

Patient Name Mr Bisam Singh MRN : 160366 Age 48 Sex M Date/Time 22/01/24

Investigations : (Please Tick)

Mob No.

- CBC
- ESR
- CRP
- S-Vit D3
- S-Vit B12
- RBS
- B Sugar - F/PP
- HbA1C
- LF_r/KFT
- PT
- INR
- RA Factor
- Anti CCP
- HLA B27
- ANA
- HIV
- HBsAg
- Anti HCV

H-173
W-86
BP-124/78
P-84

Physician reference

[Signature]
Dr. Bhawna Garg
MRS. MRS. PUSHA
BSc. (B) - ANESTHESIA
Senior Medical Superintendent
Ratan Jyoti Netralaya Hospitals

Vitals

- B.P.
- P.R.
- SPO₂
- Temp

Medical Illness

- Hypertension
- Diabetes
- Thyroid
- Cardiac Disease
- Drug Allergies

Next Appointment/Follow up

Signature :

Patient NAME : Mr.BIRAM SINGH BHADANA
Age/Gender : 48 Y O M O D /M
UHID/MR NO : ILK.00037386
Visit ID : ILK.109712
Ref Doctor : Dr.ARCOFEMI HEALTHCARE LIMITED

Collected : 22/Jan/2024 09:19AM
Received : 22/Jan/2024 09:52AM
Reported : 22/Jan/2024 10:42AM
Status : Final Report
Client Name : INSTA

DEPARTMENT OF HEMATOLOGY

COMPLETE BLOOD COUNT- CBC / HAEMOGRAM , WHOLE BLOOD EDTA

Haemoglobin (Hb%)	15.0	gm%	14.0-17.0	Cyanmeth
P.C.V (Hematocrit)	45.0	%	40-54	Cell Counter
RBC Count	5.3	Mill./cu mm	4.00-5.50	Cell Counter
Mean Corpuscular Volume(MCV)	84.4	fL	76-96	Calculated
Mean Corpuscular Hb. (MCH)	28.1	pg	27.0-32.0	Calculated
Mean Corp. Hb Conc.(MCHC)	33.3	g/dl	30.0-35.0	Calculated
RDW	13.7	%	11-16	Calculated
Total WBC count (TLC)	7,400	/cu mm	4000-11000	Cell Counter

Differential Count by Flowcytometry/Microscopy

Neutrophils	58.2	%	50-70	Cell Counter
Lymphocytes	29.7	%	20-40	
Monocytes	6.9	%	01-10	Cell Counter
Eosinophils	4.6	%	01-06	Cell Counter
Basophils	0.7	%	00-01	Cell Counter

Absolute Leucocyte Count

Neutrophil (Abs.)	4,304	per cumm	2000 - 8000	Calculated
Lymphocyte (Abs.)	2194	per cumm	600-4000	Calculated
Monocyte (Abs.)	508	per cumm	0-600	Calculated
Eosinophil (Abs.)	337	per cumm	40-440	Calculated
Basophils (Abs.)	50	per cumm	0-110	Calculated
Platelet Count	2.80	Lac/cmm	1.50-4.00	Cell Counter

ERYTHROCYTE SEDIMENTATION RATE (ESR)

Erythrocyte Sedimentation Rate (ESR)	10	mm 1st hr.	0-20	Wester Green
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SIN NO : 10430098

Ashok Kumar

DR. ASHOK KUMAR
M.D. (PATH)

Patient NAME : Mr.BIRAM SINGH BHADANA
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DEPARTMENT OF HEMATOLOGY

BLOOD GROUPING(A,B,O) AND RH FACTOR , WHOLE BLOOD EDTA

Blood Grouping	B			Slide/Tube Agglutination
Rh (D) Type	POSITIVE			Slide/Tube Agglutination

BLOOD PICTURE - PERIPHERAL SMEAR EXAMINATION , WHOLE BLOOD EDTA

RBC'S : Normocytic Normochromic RBC's.
No cytoplasmic inclusions or hemoparasite seen.

WBC'S : Normal in number , morphology and distribution. No toxic granules seen.
No abnormal cell seen.

PLATELETS : Adequate on smear .

IMPRESSION ; NORMOCYTIC NORMOCHROMIC BLOOD PICTURE.

Page 2 of 10



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A. Ashok Kumar

DR. ASHOK KUMAR
M.D. (PATH)

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DEPARTMENT OF BIOCHEMISTRY-ROUTINE

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE - FASTING (FBS) , NAF PLASMA

Fasting Glucose	82.0	mg/dL	65-110	God - Pod
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Ref.for Biological Reference Intervals: American Diabetic Assosiation.

GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) , FLUORIDE PLASMA

Post Prandial Glucose	92.0	mg/dL	90-140	2hrs. after...gm glucose/lunch
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Ref.for Biological Reference Intervals: American Diabetic Assosiation.



SIN NO : 10430098,

(Signature)

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DEPARTMENT OF BIOCHEMISTRY-ROUTINE

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLYCOSYLATED HAEMOGLOBIN (GHB/HBA1C) , WHOLE BLOOD EDTA

Glycosylated Haemoglobin HbA1c	5.8	%	Normal: <5.7 Pre-Diabetes: 5.7-6.4 Diabetes: 6.5	NEPHELOMETRY
Approximate mean plasma glucose	121.19			Calculated

Ref for Biological Reference Intervals: American Diabetes Association,

INTERPRETATION:

The A1C test measures your average blood glucose for the past 2 to 3 months. Diabetes is diagnosed at an A1C of greater than or equal to 6.5%.

Therapeutic goals for glycaemic control (ADA)

-Adults:

- Goal of therapy: <7.0% HbA1c
- Action suggested: >8.0% HbA1c

-Pediatric patients:

- Toddlers and preschoolers: <8.5% (but >7.5%)
- School age (6-12 years): <8%
- Adolescents and young adults (13-19 years): <7.5%

Page 4 of 10



SIN NO : 10450098

A.K. Pajong

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M.D. (PATH)

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DEPARTMENT OF BIOCHEMISTRY-ROUTINE

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE KIDNEY PROFILE (RFT/KFT) , SERUM				
Urea	15.69	mg/dL	13.0-43.0	Urease
Creatinine	0.6	mg/dL	0.5-1.3	Enzymatic
Uric Acid	5.7	mg/dL	3.5-7.2	Urease
Sodium	131.0	Meq/L	135-155	Direct ISE
Potassium	4.1	Meq/L	3.5-5.5	Direct ISE
Chloride	98.0	mmol/L	96-106	Direct ISE
Calcium	9.3	mg/dL	8.6-10.0	OCPC
Phosphorous	3.4	mg/dL	2.5-5.6	PMA Phenol
BUN	7.33	mg/dL	6.0-20.0	Reflect Spectrophoto

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RJN Apollo Spectra Hospitals

18, Vikas Nagar, Near Sai Baba Temple, Gwalior - 474009 (M.P.) Ph.: 0751-2454600, Mob. : 8269663137, Email: ipc.rjn@gmail.com

• Results may vary from lab to lab and from time to time for the same parameter for the same patient • Assays are performed in accordance with standard procedures.
• In case of disparity test may be repeated immediately. • This report is not valid for medico legal purpose.

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DEPARTMENT OF BIOCHEMISTRY-ROUTINE

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIPID PROFILE , SERUM

Type OF Sample	SERUM			
Total Cholesterol	155.0	mg/dl	up to 200	End Point
Total Triglycerides	107.0	mg/dL	Borderline High Risk : 150-199 High Risk: 200-499 Very High Risk: >500	End Point
HDL Cholesterol	33.0	mg/dL	Optimal: >55 Border Line High Risk: 35-55 High Risk:- <35	Reflect Spectrothoto
Non - HDL Cholesterol	122	mg/dL	<130	
LDL Cholesterol	100.6	mg/dL	49-172	Reflect Spectrothoto
VLDL Cholesterol	21.4	mg/dL	5.0-40.0	Reflect Spectrothoto
Chol / HDL Ratio	4.7		Low Risk : 3.3-4.4 Average Risk : 4.5-7.1 Moderate Risk : 7.2-11.0 High Risk : >11.0	CALCULATED

Page 6 of 10



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DEPARTMENT OF BIOCHEMISTRY-ROUTINE

Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) WITH GGT , SERUM				
Total Bilirubin	0.5	mg/dL	0.2-1.2	Jendrassik-Grof
Direct Bilirubin	0.1	mg/dL	0.0-0.3	Jendrassik-Grof
Indirect Bilirubin	0.4	mg/dL	0.0-0.9	Calculated
SGOT / AST	19.0	U/L	1-30	UV Kinetic (IFCC)
SGPT / ALT	25.0	U/L	1-45	UV Kinetic (IFCC)
Alkaline Phosphatase	53.0	U/L	43-115	PNPP
Gamma Glutamyl Transferase (GGT)	30.0	U/L	0.0-55.0	Reflect Spectrophoto
Total Protein	6.7	g/dl	6.4-8.3	Biuret
Albumin	4.0	g/dL	3.5-5.2	BCG
Globulin	2.7	g.dl	2.0-3.5	Calculated
A/G Ratio	1.48	%	1.0-2.3	Calculated



SIN NO: 10430098

A.K. Rajong

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DEPARTMENT OF BIOCHEMISTRY-SPECIAL

Test Name	Result	Unit	Bio. Ref. Range	Method
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PROSTATE SPECIFIC ANTIGEN (TOTAL) - PSA , SERUM

Total PSA	1.50	ng/ml	0.0-4.0	CLIA
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NOTE :-

P.S.A is a highly specific for prostate tissue and may be increased in prostate cancer, benign prostate hyperplasia (BPH) and prostatitis. At present a cut off 4.1 ng/ml is used for prostate cancer screening.
 PSA values greater than 10.0 ng/ml are highly predictive of cancer.
 PSA levels by itself can not be used to determine whether a patient has Prostate cancer confined to the organ.
 Determination of Free PSA along with total PSA is useful in the differentiation of Prostate cancer from benign condition.
 After radical prostatectomy, serum PSA levels are (< 0.2 ng/ml), 93% of patients with undetectable serum PSA concentration have no clinical tumour recurrence.

Comments:-

1. False negative / positive results are observed in patients receiving mouse monoclonal antibodies for diagnosis or therapy.
2. PSA total and free levels may appear consistently elevated/ depressed due to the interference by heterophilic antibodies and nonspecific protein binding.
3. Results obtained with different assay kits cannot be used interchangeably.
4. All results should be correlated with clinical findings and result of other investigations.



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DEPARTMENT OF BIOCHEMISTRY-SPECIAL

Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE-I , SERUM				
Trilodothyronine Total (TT3)	1.28	ng/dL	0.6-1.8	Chemilluminescence
Thyroxine (TT4)	8.73	µg/dL	4.5-10.9	Chemilluminescence
Thyroid Stimulating Hormone (TSH)	3.117	µIU/ml	0.35-5.50	Chemilluminescence

COMMENT :- Above mentioned reference ranges are standard reference ranges.

AGE RELATED GUIDELINES FOR REFERENCE RANGES FOR TSH

TSH	NEW BORN	INFANT	CHILD	ADULT
(u IU/ml)	0.52-38.9	1.7-9.1	0.7-6.4	0.3-5.6

PREGNANCY RELATED GUIDELINES FOR REFERENCE RANGES FOR TSH

TSH	1st Trimester	2nd & 3rd Trimester
(u IU/ml)	0.2 - 2.5	0.3 - 3.0

NOTE: TSH levels are subject to circadian variation, reaching peak levels between 2-4 AM and at a minimum between 6-10 PM. Dose and time of drug intake also influence the test result.

Ultrasensitive kits used.

Serum T3/ FT3 , T4/FT4 and TSH measurements form three components of thyroid screening panel.

- Primary hyperthyroidism is accompanied by elevated serum T3 & T4 values alongwith depressed TSH level.
- Primary hypothyroidism is accompanied by elevated serum T3 & T4 values & elevated serum TSH level.
- Normal T3 & T4 levels with high TSH indicate mild / subclinical HYPOTHYROIDISM.
- slightly elevated T3 levels may be found in pregnancy and in estrogen therapy while depressed levels may be encountered in severe illness, malnutrition, renal failure and during therapy with drugs like propranolol .
- Although elevated TSH levels are nearly always indicative of primary hypothyroidism. Rarely they can result from TSH secreting pituitary tumours (secondary hyperthyroidism).



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DEPARTMENT OF CLINICAL PATHOLOGY

Test Name	Result	Unit	Bio. Ref. Range	Method
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CUE - COMPLETE URINE ANALYSIS , URINE

Physical Examination

Colour	STRAW			Visual
Appearance	Clear			Visual
pH	6.0		5.0-7.5	Dipstick
Specific Gravity	1.020		1.002-1.030	Dipstick

Chemical Examination

Albumin Urine/ Protein Urine	NIL		NIL	Dipstick/Heat Test
Glucose Urine	NIL		NIL	Dipstick/Benedict
Urobilinogen	NIL		NIL	Dipstick/Ehrlichs
Ketones	NIL		NIL	Dipstick/Rotheras
Bile Salts	ABSENT		ABSENT	Dipstick
Bile Pigments	ABSENT		ABSENT	Dipstick/Fouchets
Nitrite	ABSENT		ABSENT	Dipstick

Microscopic Examination.

Pus Cells	1-2	/Hpf	0-2	
Epithelial Cells	2-3	Hpf	<10	
RBC	ABSENT	/Hpf	ABSENT	
Casts	ABSENT		ABSENT	
Crystals	ABSENT		ABSENT	
Bacteria	NORMALLY PRESENT		NORMALLY PRESENT	
Budding Yeast Cells	Absent		Absent	

*** End Of Report ***



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A.K. Raju

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BHADANA, BIRAM SINGH

Patient ID 160366

01/22/2024

1:02:45pm

48yrs Indian

Meds:

Test Reason:

Medical History:

Ref. MD: Ordering MD:

Technician: Test Type:

Comment:

BRUCE: Total Exercise Time 06:47
 Max HR: 150 bpm 87% of max predicted 172 bpm HR at rest: 82
 Max BP: 130/90 mmHg Max RPP: 17420 mmHg*bpm
 Maximum Workload: 10.50 METS
 Max ST: -0.45 mm, 0.00 mV/s in III; EXERCISE STAGE 3 06:30
 ST/HR index: 0.15 μ V/bpm
 Location Number: * 0 *

NS

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	Workload (METS)	HR (bpm)	BP (mmHg)	RPP (mmHg*bpm)	VE (/min)	ST Level (III mm)	Comment
PRETEST	SUPINE	00:20	0.50	0.00	1.0	82			0	0.05	
EXERCISE	STAGE 1	03:00	2.20	0.00	2.6	107	120/80	12840	0	0.05	
	STAGE 2	03:00	3.00	12.00	8.2	136	130/90	17680	0	-0.15	
	STAGE 3	00:47	3.80	14.00	10.5	148			0	-0.20	
RECOVERY		03:04	0.00	0.00	1.0	94	120/80	11280	0	-0.25	

Test is Negative for Exercise Induced Ischemia.

Dr. Abhishek Sharma



BHADANA, BIRAM SINGH

Patient ID 160366

01/27/2024

1:02:58pm

82 bpm

Linked Medians

PRETEST

SUPINE

00:12

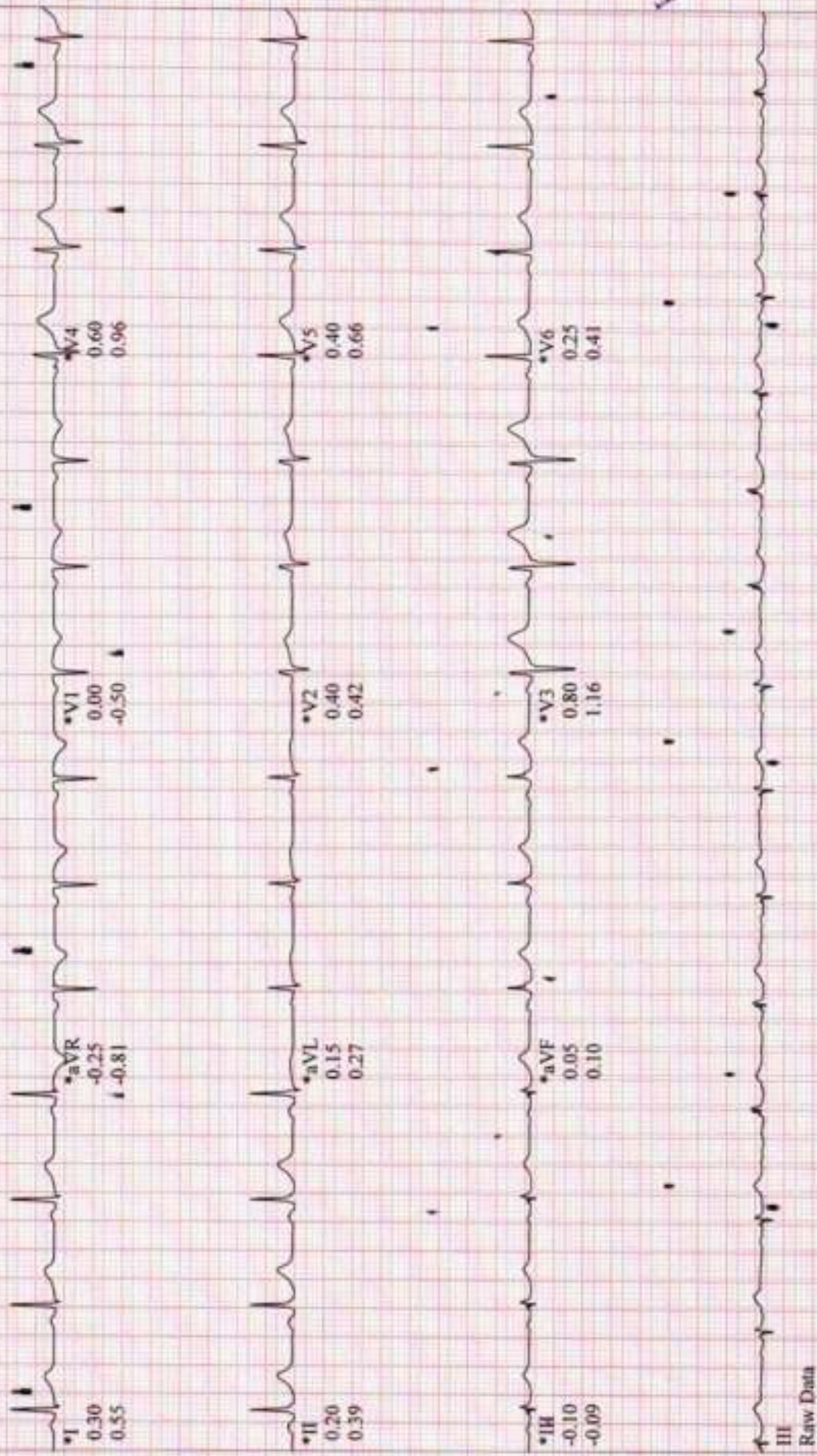
BRUCE

0.0 mph

0.0 %

RATAN JYOTI DALMIA HEART INSTITUTE

Lead
ST Level (mm)
ST Slope (mV/s)



Raw Data

Computer Synthesized Rhythms

BHADANA, BIRAM SINGH

Patient ID 160366

01/22/2024

1:05:55pm

Linked Medians

EXERCISE

STAGE 1

02:50

111 bpm

120/80 mmHg

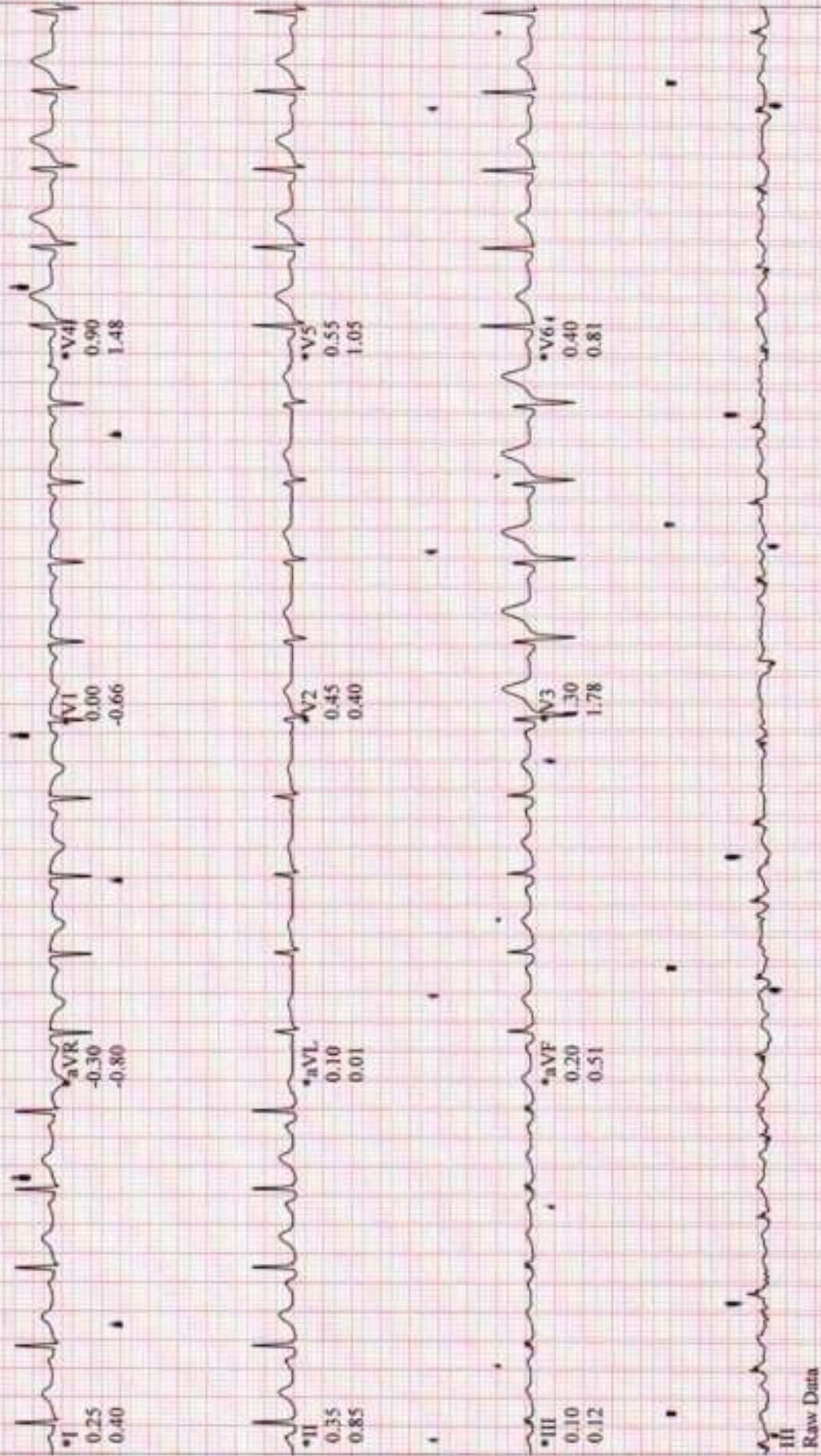
BRUCE

2.2 mph

0.0 %

RATAN JYOTI DALMIA HEART INSTITUTE

Lead
ST Level (mm)
ST Slope (mV/s)



III
Raw Data

*Computer Synthesized Rhythms

BHADANA, BIRAM SINGH

Patient ID 160366

01/22/2024

1:08:55pm

Linked Medians

BRUCE

3.0 mph

12.0 %

EXERCISE

STAGE 2

05:50

137 bpm

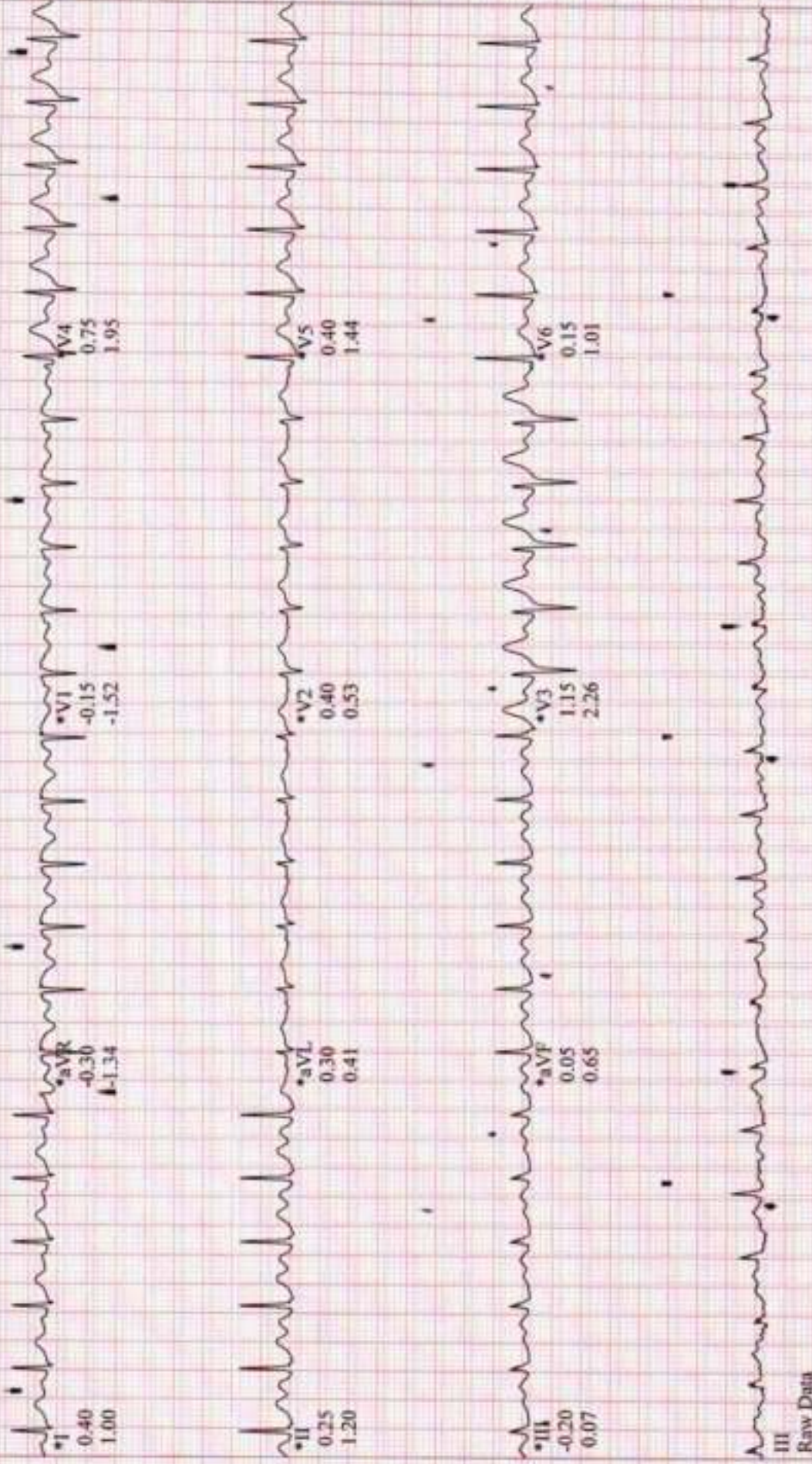
130/90 mmHg

RATAN JYOTI DALMIA HEART INSTITUTE

Lead

ST Level (mm)

ST Slope (mV/s)



III
Raw Data

*Computer Synthesized Rhythms

BHADANA, BIRAM SINGH

Patient ID 160366

01/22/2024

1:09:50pm

148 bpm

Linked Medians

EXERCISE

STAGE 3

06:45

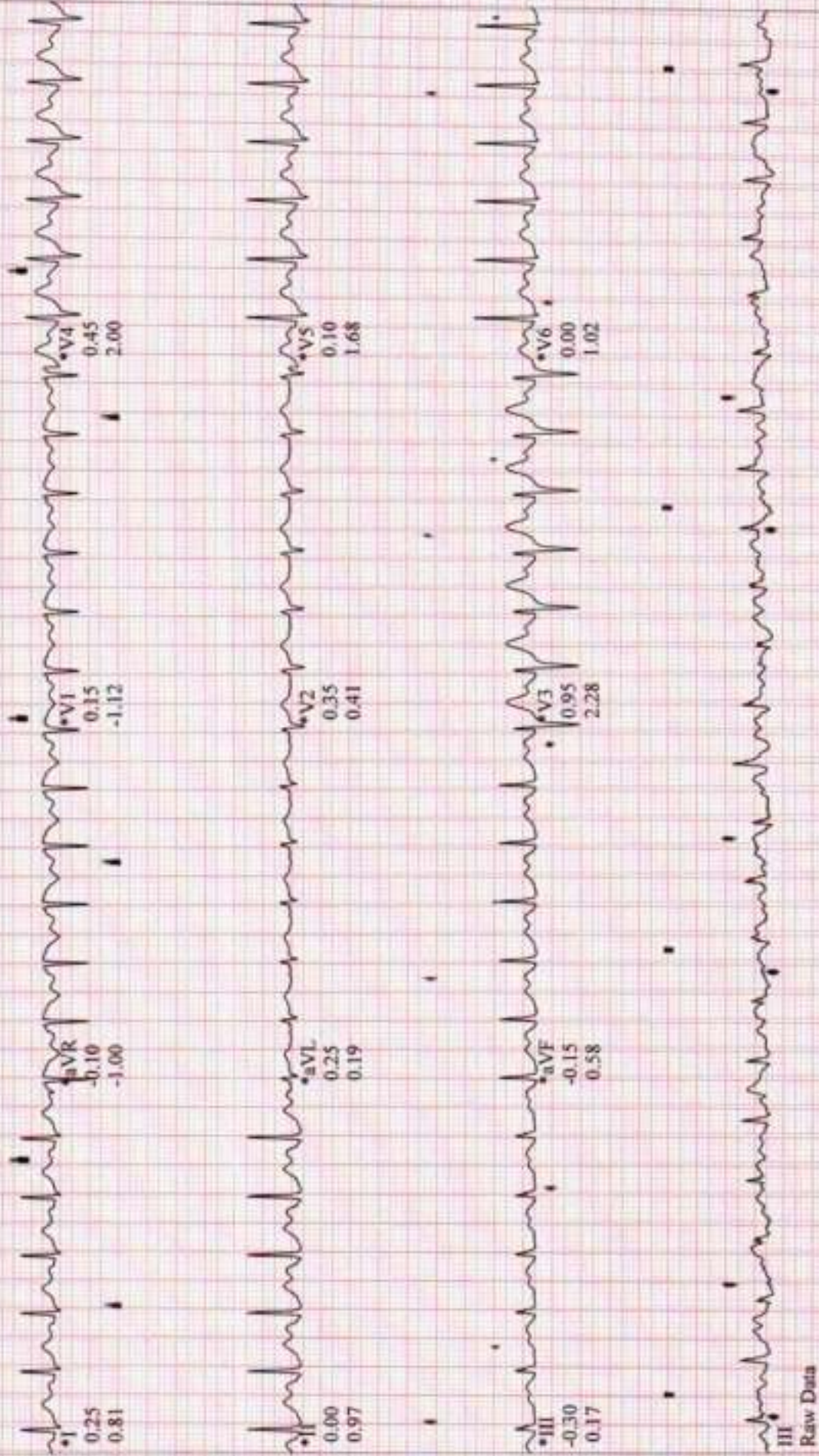
BRUCE

3.8 mph

14.0 %

RATAN JYOTI DALMIA HEART INSTITUTE

Lead
ST Level (mm)
ST Slope (mV/s)



Raw Data

*Computer Synthesized Rhythms

BHADANA, BIRAM SINGH

Patient ID: 160366

01/22/2024

1:09:51pm

148 bpm

Linked Medians (PEAK EXERCISE)

EXERCISE BRUCE

3.8 mph

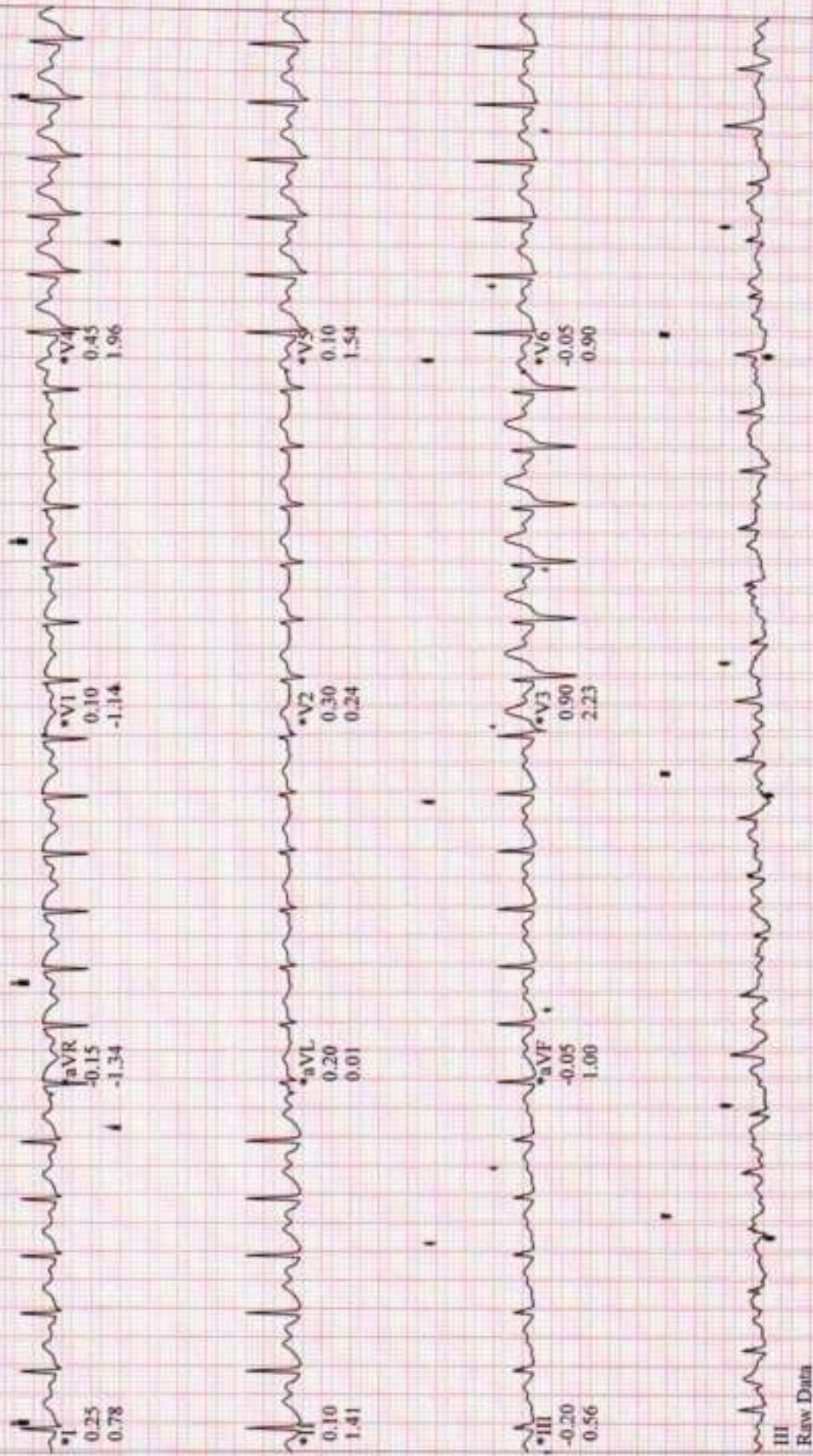
14.0 %

STAGE 3

06:47

RATAN JYOTI DALMIA HEART INSTITUTE

Lead
ST Level (mm)
ST Slope (mV/s)



*Computer Synthesized Rhythms

BHADANA, BIRAM SINGH

Patient ID 160366

01/22/2024

1:10:43pm

127 bpm

Linked Medians

RECOVERY

#1

00:51

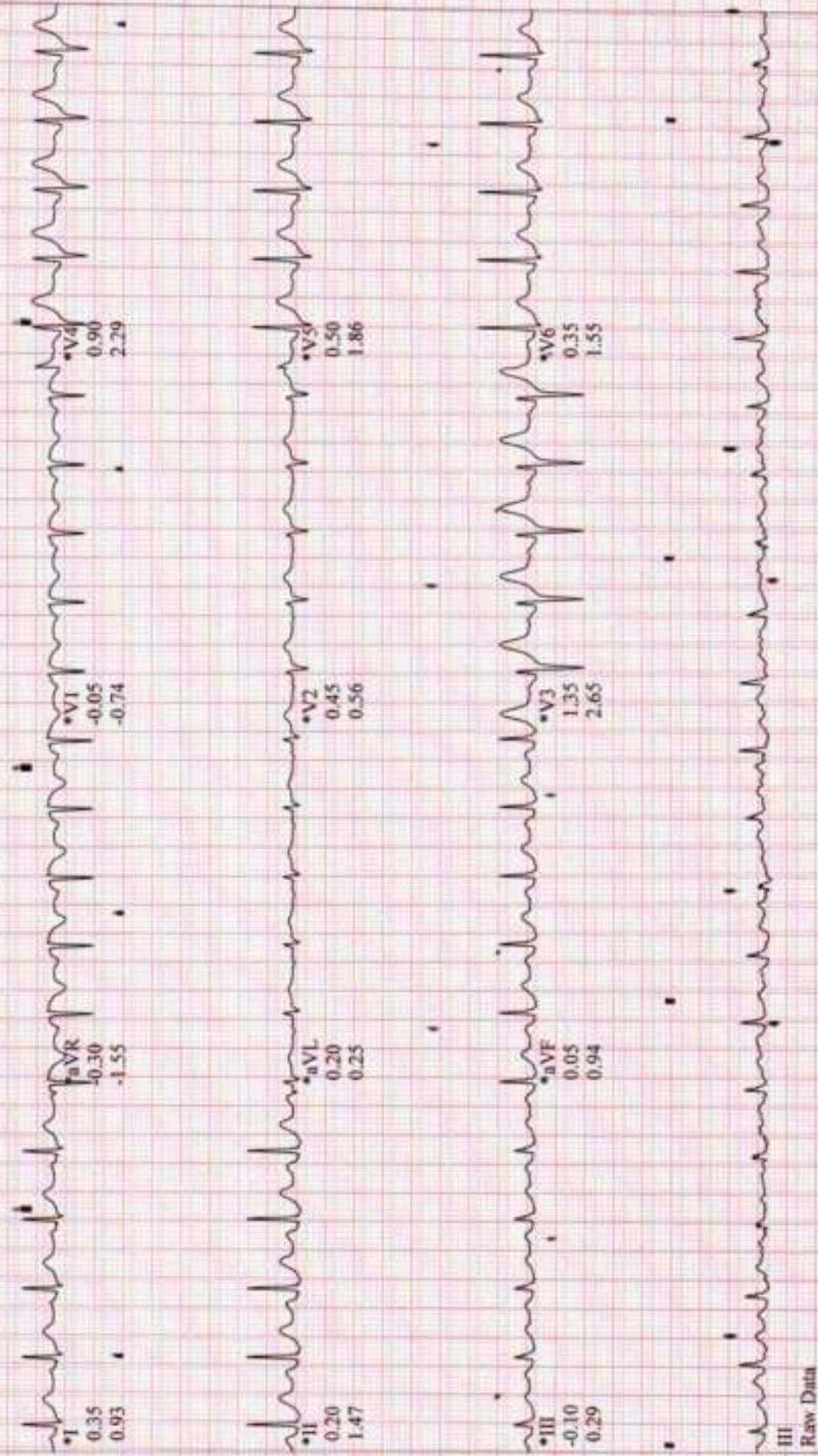
BRUCE

1.5 mph

0.0 %

RATAN JYOTI DALMIA HEART INSTITUTE

Lead
ST Level (mm)
ST Slope (mV/s)



Raw Data

*Computer Synthesized Rhythms

BHADANA, BIRAM SINGH
Patient ID 160366
01/22/2024
1:10-51pm

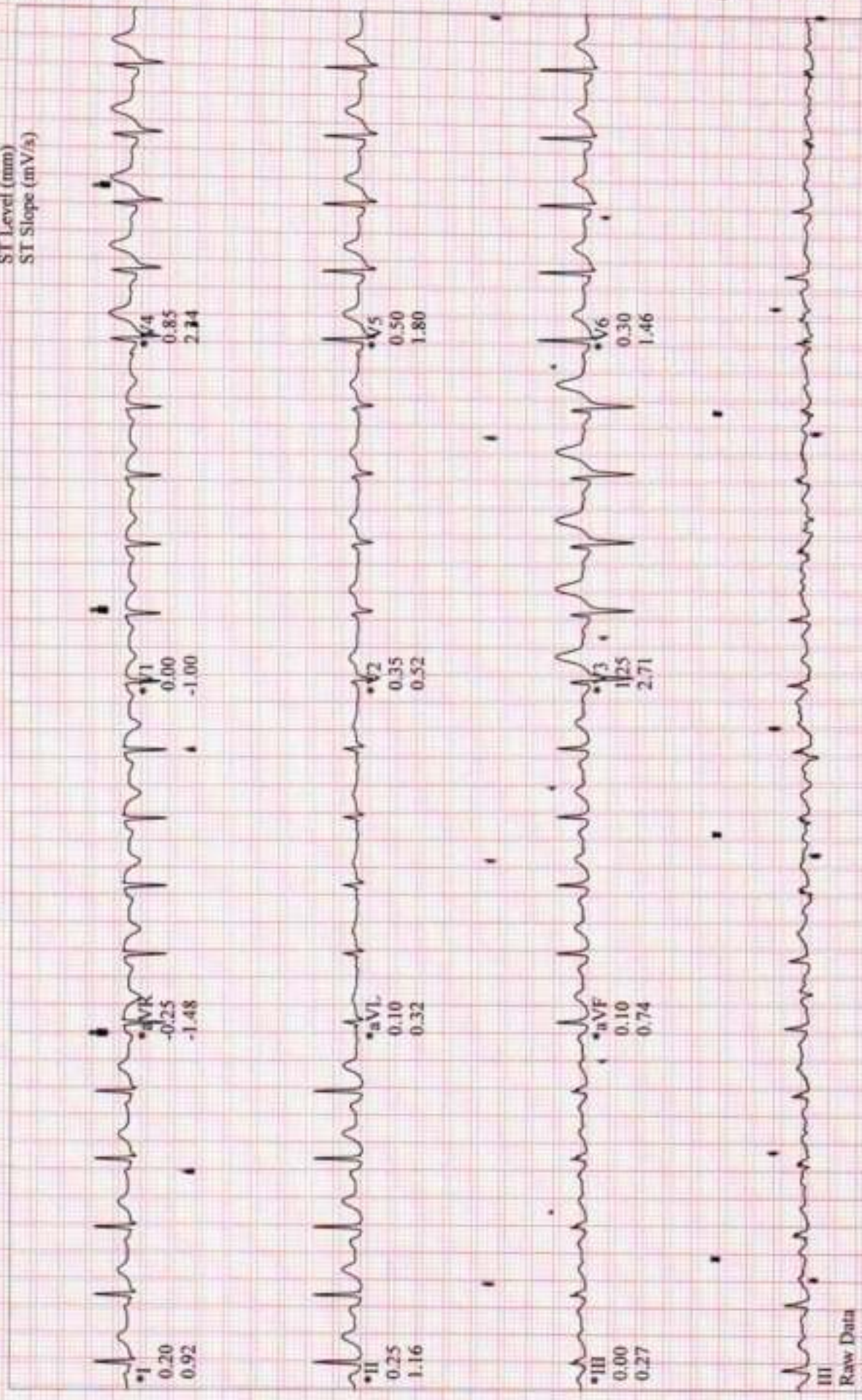
Linked Medians
RECOVERY
#1
01:00

BRUCE
0.0 mph
0.0 %

RATAN JYOTI DALMIA HEART INSTITUTE

121 bpm

Lead
ST Level (mm)
ST Slope (mV/s)



*Computer Synthesized Rhythms

BHADANA, BIRAM SINGH

Patient ID: 160366

01/22/2024

1:12:53pm

97 bpm

120-80 mmHg

Linked Medians

RECOVERY

#1

03:00

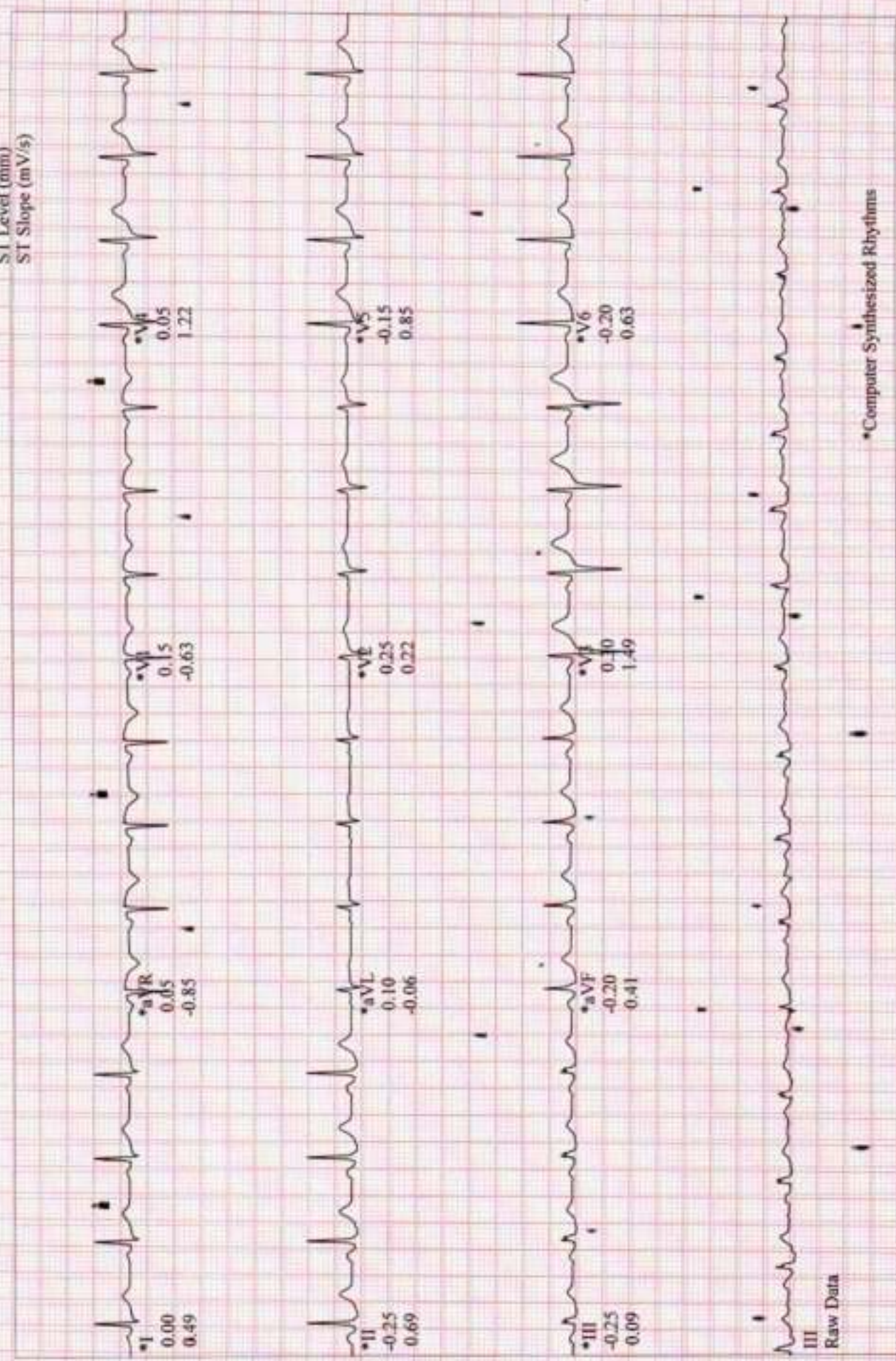
RATAN JYOTI DALMIA HEART INSTITUTE

BRUCE

0.0 mph

0.0 %

Lead
ST Level (mm)
ST Slope (mV/s)



III
Raw Data

*Computer Synthesized Rhythms

18, Vikas Nagar, Near Sai Baba Mandir, Gwalior-2 (M.P.) INDIA Tel. : 2423350/51, Web : www.ratanjyotigroup.org, Email : rjneye@gmail.com
Opp. Medical College, Gate No. 3 Jhansi-284128 (U.P.) Ph. 0510-2322311 (M) 9109973225

SR.NO. : 1903768 DATE : 22-January-2024
NAME : MR. SRAM SINGH BHADANA MRD NO. : R-114133
AGE/SEX : 48 YRS / MALE CITY : GWALIOR

VISION	DISTANCE		NEAR	
	OD	OS	OD	OS
UNAIDED	6/6 P	6/6 P		
WITH GLASSES				
WITH PIN HOLE	6/6	6/6		
WITH COLOR				
VISION				

IOP READING				
TIME	OD	OD METHOD	OS	OS METHOD
10:02AM	18		19	

Rx. EYE From To Instructions

1 LUBREX-OS 10ML/CARBOXYMETHYLCELLULOSE
EYE DROPS IP (1% WV)
ONE DROP 8 TIMES A DAY FOR 60 DAYS BOTH EYE 22-Jan-2024 21-Mar-2024

TREATMENT PLAN : GLASSES PRESCRIBED +/- PROGRESSIVE
REFERRED TO :
DR. REMARK : REV FOR DILATED EVALUATION WHEN WILLING
NEXT REVIEW : AS PER DR. ADVISED

DR. SAVITRI DEVAL

NOTE : Kindly continue medications as advised for the period advised.
In case of redness or allergy please discontinue and inform the doctor.
Nutritional Advice : As per treating physician
Instructions : Patient and Attendant(s) Counseled
Advised medicine may be replaced with a good quality generic medicine.

Speciality Clinics : * Comprehensive Ophthalmology Clinic * Cataract & IOL Clinic * Vitreo Retina & Uvea Clinic * Spectacle Removal Clinic (Lasik/Femto Lasik/Phakic Lens) * Cornea Clinic * Glaucoma Clinic * Orbit & Oculoplasty Clinic * Trauma Clinic * Squint Clinic * Paediatric Ophthalmology Clinic * Low Vision Aid Clinic * Contact Lens Clinic

CONSULTATION TIMINGS : MORNING 9:00 A.M. TO 6:00 PM. (SUNDAY OFF)

● केन्द्रीय कर्मचारियों के लिए मान्यता प्राप्त ● कैशलेस इश्योरेन्स एवं टी.पी.ए. सुविधा उपलब्ध
● For Appointment Please Contact : 9111004046

स्वामी विद्यानंद भारती आई रीज
नेत्रदान

हॉट और कलर्स इसे अपने पीछा की सभ्यता बनारस
नेत्रदान के लिए संपर्क करें : 9111004044

PATIENT NAME - MR. BIRAM SINGH BHADANA 48Y/M
REFERRED BY - H.C.P
DATE - 22/01/2024
INVESTIGATION - USG WHOLE ABDOMEN

IMAGING FINDINGS:-

Liver appears normal in size, position, shape, and margin. Parenchyma shows increased echogenicities.. The intrahepatic biliary and portal venous radicles appear normal. Hepatic veins and portal vein are normal.

Gall Bladder is partially distended. GB wall appears normal. Visualized **CBD** is of normal caliber. Small echogenic foci seen along the left lateral wall of gall bladder measured upto ~5.5mm ?sludge ball / polyp

Spleen appears normal in size (~ 9.4cm), position, shape, echotexture and margin. No any focal lesion within splenic parenchyma. Splenic vein is normal and undilated.

Visualized pancreas appears normal in size, shape and echotexture. Pancreatic duct is not dilated. No USG evidence of obvious measurable focal lesion.

Both Kidneys: Measurements are right kidney ~9.8x4.5cm and left kidney ~ 9.8x5.4cm. Both kidneys are normal in position, size, shape, surface, echotexture and cortico-medullary differentiation. Bilateral PC systems are compact. No significant calculus or hydronephrosis on either side. Ureters are undilated on either side.

Urinary Bladder is normal in shape, wall and content.

Prostate appears normal in size (~ 10cc), shape and echotexture.

No obvious ascites.

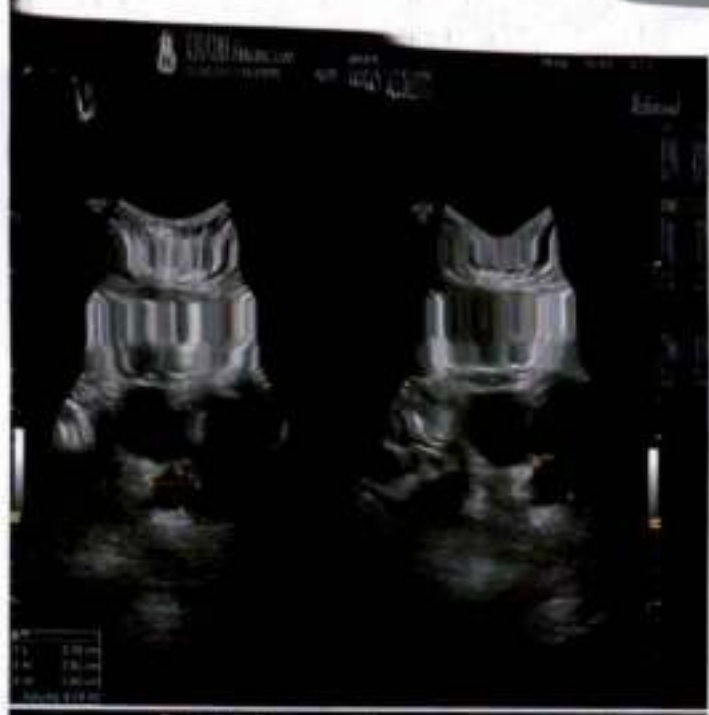
OPINION:- Features are suggestive of-

- Small echogenic foci along the left lateral wall of gall bladder (measured upto ~5.5mm ?sludge ball / polyp. Follow up advisable.
- Grade I fatty liver.

Suggested clinical correlation/Follow up imaging.

DR. SAKSHI CHAWLA
(MD RADIODIAGNOSIS)

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 clinico-pathological correlation. This is a professional opinion, not a diagnosis. Not meant for medico legal purposes. For any kind of typing error, please intimate us within 7 days of reporting.



BHADANA, BIRAM SINGH

Patient ID 160366

01/22/2024

1:02:44pm

Linked Medians

RATAN JYOTI DALMIA HEART INSTITU TE.

80 bpm

ECG

Lead
ST Level (mm)
ST Slope (mV/s)

*I
0.25
0.56

*aVR
0.20
-0.84

*V1
0.00
-0.53

*V4
0.65
0.85

*II
0.20
0.44

*aVL
0.10
0.20

*V2
0.40
0.20

*V5
0.30
0.61

*III
0.00
-0.08

*aVF
0.05
-0.03

*V3
0.85
1.19

*V6
0.25
0.53

Raw Data

*Computer Synthesized Rhythms

Patient name	MR. BIRAM SINGH BHADANA	Age/sex	48Y
Ref. By	HEALTH CHECKUP	Date	22.01.24

XRAY CHEST

- The lung fields appear clear.
- Bilateral C.P. angles appear clear.
- Cardiac size within normal limits.
- Soft tissue shadow and bony thoracic cage appears normal.

Please correlate clinically.


DR. AKANKSHA MALVIYA
MBBS, MD (RADIOLOGY)