

ish  
ears

nitnaware  
Male

08-Mar-25 10:45:36 AM  
wockhardt hospitals

75 . Sinus rhythm.....normal P axis, V-rate 50- 99

152  
107  
384  
429

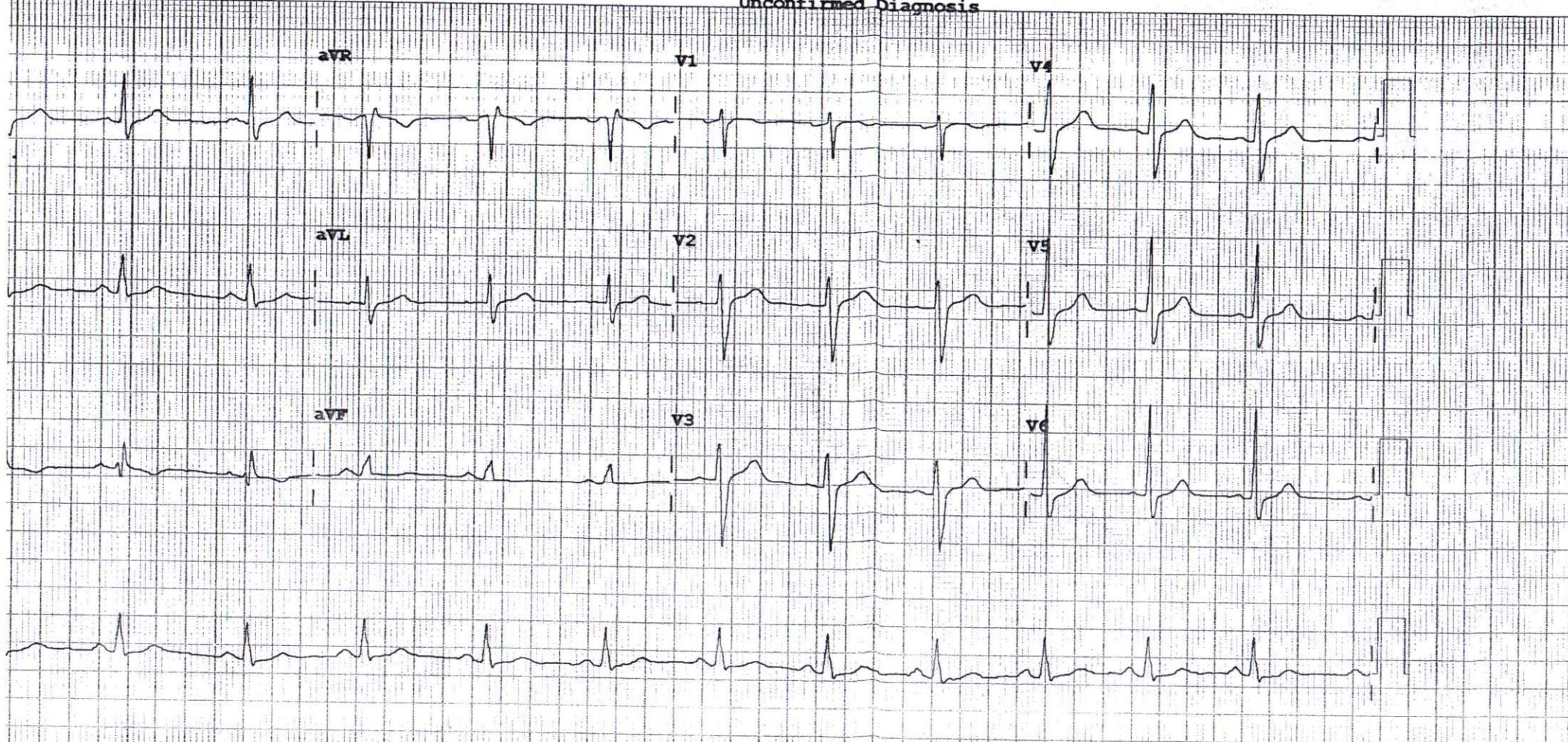
IS--

62  
62  
2

- NORMAL ECG -

Lead: Standard Placement

Unconfirmed Diagnosis



Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV



H-2008-0031  
NOV 25, 2021 JUNE 30, 2025  
SINCE : JULY 01, 2009

**2D ECHOCARDIOGRAPHY & DOPPLER REPORT**

Name : Mr. Ashish Nitnaware  
Done by : Dr. Dinesh Padole  
UHID NO : 371033  
Age / Sex : 41 yrs / Male  
Date : March 08, 2025  
OPD

**2D Echo :**

- CHAMBERS → Normal in size
- RWMA → No RWMA
- LVEF → 62 %
- VALVES → Valves are normal structurally
- SEPTAE → Intact
- PERICARDIUM → No pericardial effusion
- CLOTS/VEGETATIONS → Absent
- IVC → Normal

**DOPPLER**

E > A  
Flow across valves → Trivial tricuspid regurgitation

**CONCLUSION :**

- Good LV systolic function
- LVEF - 62 %
- No regional wall motion abnormality is present
- No LV diastolic dysfunction
- Trivial tricuspid regurgitation
- No pulmonary hypertension

**Dr. Dinesh Padole**  
MBBS, MD (Gen. Med.), DNB (Cardiology)  
Consultant - Interventional Cardiologist



EMERGENCY DEPARTMENT



ADVANCED

**WOCKHARDT HOSPITALS, NAGPUR**

1643, North Ambazari Road, Nagpur - 440 010. Tel : (0712) 6624444, 6624100  
Website : www.wockhardt-hospitals.com

**DEPARTMENT OF LABORATORY MEDICINE**

<b>Patient Name</b> :	MR. ASHISH NITNAWARE	<b>Bill No.</b> :	OCR3/25/0008537
<b>Age/Sex</b> :	42 Years/Male	<b>Sample Collection</b> :	08/03/2025 08:56 AM
<b>UHID</b> :	WHN2.0000371033	<b>Receiving Date Time</b> :	08/03/2025 08:56 AM
<b>Primary Consultant</b> :	DR. WOCKHARDT DOCTOR	<b>Report Date</b> :	08/03/2025 09:43 AM
<b>Order Date</b> :	08/03/2025 08:39 AM	<b>Approval Date Time</b> :	08/03/2025 09:47 AM
<b>Order No.</b> :	59090	<b>Specimen</b> :	Serum
<b>Visit Code</b> :	OP3.0111267	<b>Bed No.</b> :	


**HEMATOLOGY**

Final Report

<u>PARAMETER</u>	<u>METHOD</u>	<u>RESULT</u>	<u>UNIT</u>	<u>B.R.I</u>
<b>Complete Blood Count (With ESR)- EDTA Blood</b>				
Haemoglobin	SLS Method	15.5	g%	13 - 17
Haematocrit	RBC Pulse Height Detection	47.5	%	40 - 50
MCV	Calculated	85.6	fl	83-101
MCH	Calculated	27.9	pg	27-32
MCHC	Calculated	32.6	g/dl	32-35
RBC Count	DC Detection	5.55	Million/ul	4.5-5.5
RDW-CV	Calculated	14.1	%	12-14
WBC Total Count ( TLC )	Electrical Impedance	7740	Cells/cumm	4000 - 10000
Neutrophils		48	%	40-80
Lymphocytes		43	%	20-40
Monocytes		08	%	2-10
Eosinophils		01	%	0-6
Basophils		00	%	0-2
Platelet Count	Hydrodynamic Focussing DC	318	Thou/Cumm	150-450
PDW	Calculated	11.6	fl	9.0-17
P-LCR	Calculated	26.2	%	13.0-43.0
MPV	Calculated	10.0	fl	9.4-12.3
PCT	Calculated	0.32	%	0.17-0.35
Blood ESR	Westergren Method	02	mm/hr	0-15

--- END OF REPORT ---

PRAKASH SHAHU  
Verified By

  
**Dr. ALKA THOOL**  
 Consultant Pathologist  
 M.B.B.S, MD PATH

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## DEPARTMENT OF LABORATORY MEDICINE

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### BIOCHEMISTRY

Final Report

PARAMETER	METHOD	RESULT	UNIT	B.R.I
Serum Urea	Urease-GLDH	28.3	mg/dL	1-50
Blood Urea Nitrogen	Calculated	13.22	mg/dL	6-20
<b>Creatinine- Serum</b>				
Creatinine	Enzymatic colorimetric	1.10	mg/dL	0.67-1.17
<b>Plasma Glucose</b>				
Plasma Glucose - Fasting.	Enzymatic Hexokinase	101	mg/dL	74-109
Urine Sugar Fasting	Double Sequential Enzyme Reaction - GOD/ POD	Absent		
<b>Uric Acid- Serum</b>				
Uric Acid	Enzymatic colorimetric	5.9	mg/dL	3.4-7
<b>Lipid Profile</b>				
Cholesterol	Colorimetric - Cholesterol Oxidase	197.24	mg/dL	0-200
Triglycerides	Enzymatic colorimetric	134.2	mg/dL	0-150
HDL Cholesterol - Direct	Direct Homogenous Enzymatic Colorimetric	35.4		1. No Risk: >65 2. Moderate Risk: 45-65 3. High Risk: <45
LDL-Cholesterol -Direct	Direct Homogenous Enzymatic Colorimetric	135	mg/dL	0-100
VLDL Cholesterol	Calculated	26.84	mg/dL	10-35
Chol/HDL Ratio		5.57		1.Low Risk: 3.3-4.4 2.Average Risk: 4.4-7.1 3.Moderate Risk: 7.1-11.0 4.High Risk: >11.0
<b>Liver Function Test (L.F.T.)</b>				
Alkaline Phosphatase	Colorimetric IFCC	76.3	U/L	40-129
S.G.O.T (AST)	IFCC Without Pyridoxal 5 Phosphate	14	U/L	0-40
S.G.P.T (ALT)	IFCC Without Pyridoxal 5 Phosphate	14.4	U/L	0-50
Total Protein (Serum)	Colorimetric - Biuret Method	8.56	g/dL	6.4-8.3
Albumin, BCG	Colorimetric - Bromo-Cresol Green	4.99	g/dL	3.5-5.2
Globulin	Calculated	3.57	g/dL	1.9-3.5
Albumin/Globulin Ratio	Calculated	1.39		0.9-2

**DEPARTMENT OF LABORATORY MEDICINE**

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<b>Visit Code</b>	: OP3.0111267	<b>Bed No.</b>	:

**BIOCHEMISTRY**

Final Report

<u>PARAMETER</u>	<u>METHOD</u>	<u>RESULT</u>	<u>UNIT</u>	<u>B.R.I</u>
<b>Liver Function Test (L.F.T.)</b>				
Serum Total Bilirubin	Colorimetric Diazo	0.86	mg/dL	0-1.2
Serum Direct Bilirubin	Colorimetric Diazo	0.31	mg/dL	0-0.4
Serum Indirect Bilirubin	Calculated	0.55	mg/dL	0-1

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**PRAKASH SHAHU**  
Verified By

  
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 Consultant Pathologist  
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**BIOCHEMISTRY**

Final Report

<u>PARAMETER</u>	<u>METHOD</u>	<u>RESULT</u>	<u>UNIT</u>	<u>B.R.I</u>
<b>Glycosylated Haemoglobin- EDTA Blood</b>				
Glycosylated Haemoglobin	HPLC	6.1	%	Action required: 7.0-8.0% Good control: 6.5-7.0% Normal control: 4.8-6.4% Poor control: >8.0%
Estimated Mean glucose	Calculated	139.86	mg/dL	
--- END OF REPORT ---				

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### BIOCHEMISTRY

Final Report

PARAMETER	METHOD	RESULT	UNIT	B.R.I
<b>Plasma Glucose Post Prandial</b>				
Plasma Glucose Post Prandial	Enzymatic Hexokinase	98.62	mg/dl	70-140
Urine Sugar Post Prandial	Double Sequential Enzyme Reaction - GOD/ POD	NA		
--- END OF REPORT ---				

**PRAKASH SHAHU**

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**IMMUNOLOGY**

Final Report

<u>PARAMETER</u>	<u>METHOD</u>	<u>RESULT</u>	<u>UNIT</u>	<u>B.R.I</u>
<b>T3 T4 TSH- Serum</b>				
TOTAL T3	ECLIA	100.7	ng/dl	80-200
TOTAL T4	ECLIA	5.96	ug/dl	4.5-11.7
TSH	ECLIA	1.13	μIU/mL	0.27-4.2

-- END OF REPORT --

JAMILUDDIN SIDDIQUI  
Verified By

  
**Dr. ALKA THOOL**  
 Consultant Pathologist  
 M.B.B.S, MD PATH

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<b>Visit Code</b> : OP3.0111267	<b>Bed No.</b> :

**CLINICAL PATHOLOGY**

Final Report

<u>PARAMETER</u>	<u>METHOD</u>	<u>RESULT</u>	<u>UNIT</u>	<u>B.R.I</u>
<b>Urine Routine</b>				
Physical Examination				
Colour		Pale Yellow		
Appearance		Clear		
Urinalyser (Roche UriSys 1100)				
Specific Gravity		1.015		1.003 - 1.035
Reaction ( pH )		7		
Leukocytes, microscopy		neg	/hpf	
Erythrocytes, microscopy		neg	/hpf	
Nitrite, urinalyser		neg		
Protein, urinalyser		neg		
Glucose, urinalyzer		neg		
Ketone, urinalyser		neg		
Urobilinogen urinalyser		neg		
Billirubin uirnalyser		neg		

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**PRAKASH SHAHU**  
Verified By

  
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 M.B.B.S, MD PATH

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H-2009-0031  
NOV 25, 2021 JUNE 30, 2025  
SINCE : JULY 01, 2009

## DEPARTMENT OF RADIODIAGNOSTICS

<b>Patient Name</b>	: MR. ASHISH NITNAWARE	<b>Order Date</b>	: 08/03/2025 08:39 AM
<b>Age/Sex</b>	: 42 Yrs / Male	<b>Referred by</b>	:
<b>UHID</b>	: WHN2.0000371033	<b>Order No.</b>	: 23882
<b>Reporting Date</b>	: 08/03/2025 11:16 AM		
<b>Bill No.</b>	: OCR3/25/0008537		

### USG ABDOMEN WITH PELVIS :

Liver is normal in size and echotexture. No focal parenchymal lesion noted.  
Intrahepatic biliary tree and venous radicles are normal.  
Portal vein and CBD appear normal in course and calibre.

Gall bladder is well distended, appears normal.

Pancreas is normal.

Spleen is normal in size and echotexture.

Both kidneys are normal in size, position and slightly raised echotexture.  
Cortical thickness and corticomedullary differentiation are normal.

No hydronephrosis or calculi noted.

Right kidney measures 9.6 X 5.1 cm.

Left kidney measures 10.8 X 5.5 cm.

Urinary bladder is well distended, appears normal.

Prostate appears normal.

There is no evidence of ascites.

### Impression :

Grade I bilateral renal parenchymal disease - Suggested KFT correlation.  
Rest no significant abnormality noted on this study.

**DR. ADITYA MOHATA**  
M.D., FCTI  
EACVI (EURO CMR LEVEL III)  
FELLOW CARDIOVASCULAR & THORACIC IMAGING,  
RADIOLOGIST





H-2009-0031  
NOV 25, 2021 JUNE 30, 2025  
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**DEPARTMENT OF RADIODIAGNOSTICS**

**Patient Name** : MR. ASHISH NITNAWARE

**Age/Sex** : 42 Yrs / Male

**UHID** : WHN2.0000371033

**Reporting Date** : 08/03/2025 01:55 PM

**Bill No.** : OCR3/25/0008537

**Order Date** : 08/03/2025 08:39 AM

**Referred by** :

**Order No.** : 23882

**CHEST X-RAY PA :**

**Blunting of left costophrenic angle - effusion.**

Both lung fields are clear.

The right costophrenic angle and domes of diaphragm appear normal.

No hilar or mediastinal lesion seen.

Cardiac silhouette is within normal limits.

Visualised bony thorax and soft tissues appear normal.

**DR. ADITYA MOHATA**  
M.D., FCTI  
EACVI (Euro CMR level III)  
FELLOW CARDIOVASCULAR & THORACIC IMAGING,  
RADIOLOGIST

