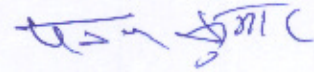
 बैंक ऑफ बड़ोदा  
Bank of Baroda

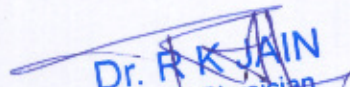
नाम पवन कुमार  
Name Pawan Kumar  
हस्ताक्षरी कूट सं. E.C. No. 080093



  
जारीकर्ता प्राधिकारी  
Issuing Authority

पवन कुमार  
धारक के हस्ताक्षर  
Signature of Holder



  
Dr. R. K. JAIN  
MBBS Physician  
RMC No. : 7039



# SSDBC SHYAM DIAGNOSTIC LLP

PARTICIPATING IN BIO-RAD "EQUAS" INTERNAL AND EXTERNAL QUALITY CONTROL PROGRAM (NABL CRITERIA)

Associated With **ENDOCRINE AND ALLERGY LABORATORY PVT. LTD.**

NABL ACCREDITED IN PROCESS



## General Physical Examination

Date of Examination: 9/11/2024

Name: PAWAN KUMAR Age: 42 DOB: 15/3/1982 Sex: M

Referred By: BANK OF BARODA

Photo ID: ID CARD ID #: 20095

Ht: 157 (cm)

Wt: 75 (Kg)

Chest (Expiration): 97 (cm)

Abdomen Circumference: 101 (cm)

Blood Pressure: 154/96 mm Hg PR: 72 / min RR: 17 / min Temp: Afebrile

BMI \_\_\_\_\_

with Glasses

Eye Examination: R/E } 6/6, N/G NCR.  
L/E } 6/6, N/G

Other: N/A

On examination he/she appears physically and mentally fit:  Yes / No

Signature of Examinee: [Signature] Name of Examinee: PAWAN KUMAR

**Dr. R K JAIN**

MBBS, Physician

Signature Medical Examiner: [Signature] Name Medical Examiner: Dr. R. K. Jain



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Auth. **ENDOCRINE AND ALLERGY LABORATORY PVT. LTD.**



## PATIENT TEST REPORT

Patient Name **Mr. PAWAN KUMAR**  
 Patient ID **1724660**  
 Gender / Age **Male 42 Yrs 7 Mon 28 Days**  
 Ref. Doctor **BANK OF BARODA**  
 Client Name **MEDIWHEEL ARCOFEMI HEALTHCARE**



Registered On **09/11/2024 10:19:02**  
 Collected On **09/11/2024 11:49:02**  
 Authorized On **09/11/2024 17:02:38**  
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 Barcode   
 LIS Number **1724660-01**

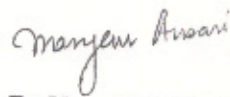
Page No: 1 of 13

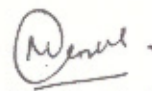
Test Name	Value	Unit	Biological Ref Interval
<b>FULL BODY HEALTH ANNUAL PLUS TMT</b>			
<b>COMPLETE BLOOD COUNT</b>			
<b>Haemoglobin (HB)</b>	15.7	g/dL	13.0 - 17.0
<b>Total Leucocyte Count(TLC)</b>	9.60	ths/ul	4.00 - 11.00
<b>Differential Leucocyte Count (DLC)</b>			
Neutrophil	40	%	45 - 75
Lymphocyte	55.00	%	20.00 - 45.00
Eosinophil	4.00	%	1.00 - 6.00
Monocyte	1.00	%	1.00 - 10.00
Basophil	00	%	00 - 01
<b>Total Red Blood Cell Count (RBC)</b>	5.11	x10 <sup>6</sup> /ul	4.50 - 5.50
<b>Hematocrit (HCT)</b>	46.9	%	36.0 - 50.0
<b>Mean Corp. Volume (MCV)</b>	91.8	fL	80.0 - 101.0
<b>Mean Corp. Hb (MCH)</b>	30.7	pg	27.0 - 32.0
<b>Mean Corp. Hb Con. (MCHC)</b>	33.5	g/dL	31.0 - 37.0
Total Platelet Count	30.00	x10 <sup>3</sup> /uL	150.00 - 450.00

### Interpretation

A complete blood count (CBC) is a blood test. It's used to look at overall health and find a wide range of conditions, including anemia, infection and leukemia. A complete blood count test measures the following: Red blood cells, which carry oxygen White blood cells, which fight infection Hemoglobin, the oxygen-carrying protein in red blood cells. Hematocrit, the amount of red blood cells in the blood Platelets, which help blood to clot Blood

  
**Technologist**

  
**Dr. Maryem Ansari**  
 M.D. Pathologist  
 Reg. No. 26558 / 43507

  
**Dr. Menka Kapil**  
 Consultant Pathologist  
 Reg No. 22180/009021

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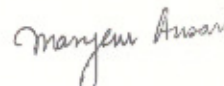


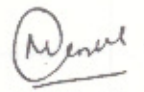
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Test Name	Value	Unit	Biological Ref Interval
ESR-ERYTHROCYTE SEDIMENTATION RATE	12	mm/1st hr.	00 - 20

  
Technologist

  
**Dr. Maryem Ansari**  
M.D. Pathologist  
Reg. No. 26558 / 43507

  
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Test Name	Value	Unit	Biological Ref Interval
<b>HAEMOGLOBIN GLYCOSYLATED BLOOD (HBA1C)</b>			
<b>HAEMOGLOBIN GLYCOSYLATED BLOOD</b> Method : HPLC	6.3	%	<4.5 - 6.5 % Non-Diabetic 6.50 - 7.00 Very Good Control 7.10 - 8.00 Adequate Control 8.10 - 9.00 Suboptimal Control 9.10 - 10.00 Diabetic Poor > 10.00 Very Poor Control
<b>AVERAGE BLOOD GULCOSE</b>	134		90 - 120 Very Good Control 121 - 150 Adequate Control 151 - 180 Suboptimal Control 181 - 210 Poor Control > 211 Very Poor Control

Methodology : Ion exchange H.P.L.using  
 Instrument :ARKRAY-HB A1C - HPLC ANALYZER

### Clinical Information:

Glycated hemoglobin testing is recommended for both (a) checking blood sugar control in people who might be pre-diabetic and (b) monitoring blood sugar control in patients with more elevated levels, termed diabetes mellitus. The American Diabetes Association guidelines suggest that the glycosylated hemoglobin test be performed at least two times a year in patients with diabetes that are meeting treatment goals (and that have stable glycemic control) and quarterly in patients with diabetes whose therapy has changed or that are not meeting glycemic goals.

Glycated hemoglobin measurement is not appropriate where there has been a change in diet or treatment within 6 weeks. Hence, people with recent blood loss, hemolytic anemia, or genetic differences in the hemoglobin molecule (hemoglobinopathy) such as sickle-cell disease and other conditions, as well as those that have donated blood recently, are not suitable for this test.

**Technologist**

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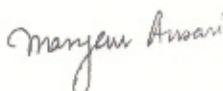


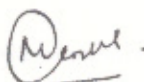
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Test Name	Value	Unit	Biological Ref Interval
BLOOD GROUPING A.B.O. AND Rh TYPE	'O' POSITIVE		A/B/O/AB Rh Negative/Positive

  
Technologist

  
**Dr Maryem Ansari**  
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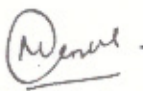
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Test Name	Value	Unit	Biological Ref Interval
BLOOD GLUCOSE (FASTING) Method : GOD-POD WITH PLASMA	173.5	mg/dl	70.0 - 110.0
BLOOD GLUCOSE (PP) Method : GOD-POD WITH PLASMA	311.5	mg/dl	80.0 - 140.0

  
Technologist

  
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Test Name	Value	Unit	Biological Ref Interval
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### THYROID PROFILE

**THYROID-TRIiodOTHYRONINE (T3)**

Method : Chemiluminescence

1.20

ng/dl

0.60 - 1.81

**THYROID - THYROXINE (T4)**

Method : Chemiluminescence

8.70

ug/dl

4.50 - 10.90

**TSH (ULTRA)**

Method : CHEMILUMINESCENCE WITH SERUM

SampleType (HARMONS)

14.65

mIU/L

(1-24 months) 0.87-6.15  
 (2-12 years) 0.67-4.16  
 (13-20 years) 0.48-4.17  
 Euthyroid Adults 0.55-4.78

#### Reference Range (T3)

Premature Infants 26-30 Weeks ,3-4 days

0.24 - 1.32 ng/ml

Full-Term Infants 1-3 days

0.89 - 4.05 ng/ml

1 Week

0.91 - 3.00 ng/ml

1- 11 Months

0.85 - 2.50 ng/ml

Prepubertal Children

1.19 - 2.18 ng/ml

#### Reference Ranges ( T4 ):

Premature Infants 26-30 weeks ,3-4 days

2.60 - 14.0 ug/dl

Full -Term Infants 1-3 days

8.20 - 19.9 ug/dl

1 weeks

6.0 - 15.9 ug/dl

1-11 Months

6.1 - 14.9 ug/dl

Prepubertal children 12 months-2yrs

6.8 - 13.5 ug/dl

prepubertal children 3-9 yrs

5.5 - 12.8 ug/dl

#### Reference Ranges (TSH)

Premature Infants 26-32 weeks ,3-4 Days

0.8 - 6.9 uIU/ml

Full Term Infants 4 Days

1.36 - 16 uIU/ml

Newborns : TSH surges within the first 15-60 Minutes of life reaching

peak levels between 25- 60 uIU/ml at about 30 minutes.

Values then decline rapidly and after one week are within the adult normal range.

1 - 11 Months

0.90 - 7.70 uIU/ml

Prepubertal children

0.60 - 5.50 uIU/ml

Primary malfunction of the thyroid gland may result in excessive(hyper) or low(hypo) release of T3 or T4. In addition, as TSH directly affect thyroid function, malfunction of the pituitary or the hypothalamus influences the thyroid gland activity. Disease in any portion of the thyroid-pituitary-hypothalamus system may influence the level of T3 and T4 in the blood, in Primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels may be low. In addition, In Euthyroid sick Syndrom, multiple alterations in serum thyroid function test findings have been recognized.

Technologist

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Test Name	Value	Unit	Biological Ref Interval
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### LIPID PROFILE

<b>CHOLESTEROL TOTAL</b> Method : CHOD -PAP with serum	179	mg/dl	Desirable level <200 Borderline 200-239 High >240 Children :- Desirable level <170 Borderline 170-199 High >199
<b>TRIGLYCERIDES</b> Method : GPO - Trinder with serum	132	mg/dl	Normal < : 150 Borderline line High: 150-199 Hypertriglycerdemic: 200-499 Very high :> 499
<b>CHOLESTEROL HDL</b> Method : PEG-CHOL with serum	44	mg/dl	30 - 70
<b>LDL CHOLESTROL</b> Method : Tech:Enzymatic with serum	109	mg/dl	80 - 130
<b>VLDL Cholesterol</b>	26	mg/dl	0 - 35
<b>TOTAL LIPID</b> Method : Calculated	622	mg/100 ml	400 - 1000
<b>Cholesterol Total / HDL Ratio</b>	4.07		0.00 - 4.90
<b>Cholesterol LDL / HDL Ratio</b>	2.48		0.00 - 3.50

#### Interpretation:


The National Cholesterol Education Program (NCEP) has set the following guidelines for lipids (total cholesterol, triglycerides, HDL, and LDL cholesterol) in adults ages 18 and up: (Units in : mg/dL)

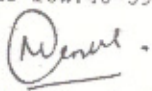
TOTAL CHOLESTEROL	TRIGLYCERIDES	HDL CHOLESTEROL	LDL CHOLESTEROL
Desirable:<200 Bdr-line high:200-239 High: > or =240	Normal:<150 Bdr-line high:150-199 High:200-499 Very high: > or =500	Low(removed HDL):<40 Normal:40-60 High: >60	Optimal: <100 Near Optimal:100-129 Bdr-line high:130-159 High: 160-189 Very high: > or =190

The National Cholesterol Education Program (NCEP) and National Health and Nutrition Examination Survey (NHANES) has set the following guidelines for lipids (total cholesterol, triglycerides, HDL, and LDL cholesterol) in children ages 2 - 17 : (Units in : mg/dL)

TOTAL CHOLESTEROL	TRIGLYCERIDES	HDL CHOLESTEROL	LDL CHOLESTEROL
Desirable: <170 Bdr-line high:170-199	Normal: <90 Bdr-line high:90-129	Low HDL: <40 Bdr-line low:40-59	Desirable: <110 Bdr-line high:110-129

  
**Technologist**

  
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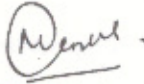
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Test Name	Value	Unit	Biological Ref Interval
High: > or =200	High: > or =130	Normal: > or =60	High: > or =130

  
Technologist

  
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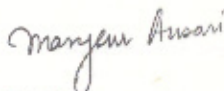


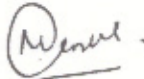
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Test Name	Value	Unit	Biological Ref Interval
<b>LIVER FUNCTION TEST (LFT) GGT</b>			
<b>Bilirubin-Total</b> Method : Diazo with serum	0.51	mg/dl	Adults 0.3-1.2 Cord < 2 0-1 day premature: <8.0 0-1 day full term: 1.4-8.7 1-2 days Premature 1-2 days Full term 3.4-11.5 3-5 days Premature < 16 3-5 days Full term 1.5-12
<b>Bilirubin-Direct</b> Method : Diazo with serum	0.12	mg/dl	Adults < 0.4
<b>Bilirubin-Indirect</b> Method : Calculated	0.39	mg/dl	0.12 - 1.00
<b>Aspartate Amino Transferase (SGOT)</b> Method : IFCC with PDP serum	203.9	U/L	5.0 - 37.0
<b>Alanine Amino Transferase (SGPT)</b> Method : IFCC with PDP serum	172.9	U/L	5.0 - 41.0

  
**Technologist**

  
**Dr. Maryem Ansari**  
M.D. Pathologist  
Reg. No. 26558 / 43507

  
**Dr. Menka Kapil**  
Consultant Pathologist  
Reg. No. 22180/009021

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# SSDBC SHYAM DIAGNOSTIC LLP

PARTICIPATING IN BIO-RAD "EQUAS" INTERNAL AND EXTERNAL QUALITY CONTROL PROGRAM (NABL CRITERIA)




Auth. **ENDOCRINE AND ALLERGY LABORATORY PVT. LTD.**



## PATIENT TEST REPORT

**Patient Name** Mr. PAWAN KUMAR  
**Patient ID** 1724660  
**Gender / Age** Male 42 Yrs 7 Mon 28 Days  
**Ref. Doctor** BANK OF BARODA  
**Client Name** MEDIWHEEL ARCOFEMI HEALTHCARE



**Registered On** 09/11/2024 10:19:02  
**Collected On** 09/11/2024 11:49:02  
**Authorized On** 09/11/2024 17:02:38  
**Printed On** 09/11/2024 17:02:58  
**Barcode**   
**LIS Number** 1724660-03

Page No: 10 of 13

Test Name	Value	Unit	Biological Ref Interval
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<b>GAMMA GT</b> Method : Glupa C with serum	41.00	U/L	
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Interpretation:-

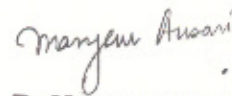
Normal Range :-

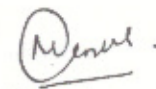
MAN:-	11-61 U/L
WOMEN:-	09-39 U/L

### CLINICAL SUMMARY

A gamma-glutamyl transferase (GGT) test measures the level of GGT in your blood and can help indicate liver damage or disease. Here are some things to consider when interpreting GGT test results

  
Technologist

  
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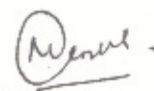
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Test Name	Value	Unit	Biological Ref Interval
<b>Alkaline Phosphatase</b> Method : AMP with serum	<b>688</b>	IU/L	Child ( 4 -20 yr ) :54 -369 Adult( 20 -60 yr ) :53 - 128
<b>Protien-Total</b> Method : Biuret with serum	6.88	gm/dl	Children (3 Years) - Adults 6.0 - 8.3 Children (1-3 Years) 5.5 - 7.5 Children (7 days-1 Years) 4.4 - 7.5 Infant (0-7 days) 4.6 - 7.0
<b>Albumin</b> Method : Tech:BCG with serum	4.78	gm/dl	0-4 days:2.8-4.4 4d-14yrs: 3.8-5.4 14y-18y : 3.2-4.5 20-60 yrs: 3.5-5.2 > 60 yrs: 3.2-4.6
<b>Globulin</b> Method : Calculation	2.10	gm/dl	2.0 to 3.50
<b>A/G Ratio</b> Method : Calculated	2.28		1.50 to 2.50

  
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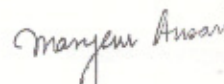


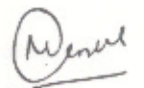
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Test Name	Value	Unit	Biological Ref Interval
<b>CREATININE</b> Method : Enzymatic with serum	0.95	mg/dl	Males (Adult) : 0.7 - 1.3 mg/dL Females (Adult) : 0.6 - 1.1 mg/dL Newborn : 0.3 - 1.0 mg/dL Infant : 0.2 - 0.4 mg/dL child : 0.3 - 0.7 mg/dL Adolescent : 0.5 - 1.0 mg/dL
<b>URIC ACID</b> Method : Uricase - Trinder with serum	4.12	mg/dl	Adults male: 3.5-7.2 Adults female: 2.6-6.0
<b>BLOOD UREA NITROGEN BUN</b>	7.41	mg/dl	Serum/Plasma - 6-20
<b>BUN / CREATININE Ratio</b>	4.07		0.00 - 4.90

  
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### PATIENT TEST REPORT

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Page No: 13 of 13

Test Name	Value	Unit	Biological Ref Interval
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URINE GLUCOSE (FASTING)

ABSANT

### URINE R/E ROUTINE EXAMINATION URINE

#### URE PHYSICAL EXAMINATION

COLOUR PALE YELLOW  
 APPEARANCE CLEAR  
 QUANTITY 10 ML

#### URE CHEMICAL EXAMINATION

SPECIFIC GRAVITY 1.010  
 PH 6.0  
 PROTEIN NIL  
 GLUCOSE NIL

#### URE MICROSCOPY EXAMINATION

PUS CELLS 1-2 /HPF  
 EPITHELIAL CELLS 2-3 /HPF  
 RBC'S NIL /HPF  
 CASTS ABSENT  
 CRYSTALS ABSENT  
 OTHERS NIL

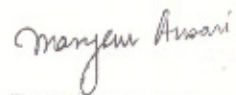
[Methodology :strip Method. Microscopy with urin]

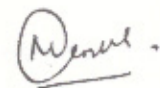
#### Interpretation of Urine Sugar:

Normal	< 100	mg/dL
Trace	100 - 250	mg/dL
1+	250 - 500	mg/dL
2+	500 - 1000	mg/dL
3+	1000 - 2000	mg/dL
4+	> 2000	mg/dL

\*\*\* End of Report \*\*\*

  
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Auth.  
**ENDOCRINE AND ALLERGY LABORATORY PVT. LTD.**



MR. PAWAN KUMAR	AGE/SEX: 42 Y/M
REGISTRATION DATE: 09/11/2024	REF. BY: BANK OF BARODA

## ULTRASOUND OF WHOLE ABDOMEN (ABDOMEN AND PELVIS)

**Liver is mildly enlarged in size (170 mm).** Echo-texture is normal. No focal space occupying lesion is seen within liver parenchyma. Intrahepatic biliary channels are not dilated. Portal vein diameter is normal.

**Gall bladder** is well distended. Wall is not thickened. No calculus or mass lesion is seen in gall bladder. Common bile duct is not dilated.

**Pancreas** is of normal size and contour. Echo-pattern is normal. No focal lesion is seen within pancreas.

**Spleen** is of normal size and shape. Echo-texture is normal. No focal lesion is seen.

**Kidneys** are normally sited and are of normal size and shape. Cortico-medullary echoes are normal. Collecting system does not show any calculus or dilatation.

**Right kidney** is measuring approx. 96.9 x 38.5 mm.

**Left kidney** is measuring approx. 108.6 x 42.7 mm.

**Urinary bladder** is partially distended.

**Prostate** is normal in size with normal echo-texture and outline. No focal lesion is seen.

No enlarged nodes are visualized. No retro-peritoneal lesion is identified.

No significant free fluid is seen in pelvis.

### IMPRESSION:

- **Mild hepatomegaly.**
- **Rest no significant abnormality is detected.**

  
Dr. S.C. GODARA  
MBBS, M.D.  
(RADIO-DIAGNOSIS)  
R.M.C. Reg. No. 14672





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MR. PAWAN KUMAR	AGE/SEX: 42 Y/M
REGISTRATION DATE: 09/11/2024	REF. BY: BANK OF BARODA

## X-RAY CHEST PA VIEW:

*Both lung fields are normal.*

*Trachea is in midline*

*Both the domes of diaphragm are normally placed.*

*Bony cage and soft tissue shadows are normal.*

*Both C.P. angles are normal.*

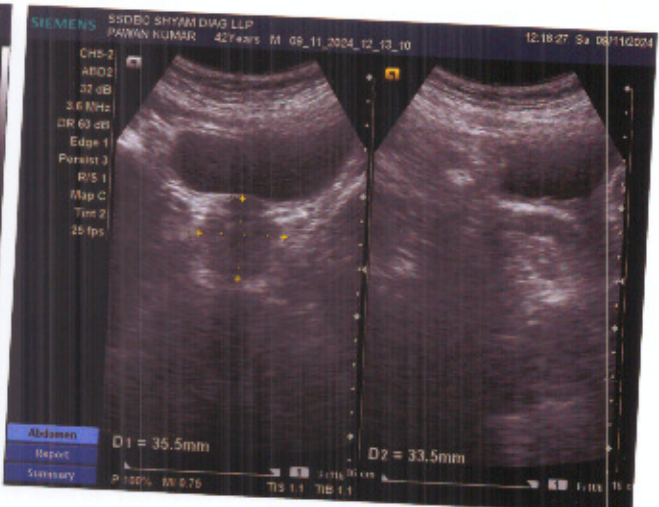
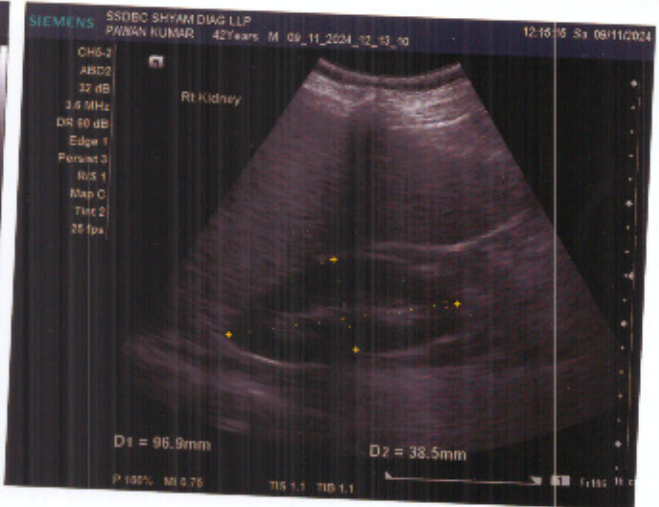
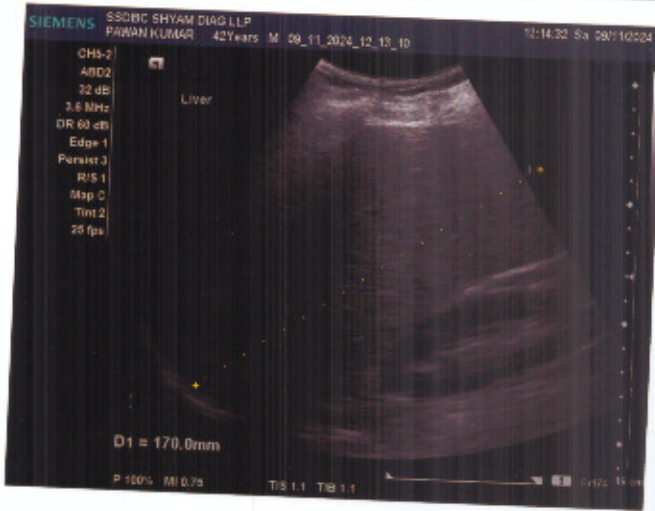
**IMPRESSION: No abnormality is detected.**

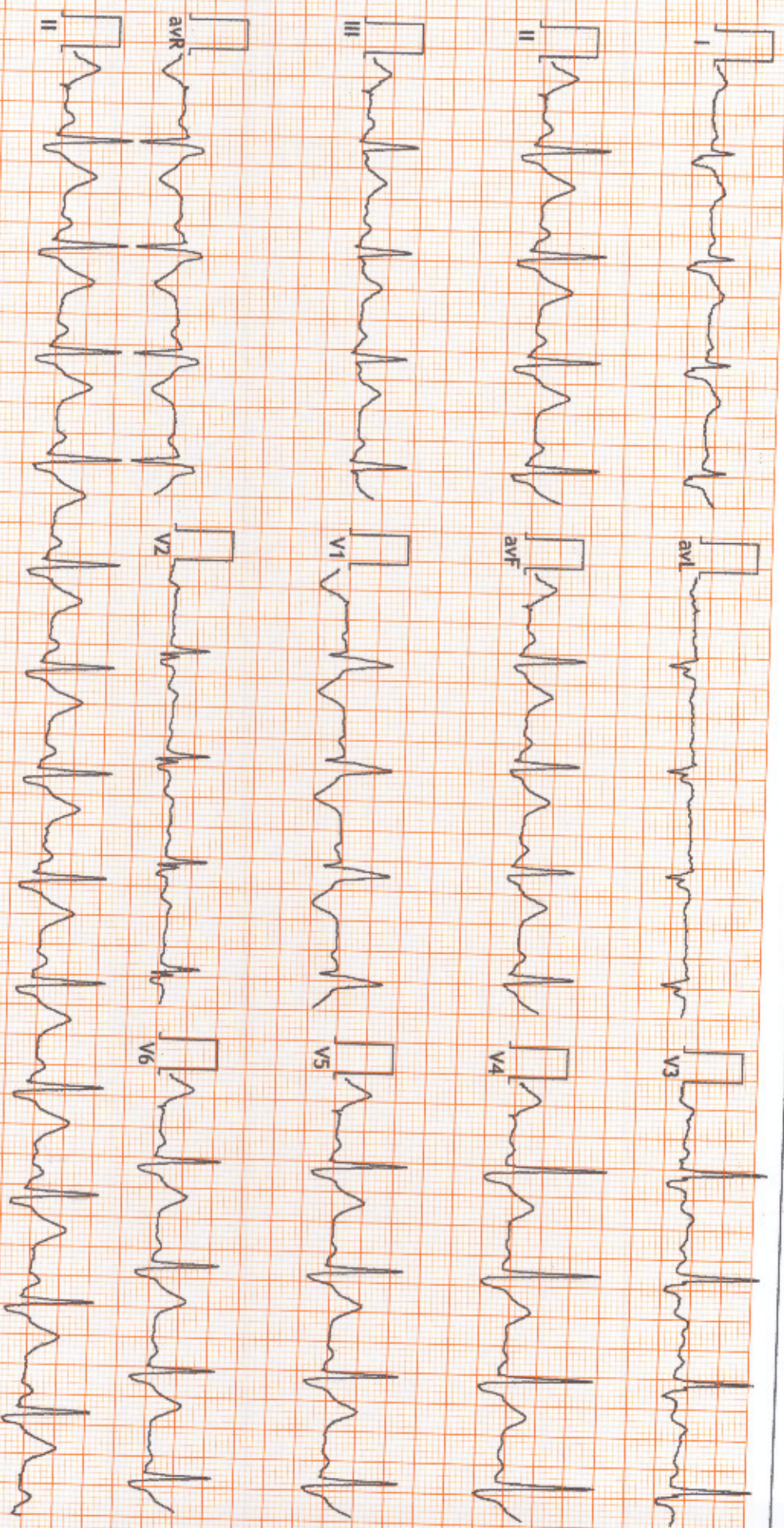
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(RADIO-DIAGNOSIS)  
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# SSDBC SHYAM DIAGNOSTIC LLP

D-6 BANI PARK JAIPUR

## Abdomen Report





**FINDINGS:** Abnormal ECG with Indication of Right Bundle Branch Block  
Vent Rate : 82 bpm; PR Interval : 150 ms; QRS Duration: 148 ms; QT/QTc Int : 414/487 ms  
P-QRS-T axts: 66 - 110 - 62 (Deg)  
**Comments :**

*Right Bundle Branch Block*

*Dr. Naresh Mohanaka*  
MBBS, OP CARDIOLOGY  
D. NARESH MOHANKA, COO, RISHI MOHAN SHYAM DIAGNOSTIC CENTRE