

## TEST REPORT

<b>Reg. No.</b> : 410100082	<b>Reg. Date</b> : 04-Oct-2024 09:47	<b>Ref.No</b> :	<b>Approved On</b> : 04-Oct-2024 10:31
<b>Name</b> : Mr. DHRUV JADEJA			<b>Collected On</b> : 04-Oct-2024 09:52
<b>Age</b> : 33 Years	<b>Gender:</b> Male	<b>Pass. No. :</b>	<b>Dispatch At</b> :
<b>Ref. By</b> : APOLLO			<b>Tele No.</b> :
<b>Location</b> :			

Test	Results	Unit	Bio. Ref. Interval
<b>Complete Blood Count</b>			
Hemoglobin(SLS method)	L <b>12.7</b>	g/dL	13.0 - 17.0
RBC Count(Ele.Impedence)	H <b>6.43</b>	X 10 <sup>12</sup> /L	4.5 - 5.5
Hematocrit (calculated)	40.1	%	40 - 50
MCV (Calculated)	L <b>62.4</b>	fL	83 - 101
MCH (Calculated)	L <b>19.8</b>	pg	27 - 32
MCHC (Calculated)	31.7	g/dL	31.5 - 34.5
RDW-SD(calculated)	41.00	fL	36 - 46
Total WBC count	5600	/μL	4000 - 10000
<b>DIFFERENTIAL WBC COUNT</b>			
	[ % ]	EXPECTED VALUES	[ Abs ]      EXPECTED VALUES
Neutrophils	54	38 - 70	3024 /cmm 1800 - 7700
Lymphocytes	37	21 - 49	2072 /cmm 1000 - 3900
Eosinophils	03	0 - 7	168 /cmm 20 - 500
Monocytes	06	3 - 11	336 /cmm 200 - 800
Basophils	00	0 - 1	0 /cmm 0 - 100
NLR (Neutrophil: Lymphocyte Ratio)	1.46	Ratio	1.1 - 3.5
Platelet Count (Manual)	267000	/cmm	150000 - 410000
PCT	0.26	ng/mL	< 0.5
MPV	9.80	fL	6.5 - 12.0
<b>Peripheral Smear</b>			
RBCs	Microcytic Hypochromic RBCs are noted.		
WBCs	Normal morphology		
Platelets	Adequate on Smear		
Malarial Parasites	Not Detected		

This is an electronically authenticated report. "Please verify the authenticity of this report by scanning the QR code to ensure data integrity."

Test done from collected sample.




**Approved by: Dr. Keyur Patel**

## TEST REPORT

<b>Reg. No.</b> : 410100082	<b>Reg. Date</b> : 04-Oct-2024 09:47	<b>Ref.No</b> :	<b>Approved On</b> : 04-Oct-2024 10:31
<b>Name</b> : Mr. DHRUV JADEJA			<b>Collected On</b> : 04-Oct-2024 09:52
<b>Age</b> : 33 Years	<b>Gender</b> : Male	<b>Pass. No.</b> :	<b>Dispatch At</b> :
<b>Ref. By</b> : APOLLO			<b>Tele No.</b> :
<b>Location</b> :			

ESR	04	mm/hr	17-50 Yrs : <12, 51-60 Yrs : <19, 61-70 Yrs : <20, >70 Yrs: <30
-----	----	-------	--

This is an electronically authenticated report. "Please verify the authenticity of this report by scanning the QR code to ensure data integrity."

Test done from collected sample.




Page 2 of 14

**Approved by: Dr. Keyur Patel**

**Generated On** : 04-Oct-2024 15:37  
 For Appointment : 7567 000 750  
 www.conceptdiagnostics.com  
 conceptdiaghealthcare@gmail.com

M.B.B.S,D.C.P(Patho)  
 G- 22475  
**Approved On**: 04-Oct-2024 10:31  
 1st Floor, Sahajand Palace, Near Gopi  
 Restaurant, Anandnagar Cross Road,  
 Prahladnagar, Ahmedabad-15.

## TEST REPORT

<b>Reg. No.</b> :	410100082	<b>Reg. Date</b> :	04-Oct-2024 09:47	<b>Ref.No</b> :		<b>Approved On</b> :	04-Oct-2024 10:29
<b>Name</b> :	Mr. DHARUV JADEJA	<b>Collected On</b> :	04-Oct-2024 09:52	<b>Dispatch At</b> :		<b>Tele No.</b> :	
<b>Age</b> :	33 Years	<b>Gender:</b>	Male	<b>Pass. No. :</b>			
<b>Ref. By</b> :	APOLLO						
<b>Location</b> :							

Test Name	Results	Units	Bio. Ref. Interval
<b>BLOODGROUP &amp; RH</b>			
<u>Specimen: EDTA and Serum; Method: Gel card system</u>			
Blood Group "ABO" <i>Agglutination</i>	"O"		
Blood Group "Rh" <i>Agglutination</i>	Positive		
EDTA Whole Blood			

This is an electronically authenticated report. "Please verify the authenticity of this report by scanning the QR code to ensure data integrity."

Test done from collected sample.



**Approved by: Dr. Keyur Patel**

M.B.B.S,D.C.P(Patho)  
G- 22475

**Approved On: 04-Oct-2024 10:29**

Page 3 of 14

**Generated On :** 04-Oct-2024 15:37  
 For Appointment : 7567 000 750  
 www.conceptdiagnostics.com  
 conceptdiaghealthcare@gmail.com

1st Floor, Sahajand Palace, Near Gopi  
 Restaurant, Anandnagar Cross Road,  
 Prahladnagar, Ahmedabad-15.

## TEST REPORT

<b>Reg. No.</b> : 410100082	<b>Reg. Date</b> : 04-Oct-2024 09:47	<b>Ref.No</b> :	<b>Approved On</b> : 04-Oct-2024 11:02
<b>Name</b> : Mr. DHARUV JADEJA			<b>Collected On</b> : 04-Oct-2024 09:52
<b>Age</b> : 33 Years	<b>Gender</b> : Male	<b>Pass. No.</b> :	<b>Dispatch At</b> :
<b>Ref. By</b> : APOLLO			<b>Tele No.</b> :
<b>Location</b> :			

Test Name	Results	Units	Bio. Ref. Interval
-----------	---------	-------	--------------------

**FASTING PLASMA GLUCOSE**  
**Specimen: Fluoride plasma**

Fasting Plasma Glucose <i>Hexokinase</i>	90.39	mg/dL	Normal: <=99.0 Prediabetes: 100-125 Diabetes :>=126
---	-------	-------	---

**Flouride Plasma**

Criteria for the diagnosis of diabetes:

1. HbA1c >= 6.5 \*
- Or
2. Fasting plasma glucose >126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.
- Or
3. Two hour plasma glucose >= 200mg/dL during an oral glucose tolerance test by using a glucose load containing equivalent of 75 gm anhydrous glucose dissolved in water.
- Or
4. In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose >= 200 mg/dL. \*In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing. American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34:S11.

This is an electronically authenticated report. "Please verify the authenticity of this report by scanning the QR code to ensure data integrity."

Test done from collected sample.






**Approved by: Dr. Keyur Patel**

M.B.B.S,D.C.P(Patho)  
G- 22475

**Approved On: 04-Oct-2024 11:02**

Page 4 of 14

**Generated On** : 04-Oct-2024 15:37  
 For Appointment : 7567 000 750  
 www.conceptdiagnostics.com  
 conceptdiaghealthcare@gmail.com

 1st Floor, Sahajand Palace, Near Gopi Restaurant, Anandnagar Cross Road, Prahladnagar, Ahmedabad-15.

## TEST REPORT

Reg. No. : 410100082	Reg. Date : 04-Oct-2024 09:47	Ref.No. :	Approved On : 04-Oct-2024 15:37
Name : Mr. DHARUV JADEJA			Collected On : 04-Oct-2024 13:45
Age : 33 Years	Gender: Male	Pass. No. :	Dispatch At :
Ref. By : APOLLO			Tele No. :
Location :			

Test Name	Results	Units	Bio. Ref. Interval
<b>POST PRANDIAL PLASMA GLUCOSE</b>			
<b>Specimen: Fluoride plasma</b>			
Post Prandial Plasma Glucose <i>Hexokinase</i>	L 100.10	mg/dL	Normal: <=139 Prediabetes : 140-199 Diabetes: >=200
Flouride Plasma			

This is an electronically authenticated report. "Please verify the authenticity of this report by scanning the QR code to ensure data integrity."

Test done from collected sample.



Approved by: **Dr. Keyur Patel**

M.B.B.S,D.C.P(Patho)  
G- 22475

Generated On : 04-Oct-2024 15:37

For Appointment : 7567 000 750

www.conceptdiagnostics.com

conceptdiaghealthcare@gmail.com

Approved On: 04-Oct-2024 15:37  
 1st Floor, Sahajand Palace, Near Gopi  
 Restaurant, Anandnagar Cross Road,  
 Prahladnagar, Ahmedabad-15.

Page 5 of 14

### TEST REPORT

<b>Reg. No.</b> : 410100082	<b>Reg. Date</b> : 04-Oct-2024 09:47	<b>Ref.No</b> :	<b>Approved On</b> : 04-Oct-2024 11:02
<b>Name</b> : Mr. DHARV JADEJA			<b>Collected On</b> : 04-Oct-2024 09:52
<b>Age</b> : 33 Years	<b>Gender:</b> Male	<b>Pass. No. :</b>	<b>Dispatch At</b> :
<b>Ref. By</b> : APOLLO			<b>Tele No.</b> :
<b>Location</b> :			

Test Name	Results	Units	Bio. Ref. Interval
-----------	---------	-------	--------------------

GGT	29.2	U/L	10 - 71
-----	------	-----	---------

*L-Y-Glutamyl-3 Carboxy-4-Nitroanilide, Enzymetic Colorimetric*

Serum

**Uses:**

- Diagnosing and monitoring hepatobiliary disease.
- To ascertain whether the elevated ALP levels are due to skeletal disease or due to presence of hepatobiliary disease.
- A screening test for occult alcoholism.

**Increased in:**

- Intra hepatic biliary obstruction.
- Post hepatic biliary obstruction
- Alcoholic cirrhosis
- Drugs such as phenytoin and phenobarbital.
- Infectious hepatitis (modest elevation)
- Primary/ Secondary neoplasms of liver.

This is an electronically authenticated report. "Please verify the authenticity of this report by scanning the QR code to ensure data integrity."

Test done from collected sample.



Approved by: **Dr. Keyur Patel**

M.B.B.S,D.C.P(Patho)  
G- 22475

Approved On: 04-Oct-2024 11:02

Page 6 of 14

**Generated On** : 04-Oct-2024 15:37

For Appointment : 7567 000 750

www.conceptdiagnostics.com

conceptdiaghealthcare@gmail.com

1st Floor, Sahajand Palace, Near Gopi Restaurant, Anandnagar Cross Road, Prahladnagar, Ahmedabad-15.

## TEST REPORT

<b>Reg. No.</b> : 410100082	<b>Reg. Date</b> : 04-Oct-2024 09:47	<b>Ref.No</b> :	<b>Approved On</b> : 04-Oct-2024 10:39
<b>Name</b> : Mr. DHARUV JADEJA			<b>Collected On</b> : 04-Oct-2024 09:52
<b>Age</b> : 33 Years	<b>Gender</b> : Male	<b>Pass. No.</b> :	<b>Dispatch At</b> :
<b>Ref. By</b> : APOLLO			<b>Tele No.</b> :
<b>Location</b> :			

Test Name	Results	Units	Bio. Ref. Interval
<b>LIPID PROFILE</b>			
CHOLESTEROL	218.00	mg/dL	Desirable <=200 Borderline high risk 200 - 240 High Risk >240
Triglyceride <i>Enzymatic Colorimetric Method</i>	127.00	mg/dL	<150 : Normal, 150-199 : Border Line High, 200-499 : High, >=500 : Very High
Very Low Density Lipoprotein(VLDL) <i>Calculated</i>	25	mg/dL	0 - 30
Low-Density Lipoprotein (LDL) <i>Calculated Method</i>	H <b>150.01</b>	mg/dL	< 100 : Optimal, 100-129 : Near Optimal/above optimal, 130-159 : Borderline High, 160-189 : High, >=190 : Very High
High-Density Lipoprotein(HDL)	42.99	mg/dL	<40 >60
CHOL/HDL RATIO <i>Calculated</i>	H <b>5.07</b>		0.0 - 3.5
LDL/HDL RATIO <i>Calculated</i>	H <b>3.49</b>		1.0 - 3.4
TOTAL LIPID <i>Calculated</i>	650.00	mg/dL	400 - 1000
Serum			

As a routine test to determine if your cholesterol level is normal or falls into a borderline-, intermediate- or high-risk category.  
 To monitor your cholesterol level if you had abnormal results on a previous test or if you have other risk factors for heart disease.  
 To monitor your body's response to treatment, such as cholesterol medications or lifestyle changes.  
 To help diagnose other medical conditions, such as liver disease.  
 Note : biological reference intervals are according to the national cholesterol education program ( NCEP) guidelines.

This is an electronically authenticated report. "Please verify the authenticity of this report by scanning the QR code to ensure data integrity."

Test done from collected sample.



**Approved by: Dr. Keyur Patel**

M.B.B.S,D.C.P(Patho)  
G- 22475

**Approved On: 04-Oct-2024 10:39**

Page 7 of 14

**Generated On** : 04-Oct-2024 15:37  
 For Appointment : 7567 000 750  
 www.conceptdiagnostics.com  
 conceptdiaghealthcare@gmail.com

1st Floor, Sahajand Palace, Near Gopi Restaurant, Anandnagar Cross Road, Prahladnagar, Ahmedabad-15.

### TEST REPORT

<b>Reg. No.</b> : 410100082	<b>Reg. Date</b> : 04-Oct-2024 09:47	<b>Ref.No</b> :	<b>Approved On</b> : 04-Oct-2024 11:03
<b>Name</b> : Mr. DHRUV JADEJA			<b>Collected On</b> : 04-Oct-2024 09:52
<b>Age</b> : 33 Years	<b>Gender</b> : Male	<b>Pass. No.</b> :	<b>Dispatch At</b> :
<b>Ref. By</b> : APOLLO			<b>Tele No.</b> :
<b>Location</b> :			

Test Name	Results	Units	Bio. Ref. Interval
<b><u>LIVER FUNCTION TEST</u></b>			
TOTAL PROTEIN	7.31	g/dL	6.6 - 8.8
ALBUMIN	4.43	g/dL	3.5 - 5.2
GLOBULIN <i>Calculated</i>	2.88	g/dL	2.4 - 3.5
ALB/GLB <i>Calculated</i>	1.54		1.2 - 2.2
SGOT	13.20	U/L	<35
SGPT	19.30	U/L	<41
Alkaline Phosphatase <i>ENZYMATIC COLORIMETRIC IFCC, PNP, AMP BUFFER</i>	46.2	U/L	40 - 130
TOTAL BILIRUBIN	1.01	mg/dL	0.1 - 1.2
DIRECT BILIRUBIN	0.29	mg/dL	<0.2
INDIRECT BILIRUBIN <i>Calculated</i>	0.72	mg/dL	0.0 - 1.00
Serum			

This is an electronically authenticated report. "Please verify the authenticity of this report by scanning the QR code to ensure data integrity."

Test done from collected sample.



Approved by: **Dr. Keyur Patel**

M.B.B.S,D.C.P(Patho)  
G- 22475

Generated On : 04-Oct-2024 15:37

For Appointment : 7567 000 750

www.conceptdiagnostics.com

conceptdiaghealthcare@gmail.com

1st Floor, Sahajand Palace, Near Gopi Restaurant, Anandnagar Cross Road, Prahladnagar, Ahmedabad-15.

Approved On: 04-Oct-2024 11:03

Page 8 of 14



## TEST REPORT

<b>Reg. No.</b> : 410100082	<b>Reg. Date</b> : 04-Oct-2024 09:47	<b>Ref.No</b> :	<b>Approved On</b> : 04-Oct-2024 10:30
<b>Name</b> : Mr. DHARUV JADEJA			<b>Collected On</b> : 04-Oct-2024 09:52
<b>Age</b> : 33 Years	<b>Gender</b> : Male	<b>Pass. No.</b> :	<b>Dispatch At</b> :
<b>Ref. By</b> : APOLLO			<b>Tele No.</b> :
<b>Location</b> :			

Test Name	Results	Units	Bio. Ref. Interval
HEMOGLOBIN A1C (HBA1C)	5.60	%	Normal: <= 5.6 Prediabetes:5.7-6.4 Diabetes: >= 6.5 6-7 : Near Normal Glycemia, <7 : Goal ,7-8 : Good Control ,>8 : Action Suggested.
Mean Blood Glucose ( <i>Calculated</i> )	114	mg/dL	
EDTA Whole Blood			

### Criteria for the diagnosis of diabetes

- HbA1c  $\geq 6.5$  \* Or Fasting plasma glucose  $>126$  gm/dL. Fasting is defined as no caloric intake at least for 8 hrs. Or
- Two hour plasma glucose  $\geq 200$ mg/dL during an oral glucose tolerance test by using a glucose load containing equivalent of 75 gm anhydrous glucose dissolved in water. Or
- In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose  $\geq 200$  mg/dL. \*In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing.American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34:S11.

### Limitation of HbA1c

- In patients with Hb variants even analytically correct results do not reflect the same level of glycemic control that would be expected in patients with normal population.
  - Any cause of shortened erythrocyte survival or decreased mean erythrocyte survival or decreased mean erythrocyte age eg. hemolytic diseases, pregnancy, significant recent/chronic blood loss etc. will reduce exposure of RBC to glucose with consequent decrease in HbA1c values.
  - Glycated HbF is not detected by this assay and hence specimens containing high HbF ( $>10\%$ ) may result in lower HbA1c values than expected. Importance of HbA1C (Glycated Hb.) in Diabetes Mellitus
- HbA1C, also known as glycated hemoglobin, is the most important test for the assessment of long term blood glucose control( also called glycemic control).
  - HbA1C reflects mean glucose concentration over past 6-8 weeks and provides a much better indication of longterm glycemic control than blood glucose determination.
  - HbA1c is formed by non-enzymatic reaction between glucose and Hb. This reaction is irreversible and therefore remains unaffected by short term fluctuations in blood glucose levels.
  - Long term complications of diabetes such as retinopathy (Eye-complications), nephropathy (kidney-complications) and neuropathy (nerve complications), are potentially serious and can lead to blindness, kidney failure, etc.
  - Glycemic control monitored by HbA1c measurement using HPLC method (GOLD STANDARD ) is considered most important. (Ref. National Glycohaemoglobin Standardization Program - NGSP)
- Note : Biological reference intervals are according to American Diabetes Association (ADA) Guidelines.

This is an electronically authenticated report. "Please verify the authenticity of this report by scanning the QR code to ensure data integrity."

Test done from collected sample.



Approved by: Dr. Keyur Patel

M.B.B.S,D.C.P(Patho)  
G- 22475

Approved On: 04-Oct-2024 10:30

Page 9 of 14

**Generated On** : 04-Oct-2024 15:37  
 For Appointment : 7567 000 750  
[www.conceptdiagnostics.com](http://www.conceptdiagnostics.com)  
[conceptdiaghealthcare@gmail.com](mailto:conceptdiaghealthcare@gmail.com)

1st Floor, Sahajand Palace, Near Gopi  
 Restaurant, Anandnagar Cross Road,  
 Prahladnagar, Ahmedabad-15.

  
 SPECIALITY LABORATORY LTD.  
 PRAHLADNAGAR BRANCH

## TEST REPORT

<b>Reg. No.</b> : 410100082	<b>Reg. Date</b> : 04-Oct-2024 09:47	<b>Ref.No</b> :	<b>Approved On</b> : 04-Oct-2024 13:12
<b>Name</b> : Mr. DHRUV JADEJA			<b>Collected On</b> : 04-Oct-2024 09:52
<b>Age</b> : 33 Years	<b>Gender</b> : Male	<b>Pass. No.</b> :	<b>Dispatch At</b> :
<b>Ref. By</b> : APOLLO			<b>Tele No.</b> :
<b>Location</b> :			

Test Name	Results	Units	Bio. Ref. Interval
<b>THYROID FUNCTION TEST</b>			
T3 (triiodothyronine), Total <small>CMIA</small>	0.81	ng/mL	0.70 - 2.04
T4 (Thyroxine), Total <small>CMIA</small>	7.83	µg/dL	4.6 - 10.5
TSH (Thyroid stimulating hormone) <small>CMIA</small>	1.602	µIU/mL	0.35 - 4.94

**Sample Type:** Serum

**Comments:**

Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulate the thyroid gland to synthesize and secrete T3 and T4. Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

**TSH levels During Pregnancy :**

- First Trimester : 0.1 to 2.5 µIU/mL
- Second Trimester : 0.2 to 3.0 µIU/mL
- Third trimester : 0.3 to 3.0 µIU/mL

Reference : Carl A.Burtis,Edward R.Ashwood,David E.Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Edition. Philadelphia: WB Saunders,2012:2170

This is an electronically authenticated report. "Please verify the authenticity of this report by scanning the QR code to ensure data integrity."

Test done from collected sample.



Approved by: *Razvin*  
**Dr. Razvin Somani**

Page 10 of

**Generated On :** 04-Oct-2024 15:37  
 For Appointment : 7567 000 750  
 www.conceptdiagnostics.com  
 conceptdiaghealthcare@gmail.com

M.D. Pathology  
 Reg. No. :- G-51211  
 Approved On: 04-Oct-2024 13:12  
 1st Floor, Sahjand Palace, Near Gopi  
 Restaurant, Anandnagar Cross Road,  
 Prahladnagar, Ahmedabad-15.

## TEST REPORT

Reg. No. : 410100082	Reg. Date : 04-Oct-2024 09:47	Ref.No :	Approved On : 04-Oct-2024 12:37
Name : Mr. DHRUV JADEJA			Collected On : 04-Oct-2024 09:52
Age : 33 Years	Gender: Male	Pass. No. :	Dispatch At :
Ref. By : APOLLO			Tele No. :
Location :			

Test Name	Results	Units	Bio. Ref. Interval
<u>URINE ROUTINE EXAMINATION</u>			
<b><u>Physical Examination</u></b>			
Colour	Pale Yellow		
Clarity	Clear		
<b><u>CHEMICAL EXAMINATION (by strip test)</u></b>			
pH	6.0		4.6 - 8.0
Sp. Gravity	1.030		1.002 - 1.030
Protein	Absent		Absent
Glucose	Absent		Absent
Ketone	Absent		Absent
Bilirubin	Absent		Nil
Nitrite	Absent		Nil
Leucocytes	Nil		Nil
Blood	Nil		Absent
<b><u>MICROSCOPIC EXAMINATION</u></b>			
Leucocytes (Pus Cells)	1-2		0 - 5/hpf
Erythrocytes (RBC)	Nil		0 - 5/hpf
Casts	Nil	/hpf	Absent
Crystals	Nil		Absent
Epithelial Cells	Occasional		Nil
Monilia	Absent		Nil
T. Vaginalis	Absent		Nil
Bacteria	Absent		Absent
Urine			

This is an electronically authenticated report. "Please verify the authenticity of this report by scanning the QR code to ensure data integrity."

Test done from collected sample.



Approved by: **Dr. Keyur Patel**

M.B.B.S,D.C.P(Patho)  
G- 22475

Generated On : 04-Oct-2024 15:37

For Appointment : 7567 000 750

www.conceptdiagnostics.com

conceptdiaghealthcare@gmail.com

1st Floor, Sahajand Palace, Near Gopi  
Restaurant, Anandnagar Cross Road,  
Prahlanagar, Ahmedabad-15.

Approved On: 04-Oct-2024 12:37

Page 11 of

## TEST REPORT

<b>Reg. No.</b> : 410100082	<b>Reg. Date</b> : 04-Oct-2024 09:47	<b>Ref.No</b> :	<b>Approved On</b> : 04-Oct-2024 10:39
<b>Name</b> : Mr. DHARUV JADEJA			<b>Collected On</b> : 04-Oct-2024 09:52
<b>Age</b> : 33 Years	<b>Gender</b> : Male	<b>Pass. No.</b> :	<b>Dispatch At</b> :
<b>Ref. By</b> : APOLLO			<b>Tele No.</b> :
<b>Location</b> :			

Test Name	Results	Units	Bio. Ref. Interval
Creatinine	1.16	mg/dL	0.67 - 1.5

**Serum**

Creatinine is the most common test to assess kidney function. Creatinine levels are converted to reflect kidney function by factoring in age and gender to produce the eGFR (estimated Glomerular Filtration Rate). As the kidney function diminishes, the creatinine level increases; the eGFR will decrease. Creatinine is formed from the metabolism of creatine and phosphocreatine, both of which are principally found in muscle. Thus the amount of creatinine produced is, in large part, dependent upon the individual's muscle mass and tends not to fluctuate much from day-to-day. Creatinine is not protein bound and is freely filtered by glomeruli. All of the filtered creatinine is excreted in the urine.

This is an electronically authenticated report. "Please verify the authenticity of this report by scanning the QR code to ensure data integrity."

Test done from collected sample.




Page 12 of

**Approved by: Dr. Keyur Patel**

M.B.B.S,D.C.P(Patho)  
G- 22475

**Generated On** : 04-Oct-2024 15:37  
 For Appointment : 7567 000 750  
[www.conceptdiagnostics.com](http://www.conceptdiagnostics.com)  
[conceptdiaghealthcare@gmail.com](mailto:conceptdiaghealthcare@gmail.com)

1st Floor, Sahajand Palace, Near Gopi Restaurant, Anandnagar Cross Road, Prahladnagar, Ahmedabad-15.  
**Approved On**: 04-Oct-2024 10:39

## TEST REPORT

<b>Reg. No.</b> : 410100082	<b>Reg. Date</b> : 04-Oct-2024 09:47	<b>Ref.No</b> :	<b>Approved On</b> : 04-Oct-2024 10:39
<b>Name</b> : Mr. DHARUV JADEJA			<b>Collected On</b> : 04-Oct-2024 09:52
<b>Age</b> : 33 Years	<b>Gender</b> : Male	<b>Pass. No.</b> :	<b>Dispatch At</b> :
<b>Ref. By</b> : APOLLO			<b>Tele No.</b> :
<b>Location</b> :			

Test Name	Results	Units	Bio. Ref. Interval
Urea	35.8	mg/dL	17 - 43

**Serum**

Useful screening test for evaluation of kidney function. Urea is the final degradation product of protein and amino acid metabolism. In protein catabolism, the proteins are broken down to amino acids and deaminated. The ammonia formed in this process is synthesized to urea in the liver. This is the most important catabolic pathway for eliminating excess nitrogen in the human body. Increased blood urea nitrogen (BUN) may be due to prerenal causes (cardiac decompensation, water depletion due to decreased intake and excessive loss, increased protein catabolism, and high protein diet), renal causes (acute glomerulonephritis, chronic nephritis, polycystic kidney disease, nephrosclerosis, and tubular necrosis), and postrenal causes (eg, all types of obstruction of the urinary tract, such as stones, enlarged prostate gland, tumors). The determination of serum BUN currently is the most widely used screening test for the evaluation of kidney function. The test is frequently requested along with the serum creatinine test since simultaneous determination of these 2 compounds appears to aid in the differential diagnosis of prerenal, renal and postrenal hyperuremia.

This is an electronically authenticated report. "Please verify the authenticity of this report by scanning the QR code to ensure data integrity."

Test done from collected sample.



**Approved by: Dr. Keyur Patel**

M.B.B.S.,D.C.P(Patho)  
G- 22475

**Approved On:** 04-Oct-2024 10:39

Page 13 of

**Generated On** : 04-Oct-2024 15:37  
 For Appointment : 7567 000 750  
 www.conceptdiagnostics.com  
 conceptdiaghealthcare@gmail.com

1st Floor, Sahajand Palace, Near Gopi  
 Restaurant, Anandnagar Cross Road,  
 Prahladnagar, Ahmedabad-15.

## TEST REPORT

<b>Reg. No.</b> : 410100082	<b>Reg. Date</b> : 04-Oct-2024 09:47	<b>Ref.No</b> :	<b>Approved On</b> : 04-Oct-2024 11:03
<b>Name</b> : Mr. DHRUV JADEJA			<b>Collected On</b> : 04-Oct-2024 09:52
<b>Age</b> : 33 Years	<b>Gender</b> : Male	<b>Pass. No.</b> :	<b>Dispatch At</b> :
<b>Ref. By</b> : APOLLO			<b>Tele No.</b> :
<b>Location</b> :			

Test Name	Results	Units	Bio. Ref. Interval
<b><u>ELECTROLYTES</u></b>			
Sodium (Na+) <small>Method:ISE</small>	137.5	mmol/L	136 - 145
Potassium (K+) <small>Method:ISE</small>	4.0	mmol/L	3.5 - 5.1
Chloride(Cl-) <small>Method:ISE</small>	104.5	mmol/L	98 - 107
Serum			

**Comments**

The electrolyte panel is ordered to identify electrolyte, fluid, or pH imbalance. Electrolyte concentrations are evaluated to assist in investigating conditions that cause electrolyte imbalances such as dehydration, kidney disease, lung diseases, or heart conditions. Repeat testing of the electrolyte or its components may be used to monitor the patient's response to treatment of any condition that may be causing the electrolyte, fluid or pH imbalance.

----- End Of Report -----

This is an electronically authenticated report. "Please verify the authenticity of this report by scanning the QR code to ensure data integrity."

Test done from collected sample.






**Approved by: Dr. Keyur Patel**

M.B.B.S,D.C.P(Patho)  
G- 22475

**Approved On:** 04-Oct-2024 11:03

Page 14 of

**Generated On :** 04-Oct-2024 15:37  
 **For Appointment :** 7567 000 750  
 **www.conceptdiagnostics.com**  
 **conceptdiaghealthcare@gmail.com**

 **1st Floor, Sahajand Palace, Near Gopi Restaurant, Anandnagar Cross Road, Prahladnagar, Ahmedabad-15.**

**MER- MEDICAL EXAMINATION REPORT**

Date of Examination	04-10-2024		
NAME	DHRUV JADEJA		
AGE	34	Gender	MALE
HEIGHT(cm)	172	WEIGHT (kg)	72
B.P.	124/86/89		
ECG/TMT	NORMAL		
X RAY	NORMAL		
EYE CHECKUP	RIGHT EYE -6/6 VISION LEFT EYE -NO VISION BY BORN(BLINDNESS) COLOUR VISION IN RE-NORMAL		
USG	NORMAL		
Present Ailments	N/A		
Details of Past ailments (If Any)	N/A		
Comments / Advice : She /He is Physically Fit	PHYSICALLY FIT		

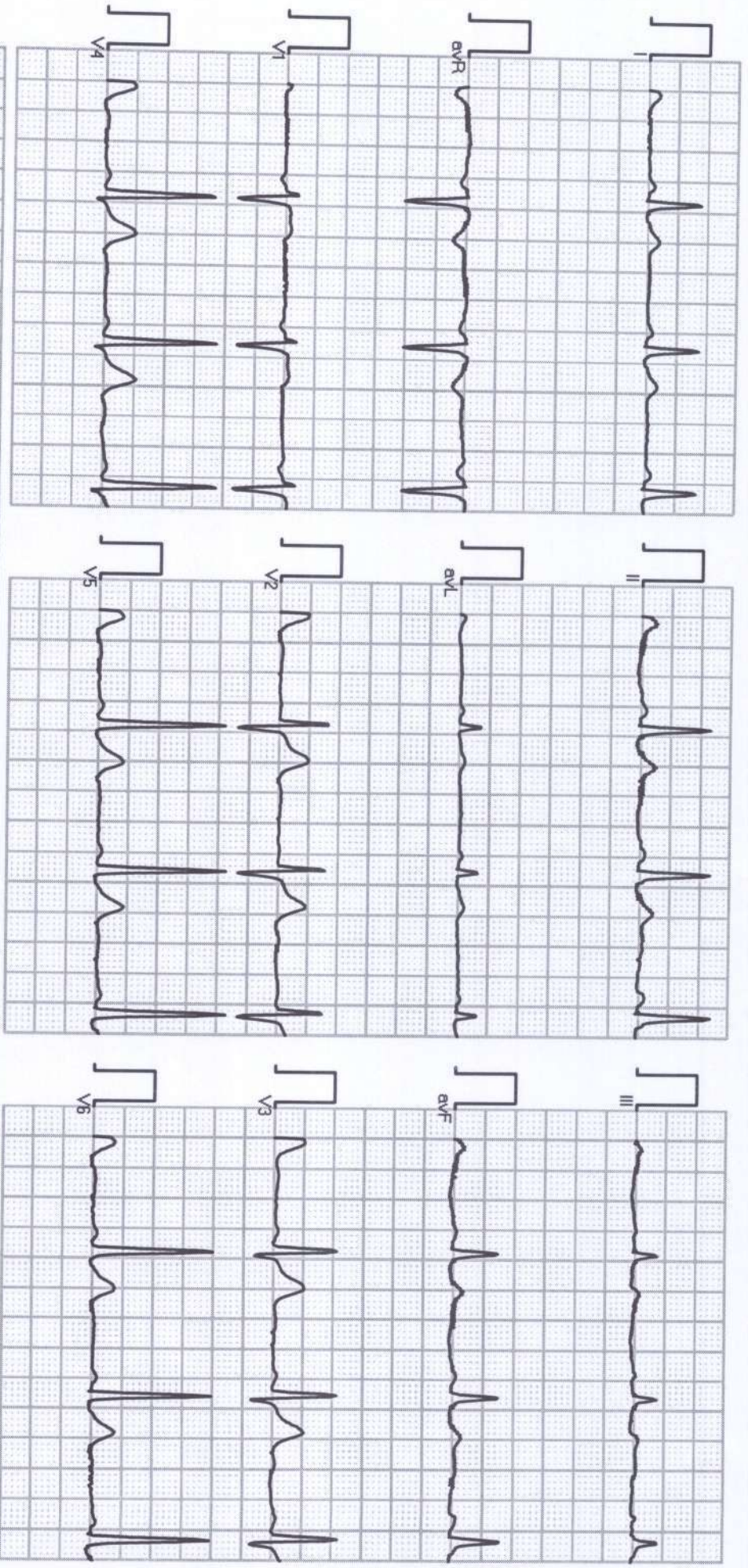
*Dr. Vipul Chavda*  
 MD ( Internal Medicine )  
 Reg.No. G- 18004

Signature with Stamp of Medical Examiner

**CONCEPT DIAGNOSTIC**

2932 / DHRUV JADEJA / 34 Yrs / M / 172Cms. / 72Kgs. / Smoker  
Heart Rate : 62 bpm / Tested On : 04-Oct-24 10:20:03 / HF 0.05 Hz - LF 35 Hz / Notch 50 Hz / Sn 1.00 Cm/mV / Sw 25 mm/s

**ECG**



Vent Rate : 62 bpm  
PR Interval : 138 ms  
QRS Duration: 84 ms  
QT/QTc Int : 382/386 ms  
P-QRS-T axis: 28.00° 46.00° 48.00°



Axis Normal sinus Rhythm.

DR. PARTH THAKKAR  
MD (Med.) DNB (Cardiology)  
Interventional cardiologist  
G - 32945





DARUV SANE SA

M/34

DENTAL.

- Normal Dentition
- Stains present
- Calculus present





NAME :	DHRUV JADEJA	AGE/SEX:	34 Y/M
REF. BY:	HEALTH CHECK UP	DATE :	04-Oct-2024

## X-RAY CHEST - PA VIEW

- Both lung fields are clear.
- No evidence of consolidation or Koch's lesion seen.
- Both CP angles are clear.
- Heart size is within normal limit.
- Both dome of diaphragm appear normal.
- Bony thorax under vision appears normal.

**Dr. Tejas Patel**  
Diplomate N. B.  
G-33659

**Dr. TEJAS PATEL**  
DNB RADIODIAGNOSIS



<b>NAME</b>	DHRUV JADEJA		
<b>AGE/ SEX</b>	34yrs / M	<b>DATE</b>	04/10/2024
<b>REF. BY</b>	HEALTH CHECKUP	<b>DONE BY</b>	Dr. Parth Thakkar

## 2D ECHO CARDIOGRAPHY & COLOR DOPPLER STUDY

### FINDINGS:-

- **Good LV systolic function, LVEF=55%.**
- **No RWMA at rest.**
- LV and LA are of normal size.
- RA & RV are of normal size.
- Normal LV Compliance.
- Intact IAS & IVS.
- All Valves Are structurally Normal.
- Trivial MR, No AR, No PR.
- Trivial TR, No PAH, RVSP-26mmHg.
- No clot or vegetation.
- No evidence of pericardial effusion.
- IVC is normal in size with preserved respiratory variation.



### MEASUREMENTS:-

LVIDD	43 (mm)	LA	26 (mm)
LVIDS	34 (mm)	AO	22 (mm)
LVEF	60%	AV cusp	
IVSD / LVPWD	10/10(mm)	EPSS	

### DOPPLER STUDY:-

Valve	Velocity (M/sec)	Max gradient (MmHg)	Mean gradient (Mm Hg)	Valve area Cm <sup>2</sup>
Aortic	1.07	5		
Mitral	E: 0.9 A: 0.7			
Pulmonary	0.72			
Tricuspid	0.98	20		

### CONCLUSION:-

- **Good LV systolic function, LVEF=55%.**
- **No RWMA at rest.**
- Normal LV Compliance.
- All Valves Are structurally Normal.
- Trivial MR, No AR, No PR.
- Trivial TR, No PAH, RVSP-26mmHg.
- IVC is normal in size with preserved respiratory variation.

**DR. PARTH THAKKAR**  
MD (Med.) DrNB (Cardiology)  
Interventional cardiologist  
G - 32946

**Dr. Parth Thakkar**  
MD (Med.), DrNB (Cardiology)  
Interventional Cardiologist



NAME :	DHRUV JADEJA	AGE/SEX:	34 Y/M
REF. BY:	HEALTH CHECK UP	DATE :	4-Oct-24

## USG ABDOMEN & PELVIS

**LIVER:** normal in size & shows increased echogenicity. No evidence of dilated IHBR. No evidence of focal or diffuse lesion. CBD & Portal vein normal.

**GALL-BLADDER:** normal, No evidence of Gall Bladder calculi.

**PANCREAS:** normal in size & echotexture, No e/o peri-pancreatic fluid collection.

**SPLEEN:** normal in size & shows normal echogenicity.

**KIDNEYS:** Both kidneys appear normal in size & echotexture.  
Right kidney measures 97x36 mm. Left kidney measures 106x42 mm.  
No evidence of calculus or hydronephrosis on either side.

**URINARY BLADDER:** appears normal and shows normal distension & normal wall thickness.  
No evidence of calculus or mass lesion.

**PROSTATE:** normal in size & echotexture.

### **USG WITH HIGH FREQUENCY SOFT TISSUE PROBE:**

Visualized bowel loops appears normal in caliber. No evidence of focal or diffuse wall thickening. No collection in RIF. No e/o Ascites. No e/o significant lymphadenopathy.

### IMPRESSION:

➤ Grade-I fatty liver.

Dr. TEJAS PATEL  
DNB RADIODIAGNOSIS

**Dr. Tejas Patel**  
Diplomate N. B.  
G-33659

