3.5

Alsaba Shaikh
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TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
LFT(Liver Function Tests)-Serum			
S.Total Protein (Biuret method)	7.04	g/dL	6.6 - 8.7
S.Albumin (BCG method)	4.05	g/dL	3.5 - 5.2
S.Globulin (Calculated)	2.99	g/dL	2 - 3.5
S.A/G Ratio:(Calculated)	1.35		0.9 - 2
S.Total Bilirubin (DPD):	0.26	mg/dL	0.1 - 1.2
S.Direct Bilirubin (DPD):	0.13	mg/dL	0.1 - 0.3
S.Indirect Bilirubin (Calculated)	0.13	mg/dL	0.1 - 1.0
S.AST (SGOT)(IFCC Kinetic with P5P):	40	U/L	5 - 40
S.ALT (SGPT) (IFCC Kinetic with P5P):	49	U/L	5 - 41
S.Alk Phosphatase(pNPP-AMP Kinetic):	115	U/L	40 - 129
S.GGT(IFCC Kinetic):	42	U/L	11 - 50

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TEST	RESULTS		BIOLOGICAL REFERENCE INTERVAL
	BIOCHEMISTRY		
S.Urea(Urease Method)	19.5	mg/dl	10.0 - 45.0
BUN (Calculated)	9.1	mg/dL	5 - 20
S.Creatinine(Jaffe's Method)	0.77	mg/dl	0.50 - 1.3
BUN / Creatinine Ratio	11.82		9:1 - 23:1
S.Uric Acid(Uricase Method)	**10.0***	mg/dl	3.4 - 7.0
Remarks	*** Rechecked & confirmed. Kindly Correlate Clinically**		

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TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
Thyroid (T3,T4,TSH)- Serum			
Total T3 (Tri-iodo Thyronine) (ECLIA)	2.58	nmol/L	1.3 - 3.1 nmol/L
Total T4 (Thyroxine) (ECLIA)	113.5	nmol/L	66 - 181 nmol/L
TSH-Ultrasensitive (Thyroid-stimulating hormone) Method : ECLIA	1.77	IU/ml	Euthyroid :0.35 - 5.50 IU/ml Hyperthyroid : < 0.35 IU/ml Hypothyroid : > 5.50 IU/ml

Grey zone values observed in physiological/therapeutic effect.

Note:

T3 :

1. Decreased values of T3 (T4 and TSH normal) have minimal Clinical significance and not recommended for diagnosis of hypothyrodism.
2. Total T3 and T4 values may also be altered in other conditions due to changes in serum proteins or binding sites ,Pregnancy, Drugs (Androgens,Estrogens,O C pills, Phenytoin) etc. In such cases Free T3 and free T4 give corrected Values.
3. Total T3 may decrease by < 25 percent in healthy older individuals

T4 :

1. Total T3 and T4 Values may also be altered in other condition due to changes in serum proteins or binding sites, Pregnancy Drugs (Androgens,Estrogens,O C pills, Phenytoin), Nerphrosis etc. In such cases Free T3 and Free T4 give Corrected values.

TSH :

1. TSH Values may be transiently altered because of non thyroidal illness like severe infections,liver disease, renal and heart failure. Severe burns, trauma and surgery etc.
2. Drugs that decrease TSH values e,g L dopa, Glucocorticoids.
3. Drugs that increase TSH values e.g. Iodine,Lithium, Amiodarone

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TEST	RESULTS	BIOLOGICAL REFERENCE INTERVAL

URINE REPORT

PHYSICAL EXAMINATION		
QUANTITY	30 mL	
COLOUR	Pale Yellow	
APPEARANCE	Clear	Clear
SEDIMENT	Absent	Absent
CHEMICAL EXAMINATION(Strip Method)		
REACTION(PH)	7.0	4.6 - 8.0
SPECIFIC GRAVITY	1.015	1.005 - 1.030
URINE ALBUMIN	Absent	Absent
URINE SUGAR(Qualitative)	Absent	Absent
KETONES	Absent	Absent
BILE SALTS	Absent	Absent
BILE PIGMENTS	Absent	Absent
UROBILINOGEN	Normal(<1 mg/dl)	Normal
OCCULT BLOOD	Absent	Absent
Nitrites	Absent	Absent
MICROSCOPIC EXAMINATION		
PUS CELLS	Occasional	0 - 3/hpf
RED BLOOD CELLS	Nil /HPF	Absent
EPITHELIAL CELLS	1 - 2 / hpf	3 - 4/hpf
CASTS	Absent	Absent
CRYSTALS	Absent	Absent
BACTERIA	Absent	Absent

Anushka Chavan
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Chief Pathologist

End of Report
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Suman, Kumar
9951

Male

36 Years

23.12.2023 9:24:07
Apollo Clinic
1st Flr,The Emerald,Sector-12,
Vashi, Mumbai-400703

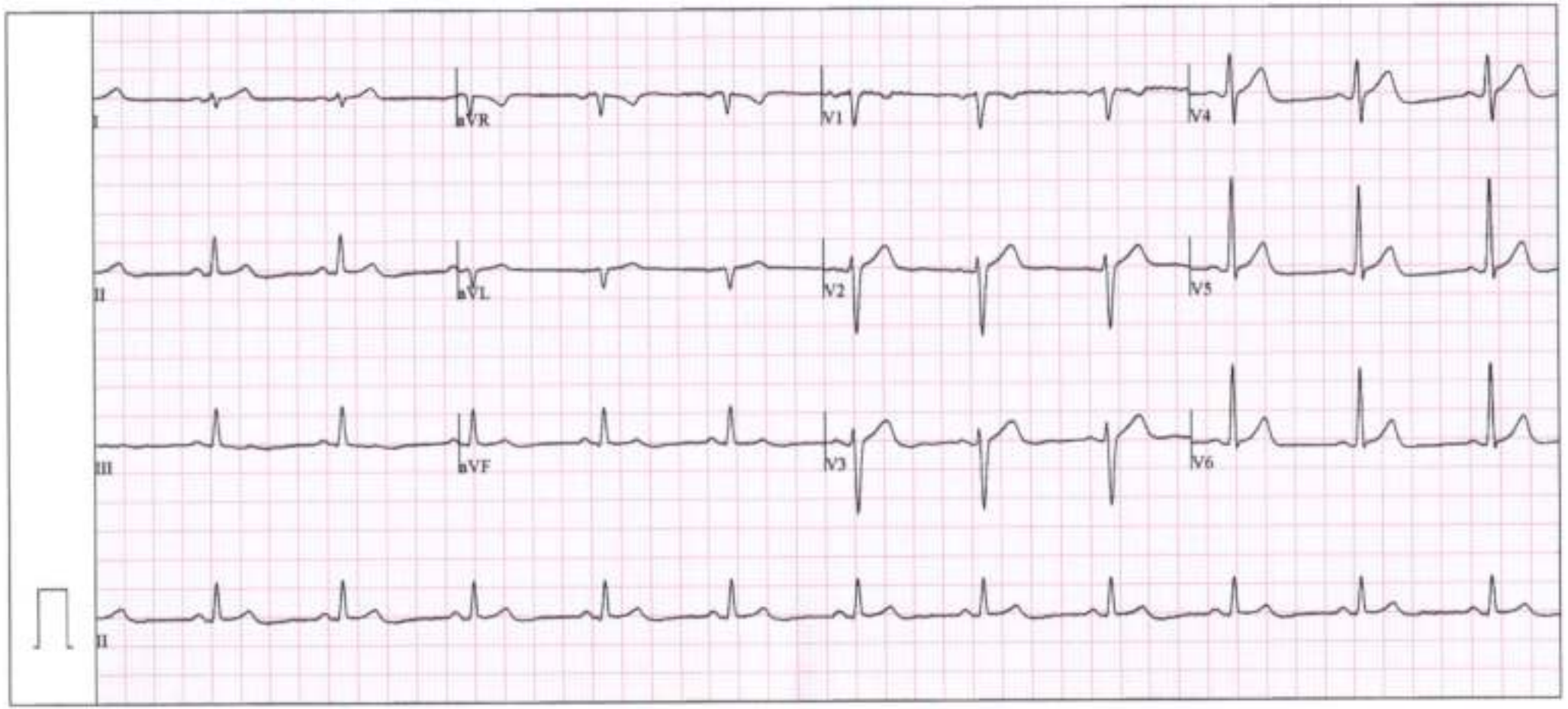
69 bpm
-- / -- mmHg

NORMAL ECG

QRS :	82 ms
QT / QTcBaz :	344 / 368 ms
PR :	136 ms
P :	100 ms
RR / PP :	870 / 869 ms
P / QRS / T :	60 / 86 / 21 degrees

Normal sinus rhythm
Normal ECG

Dr ANIRBAN DASGUPTA
M.B.,B.S., D.N.B. Medicine
Diploma Cardiology
MMC -2005/02/0920



GE MAC2000 1.1 12SL™ v241 25 mm/s 10 mm/mV ADS 0.56-20 Hz 50 Hz Unconfirmed 4x2.5x3_25_R1 1/1

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PATIENT'S NAME	SUMAN KUMAR	AGE :- 36Y/M
UHID	9951	DATE :- 23-12-23

2D Echo and Colour Doppler Report

All cardiac chambers are normal in dimension

No obvious resting regional wall motion abnormalities (RWMA)

Interatrial and Interventricular septum – Appears Normal

Valves – Structurally normal

Good biventricular function.

IVC is normal.

Pericardium is normal.

Great vessels - Origin and visualized proximal part are normal.

No coarctation of aorta.

Doppler study

Normal flow across all the valves.

No pulmonary hypertension.

No diastolic dysfunction.

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Measurements

Aorta annulus	18 mm
Left Atrium	28 mm
LVID(Systole)	21 mm
LVID(Diastole)	39 mm
IVS(Diastole)	09 mm
PW(Diastole)	10 mm
LV ejection fraction.	55-60%

Conclusion

- Good biventricular function
- No RWMA
- Valves – Structurally normal
- No diastolic dysfunction
- No PAH

Dr. ANIRBAN DASGUPTA
M.B.B.S., D.N.B. Medicine
Diploma Cardiology
MMC -2005/02/0920

Performed by: Dr. Anirban Dasgupta
D.N.B. Internal Medicine, Diploma Cardiology (PGDCC-IGNOU).

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PATIENT'S NAME	SUMAN KUMAR	AGE :- 36Y/M
UHID	9951	DATE :-.23 Dec. 23

X-RAY CHEST PA VEIW

OBSERVATION:

Patient is in positional obliquity.
Illdefined infiltrative densities in left upper and middle lobe .
Both hila are normal.
Bilateral cardiophrenic and costophrenic angles are normal.
The trachea is central.
Aorta appears normal.
The mediastinal and cardiac silhouette are normal.
Soft tissues of the chest wall are normal.
Bony thorax is normal.

IMPRESSION:

- **Left sided koch's infection.**

DR.CHHAYA S. SANGANI
CONSULTANT SONOLOGIST
Reg No. 073826

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Apollo

Apollo Clinic
VASHI

PATIENT'S NAME	SUMAN KUMAR	AGE :- 36y/M
UHID NO	9951	23 Dec 2023

USG WHOLE ABDOMEN

LIVER is normal in size, shape and echotexture. No evidence of any focal lesion. The portal vein appears normal & shows normal hepatopetal flow. No evidence of intra-hepatic biliary duct dilatation.

Gall Bladder appears well distended with normal wall thickness. There is no calculus or pericholecystic collection or free fluid noted. CBD appears normal.

Visualised parts of head & body of pancreas appear normal. PD is not dilated.

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

Both kidneys are normal in size, shape and echotexture with normal parenchymal reflectivity and maintained cortico-medullary differentiation. No hydronephrosis or calculi or mass seen.
RIGHT KIDNEY measures 10.2 x 4.0 cm. **LEFT KIDNEY** measures 11.4 x 4.2 cm.

Urinary Bladder is adequately distended; no e/o any obvious wall thickening or mass or calculi seen.

PROSTATE is normal in size, shape & echotexture.

Visualised bowel loops appear normal. There is no free fluid seen.

IMPRESSION –

- **No significant abnormality detected.**

THIS REPORT IS NOT TO BE USED FOR MEDICOLEGAL PURPOSE.THE CONTENTS OF THIS REPORT REQURE CLINICAL CO-RELATION BEFORE ANY APPLICATION.

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