



DATE	10/09/2022	UHID	20284/22
PATIENT NAME	Mr. Ajay Kumar	AGE/SEX	39Yrs/M
REF BY	Dr. Karan Chaudhary	WARD-BED	OPD

**ULTRASOUND SCAN OF UPPER ABDOMEN**

- Liver is normal in size and shows grade-I fatty infiltration. No focal parenchymal lesion. IHBR are not dilated.
- Gall Bladder is well distended, lumen anechoic, and wall thickness is normal. No calculi or mass lesion is seen.
- CBD Appears normal.
- Pancreas is normal in size and echotexture. No peripancreatic fluid collections.
- Spleen is normal in size and echotexture. No focal lesions. Splenic vein appears normal.
- Both Kidneys show normal echotexture and outline. Cortico-medullary differentiation well maintained. Suspicious echogenic foci are noted in bilateral kidney ? concretion.

Note:- Less than 5mm calculi are not well appreciated on USG alone, and further NCCT is advised if clinically indicated

For clinical correlation & evaluation.

**DR. ISHAN GOEL**  
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**Patient Name:** Mr. AJAY KUMAR  
Age / Gender : 39 Years 0 Months 0Days / Male  
Referred By : Dr. KARAN CHAUDHARY  
**Req.No** : 2130940  
**Patient Type** : OPD

UHID : 20284  
IPNO :  
Registered : 10/09/2022/ 10.30 AM  
Reported on : 10/09/2022/ 12.55 PM

**HAEMATOLOGY**  
**COMPLETE HAEMOGRAM**

TEST NAME	RESULT	UNITS	BIOLOGICAL REFERENCE INTERVAL
Haemoglobin	16.0	gms/dL	13.0 - 17.0
Total Leucocyte Count	5500		4000 - 10000
<b>DIFFERENTIAL COUNT</b>			
Neutrophils.	64	%	50.0 - 80.0
Lymphocytes.	27	%	25.0 - 50.0
Monocytes.	04	%	02 - 10.0
Eosinophils.	05	%	0.0 - 5.0
Basophils.	00	%	0.0 - 01
E.S.R..	<b>10</b>	mm/hr	
Platelet Count	1.60	Lacs/cub.mm	1.50 - 4.50
Red Blood Cell Count	5.4	millions/cmm	4.0 - 6.0
Packed Cell Volume	51.3	%	40.0 - 54.0
Mean Corpuscular Volume	94.5	fL	83 - 101
Mean Corpuscular Haemoglobin	29.5	Picogrammes	27.0 - 32.0
Mean Corpuscular Hb Conc	<b>31.2</b>	%	32 - 36
Mpv	<b>13.2</b>	fl	7.8 - 11.0
Rdw	12.4	%	11.5 - 14.0

**Method:** Method : Aperture Sensor System & Focussed flow impedance.

\*\*Performed on fully automatically Counter Merilyzer CELQUANT 5 / External QC By AIIMC, Delhi.

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

Please Correlate With Clinical Findings If Necessary Discuss  
\* This is an Electronically Authenticated Report \*

*Covid 19*  
Lab Technician

Dr. Seema kazmi  
MD (Microbiology)

*Sol*  
Dr. Sonali  
MBBS MD (Pathology)

(This is only professional opinion and not the diagnosis, Please correlate clinically)

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**BIOCHEMISTRY**  
**LIPID PROFILE (TOTAL CHOLESTEROL LDL HDL TRIGLYCERIDES)**

TEST NAME	RESULT	UNITS	BIOLOGICAL REFERENCE INTERVAL
<b>LIPID PROFILE</b>			
SERUM CHOLESTROL	155	mg/dl	0 - 200
Serum Triglycerides	131	mg/dl	Up to 150
HDL Cholesterol	45	mg/dl	40 - 60
LDL Cholesterol	113.44	mg/dl	Optimal <100, Above Opt. 100-129 -high 160-189
Ldl Cholesterol/Hdl Ratio	2.52		Desirable Level : 0.5 - 3.0 Borderline Risk : 3.0 - 6.0 High Risk : > 6.0
Total Cholesterol/Hdl Ratio	3.44		Low Risk : 3.3 - 4.4 Average Risk : 4.5 - 7.1 Moderate Risk : 7.2 - 11.0 High Risk : > 11.0
VLDL Cholesterol	26.2	mg/dL	*Less than 30

\*Automated Direct HDL And LDL Estimation.

\*Results of these tests should always be interpreted in conjunction with patients medical history, clinical presentation and other findings.

\*Performed on fully Automated Merilyzer AutoQuant 400 i BioChemistry Analyser

\*External Quality Control by Biorad Laboratory.

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

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## CLINICAL PATHOLOGY

### VDRL

### BIOLOGICAL REFERENCE INTERVAL

TEST NAME	RESULT	UNITS	BIOLOGICAL REFERENCE INTERVAL
VDRL(RPR TEST)	Non-Reactive		
LOT NO	R674077		
KIT USED	Tulip diagnostics		

Note: In absence of supporting clinical or epidemiological evidence reactive sample must be confirmed with specific treponemal test .  
 Primary Syphilis: Reactive 3-5 weeks After infection .  
 Secondary Syphilis : Reactive.  
 Latent Syphilis : non-reactive .  
 Late Syphilis :non-reactive .  
 With treatment : primary : test becomes non-reactive after 6 months . secondary : test becomes non -reactive after 12-18 months .

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

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