

Patient Name Ms Ashwini Kulkarni MRN: 161598 Age 32 Sex M Date/Time 10/02/24

Mob No. ....

**Investigations : (Please Tick)**

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

**Vitals**

- B.P.
- RR
- SPO2
- Temp

**Medical Illness**

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

**Next Appointment/Follow up**

Physician reference

*[Signature]*  
**Dr. Bhawna Garg**  
MBBS, DIPLO. PGDRA  
MEDICAL CO ORDINATOR  
RJN Apollo Spectra Hospital  
Reg. No. NP15035

Signature :

Patient NAME : Mr. ASHISH KUMAR OJHA  
Age/Gender : 37 Y 0 M 0 D /M  
UHID/MR NO : ILK.00037900  
Visit ID : ILK.111400  
Ref Doctor : Dr.ARCOFEMI HEALTHCARE LIMITED

Collected : 10/Feb/2024 09:27AM  
Received : 10/Feb/2024 09:55AM  
Reported : 10/Feb/2024 12:59PM  
Status : Final Report  
Client Name : INSTA

**DEPARTMENT OF HEMATOLOGY**

**COMPLETE BLOOD COUNT- CBC / HAEMOGRAM , WHOLE BLOOD EDTA**

Haemoglobin (Hb%)	14.5	gm%	14.0-17.0	Cyanmeth
P.C.V (Hematocrit)	43.7	%	40-54	Cell Counter
RBC Count	4.6	Mill./cu mm	4.00-5.50	Cell Counter
Mean Corpuscular Volume(MCV)	96.2	fL	76-96	Calculated
Mean Corpuscular Hb. (MCH)	31.9	pg	27.0-32.0	Calculated
Mean Corp. Hb. Conc.(MCHC)	33.2	g/dl	30.0-35.0	Calculated
RDW	14.0	%	11-16	Calculated
Total WBC count (TLC)	5,700	/cu mm	4000-11000	Cell Counter

**Differential Count by Flowcytometry/Microscopy**

Neutrophils	49.1	%	50-70	Cell Counter
Lymphocytes	41.4	%	20-40	
Monocytes	5.8	%	01-10	Cell Counter
Eosinophils	3.5	%	01-06	Cell Counter
Basophils	0.2	%	00-01	Cell Counter

**Absolute Leucocyte Count**

Neutrophil (Abs.)	2,799	per cumm	2000 - 8000	Calculated
Lymphocyte (Abs.)	2360	per cumm	600-4000	Calculated
Monocyte (Abs.)	331	per cumm	0-600	Calculated
Eosinophil (Abs.)	199	per cumm	40-440	Calculated
Basophils (Abs.)	11	per cumm	0-110	Calculated
Platelet Count	1.50	Lac/cmm	1.50-4.00	Cell Counter

**ERYTHROCYTE SEDIMENTATION RATE (ESR)**

Erythrocyte Sedimentation Rate (ESR)	18	mm 1st hr.	0-20	Wester Green
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Page 1 of 9



SIN NO :10436001

*A.K. Rajong*

**DR. ASHOK KUMAR**  
M.D. (PATH)

**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

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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 few macrocytic 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 MACROCYTIC BLOOD PICTURE.



SIN NO :10436001,

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M.D. (PATH)

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Age/Gender : 37 Y 0 M 0 D /M	Received : 10/Feb/2024 09:55AM
UHID/MR NO : ILK.00037900	Reported : 10/Feb/2024 11:05AM
Visit ID : ILK.111400	Status : Final Report
Ref Doctor : Dr.ARCOFEMI HEALTHCARE LIMITED	Client Name : INSTA

**DEPARTMENT OF BIOCHEMISTRY-ROUTINE**

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

Fasting Glucose	143.0	mg/dL	65-110	God - Pod
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Ref.for Biological Reference Intervals: American Diabetic Assiosation.

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

Post Prandial Glucose	243.0	mg/dL	90-140	2hrs. after...gm glucose/lunch
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Ref.for Biological Reference Intervals: American Diabetic Assiosation.



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**DEPARTMENT OF BIOCHEMISTRY-ROUTINE**

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

**GLYCOSYLATED HAEMOGLOBIN (GHB/HBA1C) , WHOLE BLOOD EDTA**

Glycosylated Haemoglobin HbA1c	7.0	%	Normal: <5.7 Pre-Diabetes: 5.7-6.4 Diabetes: 6.5	NEPHELOMETRY
Approximate mean plasma glucose	152.76			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 glycemic 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%

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**DEPARTMENT OF BIOCHEMISTRY-ROUTINE**

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

**COMPLETE KIDNEY PROFILE (RFT/KFT) , SERUM**

Urea	17.87	mg/dL	13.0-43.0	Urease
Creatinine	0.5	mg/dL	0.5-1.3	Enzymatic
Uric Acid	5.7	mg/dL	3.5-7.2	Urease
Sodium	141.0	Meq/L	135-155	Direct ISE
Potassium	3.8	Meq/L	3.5-5.5	Direct ISE
Chloride	102.0	mmol/L	96-106	Direct ISE
Calcium	9.7	mg/dL	8.6-10.0	OCPC
Phosphorous	3.4	mg/dL	2.5-5.6	PMA Phenol
BUN	8.35	mg/dL	6.0-20.0	Reflect Spectrothoto

Page 5 of 9



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**DEPARTMENT OF BIOCHEMISTRY-ROUTINE**

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIPID PROFILE , SERUM</b>				
Type OF Sample	SERUM			
Total Cholesterol	150.0	mg/dl	up to 200	End Point
Total Triglycerides	141.0	mg/dL	Borderline High Risk : 150-199 High Risk: 200-499 Very High Risk: >500	End Point
HDL Cholesterol	39.0	mg/dL	Optimal: >55 Border Line High Risk: 35-55 High Risk:- <35	Reflect Spectrothoto
Non - HDL Cholesterol	111	mg/dL	<130	
LDL Cholesterol	82.8	mg/dL	49-172	Reflect Spectrothoto
VLDL Cholesterol	28.2	mg/dL	5.0-40.0	Reflect Spectrothoto
Chol / HDL Ratio	3.85		Low Risk : 3.3-4.4 Average Risk : 4.5-7.1 Moderate Risk : 7.2-11.0 High Risk : >11.0	CALCULATED



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**DEPARTMENT OF BIOCHEMISTRY-ROUTINE**

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIVER FUNCTION TEST (LFT) WITH GGT , SERUM</b>				
Total Bilirubin	0.6	mg/dL	0.2-1.2	Jendrassik-Grof
Direct Bilirubin	0.1	mg/dL	0.0-0.3	Jendrassik-Grof
Indirect Bilirubin	0.5	mg/dL	0.0-0.9	Calculated
SGOT / AST	<b>38.0</b>	U/L	1-30	UV Kinetic (IFCC)
SGPT / ALT	<b>58.0</b>	U/L	1-45	UV Kinetic (IFCC)
Alkaline Phosphatase	100.0	U/L	43-115	PNPP
Gamma Glutaryl Transferase (GGT)	34.0	U/L	0.0-55.0	Reflect Spectrophoto
Total Protein	6.6	g/dl	6.4-8.3	Biuret
Albumin	4.5	g/dL	3.5-5.2	BCG
Globulin	2.1	g.dl	2.0-3.5	Calculated
A/G Ratio	2.14	%	1.0-2.3	Calculated



SIN NO : 10436001

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Age/Gender : 37 Y 0 M 0 D /M	Received : 10/Feb/2024 11:59AM
UHID/MR NO : ILK.00037900	Reported : 10/Feb/2024 01:17PM
Visit ID : ILK.111400	Status : Final Report
Ref Doctor : Dr.ARCOFEMI HEALTHCARE LIMITED	Client Name : INSTA

**DEPARTMENT OF BIOCHEMISTRY-SPECIAL**

Test Name	Result	Unit	Bio. Ref. Range	Method
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**THYROID PROFILE-I , SERUM**

Trilodothyronine Total (TT3)	1.46	ng/dL	0.6-1.8	Chemillumisence
Thyroxine (TT4)	8.12	µg/dL	4.5-10.9	Chemillumisence
Thyroid Stimulating Hormone (TSH)	<b>5.916</b>	µIU/ml	0.35-5.50	Chemillumisence

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

**AGE RELATED GUIDLINES 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

**PREGNENCY RELATED GUIDLINES 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 hypethyroidism 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).



SIN NO : 10456001,

*A.K. Fojong*

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Visit ID : ILK.111400	Status : Final Report
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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	5.5		5.0-7.5	Dipstick
Specific Gravity	1.030		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 \*\*\***



SIN NO : 10436001,

*A.K. Rajan*

**DR. ASHOK KUMAR**  
M.D. (PATH)

OJHA, ASHISH KUMAR  
 Patient ID 161598  
 02/10/2024  
 12:50-44pm  
 Male  
 37yrs Indian  
 Meds:

Tabular Summary

RATAN JYOTI DALMIA HEART INSTITUTE

BRUCE: Total Exercise Time 07:31  
 Max HR: 160 bpm 87% of max predicted 183 bpm HR at rest: 93  
 Max BP: 130/90 mmHg Max RPP: 18330 mmHg\*bpm

Test Reason:  
 Medical History:

Ref. MD: Ordering MD:  
 Technician: Test Type:  
 Comment:

Maximum Workload: 11.20 METS  
 Max. ST: -1.70 mm, 0.00 mV/s in V5; EXERCISE STAGE 3 07:30  
 Arrhythmia: A:88, PVC:1, PSVC:1  
 ST/HR index: 2.38  $\mu$ V/bpm  
 Location Number: 0

HR

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	Workload (METS)	HR (bpm)	BP (mmHg)	RPP (mmHg*bpm)	VE (/min)	ST Level (V5 mm)	Comment
PRETEST	SUPINE	00:32	0.50	0.00	1.1	97			0	0.30	
EXERCISE	STAGE 1	03:00	2.20	0.00	2.6	117	120/80	14040	0	0.20	
	STAGE 2	03:00	3.00	12.00	8.2	148	130/90	19240	0	-0.95	
	STAGE 3	01:31	3.80	14.00	11.2	160			1	-1.60	
RECOVERY		03:03	0.00	0.00	3.0	113	120/80	13560	0	-0.65	

Test is Mild Positive for Exercise Induced Ischemia.

*[Handwritten Signature]*  
 Dr. Anup Singh, Sr. Cardiologist

OJHA, ASHISH KUMAR

Patient ID 161598

02/10/2024

12:51:07pm

93 bpm

Linked Medians

PRETEST

SUPINE

00:20

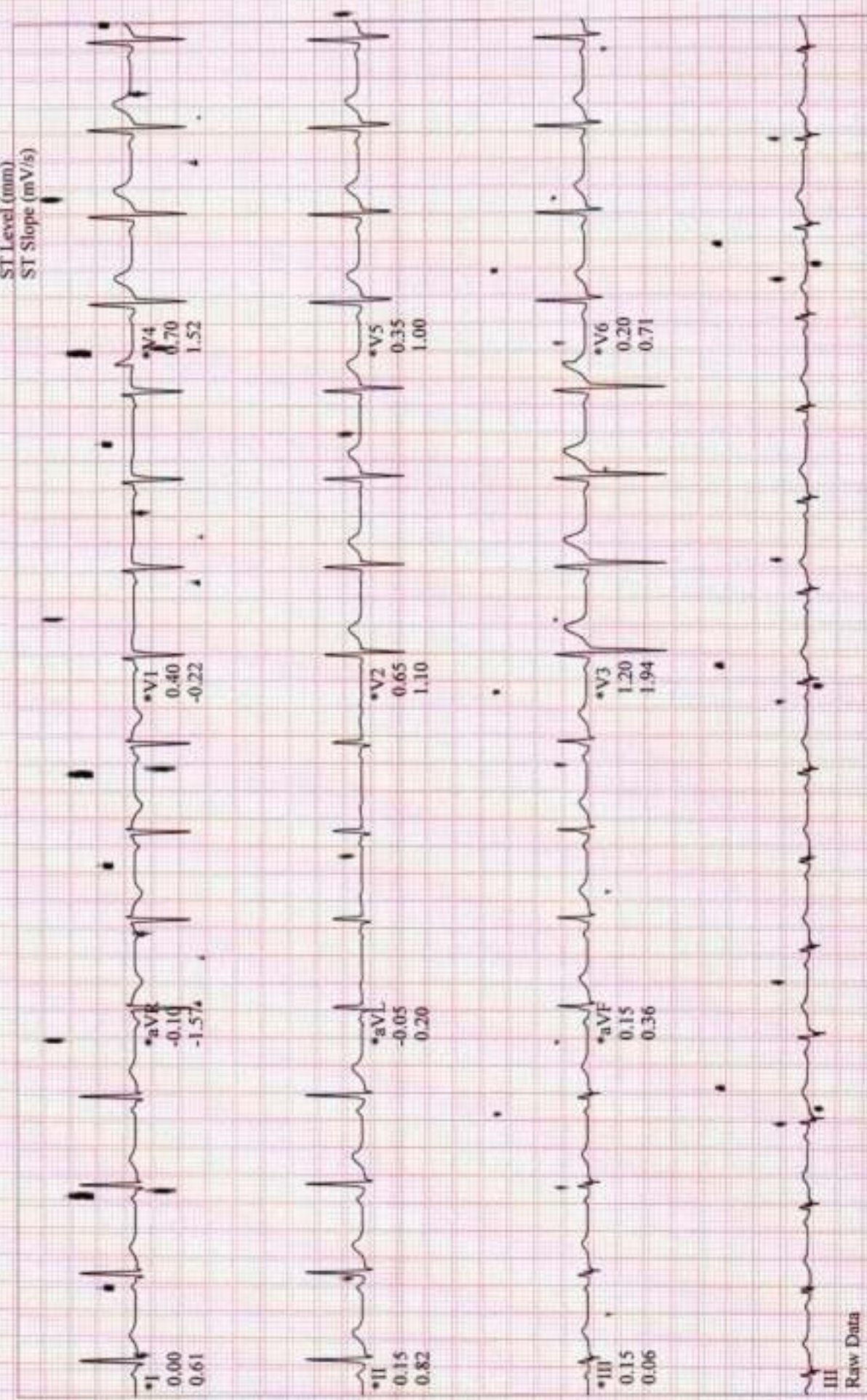
BRUCE

0.0 mph

0.0 %

RATAN JYOTI DALMIA HEART INSTITUTE

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



Raw Data

\*Computer Synthesized Rhythms

OJHA, ASHISH KUMAR

Patient ID 161598

02/10/2024

12:54:07pm

Linked Medians

EXERCISE

STAGE 1

02:50

121 bpm

120/80 mmHg

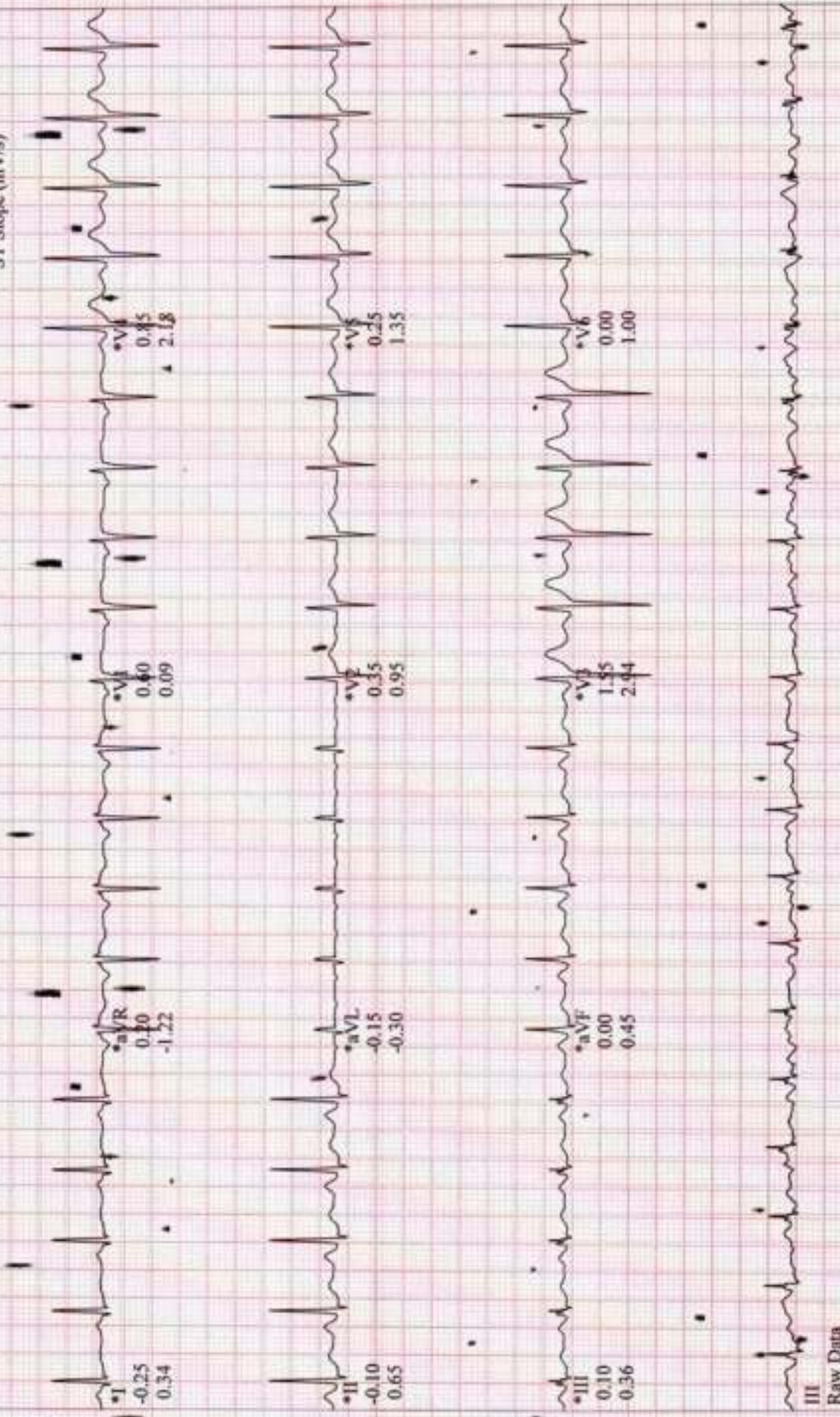
BRUCE

2.2 mph

0.0 %

RATAN JYOTI DALMIA HEART INSTITUTE

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



III  
Raw Data

\*Computer Synthesized Rhythms



OJHA, ASHISH KUMAR  
Patient ID 161598  
02/10/2024  
12:57:07pm

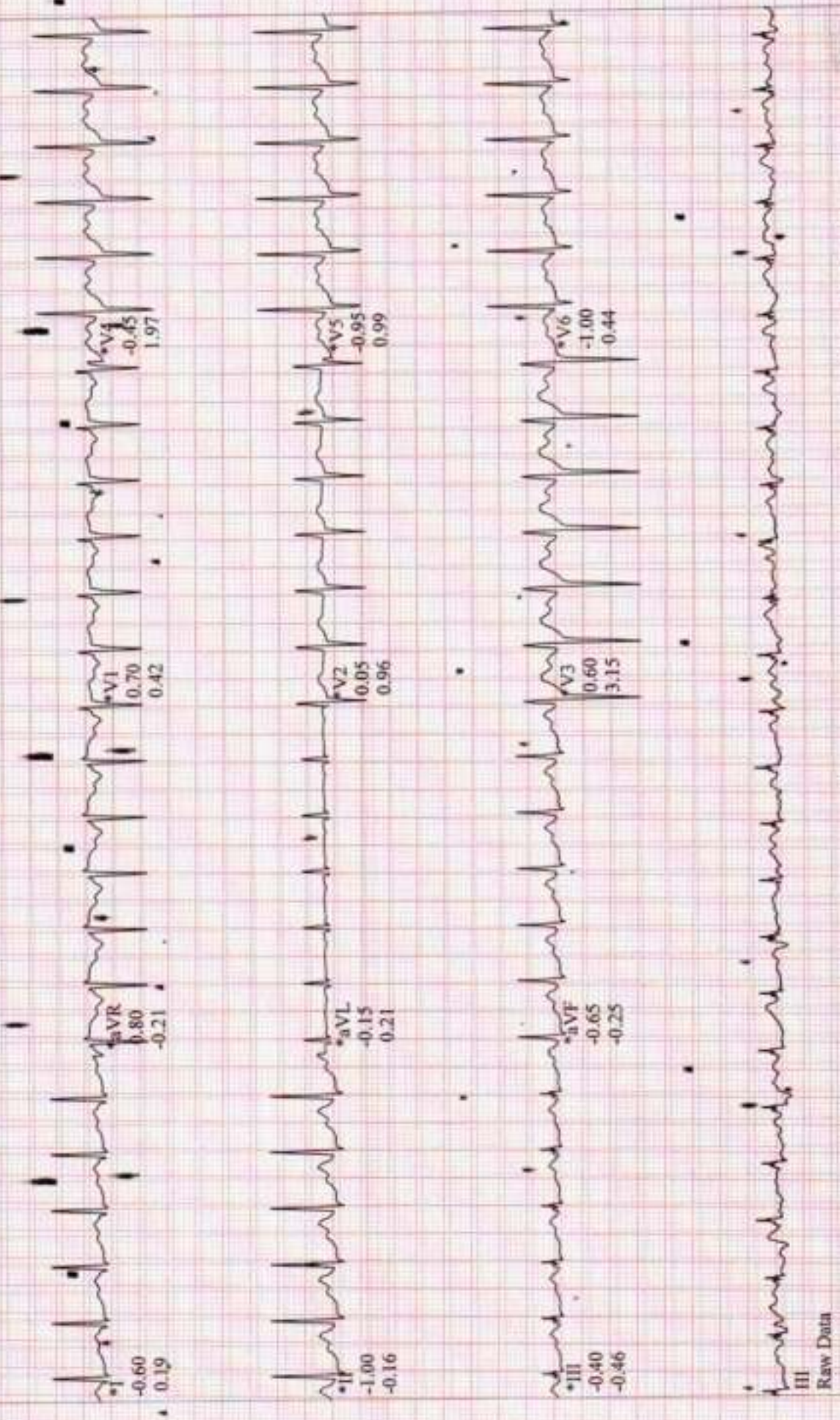
Linked Medians  
EXERCISE  
STAGE 2  
05:50

148 bpm  
130/90 mmHg

BRUCE  
3.0 mph  
12.0 %

RATAN JYOTI DALMIA HEART INSTITUTE

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



III  
Raw Data

\*Computer Synthesized Rhythms

OJHA, ASHISH KUMAR

Patient ID 161598

02/10/2024

12:58:46pm

Linked Medians

EXERCISE

STAGE 3

07:29

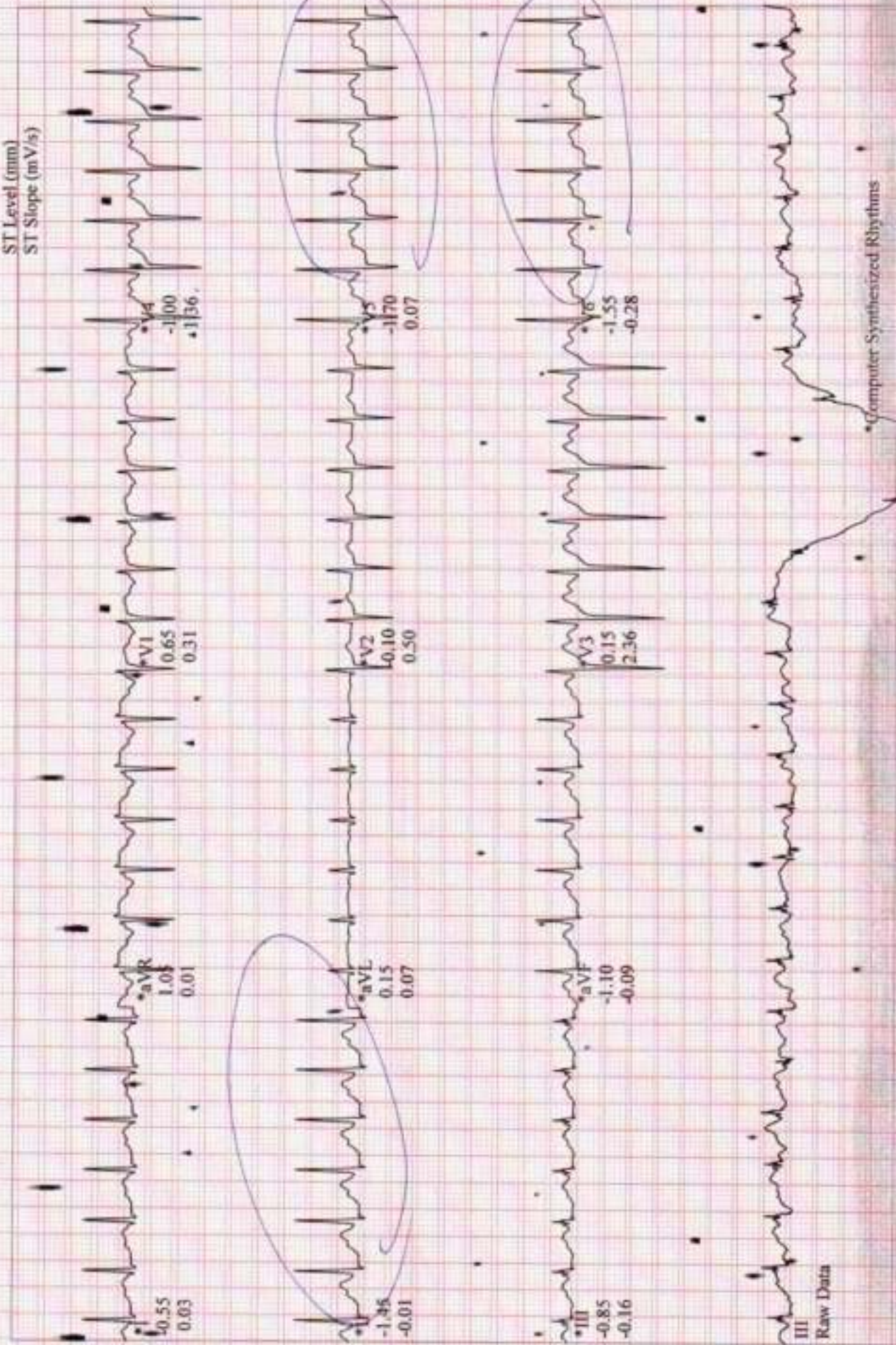
BRUCE

3.8 mph

14.0 %

RATAN JYOTI DALMIA HEART INSTITUTE

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



III  
Raw Data

Computer Synthesized Rhythms

OJHA, ASHISH KUMAR

Patient ID 161598

02/10/2024

12:58:47pm

160 bpm

Linked Medians ( PEAK EXERCISE )

EXERCISE

STAGE 3

07:31

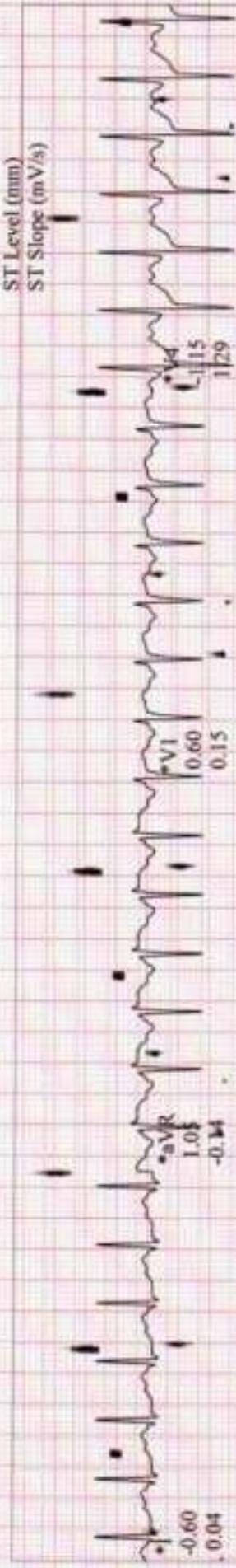
BRUCE

3.8 mph

14.0 %

RATAN JYOTI DALMIA HEART INSTITUTE

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



III  
Raw Data

\*Computer Synthesized Rhythms

OJHA, ASHISH KUMAR

Patient ID 161598

02/10/2024

12:59:38pm

137 bpm

Linked Medians

RECOVERY

#1

00:50

BRUCE

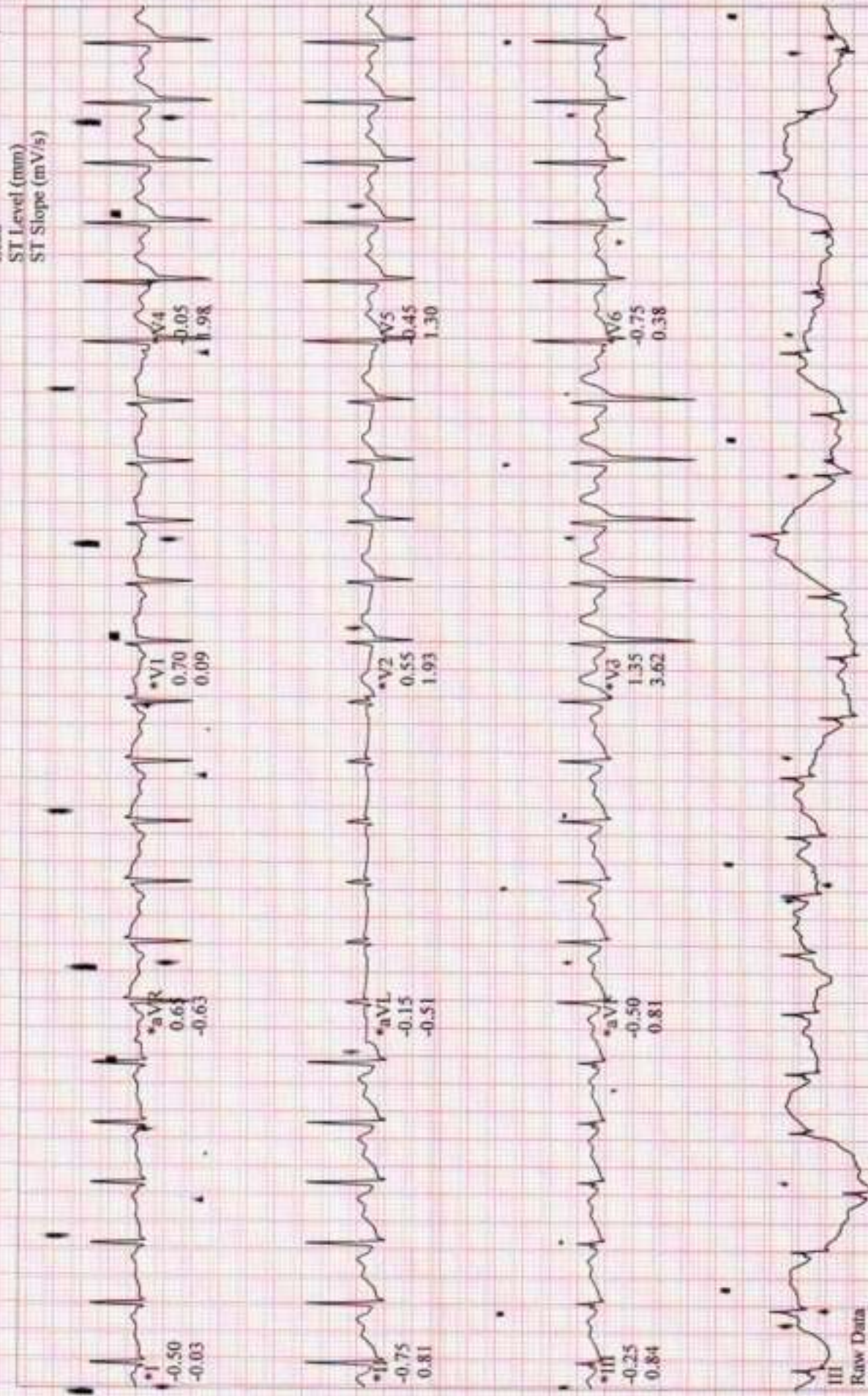
1.5 mph

0.0 %

RATAN JYOTI DALMIA HEART INSTITUTE

Lead

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



III  
Raw Data

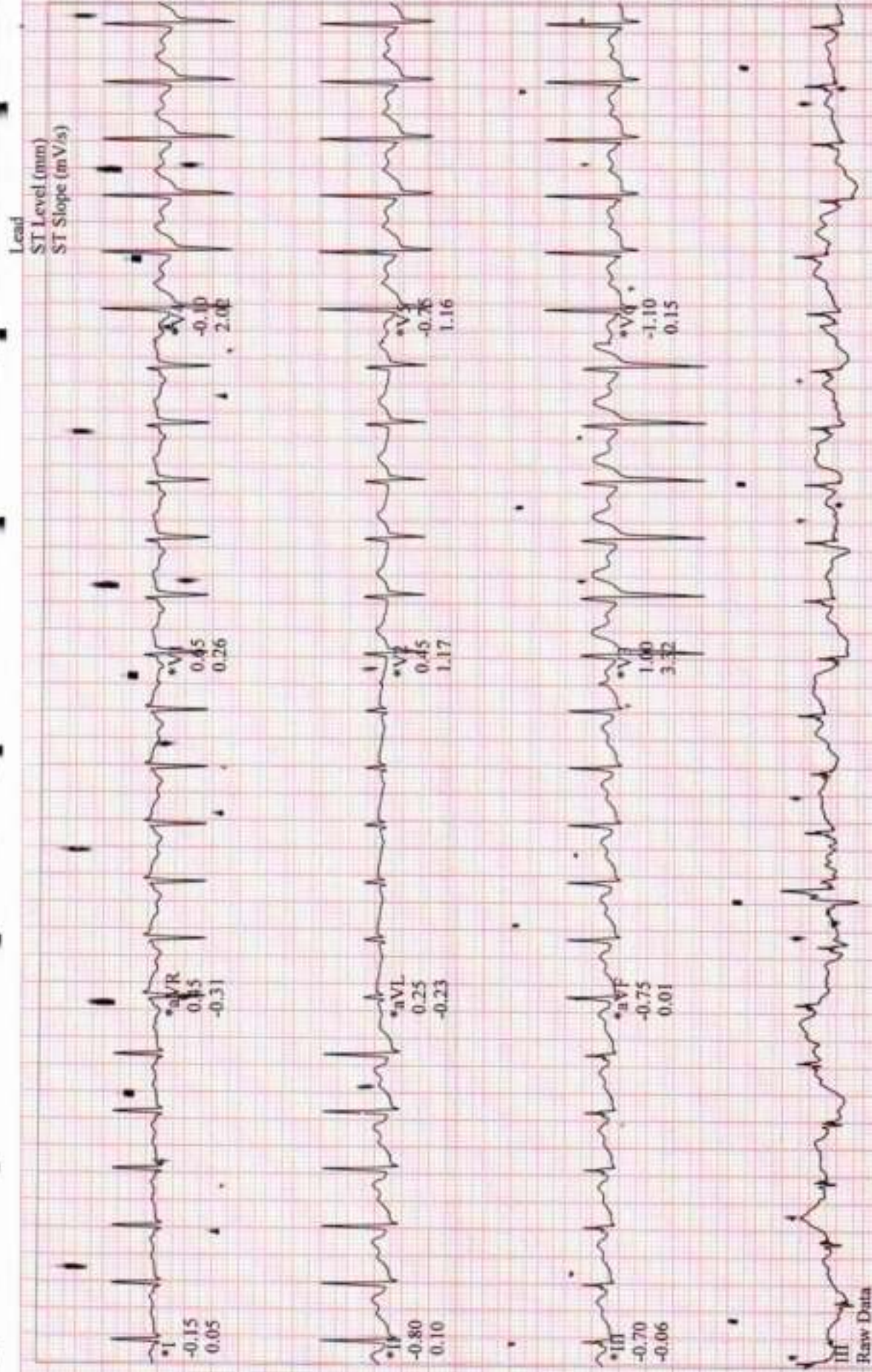
\*Computer Synthesized Rhythms

OJHA, ASHISH KUMAR  
Patient ID 161598  
02/10/2024  
12:59-47pm

Linked Medications  
RECOVERY  
#1  
01:00

BRUCE  
1.5 mph  
0.0 %

RATAN JYOTI DALMIA HEART INSTITUTE



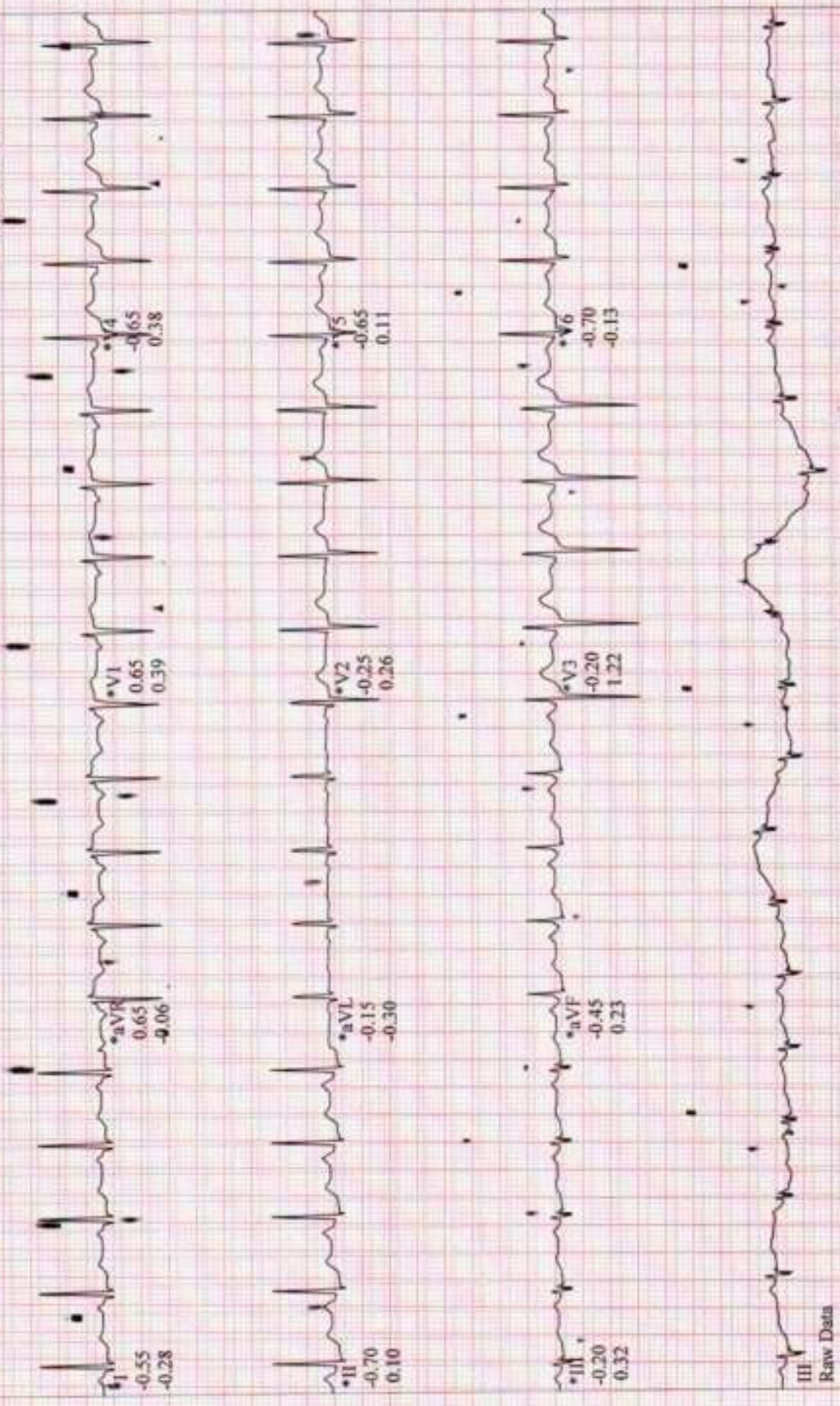
BRUCE  
0.0 mph  
0.0 %

RECOVERY  
#1  
03:00

113 bpm  
120/80 mmHg

Patient ID 161598  
02/10/2024  
1:01:48pm

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



III  
Raw Data

Computer Synthesized Rhythms



# RATAN JYOTI NETRALAYA

OPHTHALMIC INSTITUTE & RESEARCH CENTRE

Hospital Reg. No. : 071



॥ सर्वदुःखभाग्यं लक्षणम् ॥

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. : 1907890  
NAME : MR ASHISH KUMAR OJHA  
AGE/SEX : 33 YRS / MALE

DATE : 10-February-2024  
WHD NO. : R-115547  
CITY : GWALIOR

VISION	DISTANCE		NEAR	
	OD	OS	OD	OS
UNAIDED				
WITH GLASSES	S/S	S/S	N/S	N/S
WITH PIN HOLE				
WITH COLOR				
VISION				

TIME	OD	IOP-READING		
		OD METHOD	OS	OS METHOD
11:43AM	18		18	

Rx. EYE From To Instructions

1 SOFT TEARS EYE DROP 10ML  
ONE DROP 4 TIMES A DAY FOR 60 DAYS BOTH EYE 10-Feb-2024 9-Apr-2024

TREATMENT PLAN : -PERIODICAL FOLLOWUPS  
CONTINUE SAME GLASSES  
REFERRED TO :  
NEXT REVIEW : AS PER DR. ADVISED

*Jyotsna*  
10/2/24  
DR. JYOTSNA SHARMA

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) Counselled.  
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)

- केंद्रीय कर्मचारियों के लिए मान्यता प्राप्त ● कैंशलेस इंश्योरेन्स एवं टी.पी.ए. सुविधा उपलब्ध
- For Appointment Please Contact : 9111004046

स्वामी विद्यानंद भारती आई चैंक

नेत्रदान

हमें और कार्ये हमें अपने परिवार की परम्परा बनाये  
नेत्रदान के लिए सम्पर्क करें : 9111004046

**PATIENT NAME** - ASHISH KUMAR OJHA 37Y/M  
**REFERRED BY** - H.C.P  
**DATE** - 10/02/2024  
**INVESTIGATION** - USG WHOLE ABDOMEN

**IMAGING FINDINGS:-**

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

**Gall Bladder** is well distended. GB wall and lumen content appears normal. No echogenic focus within GB lumen. Visualized **CBD** is of normal caliber.

**Spleen** appears mildly enlarged in size (~ 13.9cm), normal in position, shape, echotexture and margin. No any focal lesion within splenic parenchyma. Splenic vein is normal and undilated.

**Pancreas** is well visualized, 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 -8.6x4.7cm and left kidney - 9.5x4.8cm. 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 minimally distended.

**Prostate** appears grossly normal in size (~ 14.1cc), shape and echotexture.

No obvious ascites.

**OPINION:- Features are suggestive of-**

- Grade I fatty liver
- Mild splenomegaly

**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.





Patient Name Ashish Kumar MRN : ..... Age 35y Sex M Date/Time 10/2/24  
Mob No. ....

**Investigations : (Please Tick)**

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

Health check up  
 Eye - Ear (L) } ENT - clear  
           Ear (R) } TA - good  
                       } NO G  
 Nose }  
 Throat }  
 NO Active ENT interments

*[Signature]*  
 Dr. Sunil Gupta  
 MS (ENT)  
 Reg. No. MP1317R  
 RJN Apollo Spectra Hospitals

**Vitals**

- B.P.
- P.R.
- O2
- Temp

**Medical Illness**

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

**Next Appointment/Follow up**

Signature :

Patient Name Shubh Kumar MRN : ..... Age 37 Sex M Date/Time 10/2/24

**Investigations : (Please Tick)**

Mob No. ....

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

Heathy Checkup.

O/E -

• Caries +

87 | 72

• Gen. gingivitis.

• Calvaria n

• Specimen n.

**Vitals**

- B.P.
- P.R.
- SPO2
- Temp

T/A -

Restoration +

87 | 78

**Medical Illness**

R<sub>r</sub>

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

Chronic sinus M/W

— | — | —

**Next Appointment/Follow up**

Signature :



91 bpm

*EKG*

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



III  
Raw Data

\*Computer Synthesized Rhythms

Patient Name	ASHISH K. OJHA	Age	37Yrs
Date	10-02-2024	Sex	MALE

### CHEST X RAY (PA VIEW)

Both lung fields appear clear.  
Both costo-phrenic angles appear clear.  
Cardiothoracic ratio is normal.  
Both domes of diaphragm appear normal.  
Thoracic soft tissue and skeletal system appear unremarkable.

#### IMPRESSION:

- No significant abnormality is noted

*Please correlate clinically and with related investigations may be more informative.*



**Dr Amit Kumar**  
MBBS, DMRD  
Consultant Radiologist

RMC-NO-26828/14866