







Laboratory Report

Patient Name : MR SHYAMLAL LOHAR

Age/Gender : 33 Yrs/Male

Ref. Dr. : Dr. APOLLO CLINIC

: CMH OPD Center

CPL24/30817

Registration Date : 26/10/2024 12:17 PM Collection Date : 26/10/2024 12:19 PM

: 26/10/2024 02:06 PM Report Date



HAEMATOLOGY REPORT

Test Description	Result	Unit	Biological Reference Ranges
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BLOOD GROUP AND RH FACTOR

В **ABO** Type

POSITIVE(+VE) Rh Factor

BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
BILIRUBIN-SERUM			
Total Bilirubin-Serum	0.91	mg/dl	0.2 - 1.2
Direct Bilirubin-Serum	0.15	mg/dl	0.0 - 0.3
Indirect Bilirubin-Serum Method: DIAZO	8.0	mg/dl	0.2 - 0.8
BLOOD UREA	21.6	mg/dl	15 - 45
BUN	10	mg/ui	7 - 21

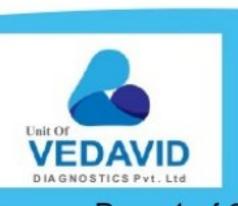
Method: Calculated Clinical Significance:

Urea Nitrogen (BUN) - Urea is the principle waste product of protein catabolism. BUN is most commonly measured in the diagnosis and treatment of certain renal and metabolic diseases. Increased BUN concentration may result from increased production of urea due to

- (1) diet or excessive destruction of cellular proteins as occurs in massive infection and fevers,
- reduced renal perfusion resulting from dehydration or heart failure,
- (3) nearly all types of kidney disease, and
- (4) mechanical obstruction to urine excretion such as is caused by stones, tumors, infection, or stricture. Decreased urea levels are less frequent and occur primarily in advanced liver disease and in overhydration.









YOUR HEALTH IS OUR PRIORITY

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Serum-Creatinine 0.4 - 1.500.74 mg/dL

Method: Enzymatic

Interpretation

The primary use of a creatinine test is to better understand how well the kidneys are working. A measurement of creatinine can be employed for screening, diagnosis, and/or monitoring of kidney problems.

SGPT (ALT)- Serum 35.6 5 - 45 unit/L

Method: IFCC

Clinical Significance

Alanine Aminotransferase (ALT) (REFL) - Alanine Aminotransferase (ALT) measurements are particularly useful in the diagnosis and management of certain liver diseases, e.g., viral hepatitis and cirrhosis. ALT activity in tissue is generally much lower than aspartate aminotransferase (AST) activity and is found in highest concentrations in the liver. Significant elevations of ALT occur only in diseases of the liver. ALT is often measured in conjunction with AST to determine whether the source of the AST is the liver or the heart. ALT is normally not elevated in cases of myocardial infarction, i.e., a normal ALT, in conjunction with an elevated AST, tends to suggest cardiac disease. However, slight elevations of ALT may occur if an infarct destroys a very large volume of heart muscle.

CLINICAL BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
Fasting Blood Sugar	91.0	mg/dl	Normal: 70-110
Method: GOD-POD			Impaired Fasting Glucose(IFG):
			100-125

Diabetes mellitus: >= 126

Note:- An individual may show higher fasting glucose level in comparison to post prandial glucose level due to following reasons. The glycaemic index and response to food consumed, Changes in body composition, Increased insulin response and sensitivity, Alimentary hypoglycemia, Renal glycosuria, Effect of oral hypoglycaemics & Insulin treatment.









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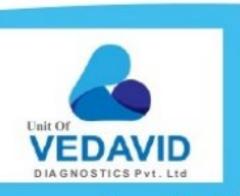
URINE EXAMINATION REPORT

Test Description	Result Unit		Biological Reference Ranges	
URINE ROUTINE				
General Examination				
Colour	Pale Yellow		Pale Yellow	
Transparency (Apperance)	Clear		Clear	
Deposit	Absent		Absent	
Reaction (pH)	Acidic		5.0-8.5	
Specific Gravity	1.025		-1.005-1.030	
Chemical Examination				
Urine Protein	Absent		Absent	
Urine Ketones (Acetone)	Absent		Absent	
Urine Glucose	Absent		Absent	
Bile pigments	Absent		Absent	
Bile salts	NIL		NIL	
Urobilinogen	Normal		Normal	
Nitrite	Negative		Negative	
Microscopic Examination				
RBC's	NIL	/hpf	NIL	
Leukocyte (Pus cells)	2-4	/hpf	0-5/hpf	
Epithelial Cells	1-2	/hpf	0-4/hpf	
Crystals	Absent		Absent	
Casts	Not Seen		Not Seen	
Amorphous deposits	Absent		Absent	
Bacteria	Not seen		Not seen	
Yeast Cells	Not seen		Not seen	

Note: 1. Chemical examination through Dipstick includes test methods as Protein (Protein Error Principle), Glucose (Glucose oxidase-Peroxidase), Ketone (Legals Test), Bilirubin (Azo- Diazo reaction), Urobilinogen (Diazonium ion Reaction) Nitrite (Griess Method). All abnormal results of chemical examination are confirmed by manual methods. 2. Pre-test conditions to be observed while submitting the sample- First void, mid-stream urine, collected in a clean, dry, sterile container is recommended for routine urine analysis, avoid contamination with any discharge from vaginal, urethra, perineum, as applicable, avoid prolonged transit time & undue exposure to sunlight. 3. During interpretation, points to be considered are Negative nitrite test does not exclude the urinary tract infections, Trace proteinuria can be seen with many physiological conditions like prolonged recumbency, exercise, high protein diet. False positive reactions for bile pigments, proteins, glucose and nitrites can be caused by peroxidase like activity by disinfectants, therapeutic dyes,











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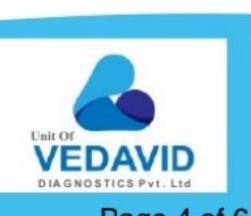


Test Description	Result	Unit	Biological Reference Ranges	
COMPLETE BLOOD COUNT				
Haemoglobin	10.2	gm/dL	12.0 - 16.0	
RBC Count	3.97	mil/cu.mm	4.00 - 5.50	
Hematocrit HCT	30.1	%	40.0 - 54.0	
Mean Corp Volume MCV	75.8	fL	80.0 - 100.0	
Mean Corp Hb MCH	25.7	pg	27.0 - 34.0	
Mean Corp Hb Conc MCHC	33.9	gm/dL	32.0 - 36.0	
Platelet Count	2.32	lac/cmm	1.50 - 4.50	
Total WBC Count /TLC	4.8	10^3/cu.mm	4.0 - 11.0	
DIFFERENTIAL LEUCOCYTE CO	UNT			
Neutrophils	52	%	40 - 70	
Lymphocytes	39	%	20 - 40	
Monocytes	07	%	02 - 10	
Eosinophils	02	%	01 - 06	
Basophils	00	%	00 - 01	
Absolute Differential Count				
Absolute Neutrophils Count	2.5	thou/mm3	2.00 - 7.00	
Absolute Lymphocyte Count	1.9	thou/mm3	1.00 - 3.00	
Absolute Monocytes Count	0.3	thou/mm3	0.20 - 1.00	
Absolute Eosinophils Count	0.1	thou/mm3	0.02 - 0.50	

EDTA Whole Blood - Tests done on Automated Three Part Cell Counter. (WBC, RBC Platelet count by impedance method, WBC differential by VCS technology other parameters calculated) All Abnormal Haemograms are reviewed confirmed microscopically.











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Test Description	Result	Unit	Biological Reference Ranges
ESR - ERYTHROCYTE	28	mm/hr	0 - 09
SEDIMENTATION RATE			

Method: Wintrobes

INTERPRETATION:

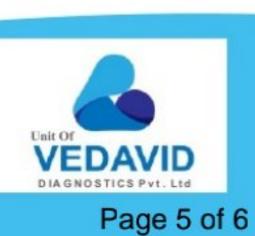
- 1. It indicates presence and intensity of an inflammatory process, never diagnostic of a specific disease. Changes are more significant than a single abnormal test.
- 2. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis, polymyalgia rheumatica.
- 3. It is also increased in pregnancy, multiple myeloma, menstruation, and hypothyroidism.

End of the report****

This report is not valid for medico legal aspects. This is just a professional opinion not the final. Kindly correlate clinically because of technical, lack of clinical information and physical findings, if any disparity noted please inform.









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BIOCHEMISTRY REPORT

Collection Date

Test Description	Result	Unit	Biological Reference Ranges	
Post-Prandial Blood Sugar	106.0	mg/dl	70 - 140	

Method: GOD-POD Interpretation:-Normal: 70-140

Impaired Glucose Tolerance:140-200

Diabetes mellitus: >= 200 (on more than one occassion)

End of the report****

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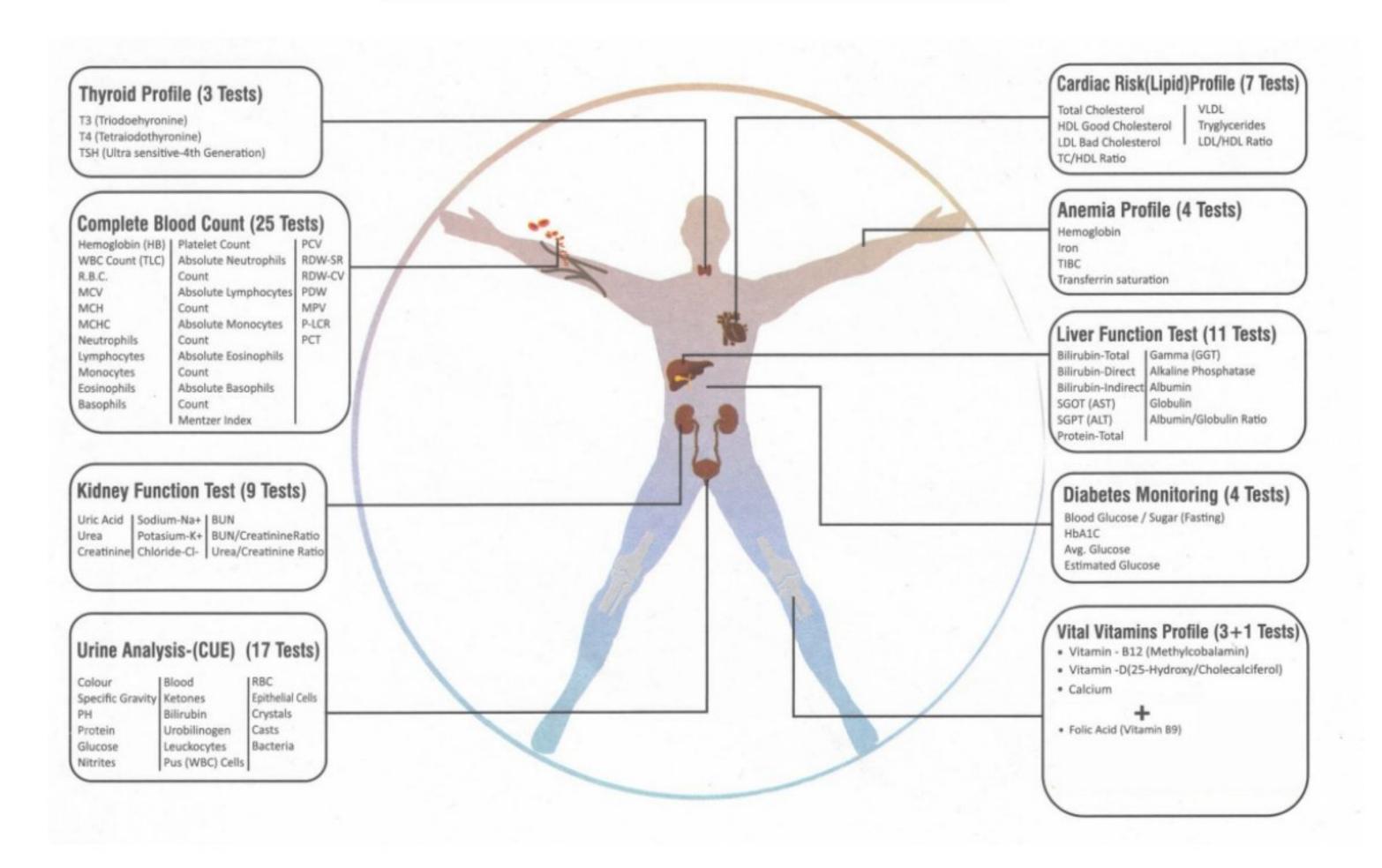








BODY CARE



CONDITIONS OF REPORTING

- Individual laboratory investigations should not be considered as conclusive and should be used along with other relevant clinical examinations to achieve the final diagnosis. Therefore these reported results are for the information of referring clinician only
- 2. The values of a laboratory investigation are dependent on the quality of the sample as well as the assay procedures used. Further all samples collected outside Citi Pathlabs labs / patient centers are required to be prepared, stored, labelled and brought as per the guidelines of Citi Pathlabs. Citi Pathlabs cannot be held liable for incorrect results of any samples which are not as per the guidelines issued
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- Citi Pathlabs confirms that all tests have been carried out with reasonable care, clinical safety & technical integrity A. However due to certain factors such as reagent inconsistency, machine breakdown etc. beyond its control which could affect the testing, it does not make any representation or give any warranty about the accuracy of the reported results B. The test results are to be used for help in diagnosing / treating medical diseases & not for forensic applications. Hence these results cannot be used for medico - legal purposes
- Partial representation of report is not allowed. 5.
- All dispute / claims concerning to this report are subject to Bhopal jurisdiction only.

For Any Enquiry

Citi Pathlabs Flat No. 004, Shivaay South City Complex, Phase-2, G-3 Gulmohar Colony, Bhopal (M.P.) citipathlabs@gmailcom 9454786340, 9407658222

CERTIFICATE OF MEDICAL FITNESS

Medically Fit	· · · · · · · · · · · · · · · · · · ·
Fit with restrictions/recommendat	ions
Though following restrictions hav not impediments to the job.	re been revealed, in my opinion, these are
1	
2	
However the employee should fol	# llow the advice/medication that has
been communicated to him/her.	. 1 89)
Review after	
Currently Unfit.	recommended
Review after	^ ^
Unfit	Dr. S.10 1 GUO''

This certificate is not meant for medico-legal purposes

MER- MEDICAL EXAMINATION REPORT

26-10-24			
SHYAMLAL LOHAR			
33 Gender M			
172 WEIGHT (kg) 64.3			
120/70			
WNL			
Normal			
Far Vision Ratio : NO Near Vision Ratio : NO			
No. Any present aithents. No. Any past aithents. He is physically fit.			
No. Any past ailmonts.			
He is physically fit.			

Reg. No. 1871

Signature with Stamp of Medical Examiner



MiG -215 216, Gautam Nager, Govindpura, Bhopal-462023 (M.P.)

Phone No.: 0755 - 4250134

Mobile No. : 7771008660,8319214664, 9303135719



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Empanelled with : State Government, M.P.Police, ESIC, HPCL, Punjab National Bank, Indian Bank Food Corporation of India, Ayushman Bharat



MULTI SPECIALITY HOSPITAL

NIG -215 216 Gautam Nagar, Govindpura, Bhopal-462023 (M.P.)

Phone No.: 6755 - 4250134 Mobile No.: 7771008660,8319214664, 9303135719



Patient Name :	MR. SHYAMLAL	Age /sex :	227/44
Referred .By:	INS		33Y/M
	The state of the s	Date	26.10.2024

X-RAY CHEST PA VIEW

- Bilateral Lungs Fields Appear Clear .
- Bilateral Hilar Shadows Appear Clear .
- Bilateral CP Angels Appear Clear .
- Both The Domes of Diaphragm Appear normal in Shape and position
- Visualized bony cage and soft tissue appear normal.

IMPRESSION

NO Significant Abnormality Seen.

Dr. DADHANIA PRINALBEN MD RADIODIAGNOSIS CONSULTANT RADIOLOGIST

Empanelled with: State Government, M.P.Police, ESIC, HPCL, Punjab National Bank, Indian Bank Food Corporation of India, Ayushman Bharat



