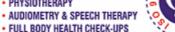
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- . E.C.G. . LUNG FUNCTION TEST

eGFR

- MAMMOGRAPHY & BONE MINERAL DENSITOMETRY
- COMPUTERISED STRESS TEST
- DENTAL
- ADVANCED DENTISTRY
- PHYSIOTHERAPY
- FULL BODY HEALTH CHECK-UPS . CORPORATE HEALTH CHECKUPS





**Patient's Name** : MR SANTOSH VISHWAKARMA Lab No. : LGC0889 \*LGC0889\*

Referred By Dr : CONNECT & HEAL Reg. Date : 06-Jul-2024 8:25 am

: MALE Age: 29 Years Report Date: 06-Jul-2024 3:51 pm

**Collected At** : VASAI NALASOPARA MAIN BRANCH **Print Date** : 09-Jul-2024 11:09 am

### **BIOCHEMISTRY**

TEST	RESULT	<u>UNITS</u>	NORMAL VALUES
Blood Urea	30.1	mg / dl	15 - 45 mg / dl
Serum Calcium	8.60	mg / dl	8.6 - 10.2 mg/dl
CREATININE	1.06	mg/dl	0.7 - 1.3 mg/dl
Serum Uric Acid	7.10	mg%	Male 3.5 - 7.2 mg%
Blood Urea Nitrogen (BUN)	14.06	mg / dl	5 - 20 mg / dl
Age of the Patient	29		

eGFR calculation based on MDRD guideline 2012

More than 90 ml / min /1.73 Sqm - Normal eGFR

 $60\text{-}89\;\text{ml}\,/\,\text{min}\,/\,1.73\;\text{Sqm}$  - Mild decrease in eGFR is common in 30% healthy adults .

Suggest reapt testing in 6 to 12 months.

Exclude kidney disease in those at high risk (Diabetes & Hypertension

30-59 ml / min /1.73 Sqm - consistent with modrate chronic kidney disease if confirmed over

Consider nephrology referral if progressive deterioration of more than 20 % for Egfr or creatinine. 15 - 29 ml / min / 1.73 Sqm - Consistent with severe chronic kidney disease . Consider nephrology

87.79

----- End of Report -----

ml/min

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**Patient's Name** : MR SANTOSH VISHWAKARMA

: VASAI NALASOPARA MAIN BRANCH

123.1

Lab No. : LGC0889 \*LGC0889\*

Referred By Dr : CONNECT & HEAL Reg. Date : 06-Jul-2024 8:25 am Report Date: 06-Jul-2024 3:51 pm

: MALE Age: 29 Years

**Print Date** : 09-Jul-2024 11:09 am

# **BLOOD SUGAR REPORT**

RESULT UNITS NORMAL VALUES

Normal: 70-110 mg/dL **BLOOD SUGAR FASTING** 105.4 mg/dL

Impaired Fasting Glucose(IFG):

110 -125

Diabetes mellitus: >= 126 (on more than one occassion)

Normal: 70-140 mg/dL

prandial)

**BLOOD SUGAR (Post** 

Impaired Tolerance: 140-199 Diabetes mellitus: >= 200 (on more than one occassion)

Method: GOD - POD Enzymatic on Erba EM 200 Random access analyser

Comment:

Blood sugar values are known to be affected by several factors like food. stress and medication. So all discrepant results should be confirmed with repeat sample collection.

----- End of Report -----

mg/dl

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**Patient's Name** : MR SANTOSH VISHWAKARMA Lab No. : LGC0889 \*LGC0889\*

Referred By Dr : CONNECT & HEAL Reg. Date : 06-Jul-2024 8:25 am

: MALE Age: 29 Years Report Date: 06-Jul-2024 3:52 pm

**Collected At** : VASAI NALASOPARA MAIN BRANCH **Print Date** : 09-Jul-2024 11:09 am

# **COMPLETE BLOOD COUNT**

TEST	RESULT	<u>UNITS</u>	NORMAL VALUES
Haemoglobin	15.5	gm %	Male: 13 - 17.0 gm%
Erythrocytes ( Total RBCs)	5.61	mill. / cmm	Male: 4.2 - 5.8mill. / cmm
PCV	49.5	%	Male: 37 - 51 %
MCV	88.20	fl	80- 96 fl
MCH	27.70	pg	27 - 32 pg
MCHC	31.40	gm%	32 - 37 gm%
RDW	14.6	%	12 - 14.5
TOTAL WBC COUNT			
TOTAL WBC COUNT	6230	/ cumm	4,000 - 11,000
DIFFERENTIAL COUNT			
Neutrophils	45	%	40 - 75
Lymphocytes	46	%	20 - 40
Eosinophils	04	%	0 - 6
Monocytes	05	%	2 - 8
Platelet count	268000	Lacs/cmm	150000-450000
PERIPHERAL SMEAR			
RBC Morphology	Normocytic Normochromic		
WBC Morphology	Normal		
Platelets Morphology	Adequate		
	5 J (B		
	End of Report		

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DR. BHAVINI KAMDAR

Patient's Name : MR SANTOSH VISHWAKARMA Lab No. : LGC0889 \*LGC0889\*

Referred By Dr : CONNECT & HEAL Reg. Date : 06-Jul-2024 8:25 am

Sex : MALE Age : 29 Years Report Date : 06-Jul-2024 3:52 pm

Collected At : VASAI NALASOPARA MAIN BRANCH Print Date : 09-Jul-2024 11:09 am

# LIPID PROFILE

TEST	RESULT	<u>UNITS</u>	NORMAL VALUES
SR. CHOLESTEROL	152	mg / dl	Desirable: < 200 mg/dl Borderline High: 200-239 mg/dl High: >= 240 mg/dl
SR. TRIGLYCERIDES	274	mg / dl	Normal: < 150 mg/dl Borderline High: 150-199 mg/dl High: 200-499 mg/dl Very High: >= 500 mg/dl
HDL CHOLESTEROL	49	mg / dl	 35.3 - 79.5 mg / dl
VLDL	54.80	mg / dl	 6 - 38 mg / dl
LDL CHOLESTEROL	48.20	mg / dl	Optimal: < 100 mg/dl Near Optimal: 100-129 mg/dl Borderline high: 130-159 mg/dl High: 160-189 mg/dl Very High: >= 190 mg/dl
CHOLESTEROL / HDL	3.10		 < 5
LDL / HDL NOTE: Reference Interval as per National Chole	0.98 esterol Education Program (NCEP) Adult Tre	atment Panel III Report.	< 3.5

NOTE: Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Repor Lower HDL values are associated with increased risk of atherosclerosis. Cholesterol/HDL Ratio below 5.1 is statistically associated with decreased incidence of heart disease.

----- End of Report -----

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<sup>\*</sup>Result rechecked.

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DR. BHAVINI KAMDAR

MD (PATH) MUM

**Patient's Name** : MR SANTOSH VISHWAKARMA Lab No. : LGC0889 \*LGC0889\*

Referred By Dr : CONNECT & HEAL Reg. Date : 06-Jul-2024 8:25 am

: MALE Age: 29 Years Report Date: 06-Jul-2024 3:51 pm

: VASAI NALASOPARA MAIN BRANCH **Collected At Print Date** : 09-Jul-2024 11:09 am

# LIVER FUNCTION TEST

TEST	RESULT	<u>UNITS</u>	NORMAL VALUES
Bilirubin Total	0.7	mg / dl	0 - 1.0 mg / dl
Bilirubin Direct	0.32	mg / dl	0 - 0.4 mg / dl
Bilirubin Indirect	0.38	mg/dl	UPTO 0.8 mg / dl
S.G.P.T.	60.0	U/L	Up to 45 U/L
S.G.O.T.	39.50	U/L	Up to 46 U/L
Alkaline Phosphatase	107.00	U/I	1 - 12 Years: 54 - 369 U/I
			20 - 59 Years: 53 - 128 U/I
			> 60 Years: 56 - 119 U/I
Total Proteins	6.94	gm / dl	6.4 - 8.3 gm / dl
Albumin	4.48	gm / dl	3.5 - 5.2 gm / dl
Globulin	2.46	mg/dl	2 - 3.5 mg / dl
A / G Ratio	1.82	_	1.0- 2.3
GGT	37.2	IU/L	55 IU/L

<sup>\*</sup>Result rechecked.

----- End of Report -----

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**Patient's Name** : MR SANTOSH VISHWAKARMA Lab No. : LGC0889 \*LGC0889\*

Referred By Dr : CONNECT & HEAL Reg. Date : 06-Jul-2024 8:25 am

Sex : MALE Age: 29 Years Report Date: 06-Jul-2024 8:17 pm

**Collected At** : VASAI NALASOPARA MAIN BRANCH **Print Date** : 09-Jul-2024 11:09 am

### **T3 T4 TSH**

<u>TEST</u>	RESULT	<u>UNITS</u>	NORMAL VALUES
T3 [ Tri - iodothyronine ] T4 [ Thyroxine ]	188.569	ng/dl	91.14 - 237.61 ng/dl
	9.769	ug/dl	4.71 - 13.20 ug/dl

HYPOTHYROID: Less than

 $4.71 \mu g/dl$ 

TSH [Thyroid Stimulating uIU/mL 2.380 0.3 - 4.3 uIU/ml

> Hypothyroid > 15.0 Hyperthyroid: < 0.3

> > First Trimester: 0.1 - 2.5 Second Trimester: 0.2 - 3.0

Third Trimester: 0.3 - 3.0

METHOD: CLIA Interpretation:

Hormone1

- 1. TSH results between 4.5 to 15 show considerable physiologic & seasonal variation, suggest clinical correlation or repeat testing with fresh sample.
- 2. TSH values may be transiently altered because of non thyroidal illness like severe infections, liver disease, renal and heart failure, severe bums, trauma and surgery etc.
- 3. Drugs that decrease TSH values e.g.L dropa, Glucocorticoid Drugs that increase TSH values e.g lodine, Lithium, Amiodarone.
- 4.Total T3 & T4 Values may also be altered in other conditions due to changes in serum proteins or binding sites Pregnancy. Drugs (Androgens, Estrogens. O C Pills, Phenytoin). Nephrosis etc. In such cases Free T3 and Free T4 give corrected values.

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Patient's Name : MR SANTOSH VISHWAKARMA Lab No. : LGC0889 \*LGC0889\*

Referred By Dr : CONNECT & HEAL Reg. Date : 06-Jul-2024 8:25 am

Sex : MALE Age : 29 Years Report Date : 06-Jul-2024 4:16 pm

Collected At : VASAI NALASOPARA MAIN BRANCH Print Date : 09-Jul-2024 11:09 am

# **URINE ROUTINE & MICROSCOPY**

<u>TEST</u> <u>RESULT</u>

PHYSICAL EXAMINATION

Quantity 15 ml
Colour Pale yellow
Appearance clear
Deposit Absent
pH Acidic (5.0)
Specific Gravity 1.010

CHEMICAL EXAMINATION

Proteins Absent
Sugar Absent
Ketone Absent
Occult Blood Absent
Bile Pigment Absent
Bile Salts Absent
Urobilinogen Normal

MICROSCOPIC EXAMINATION OF CENTRIFUGED DEPOSIT

Red Blood Cells Absent

Pus Cells 1-2/ hpf /hpf Epithelial Cells 1-2/ hpf /hpf

Casts Not seen

Crystals Not seen

Yeast Not seen Bacteria Absent

----- End of Report -----

/hpf

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NAME MR.SANTOSH VISHWAKARMA	DATE	6/7/2024	
HEIGHT-170 CMS WEIGHT: 73.9 KGS	AGE	29 YRS	
REFERRED BY   CONNECT AND HEAL -	SEX	MALE	
PRESENT COMPLAINT: NIL	mporate		
CURRENT MEDICATIONS : NIL	assater	THUR MUSITIVE	
PAST HISTORY : NIL	semonyolo ternocleidomastoid		
ALLERGY: NIL HABITS: NIL APPETITE:	GOOD		
BLADDER: NAD BOWEL: NAD	Straus grant		
FAMILY HISTORY: MOTHER: THYROIDISM/HT	N ON RX.	ostal	
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P: 84b / MIN BP- 130/90 MMHG	fluid	istali	
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PA: SOFT CNS-CONSCIOUS	MERTA IM. 50101.0GY (PG 018115843	D.]	

HEALTHCARE MEDICAL CENTRE AND
DINGNOSTICS
SHOP NO.4, JAY VIJAY GREEN CHS.,
VASA, VIRAR LINK ROAD,
NALLASOPARA (E), PIN - 401209.
MOBILE - 8591922640 / 8591601677

# Patient Information

Name : MR SANTOSH VISHWAKARMA

AGE : 29 /M ID: 320

REF.BY : Dr.CONNECT & HEAL

Indication:

-6

: 06-07-24 11:28:34

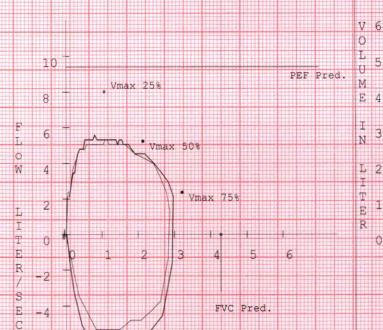
FEV1 Pred.

Height : 171

Weight: 73 Smoker : Non Smoker

Pre

Post



VOLUME ->



Predict Observed Observed Pre.dif% Parameter Value Pre %Pred Post %Pred FVC (L) 2.89 67.48 3.00 70.09 3.87 4.28 FEV0.5 (L) 2.27 2.27 3.62 2.89 79.79 3.87 FEV1 (L) 3.00 82.88 118.24 FEV1/FVC % 84.57 100.00 100.00 118.24 0.00 59.40 7.69 PEF (L/\$) 9.40 5.19 55.16 5.59 PIF (L/S) 5.59 7.18 100.35 100.89 FEF25-75%(L/S) 4.77 4.79 4.81 0.54 VMax25 64.62 5.59 69.59 7.69 8.03 5.19 5.19 VMax50 5.23 5.19 99.13 99.13 0.00 VMax75 2.37 4.39 185.23 4.39 185.23 0.00 0.74 FET100 % 0.74 FEF50 % (L/S) 5.19 5.19 FIF50 % (L/S) 5.59 7.18 FEF50/FIF50 % 0.93 0.72

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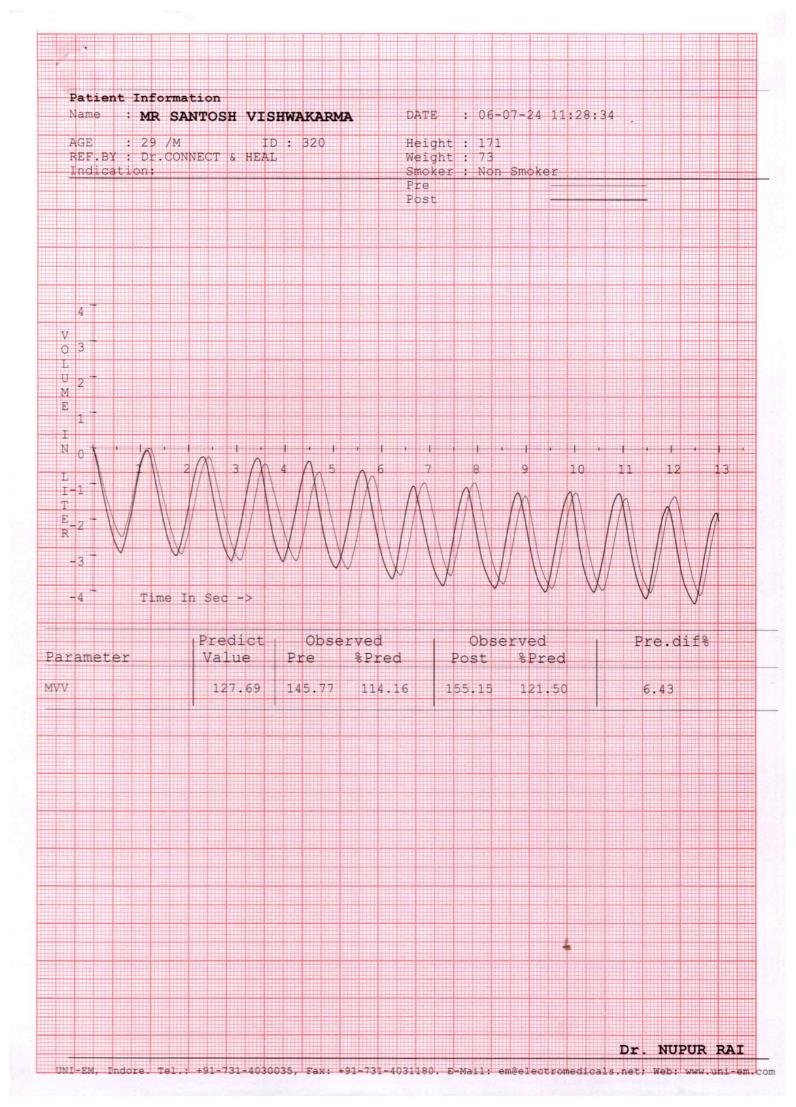
HEALTHCARE MEDICAL CENTRE AND

U:AUNDETICS

SHOP NO A JAY WISAY GREEN CHS., VASA VIRAR LINK ROAD.

NALLASOPARA (E), PIN - 401209. UNI-EM, Inder MOENE - 8901922640 / 8591601877

31-4030035, Fax: +91-731-4031180. E-Mail: emgelectromedical 8 1456 yap: www.uni-em.com



- · CONPU. PATHOLOGY · ALLERGY TESTING
- DIGITAL WHOLE BODY X-RAYS
- DIGITAL 3D SONOGRAPHY
- DIGITAL WHOLE BODY COLOUR DOPPLER
- DIGITAL 2-D ECHO WITH COLOUR DOPPLER
- E.C.G. LUNG FUNCTION TEST
- MAMMOGRAPHY & BONE MINERAL DENSITOMETRY
- COMPUTERISED STRESS TEST
- DENTAL
- ADVANCED DENTISTRY
- PHYSIOTHERAPY
- AUDIOMETRY & SPEECH THERAPY
- FULL BODY HEALTH CHECK-UPS
- CORPORATE HEALTH CHECKUPS



NAME	MR SANTOSH VISHWAKARMA	DATE	06.07.2024
Ť.	/	AGE	29.YRS
REF. BY DR.	COPY ON CONHIST COMPANIES Ling Permission required by reproduction or display	SEX	MALE

# X-RAY CHEST (PA.VIEW).

The lungs on the either side show equal translucency. The heart and trachea are central in position.

No mediastinal abnormality is visible.

The peripheral pulmonary vasculature is normal.

No focal lung lesion is seen.

The pleural spaces are normal.

Both hila are normal in size, have equal density and bear normal relationship.

The cardiac size is normal.

The domes of the diaphragms are normal in position, and show smooth outline.

Ribs appear normal.

# **IMPRESSION:**

NO EVIDENCE OF PULMONARY, PLEURAL OR CARDIAC PATHALOGY IS NOTED.

DR.KHILJI FAIZ CONS.RADIOLOGIST COMPU. PATHOLOGY • ALLERGY TESTING

- . DISTAL WHOLE BODY X-RAYS
- DIGITAL 3D SONOGRAPHY
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NAME	MR SANTOSH VISHWAKARMA	DATE	06.07.2024
		AGE	29 YRS
ŔEF. BY DR.	CNH	SEX	MALE

# REAL TIME ABDOMINAL SONOGRAPHY SHOWS

LIVER: Liver is normal in size showing homogenous parenchymal **bright** echotexture. There is no evidence of solid or cystic mass. The portal and the hepatic venous system appears normal.

**GALL BLADDER**: The Gall bladder is physiologically distended. The gall bladder wall of normal thickness. No evidence of gall stones.

**PANCREAS**: Pancreas is normal in size with smooth margin.and homogenous paranchymal echotexture. No focal lesion seen.

**KIDNEYS**: Both kidneys are normal in size and shows homogenous cortical echotexture. Central calyceal echoes appears normal.

- (a) Right kidney measures: 9.0 x 4.0 cms.
- (b) Left kidney measures: 9.5 x 4.5 cms.

Left kidney 4.0mm a single calculus is seen in the upper pole.

**SPLEEN**: The spleen is normal in size with homogenous paranchymal echotexture. No focal lesion are seen.

URINARY BLADDER: Urinary bladder is well distended. No evidence of calculus or intraluminal mass seen in the bladder.

PROSTATE: Prostate is normal in size & volume is 20.0 cc.

Prevoid-350cc. Postvoid-nil.

# **IMPRESSION:**

- FATTY LIVER GRADE II.
- LEFT RENAL CALCULUS.

DR.KHILJI FAIZ CONS.RADIOLOGIST

Note: Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. USG is known to have interobserver variation. Further / Follow-up imaging may be needed in some cases for confirmation of USG finings. Patient was explained in detail about the USG findings and its limitations. Please interpret accordingly.

King FRA

COMPU. PATHOLOGY

■ ECG ■ PFT

DIGITAL X-RAY

COMPU. TREADMILL TEST

- DIGITAL SONOGRAPHY
- DIGITAL COLOR DOPPLER
- 2D ECHO CARDIOGRAPHY
  - DENTAL PHYSIOTHERAPHY
- HEALTH CHECK-UP
- MAMMOGRAPHY & BONE MINERAL DENSITOMETRY (BMD)





# ELECTROCARDIOGRAM (ECG)

MR SANTOSH VISHWAKARM

PATIENT MA

AGE. 29 year SEX Male

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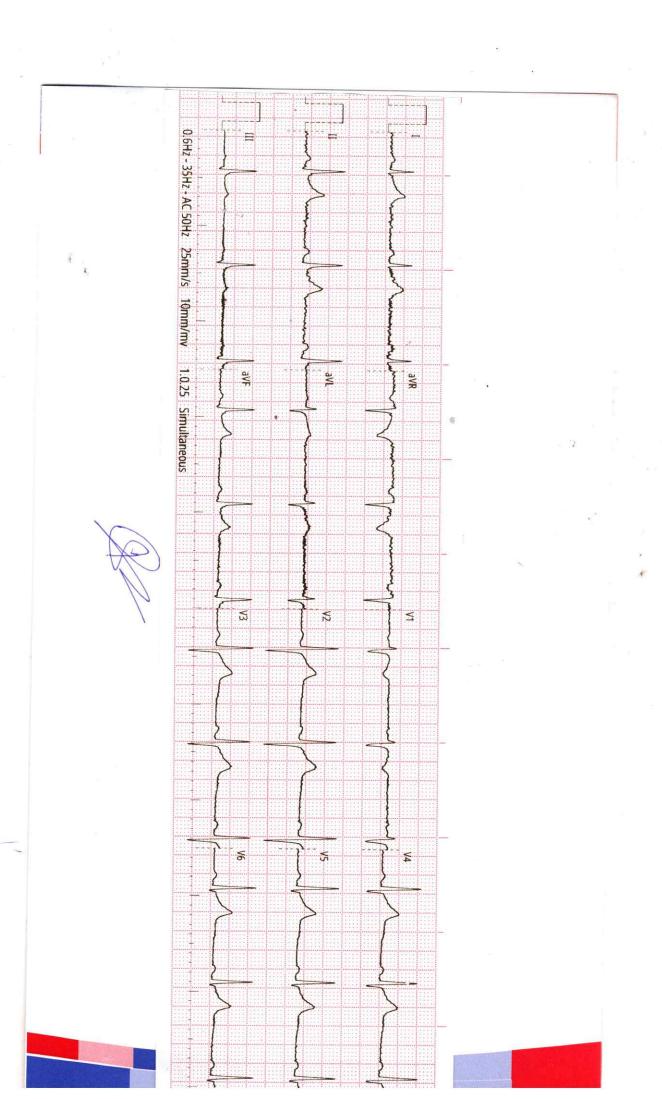
REF. BY DR.

VASA VIRAR LINK ROAD.

1061-E-858192264078591601671

MBBS, DIPLOWA CARDIO, OCY 677060

Reg. No.: 20181, 564



History:	Axis:
B.P.:	P. Waves:
Drugs:	PR Interval :
Standard:	Q. Waves:
Auricular Rate:	QRS Interval :
Ventricular Rate	ST Sigment :
Rhythm:	T. Waves:
Mechanism:	QT Internal : \( \)
Voltage:	Extra Systoles:
REMARKS & CONCLUSIONS : Land	
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