



भारत सरकार

Government of India



अनिल कुमार धनगर

Anil Kumar Dhangar

जन्म तिथि/ DOB: 15/08/1991

पुरुष / MALE



9562 2655 6021

मेरा **आधार**, मेरी पहचान





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CITI MULTI SPECIALITY HOSPITAL

MIG -215 216, Gautam Nagar, Govindpura, Bhopal-462023 (M.P.)
Phone No. : 0755-4272669, 4250134



Patient Name : MR ANIL KUMAR DHANGAR



CMSH24/469

Age/Gender : 32 Yrs/Male

Registration Date : 08/01/2024 08:55 AM

Ref. Dr. : Dr. APOLLO CLINIC

Collection Date : 08/01/2024 08:55 AM

Center : CMH OPD

Report Date : 08/01/2024 01:59 PM



HAEMATOLOGY REPORT

Test Description	Result	Unit	Biological Reference Ranges
HbA1c Glycosilated Haemoglobin	5.3	%	Non-diabetic: <= 6.0 Pre-diabetic: 6.0-7.0 Diabetic: >= 7.0
Estimated Average Glucose :	105	mg/dL	
Reference Range (Average Blood Sugar):			
Excellent control	: 90 - 120 mg/dl		
Good control	: 121 - 150 mg/dl		
Average control	: 151 - 180 mg/dl		
Action suggested	: 181 - 210 mg/dl		
Panic value	: > 211 mg/dl		

Interpretation & Remark:

- HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
- HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
- Trends in HbA1c are a better indicator of diabetic control than a solitary test.
- Low glycated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
- To estimate the eAG from the HbA1C value, the following equation is used: $eAG(mg/dl) = 28.7 * A1c - 46.7$
- Interference of Haemoglobinopathies in HbA1c estimation.
 - For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
 - Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status
 - Heterozygous state detected (D10/ turbo is corrected for HbS and HbC trait).
- In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control. Excellent Control - 6 to 7 %, Fair to Good Control - 7 to 8 %, Unsatisfactory Control - 8 to 10 % and Poor Control - More than 10 % .

Dr. Subhash Parmar
Consultant Pathologist



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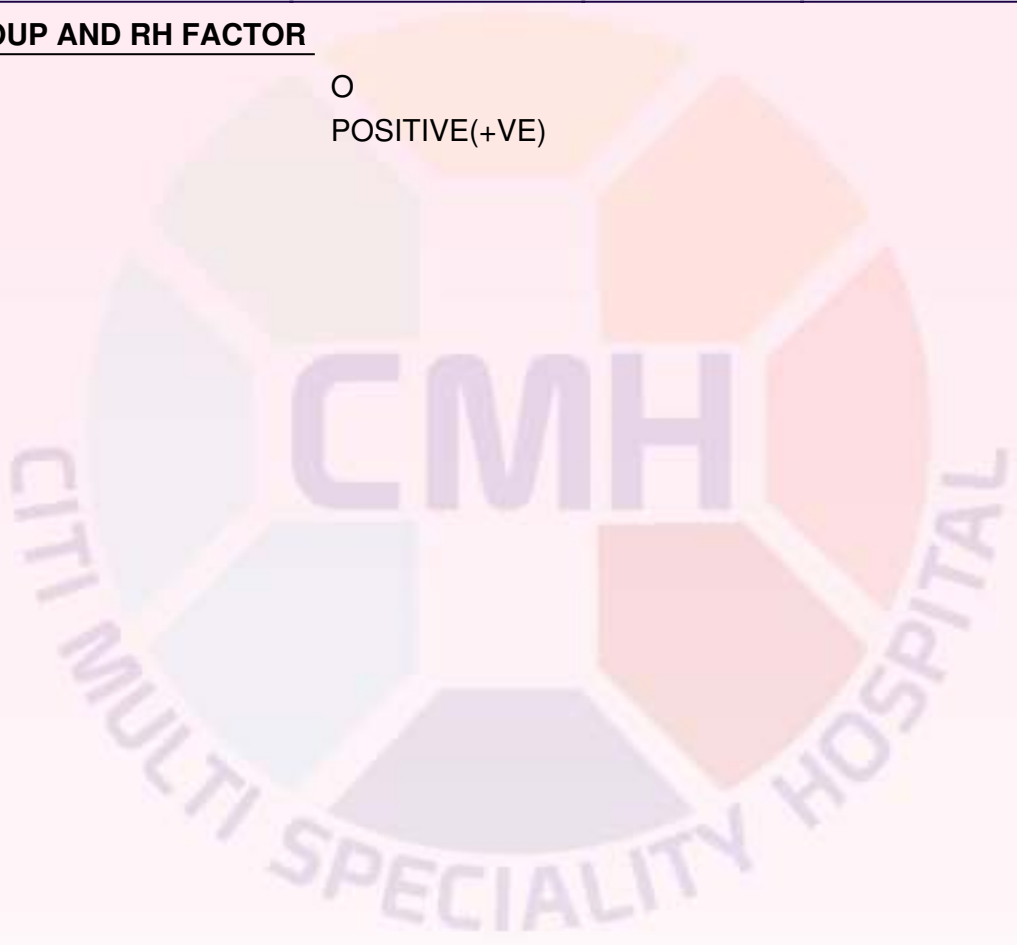


HAEMATOLOGY REPORT

Test Description	Result	Unit	Biological Reference Ranges
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BLOOD GROUP AND RH FACTOR

ABO Type	O		
Rh Factor	POSITIVE(+VE)		



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BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
RENAL FUNCTION TEST (RFT)			
Blood Urea	23.5	mg/dl	15 - 50
Serum Creatinine	0.80	mg/dl	0.7 - 1.5
eGFR	118	ml/min	
Blood Urea Nitrogen-BUN	10.98	mg/dl	7 - 20
Serum Sodium	139.6	mmol/L	135 - 150
Serum Potassium	4.10	mmol/L	3.5 - 5.0
Ionic Calcium	1.10	mmol/L	1.10 - 1.35
Uric Acid	5.1	mg/dl	3.2 - 7.0

NOTE : Please correlate with clinical conditions.

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BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
LIVER FUNCTION TEST (LFT)			
TOTAL BILIRUBIN	0.81	mg/dl	0 - 1.2
DIRECT BILIRUBIN	0.14	mg/dL	0 - 0.3
INDIRECT BILIRUBIN	0.67	mg/dl	0.1 - 0.8
SGOT (AST)	29.0	U/L	0 - 35
SGPT (ALT)	32.0	U/L	0 - 45
ALKALINE PHOSPHATASE	92.0	U/L	40 - 140
GAMMA GLUTAMYL TRANSFERASE	23.6	IU/L	15 - 45
TOTAL PROTEIN	7.21	g/dl	6.4 - 8.3
SERUM ALBUMIN	4.41	g/dl	3.5 - 5.2
SERUM GLOBULIN	2.80	g/dl	1.8 - 3.6
A/G RATIO	1.58		1.2 - 2.2

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BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
LIPID PROFILE			
Cholesterol-Total	182.0	mg/dL	< 200 Desirable 200-239 Borderline High > 240 High
Triglycerides level	91.0	mg/dL	< 150 Normal 150-199 Borderline High 200-499 High > 500 Very High
HDL Cholesterol	45.2	mg/dL	< 40 Major Risk for Heart > 40 Normal
LDL Cholesterol	118.60	mg/dL	< 100 Optimal 100-129 Near/Above Optimal 130-159 Borderline high 160-189 High > 190 Very High
VLDL Cholesterol	18.20	mg/dL	6 - 38
CHOL/HDL RATIO	4.03		3.5 - 5.0
LDL/HDL RATIO	2.62		2.5 - 3.5

NOTE

8-10 hours fasting sample is required

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BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
Fasting Blood Sugar	89.0	mg/dl	Normal: 70-110 Impaired Fasting Glucose(IFG): 100-125 Diabetes mellitus: >= 126

Method : Hexokinase

Note:- An individual may show higher fasting glucose level in comparison to post prandial glucose level due to following reasons.

The glycaemic index and response to food consumed, Changes in body composition, Increased insulin response and sensitivity,

Alimentary hypoglycemia, Renal glycosuria, Effect of oral hypoglycaemics & Insulin treatment.

Post-Prandial Blood Sugar

101.0

mg/dl

70 - 140

Method : Hexokinase

Interpretation:-

Normal: 70-140

Impaired Glucose Tolerance:140-200

Diabetes mellitus: >= 200

(on more than one occassion)

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IMMUNOASSAY REPORT

Test Description	Result	Unit	Biological Reference Ranges
TRI-iodothyronin, (T3)	1.37	ng/mL	0.69 - 2.15
THYROXIN, (T4)	85.4	ng/mL	52 - 127
Thyroid Stimulating Hormone(TSH)- Serum	2.96	μIU/mL	0.3-4.5 Pregnancy (As per American Thyroid Association)

First Trimester : 0.1-2.5

Second Trimester : 0.2-3.0

Third trimester : 0.3-3.0

Method : CLIA

INTERPRETATION

TSH	T3 / FT3	T4 / FT4	Suggested Interpretation for the Thyroid Function Tests Pattern
Within Range	Decreased	Within Range	• Isolated Low T3-often seen in elderly & associated Non-Thyroidal illness. In elderly the drop in T3 level can be upto 25%.
Raised	Within Range	Within Range	• Isolated High TSH especially in the range of 4.7 to 15 mIU/ml is commonly associated with Physiological & Biological TSH Variability. • Subclinical Autoimmune Hypothyroidism • Intermittent T4 therapy for hypothyroidism • Recovery phase after Non-Thyroidal illness"
Raised	Decreased	Decreased	• Chronic Autoimmune Thyroiditis • Post thyroidectomy, Post radioiodine • Hypothyroid phase of transient thyroiditis"
Raised or within Range	Raised	Raised or within Range	• Interfering antibodies to thyroid hormones (anti-TPO antibodies) • Intermittent T4 therapy or T4 overdose • Drug interference- Amiodarone, Heparin, Beta blockers, steroids, anti-epileptics"
Decreased	Raised or within Range	Raised or within Range	• Isolated Low TSH -especially in the range of 0.1 to 0.4 often seen in elderly & associated with Non-Thyroidal illness • Subclinical Hyperthyroidism • Thyroxine ingestion"
Decreased	Decreased	Decreased	• Central Hypothyroidism • Non-Thyroidal illness • Recent treatment for Hyperthyroidism (TSH remains suppressed)"
Decreased	Raised	Raised	• Primary Hyperthyroidism (Graves' disease), Multinodular goitre, Toxic nodule • Transient thyroiditis: Postpartum, Silent (lymphocytic), Postviral (granulomatous, subacute, DeQuervain's), Gestational thyrotoxicosis with hyperemesis gravidarum"
Decreased or within Range	Raised	Within Range	• T3 toxicosis • Non-Thyroidal illness

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URINE EXAMINATION REPORT

Test Description	Result	Unit	Biological Reference Ranges
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URINE ROUTINE

General Examination

Colour	Pale Yellow		Pale Yellow
Transparency (Apperance)	Clear		Clear
Deposit	Absent		Absent
Reaction (pH)	Acidic		5.0-8.5
Specific Gravity	1.030>		-1.005-1.030

Chemical Examination

Urine Protein	Absent		Absent
Urine Ketones (Acetone)	Absent		Absent
Urine Glucose	Absent		Absent
Bile pigments	Absent		Absent
Bile salts	NIL		NIL
Urobilinogen	Normal		Normal
Nitrite	Negative		Negative

Microscopic Examination

RBC's	NIL	/hpf	NIL
Leukocyte (Pus cells)	2-4	/hpf	0-5/hpf
Epithelial Cells	1-2	/hpf	0-4/hpf
Crystals	Absent		Absent
Casts	Not Seen		Not Seen
Amorphous deposits	Absent		Absent
Yeast Cells	Not seen		Not seen

Note : 1. Chemical examination through Dipstick includes test methods as Protein (Protein Error Principle), Glucose (Glucose oxidase-Peroxidase), Ketone (Legals Test), Bilirubin (Azo- Diazo reaction), Urobilinogen (Diazonium ion Reaction) Nitrite (Griess Method). All abnormal results of chemical examination are confirmed by manual methods. 2. Pre-test conditions to be observed while submitting the sample- First void, mid-stream urine, collected in a clean, dry, sterile container is recommended for routine urine analysis, avoid contamination with any discharge from vaginal, urethra, perineum, as applicable, avoid prolonged transit time & undue exposure to sunlight. 3. During interpretation, points to be considered are Negative nitrite test does not exclude the urinary tract infections, Trace proteinuria can be seen with many physiological conditions like prolonged recumbency, exercise, high protein diet. False positive reactions for bile pigments, proteins, glucose and nitrites can be caused by peroxidase like activity by disinfectants, therapeutic dyes,

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COMPLETE BLOOD COUNT

Haemoglobin	15.6	gm/dL	12.0 - 16.0
RBC Count	5.18	mil/cu.mm	4.00 - 5.50
Hematocrit HCT	41.6	%	40.0 - 54.0
Mean Corp Volume MCV	80.3	fL	80.0 - 100.0
Mean Corp Hb MCH	30.1	pg	27.0 - 34.0
Mean Corp Hb Conc MCHC	37.5	gm/dL	32.0 - 36.0
Platelet Count	2.63	lac/cmm	1.50 - 4.50
Total WBC Count /TLC	5.42	10 ³ /cu.mm	4.0 - 11.0

DIFFERENTIAL LEUCOCYTE COUNT

Neutrophils	66	%	40 - 70
Lymphocytes	28	%	20 - 40
Monocytes	04	%	02 - 10
Eosinophils	02	%	01 - 06
Basophils	00	%	00 - 01

Absolute Differential Count

Absolute Neutrophils Count	3.6	thou/mm ³	2.00 - 7.00
Absolute Lymphocyte Count	1.5	thou/mm ³	1.00 - 3.00
Absolute Monocytes Count	0.2	thou/mm ³	0.20 - 1.00
Absolute Eosinophils Count	0.1	thou/mm ³	0.02 - 0.50

EDTA Whole Blood - Tests done on Automated Three Part Cell Counter. (WBC, RBC Platelet count by impedance method, WBC differential by VCS technology other parameters calculated) All Abnormal Haemograms are reviewed confirmed microscopically.

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Test Description	Result	Unit	Biological Reference Ranges
ESR - ERYTHROCYTE SEDIMENTATION RATE	09	mm/hr	0 - 09

Method: Wintrob's

INTERPRETATION :

1. It indicates presence and intensity of an inflammatory process, never diagnostic of a specific disease. Changes are more significant than a single abnormal test.
2. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis, polymyalgia rheumatica.
3. It is also increased in pregnancy, multiple myeloma, menstruation, and hypothyroidism.

**** End of the report****

This report is not valid for medico legal aspects. This is just a professional opinion not the final. Kindly correlate clinically because of technical, lack of clinical information and physical findings, if any disparity noted please inform.



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Phone No. : 0755 - 4250134
Mobile No. : 7771008860, 8319214664, 9303135719



Patient- Name:	MR. ANIL KUMAR DHANGAR	Age/Sex:	32Y/M
Referred. By:	INS	Date:	08.01.2024

X-RAY CHEST PA VIEW

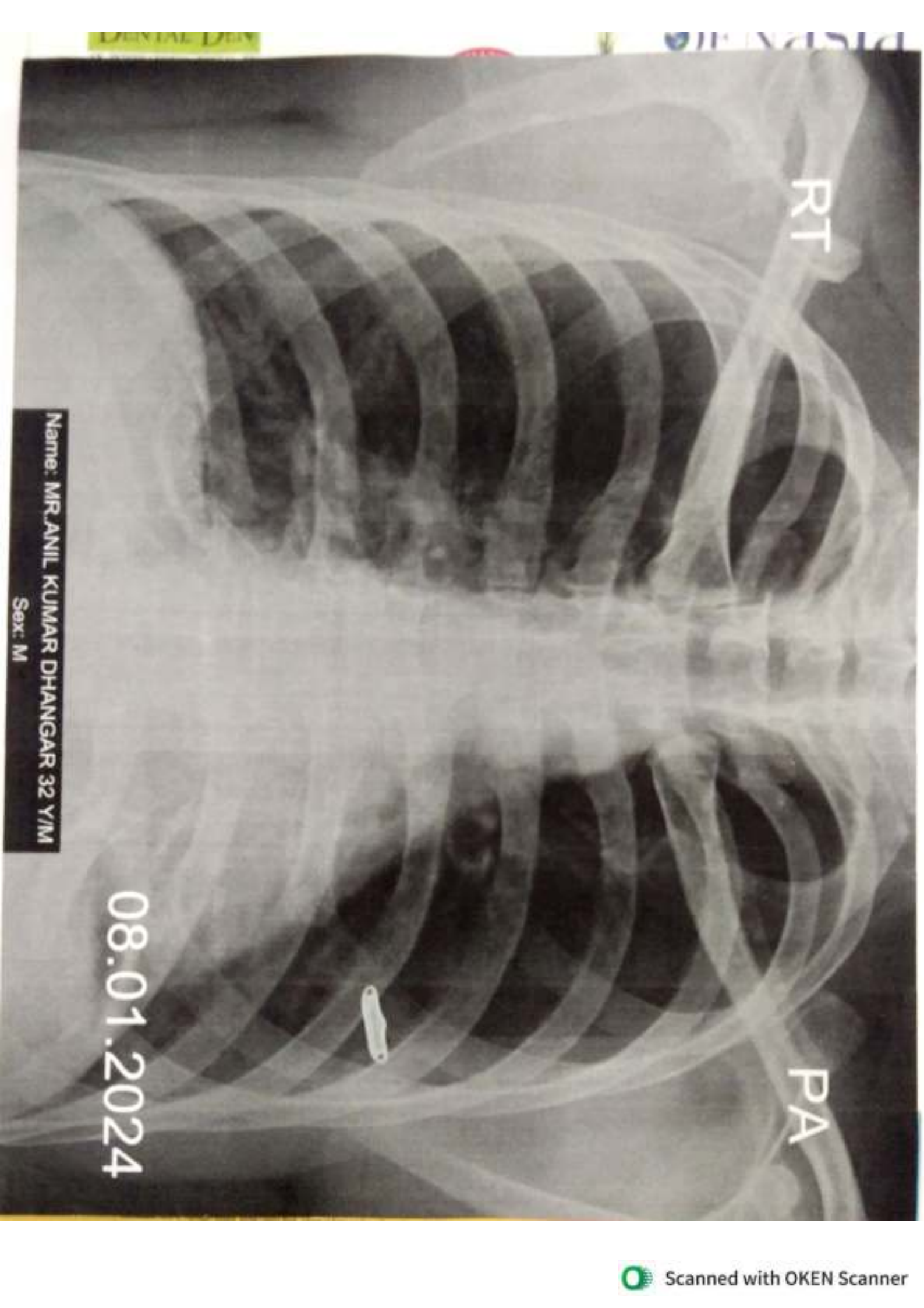
- Bilateral Lungs Fields Appear Clear.
- Bilateral Hilar Shadows Appear Clear.
- Bilateral CP Angels Appear Clear.
- Both The Domes Of Diaphragm Appear normal in shape and position.
- Visualized bony cage and soft tissue appear normal.

IMPRESSION

No Significant Abnormality.

Dr. SANJAY..
CONSULTANT RADIOLOGIST

Empanelled with : State Government, M.P.Police, ESIC, HPCL, Punjab National Bank, Indian Bank
Food Corporation of India, Ayushman Bharat



RT

PA

08.01.2024

Name: MR. ANIL KUMAR DHANGAR 32 Y/M

Sex: M



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AN INTERNATIONAL DENTAL SPA

Dr. Prashant Tripathi

Professor, MDS (Endodontist) College of Dental Sciences
Implantologist, Digital & LASER Smile Design Expert,
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Name: Arvith Kummer Dhanger Age / Sex : 32 / M Date : 8/Jan/24 O.P.D. No. : 0203

C/O pt want oral
check up done.

M / DH _____

C/E Stain ++, Calculus ++

INVESTIGATION ADVISE

X-Ray / OPG / CBCT

DENTAL TREATMENT PLANNING

- Oral Prophylaxis
- Filling
- Extraction
- R.P.D. or F.P.D.
- RCT
- Scaling or Flap Surgery
- Ortho Treatment
- Denture
- Implant
- LASER
- Teeth Whitening
- AESTHETIC TREATMENT
- PRP
- Peeling
- Botox
- Filler
- LASER

old scaling

Dr. Jyoti

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 BHARA: City Municipal Hospital, Bhaora Road, Bhaora, M.P. | #+91 8120202052
 RAJGARH: Prashant Tripathi, Zone - 11, Ward - 12, Sector - 13, City Road, Bhaora of Shaktinagar, Bhaora, Bhaora Road, Bhaora, M.P. | #+91 8120202052
 J.K. Road - 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861, 862, 863, 864, 865, 866, 867, 868, 869, 870, 871, 872, 873, 874, 875, 876, 877, 878, 879, 880, 881, 882, 883, 884, 885, 886, 887, 888, 889, 890, 891, 892, 893, 894, 895, 896, 897, 898, 899, 900, 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 913, 914, 915, 916, 917, 918, 919, 920, 921, 922, 923, 924, 925, 926, 927, 928, 929, 930, 931, 932, 933, 934, 935, 936, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 947, 948, 949, 950, 951, 952, 953, 954, 955, 956, 957, 958, 959, 960, 961, 962, 963, 964, 965, 966, 967, 968, 969, 970, 971, 972, 973, 974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 985, 986, 987, 988, 989, 990, 991, 992, 993, 994, 995, 996, 997, 998, 999, 1000.

A Unit of Vijay Ixmi Group



CITI MULTI SPECIALITY HOSPITAL

MIG - 215 216, Gautam Nagar, Govindpura, Bhopal-462023 (M.P.)
Phone No. : 9755 - 4250134
Mobile No. : 9771008080, 8319214664, 9303135718



ANIL KUMAR
SHARMA
32/M

08/1/24

o/e
no complaint in
eye



o/e

VA { R.E. NAD
L.E. NAD

- > NO. ANY TRESH COMPLAINT IN BOTH EYE
- > NO. WATER-DISCHARGE IN BOTH EYE
- > CLEAR VISION IN BOTH EYE.

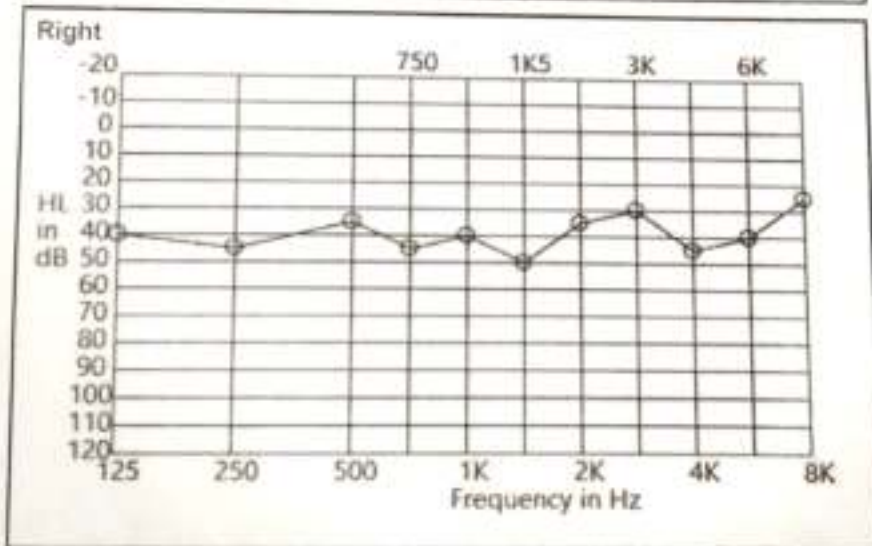
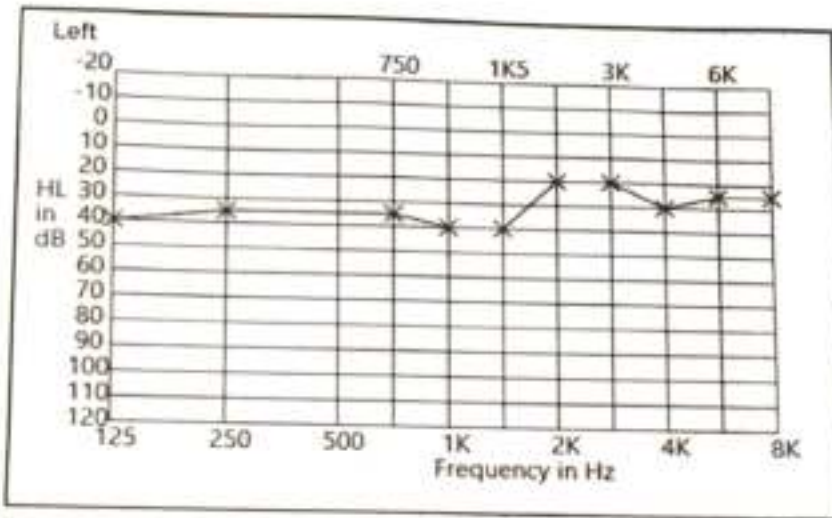
CITI MULTISPECIALITY HOSPITAL

MIG 216, Gautam Nagar

BHOPAL

462023

Name	Case No.	Age	Sex	Phone No.
MR ANIL KUMAR	21	32	Male	9586022501
Address	Referred By		Date & Time	
NEEMUCH	MEDIWHEEL		08/01/24	



Interpretation

Normal Hearing Study

Dr. *Chi Gupta*
Doctor/Audiologist

INSURANCE

Reg. No. 11671



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Phone No. : 8755 - 4250134
Mobile No. : 7771998660, 8318214864, 9303135719



DIET CHART FOR PATIENTS/ आहार तालिका

Date: 8.10.2024

Dietician Name: Dr. O.P. Verma Email: citimultispecialityhospital@gmail.com
 Patient Name: MR ANIL KUMAR Diagnosis: Δ Age/Sex: 32y/m
 Height (cm): 167 Weight (Kg): 61 kg BMI: 22.2
 Type of Diet: High protein, Low salt
 Total Kcal: 2-4 Kcal/day Total Protein: 2-4 gm g/day
 Total Fat: 2-3 gm g/day Total Fluids: 5-6 Liter

<p>Tea चाय/ Milk दूध / coffee काफी / Biscuit बिस्किट/ Toast टोस्ट / Bread ब्रेड (बेहु बानी)</p> <p>Milk दूध/ Soup सूप/ Poha पोहा/ Daliya दलिया/ bread ब्रेड + Egg अंडा / Idli इडली / Upma उपमा / अणू पराठा/ पनीर</p> <p>Roti रोटी / Rice चावल (बाद रहिये) / Khichri खिचड़ी / Sabji सब्जी / Dal दाल / Curd दही (नाजा) / Salad सलाद</p> <p>Fruit फल/ अणूरित अनाज (मूंग/चना/मोड) / Sattu सतु / Fruit Chaat फ्रूट चाट / Coconut Water नारियल पानी / Butter Milk बटर</p> <p>Tea चाय/ Milk दूध / coffee काफी / Chana + Puffed Rice चना + मूदमूरा / Dhokla डोकला / Uttapam उत्तपम / Cheela चीला/ Green Chutney हरी चटनी/ मछाने</p> <p>Roti रोटी / Rice चावल / Khichri खिचड़ी / Sabji सब्जी / Dal दाल / Curd दही (नाजा) / Salad सलाद/ Daliya दलिया</p> <p>Milk दूध/ Butter Milk बटर / Dry fruit / Milk Shake मिल्क शेक / Fruit फल / बादाम + अखरोट</p>	<p><u>Break fast :</u></p> <p><u>Tea - Bread</u></p> <p><u>गेहूँ का UPMA</u></p> <p><u>Ankurit aur fruiting</u></p> <p><u>lunch :</u></p> <p><u>Roti, Rice</u></p> <p><u>sattu, curry</u></p> <p><u>Dinner - khichdi</u></p> <p><u>Roti Rice</u></p> <p><u>subji, dahiya</u></p> <p><u>milk</u></p>
<p>Only Oil : <u>2-3 gm</u> gm/day <u>open</u></p> <p>Salt नमक <u>2-3 gm</u> gm/day 5 gm = 1 चम्मच (छोटा)</p> <p>Ghee : <u>2-3 gm</u> gm/day</p>	

Empanelled with : State Government, M.P. Police, ESIC, HPCL, Punjab National Bank, Indian Bank Food Corporation of India, Ayushman Bharat

संतुलित आहार व नियम

- आहार 2 बार के स्थान पर 4 से 6 भाग में विभाजित करके खाये, पेट भर न खाये तथा बहुत भूख लगाने की राह माँ देखें।
- भोजन हमेशा सीधे बैठकर धीरे – धीरे अच्छे से चबाकर खाये तथा भोजन के समय टी.वी. न देखें।
- रात का भोजन सोने से लगभग 1 से 2 घंटे पहले कर लें तथा भोजन के बाद न तो आराम करें और न ही सीधे सुके।
- यथा संभव सुबह एवं शाम दोनों समय कम से कम आधा घंटा पैदल चले या हल्का व्यायाम करें।
- अपना वजन नियंत्रित रखें एवं मोटापे से बचें, फास्ट फूड के स्थान पर संतुलित आहार लें।

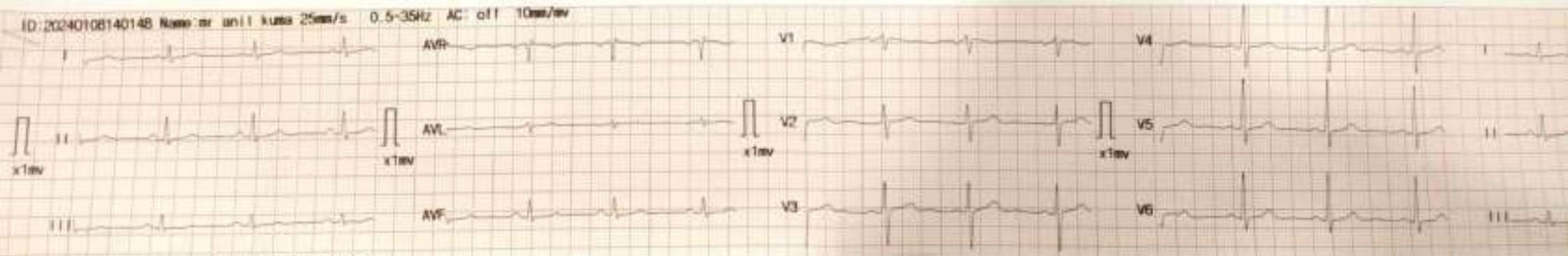
लिवर के स्वास्थ्य हेतु भोजन का चयन :

- गेहूँ के आटे में 1:3 के अनुपात में सोयाबीन आटा व चना आटा मिलाकर उपयोग करें।
- खाने के ऊपर से नमक का उपयोग न करें, बिप्पा, प्रोसेस्ड चीज, कड़क चाय, काफी, आचार, पापड़, टमेटो केचप, कोक, कार्बोनेटेड ड्रिंक्स का सेवन कम करें एवं अल्कोहल, तम्बाकू का सेवन न करें।
- आहार में अंकुरित अनाज का उपयोग करें, सोया मिल्क तथा नारियल तेल को भोजन में शामिल करें।

नोट :

1. किसी भी चीज में ऊपर से नमक न डालें।
2. अत्यधिक तेज मसालों का उपयोग न करें।
3. अत्यधिक तली हुई चीजें जैसे समोसा, कचोरी, सेव, पपड़, बजिया, आदि का उपयोग न करें।
4. खाने में अंकुरित अनाज, सोयाबिन, पनीर, दालें, दूध व दूध से बने पदार्थ, सचू पाउडर, सिके चने आदि का उपयोग करें।

ID: 20240108140148 Name: mr anil kumar 25mm/s 0.5-35Hz AC: off 10mm/ev



Organization: ceh Doctor: dr s.s gupta



CITI MULTI SPECIALITY HOSPITAL

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Mobile No. : 7771008660, 8319314864, 8303135719



PATIENT ; MR. ANIL KUMAR
Age/Sex : 32Y/M
Date : 08/01/2024

USG ABDOMEN AND PELVIS

Liver : The liver is normal in size, shape, and increase in echogenecity. Intra and extra hepatic biliary and vascular channels are normal. No gross or diffuse mass lesions seen.

Gall Bladder : . Gall blader is normal and contents are echofree

Spleen . Normal in size, shape and echotexture

Pancreas : Normal in size, shape and echotexture.

Kidneys : Both the kidneys are normal in size, shape,axis and position. Cortico medullary differentiation are normal.

Urinary bladder : : Urinary bladder is normal and contents are echofree

Prostate : : Prostate is size normal and contents are echofree .

IVC & ABDOMINAL AORTA:-IVC and abdominal aorta are normal.

Retroperitoneum: No lymphadenopathy seen. No free fluid or ascites seen.

IMPRESSION ;:- NORMAL STUDY

Dr. SAURABH MISHRA
MBBS MD (Radiology)
Reg. No. MP-18861

CONSULTANT SONOLOGIST

Empanelled with : State Government, M.P.Police, ESIC, HPCL, Punjab National Bank, Indian Bank
Food Corporation of India, Ayushman Bharat





CITI MULTI SPECIALITY HOSPITAL

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Phone No. : 0755 - 4250134
Mobile No. : 7771008660, 8319214664, 9303135719



NAME;-ANIL KUMAR

AGE – 32Y/M

REF: BY- MEDIWHEEL

DATE- 08/01/2024

2D- ECHO COLOUR DOPPLER EVALUATION:-

- ❖ Normal great vessel relationship
- ❖ ALL cardiac valve are normal
- ❖ Normal Four chambered heart
- ❖ Normal LV size normal LV function LVEF-68%
- ❖ No intracardiac shunt
- ❖ No LV thrombus or clot seen
- ❖ No Pericardium effusion
- ❖ FINAL IMPRESSION

- ❖ Normal LV size normal LV function LVEF-68%

Dr. SBYASACHI GUPTA
MRBS (Gold Medalist) MD (Med) LRCP (U.K.)
DR. S. S. GUPTA (M.D.)
Reg. No. 1061

CONSULTANT ECHOCARDIOLOGIST


For Emergency Contact: 7771008660

Sister Concern: Citi Hospital, 115 Zone II MP Nagar, Bhopal 462011, Ph: 0755-487778-79
Empanelled with : State Government, M.P. Police, ESIC, HPCL, Punjab National Bank, Indian Bank
Food Corporation of India, Ayushman Bharat



1. Clean it. before using needles.
2. Report it. • Dispose of used needles promptly in sharps disposal containers.
3. Call for help. • Complete annual blood borne pathogen training.
4. Get treated. • Get your hepatitis B vaccines.
5. ID source patient. • Report all sharp-related injuries to your supervisor & insure appropriate follow-up.
6. Get follow-up exam. ... HBSP Program administered by the office of occupational safety.



 **GPS Map Camera**



Bhopal, Madhya Pradesh, India
6CMR+XFG, Gautam Nagar, Housing Board Colony, Bhopal, Madhya Pradesh 462023, India
Lat 23.235029°
Long 77.441163°
08/01/24 09:54 AM GMT +05:30