



Shree Ram Multispeciality Hospital (SRMH)

L o k a h S a m a s t a S u k h i n o B h a v a n t u

OPD-ID	:020240000424	PT.TYPE	:NEWREGISTRATION
UH-ID	:SRMH-24031973	PRINTDATE	:08-03-2024/11:13:59
TOKENNO. :2			
PATIENTNAME	:MR.DEEPAKKUMARBORKAR	DEPARTMENT	:ENT
AGE/SEX	:50-Y9-M14-D/MALE	DOB	:26-05-1973
CONSULT-DATE	:08-Mar-2024-10:30AM		
MOB-NO	:7869991799	COMPANYNAME	:MEDIWHEELFULLBODYANNUALPLUSABOVE5
GUARDIANNAME	:S/oS.C.BORKAR	OPDPAIDFEE	:0.00
ADDRESS	:DINDAYALUPADHYAYNAGARSEC.1,RAIPUR,CG,INDIA,RAIPUR,CG		
Weight :	Temp :	B.P. :	Pulse :
			SPO2 :

Please indicate whether you are presently suffering from anyone of the following symptoms:

Ears, Nose, Mouth, Throat

	Yes	No
Ear pain	0	✓
Ear itch	0	✓
Ear drainage	0	✓
Dizziness/ Loss of balance	0	✓
Loss of Hearing	0	✓
Popping Noise	0	✓
Tinnitus	0	✓
Nosebleeds	0	✓
Post-nasal Drip	0	✓
Sinus pain	0	✓
Sinus pressure	0	✓
Nasal congestion	0	✓
Loss of smell/taste	0	✓
Hoarseness	0	✓
Sore Throat	0	✓
Throat tickle	0	✓
Dry Mouth / Throat	0	✓
Throat clearing	0	✓
Snoring	0	✓

Present chief complaints:-

dry cough :: 7 days - Sore Throat Medicine.
 taken / Improving -
 No HTN / DM, HTN,

Dr. Signature



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UH-ID	:SRMH-24031973	PRINTDATE	:08-03-2024/11:13:59		
PATIENTNAME	:MR.DEEPAKKUMARBORKAR	DEPARTMENT	:DENTAL		
AGE/SEX	:50-Y9-M14-D/MALE	DOB	:26-05-1973		
CONSULT-DATE	:08-Mar-2024-10:30AM	COMPANYNAME	:MEDIWHEELFULLBODYANNUALPLUSABOVES		
MOB-NO	:7869991799	OPDPAIDFEE	:0.00		
GUARDIANNAME	:S/oS.C.BORKAR				
ADDRESS	:DINDAYALUPADHYAYNAGARSEC.1,RAIPUR,CG,INDIA,RAIPUR,CG				
Weight :	Temp :	B.P. :	Pulse :	SPO2 :	

Please indicate whether you are presently suffering from anyone of the following symptoms:

Oral Health Status:

- Yes No Dental Sealants Present on Permanent Molars
- Yes No Caries Experience / Restoration History : A filling (Temporary / Permanent) OR a Tooth that is missing because it was extracted as a result of caries. *Left lower last Pm Absent Right*
- Yes No Untreated Caries/ Open Treatment Plan
- Yes No Urgent Treatment: abscess, Nerve Exposure, Advanced Disease State, Signs of Symptoms that include pain/ infection / swelling

Treatment Needs:

- Restorative Care- Fillings, crowns, etc.
- Preventative Care-prophylaxis, sealants, fluoride Treatment
- Sedation / Surgery Needs to Complete Treatment

Present chief complaints:- *→ NO fresh complaints at present*
→ No H/O DM, HTN,
→ F/H/O - NO significant

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OPD - ID : 020240000424
UH-ID : SRMH-24031973

PT. TYPE : NEW REGISTRATION
PRINT DATE : 08-03-2024 / 10:49:37

TOKEN NO. : 2

PATIENT NAME	: MR. DEEPAK KUMAR BORKAR	DEPARTMENT	: MEDICINE
AGE / SEX	: 50-Y 9-M 14-D / MALE	CONSULTANT	: DR. AJIT KUMAR
DOB	: 26-05-1973	CONSULT-DATE	: 08-Mar-2024 - 10:30 AM
MOB-NO	: 7869991799	COMPANY NAME	: MEDIWHEEL FULL BODY ANNUAL PLUS A
GUARDIAN NAME	: S/o S. C. BORKAR	OPD PAID FEE	: 0.00
ADDRESS	: DINDAYAL UPADHYAY NAGAR SEC.1,RAIPUR,CG,INDIA, RAIPUR, CG		

Weight : Temp : B.P. : ¹²⁰/₈₀ ^{bpm} Pulse : 80 SPO2 : 97%

Rbs - 101mg/dl



c/o dry cough 7 day's

No/H/O Bm/ HTN,

F/H/O - No significant

No Active complain

Patient fit



FOLLOW-UP DATE :

ADVICE FOR ADMISSION YES NO

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PATIENTNAME	:MR.DEEPAKKUMARBORKAR	DEPARTMENT	:OPHTHALMOLOGIST		
AGE/SEX	:50-Y9-M14-D/MALE				
DOB	:26-05-1973	CONSULT-DATE	:08-Mar-2024-10:30AM		
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Weight:	Temp :	B.P. :	Pulse :	SPO2 :	



Handwritten notes in Hindi:
 6/12 6/24 ए.प.न. < 6/6
 Acc < +1.0 (+180) 6/6
 +1.0 +1.0 180 6/6
 N.V. + 2.25 SPH No
 C.V. Normal



FOLLOW-

UPDATE:ADVICEFORAD

YES	NO
-----	----

MISSION

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PT. NAME : MR. DEEPAK KUMAR BORKAR
MOBILE NO : 7869991799
DOCTOR : DR. AJIT KUMAR
REFERRED BY : SELF

AGE / SEX : 50/MALE
UH ID NO. : SRMH-24031973
COLLECTION : 08-03-2024
REPORTING : 08-Mar-2024

TEST NO
332

HAEMATOLOGY

TEST NAME	RESULT	UNIT	NORMAL VALUES
CBC (COMPLETE BLOOD COUNT)			
HAEMOGLOBIN (Hb)	12.4	gm/dL	13.5 - 17.5
TOTAL RBC COUNT	4.00	Million/cumm	4.5 - 5.9
HAEMATOCRIT (PCV)	37.2	%	41.5 - 50.4
RBC INDICES			
MCV	98.7	fL	78 - 96
MCH	31.0	pg	27 - 32
MCHC	31.4	%	33 - 37
RDW	15.0	%	11 - 16
TOTAL WBC COUNT (TLC)	6400	/cumm	4000 - 11000
DIFFERENTIAL COUNT			
Neutrophils	70	%	40 - 70
Lymphocytes	22	%	22 - 48
Eosinophils	03	%	0 - 6
Monocytes	05	%	0 - 8
Basophils	00	%	00 -
PLATELET COUNT	2.08	/ μ L	1.50 - 4.50
PCT	0.19	%	0.10 - 0.28
MPV(MEAN PLATELET VOLUME)	9.4	fL	8 - 11
PDW	12.9	%	11 - 18

-- End Of Report --

LAB TECHNICIAN

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Dr. Dhananjay Prasad
(MD-PATHOLOGY)

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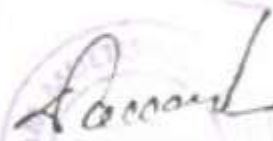
HAEMATOLOGY

TEST NAME	RESULT	UNIT	NORMAL VALUES
BLOOD GROUPING AND RH TYPING			
BLOOD GROUP	"B"	-	-
RH FACTOR	Positive	-	-

-- End Of Report --


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REFERRED BY : SELF

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REPORTING : 08-Mar-2024

TEST NO
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BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
LIVER FUNCTION TEST (LFT)			
BILIRUBIN TOTAL	0.78	mg/dL	0.2 - 1
BILIRUBIN DIRECT	0.49	mg / dl	0.1 - 0.6
BILIRUBIN INDIRECT	0.29	mg / dl	0.1 - 0.4
SGOT	32.4	U / L	10 - 55
SGPT	27.6	U / L	0 - 40
ALKALINE PHOSPHATASE	187.2	U / L	0 - 270
TOTAL PROTEIN	6.48	g / dl	6 - 8
ALBUMIN	3.92	g/dl	3.5 - 5.0
GLOBULIN	2.56	g / dl	2 - 3.5
A/G RATIO	1.36	g/dl	1 - 2.5

Clinical Significance:

Alanine transaminase (ALT)

ALT is an enzyme found in the liver that helps your body metabolize protein. When the liver is damaged, ALT is released into the bloodstream and levels increase.

Aspartate transaminase (AST)

AST is an enzyme that helps metabolize alanine, an amino acid. Like ALT, AST is normally present in blood at low levels. An increase in AST levels may indicate liver damage or disease or muscle damage.

Alkaline phosphatase (ALP)

ALP is an enzyme in the liver, bile ducts and bone. Higher-than-normal levels of ALP may indicate liver damage or disease, such as a blocked bile duct, or certain bone diseases.

Albumin and total protein

Albumin is one of several proteins made in the liver. Your body needs these proteins to fight infections and to perform other functions. Lower-than-normal levels of albumin and total protein might indicate liver damage or disease.

Bilirubin

Bilirubin is a substance produced during the normal breakdown of red blood cells. Bilirubin passes through the liver and is excreted in stool. Elevated levels of bilirubin (jaundice) might indicate liver damage or disease or certain types of anemia.

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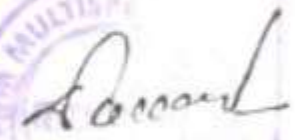
BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
	CREATININE		
CREATININE	0.95	mg / dl	0.6 - 1.2

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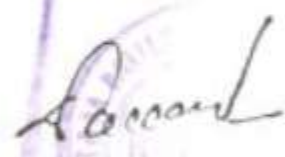
BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
	URIC ACID		
URIC ACID	5.63	mg/dL	3.6 - 7.7

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BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
BLOOD SUGAR - FASTING AND PP			
BLOOD SUGAR FASTING	72.1	mg/dL	60 - 120
BLOOD SUGAR PP	88.2	mg/dL	80 - 140

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BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
HBA1c (GLYCOSYLATED HEAMOGLOBIN)			
HBA1c	4.27	%	Normal Range : <6% - Good Control : 6 - 7% - Fair Control : 7 - 8% - Unsatisfactory Control : 8-10% - Poor Control : >10% -
Estimated average plasma glucose	74.7	mg/dl	80 - 120

Interpretation: As per American Diabetes Association(ADA)

Non diabetic adults >= 18 years	<5.7
At risk (prediabetes)	5.7 - 6.4
Diagnosing Diabetes	>= 6.5
Therapeutic goals for glycemic control	Good of Therapy > 19 years - <7.0 <19 years - <7.5

NOTE:

- HbA1c reflects long term fluctuations in the blood glucose concentration
- A diabetic patient who is recently under good control may still have a high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled.

Significance of Test:

HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long term glycemic control as compared to blood and urinary glucose determinations.

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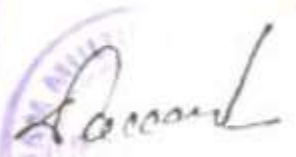
BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
LIPID PROFILE			
CHOLESTEROL	145.3	mg / dl	150 - 220
SERUM TRIGLYCERIDE	120.7	mg / dl	60 - 165
HDL	32.5	mg / dl	35 - 80
LDL	112.8	mg/dL	90 - 160
VLDL	24.1	mg/dl	20 - 50
CHOLESTEROL / HDL RATIO	4.47	mg/dl	3.5 - 5.5
LDL/HDL Ratio	3.47	mg/dl	2.5 - 3.5
TRIGLYCERIDES/HDL RATIO	3.71	mg/dl	2.0 - 4.0

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HAEMATOLOGY

TEST NAME	RESULT	UNIT	NORMAL VALUES
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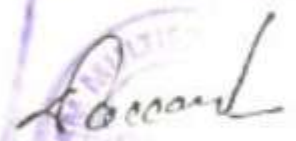
ESR by Western Green

ESR (ERYTHROCYTE SENDIMENTATION RATE)	10	mm at end of 1 hr	0 - 20
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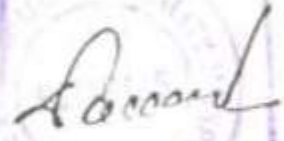
CLINICAL PATHOLOGY

TEST NAME	RESULT	UNIT	NORMAL VALUES
URINE SUGAR FASTING AND PP			
URINE SUGAR - FASTING	Absent		Absent -
URINE SUGAR - PP	Absent		Absent -

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CLINICAL PATHOLOGY

TEST NAME	RESULT	UNIT	NORMAL VALUES
URINE ROUTINE AND MICROSCOPY			
PHYSICAL EXAMINATION			
QUANTITY	20	ml	-
COLOUR	Colourless		-
APPEARANCE	S.Turbid		Pale Yellow -
REACTION	Acitic		Clear -
CHEMICAL EXAMINATION			
ALBUMIN	Absent		Acitic -
SUGAR	Absent		-
KETONE	Absent		Absent -
BILE SALT	Absent		Absent -
BILE PIGMENT	Absent		Absent -
MICROSCOPIC EXAMINATION			
PUS CELLS	3-4	/hpf	-
EPITHELIAL CELLS	5-6	/hpf	2 - 5
RBC	Nil	/hpf	1 - 5
CAST	Nil	/hpf	0 - 3
YEAST	Nil	/lpf	Nil -
CRYSTAL	Nil		Nil -
Bacteria	Nil	/lpf	Nil -
OTHERS	-		Nil -

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Dr. Dhananjay Prasad
(MD PATHOLOGY)

Near Railway Under Bridge, Basant Vihar Gate No. 1, Gondwara Chowk,
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Shree Ram Multispeciality Hospital (SRMH)

L o k a h S a m a s t a S u k h i n o B h a v a n t u

Mr. DEEPAK KU. BORKAR

Age: 50 Years

Sex: Male

Sample Collected At:

Ref. By: Dr. AJIT KUMAR (MD)

Registered: 08 Mar, 24 06:20 PM

Collected: 08 Mar, 24 06:32 PM

Reported: 09 Mar, 24 04:55 PM

BUN / Creatinine Ratio PANAL

Investigation	Observed Value	Unit	Biological Reference Interval
BUN			
BUN	13.8	mg/dL	7.00 - 20.00
Serum Creatinine	0.87	mg/dL	0.55 - 1.20
BUN / Creatinine Ratio	14.38		10:1 - 20:1

Blood urea nitrogen (BUN) is a waste product produced when the liver breaks down protein. The kidneys then filter it out of the blood and eliminate it through urine. Creatinine is a waste product created by the breakdown of phosphocreatine, a molecule stored in muscle tissue. The kidneys filter creatinine from the blood, and its levels in the body reflect the efficiency of the kidney's excretory function. therefore, BUN and creatinine are useful markers in assessing kidney health because they help doctors evaluate the kidney's filtration rate.

Dr. D. Prasad
M.D.(Pathologist)

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TFT

Thyroid Function Test (TFT)

Investigation	Observed Value	Unit	Biological Reference Interval
THYROID SERUM HORMONS			
Serum Triiodothyronine (T3)	1.29	ng/mL	0.89 - 1.87
Serum thyroxine (T4)	9.94	ug/dL	5.1 - 14.28
Thyroid Stimulating Hormone (TSH)	3.37	µIU/mL	0.66 - 5.67

Comments:-

- (i) Ethnicity, iodine intake, gender, age, body mass index and Exercise influences the reference range of Thyroid hormones and serum TSH concentrations.
- (ii) Changes in Thyroid Hormones (especially T3) and TSH may be seen as early as 24 hours after the onset of non-thyroid illness. (Poor nutrition/starvation, sepsis, burns, malignancy, myocardial infarction, post-surgery, and with chronic liver and renal disease)
- (iii) Serum total T4 and T3 concentrations increase to approximately 150% of non-pregnant values – this occurs during the first half of pregnancy and is maintained thereafter until parturition. Free T4 concentrations also change during pregnancy: in the first trimester a transient rise is often observed.
- (iv) Measurement of FT4 and FT3 is best avoided in patients receiving heparin therapy. (When indicated, blood sample should be taken 10 hours after the last injection of heparin, and analyzing it without delay, can reduce the risk of artifactual hyperthyroxinaemia.)
- (v) Phenytoin, carbamazepine and furosemide cause artifactual increase in free T4 (FT4) and decrease in total T4.



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Mr DEEPAK KU.BORKAR

Age: 50 Years

Sex: Male

Sample Collected At:


Ref. By: Dr. AJIT KUMAR (MD)

Registered: 08 Mar, 24 06:06 PM

Collected: 08 Mar, 24 06:14 PM

Reported: 09 Mar, 24 08:41 PM

Investigation	Observed Value	Unit	Biological Reference Interval
PSA, Total	1.98	ng/mL	0 - 4



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END OF REPORT
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Mr. DEEPAK KUMAR BORKAR

Sample Collected At :

Registered : 08 Mar,24 06:23 PM

Age: 50 Years

Ref By : Dr.AJIT KUMAR

Collected : 08 Mar,24 06:30 PM

Sex: Male

Reported : 09 Mar,24 4:26 PM

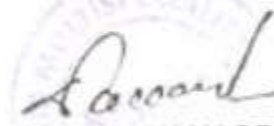
GAMAMA GLUTAMYL TRANSFERASE (GGT)

INVESTIGATION	RESULT	REFERENCE VALUE	UNIT
GAMMA – GLUTAMYL TRANSFERASE (GGT) , SERUM	16.04	12.00-18.00	U/L

GENDER -	NORMAL RANGE(U/L)
MALE -	12.00-18.00
FEMALE -	6.00-29.00

COMMENTS:-

Gamma – Glutamyl Transferase (Ggt) Is An Enzyme That Is Found In Many Organs Througout The Body , With The Highest Concentrations Found In The Liver .Ggt Is Elevated In The Blood In Most Diseases That Cause Damage To The Liver Or Bile Ducts ,This Test Measures The Level Of Ggt In A Blood Samle.


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ECHOCARDIOGRAPHY REPORT

Name	Mr. Deepak Kumar Borkar	Age / Sex	50 years / Male
Date	08/03/2024	UHID no	24031973

PULMOANRY VELOCITY ; 0.76 m/s

AORTIC VELOCITY: 1.40 m/s

TRICUSPID VELOCITY: 1.36 m/s

PASP: 18 mmHg + RAP

M-Measurement Value

Aorta	2.8	LVEDD	4.1
LA	3.5	IVSD	1.2
LVEF	>60%	LVPWD	1.2

FINAL IMPRESSION

- Mild LVH
- NO RWMA
- Normal LV Systolic Function
- LVEF >60%
- Grade I Diastolic Dysfunction
- Trace MR/TR, PASP 18 mmHg + RAP
- No Clot/PE / Vegetation

Dr. Nikhil Motiramani

(MBBS, MD,DM Card)

Dr. Raghvesh Ojha

(MBBS, Dip Card)

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Clarity Medical TrueBeat 200 Ver2.2.6H

Mr d.epak kumar

M 50Y 000Kg

11:14 AM

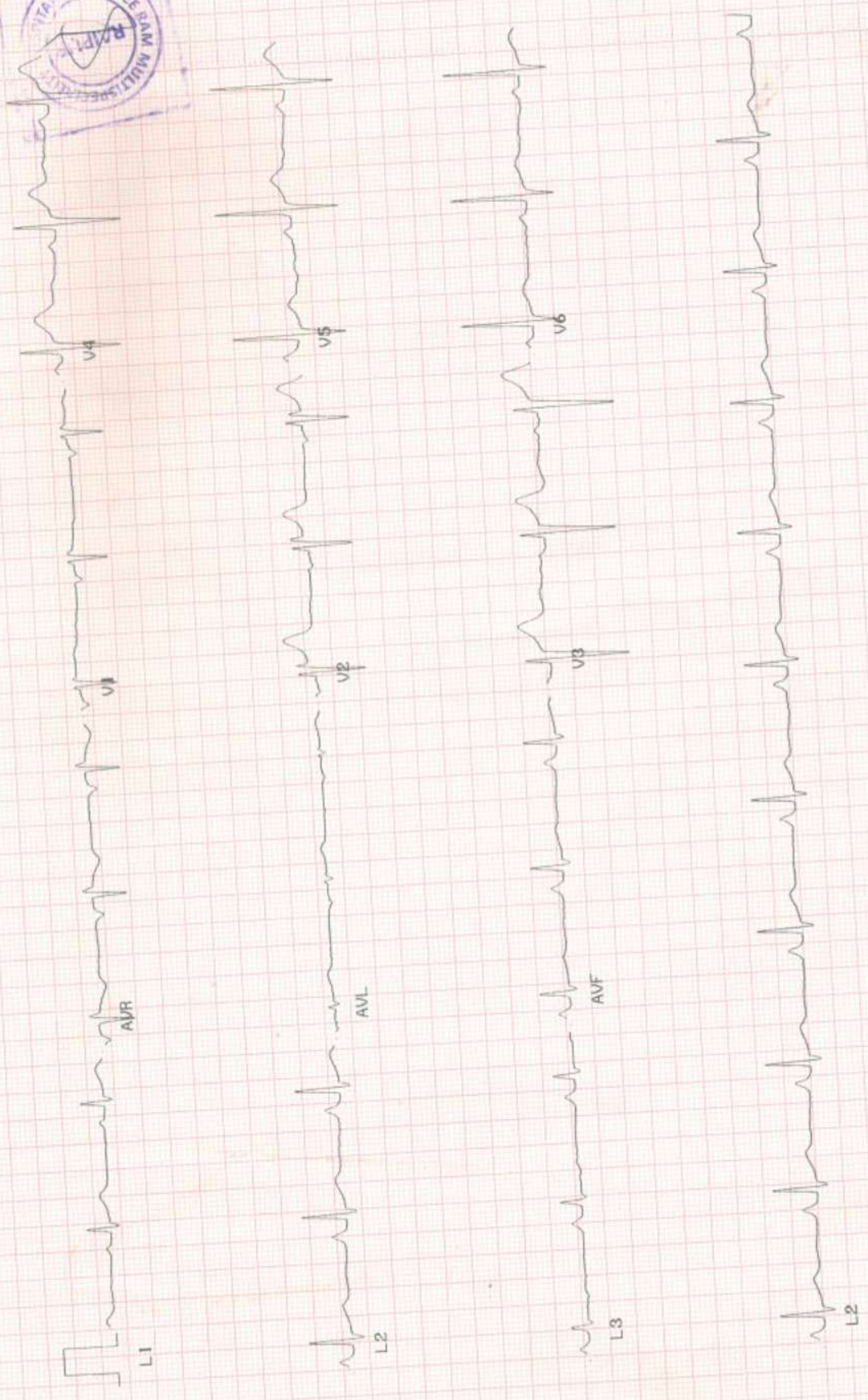
08/03/2024

AUTO 12LS BLC-Y

P = 92 ms
QRS = 2 ms
PR = 162 ms
QT = 365 ms
QTc = 371 ms

QT/QTc =
QT/RR =
QRS axis =
P axis =
T axis =

To be clinical correlated: HR = 62bpm
Sinus Rhythm
Normal ECG



Ref By

Dr. Anand Kumar



SHRI RAM IMAGING & DIAGNOSTIC CENTER

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DR ANAND BANSAL

MBBS MD DNB(Radiodiagnosis)
(IMS BHU) (Gold Medalist)
Ex Senior Resident (AIIMS Raipur)
Ex Assistant Professor (Pt JNMC Raipur)
Reg. No. - CGMC 6359/2015

5D SONOGRAPHY -16 SLICE CT SCAN - DIGITAL X RAY - PATHOLOGY - BIOPSY

PATIENT NAME: DEEPAK KUMAR	DATE: 09/03/2024
REF PHY: SHRIRAM MULTISPECIALITY HOSPITAL GUDHIYARI, PATIENT ID: 45911	AGE/SEX: 50 Years/MALE

USG WHOLE ABDOMEN

Liver: Liver is normal in size (9.9 cm), smooth in outline & echotexture.

Billiry system: IHBR's are not dilated. CBD is not dilated.

Liver vessels: Portal vein and hepatic veins are normal.

Gall bladder: Distended with anechoic lumen and normal wall thickness.

Pancreas & Paraaortic Region: Normal. Pancreatic duct not dilated.

Spleen: Is normal in size measures (9.5 cm) with normal echotexture.

Kidneys	RIGHT	LEFT
SIZE	9.9 x 4.3 cm	10.6 x 4.6 cm
CORTICAL ECHOGENICITY	Normal	Normal
CORTICOMEDULLARY DIFFERENTIATION	Maintained	Maintained
PELVICALYCEAL SYSTEM	Not dilated	Not dilated
URETER	Not dilated	Not dilated
CALCULUS	No	No

Urinary bladder: The urinary bladder shows physiological distention. It shows normal wall thickness.

Prostate: is normal in size measures 3.3 x 4.1 x 3.1 cm (weight 21.4 gm) with normal shape & echotexture.

Fluid: There is no free or loculated fluid collection in abdomen or pelvis.

Bowel loops are grossly normal.

No significant lymphadenopathy is noted.



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IMPRESSION:

- **USG ABDOMEN WITHIN NORMAL LIMITS.**

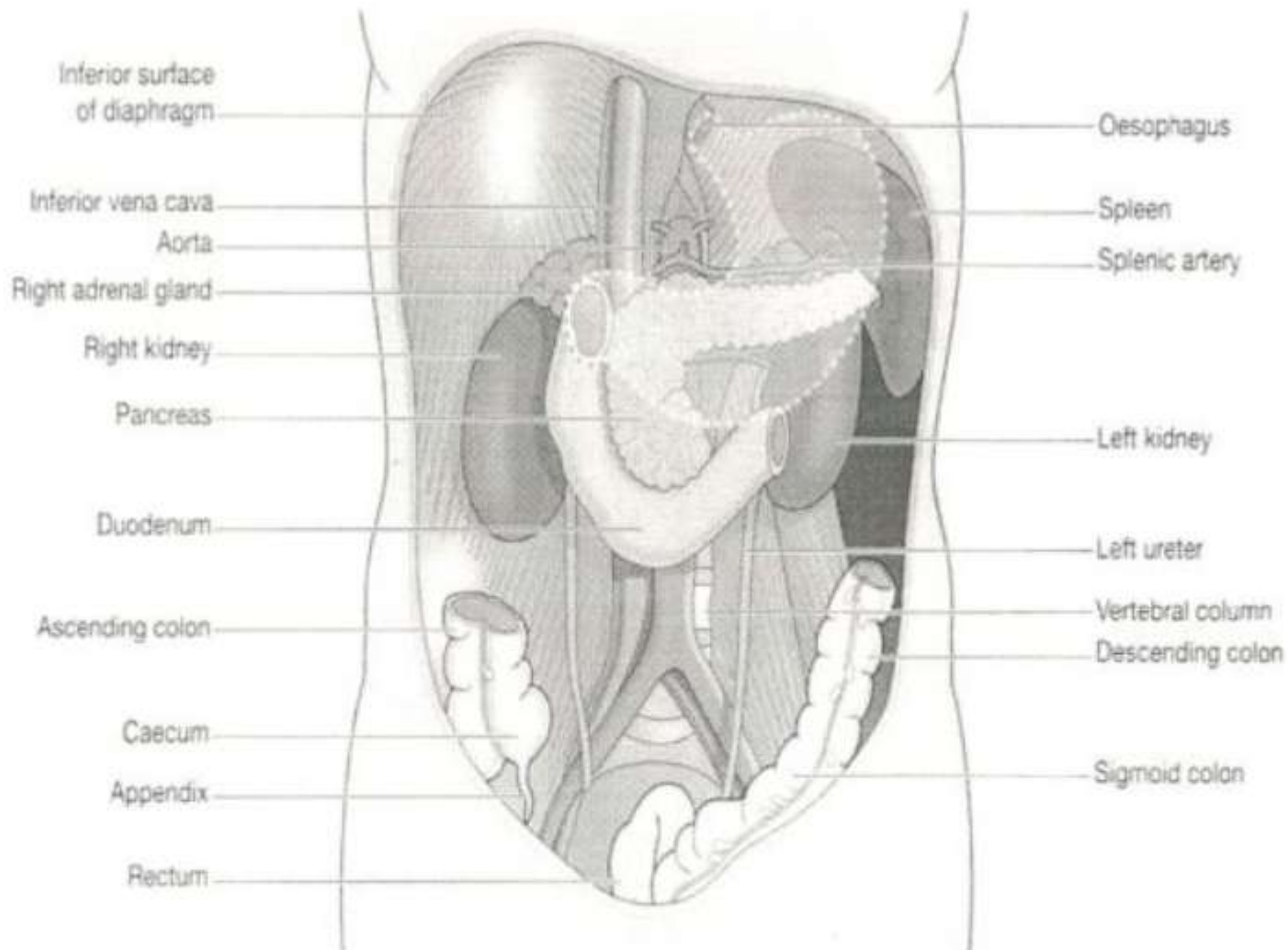
Advised clinical correlation/further evaluation if clinically indicated.



DR ANAND BANSAL
MD DNB RADIODIAGNOSIS
CONSULTANT RADIOLOGIST
CGMC 2015/6359

Typist: DEKUMAR SAHU

This report is for perusal of the doctor only not the definitive diagnosis; findings have to be clinically correlated. Ultrasound has its limitations in obese patients and in retroperitoneal organs. All congenital abnormalities cannot be detected on ultrasound. This report is not for medico-legal purposes.







Shree Ram Multispeciality Hospital (SRMH)

L o k a h S a m a s t a S u k h i n o B h a v a n t u

PATIENT NAME: DEEPAK BORKAR	DATE: 08/03/2024
PATIENT ID: SRMH-24031973	AGE/SEX: 50Years/Male

RADIOGRAPH CHEST PA VIEW.

FINDINGS:

- Bilateral lung parenchyma is clear.
- Both apices free.
- Trachea in mid line.
- C T ratio within normal limits.
- Both hila are normal.
- Both costo & cardiophrenic angles are clear.
- Bony cage normal.
- Soft tissue appears normal.

IMPRESSION : No significant abnormality detected.

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MD DNB RADIODIAGNOSIS
CONSULTANT RADIOLOGIST
CGMC 2015/6359

Typist: HRITIK CHANDANKAR

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