

BP - 100/60 BMI - 27.9
PR - 70x
WT - 62kg
HT - 168cm

Mr. Hiralal Netam
Age - 57/M

25/1/24

No H/O DM II / H/O

CBC - Hb 14.5, S. 5.37, PLT 4,21,6
RBS F 95 mg/dl . 4%
Creatinine - 1.03
Lipid - 122, 71, 143, 6480
HbA1c - 5.1
No R/R

Maintain healthy life style

Dr. Animesh Choudhary
MD Medicine
Reg. No. CGMC 3583/201
Apollo Clinic, Raipur



Dr. Sweety Lath

BDS (Cosmetic Dental Surgeon)



Dr. Vivek Lath

Chief Dental Consultant
BDS, MDS, Diplomate (WCOI, Japan)
Professor, MCDRC - Durg
Reg. No. CGDC/14/PG/45

- Consult for : Digital Dentistry • Fixed Teeth • RCT • Dental Implants • Gums Diseases • Dentures • Cosmetic Filling • Tooth Jewellery
- Digital OPG • Braces Treatment • Tooth Removal • Kids Dental Treatment • All Kind of Dental Surgeries

Mr. Hiralal Netam

SI/M

29/1/2024

C/O: Pt came for routine dental check up.

O/F: Stain + Cal++

Adv: oral prophylaxis



Apollo Clinic

LICENSEE : SAMRIDDI AROGYAM PVT. LTD.

Apollo Clinic @ Tiara Complex A.T. Classic Near Ashoka Ratan, VIP Estate, Raipur (C.G.)

Email : raipur1@apolloclinic.com

Online appointments: www.askapollo.com | Online reports: <https://phr.apolloclinic.com>

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ID: 33
MR HIRALAL NETAM
Male 51 Years

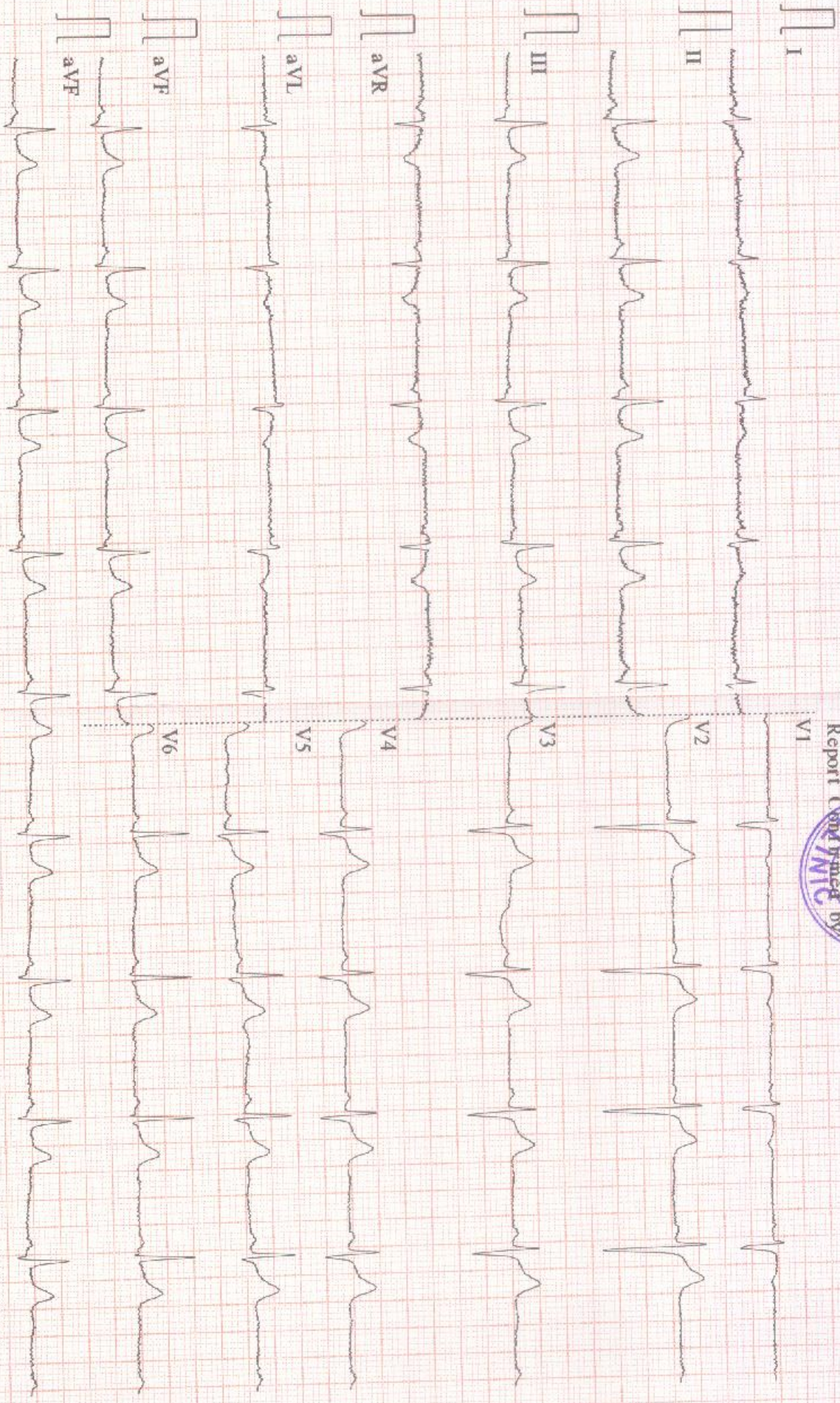
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HR : 56 bpm
P : 106 ms
PR : 136 ms
QRS : 98 ms
QT/QTc : 400/386 ms
P/QRS/T : 62/76/76 °
RV5/SV1 : 0.82/40.553 mV

Diagnosis Information:
Sinus bradycardia
Normal ECG except for rate



Dr. Animesh Choudhary
MD Medicine
Reg. No. CGMC 3583120
Apollo Clinic, Raipur



0.05-45Hz AC/50 25mm/s 10mm/mV 2*5.0s+1r 56 CAR T 9108 D V1.43 Glasgow V28.6.0 APOLLO CLINIC RAIPUR

EXAMINATION OF EYES :- (BY OPHTHALMOLOGIST)

Patient Name Mr. Hiralal Netam

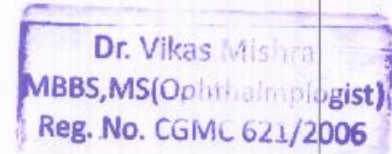
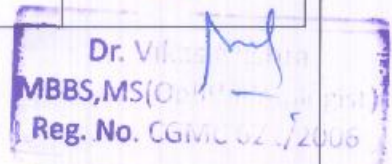
Date 29/01/24

Sex/Age M. 51 year

MR No

Employee Id

EXTERNAL EXAMINATION				
SQUINT				
NYSTAGMUS				
COLOUR VISION				
FUNDUS:(RE):- <u>wnr</u> (LE):- <u>wnr</u>				
INDIVIDUAL COLOUR IDENTIFICATION				
DISTANT VISION:(RE):- <u>6/36 E 6/6</u> (LE):- <u>6/36 E 6/6</u>				
NEAR VISION:(RE):- <u>N18 E 6/16</u> (LE):- <u>N18 E 6/16</u>				
NIGHT BLINDNESS				
	SPH	CYL	AXIS	ADD
RIGHT	+2.0		—	+2.25
LEFT	+2.0		—	+2.25
REMARKS :-				



ECHOCARDIOGRAPHY REPORT

NAME : MR. HIRA LAL NETAM	Age/Sex: 51Yrs/male	ECG : Sinus Rhythm
OPD/ IPD : OPD	STUDY DATE: 29/01/2024	REGN. NO. : FRAI.0000020604
Ref.By Dr : BOB		

M-MODE MEASUREMENTS:-

	Patient Value (cm)	Normal Value (cm)		Patient Value (cm)	Normal Value (cm)
AorticRoot Diameter	2.7	2.0 – 3.7	IVS Thickness	ED = 1.1 ES = 1.4	0.6 – 1.1
AorticValve Opening	2.0	1.5 – 2.6	PW Thickness	ED = 1.0 ES = 1.3	0.6 – 1.1
LA Dimension	3.1	1.9 – 4.0	RA Dimension	---	2.6
LVID(D)	3.9	3.7 – 5.5	RV Dimension	---	2.6
LVID(s)	2.4	2.2 – 4.0	TAPSE	----	1.6 – 2.6
LV EJECTION FRACTION	> 60%		(NORMAL VALUE: 55 – 60%)		

2D ECHO, COLOR FLOW & DOPPLER ASSESSMENT

Left Ventricle : LV Size & contractility is Normal, NO RWMA, Calculated EF IS > 60%

Left Atrium : LA Size Is Normal

Right Ventricle : Normal

Right Atrium : Normal

IAS/IVS : Intact

Pericardium : Normal, there is no Pericardial Effusion.

Mitral Valve : E<A, Normal

Tricuspid Valve : Normal

Aortic Valve : Normal

Pulmonary Valve : Pulmonary valve appears normal in morphology.

Systemic venous : IVC normal in size with normal Inspiratory collapse.

Diastolic Function : DRA-I

FINAL IMPRESSION : NO RWMA AT REST.
NORMAL LV SYSTOLIC FUNCTION.
LV DIASTOLIC DYSFUNCTION GRADE I
NO I/C CLOT VEGITATION OR PERICARDIAL EFFUSION.



DR. DEEPAN DAS
MBBS, DIP. CARDIOLOGY
CONSULTANT DEPT. OF NIC

Apollo Clinic

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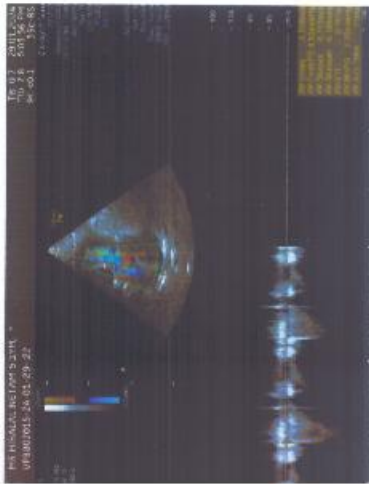
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Patient Name : MR HIRALAL NETAM
UHID/ MR No : 8865
Visit Date : 29/01/2024
Sample Collected On : 29/01/2024 03:25PM
Ref. Doctor : SELF
Sponsor Name :

Age/Gender : 51 Y Male
OP Visit No : OPD-UNIT-II-2
Reported On : 29/01/2024 06:17PM

HAEMATOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
CBC - COMPLETE BLOOD COUNT			
Haemoglobin(HB) Method: CELL COUNTER	14.5	gm/dl	12 - 17
Erythrocyte (RBC) Count Method: CELL COUNTER	5.37	mill/cu.mm.	4.20 - 6.00
PCV (Packed Cell Volume) Method: CELL COUNTER	43.50	%	39 - 52
MCV (Mean Corpuscular Volume) Method: CELL COUNTER	81.0	fL	76.00 - 100
MCH (Mean Corpuscular Haemoglobin) Method: CELL COUNTER	27.0	pg	26 - 34
MCHC (Mean Corpuscular Hb Conc.) Method: CELL COUNTER	33.3	g/dl	32 - 35
RDW (Red Cell Distribution Width) Method: CELL COUNTER	15.4	%	11- 16
Total Leucocytes (WBC) Count Method: CELL COUNTER	4.87	cells/cumm	3.50 - 10.00
Neutrophils Method: CELL COUNTER	72	%	40.0 - 73.0
Lymphocytes Method: CELL COUNTER	21	%	15.0 - 45.0
Monocytes	05	%	4.0 - 12.0
Eosinophils Method: CELL COUNTER	02	%	1-6%
Basophils Method: CELL COUNTER	00	%	0.0 - 2.0

End of Report
Results are to be correlated clinically

Lab Technician / Technologist
 path



DR DHANANJAY RAMCHANDRA PRASAD
 M.D. PATHOLOGY

Patient Name : MR HIRALAL NETAM
UHID/ MR No : 8865
Visit Date : 29/01/2024
Sample Collected On : 29/01/2024 03:25PM
Ref. Doctor : SELF
Sponsor Name :

Age/Gender : 51 Y. Male
OP Visit No : OPD-UNIT-II-2
Reported On : 29/01/2024 06:23PM

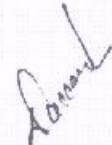
HAEMATOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
Platelet Count	216	lacs/cu.mm	150-400
Method: CELL COUNTER			

- As per the recommendation of International council for Standardization in Hematology, the differential leucocyte counts are additionally being reported as absolute numbers of each cell in per unit volume of blood.
- Test conducted on EDTA whole blood.

End of Report
Results are to be correlated clinically

Lab Technician / Technologist
path



Page 2 of 2

DR DHANANJAY RAMCHANDRA PRASAD
M.D. PATHOLOGY

Patient Name : Mr.HIRALAL NETAM	Collected : 29/Jan/2024 12:41PM
Age/Gender : 51 Y 0 M 0 D /M	Received : 29/Jan/2024 12:52PM
UHID/MR No : DSUS.0000006243	Reported : 29/Jan/2024 02:01PM
Visit ID : DSUSOPV7277	Status : Final Report
Ref Doctor : APOLLO CLINIC	Client Name : PUP APOLLO CLINIC SAMRIDDHI AR
IP/OP NO :	Patient location : Raipur,Raipur

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA					
HBA1C, GLYCATED HEMOGLOBIN	5.1	Normal	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	100		mg/dL		Calculated

Comment:


Reference Range as per American Diabetes Association (ADA) 2023 Guidelines:

REFERENCE GROUP	HBA1C %
NON DIABETIC	<5.7
PREDIABETES	5.7 – 6.4
DIABETES	≥ 6.5
DIABETICS	
EXCELLENT CONTROL	6 – 7
FAIR TO GOOD CONTROL	7 – 8
UNSATISFACTORY CONTROL	8 – 10
POOR CONTROL	>10


Note: Dietary preparation or fasting is not required.

- HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- Trends in HbA1C values is a better indicator of Glycemic control than a single test.
- Low HbA1C in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.
- Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present.
- In cases of Interference of Hemoglobin variants in HbA1C, alternative methods (Fructosamine) estimation is recommended for Glycemic Control
 - A: HbF >25%
 - B: Homozygous Hemoglobinopathy.
 (Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)





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Patient Name : MR HIRALAL NETAM
UHID/ MR No : 8865
Visit Date : 29/01/2024
Sample Collected On : 29/01/2024 03:25PM
Ref. Doctor : SELF
Sponsor Name :

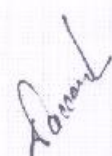
Age/Gender : 51 Y Male
OP Visit No : OPD-UNIT-II-1
Reported On : 29/01/2024 06:17PM

BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
GLUCOSE - (POST PRANDIAL)			
Glucose -Post prandial Method: REAGENT GRADE WATER	111	mg/dl	70-140
GLUCOSE (FASTING)			
Glucose- Fasting SUGAR REAGENT GRADE WATER	95	mg/dl	70 - 120
KFT - RENAL PROFILE - SERUM			
BUN-Blood Urea Nitrogen METHOD: Spectrophotometric	12	mg/dl	7 - 20
Creatinine METHOD: Spectrophotometric	1.03	mg/dl	0.6-1.4
Uric Acid Method: Spectrophotometric	4.8	mg/dL	2.6 - 7.2

End of Report
Results are to be correlated clinically

Lab Technician / Technologist
path



Patient Name : MR HIRALAL NETAM
UHID/ MR No : 8865
Visit Date : 29/01/2024
Sample Collected On : 29/01/2024 03:25PM
Ref. Doctor : SELF
Sponsor Name :

Age/Gender : 51 Y. Male
QP Visit No : OPD-UNIT-II-2
Reported On : 29/01/2024 06:17PM

BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
LIPID PROFILE TEST (PACKAGE)			
Cholesterol - Total	122	mg/dl	Desirable: < 200 Borderline High: 200-239 High: >= 240
Triglycerides level	71	mg/dl	Normal : < 150 Borderline High : 150-199 Very High : >=500
Method: Spectrophotometric			
HDL Cholesterol	43	mg/dl	Major risk factor for heart disease: < 40 Negative risk factor for heart disease :>60
Method: Spectrophotometric			
LDL Cholesterol	64.80	mg/dl	Optimal:< 100 Near Optimal :100 – 129 Borderline High : 130-159 High : 160-189 Very High : >=190
Method: Spectrophotometric			
VLDL Cholesterol	14.20	mg/dl	6 - 38
Total Cholesterol/HDL Ratio	2.84		3.5-5
Method: Spectrophotometric			

End of Report
Results are to be correlated clinically

Lab Technician / Technologist
 path



Patient Name : MR HIRALAL NETAM
UHID/ MR No : 8865
Visit Date : 29/01/2024
Sample Collected On : 29/01/2024 03:25PM
Ref. Doctor : SELF
Sponsor Name :

Age/Gender : 51 Y. Male
OP Visit No : OPD-UNIT-II-2
Reported On : 29/01/2024 06:17PM

BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
LIVER FUNCTION TEST			
Bilirubin - Total Method: Spectrophotometric	0.8	mg/dl	0.1- 1.2
Bilirubin - Direct Method: Spectrophotometric	0.2	mg/dl	0.05-0.3
Bilirubin (Indirect) Method: Calculated	0.60	mg/dl	0 - 1
SGOT (AST) Method: Spectrophotometric	28	U/L	0 - 40
SGPT (ALT) Method: Spectrophotometric	31	U/L	0 - 41
ALKALINE PHOSPHATASE	85	U/L	
Total Proteins Method: Spectrophotometric	6.8	g/dl	6 - 8
Albumin Method: Spectrophotometric	4.5	mg/dl	3.4 - 5.0
Globulin Method: Calculated	2.3	g/dl	1.8 - 3.6
A/G Ratio Method: Calculated	1.95	%	1.1 - 2.2

End of Report
Results are to be correlated clinically

Lab Technician / Technologist
path



Patient Name : MR HIRALAL NETAM
UHID/ MR No : 8865
Visit Date : 29/01/2024
Sample Collected On : 29/01/2024 03:25PM
Ref. Doctor : SELF
Sponsor Name :

Age/Gender : 51 Y. Male
OP Visit No : OPD-UNIT-II-2
Reported On : 29/01/2024 06:17PM

HAEMATOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
ESR- Erythrocyte Sedimentation Rate Method: Westergren's Method	13	mm /HR	0 - 10

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. Also increased in pregnancy, multiple myeloma, menstruation & hypothyroidism

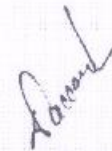
Blood Group (ABO Typing)

Blood Group (ABO Typing) : O
RhD factor (Rh Typing) : POSITIVE

End of Report

Results are to be correlated clinically

Lab Technician / Technologist
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Page 4 of 6

DR DHANANJAY RAMCHANDRA PRASAD
M.D. PATHOLOGY

Apollo Clinic

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Patient Name : Mr.HIRALAL NETAM	Collected : 29/Jan/2024 12:41PM
Age/Gender : 51 Y 0 M 0 D /M	Received : 29/Jan/2024 12:42PM
UHID/MR No : DSUS.0000006243	Reported : 29/Jan/2024 02:49PM
Visit ID : DSUSOPV7277	Status : Final Report
Ref Doctor : APOLLO CLINIC	Client Name : PUP APOLLO CLINIC SAMRIDDHI AR
IP/OP NO :	Patient location : Raipur,Raipur

DEPARTMENT OF IMMUNOLOGY

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM					
TRI-IODOTHYRONINE (T3, TOTAL)	1.14	Normal	ng/mL	0.6-1.81	CLIA
THYROXINE (T4, TOTAL)	9.70	Normal	µg/dL	3.2-12.6	CLIA
THYROID STIMULATING HORMONE (TSH)	3.930	Normal	µIU/mL	0.35-5.5	CLIA

Comment:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 - 3.0
Third trimester	0.3 - 3.0

- TSH is a glycoprotein hormone secreted by the anterior pituitary. TSH activates production of T3 (Triiodothyronine) and its prohormone T4 (Thyroxine). Increased blood level of T3 and T4 inhibit production of TSH.
- TSH is elevated in primary hypothyroidism and will be low in primary hyperthyroidism. Elevated or low TSH in the context of normal free thyroxine is often referred to as sub-clinical hypo- or hyperthyroidism respectively.
- Both T4 & T3 provides limited clinical information as both are highly bound to proteins in circulation and reflects mostly inactive hormone. Only a very small fraction of circulating hormone is free and biologically active.
- Significant variations in TSH can occur with circadian rhythm, hormonal status, stress, sleep deprivation, medication & circulating antibodies.

TSH	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	N	N	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement Therapy.
N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy
Low	N	N	N	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism
Low	N	High	High	Thyroiditis, Interfering Antibodies
N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma



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Patient Name : Mr.HIRALAL NETAM	Collected : 29/Jan/2024 12:41PM
Age/Gender : 51 Y 0 M 0 D /M	Received : 29/Jan/2024 12:42PM
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Ref Doctor : APOLLO CLINIC	Client Name : PUP APOLLO CLINIC SAMRIDDHI AR
IP/OP NO :	Patient location : Raipur,Raipur


DEPARTMENT OF IMMUNOLOGY

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM	0.970	Normal	ng/mL	0-4	CLIA

*** End Of Report ***

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 **भारत सरकार**




हीरालाल नेताम
Hiralal Netam
जन्म तिथि / DOB : 25/06/1973
पुरुष / MALE

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आधार - आम आदमी का अधिकार


 **आधार**


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भारत सरकार


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रविग्राम, रायपुर, छत्तीसगढ़,
492006

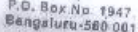
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