



**URMILA HEART**  
**& MULTI SPECIALITY HOSPITAL**  
**PATHOLOGY REPORT**

**Address**

Naya Tola, Opp. Polyte  
Muzaffarpur  
Ph.: 0621-2222211  
0621-2268042  
Mob.: 9661179794  
9471013402

Name:- Mr.Mohan Devrat	Age :33Y/M	Date :-09/11/2024
Ref. By :- Dr. Bank Of Baroda	(E.C.No322170)	Serial Number :- 091

<u>TEST</u>	<u>CBC (Complete Blood Count)</u>		<u>Reference Values</u>
	<u>RESULT</u>	<u>UNIT</u>	
Hb (Haemoglobin)	13.0	gm/dl	12 - 17
Total Leukocyte Count	4,400	/Cumm.	4000 - 11000
RBC Count	4.70	Million/Cumm.	3.8 - 5.8
PCV / Haematocrit	42.1	%	30 - 50
Platelet Count	1.36	Lakhs/c.mm	1.5 - 4.5
MCV	81.8	fl	80 - 100
MCH	26.2	pg	26 - 34
MCHC	31.4	gm/dl	31.5 - 35
<b>Differential Leukocyte Count</b>			
Neutrophil	50	%	40 - 70
Lymphocyte	38	%	20 - 40
Monocyte	02	%	02 - 10
Eosinophi	10	%	01 - 06
Basophil	00	%	< 1 - 2%
ESR	14	mm/1 <sup>st</sup> hr.	00 - 20

\*\*\*end of report\*\*\*

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**KFT (KIDNEY Function Test) – serum**

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>		
S. Urea	38.0	mg/dl	13	-	45
S. Creatinine	1.38	mg/dl	Male 0.7	-	1.4
			Female 0.6	-	1.2
S. BUN	17.74	mg/dl	6.0	-	21
S. Sodium (Na <sup>+</sup> )	142.1	mmol/ltr	135	-	150
S. Potassium(K <sup>+</sup> )	4.31	mmol/ltr	3.5	-	5.5
S. Chloride(Cl <sup>-</sup> )	104.2	mmol/ltr	94	-	110
S. Calcium	9.26	mg/dl	8.7	-	11.0
S. Uric Acid	8.96	mg/dl	Male 3.5	-	7.2
			Female 2.5	-	6.2

**BLOOD GROUPING**

Grouping (ABO)	:	"O" Group
Rh Typing	:	Positive.

\*\*\*end of report\*\*\*

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**LFT (Liver Function Test) – serum**

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
S. Total Bilirubin	0.81	mg/dl	Adults: 0.1 - 1.2 Infants: 1.2 - 12
S. SGPT (ALT)	83.0	U/L	05 - 40
S. SGOT (AST)	68.0	U/L	05 - 40
S. Alkaline Phosphatase	124.6	U/L	Adult -- 25 - 140 Children (1 – 12 yrs.) -- 104 - 390
S. Total Protein	7.42	g/dl	6.0 - 8.3
S. Albumin	4.36	g/dl	3.2 - 5.0
S. Globulin	3.06	g/dl	2.8 - 4.5
S. A/G Ratio	1.42		

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**Lipid Profile – serum**

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
S. Cholesterol	364.0	mg/dl	130 - 200
S. Triglycerides	405.0	mg/dl	Fasting: 25 - 160
S. VLDL-Cholesterol	81.0	mg/dl	10 - 40
S. HDL-Cholesterol	86.0	mg/dl	Male: 30 - 65 Female: 35 - 80
S. LDL-Cholesterol	197.0	mg/dl	60 - 150
Ratio of Cholesterol/HDL	4.23		Low Risk: <3.0 Average Risk: 03 - 5.0 High Risk: >5.0
LDL/HDL Ratio	2.29		1.5 - 3.5

**BIOCHEMISTRY**

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
P. Glucose Fasting	87.0	mg/dl	70 - 110
P. Glucose-Post Prandial (after 1.30hrs meal)	116.0	mg/dl	80 - 160

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**GLYCOSYLATED HEMOGLOBIN**

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>
HbA1c	3.89	%

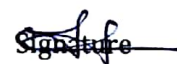
Mean Blood Glucose level (MBG) – 89.01 mg/dl

**Normal Reference Values**

Normal	:	< 8.0 %
Good Control	:	8.0 - 9.0 %
Fair Control	:	9.0 - 10.0 %
Poor Control	:	> 10.0 %

**Summary** :- Glycosylated hemoglobin (GHb) reflects the average blood glucose concentration over the preceding several weeks & a sudden fall from high to low glucose concentration will not produce a correspondingly rapid fall in glycosylated hemoglobin. Thus GHb reflects the metabolic control of glucose level over a period of time, unaffected by diet, insulin, other drugs or exercise on the day of testing. GHb is now widely recognized as an important test for the diagnosis of diabetes mellitus and is a good indicator of the efficacy of therapy.

\*\*\*end of report\*\*\*





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TEST NAME	METHOD	VALUE	UNITS	NORMAL RANGE
TOTAL TRIIODOTHYRONINE (T3)	C.L.I.A	142.0	ng/dL	(60 - 200)
TOTAL THYROXINE (T4)	C.L.I.A	8.05	µg/dL	(4.5 - 12.0)
THYROID STIMULATING HORMONE (TSH)	C.L.I.A	4.16	µIU/mL	(0.3 - 5.5)

**Technology :**

T3 - Competitive Chemi Luminescent Immuno Assay

T4 - Competitive Chemi Luminescent Immuno Assay

TSH - Ultra Sensitive Sandwisch Competitive Chemi Luminescent Immuno Assay

**REMARK :**

**THYROID HORMONES** -Serum TSH is primarily responsible for the synthesis and release of Thyroid hormones is an early and sensitive indicator of decrease in thyroid reserve is the diagnostic of primary hypothyroidism.The expeted increase in TSH demonstrate the classical feedback mechanism between pituitary and thyroid gland.Additionally TSH measurement is equally important in differentiating secondary and tertiary(hypothalamic) hypothyroidism.The increase in total T4 and T3 is associated with pregnancy,oral contraceptive and estrogen therapy results into masking of abnormal thyroid function only because of alteration of TBG concentration,which can be monitored by calculating Free Thyroxine Index(FTI) or Thyroid Hormone Binding Ratio(THBR).a

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**Urine Routine And Microscopy**

**TEST**

**RESULTS**

**Physical Examination**

Volume	20 ml
Colour	Straw
Specific Gravity	1.020
Appearance	Clear
pH	6.0
(Acidic)	

**Chemical Examination**

Protein	Nil
Sugar	Nil
Bile Salts	N/D
Bile Pigments	N/D

**Microscopic Examination**

Pus Cells	1-2 /hpf
Red Blood Cells	Nil /hpf
Epithelial Cells	<b>Present (+)</b>
Crystal/Cast	Nil
Other	Nil

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Date :-09/11/2024

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(E.C.No322170)

Serial Number :- 091

**Stool Routine And Microscopy**

**TEST**

**RESULTS**

**Physical Examination**

Colour	Brownish
Consistency	Semi Solid
Mucus	Nil
Blood	Nil

**Chemical Examination**

pH	Acidic
Reducing Sugar	Nil
Occult Blood	N/D

**Microscopic Examination**

Pus Cells	3-5 /hpf
Red Blood Cells	Nil /hpf
OVA/Cyst	Nil
Parasites	Nil

\*\*\*end of report\*\*\*

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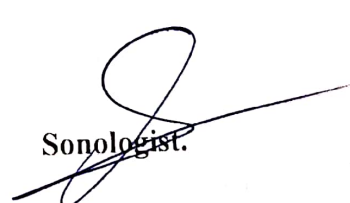
Name :- Devbrat Mohan.  
Refd.By:- Dr./Self.

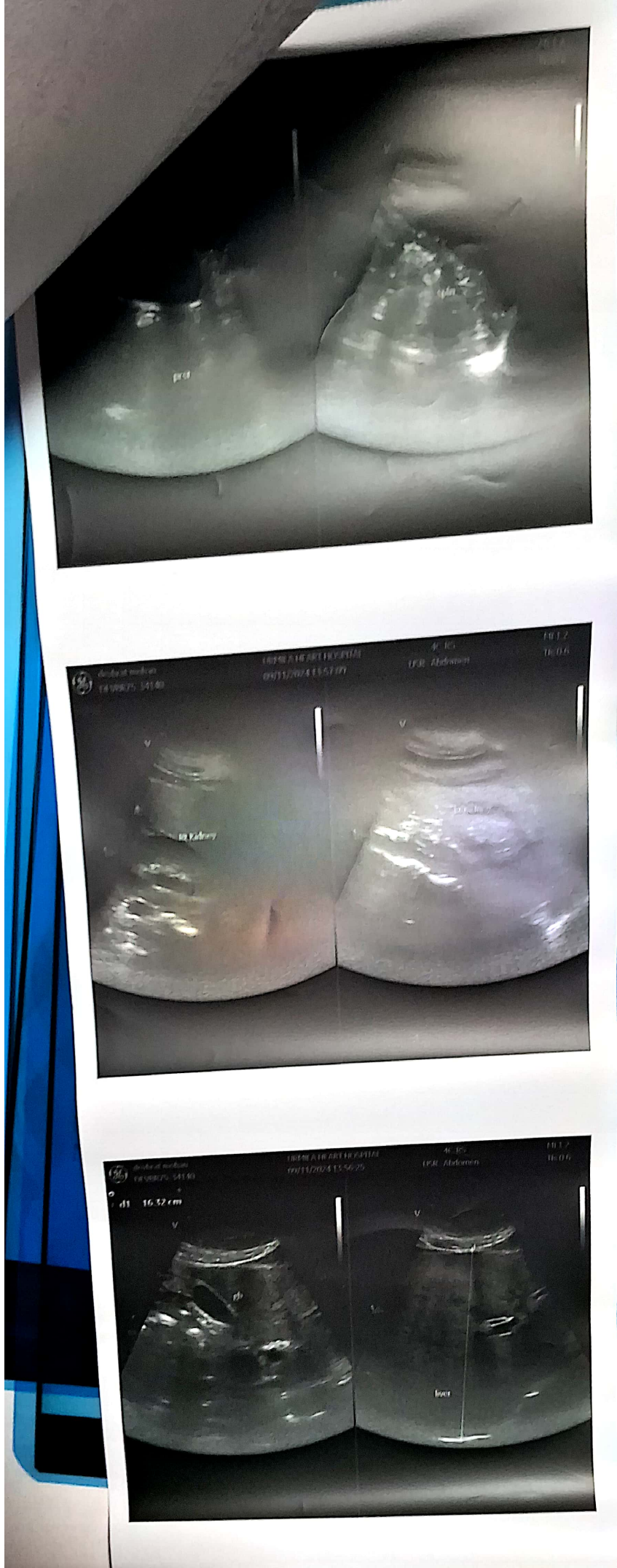
Date :- 09/11/2024  
Sex:- M

Thanks for the kind referral.  
USG of Whole Abdomen

- Liver:-** Liver is enlarged in size [163.2mm] & shows fatty infiltration. No focal lesion seen or Intrahepatic ducts dilation seen. Movement of both domes of diaphragm appears normal.
- GB:-** Normal distention. Walls are not thickened. No evidence of calculus, sludge, or mass lesion seen.
- C.B.D:-** C.B.D. is normal in calibre.
- Pancreas:-** Pancreas normal in size shape and echotexture.
- Spleen:-** Mildly enlarged in shape, size & contour. (bipolar length is 111.8mm)
- Kidneys:-** Both kidneys are normal in shape, size, contour, cortical echo texture, and sinus echoes. No evidence of calculus, calcification, hydronephrotic changes or mass lesion seen.
- UB:-** Urinary bladder is smoothly outlined. There is no calculus within.
- Prostate :-** The prostate is normal in shape and size .
- Free fluid:-** No free fluid is noted in the peritoneal cavity.

**Impression :-** Hepatomegaly with fatty liver. Grade II.  
Mild splenomegaly.

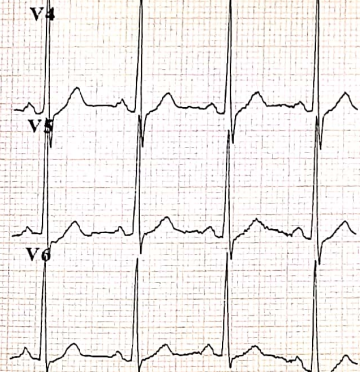
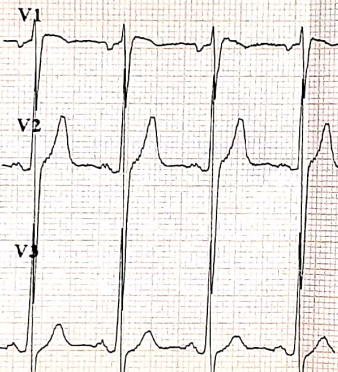
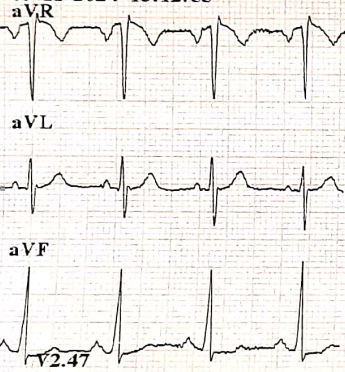
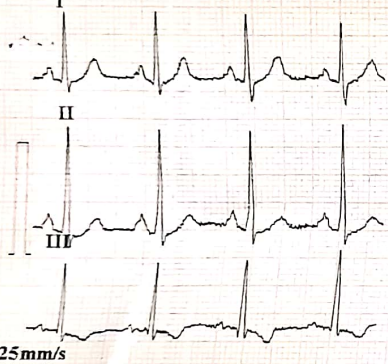
  
Sonologist.



20mm/mV 0.5-75Hz AC50

09-11-2024 13:12:55

BPL



ID : 241109-1312  
 Name :  
 Age : 33 yr  
 Sex : Male  
 BP : mmHg  
 Height : cm  
 Weight : kg  
 HR : 92 bpm  
 P Dur : 96 ms  
 PR int : 140 ms  
 QRS Dur : 90 ms  
 QT/QTc int : 310/384 ms  
 P/QRS/T axis : 42/66/0 °  
 RV5/SV1 amp : 1.007/0.531 mV  
 RV5+SV1 amp : 1.538 mV  
 RV6/SV2 amp : 0.913/1.154 mV

Minnesota Code: 9-4-1(V3)

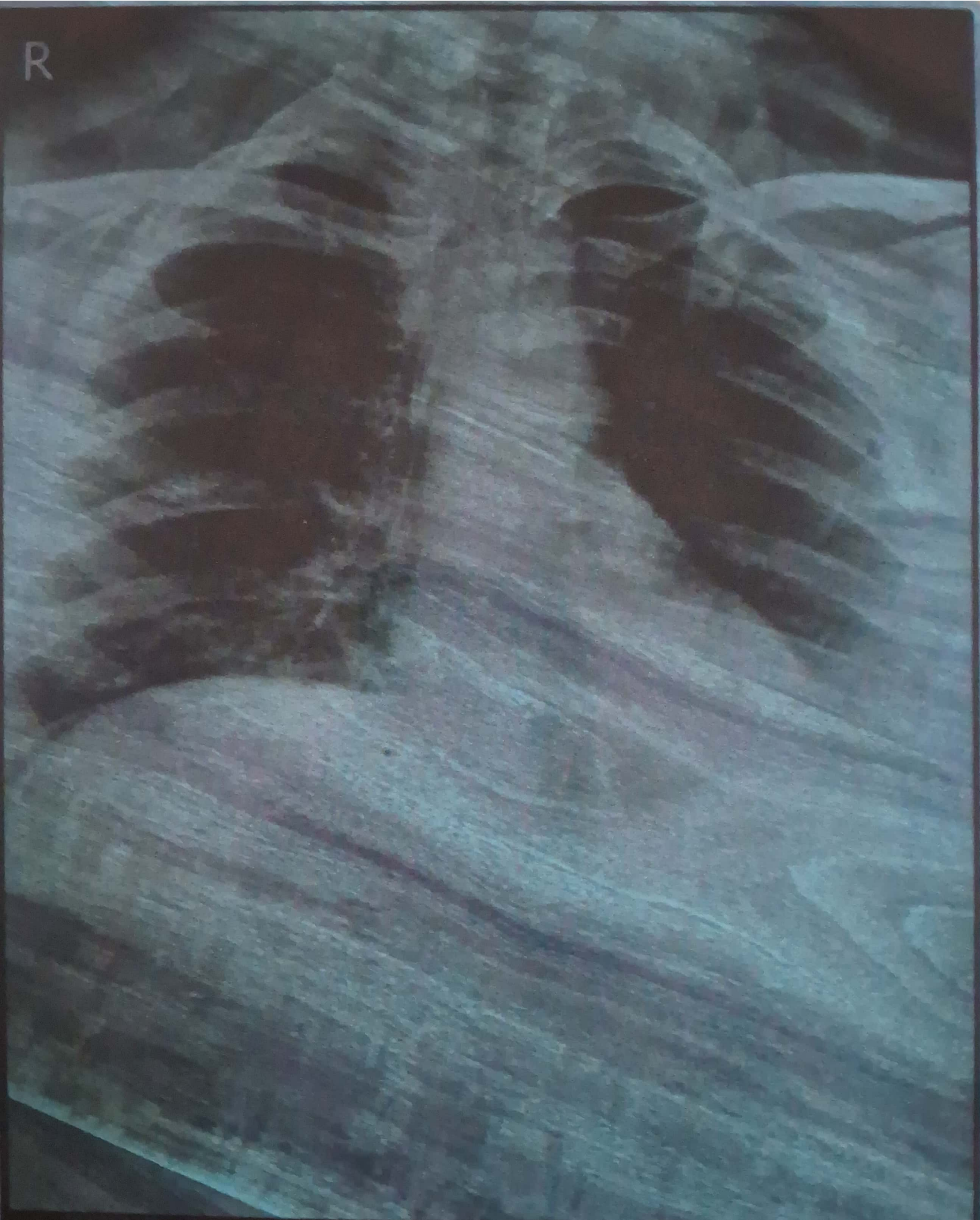
*Seibarath Adh*

Diagnosis Information:  
800: Sinus Rhythm  
\*\*\*Normal ECG\*\*\*

Report Confirmed by:

CARDIART

R





<u>Measurements</u>	<u>Normal Values</u>
Aorta 2.9	(2.0 – 3.7cm)
LV es 3.0	(2.2 – 4.0cm)
IVS ed 0.8	(0.6 – 1.1cm)
RVed	(0.7 – 2.6cm)
LVVd (ml)	
LVEF 60%	(54%-76%)

<u>Measurements</u>
LAes 3.4
LV ed 4.4
PW (LV) 1.1
RV Anterior wall
LVVs (ml)
IVS motion

<u>Normal values</u>
(1.9 – 4.0cm)
(3.7 – 5.6cm)
(0.6 – 1.1cm)
(upto 5 mm)
Normal/Flat/Paradoxical

**CHAMBERS:**

LV

Normal/Enlarged/Clear/Thrombus/Hypertrophy  
Contraction Normal/Reduced

Regional wall motion abnormality

Absent/Present

LA

Normal/Enlarged/Clear/Thrombus

RA

Normal/Enlarged/Clear/Thrombus

RV

Normal/Enlarged/Clear/Thrombus

PERICARDIUM

Normal/Thickening/Calcification/Effusion

**COMMENTS & SUMMARY**

All chambers are Normal in size  
Normal LV Systolic & Diastolic Function  
No RWMA/LVEF=60%  
No MR /AR / PR /TR  
Normal Pericardium

Dr. Anil Kr. Singh  
Cardiologist

