Diabetic Reports for Patients in India

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1 Patient 1: Arjun Sharma

1.1 Patient Information

• Name: Arjun Sharma

Age: 52 yearsGender: Male

• Address: 123, Vasant Vihar, New Delhi, India

• **Contact**: +91-98765-43210

• Medical Record Number: DS2025-09876

• Date of Report: June 11, 2025

1.2 Medical History

• Diagnosis: Type 2 Diabetes Mellitus (diagnosed 2018)

• Family History: Positive for Type 2 Diabetes (mother diagnosed at age 60)

• Other Conditions: Hypertension (controlled), obesity (BMI: 28.5 kg/m²)

• Medications: Metformin 1000 mg twice daily, Amlodipine 5 mg once daily

• Lifestyle: Sedentary, high-carb diet, non-smoker, occasional alcohol

• **Previous Complications**: Occasional numbness in feet (possible early neuropathy)

1.3 Clinical Findings

• Date of Examination: June 5, 2025

• Blood Glucose Levels:

Fasting Blood Glucose: 145 mg/dL (Target: <126 mg/dL)

Postprandial Blood Glucose: 210 mg/dL (Target: <180 mg/dL)

- HbA1c: 7.8% (Target: <7.0%)

• Lipid Profile:

Total Cholesterol: 190 mg/dL (Desirable: <200 mg/dL)

LDL Cholesterol: 110 mg/dL (Desirable: <100 mg/dL)

HDL Cholesterol: 45 mg/dL (Desirable: >40 mg/dL)

Triglycerides: 160 mg/dL (Desirable: <150 mg/dL)

• **Blood Pressure**: 130/85 mmHg (Target: <130/80 mmHg)

• **Kidney Function**: Serum Creatinine: 1.0 mg/dL, eGFR: 85 mL/min/1.73 m²

• **Eye Examination**: No diabetic retinopathy (May 2025)

• Foot Examination: Mild numbness, no ulcers

• **BMI**: 28.5 kg/m²

• Waist Circumference: 102 cm (Target: <90 cm for males)

1.4 Assessment

• **Diabetes Control**: Suboptimal (HbA1c >7.0%)

• Risk Factors: Overweight, high waist circumference, early neuropathy

• Complications: No microvascular/macrovascular complications yet

1.5 Recommendations

1. **Medication**: Increase Metformin to 1000 mg thrice daily, consider DPP-4 inhibitor.

2. **Lifestyle**: Low-carb, high-fiber diet; 150 min/week aerobic exercise.

3. **Screening**: Repeat HbA1c in 3 months, annual retinopathy/nephropathy checks.

4. **Education**: Enroll in diabetes education program.

5. Follow-Up: Endocrinologist visit in 3 months.

2 Patient 2: Priya Reddy

2.1 Patient Information

• Name: Priya Reddy

• **Age**: 35 years

• Gender: Female

• Address: 45, Banjara Hills, Hyderabad, India

• Contact: +91-91234-56789

• Medical Record Number: DS2025-09877

• Date of Report: June 11, 2025

2.2 Medical History

• **Diagnosis**: Type 1 Diabetes Mellitus (diagnosed 2010)

• Family History: Negative for diabetes

• Other Conditions: None

• **Medications**: Insulin glargine 20 units daily, insulin aspart 6–8 units before meals

• Lifestyle: Moderately active, balanced diet, non-smoker, no alcohol

• Previous Complications: Mild retinopathy detected 2024

2.3 Clinical Findings

• Date of Examination: June 4, 2025

Blood Glucose Levels:

- Fasting Blood Glucose: 110 mg/dL (Target: <126 mg/dL)
- Postprandial Blood Glucose: 160 mg/dL (Target: <180 mg/dL)
- HbA1c: 6.8% (Target: <7.0%)

• Lipid Profile:

- Total Cholesterol: 170 mg/dL (Desirable: <200 mg/dL)
- LDL Cholesterol: 90 mg/dL (Desirable: <100 mg/dL)
- HDL Cholesterol: 50 mg/dL (Desirable: >50 mg/dL)
- Triglycerides: 120 mg/dL (Desirable: <150 mg/dL)
- Blood Pressure: 120/75 mmHg (Target: <130/80 mmHg)
- **Kidney Function**: Serum Creatinine: 0.8 mg/dL, eGFR: 95 mL/min/1.73 m²
- Eye Examination: Mild non-proliferative retinopathy (stable, May 2025)
- Foot Examination: Normal
- **BMI**: 23.5 kg/m²
- Waist Circumference: 85 cm (Target: <80 cm for females)

2.4 Assessment

- **Diabetes Control**: Well-controlled (HbA1c 6.8%)
- **Risk Factors**: Mild retinopathy requires monitoring
- **Complications**: Stable mild retinopathy, no other complications

2.5 Recommendations

- 1. **Medication**: Continue current insulin regimen, monitor for hypoglycemia.
- 2. **Lifestyle**: Maintain balanced diet and physical activity.
- 3. **Screening**: Biannual retinopathy screening, annual nephropathy/neuropathy checks.
- 4. **Education**: Reinforce hypoglycemia management education.
- 5. **Follow-Up**: Endocrinologist visit in 6 months.

Note

To include additional patient reports, duplicate the patient section template (from \section{Patient X: Name} to the end of the recommendations) and modify

the patient details (name, age, medical history, etc.). Ensure each report has unique data reflecting realistic variations in diabetes profiles.

Disclaimer

This is a fictional document created for illustrative purposes based on general diabetes statistics and trends in India. For real diabetic reports, consult a health-care provider with access to patient medical history and test results.